



Magellan of Arizona Regional Behavioral Health Administration for Maricopa County

Governance Board Minutes of January 9, 2008

PRESENT:

<p><u>Community Members of Governance Board:</u></p> <p>Matt Kennedy STAR - Adult Service Recipient Representative</p> <p>Sue Davis Vice President, emerita, NAMI - Family Member Representative</p> <p>Nick Margiotta Phoenix Police Department - Community Member Representative</p> <p>Luz Sarmina CEO, Valle Del Sol - CEO Children Provider Representative</p> <p>Ted Williams (Teleconference) CEO, ABC Housing - CEO Adult Provider Representative</p> <p>Valerie Van Auker Family Involvement Center - Family Member of Child Recipient Representative</p>	<p><u>Magellan Members of Governance Board:</u></p> <p>Chris Carson M.D. Chief Executive Officer, Maricopa County RBHA</p> <p>Andrew Mebane M.D. Chief Medical Officer, Maricopa County RBHA</p> <p>Andrea Smiley Chief Community Relations Officer, Maricopa County RBHA</p> <p>Gaye Tolman Chief Recovery and Resiliency Officer, Maricopa County RHBA</p> <p>Brenda Benage Chief System Transformation Officer, Maricopa County RBHA</p> <p>Miki Antonelli Representative for Chief Quality Officer, Maricopa County RBHA</p>
<p><u>Consultant to Governing Board:</u> Charles Curie, Principal, The Curie Group, Consultant to the Board</p> <p><u>Staff to Governance Board</u> Lynette Tolliver – Governance Board Administrator</p> <p><u>ABSENT:</u> Dan Wendt, Chief Quality Officer, Maricopa County RBHA</p>	

IN SESSION: 10:12 a.m.

Board Minutes Submitted for November 28 and December 12, 2007 Meeting:

The Board did not approve the November 28, 2007 minutes based on the need for additional review from recent edits. The Board did not approve the December 12, 2007 minutes based on additional time needed to review for edits. The Board requested to revisit at the January 23rd, 2008 Governance Board Meeting. Sue Davis volunteered to facilitate corrections.

MAGELLAN UPDATES

RBHA Updates

Chris Carson, Chief Executive Officer, Magellan of Arizona, discussed with the Board ways to improve communication of critical issues that could arise in between formal Governance Board Meetings and suggested an e-mail tree that could be managed by Andrea Smiley, Chief Community Relations Officer, Magellan of Arizona, and Lynette Tolliver, Governance Board Administrator, Magellan of Arizona, internally to ensure critical and timely information is received by the Board. The Board discussed the need to consider any liabilities in the development of this communication tool. Chris commented, “Magellan’s desire is to ensure that this Board receives information that you can respond to based on your knowledge of the community and likewise. Any feedback to this Board and support on what is going well and opportunities for improvement would be crucial.” Charles Curie commented, “This is essentially one of the responsibilities of the Board, and this is a way to equip the Board in doing their function efficiently.” Nick Margiotta commented, “I support an e-mail tree to keep us up-to-date on critical issues that we need to know about.” Sue Davis commented, “I have been in the position where information is out in the community and as a board member I am not aware of the story from Magellan’s perspective, so I support an e-mail tree to remain knowledgeable.” The Board discussed that in this process it is essential to know that communication generated is for discussion purposes and the information presented is for your information (FYI). Miki Antonelli, Chief Operations Officer, Magellan of Arizona, provided an example around the Notification of Action letters that were sent out into the community based on a technical error by Magellan and how having this e-mail tree in process could have really assisted in communicating this information

to the Board as well as updates on progress. The communication was slow to address these concerns, however once key individuals were notified, the situation was addressed immediately with input from the Division of Behavioral Health Services (DBHS), and talking points were developed in conjunction with Maricopa Consumers, Advocates, and Providers (MCAP). Magellan of Arizona then determined an estimated 800 individuals had been sent this letter in error. Sue Davis asked, "How was St. Louis involved in this process?" Miki commented, "They are not, this was a system-based issue, and the letter was just generated out of the St. Louis office." Miki advised the Board that she will keep them posted on this situation, and the Board was fine with updates on progress. Luz Sarmina asked, "How is this impacting consumers beyond an administrative or technical way?" Chris Carson assured the Board that this is an area that is being considered. Matthew Kennedy asked, "Will the website be one of the tools utilized to communicate updates to the community on this situation?" Andrea Smiley commented, "We have a message alert system on our website that can address this accordingly, as well as a direct communication tool to providers." Chris Carson assured the Board that a direct letter will be sent to all affected as well.

