



Minutes - Behavioral Health Quality Improvement Committee (BQuIC)

Tuesday, April 23, 2013 10:00 am-12:00 pm Location: 1570 Grant St 4th fl. Conference Room

Attendees:	Minutes CC:
Barbara McConnell, Health Services Advisory Group (HSAG) (by phone)	Sally Langston, Department of Health Care Policy and Financing
Suzanne Kinney, Access Behavioral Care (ABC) (by phone)	Carrie Bandell, Access Behavioral Care (ABC)
Gina Robinson, Department of Health Care Policy and Financing	Matthew Ullrich, Department of Health Care Policy and Financing
Rachel Henrichs, Health Services Advisory Group (by phone)	Taylor Larsen, Department of Health Care Policy and Financing
Michael Sajovetz, Department of Health Care Policy and Financing	Sharon Pawlak, Division of Behavioral Health (DBH)
Kate Bell, Health Services Advisory Group (by phone)	Alberta Lopez, Colorado Department of Human Services
Russell Kennedy, Department of Health Care Policy and Financing	Nikki Lemmon, Department of Health Care Policy and Financing
Erica Arnold Miller, Colorado Health Partnerships (CHP)	Laura Hill, Behavioral HealthCare, Inc (BHI)
Jennifer Woodard, Value Options (by phone)	Thomas Clay, Foothills Behavioral Health Partners
Janine Vincent, Ombudsman (by phone)	Lisa Clements, Division of Behavioral Health
Barbara Smith, Foothills Behavioral Health Partners (FBHP) (by phone)	Katie Brookler, Department of Health Care Policy and Financing
Samatha Kommana, Northeast Behavioral Health Partnership (NBHP)	Roger Gunter, Behavioral HealthCare, Inc (BHI)
Lindsay Cowee, Behavioral HealthCare, Inc (BHI) (by phone)	Karen Thompson, Northeast Behavioral Health Partnership, LLC
Jeremy White, Value Options (by phone)	Robert Bremer, Access Behavioral Care
Rachel Henrichs, Health Services Advisory Group (by phone)	Myron Unruh, Value Options
Carolyn Segalini, Department of Health Care Policy and Financing	Judy Yip, Health Services Advisory Group
Shawna Tye, Department of Health Care Policy and Financing	Marilea Rose, Health Services Advisory Group
James Bloom, Department of Health Care Policy and Financing	Judy Zerzan M.D. , Department of Health Care Policy and Financing
Jerry Ware, Department of Health Care Policy and Financing	Christy Hormann, Health Services Advisory Group
	LeeAnn Merrifield, Behavioral HealthCare, Inc (BHI)
	Rachel Lee, Mental Health Center of Boulder County
	Alana Berrett, Health Services Advisory Group
	Arnold Salazar, Colorado Health Partnerships (CHP)
	Diane Somerville, Health Services Advisory Group
	Katie Mortenson, Department of Health Care Policy and Financing
	Camille Harding, Department of Health Care Policy and Financing
	Adrienne Jones, Division of Behavioral Health (DBH)
	Heidi Walling, Department of Health Care Policy and Financing
	Jessie Wood, Behavioral HealthCare, Inc (BHI)

Quorum equals representation from a minimum of three Behavioral Health Organizations out of five plus one person from the Department.

Quorum Met? Yes.

- 1 Mission- To improve health care access and outcomes for the people we serve while demonstrating sound stewardship of financial resources.

TOPIC	DISCUSSION	RESULT
1. Introductions, and additions to the agenda	NBHP penetration rates was added to the agenda #4 and the Office of Behavioral Health survey status topic was not discussed.	
2. Review February 2013 meeting minutes	Minutes were reviewed and approved with minor changes. (To view past minutes and additional information about BQuIC visit www.colorado.gov/hcpf and click on Boards and Committees, then select BQuIC)	
3. ICD-10	Carolyn noted that the Department is moving forward to meet the 10/1/14 implementation date and that work is being done with the Department's fiscal agent to get ICD-10 codes loaded in information systems. Carolyn also noted that the Department is working on native coding, reviewing policy & rules, and doing remediation. The Department is also planning to ramp up communications and has set up an ICD-10 website (see the following http://www.colorado.gov/cs/Satellite/HCPF/HCPF/1251641242086). Carolyn then asked plans to provide input on their implementation efforts. Erica noted that Value Options was working on implementation efforts as well. Carolyn noted that she had received input from Value Options. Carolyn also note that the Centers for Medicare and Medicaid Services (CMS) may provide some ICD-10 input on the Behavioral Health performance measure scope document that Jerry shared with her.	
4. NBHP penetrations rates	Jerry and Michael noted that the Department identified an error with NBHP's penetration rates (a request to research this issue was initiated by NBHP). The Department will be recalculating the penetration rates and providing an updated Performance Measure Validation (PMV) report for NBHP that will reflect the correct penetration rates.	
5. Gina Robinson update	Gina noted her participation in a number of staffings to assist child clients with services. Gina also noted that she is noticing client issues with the Colorado Mental Health Treatment Act (CMHTA) requirements, and providers not willing to see clients that may be assigned to a different Behavioral Health Organization (BHO) other than the one assigned to that county. Gina noted that these issues are being addressed, but provider trainings may be needed. Samatha asked if the issue with providers not willing to see clients from another BHO was still isolated to certain counties? Gina noted that the issue is moving to other BHO catchment areas. Samatha also asked if the Department is still researching the option to provide Web-portal input to assist with some of these issues? Gina noted that she is still researching that issue. Suzanne asked what providers are participating in the staffings and where are they taking place? Gina said by phone and at the Department of Human Services (DHS). Barbara S. asked if the staffings are being called by social services? Gina noted that various agencies are calling for the staffings. Janine noted that she is involved with a number of staffings and that her organization is seeing some similar issues with the school districts.	
6. Pediatric referral form	Gina opened the discussion by asking the BHOs to share their follow up on this topic. Erica noted that her plan met with Aspen Point and Iron Horse providers, but is not sure about the outcome at this time. Eric will update the Department when possible. Samatha noted that her plan was working	

