LAKESHORE REGIONAL ENTITY

Information Officer Report – January 2021

Summary:

1. **MCIS Software**:
   EQI: PCE Systems is continuing their work on the 834 enrollment/eligibility changes, the new MDHHS/Milliman designed "Master Eligibility File", and the new **E**ncounter **Q**uality **I**nitiative (**EQI**) financial summary reports.
   ASAM Continuum: PCE Systems is leading the collaborative effort with **FEI Systems** *(the company that created the **ASAM Continuum** software)* to map out the technical implementation details *(on behalf of many across the state)* required for implementation of the **ASAM Continuum** as the state-wide standardized SUD Assessment. See also #6 on page 2 for further information on ASAM Continuum implementation.

2. **Planned Data Exchanges with Beacon Health Options**:
   - Additional data extract files requested by Beacon which are still on the project design board include: SIS data, LOCUS data, decision support tables, Eligibility 834/271 data, and PMPM payment details.

3. **FY20 data reporting to MDHHS:**
   Encounter reporting for FY20, while still showing data reporting lags, is steadily improving. HealthWest continued to make significant additional FY20 data submissions over the last period, and additional mental health encounters are also anticipated from them over the next two weeks. Ottawa CMH encounters, which have been lagging due to the impact of the MDHHS requirement for Direct Care Wage "Premium Pay" amounts, have been submitted through August 2020, with September 2020 dates of service anticipated to be reported by January 27th or before. Network180 has been submitting encounters timely throughout FY20, however the Direct Care Wage "Premium Pay" costs are not yet included in the cost on the Network180 encounters. Encounter corrections to adjust those costs are being prepared. LRE continues to have regular status meetings individually with each CMH experiencing data reporting delays to monitor and support progress toward data submission completeness.

   COVID-19 has had a significant impact on FY20 encounter volumes state-wide. MDHHS published a recent analysis of this on 12/28/2020 – please see **Encounter Volumes** below (on page 3) under "Additional Details" to see how our region currently compares against state-wide averages.

   FY20 BHTEDS: Congratulations are in order! LRE appreciates the hard work of all our CMHSP members for getting missing/overdue BHTEDS submitted to bolster our FY20 completeness measures, which are now **above the 95% compliance threshold in all categories** (Mental Health, Crisis Only, and Substance Use Disorder [SUD])! While we are celebrating this achievement, we are also cognizant of the potential that late arriving encounters could increase the denominator for the measure and undermine our completeness percentage. Therefore, we are committed to remaining vigilant in our monitoring and continued improvement of the FY20 BHTEDS. The MDHHS published **FY20 BHTEDS completeness** measures from 01/04/2021 are shown below under "Additional Details" (pages 4 – 5).

4. **FY21 data reporting to MDHHS**:
With the intense focus being given to FY20 data completeness at this time, FY21 data submissions have suffered a bit as a result. You will see evidence of this in the encounter graphs attached. FY21 BHTEDS volume has also been impacted. With FY21 encounter volume significantly depressed, and FY21 BHTEDs under-reported, it is difficult to know whether the MDHHS BHTEDs completeness calculation for FY21 (generated on 01/04/2021) is truly meaningful for our region at this point or not. Those **FY21 BHTEDS completeness** stats are also presented for your review under "Additional Details" below (pages 6 – 7).

5. **FY20 Financial Year End Reporting** and the new **E**ncounter **Q**uality **I**nitiative (**EQI**) report:
The anticipated timeline for financial year end reporting, per Milliman's EQI Instructions, is shown here (see image directly below). CMHSP's have been advised to prepare their EQI reports in a way that will match to the encounter data that Milliman will be seeing in the MDHHS encounter data as of 02/03/2021. This will reduce "ghost" discrepancies created simply by transaction timing differences. Milliman intends to provide documentation of discrepancies to each PIHP by 3/31/2021, after which PIHPs/CMHSPs will have only 2 weeks to identify the source/cause of each discrepancy and provide explanations to MDHHS detailing the corrective actions that we plan to take to correct them. Some of those corrections might look like 'correcting a typo on the EQI report', while others might take the form of additional encounter submissions or corrections.

