

CCCW Quality Committee Meeting
CCCW Stevens Point Office
Conference Rm 319 & 320 (Back Entrance)
Participation via Zoom
Wednesday, September 17, 2014, 3:00-4:30 p.m.

Present: Dana Cyra, Penny Bartelt, Tricia Mayek, Crystal Klement, Carrie Breitenfeldt, Barbara Gering, Kit Ruesch, Lisa Shrader, Marlene Winters, Deb Josephson, Sarah Benson, Pam Onstad, Allison Rehfeldt, Cheryl Zeinert, Joyce Perryman

- 1. Meeting called to order at 3:00pm.**
- 2. 7/16/2014 minutes approved.**
- 3. CCCW Executive Updates**

Jim Canales, CEO of CCCW is retiring in January 2015. There will be an internal interview process conducted to fill this position. His retirement party will be in April. Rick Foss, Director of Member Support Coordination, will be retiring at the end of this month.

The State asked us to submit a deficit budget to keep our funds balanced. We ended up being in more of a deficit than anticipated. Cap rates will increase 4.3% which will help the per member per month cost. There is a projected \$4mil loss for this year which will deplete our reserves. Our funds have also been affected by the increase of residential costs in the northwest. We hope to expand our options for providers who support community living. GT Financial has decided to expand services to the northwest as well.

Behavioral Health Services are being integrated into Family Care with a rollout date in 2015. Small changes will be implemented next year and then incorporated into the package in 2016.

Net enrollments continue to increase. Our business department is currently in the middle of an OCI audit. This is the first full audit conducted at CCCW. In the months of October and November, staff need to be available for the audit.

RFPs in the northeast were awarded to Lakeland and Community Care Inc. They will be competing in this region.

4. Reports:

a. CCCW Membership Reports

We continue to see very consistent demographics. There is a high amount of members over the age of 80 in our program. No appeals were recorded in July. SDS continues to be lower in the northwest.

In April, we saw the highest amount of increase in members. March had the lowest enrollments. Over 6 months, there was an average enrollment of 24-25 members per month.

5. 2014-2015 External Quality Review-Overview of planned activities

Every year, the State hires an outside company, MetaStar, to conduct a review for MCOs. This year is a full review year. Last year, we met compliance 100%. This year will be more extensive than ever. Next Tuesday, the Quality Department will participate in a conference call with MetaStar. They will provide us with a list of all internal documents that need to be submitted this fall. Some of the documents included will be our internal policies and procedures. An ISCA information systems capability assessment will be conducted in January as well. Random providers and contacts will be chosen to review our business department. Clinical and non-clinical PIPs will be validated as well. Our clinical PIP focused on increasing the number of women under the age of 60 receiving a PAP/Pelvic exam. Our non-clinical PIP focused on improving the NOA letter process.

On March 16th-23rd, an online review of 1.5% of our member records will be completed. This is roughly 85 records for the entire region. April 6th-10th, MetaStar will be in our offices doing Quality Compliance, Provider, Member Rights, Quality, and Care Management reviews. Staff will be invited to participate.

6. CCCW's Incident Reporting Process/Policy

Penny Bartelt and Sarah Benson (Quality Managers) reviewed the process and policy for improvement. High level critical incidents are reported to the State. Adverse events are submitted to CCCW for tracking trends. Penny currently views incidents in LTC and Sarah in Midas. Once CareDirector is implemented, all incident reports will be in the same program.

The policy was mainly composed of instructions for IDT staff. These instructions were moved to the IDT handbook so staff do not have to look in multiple places for direction.

The tool will be improved internally and all incidents will be reviewed. Provider Network and Member Support Coordination will be involved in this process. We hope to see overall improvement with this new process. Having a committee review incidents will help determine where improvement and reports are needed to identify trends. The goal is to have more objective monitoring.

CareDirector will incorporate positive aspects from the MIDAS system that are currently being used in the northwest. Managers will be required to review incidents prior to being submitted to quality for review.

7. CareDirector Update

The go-live date for our new IT system has been delayed until November 3, 2014. Development is in the final stages and system areas that staff will need for go-live are being completed. Company-wide weekly trainings are required for all staff. Some topics may be revisited. The final system will be a mixture of the northwest-MIDAS system and central-LTC system. A plan for final transition is being developed at this time. Phase 2 will happen in 2015.

8. Outcome-Based Employment(OBE)-Update/Discussion

The northwest has been operating via Outcome-Based Employment since the expansion. This employment model is now being rolled out in the central region. CCCW contracted with Kate Norby and Julie Strenn who assisted with this model. Managers were encouraged to read about results oriented employment. Staff needs and member needs are taken into account to focus on the work itself, not where it is done. This employment model is cost effective due to smaller office sizes. Central office spaces will be reevaluated in 2016 when leases are ending. Results of IDT are expected. They still need

to meet with members and meet contract requirements. Staff decide when and how they will get their work complete with no requirement to be in the office 8 hours a day. Staff also have the ability to forward their work phones to their cell phones.

With OBE, we have seen less staff turnover in the northwest. Current feedback has been an improvement in responsiveness. As a member or provider, if you are experiencing any issues, please let us know.

9. Member and/or Provider Concerns

No concerns at this time.

10. Behavioral Health

The DHS Department has released a statewide initiative involving behavioral health. This was created to measure the gaps that the current LTCFS is not covering. A pilot was sent out and the decision was made to add this assessment in August. This will help IDT staff. The assessment includes 61 areas that staff need to record. This is a supplement to the screen and is not part of eligibility or rates.

The State website where screeners record LTCFS is the only uniform way the State can collect information. This will require collaboration between the IDT staff and screeners. Penny has received good questions but is unsure of IDT staff response to this addition.

ADRCs will begin incorporating an AODA and Depression Screen as part of enrollments. Currently, CCCW conducts their own.

11. Future Agenda Items

Rollout of CareDirector go-live

Quality Plan 2015

Community Supported Living Grants

Contract changes CMS-January 2015

12. Next Meeting Date: Nov 19, 2014

13. Adjourned at 4:10pm.

You may RSVP to Samantha at 715-204-1732 or
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