Operational Updates

Miki Antonelli updated the Board regarding Eligibility and Enrollment. Intake errors are estimated at around 2000. The situation came from a web error that was keeping data in an invalid state; however the error has been corrected. Magellan is now current; DBHS is satisfied with the corrections; and 95% of eligibility is accurate. There is still a chance of one or two occurrences that could happen, however the IT and DBHS OPS team are currently tracking this. There are currently no identified trends; however Magellan continues to make an effort to identify the other 5%, and one or two occurrences are currently a daily average. Chris Carson requested clarification on the source. Miki replied the web error resulted from a web submissions bug, which resulted in resubmits of submissions that were locked in our system. The Board inquired about ClaimTrak entries. Miki advised the Board that entries from ClaimTrak are close to being fixed with a manual process, and Magellan is in the process of working on an automated response. Sue Davis asked, "How many people are affected?" Miki responded, "About 900 individuals." Chris Carson advised the Board this has been a constant challenge, and the uniqueness of Arizona's model is being addressed in the scope of development. Sue Davis inquired if the Crisis System and the Magellan System currently have dual access to each other. Miki stated, "Some of the staff has access to the Magellan crisis system, and that for those who do not have access there is a means of communication with peers or leadership who possess access." Sue Davis expressed concern that the lack of access to files could result in a crisis call response delay considering the information could be received after the fact. Miki commented, "This is being reviewed for effectiveness." Miki stated that the errors resulting from ClaimTrak were at 5100; however Magellan is down to about 1200. Sue Davis asked if Magellan of Arizona still has the same level of confidence in ClaimTrak. Miki responded, "Yes, Magellan of Arizona does." Nick Margiotta asked what the realistic threshold is? Miki commented, "Nothing short of 100%." Chris Carson commented, "With eligibility it is important that Magellan aim for that 100% mark, with the understanding that there could be a small percentage of errors." Miki commented that some sites are at 100%, but some sites are at around 90%. Nick Margiotta asked, "If a consumer is in jail, is Magellan still experiencing problems in alerting the Case Manager of the incarceration from ClaimTrak?" Miki commented that ClaimTrak upgrades are not completed, but the e-mail enhancement is in place to notify staff if a consumer is incarcerated.

Clinical Update

Carole Matyas, Chief Clinical Officer, Magellan of Arizona, updated the Board by stating that Magellan was challenged by DBHS to provide an overview of the clinics. Carole provided the Board with a copy of the Clinic Status Report for review and to receive feedback on areas of focus. The Board was advised that the report is categorized in accordance to goals. Chris Carson commented, "This document serves as a status report only and not a work plan. The report is geared towards the Adult System versus the Children's System." Carole advised the Board that Magellan has in place regularly scheduled meetings that are addressing Recovery and Resiliency goals, System Structure, and Policy and Procedure goals to improve on performance. Magellan has offered 6322 classroom and 21,439 online trainings to Clinical staff. Carole stated, "The overriding theme for results is consistent communication, open dialog, consumer input on process, and, when decisions are made by this Board or in other areas, which information trickles down to front line staff. The goal is also to empower Site Administrators to take control of their sites and take accountability for areas of focus and outcomes. Commitment to these focus areas will result in best practice and improved quality." Carole stated that there is a zero tolerance policy on physical, emotional, and verbal abuse to recipients of care, and we have already begun taking action on situations when we are made aware of them. "The UPC model is on the plan as well, and although there are accomplishments, there are still opportunity areas to focus on." Carole provided some examples to include: Engaging Physicians in Recruitment Strategies, Assignment of recipients in accordance with experience of Case Managers, especially when there is a higher level of need, and basically additional focus on plans around structure. Carole stated, "Magellan is looking forward to the PNO Transition and the site visit with the Garden Lakes site and the introduction to the