III. Methodology and Instructions

For the purposes of this analysis, each CMHSP and PIHP will submit the information as requested above to MDHHS. Figure 3 includes the timing for each of the steps in the SFY 2020 behavioral health EQI process:

FIGURE 3: SFY 2020 BH EQI SCHEDULE

BH EQI PROCESS STEP	DEADLINE
Paid Date of Encounters (Adjudicated)	1/31/2021
Encounter Submission by PIHPs to DHHS	1/31/2021
Optum Data to Milliman	2/3/2021
PIHPs Submits Report to DHHS	2/28/2021
Milliman Deliver DRIVE to PIHPs	3/31/2021
Response to observations due to DHHS, explaining variances/questions/or corrective action plans as appropriate	4/15/2021

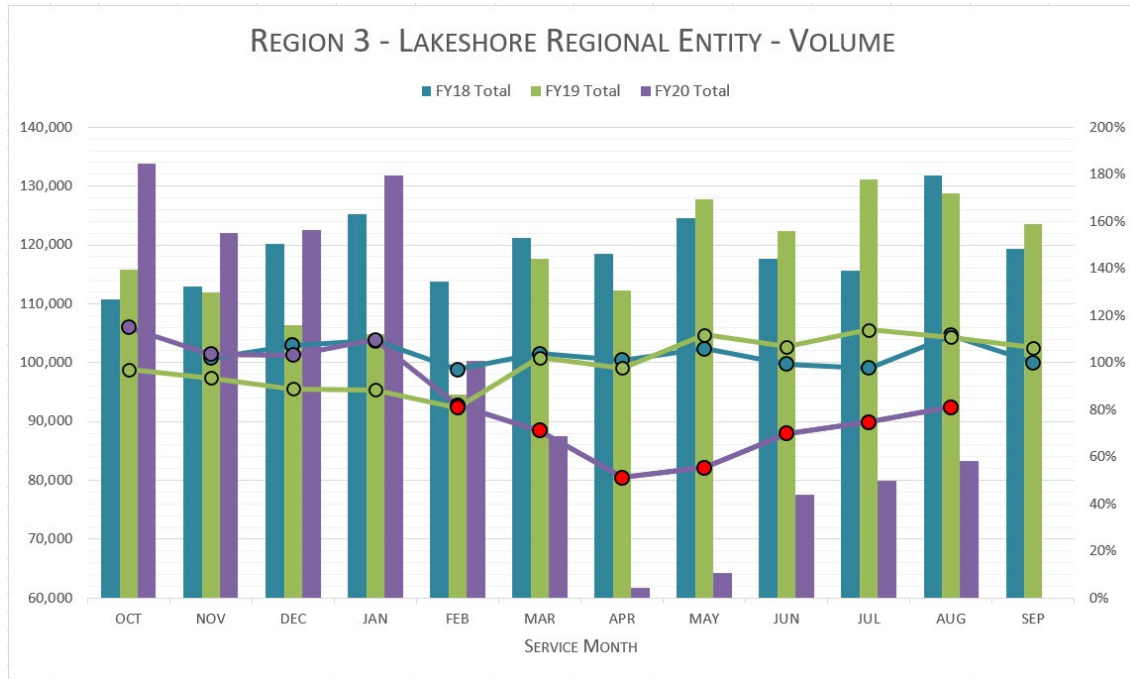6. **ASAM Continuum implementation**:
MDHHS has approved the use of the **ASAM Continuum** as the state-wide standardized SUD Assessment. Implementation is required (per our MDHHS contract) by 10-01-2021, making the implementation timeline relatively short. MDHHS has not offered to relax that implementation timeline. PCE Systems is leading the collaborative effort with FEI Systems to map out the technical implementation details (on behalf of many across the state who are using PCE EMR systems).

