



# Quality Assurance Task Force

January 5, 2017

NOTES

## Attendees

Ryan Kelly, Mississippi Rural Health Association

Krissle Nicome – Magnolia Health Plan

Dr. Lessa Phillips – United Healthcare, Medical Director

Latrina McClenton – United Healthcare, Health Services Director

Brian Enis – Magnolia Health Plan, Contracting and Network Development Mangr.

Michael Parnell – United Healthcare, Director of Network Strategy

Sharon Turcotte – Rush Health Systems

Susan Campbell – Rush Health Systems

Pamela Taylor – MS Division of Medicaid, Reimbursement

Zach Allen – Children’s International Medical Group

Joe Jackson – MS Division of Medicaid - Reimbursement

## Delegated Credentialing

A concept from last meeting that was discussed is delegated credentialing.

Options were presented on current models as well as proposed idea of delegating credentialing. Both Magnolia Health Plan and United Healthcare expressed positive reaction to the idea. If the tool is used in the spirit of collaboration, it could be a great addition to the partnership. If it is used strictly as a manner of contract negotiation, it may cause as much harm as good. There are currently 8-9 groups that perform delegated credentialing in Mississippi currently.

## Question on Forms

There was a question on the location of new provider forms and facility update forms. United Healthcare has a tab on the website called “Become a Provider” that houses the forms. Magnolia has a form available to upload.

## Issues with NPI Number Updates

Both groups reiterated that if a facility changes location, their respective NPI number and information must be updated. If a new location is established, a new NPI number must be established. This was stated to be among the highest reasons for errors with processing.



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## Contact Directory on MRHA Site

The need for a quick list of contacts at Medicaid and the MCOs was addressed. It was advised that a contact directory for key individuals could be housed on the MRHA site for member support.

## Shared EMR for MRHA Members

It has been suggested by the MRHA that a group-purchase of an EMR could benefit members with cost and ease of use. It was reiterated by the group that this would be beneficial to both MRHA members as well as the MCOs, as one of the bigger challenges has been proper coding of HEDIS measures and diagnostic codes needed for quality. A quality EMR system could help to alleviate the provider hassle of moving through multiple screens and the issues with exporting data. Comments suggested that any arrangement needs to account for setup and maintenance, hidden fees, and reportability.

## TCT PCMH certification

There was discussion on The Compliance Team's Patient Centered Medical Home certification. Could there be an additional benefit for PCMH certification?

## Medicaid Block Grants

The proposed Medicaid block grants were discussed on how this might affect Medicaid-reimbursed services. There were no definitive ideas of what this may entail.

## Passwords for CAQH

It was encouraged that physicians should have a staff member in the facility have passwords for CAQH for physician renewal. This would need to be a trusted position as sensitive information is stored on that portal.

## Quality Scorecard

Quality scorecards were discussed. The MRHA will ask to see if its members have a scorecard that they would share with MCOs on targeted measures. This will help



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them to understand what measures are currently being tracked. Paula Turner shared the NMMC scorecard as an example of what the facility tracks.

MRHA member issues

PPS Loading Issue – A member suggested problem in their facility is the timeliness of their physician payment schedule loading in a timely manner in the MCO system. They were informed of the payment schedule change by MS Medicaid in December, but the rate was not adjusted until mid Spring. United Healthcare and Magnolia Health Plan both acknowledged past delays but stated that the process for updating rates is now handled much quicker, and that data had already been uploaded for the current year at the time of this meeting.

Meeting Date

It was suggested that this meeting should move from the first Thursday to the first Friday of each month.

Future Topics

What data can be tracked?

Who is hitting HEDIS measures and how can it be used for increased payment in value-based contracts?

Telemedicine

Next Meeting

Friday, February 3, 2017