Transforming Lives. Building Community Well-Being.

Meeting Called By	Dr. Michael Smith, Chief Medical Officer
	Clinical Advisory Committee (CAC)
	WebEx
Type of Meeting	1:00pm - 2:30pm

Date: August 05, 2022

ATTENDEES					
NAME	Present	NAME	Present	NAME	Present
Dr. Michael Smith Trillium Health Resources Chief Medical Officer	\boxtimes	Dr. Kimberly Greer Trillium Health Resources Staff Psychologist		Dr. Paul Garcia Trillium Health Resources Staff Physician	
Hillary Faulk-Vaughan Chairperson PAMH. Clinical Director		Khristine Brewington Trillium Health Resources VP of Network Management		Glenn Buck Vice Chairperson PORT Human Services Clinical Director	
Arthur Flores Trillium Health Resources Deputy Chief Medical Officer		Griffin Sutton Tidal Neuropsychology PLLC Director		Dr. Robby Adams Various Providers Medical Director	
Sharlena Thomas RHA State Clinical Director		Natasha Holley Integrated Family Services Clinical Director		Amanda Morgan Trillium Health Resources QM Coordinator	
Dr. Diana Antonacci Psychiatrist		Gary Bass Pride in NC Executive Officer		Julie Kokocha Trillium Health Resources Director – Network Accountability	
Jason Swartz Trillium Health Resources Pharmacist		Benita Hathaway Trillium Health Resources Vice Pres. Population Health & Care Mgmt.		Fonda Gonzales Trillium Health Resources Director of Quality Management - Guest	
Dr. Terri Duncan Director of Bladen County Dept. of Health & Human Services		LaDonna Battle Trillium Health Resources Care Mgmt. Population Health Officer		Ashley Rhea Trillium Health Resources Member Services Dir. Guest	
Chris Hartnett Trillium Health Resources BHCL & Care Coordination Mgr. Guest					

AGENDA

1. Agenda topic: Welcome/Call to Order Presenter(s): Dr. Michael Smith

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Discussion	The meeting was called to order by Dr	. Smith at 1:00pm		
Conclusions	 A quorum was present for today's meeting. 			
	• There were no other questions or concerns identified for follow-up or			
	items recommended for corrective acti	on.	-	
Action Items	Action Items Person(s) Deadline			
Responsible				
There were no action items noted for follow-up				





2. Agenda topic: Review and Approval of Previous Month's Meeting Minutes and Agenda Presenter(s): Dr. Garcia for Dr. Smith

Discussion	• The June 3, 2022 Meeting Minutes we	The June 3, 2022 Meeting Minutes were approved with a motion by Terri		
	and a second by Gary with all member	and a second by Gary with all members in favor.		
	• There were no changes to the agenda	There were no changes to the agenda		
Conclusions	• There were no questions or concerns in	There were no questions or concerns identified for follow-up or items		
	recommended for corrective action.			
Action Items Person(s) Responsible Deadline			Deadline	
• Post June 3, 2022 minutes to SharePoint Susan ASAP			ASAP	

3. Agenda topic: Follow-up Items from Previous Meeting Presenter(s): Dr. Garcia for Hillary Faulk-Vaughan

Presenter(s): Dr. (Presenter(s): Dr. Garcia for Hillary Faulk-Vaughan			
Discussion	• Susan – Send April 1, 2022 minutes out to members for an electronic			
	vote. Completed.			
	• Susan – Post April 1, 2022 mi	nutes to SharePoint upor	n approval.	
	Completed.	_		
	Dr. Garcia – Add CAC Meeting	ng WebEx or Face-to-Fa	ce meeting	
	discussion to June's agenda.		_	
	• Dr. Garcia – Add CAC Bylaw	*	•	
	The bylaws are on today's agenda for review.			
	 Dr. Smith – Follow-up on CAC meetings WebEx or face-to-face 			
	discussion. Completed. The o	_		
	or meet in person (Greenville,	-		
	item will be discussed at the A		*	
	agenda.	ragust moeting and adde	a to the Hagast	
Conclusions	All follow-up items that are personal a	ending will be followed-	up on at the next	
Concasions	scheduled meeting.	shame will be followed	up on at the next	
	 F/u on CAC meeting discussion – Recommendations were to continue to 			
	meet virtually and have face-to-face meeting once or twice per year;			
	continue to meet virtually and have the annual meeting face-to-face with			
	an expanded agenda for a longer period of time. Our bylaws reference an			
	annual meeting, it was suggested to have it face-to-face and then if we decide to have a second face-to-face meeting it could be held 6 months			
		_		
	from that point. Hillary made		_	
	to-face meeting annually at the			
	that time we may choose the n		,	
	and the location(s) will be to b	be determined. Terri sec	onded the motion	
A 40 T4	and all were in favor.			
Action Items	1.1.1	Person(s) Responsible	Deadline	
	The first thing.			
meeting will occ	occur			

