



Meeting Called By	Dr. Michael Smith, Chief Medical Officer				
	Clinical Advisory Committee (CAC)				
	WebEx				
Type of Meeting	1:00pm – 2:30pm				
ATTENDEES					
NAME	Present	NAME	Present	NAME	Present
Dr. Michael Smith Trillium Health Resources Chief Medical Officer	<input checked="" type="checkbox"/>	Dr. Kimberly Greer Trillium Health Resources Staff Psychologist	<input type="checkbox"/>	Dr. Paul Garcia Trillium Health Resources Medical Director of UM	<input checked="" type="checkbox"/>
Hillary Faulk-Vaughan Chairperson PAMH. Clinical Director	<input checked="" type="checkbox"/>	Khristine Brewington Trillium Health Resources VP of Network Management	<input type="checkbox"/>	Glenn Buck Vice Chairperson PORT Human Services Clinical Director	<input checked="" type="checkbox"/>
Dr. Joshua Pagano Cherry Hospital Forensic Psychiatrist	<input checked="" type="checkbox"/>	Griffin Sutton Tidal Neuropsychology PLLC Director	<input checked="" type="checkbox"/>	Dr. Robby Adams Various Providers Medical Director	<input checked="" type="checkbox"/>
Sharlena Thomas RHA State Clinical Director	<input type="checkbox"/>	Natasha Holley Integrated Family Services Clinical Director	<input type="checkbox"/>	Amanda Morgan Trillium Health Resources QM Coordinator	<input checked="" type="checkbox"/>
Dr. Diana Antonacci Psychiatrist	<input checked="" type="checkbox"/>	Gary Bass Pride in NC Executive Officer	<input checked="" type="checkbox"/>	Lauren Swain Director of Early Intervention Alternate for Khristine Brewington	<input checked="" type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>

AGENDA

1. Agenda topic: Welcome/Call to Order

Presenter(s): Hillary Faulk-Vaughan

Discussion	<ul style="list-style-type: none"> The meeting was called to order by Hillary Faulk-Vaughan at 1:00pm A quorum was present 		
Conclusions	<ul style="list-style-type: none"> N/A 		
Action Items	Person(s) Responsible	Deadline	
<ul style="list-style-type: none"> N/A 			

2. Agenda topic: Review and Approval of Previous Month's Meeting Minutes

Presenter(s): Dr. Smith

Discussion	<ul style="list-style-type: none"> The December 11, 2020 Meeting Minutes were approved with one correction by a motion from Glenn and a second from Robby. 		
Conclusions	<ul style="list-style-type: none"> There were no changes to the agenda 		
Action Items	Person(s) Responsible	Deadline	
<ul style="list-style-type: none"> N/A 			

3. Agenda topic: Follow-up Items from Previous Meeting

Presenter(s): Hillary Faulk-Vaughan/Dr. Smith

24-Hour Access to Care Line - 877.685.2415

Business & Administrative matters - 866.998.2597

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Discussion	<ul style="list-style-type: none"> Dr. Smith extended an invitation to Ryan Estes for the open seat for membership – Completed – Ryan has accepted Dr. Smith's invitation for membership. Susan emailed the December minutes for committee review for recommendations for additional Telehealth guidelines – Completed 		
Conclusions	<ul style="list-style-type: none"> N/A 		
Action Items	Person(s) Responsible	Deadline	
<ul style="list-style-type: none"> N/A 			

4. Agenda topic: QIA Review – Information and Discussion

Presenter(s): Dr. Garcia/Amanda Morgan

Discussion	<ul style="list-style-type: none"> Review of QIA Grid – Amanda presented and reviewed the summary of the active Trillium QIAs. Discussion of Interventions for QIPs – The pandemic ending is a resolution in itself and would allow providers to then be able to get back into member homes and provide the face-to-face services needed. Once the pandemic is over our numbers should dramatically improve. Other MCO's are meeting the metric for 1-7 day follow-up and Gary shared that Alliance has implemented Out Patient Plus which is a service that links Medicaid members from the hospitals, to the hospitals and out of the ED (discharging from higher levels of care to lower levels of care) and this may be helping them meet the metric. Natasha shared a recommendation for a possible intervention and stated communication with the clinical home when members present at the ED needs to be addressed. The clinical home can assist with follow-up appointments being kept. She also noted that the hospitals are responsible for scheduling after care, but when the members return home there is confusion on what they are supposed to do and they don't keep their appointments. Amanda will share this recommendation at April QIC meeting. Review of Future and Possible Ramifications of QIAs – Future QIA's continue to be a work in progress and will be shared upon completion. Dr. Garcia shared that effective July 2022 as a Tailored Plan all MCO's will be subjected to liquid damages or fines anytime measures are not met. If we do not meet the metric we are subjected to a \$50,000. In looking at our current data for 1-7 day follow-up for the past year our fines would have been \$400,000.00. The committee members were amenable to Trillium sharing comparative un-blinded data (provider name and their performance) to see where they fall with other providers in an effort to come up with some insights and strategies to improve outcomes. It was also recommended to include on the report that the data is Medicaid Only. 		
Conclusions	<ul style="list-style-type: none"> N/A 		
Action Items	Person(s) Responsible	Deadline	
<ul style="list-style-type: none"> Share recommendation for potential QIA intervention for 1-7 day follow-up with QIC for approval 	Amanda Morgan	April Mtg	

