



**BHH Designated Provider Agency
Implementation Session**
June 24, 2016 1:30pm to 3:00pm
RVS-CVH Dutton Home



Facilitated By: DMHAS (Cheryl Stockford, Jessica DeFlumer-Trapp)

Attendance: CRMHC (Kristen Russell, Judith Moran-Lounsbury); CMHA (Deb Dutkiewicz); Bridges (Dawn Silver, Trish Kramer); BHcare (Alex Kosakowski); WCMHN (Ellen Severn); Sound (Amy Oulundsen, Enrique Juncadella, Diana Ryan); RVS (Tracey Creighton); United Services (Lori Behling); InterCommunity (Alice Figueroa, Mayda Julia-Rivera); Rushford (Jennifer Williams, Jennie Vega, Rossana Barnaby); SWCMHS (Dorothy Washington); CHR (Courtney Sheehan); CMHC (Nancy Watsky, Grace Fischer); DSS (Maureen Reault); OOC (Susan Hamel, Lauren Staiger); ASO (Dan Quinn, Amy Miller, Denise Roberts)

Phone Call-in:

1. Updates and Discussion

1. Debriefing of web-ex meeting regarding PC tracker
 - a. Reminder to send in weekly, but sign-off is only needed at the end of the year. Signatures can be typed in by the responsible parties.
 - b. Questions on tracker can be forwarded to Lauren Staiger at lauren.staiger@ct.gov or 860-418-6617
2. Data Quality and Report from DMHAS
 - a. Error report put on Tumbleweed today which will identify why some services are not going through billing interface. Should help clarify for providers why some services are not going through.
 - b. Examples of error report handed out, along with error codes and how to correct.
 - c. Providers should review the report and fix the errors in their EHR/DDaP/WITS (not on error report) as soon as possible. This may involve other programs if errors are coming from other staff. Everyone should have some responsibility in fixing these, not just BHH staff.
 - d. Service location is not a required field in DDaP, but the service location is needed to ensure we are not billing for services provided in certain locations. Service location is required for billing on waiver clients.
 - e. Fixes should be made according to when the client was enrolled. For example, if a client was enrolled in BHH on 10/15/16 and you need to fix the Medicaid ID, it should be fixed effective 10/15/16.

- f. Billable and Non-Billable programs should be reviewed. If they want to move a non-billable program to become a billable program, they should contact Jessica Deflumer-Trapp at jessicadeflumertrapp@ct.gov

3. Wise/Waiver Clients and Referrals

- a. Workflow and referral process.
 - i. Reviewed workflow steps, process, and referral form.
 - ii. BHH Directors should identify a contact person and fax number for the referral form and let ABH know at amiller@abhct.com or droberts@abhct.com
- b. Need to review providing health promotion services at a gym location, for WISE/waiver clients. Question about whether or not these services should fall under waiver/cost cap or BHH. Cheryl and Jessica to review with DMHAS statewide services. *Note: After the meeting it was determined that providers can provide a service to waiver clients at the gym, using the office as the service location.*

4. Children's Services

- a. Lists-lists with instructions went out to providers. Providers should be identifying those who they are already serving and if there are others they want to check eligibility for, they can call the toll free number. If they enroll them, they should include them in their enrollment numbers and report them separately when they send weekly enrollment numbers to ABH.
- b. Welcome Letter-ABH to send out a Word version of the letter so child providers can put on their letterhead. Will make a change to transportation wording. Don't change template language, but can add their agency info and can hand out supplemental information if needed.
- c. July Follow-up Meeting or early August to review how things are going with enrolling children, and why parents are choosing to enroll their children in BHH or not.

5. Logisticare

- a. Logisticare can provide transportation for BHH clients to get to services. Staff should state the client is getting a service at the clinic. Children are eligible for transportation, if they are the member getting services.

6. ICM Referrals to BHH

- a. Will implement statewide after the referral form is finalized with all BHH contact information.
- b. Amy to follow-up with Region 3 regarding referral status.

7. Coffee and Conversations

- a. Discussed having opportunities to meet and discuss with other groups, what is available at different places and programs.
- b. Will think about doing some in the Fall.

8. Beacon FTP Sites

- a. All FTP sites are set-up.
- b. Providers can contact Dan at Daniel.quinn@beaconhealthoptions.com if they are having issues with FTP site.
- c. Current inpatient report is for psychiatric admissions only and if a provider has no clients admitted, they won't have anyone on the report.

2. **Change Matrix Health Disparities Training and Dr. Miller/UC Integration Training Follow-up**

- a. Action plan expectations and updates-providers can modify action plans to track the strategies, actions, and updates for work being done related to the goals identified after the training.
- b. How have providers used what they learned, and what additional supports or information are needed?
 - Suggestion-BHH providers should ensure certain groups are getting appropriate screenings.
 - Rushford-created a multicultural group-for staff and clients.
 - SMHA-focused on needs for health education and supporting clients at medical appointments for monolingual clients.

3. **Upcoming Meetings**

- a. July 8th-Implementation Session @ RVS 9:00am-10:30am (Sacred Heart Info)
- b. July 8th – Health Assessment Meeting @ RVS/Webinar 11am-12pm
(State Operateds Only)

c. July 22nd Picnic-sign-up

4. July Health Observance Packets-were handed out