4. Agenda topic: QIA Review – Information and Discussion Presenter(s): Amanda Morgan

Discussion	Review of QIA Grid – Amanda presented and reviewed the summary of the
	active Trillium QIAs. The TCL QIA did not meet the metric (Measurement
	#41 for Jun 65.78%) for the set goal of 98% for this reporting period.
	Although previously steadily increasing towards the goal, we are attributing
	this decrease to the transition from the current delegated entity to the newly
	delegated entity. The newly delegated entity is not fully staffed yet, but are in

Conclusions	the process of hiring and training their in entities and are aware of the percent #10 (Jan-Mar 9.03%) did not meet the decrease we are overall moving in the Measurement #1 – Reduce the number reporting period. Measurement #2 – E 84.73%. Measurement #3 – IIH/ACT goal this reporting period. Hillary shar finding a large number of ACTT mem community or the ED. They are kept it to get stabilized and then are discharge them having to go back to the ED. Val Measurement #15 for the MH 1-7 Day maintain with DHB, but we continue the DMH. The Substance Use 1-7 day Fold MH 1-7 day f/u QIA in that we continue to Discussion of Interventions for QIA presented for discussion during the QI TCL QIA – The QM department over with this entity monitoring the staffing assisted with implementing a plan to be amount of time.	tage drop. The MST QIA Me goal of 14% and although the right direction. The ED QIA to of ED visits did not meet the ED follow-up visits did meet T utilizing the ED did not meet in their agency's data the bers being IVC'd in either the the ED for a long period of the ED for a long p	easurement here was a A he goal this the goal at eet the by are he f time just esulting in ed for attinue to do l for rror the he DMH wentions In working and has able
	• 1-7 Day F/U QIA's – Fonda shared that telehealth visits are counted within the measure; however, the telehealth codes were eliminated as a state benefit. Glenn shared that if a member's benefit stops even though an option for extension is available, they become self-pay and may not be included in		
	the equation. How do providers navigate through the system when members have exceeded their 12 visits and no longer have the state benefit, but they continue to present for their visits. Dr. Smith will share this discussion with QIC.		
Action Items			
state benefits ha	discussion at QIC of members whose ve stopped and they become self-pay and pacts the 1-7 F/u measures	Dr. Smith	Oct Mtg.

5. Agenda topic: Trillium Information Update Presenter(s): Dr. Smith

Trescriter(s). Dr. D	
Discussion	• Tailored Plan (TP) Update – The on-site readiness review for TP took
	place July 13 th , & 14 th . This is Trillium's second readiness review and by
	far the largest. This was a day and a half with concurrently running
	sessions. The state sent a list of clarification items and we are in the
	process of working on our response. Dr. Smith stated that we ran out of
	time during the sessions to cover what the state had requested us to cover
	within the timeframe. We continue testing our systems and working on
	TP implementation.
	• Staffing Updates – Dr. Smith introduced Dr. Flores hired as Trillium's
	new Deputy Chief Medical Director and joining us on the call today. Dr.
	Flores shared his background in family medicine and his excitement in
	joining Trillium's efforts in implementing TP. All members introduced

	themselves and welcomed Dr. Flores a the new UM Director. Akan Iyamu is o Population Health Clinical Operations Management Population Health Office staff in Finance and Care Management personnel staff required and continue t • COVID Update – Trillium's offices a employees who wish to return to work continue to work remote. Offices are a meetings. Standard precautions continu sanitizing areas, etc.). There has been a staff while working remotely. Some o have ended and we will be slowly rolli Health Emergency has been extended to Survey – Medicaid MFP Roundtable Due 5/30/22 IDD Providers – Emailed June 7, 2022. Review and response are share this information. There was no a • Clinical Coverage Policy Review/Dis Individual and Transition Support St the membership on June 15, 2022. Rev we continue to share this information. discussion. • Public Notice and Request for Comm Based Services (HCBS) Final Transi membership on July 20, 2022. Review as we continue to share this informatio discussion. • Josh Pagano's Resignation- Dr. Paga state hospital and has submitted his res appreciate his service to the committee this vacancy. Recommendations for ca	and LaDonna Battle is our. There are also additional discussion. We currently have all of ofill other open vacancing open and available for in-office. Most staff has vailable and open for facture in place (social distant no decrease in productive of the state rate COVID of the state rate COVID of the state rate covided to the membership on a always welcome as we additional discussion. Secussion – 1915i Option Service Draft Policy - Eview and response ae we additional discussion. There was no additional discussion. There was no additional discussion and response are always on. There was no additional discussion.	dent, our Care onal new of our key es. r ve opted to ce-to-face cing, ity from lexibilities Public Surveys continue to desire to desir
Conclusions	There were no questions or concerns in	dentified for follow-up o	r items
	recommended for corrective action.		
Action Items		Person(s) Responsible	Deadline
	ction items noted for follow-up		