Southwest Network staff. The site visit to the West McDowell site and meeting with CHOICES is scheduled at a later date.” The Board was advised there are teams at both sites to address any concerns or challenges for the next 90 days. Sue Davis commented that she was disappointed that as a Board member she had not been officially notified as to which two Direct Care Clinics had been selected to transition to which two QSPs in the Southwest and Choices networks. An announcement had not been reported at the previous meeting per a review of those Minutes. Perhaps there were other internal methods of communication of this information, but believed the Board had not been officially informed. Carole updated the Board on a discussion regarding implementing The Villages model as a possibility as we manage the existing system. Chris commended Carole on a great job overall and stated, “We are just beginning to see the fruits of our labor.” Sue Davis commended Carole as well and asked about the *Arnold versus Sarn* Status Hearing, in particular the 50 identified SMI Recipients and Magellan’s plan to address their needs in collaboration with DBHS. Chris commented, “The individuals that Magellan received a report on were visited to address any concerns by DBHS, the Court Monitor, and Magellan to the point that they received complaints from the recipients on the level of response.” Chris commented that the Board would be kept up-to-date on this situation. “A status report has not been released as of yet, but once released this Board will be updated accordingly.” Nick Margiotta also complimented Carole on her efforts and asked her, “What is your feeling regarding adequate resources at the clinics regarding seasoned individuals, and are there other resources that are needed?” Carole commented, “I have examples of clinics that have resolved situations quite well, and we will be working with the other clinics to address the gaps and possible structural pieces.” Chris responded, “We believe that it is a process management issue, and we will be addressing it accordingly.” Sue Davis asked a question about the trainings, “How do you reinforce or assess the staff’s ability to incorporate the training into their performance?” Carole commented, “Magellan of Arizona has changed the supervision tool in regards to the Office of Behavioral Health and Licensure (OBHL) by adding direct observation of staff in the new tool to assess awareness. Chris commented, “Miki Antonelli, Carole, and I have assessed the training and found it is quite robust. We have also tasked the clinics to have a plan to address field-based training and assessment to determine the reinforcement of the process.” Chris also commented, “I will be meeting with the Clinical Directors to ensure the process is adhered to.” Chris reiterated that Garden Lakes and the West McDowell Clinic will transition by March 31, 2008 and that we first needed to build the management structure to execute the process and now we are seeing the fruits of that. Matthew Kennedy asked, “Where is Magellan regarding the Satisfaction Survey?” Carole commented, “This will definitely happen, again in accordance to ADHS requirements.” Miki commented, “Magellan of Arizona surveys 1600 people to determine basic best practice concerns; however they were not actually Satisfaction Survey related.” Matthew commented, “I am still hearing some things, and would be interested in the full scope of the survey process.” Carole commented that work collaboration is taking place with Grievance and Appeals and our Ombudsman to address these concerns. Luz Sarmina asked when the Satisfaction Survey is scheduled. Chris commented, “We will begin working on planning a date.” Nick asked that Magellan consider an evaluation with the transition and then conduct the Satisfaction Survey with the remaining clinics. Brenda Benage commented that it would be a good idea to address with the AdHOC workgroups for their input.

PNO Transition Update

Brenda Benage advised the Board that DBHS requested additional information on the Network Transition Plan regarding Clinical input. The date for resubmission is January 18, 2008. Currently weekly meetings with the PNO’s are continuous to discuss the transition. The meetings are collaborative and informative in addressing the needs of the transition. Magellan will create six workgroups to address the needs, and they will report back to the core groups (Clinical, Human Resources, IT, Finance, Communications, and Legal,) and the core groups will provide oversight. The Board will receive the document for review and input. DBHS also requested a chronological list of events to address, within the three areas of focus. Nick asked if this is further detail or more substantial. Brenda responded, “It really depends, and provided the example of Housing. There is more detail needed, and Magellan will need to do a more comprehensive analysis to address their concerns.” Sue Davis said that it was her understanding that two Direct Care Clinics were to be transitioned to a Qualified Service Provider in each Provider Network Organization. Luz Sarmina asked about the criteria utilized in the selection. Chris stated, “We sat down to discuss the parameters and agreed to focus on a midsize Clinic where the Quality Service Provider (QSP) relationship was already established, and the Clinic leadership made a selection based on those parameters. Meetings then began with the PNOs to discuss the selection and the PNOs were in agreement with the selection.” Sue Davis commented, “The Case Management function will stay with Choices and SWN.” Chris commented, “We are allowing the PNO’s to make changes regarding the case management function.” Sue Davis commented, “I have concerns regarding Services versus Clinical needs for clients and how the case management and clinical functions coincide. I feel we need to include budgeting discussions and structural issues in this process.” Chris commented, “We can follow through on that.” Sue Davis asked, “Are you having hiring concerns regarding the varied salaries and the benefits packages at sites in connection with this transition, as well as staff working under new leadership?” Brenda commented, “We have addressed this by stating that the salaries will not change, but the benefits will be comparable.” Chris

