

Provider Readiness Workgroup
July 12, 2018
2:00 PM to 3:00 PM
101 N Edison St, Kennewick, WA 99336

Meeting Minutes

1. Attendees:
Shereen Hunt, Mark Loes, Danika Gwinn, Mike Berney, Mary O'Brien, Angelina Thomas, Marianne Oliver, Dana Oatis, Barbara Mead, Denise Clapp, Frank Becker, Ed Thornbrugh, Michelle Key, Scott Olander, Luke Hoisington, Leslie George, Rick George, Joey Charlton, Susan Lind, Pat Flores, Jesse Flores, Dave Wilson, Sara Clark, Cathy, Pipes, Matthew Kuempel, Dimita Warren, Jaime Carson, Penny Bell, Sam Werdel, Carol Moser, Jenna Shelton, Chris Devilleneuve, Isabel Jones, Kendal Ray, Alicia Egan, Courtney Ward, Megan Gillis, Cathy Neiman, Scott Parker, Samantha Zimmerman
2. Review Charter
 - Goal - Identify and resolve provider readiness issues/concerns such as:
 - MCO billing capacity
 - EHR compatibility
 - Provider billing and data reporting requirements
 - Technical Assistance needed by providers
 - Credentialing
 - Registering Provider NPI #s
 - Authorization process
 - Key Deliverables
 - Provide Technical Assistance to the Behavioral Health providers - Ongoing
 - To facilitate information sharing between the MCOs and the Behavioral Health providers - Ongoing
 - Establish a protocol and timeline for testing Behavioral Health provider capability to billing MCOs – October 2018
3. Contract – The edits have been made and Carol Moser is going to work with Mike Berney to make a few more changes to include a better definition on Fully Integrated Managed Care, so that it is not so confusing.
4. Funding Formula – The Behavioral Health Providers had a meeting to decide on the Funding formula to include the Residential and Inpatient. They voted on the formula. Mike Berney and Danika Gwinn will be working on getting funding formula completed and they will pass it on to Carol Moser as soon as it is finalized to get Board Approval from GCACH.
5. Work Flow – Sam Werdel went over an Assessment Workflow. The first part of the process is the Letter of Interest (LOI) and the Current State Assessment CSA, 110 questionnaire (both not required, but recommended so GCACH has more information about the provider). The next part is to complete the MeHAF and Billing IT

Assessments and submit them to GCACH (assessments need to have been done within the last 12 months). Once these assessments are completed and copies are provided to GCACH, the Practice Transformation navigators can analyze for infrastructure/IT needs and can assist with a change plan if needed. Then provider should be able to complete the Transition/Transformation Plan. GCACH can also help with this plan as well if needed. Then the contract can be signed and the funds can be released.

6. MeHAF/Billing & Information Technology – A Toolkit for Behavioral Health Agency

Jenna Shelton explained what the Practice Transformation Navigators can do to help providers.

The Practice Transformation Navigators are available to help complete the MeHAFs and Billing Toolkits. If the providers a haven't filled them out they can help complete them. After the assessments are complete the Navigators can help providers analyze the information to show the quantitative data and then after going over it with the providers they can give some qualitative data as well. According to the change concepts the Navigators have they can help providers see where the providers have best practices, where infrastructure or technology is needed, if there are workflow processes that need to be put in place or improved, and other areas for improvement. GCACH would like everyone who is involved with the work to be present when the Navigators meet to go over the MeHAF and Billing Toolkit such as, front line staff, clinicians, billing, or anyone that can help the navigators help figure out what the providers' needs are.

7. "Things I wished I would've known" from the North Central BH Providers Site Visit

- Understanding contracting – Get a consultant to help
- Include as many staff as possible during the transition and keep the informed. Be able to answer the questions for clinical staff
- Understand medical necessity
- Get input from staff that actually do the work – not just administrators
- NC ACH was too trusting that MCO's knew what they were doing and had their best interest at heart. Would highly recommend getting training on contract negotiations.
- Keep staff informed – allow them the opportunity to ask MCOs questions. This way staff get to voice their concerns and MCOs get to hear their barriers from the staff perspective.
- You may not be able to accomplish everything with your current staffing level or staffing model.
- Keep a list of contact information from MCOs.
- Invest time in reviewing your contracts and spend time with a consultant that can review contracts with you.
- Develop a relationship with one person from the MCO and use them as your main contact for any questions.

Isabel will send Diane some of the notes from the North Central Site visit if the providers would like them.

8. Issue & Questions Log for MCOs

- Please send any questions you may have to Diane Halo. She will send the Issue Question Log to the MCOs before the provider readiness workgroup meeting, so they can get the answers for the providers. The MCOs have weekly meetings so they can try standardize the answers and talk about the questions in their meeting.

- Examples of questions could be
 - Questions on the Authorization process from the MCOs
 - What clearinghouse each MCO has

Diane will send out the North Central Question Tracker to the workgroup for examples. Keep in mind that these answer from North Central Question Tracker may be old and may be different now.

9. Survey – <https://www.surveymonkey.com/r/6HNF6YH>

- Would you be interested in having training for MCO Contract Negotiations?
- Would you be interested in contracting with Xpio Health? (Technical and Behavioral Health Care Consulting Firm that provides technical assistance to behavioral health providers).

10. Other –

- MCOs will be sending out an online survey out to providers. They are trying to get information they need for credentialing such as who your clearinghouse is, information on provider readiness, and other information they need for claims and encounters.
- HCA is putting together toolkit and fact sheet on getting your NPI #s registered with HCA. All providers need to have an NPI that needs to get registered with HCA.
- Providers please send your MeHAF and Billing Toolkits to Diane. Diane can send the MeHAFs to the MCOs.
- Send questions providers have for the MCOs to Diane so she can get them to the MCOs to answered.

11. Future Provider Readiness Workgroup Meetings-

Board Room at Tri-Cities Community Health; 800 W. Court St. Pasco, WA 99301

July 26th 2-3pm

August 9th 2-3pm

August 23rd 2-3pm

September 6th 2-3pm

September 20th 3:30-4:30pm

October 4th 2-3pm

October 18th 3:30 – 4:30 pm

November 1st 2-3pm

November 15th 3:30 – 4:30pm

November 29th 2-3pm

December 13th 2-3pm

December 27th 2-3pm