6. Agenda topic: CAC Business/COVID Update Presenter(s): Dr. Smith/Dr. Garcia/Fonda

Discussion	 CAC Bylaw Revisions – Dr. Smith/Fonda
	Revisions to the bylaws were presented and consisted of updating NCQA
	language and adding diversity, equity and inclusion language and info.
	There were updates to objectives and title edits added. Hillary made a
	motion to approve the bylaws with recommended changes with a second
	by Robby and all members were in favor.
	 CAC Subcommittee Development – Dr. Garcia
	Dr. Garcia asked for recommendations for primary care M.D.s, providers
	or pharmacists that may be candidates to reach out to for interest in
	membership. Hillary suggested Dr. Odibo who is a primary care

	physician in Wilmington that does a wonderful job with difficult members and may be willing to consider membership. Hillary will forward contact info to Dr. Garcia. Other possible candidates may be emailed to Dr. Garcia or Susan Massey.		
Conclusions	 Fonda noted that the CAC reviews the QMIP and this needs to be corrected in the bylaws. The bylaws were approved with recommended changes and will be processed and posted on Trillium's website. There were no questions or concerns identified for follow-up or items recommended for corrective action. 		
Action Items	Person(s) Responsible Deadline		
Forward Dr. Odi	• Forward Dr. Odibo's contact info to Dr. Garcia Hillary Oct Mt		Oct Mtg.

7. Agenda topic: Annual Review of Quality Management & Improvement Plan Presenter(s): Fonda

Discussion	 Fonda presented the Quality Managem document summarizes the approach Trassurance, quality management and quality the organization. This is a comprehens and describes the activities, committee attributed to oversight and management the Clinical Advisory Committee being design our clinical practices. At the time were a lot of unanswered questions as approach we were going to take as an of the addition of a new committee titled that will report to the CEO and has been report. This report is posted on Trillium questions or concerns can reach out to There were no changes to the agenda 	rillium will take to addresality improvement practisive document about 60 ps and other processes that of quality across the agg a component in assisting the, this document was dritt relates to the method of organization for TP. Fond the Health Equity Advisor added to the flow charm's website. Anyone with Fonda for more in-depth	ss quality ces across pages long at are gency with ag to afted there or the da shared ory Board at in the h details.	
Conclusions	 Hillary stated this report was very impressive and thanked Fonda and her team for assembling this information. There were no questions or concerns identified for follow-up or items recommended for corrective action. 			
Action Items	Person(s) Responsible Deadline			
• There were no a	ction items noted for follow-up			

8. Agenda topic: Annual Review of Call Center Decision Support Tool Presenter(s): Ashley Rhea/Chris Hartnett

Discussion	Ashley presented the Call Center Decision Support Tool and reviewed it			
	in detail. This was a URAC requirement	in detail. This was a URAC requirement and going forward with NCQA		
	will change to meet new requirements.	nents. She noted that all Trillium		
	decisions support tools are developed and required by the Division of			
	Health Benefits (DHB) and the Department of Mental Health,			
	Developmental Disabilities and Substance Abuse Services			
	(DMH/DD/SAS). She presented and reviewed a view of the tool from our			
	electronic platform.			
Conclusions	There were no questions or concerns in	dentified for follow-up or items		
	recommended for corrective action.			
Action Items		Person(s) Responsible	Deadline	
There were no action items noted for follow-up				

9. Agenda topic: Clinical Practice Guidelines (CPGs)
Presenter(s): Dr. Garcia, Dr. Smith, Dr. Greer

	Jarcia, Dr. Silitin, Dr. Greet				
Discussion	Discussion of CPGs for First Episode Psychosis in Our Network				
	Dr. Garcia called for a vote to adopt the CPG for First Episode Psychosis.				
	Hillary made a motion seconded by Gary and all members were in favor.				
	 Additional CPG to Consider for the Network 				
	There were no CPGs recommended for discussion at this time and this				
	agenda item will be revisited at future meetings.				
	CPG 2021 Annual Report				
	Trillium is required to monitor at least three CPGs with one inclusive of a				
	child and adolescent CPG. The three included in this report are				
	Schizophrenia, ADHD and Opioid Use Disorder. These were adopted				
	from the American Psychiatric Association and are posted on Trillium's				
	website. Dr. Garcia reviewed the goals and outcome analyses sharing that				
	COVID did impact the data. This report will be presented to QIC and our				
	Care Management Department to hopefully address any issues and				
	improve these HEDIS measures.				
Conclusions	The First Episode Psychosis CPG was	approved unanimously.			
	No additional recommendations for interventions were suggested.				
	There were no questions or concerns identified for follow-up or items				
	recommended for corrective action.				
Action Items		Person(s) Responsible	Deadline		
There were no action items noted for follow-up					

10. Agenda topic: Open Agenda Presenter(s): All Members

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Discussion	 No open agenda items were discussed. 			
Conclusions	• N/A			
Action Items		Person(s)	Deadline	
		Responsible		
There were no action items for follow-up				

Meeting Adjourned

Next Meeting Date: October 7, 2022

(All meetings convene from 1:00pm – 2:30pm)

Submitted by Susan Massey

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