

CHAIR/PRESIDENT	Margaret Mason
VICE CHAIR/ VICE PRESIDENT	Tonya Oakley
SECRETARY	Safi Martin
ATTENDEES	Kevin Oliver, Lyndril Leonard, Kahlil Nassar, Shannon Childress, Jasmine Burgess, John Waters, Martin Osteen, (see sign-in sheet for remaining)

Agenda topics

- APPROVE SEPTEMBER COUNCIL MINUTES ALL
- OLD BUSINESS VARIOUS
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- REVIEW OF COMMITTEES: DATES, TIMES, CHAIRS
 - Quality Improvement-
 - Clinical Advisory-
 - Utilization Review-
 - Credentialing-
 - Global CQI-
- PROVIDER ONLY DISCUSSION ITEMS:
 - SWOT Analysis of Partners/Smoky Merger
 - EOY Billing Deadlines?
 - Wage & Hour changes for non-exempt employees
 - Medicaid Reform Public Hearings
 - Innovations Waiver (for Partners reps)
- PARTNERS UPDATES PAUL CALDWELL
BETH LACKEY
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AGENDA TOPIC:	Approval of November Minutes	
DISCUSSION	Minutes reviewed.	
CONCLUSIONS	John Waters motioned to accept. Shannon Childress seconded motion. Motion carried unanimously.	
ACTION ITEMS	PERSON RESPONSIBLE	DEADLINE

AGENDA TOPIC:	OLD BUSINESS – Credentialing Committee
DISCUSSION	

CONCLUSIONS		
ACTION ITEMS	PERSON RESPONSIBLE	DEADLINE

AGENDA TOPIC:	Committee Reports
DISCUSSION	<ul style="list-style-type: none"> ○ Quality Improvement: No report. ○ Clinical Advisory: Met this past Wednesday. If two different departments are having a discrepancy in view of service definition, there is now a form to fill out and these differences will come to the Clinical Advisory Committee. Providers expressed concerns that authorizations for Enhanced Services is taking the full 14 days—providers are either assuming significant financial or clinical risk. Home Modifications Assistance Supplies & Funding also has a change (part of the Innovations Waiver). Committee meets quarterly. ○ Utilization Management: Next meeting is Monday and Kevin will take concerns about authorizations for Enhanced Services. Providers continued with conversation about barriers to access to care. Request that Partners consider Urgent/Emergent/Routine as a factor in the time it takes to review an authorization. Peer Support was also brought up as concern related to timely access to care. ○ Credentialing Committee: Communication bulletin J193 related to the Nurse Practitioners. Deadline is June 30th, 2017. Will consider “grandfathering” NPs that have been in the network for a certain amount of time. They are requesting plans from all NPs, but this is not holding up credentialing right now. <p>Providers are continuing to experience some concerns and frustrations with the credentialing process. Continue to be some inconsistencies between instructions on the website and what is required by SMC’s credentialing department.</p> <p>Credentialing meets monthly.</p> <ul style="list-style-type: none"> ○ Global CQI: Last meeting was April 1st, 2016. 2016 Perception of Care Survey will be coming out soon. GAP Analysis & Customer Satisfaction results were presented to the committee. Will be looking at GAP in more depth at the next meeting. Doug Gallion reviewed information about the recent Self-Assessments. Some providers are running into delays/barriers with adding Partners as additionally-insured on their liability insurance (have received letters from Partners). GCQI is looking for nominations for two new co-chairs. IDD chair is being selected in May. MH/SA chair is being selected in June. Discussed development of PCPs and how they relate to the authorizations. Perception of Care Survey was discussed again. Also discussed the TCL Settlement. Partners is below their mandated threshold. Providers requested clarification related to the number needed—are these “successful” placements? <p>GCQI has developed draft guidelines (shared at this meeting) and is looking for review & approval from the Provider Council. Suggested</p>

	that guidelines around “Quorum” be edited to include “one provider/one note”.	
	<i>Additional note about naloxone(???) codes so that providers can get paid.</i>	
CONCLUSIONS	Safi Martin motioned to approve QCQI guidelines with edits that John suggested. Kevin Oliver seconded this motion. Motion carried unanimously.	
ACTION ITEMS	PERSON RESPONSIBLE	DEADLINE
Add “Barriers to Access to Care” as routine agenda item moving forward.	Safi Martin	Ongoing

AGENDA TOPIC:	Provider Only Topics:	
DISCUSSION	<p><i>As a matter of process, Margaret requested that committee representatives send committee updates to Secretary a week prior to each Provider Council meeting. This will allow us to have a “consent agenda” and dedicate more time to topics during the meeting.</i></p> <ul style="list-style-type: none"> ○ SWOT Analysis of Partners/Smoky Merger – We will dedicate significant time at the next Provider Council to discuss this topic at length. Suggestion made to send out Survey Monkey to providers ahead of time to gather thoughts prior to the next meeting. Margaret is in conversation with chair of SMC Provider Council and agreed to request that Providers be included in any internal planning committees between the LME-MCOs in order to get provider input. ○ EOY Billing Deadlines? Partners address... ○ Wage & Hour changes for non-exempt employees – New wage & hour rules will go into effect soon and has the potential to impact many QP-level employees. Any non-licensed (professional) employee making less than \$50k per year will be hourly employees. Made request to Partners for some training within the network—Mark Knuckles. ○ Medicaid Reform public comments—Organizers were very clear that they were only taking comments, no questions. They are still taking phone and written comments until June 1st. Many of the folks speaking are from the physical health community. Common themes are expanding Medicaid in NC, keeping costs low for providers. 	
CONCLUSIONS		
ACTION ITEMS	PERSON RESPONSIBLE	DEADLINE

AGENDA TOPIC:	Partners Updates	
DISCUSSION	<p>Beth Lackey:</p> <ul style="list-style-type: none"> • Partners will work to arrange training/info meeting with Mark Knuckles related to DOL wage and hour changes. Goal is May 19th Provider Forum. • For providers preparing for the Innovations Waiver, your network specialist should be reaching out to you with guidance on the nomination forms (especially for new services). If July 1st date holds, will service 	

	<p>rates stay the same for the services impacted? Beth will double-check and provide clarification. Providers requested update on rate changes and Beth will get information out to providers as quickly as possible.</p> <ul style="list-style-type: none"> Partners is currently working on State dollar budgets. Have looked at utilization through March 31st (where are you in this year and where are there unexpended dollars?). This data will be used to both develop budgets and double-check Partners claims vs. providers data. Information should be coming out in May related to 2016-17 budget. Providers should reach out to their Provider Specialist with any questions (cc their manager or Beth). Related to a provider's question about B-3, Beth reiterated that revised contracts should have gone out indicating that there was no cap for B-3 services. Some providers indicated that these contract amendments have not happened yet. MERGER: The Western Regional Partnership has continued to meet. CenterPoint will be exiting that partnership as they move forward with their new relationship with Cardinal. Late September is the deadline for submission of merger plans to the state. LME-MCO leadership is in the beginning stages of planning for the merger. <p>Provider Council formally requested that Partners consider having Provider representation at higher level leadership committees/task forces, as this is where much decision-making happens. Providers are concerned about what the merger will look like now that it is no longer voluntary. Partners values our Provider Council and appreciates that provider participation on committees.</p> <p>There is a scheduling conflict for the May Provider Council meeting. Safi will send out a doodle poll to inquire about best date in June for joint May/June meeting.</p>
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CONCLUSIONS		
ACTION ITEMS	PERSON RESPONSIBLE	DEADLINE
Doodle Poll for May/June combined meeting	Safi Martin	