5. Agenda topic: Trillium Information Update

Presenter(s): Dr. Smith, Vanessa Gibbs, Ashley Rhea

Discussion	<ul style="list-style-type: none"> • NCQA Update and Status – Dr. Smith reported our re-survey for our second year of operation document submission is September. Our look-back period starts March 1st. The Complex Case Management file review is scheduled for November. Trillium is confident we will obtain a three year MBHO certification which will add two years to our existing accreditation. • EQR Update – Dr. Smith reported our EQR review is scheduled for April and will be virtual. This review will focus mainly on QIAs and health and safety concerns. • RFA Update – Dr. Smith shared Trillium's RFA response was submitted on February 1st. We will have a response in June. This was huge undertaking and feel very confident with regard to the overall response. Plans to publish our RFA response internally and announcing our Standard Plan Partner are in process. • Network/Benefit Update-Draft Medicaid Policy-ASAM Level 3.2-WM Clinically Managed Residential Withdrawal Management – Dr. Smith shared this is a new standing agenda item added as a reminder of communications from the State regarding changes to Clinical Coverage Policies, different programs and public comment periods. The draft Medicaid Policy-ASAM Level 3.2 WM Clinically Management Residential Withdrawal Management is up for public comment and closes at the end of the month. Some of these will open and close in between our meetings and we will be sending reminders via email. The TBI Waiver and Tailored Care Management Certification Periods are out for comment with the first round ending March 1st. There may be a second and third rounds as well. The links will be included in the email when the minutes go out. 		
Conclusions	• N/A		
Action Items	Person(s) Responsible	Deadline	
<ul style="list-style-type: none"> • Include public response period links when sending CAC minutes out for review 	Susan Massey	April Mtg	

6. Agenda topic: CAC Business

Presenter(s): Dr. Smith

Discussion	<ul style="list-style-type: none"> • Hillary shared challenges with hospital transitions and suggested the committee recommend additional hospital discharge criteria. Dr. Smith responded that we can certainly look at National Standards, State Standards or create our own standards. Hillary moved that this be added to the next meeting agenda seconded by Natasha. All were in agreement. Amanda will also add this item as an intervention to the 1-7 day follow-up QIAs. • Hillary made a motion to approve the CAC Annual Bylaws as written and Glenn seconded the motion. All were in favor of this motion. 		
Conclusions	• N/A		
Action Items	Person(s) Responsible	Deadline	
<ul style="list-style-type: none"> • Add recommendations for additional hospital discharge criteria to April agenda 	Paul Garcia	April Mtg	
<ul style="list-style-type: none"> • Add additional hospital discharge criteria as an intervention to 1-7 day follow-up QIAs 	Amanda Morgan	April Mtg	

7. Agenda topic: COVID-19 Update
Presenter(s): Dr. Smith, All Members

Discussion	<ul style="list-style-type: none"> • Questions from CAC Members – There were no significant COVID updates to discuss. Members were encouraged to get vaccinated. • PPE Status – There were no significant updates discussed for PPE. • Current Status on Network – There were no significant updates for the current status on Network. 		
Conclusions	• N/A		
Action Items		Person(s) Responsible	Deadline
• N/A			

8. Agenda topic: Telehealth Discussion
Presenter(s): Dr. Smith, Dr. Greer

Discussion	<ul style="list-style-type: none"> • Dr. Garcia opened the discussion by inquiring from members what their usage of Telehealth currently is in relation to COVID. Responses varied depending on services provided. Hillary noted they were able to contact their members more frequently using Telehealth especially with psychiatric emergencies and recommended creating a hybrid telehealth model for those that continue to be unable to meet in person. Allowing hybrid care to exist for the services where members don't necessarily have to come to an agency opens the possibility to touch more members. Dr. Garcia noted having an emergency crisis plan in place in the event something happens during a telehealth visit is a good idea and members shared their protocols for this when conducting virtual/zoom or phone appointments. Gary shared group telehealth is prohibited under the service definition and recommended Trillium research PSR member data to assess if the data confirms there are more ED visits and hospitalizations due to not being able to meet. Some members digressed without PSR and were moved to other services to meet their needs. Hillary recommended if Trillium implements a hybrid telehealth mode the reimbursement rates should not decrease, but stay equivalent to what they currently are. She also shared that allowing telephonic services for enhanced services does prevent ED visits. 		
Conclusions	• N/A		
Action Items		Person(s) Responsible	Deadline
• N/A			

Meeting Adjourned

Next Meeting Date: April 9, 2021
(All meetings convene from 1:00pm – 2:30pm)

All supporting documents are proprietary. Contact Susan Massey with any questions.

ACCEPTED BY:  4/15/2021
 Hillary Faulk-Vaughan, Chair Date