TOPIC	DISCUSSION	RESULT
	<p>with their Federal Qualified Health Centers (FQHCs) and that Karen (NBHP CEO) was leading the charge. Barbara S. noted that her plan was working with quality improvement coordinators and practice managers, but that a main contact at the Jefferson Mental Health Center was out of the office with an injury so there are some delays in progress. Suzanne noted that her plan was in touch with the Brunner Family Medicine Clinic and Children’s Hospital Clinic which have mental health staff members and that they may not use the referral form since mental health staff work there already. Lindsay noted that her plan is still researching providers to contact, but has made some provider contacts. Gina concluded the topic by noting a main goal for this process is reaching out to primary care providers.</p>	
<p>7. Ombudsman reporting</p>	<p>Janine said that her organization is seeing some seasonal trends with kids. For example, parents seeking residential treatment services (RTS). The biggest issue for adult clients is getting a provider and understanding member information. Samatha asked how are RTS denials being captured in the data and if the data could be broken out by non-substantiated and substantiated? An example of a substantiated RTS denial involves a client who was previously approved for RTS that did not work and the BHO is now trying other options even though the parent of the client is wanting RTS. Janine said that is something that could be added.</p>	
<p>8. Colorado Psychiatric Access and Consultation for Kids (CPACK Grant)</p>	<p>Suzanne provided the group with a summary and update on this two year demonstration project. . The grant is through the Colorado Health Foundation, and CBHC is the grantee. The project is designed to provide training and psychiatric consultation services to Pediatric practices, Family Medicine Practices and Behavioral Health Clinicians who enroll in the program. Suzanne gave background on the history of the project and how it will incorporate elements of the Value Options project that was based on the Massachusetts Child Psychiatric Access Project. An Advisory Committee has been formed, and an evaluation team will develop goals and outcome measures. The evaluators will consult with Johns Hopkins and the Massachusetts project staff. Suzanne noted that this demonstration program will focus efforts in the Metro Denver and Pueblo county areas. There are three phases of the project. Phase one will focus on recruitment of practices and extensive training. Participating practices will be provided with screening materials and a consultation line number that will connect them with a Board Certified Child Psychiatrist for consultation. Suzanne noted that at this time the service is not available state-wide, but the goal is sustainability and expansion of the project. Samatha asked why ABC picked the counties targeted for this project? Suzanne noted that she would need to research further to answer that question. Gina asked if anyone from child welfare was participating on the advisory board? Suzanne said she would have to check, but Gina stated that she would check with Judy Zerzan (HCPF) for the answer.</p>	
<p>9. Department Updates</p>	<p>Katie updated the group about the Regional Care Collaborative Organization (RCCO) quality meetings, shared input about the status of the RCCO integration reports (not a lot of data, but overall looking good), and that the RCCOs are being audited for compliance by the Department’s External Quality Review Organization (EQRO/HSAG). Russell stated that the RCCO compliance reports will be posted online. Katie also provided a brief update on the Adult Medicaid Quality Measures Grant (AMQM). Example, status on the grant awards.</p>	

TOPIC	DISCUSSION	RESULT
10. Public comments	NA	
11. Other	The group reviewed performance improvement project final report timelines, 411 audit final report timeline, and Jerry briefly noted the Mental Health Advisory Committee Thursday meeting to discuss recommendations for addressing developmental disability client issues.	
Adjourn	Meeting ended one hour early.	

Future Meeting: May 28, 2013 10:00 a.m. to 12:00 p.m.

Reasonable accommodations will be provided upon request in order for persons with disabilities to participate as a group member. Please notify Jerry Ware at 303-866-2335 or jerry.ware@state.co.us at least one week prior to the scheduled meeting if you need special accommodations in order to participate.