commented, “We have a Human Resources sub-group to address these concerns and regarding retention at each individual site.” Nick Margiotta asked, “Does Magellan feel like they are getting a better grasp of what it takes to operate a Clinic?” Carole Matyas commented, “We are, but we are still in projection mode considering we are three months in the process regarding budgets, but analysis is still taking place daily to develop parameters.”

OLD BUSINESS

Crisis System Taskforce

Danise Leveille, Crisis System Manager, Magellan of Arizona, provided the Board an overview of the process and development of the Crisis System Taskforce. Currently the process is fragmented and there are struggles regarding provider relations. Danise commented that she was asked to develop a taskforce to begin to put structure in the process. The CEOs from the providers are invited to a Development Meeting to gain their assistance and support in identifying a key staff member to represent their organization on the taskforce. The parameters for the selected person will be: an out-of-the-box thinker and a good history working in the system. The CEOs will also be asked to schedule a meeting with their mobile staff to develop some breakout sessions to address the identified needs. Chris commented, “The Board will need to provide guidance to this taskforce, and the Board can address this at our development sessions.” Sue Davis stated, “I feel the Crisis System workers should have more access to the current clinical records of those enrolled in the system.” Chris stated, “There are barriers in this area.” Charles Curie commented, “This is a Systems Integration Area.” Andrew Mebane discussed the barriers that are in place due to the Healthcare Insurance Portability and Accountability Act (HIPAA) and provided an example regarding how pharmacies are not in discussion with one another based on their concerns of HIPAA violations. Sue Davis asked if HIPAA was a major barrier. Andrew commented, “It is the knowledge of what can and cannot be discussed, and without thorough understanding of the knowledge, the default goes to not providing information at all. So it’s more of an educational component that would need to be addressed.” Miki Antonelli commented, “This area is being addressed in the development of Crisis System needs.” Chris Carson reiterated, “The Board will need to get feedback on focus areas to this Workgroup.” Sue Davis commented, “The group of CEOs must the power within their organizations to bring about change by way of a trickle down effect.” Danise commented, “This is exactly what we anticipated.” Nick Margiotta asked, “How will you have input from the first responders (Police Department, Fire Department, etc.) on this taskforce?” Danise commented, “We will be reporting back at the Crisis Committee Meetings and will begin working with Mary Robson to begin the structure.” Chris commented, “There is a need to have a more diverse committee of community, recipients of care, family members, and providers.”

Cultural Competency

Chris Carson advised the Board that Monica De La Cerda will provide an update on the Retention Numbers of Consumers in Minority Populations at the February 27th, 2008 Governance Board Meeting.

Minimum Network Standards

Brenda Benage distributed the Annual Network Development and Management Plan to the Board and provided an overview of the Magellan Methodology on the report. The Housing numbers on the report serve as an example of some of the different methodologies. Brenda discussed with the Board that the units for Housing are not actual number of units available, but instead an actual minimum number of units utilized. Sue Davis said she has received feedback from providers that beds are not being filled and it was her understanding that they are being block-purchased by Magellan. Brenda reiterated, “This Network number is based on minimums and not actual or maximum numbers.” Brenda commented, “We are working with providers to address the disconnect in the data systems. There is a discrepancy in what is in Magellan reports versus what we receive from the providers and we will address this through collaboration.” Chris provided a general example of a provider that Magellan would have purchased beds from in block funding, however recipients could be turned away based on being at capacity.” Sue Davis commented that this might be caused by disagreement between Magellan and the provider about medical necessity for that level of care. She believed that if a provider was a member of Magellan’s network, that provider should be accepting Magellan’s clients. Chris commented, “Magellan is looking into ways to provide more incentives to providers who can address and meet the needs of high level clients.”

