

Parent Provider Council
 Minutes
 May 29, 2007

Attendees: Robin Stewart, DSPD, Monica Rafferty , Alice Farnsworth, Josette Dorius, Trisha Beck, Theo Judson, Mary Johnson, Eric Johnson, Wilhelm Lehmann, M.D., Robert Bucciare, LCSW, Barbara Faust PNP, Katie Smart, Medicaid.
 Excused: Kenneth Ekong, Chris Frankowski, Michael Deily and Robert White

Mission Statement: Our mission is to optimize the quality of life of the people we serve by providing excellent, compassionate, and integrated health services throughout the lifespan.

NOTE: Next meeting August 28th (Tuesday) at 5:30 p.m. to 7:30 p.m. We are going to start a half hour earlier so we can get done before 8:00. Hope that works for everyone.

AGENDA Meeting began at 5:45 p.m.

Agenda Item	Discussion	Action/Timeline
I. Review of minutes 11/28/06. NOTE meeting in February was cancelled due to weather	Provided an update on action items. Minutes were approved.	Approved
II. HOME – It is official-contract signed with Center for Medicaid Medicare Services (CMS). We are a managed care plan What does that mean?	Explained to the Parent Provider Council that HOME has been recognized as a HMO with CMS and therefore we are held to the same standards as other Medicaid HMO programs. Our contract was signed December 28, 2005. The effective period of our contract is January 2006-June 30, 2011. We are to comply with the contractual standards inclusive of Marketing, Enrollment processes, Disenrollment tracking, Provisions for Covered Services inclusive of Emergency Care, Urgent Care, CHEC services. Special health care needs, Women’s health, preventive care, mental health services and prior authorization	Congratulations were given to the staff. The Council gave very positive comments in how they feel they are treated in this clinic and how the staff understand their child’s needs.

<p>Quality Oversight – Review and approval of the QI Program</p> <p>Quality Improvement Work Plan for fiscal year 2007</p>	<p>requirements. It is important that we have program descriptions for Quality Improvement, Utilization Management, Case Management and Disease Management. There are policies and procedures within those program descriptions supporting the processes outlined in the program descriptions. We must have a grievance and appeal process that is tracked and reported to Medicaid.</p> <p>There are other financial and program reporting that needs to be submitted according to a timeline outlined in the contract. We are working diligently to comply to all the regulatory requirements.</p> <p>The QI Program was reviewed by the Council for comment and clarification. This review took the majority of the meeting.</p> <p>Other Council members that were excused for this meeting provided feedback about the Program description.</p> <p>It was explained to the Council that the QI Workplan supports the various components of the program description. The workplan outlines the various QI projects that are reviewed,</p>	<p>It was explained to the Council that they are the Board of Directors representative for the HOME Program. We will ask them to serve in that advisory role as the Council functions were defined in 2005.</p> <p>Alice Farnsworth made the motion to accept the QI Program description and Monica Rafferty 2nd the motion. It was approved by all present.</p> <p>There were some suggestions made on the baseline measurements and the positive reporting of the patient wait time. All Council members feel</p>
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<p>Audit Visits</p>	<p>monitored and reported on a regular basis. The workplan includes the World Class U pillars of measurement, Focused studies, and corrective actions measurements.</p> <p>The Council was informed that HSAG and State Medicaid will be auditing the HOME program the week of July 16-20. The State will be here on July 16-17 and HSAG (External Review Org) will be here from July 18-20. It is at this time that they will conduct an onsite visit to verify whether HOME is compliant to the contract requirements and Standards outlined by CMS.</p>	<p>that the wait time in this clinic needs to be duplicated in other offices. The Council was supportive of the Work Plan measures and approved the plan with the noted corrections.</p> <p>Council members volunteered to be part of the audit interviews. They felt that it would be very beneficial for the auditors to hear directly from the clients, parents and providers how satisfied they are with the program and services.</p> <p>Josette will see what can be arranged.</p>
<p>III World Class U – Pillars – Fiscal Year 2007 Service Quality People Finance Growth Community</p>	<p>Each section was reviewed and discussed: Service- Wait time is to be 10 minutes to be face to face with the provider. The average patient wait time was 8 minutes. It was noted by the council members that this has been very nice to not have to wait. Quality: This pillar is focused on the clinical treatment plans for our HOME clients. This has been an ongoing dilemma and not something that we have ignored. The problem is that it has been viewed as busy work and not seen as value to the care of the patient. There have been multiple efforts and ways that we have approached this issue. A task force has designed an approach were we use the</p>	<p>Service: Suggestion that we use a smile face, neutral face and frown for the clients to circle with each visit.</p> <p>Quality: Will report and demonstrate new process at next Council meeting in August.</p>

	<p>patient's problem list and identify areas of interest for each patient. The testing of this new process will begin in June.</p> <p>People: Employee feedback results were shared with the Council including the comments related to positive and issues identified by the staff.</p> <p>Finance: HOME case managers track all inpatient stays. Our bed days for April 2007 was 44.</p> <p>Growth: We continue to grow, as of May 1st our enrollment was 526. Our projected enrollment for July is 540.</p> <p>Community: Discussed the various community supports that are offered to our clients. The Council suggested that it would be great inform other agencies about the HOME Program. It was explained to the Council that we are not able to market but they can refer families or agencies for inquiries.</p> <p>Overall fiscal year rating for our Pillars is 4.0 with a score rating of 1 to 5.</p> <p>ANECDOTES: SPECIAL THANKS TO YOU FROM THE COUNCIL</p>	<p>People: Average response to our employee feedback is 70%. Our goal is 100%. It is helpful for us to hear what is working.</p> <p>Finance: We are meeting budget targets. Will continue to track.</p> <p>Growth: Continue to track. Provider council is also interested in potential to expand to private payers. Currently working with Molina on a Medicare/Medicaid product.</p> <p>Community: It was suggested that for each Council meeting we add an agenda item about a specific agency. Contact information and the services they provide. Mary Johnson has agreed to help us with this task.</p> <p>Task well done. Keep up the great work.</p> <p>It was noted by the Council that with the addition of the Case Managers (Mark and Becky) their lives have become much easier. The responsiveness of both of them is wonderful. Great asset!</p>
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IV.HOME Member Handbook	Each Council Member received a copy of the Member Handbook. Explained that each enrollee receives a copy annually.	
VI. Next Meeting	August 28 th November 27 th	Suggest we start our meeting at 5:30 p.m. to end by 7:30 p.m.

Meeting adjourned at 8:00 p.m.

Minutes transcribed: Josette T. Dorius, RN, MPH

Service Director

Child & Adolescent/Adult Behavioral Health Clinics

Neurobehavior HOME Program