

AMHC LME

QI Committee Meeting Minutes 10/20/2009

Members Present: Kim Keehn - QI/Corporate Compliance Manager; Bryan Allen – IT Lead; Mike Kupecki – Assistant Area Director External Operations; Nonie Turville – QM Coordinator; Mark Rosenberg – Clinical Consultant; Patty Joyner – Finance Lead; Dr. Holding – Medical Director; John Heinzman – Monarch; Cham Trowell – Director of Clinical Operations Access & Care Management; Sandy Matthews – CFAC; Natasha Holley – Integrated Family Services; Carol Villarreal – RHA Health Services; Wanda Piland – Director of Clinical Operations Service Management; Kelly Ayscue – Customer Services Director

Members Absent: Fonda Gonzales – Provider Relations Director; Evelyn Harrison – CFAC; Judy Dempsey – CFAC; Garrett Taylor – Uplift Comprehensive Services; Zack Commander – CFAC

Guests: None

AGENDA ITEM	DISCUSSION/CONCLUSION	ACTION/NEXT STEPS	RESPONSIBLE PERSON	STATUS
I. Called to Order	<ol style="list-style-type: none">1. Kim called the meeting to order at 10:00a.m. The meeting was held via videoconference.2. September 17, 2009 QIC minutes were approved as written.3. No additions to the agenda were made.	N/A	N/A	Closed

<p>II. QI</p>	<p>1. The Committee reviewed & approved the following procedures with some changes/corrections:</p> <ul style="list-style-type: none"> ● Finance Procedures ● Property Management (correct typo and update terminology) ● Independent Contractors <p>Expenditures Procedure – suggestions were made to update terminology and revise to reflect effective January 1 all deposits for providers will be direct. The committee will hold until December meeting</p> <p>The Committee reviewed and approved the following Provider Network Procedures:</p> <ul style="list-style-type: none"> ● CAP/MR DD Unlicensed ● Direct Enrolled Individual Practitioners ● Provider CMHC Access ● Residential Letter of Support <p>Provider Endorsement Procedure – requires a revision to page 15 to change percentage from 25% to 50%. This procedure will be forwarded to Michelle Lewis & Fonda Gonzales for review and held until the next meeting.</p> <p>2. QI Projects</p> <p>Kim requested that all members need to give an update on their specific QI projects.</p> <ul style="list-style-type: none"> ● Wanda reported on Processing Timeframes for the month of September were within timeframes with 94% of 432 authorizations. ● Cham reported on Improving Compliance with Urgent Appointments. She is working with IT on a computerized schedule. Data was down this month to 73%. There was no data at this time for Improving the Number of Referrals for one call. ● Kim reported on Decreasing Number of Administrative Denials: <ul style="list-style-type: none"> ◀ 1st Qtr 78.2% which included July-72.1%, August-84.1% and September-78.1% (goal should be 65% or less) ● Nonie reported on Incident Reports and explained the new IRIS System which is web-based incident reporting providers will use reporting directly to the Division. This will by-pass the LME. The IRIS System is not yet in place according to the Division, but is 	<p>Approved procedures will now go to CEO for approval.</p> <p>Review at Dec. meeting</p> <p>Approved procedures will now go to CEO for approval.</p> <p>Review at Dec. meeting</p> <p>Continue to monitor</p> <p>Continue to monitor</p> <p>Continue to monitor</p> <p>Continue to monitor providing info available</p>	<p>CEO</p> <p>Patty Joyner/Kim Keehn</p> <p>CEO</p> <p>Kim Keehn Fonda Gonzales Michelle Lewis</p> <p>Wanda Piland</p> <p>Cham Trowell</p> <p>Kim Keehn</p> <p>Nonie Turville</p>	<p>Closed</p> <p>Open</p> <p>Closed</p> <p>Open</p> <p>On-going</p> <p>On-going</p> <p>On-going</p> <p>On-going</p>
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	<ul style="list-style-type: none"> ◀ 78% urgent care ◀ 70% routine care 			
IV. Open Agenda	<ol style="list-style-type: none"> 1. AMHC CFAC/LEG Update <ul style="list-style-type: none"> ● No representatives to report. ● Judy Dempsey shared her experience with Beaufort County Hospital as opposed to Pitt County Hospital. Upon discharge from Beaufort County Hospital Judy had an opportunity to sit down with a social worker to discuss a plan of care continuum. 2. Gaps & Needs Update <ul style="list-style-type: none"> ● Mike Kupecki reported the status plan was to go in and stabilize services in AMHC area with three psychiatric services being brought in. The second part of the plan was to have Behavioral Health Resources Program (BURP) to complete a gaps & needs analysis. Law enforcement, community groups, CFAC and health care were focus groups for this task. The report from BURP should be available November/December. ● Wanda Piland reported she is receiving good input from the community to improve services. Mobile Crisis and Access to Care were two concerns the community felt needed addressing. ● Cham, Wanda and Fonda will start educational groups in all counties. 3. Other <ul style="list-style-type: none"> ● Kim reporting Dr. Holding is replacing Mark Rosenberg on the QI Committee. 	N/A	N/A	Closed
V. Next Meeting	The next meeting date is scheduled for December 15 th , 2009 from 10:00a.m.until 12:00p.m. via videoconference.	E-mail agenda	Kim Keehn	On-going

Respectfully Submitted By,

Susan M. Massey
QI/CC Coordinator

Date: 10/20/2009

Approved by: _____
Kim Keehn, Quality Management Director