   Within our region, implementation strategy may differ significantly from most PIHP regions because our SUD coordinating functions are decentralized to the CMHSP level. This will require 5 implementations (within each CMH EMR system) instead of one (in the PIHP system). While many regions will see this implementation as one software integration (with PCE Systems), our region will experience it as 4 (or 5) separate software integrations (with PCE Systems, Core Solutions, NetSmart, and Streamline). The state-wide ASAM project group is planning a staged implementation with Mid-State Health Network likely being an early adopter. Lakeshore Region, due to the added complexity of our decentralized environment, will be fully implemented somewhat later in the over-all timeline.
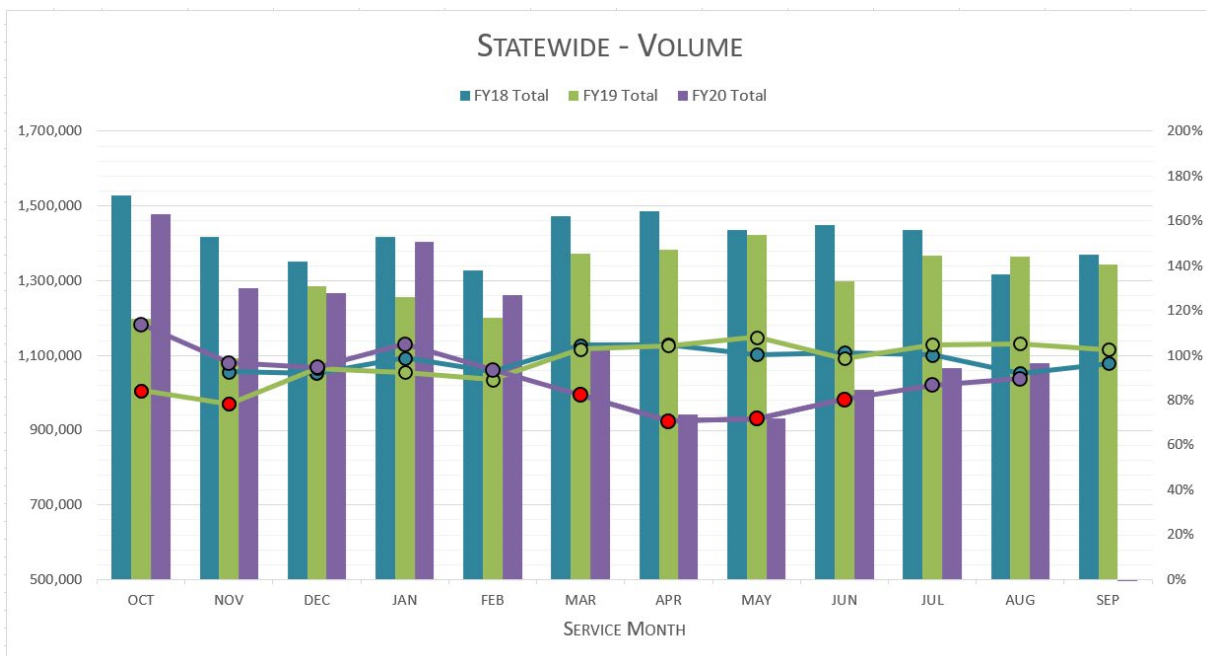
Additional Details:

Encounter Volumes – per MDHHS (12/28/2020):

Region 3 (Lakeshore Regional Entity) Encounter Volume by month (FY18, FY19, FY20) *

*   * MDHHS is measuring number of claim lines here and comparing that to historical trends. It is noted that some portion of this impact to line counts within our region is attributed to a change in how claims batching is done as a result of the new HealthWest EMR system install (effective February 2020) which now does series billing where appropriate, rather than billing each date of service on a separate line (as their old system did).

PIHPs State-Wide Encounter Volume by month (FY18, FY19, FY20)

FY20 BHTEDS Completeness – per MDHHS (01/04/2021):

FY20 Mental Health BHTEDS (excludes "crisis only" episodes of care):

FY20 MH Encounters w/BH-TEDS records

Encounters: 10/01/2019 - 09/30/2020*			BH-TEDS: 07/01/2018 - 01/04/2021	
			Distinct Count of Individuals With	
Region Name	Submitter ID	Non-H0002 & Non-Crisis Encounters	Non-H0002, Non-Crisis, & Non-OBRA Assessment Encounters But NO BH-TEDS Record Since 07/01/2018	Current Completion Rate
CMH Partnership of SE MI	00XT	9,631	216	97.76%
Detroit/Wayne	00XH	59,333	4,854	91.82%
Lakeshore Regional Entity	00ZI	18,264	574	96.86%
Macomb	00GX	10,857	346	96.81%
Mid-State Health Network	0107	39,347	1,307	96.68%
NorthCare Network	0101	5,787	51	99.12%
Northern MI Regional Entity	0108	11,700	126	98.92%
Oakland	0058	17,464	176	98.99%
Region 10	0109	16,063	35	99.78%
Southwest MI Behavioral Health	0102	20,084	686	96.58%
Statewide		208,530	8,371	95.99%

FY20 Mental Health Crisis Only BHTEDS:

FY20 Crisis Encounters w/BH-TEDS records

Encounters: 10/01/2019 - 09/30/2020*			BH-TEDS: 07/01/2018 - 01/04/2021	
			Distinct Count of Individuals With	
Region Name	Submitter ID	Crisis Encounters	Crisis Encounters But NO BH-TEDS Record Since 07/01/2018	Completion Rate
CMH Partnership of SE MI	00XT	2,139	244	88.59%
Detroit/Wayne	00XH	9,425	2,577	72.66%
Lakeshore Regional Entity	00ZI	6,342	265	95.82%
Macomb	00GX	1,316	14	98.94%
Mid-State Health Network	0107	11,744	243	97.93%
NorthCare Network	0101	2,221	59	97.34%
Northern MI Regional Entity	0108	4,192	130	96.90%
Oakland	0058	3,874	6	99.85%
Region 10	0109	2,005	2	99.90%
Southwest MI Behavioral Health	0102	3,570	57	98.40%
Statewide		46,828	3,597	92.32%

