

Systems Management Group
Meeting Minutes
October 8, 2007

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|-----------------|-------------------------|-------------------------------|
| Present: | Bonnie Malek – CAPS | Jim Russell – MVBCN |
| | Trish Davis – Bridgeway | Linda Matthais – Project ABLE |
| | Ron Lagergren – CAPS | Debby Davis-CCS |
| | Doris Reyes - CAPS | Dean Andretta–MVIPA |

Absent/Excused: Geoff Heatherington–Polk Co.; Gary Heard – MC Drug Tx

Guest: Rita Glass, Gloria Thetford and Christy Edwards

I. Announcements:

- ❖ Gloria –Gary is on vacation and Gloria is here for him
- ❖ Linda – CAC picnic went well, they spent \$1086.51 out of the \$1100.00 given by MVIPA/MVBCN and will return the difference to them. Linda gave a brief overview/example of the activities and food that was provided. Linda and Gloria were especially pleased at the number of children and grandparents this year. Linda will bring pictures next month for everyone to see.

II. Minutes Review – Ron

- ❖ Minutes were approved with one change. Linda is no longer at RAP; she is now a consumer advocate. Jim would like the word Standard added to the second page OHP information so there isn't any confusion on what was discussed.

III. Monthly Report for September - Dean

See handout

- ❖ Membership – 33,029
- ❖ PM/PM - \$3.67
- ❖ Amount Due - \$121,193
- ❖ Methadone – \$33,029
- ❖ OOP/FFS – \$2,469
- ❖ In-Panel payment - \$58,371
- ❖ MOMS – \$8,670
- ❖ Balance due – 8,958
- ❖ The total of authorizations since February is 900, 1/3 kids and 2/3 adults.
- ❖ The number of patients being served is on an upward trend, February – 240, March – 251, April – 259, May – 296, June – 265, July – 267.
- ❖ Charges verses payments, year to date = budget \$390,000, expenditures \$354,000 leaving a balance of \$35,000. Dean will add year to date to the last page of the handout. The spending range per month is about \$210 to \$240 per patient.

- ❖ Currently there are very few denials; everyone is doing an excellent job.
- ❖ Jim asked if anyone has added any new staff.
- ❖ None of the agencies have been adding staff.

IV. Extended authorizations and review process

See handouts

- ❖ The work group met and came up with single pricing for the described practices. For Complex Co-Occurring Disorders, the agreed cost is \$3500.00. When looking at Seeking Safety, the group came up with \$2500.00 but after a discussion and looking at other treatment needs that need to be addressed, e.g. relapse prevention they decided that \$3000.00 would be a better figure. For Matrix, the group looked at provider costs and consistency across programs in what is delivered and agreed upon \$4500.00.
- ❖ The group thought this was a good starting point and that things would be monitored and looked at in a few months to see where it is and how it is working at these amounts of money. Regarding Drug Court, Bridgeway is currently the only agency offering/working with Drug Court. Trish from Bridgeway is still working on crunching numbers in order to try to get the cost down. Bonnie will write up the criteria for the 180 program as well.
- ❖ Jim asked how clinical exceptions would be documented.
- ❖ Agencies would email Bonnie and she would decide on how to proceed. If an exception was granted Dean could make a notation on the client's account, which would track members receiving additional money. In general this should be a rare occurrence and each practice is seen as a complete episode of treatment.
- ❖ After Dean sets up the system, he recommended that everyone be trained on how to use the process so there are no problems and everyone is on the same page.
- ❖ Providers are being asked to submit a list of people to be rolled over into the new system. Bonnie will forward the list to Dean so that everyone can be rolled over at once. From there on out, providers will be able to authorize new people directly into the EBP's.

V. Clinician training needs for the new system, internal utilization management, tracking outcomes and start up date.

- ❖ Bonnie will provide training to the clinicians and clinical supervisors and then follow up with Utilization Reviews to make sure the new system is being used properly. She emphasized the need for good treatment matching right from the start. In some cases, we could change an authorization from one EBP to another but this should only occur on rare occasions. Bonnie will also be available to assist supervisors with developing internal utilization processes as needed.
- ❖ Dean will need to update the system to accept the new authorizations. The goal for implementation will be November 1st, 2007.

VI. Revisiting fee-for-service rates (Interpreter, Group, Individual, Urinalysis, Family, and Case Management)

- ❖ There has been some confusion around billing for interpreters since we went to a fee-for-service system. Currently MVIPA has a contract with Cynthia Anderson for interpreting sign language. They also have a contract with Certified Language International for other interpreter needs. Agencies can use their own translators or one of the people contracted. The code to be used is T1013-HF. Dean will look into increasing the reimbursement rate comparable to the IDS (Integrated Delivery System) rate. Dean will also talk with Cynthia about her availability for interpreting/signing for CD clients and will email Bonnie with an update.
- ❖ Christy – Requested the definition on Case Management.
- ❖ Bonnie will email everyone the definition.

VII. Funding medication management for CD

- ❖ Ron asked for input on the best way to provide medication management within the chemical dependency programs. Everyone agreed that this is needed and would allow programs to integrate treatment without necessarily having to open him or her in mental health.
- ❖ Jim thought the easiest way would be to define and start paying for the services. The code for med management w/chemical dependency service is 90862. The new patient codes are 99213 or 99212. Two codes would need to be used, 99001/205 the new patient code and 92211 for when the client comes for follow up appointments. There is currently a code 90862; Dean will look into this code to see if it would work for the purpose needed. Dean will email everyone with the information once he has it.

VIII. Legislative Update on funding for CD

- ❖ A Biennial Plan Update was submitted to AMH (Addiction and Mental Health Division) for use of the new outpatient indigent funds. We have not received any response yet. When CAPS receives the money, existing providers for indigent services will be used so we can meet AMH expectations for expedient use of the funds. In the near future an RFP will need to go out for A&D services to be in alignment with procurement rules.
- ❖ There is no news yet on how many residential beds will be coming to Marion County.

Next meeting is November 19, 2007,
Minutes by: Doris Reyes
Adjourned at 3:00pm