IDS Advisory Council March 10, 2014 11:00am – 1pm Community and Provider Services

Meeting Facilitation: Cary Moller Minutes: Tanya Shackelford

	Tim Murphy - BRS	X	Debby Davis - Options	Guests:
	Marcus Berglund - CCS		Janice Veenhuizen - VMH	Teresa Warnock - PhTech
X	Rod Calkins – Marion HD	X	Jackie Haddon	
X	Scott Richards – Marion HD	X	Phil Blea - CBH	
X	Tim Markwell – NPC		Dawn Cottrell – Caps	
X	Terry Dethrow - NPC	X	Dwight Bowles - Caps	
X	Paul Logan - NWHS		Christina McCollum - Caps	
X	Steve Allen - Options	X	Janette Cotton - Caps	

Agenda	Document	Time	Intro	Discussion/Decision
Review Minutes	N/A		CAPS	
Announcements PhTech Incentives Fee Schedule MOTS		11a-11:20	All Teresa	 Web service & Payspan -Electronic funds transfer & remittance advice. Turnaround and payments should be quicker. Payspan will be creating the checks for those not participating in the electronic transfer. Web services transfer will take place over the next year and should make CIM faster. Incentive payments anticipated to be issued mid March MOTS is replacing CPMS, requirement to begin reporting on new grant awards from AMH. Fee Schedule Finalized – E&M Codes will be paid at DMAP and all other codes at IDS 2013 rates
Agency Capacity Impact of New Eligibles Review of capacity pilot	Handouts	11:20-Noon	Cary	Phone calls for intake have dramatically increased at all agencies. Impact on staffing significant. Strategies discussed for responding to increased demand. Goal remains at 95% for intake appointments to meet contractual obligations. System closed doors to new appointments this week. The implementation of the Google calendar seems useful, adjusted for 48 hr appts to increase utilization. In 2013, at height of service, there were 5500

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Lunch		Noon		members; today 4600 members enrolled. Enrollment represents Marion County members.
PCP - Clinical Protocol	Handout	12:15- 12:45	All	Coordination of care with PCP and Mental Health providers conversation regarding intake, communication of treatment and sharing of information for continuity of care when referring members back to PCP's. Discussed importance of language and care coordination with PCP's; who does what and who is accountable. Discussion around MVBCN PCP Guidelines and recommended changes to consider current context of integration. Group felt MVBCN documentation was too specific and would like documents written in more general terms to consider needs on an individual basis as this is a critical point of interface across the entire healthcare delivery system. Will offer feedback to MVBCN
Committee - Reports • WVCH • Clinical Sups • Intake Coordinators • Data Managers		12:45-1:00p	All	WVCH looking for Executive Director or CEO possibly. Talk to board for strategy going forward. Clinical Sups – working on Outcome Measures.

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Date	Action Items			
Date	Edit – PCP guidelines & provide feedback to MVBCN.			
	Edit 1 of galdelines & provide recoder to 141 v Botv.			

Next IDS Advisory Meeting: April 14, 2014