Quality Assurance Task Force
February 3, 2017
NOTES

Attendees
Ryan Kelly, Mississippi Rural Health Association
Cheryl Jones, United Healthcare
Joe Jackson, Mississippi Division of Medicaid
Dr. Beverly Waterer, Magnolia Health Plan
Sharon Turcotte, Rush Health System
Ririela Williams, United Healthcare
Cynthia Douglas, Magnolia Health Plan
Paula Turner, North Mississippi Health System
Brian Enis, Magnolia Health Plan
Daisy Shipley, Children's International Medical Group
Zach Allen, Children's International Medica Group

Follow-up discussion on Medversant and delegated credentialing
Conversation took place regarding delegated credentialing services. A possible option was introduced: Medversant. This company has a 100% pass rating for audits and they use automated background systems to update information.   More information is needed to determine whether Medversant would work for both large and small practices. HUB Health is also interested in delegated credentialing services and they already serve in this capacity in Mississippi for HUB Health members.

The two MCOs again agreed that the concept of delegated credentialing was positive for them.

It was mentioned that one of the most commonly missed parts of the credentialing form is the date of provider graduation. Complete data is the key.

MRHA quality assurance staff member
The Mississippi Rural Health Association is interested in hiring a quality assurance staff member. This person would work directly with practices to improve quality scores, ensure that HEDIS measures are being documented in EMRs, and to provide hands-on support for providers in need of assistance or organizational improvement.

Discussion was held regarding the staff and resources at each MCO dedicated to providing case management and technical support to providers. There was consensus that any additional help would be valuable, and that any additional help would work best in conjunction with efforts provided from the MCOs.

Tracking HEDIS measures / contract negotiation

Discussion was held regarding HEDIS measures, how to track them, and the process by which the MCOs use these measures for contract negotiation. It was agreed that payment for contracts would increase with increased quality scoring and HEDIS reporting. Although the providers may not have a direct billable reason to report HEDIS measures, the ability to negotiate better contracted rates with the MCOs would be the direct benefit behind reporting.

The MCOs also confirmed that they are graded on HEDIS measures, so it is particularly important for them to show increases on quality reporting an quality scores. This is one of the driving forces behind incentivizing select wellness/preventive services from time to time – to improve certain needed areas.

The MCOs do not currently have a way to punish a lack of HEDIS measure reporting, therefore the incentives are limited. There is a certain disconnect between providers, coders, administrators and HEDIS measures. This must change.

Coding Workshop

Magnolia Health Plan is looking to host a coding workshop in the near future, and this may be an opportunity for the MRHA to help sponsor / promote / partner.

Billing for telemedicine services

There was discussion regarding the billing of telehealth services. Both MCOs confirmed that they pay the Medicaid-established rates for telehealth. It was discussed that the subspecialties may be the most underserved areas in telehealth and the greatest opportunity. UMMC is undergoing a telehealth pilot project with New Albany.

The MRHA and the Mississippi Telehealth Association are working to form a state-based telehealth manual. It was proposed that a manual of sorts exists on the American Telehealth Association website.

Bundled EMR Purchase

There was discussion of the MRHA assisting with the creation of a bundled EMR purchase for clinics / hospitals. It was recommended that if such was created, an

urgency on reporting ability is maintained. In addition, all components of EMR billing and practice management must be included with the software.

Newsletter Announcement Needed
Another announcement is needed to remind providers to renew their EPSDT certification. Many providers are expired and not renewing, therefore are not getting paid for their services.

MRHA member issues
No members issues to report.

Next Meeting
Friday, March 3, 2017