

CMHDA JOINT FINANCIAL SERVICES/ INFORMATION TECHNOLOGY COMMITTEE MEETING REPORT

Date: Thursday, October 6, 2011

Attendees: Tom Sherry, Mark Refowitz, Michael Heggarty, Don Kingdon, Mike Geiss, Doug Hawker, Lori Walker, Martin Polt, Beth Way, Teddie Fullerton, Mark Ksenzulak, Michael Laffin, Erin Valdez, Rita Samartino, Mark Bryan, John Klyver, Jackie Mortensen, Leda Frediani, Marlene Gold, Jeff Nottke, Joan Klint, Connie Cessna Smith, Ken Fu, Jane Ann LeBlanc, Michael Lucid, Bill Dollar, Michael Beaton, Pete Hernandez, Jacqi Liddiard, Essence Davis, Margo Morales, Sandy Stier, Jana Drazich, Steve Marshall, Patricia Ortega-Ruiz, Jessica Tucker, Gary Renslo. Other participants via teleconference.

Introductions/Announcements:

- Introductions provided by those in attendance and joining via teleconference.

Additional Agenda Items:

None at this time.

Topics of General Discussion:

- Update on claims payments to counties provided by DHCS representative including past cost settlements; managed care additional distribution of \$148,000 of state general fund; FY 12-13 claims forecasting which led to discussion of changes in approach to forecasting under the provisions of realignment; the supplemental payment and UPL. Short Doyle 2 processing delays and claims impact were reviewed by DHCS representative. Processing delays are impacting FFP flows to counties that are now leading to growing accruals that the counties are requesting DHCS documentation for their county budgeting process.
- MHSA update on recommended changes to revenue and expenditure report introduced by the OAC provided by DMH representative. Discussion of timeframe for submission of FY 08-09 and FY 09-10 Revenue and Expenditure Report clean up data held with members.
- MED CCC, COTS, and ITWS updates provided by DHCS representative including staffing challenges in the MED CCC unit and location of FAQs.
- Update on SPA and CPE protocol and fiscal provisions submission to CMS provided by DHCS representatives. Questions raised by member related to process and timeframe for the supplemental payment process. Update on the 1982 B claim form provided by DHCS representative. Guidance posted as DMH Letter No. 11-01.
- Short Doyle 2 updates provided, including system change schedule posted August 22 and other system changes in the queue. 5010 testing is set to begin October 17, and there is still a January 1 implementation action date. Counties indicate that the Short Doyle 2 claims denial rate has increased.

- Discussion of denials held with member's suggestion regarding the need for a true production test environment to work on errors outside of the production environment.
- Discussion of errors and denials related to MED's eligibility data errors raised by members.
- Discussion held with DHCS and member representatives on the use of the test environment vs. the production environment for claims files that are submitted after vendor changes.
- Discussion of the 277U and impact on county reimbursements held with DHCS/DMH and members. Current research is being done by DHCS on potential benefit of suspending the 277U process.
- New Medi/Medi FAQ responses to be posted by DHCS soon. Palmetto has sent out a notice that they are re-validating all Medicare providers that were enrolled prior to the passage of the Affordable Care Act.
- SWAT Team update provided by chair including focus on production delays, 5010 cutover, production test environment and 5010 contingency planning, and OHC coordination of benefits. Los Angeles County raised additional priority issues related to eligibility verification. OHC denial letter process currently in review by DHCS/DMH based on county requests.
- County to County consultation held with committee members.

Next Committee Meetings

IT Committee Meeting – Wednesday, November 2, 2011

Financial Services Committee Meeting – Thursday, November 3, 2011