FY20 Substance Use Disorder BHTEDS:

FY20 SUD Encounters w/BH-TEDS records				
SUD Encounters from 10/01/2019-09/30/2020			Does Not Have Open Admission at Time of Encounter as of 01/04/2021	
			Distinct Count of Individuals With	
Region Name	Submitter ID	Encounters	Encounters But NO BH-TEDS Record	Completion Rate
CMH Partnership of SE MI	00XT	2,981	34	98.86%
Detroit/Wayne	00XH	9,916	1	99.99%
Lakeshore Regional Entity	00ZI	6,249	91	98.54%
Macomb	00GX	4,657	9	99.81%
Mid-State Health Network	0107	11,153	8	99.93%
NorthCare Network	0101	1,660	3	99.82%
Northern MI Regional Entity	0108	3,905	112	97.13%
Oakland	0058	3,967	2	99.95%
Region 10	0109	5,586	28	99.50%
Salvation Army	002Y	484	67	86.16%
Southwest MI Behavioral Health	0102	5,953	283	95.25%
Statewide		56,511	638	98.87%

FY21 BHTEDS Completeness – per MDHHS (01/04/2021):

FY21 Mental Health BHTEDS (excludes "crisis only" episodes of care):

FY21 MH Encounters w/BH-TEDS records				
Encounters: 10/01/2020 - 11/30/2020*			BH-TEDS: 07/01/2019 - 01/04/2021	
		Distinct Count of Individuals With		
Region Name	Submitter ID	Non-H0002 & Non-Crisis, Non-OBRA Assessment & Non-Transportation Encounters	Non-H0002, Non-Crisis, Non-Health Home, Non-OBRA Assessment & Non-Transportation Encounters But NO BH-TEDS Record Since 07/01/2019	Current Completion Rate
CMH Partnership of SE MI	00XT	6,773	200	97.05%
Detroit/Wayne	00XH	38,356	1,538	95.99%
Lakeshore Regional Entity	00ZI	8,036	520	93.53%
Macomb	00GX	7,450	135	98.19%
Mid-State Health Network	0107	25,672	1,519	94.08%
NorthCare Network	0101	4,057	47	98.84%
Northern MI Regional Entity	0108	7,931	115	98.55%
Oakland	0058	12,659	208	98.36%
Region 10	0109	12,154	243	98.00%
Southwest MI Behavioral Health	0102	9,844	334	96.61%
Statewide		132,932	4,859	96.34%

FY21 Mental Health Crisis Only BHTEDS:

FY21 Crisis Encounters w/BH-TEDS records				
Encounters: 10/01/2020 - 11/30/2020*			BH-TEDS: 07/01/2019 - 01/04/2021	
		Distinct Count of Individuals With		
Region Name	Submitter ID	Crisis Encounters	Crisis Encounters But NO BH-TEDS Record Since 07/01/2018	Completion Rate
CMH Partnership of SE MI	00XT	469	71	84.86%
Detroit/Wayne	00XH	1,847	551	70.17%
Lakeshore Regional Entity	00ZI	1,122	58	94.83%
Macomb	00GX	324	6	98.15%
Mid-State Health Network	0107	2,494	180	92.78%
NorthCare Network	0101	360	12	96.67%
Northern MI Regional Entity	0108	851	35	95.89%
Oakland	0058	754	11	98.54%
Region 10	0109	378	31	91.80%
Southwest MI Behavioral Health	0102	563	53	90.59%
Statewide		9,162	1,008	89.00%

FY21 Substance Use Disorder BHTEDS:

			Does Not Have Open Admission at Time of Encounter as of 01/04/2021	
SUD Encounters from 10/01/2020-11/30/2020				
			Distinct Count of Individuals With	
Region Name	Submitter ID	Non-Health Home Encounters	Non-Health Home Encounters But NO BH-TEDS Record	Completion Rate
CMH Partnership of SE MI	00XT	1,309	5	99.62%
Detroit/Wayne	00XH	3,245	1	99.97%
Lakeshore Regional Entity	00ZI	2,240	7	99.69%
Macomb	00GX	1,946	29	98.51%
Mid-State Health Network	0107	5,394	0	100.00%
NorthCare Network	0101	561	38	93.23%
Northern MI Regional Entity	0108	1,775	10	99.44%
Oakland	0058	1,772	2	99.89%
Region 10	0109	1,786	15	99.16%
Salvation Army	002Y	NO FY21 Encounters Submitted Yet at 01/04/2021		
Southwest MI Behavioral Health	0102	2,251	91	95.96%
Statewide		22,279	198	99.11%