NEW BUSINESS

Utilization Management/Quality Management (UM/QM) Plan

Miki Antonelli will serve as the Board representative for Dan Wendt in his temporary absence. The UM/QM plan required some additional changes to be incorporated from DBHS; therefore this item will be tabled for the next Governance Board Meeting on January 23rd, 2008.

Children’s System of Care

Chris Carson commented to the Board that in this implementation process there has been a lot of focus on the Adult System and not enough discussion around the Children’s System. Magellan of Arizona has decided that we will begin to provide more focus, attention, and evaluation of the current children’s system structure. In contrast, the previous RBHA had a Children’s Department, however we believe we really need to focus on how to address concerns and build a structure that will assist Magellan of Arizona to meet the need in Maricopa County. Magellan of Arizona will be bringing in advisors to assist us in this process. Pat Hunt will be utilized to assist us in the overall structure and comes with National System of Care expertise. We will also have local expertise to assist us in this endeavor to include the DBHS, PNO Leadership, family advocacy organizations, and community partners. Magellan is concerned as well that we need to address more areas in the Children’s System. Sue Davis requested a comprehensive status report on the Children’s System. Chris commented, “Yes, however the Board will need to hear the PNO Perspective in collaboration with Magellan’s experience in a series of educational and overview sessions of the Children’s System.” The Board requested a date to receive the first report. Chris commented, “By the January 23rd, 2008 Governance Board Meeting.” Miki Antonelli asked, “Chris, do you think that the Children’s Cross Functional Team would be a good area to gather information from?” Chris advised the Board that Andrew Mebane will serve as the Chair for the Children’s Cross Functional Team and will begin to address this accordingly. Gaye Tolman referred to the DBHS System of Care Report as a tool to serve as the comprehensive status report. Luz Sarmina commented, “We (Providers) still struggle with who to contact regarding Children’s Services.” Chris commented that he is aware of this and that providers currently have more access to the RBHA than advocacy agencies and the community. Valerie Van Auker commented, “From what I am hearing in the community, there is a concern that over the past six months that there has been a dramatic increase in Out –of –Home and Out-of-State placements.” Chris commented that it is rare to have a child placed Out of State and that when it happens it is extremely minimal, however Magellan will review and get back to you with a response. Valerie Van Auker discussed the transition of the case managers through the PNO process and the impact that it is having with consumers in the community, regarding determining who is addressing their care. Chris commented, “Magellan of Arizona is aware that we need to have appropriate oversight for this and the steps mentioned earlier in reviewing and adjusting any structural concerns will assist us in addressing this area.” Brenda Benage reiterated to the Board that every provider has an assigned Provider Relations Team and they should contact their Provider Relations Liaison to assist them in getting resolution in identified areas of focus. This would include the Children’s System/PNO and the Crisis Line/MCRN.

PROPOSED NEW BUSINESS

The Board proposed the areas listed:

1. Children’s Reporting Structure
2. Contract Amendments Update – Non Titled (Old Business – Current Review)
3. Report from Quality Improvement Committee (Old Business – Current Review)
4. Clinical Liaison Report Update (report submitted by Magellan of Arizona on January 4, 2008 – pending response from DBHS)

GOVERNANCE BOARD DEVELOPMENT SESSIONS

Lynette Tolliver advised the Board that the next Board Development Session will be held on January 30, 2008 from 8:30am – 11:30am at the Magellan Administrative Office. The Board identified areas of focus for the development sessions in addition to what has previously been identified. Areas of focus for Development are:

- Further Overview and Input in the Provider Network Organization (PNO) Structure.
- Development of a Mission and Vision statement for the Crisis Team from this Board.
- Education on general Human Resource in the Phases Transition Process.
- Educational Overview on Capacity of Residential.

Lynette Tolliver encouraged the Board to contact her regarding any additional educational or development areas identified when considering that the premise for the development of these sessions is to enhance the Board’s knowledge in areas that come before this Board for consideration or approval at the formal Governance Board Meetings.

PUBLIC COMMENT

None Received

NEXT MEETING

The Board will meet on the following dates:

- Wednesday, January 24th, 2008
- Wednesday, February 12th, 2008

All meetings will take place at Magellan Health Services, 4129 East Van Buren Street, Ste 150, Phoenix AZ, 85008 – Cottonwood Conference Room from 10am – 12pm. Meeting Adjourned at 12:10pm