

IDS Advisory Committee
Meeting Minutes
January 14, 2013

Present:

Cary Moller, CAPS
Christina McCollum, CAPS
Debby Davis, Options
Donna Waller, ESCTC
Dwight Bowles, CAPS
Janice Veenhuizen, VMH
Kathleen Boyle, VMH
Marcus Berglund, CCS

Paul Logan, NWHHS
Rod Calkins, MCHD
Terry Dethrow, NPC
Tim Markwell, NPC
Tim Murphy, BRS
Scott Richards, MCHD
Steve Allan, Options
Sue Hunter, ESCTC

Absent: Sandy Stewart, MCHD

Guest: Phil Blea, CBH

I. Announcements and Introductions

- **Enrollment Issues – OHA member phone # 1-855-226-6170**
 - Auto assignment for YCCO in Woodburn is a concern. Many more members than anticipated, in Woodburn, have been enrolled with YCCO, even where primary care has been provided by Marion Providers. WVCH and YCCO are working to resolve.
 - This number is to support members in calling to make a change in their plan
 - Reassignment needs to be based on physical address not their mailing address
- **Rollover**
 - Having some trouble with the termed authorizations
 - PhTech is aware the issue is time sensitive
 - Data managers have been able to enter new authorizations and not be affected by the rollover
- **Incentives Meetings**
 - Next meeting will be January 28th from 8:30-9:30
 - Proposed meetings will be the 1st and 2nd Mondays in February from 11-1

- During the January 28th meeting it was decided that meetings will be held on the 2nd and 4th Mondays through June 2013

II. Review of Minutes

- Approved with restructured language about discussing DMAP Rates

III. Rate Change and System Development - Proposal

- Need to evaluate and adjust the rate structure before we discuss incentives and bonuses
- Handout is to help with the rate reduction discussion
- Current DMAP plus the 20%
 - Set aside 10% for performance measures
 - Cary is requesting feedback about if this will work.
 - Dwight will send out the fee schedule today. Response is requested by the end of the week.
 - Reminder of the importance of IDS Agencies to update fee schedules.
 - There will not be an Out of Clinic rate when the CPT code has already built it in the overall reimbursement rate.
 - Reviewing enhanced codes and Health Department Rates
 - Health Department will evaluate services array and cost
- Working to maintain cash flow and encourage our worth in the CCO
 - We need to find things that are easy to count and show we are meeting our goals
- Minimum requirements
 - Access
 - Outpatient enrollments are down in the last few months
 - Considering how to implementing SBIRT
 - Waiting approval by OHA to open the code for mental health
 - Anticipate increased referral to A/D with the implementation of SBIRT. Some medical clinics have begun screening.
 - PCP Coordination – possible additional incentive
 - Need meaningful conversation regarding diagnosis, treatment plan, medication, etc
 - What do we expect in return?
 - How can we help with the troublesome patients?
 - Prescriber consultation
 - Coordination with Crisis Services
 - Dean offered to get provider utilization data regarding frequent ED use. More than 100 individuals used ER services greater than 10 times in the past year.
 - Will look at strategies, approach to reducing avoidable visits.

- Patrick is doing a small test group to see how coordination from PCC is going.
- Cost Analysis of Prescriber services was discussed. Prescriber reimbursement appears to be significantly under cost. Reminder of the need to complete Cost Calculator to reflect actual costs by agency, report on completion at the next IDS meeting.
- Use of flexible funds to off set high medical cost or non-reimbursable services.
- Develop policy and guidelines.
- Make purchase and submit reimbursement

IV. Updates on Polk County & IDS Interface

- Agencies report Polk County has made contact with the agencies and said they will send a contract and then set up a meeting with each agency individually.
 - Intention is not to disrupt service
 - Contracts are required with Polk County mental health and IDS by April 1, 2013.
 - Request for continued stay will be reviewed by Polk County.
 - Clinical review will be conducted and determine continued stay with Polk County.
- Polk County is recommending the current therapist have the conversation with their Polk County patients about moving back to Polk County for treatment.
 - The brochure is the intended document to give the members that will explain the provider changes for Polk County members.
 - Concern expressed regarding who and when those conversations with members will be initiated. Conversations will not begin until the contracts are seen and signed.

Next Meeting February 11, 2013
Minutes by Janette Cotton