

Magellan Behavioral Health of Nebraska, Inc.
Compliance Committee Agenda

June 20, 2016, 12:00 pm – 1:00 pm (CST)
Magellan Goldenrod Conference Room

Committee Members
<input checked="" type="checkbox"/> Lori Hack , <i>Compliance Officer</i>
<input checked="" type="checkbox"/> Lisa Christensen , <i>Director of Quality Management</i>
<input type="checkbox"/> Patty Hoofnagle , <i>Senior Director of Investigations</i>
<input type="checkbox"/> John Wendling , <i>Chief Executive Officer</i>
<input checked="" type="checkbox"/> Janine Fromm , <i>Medical Director</i>
<input checked="" type="checkbox"/> Andrew Shapiro , <i>Chief Operating Officer</i>
<input checked="" type="checkbox"/> Nikki Thomas , <i>Compliance Analyst</i>
<input type="checkbox"/> Teresa Danforth , <i>Network Services Director</i>
<input checked="" type="checkbox"/> Chris Rowland , <i>Chief Financial Officer</i>
<input checked="" type="checkbox"/> Jodi Ryba , <i>SIU Analyst</i>
<input type="checkbox"/> Patti Ryan , <i>Information Technology Director</i>
<input type="checkbox"/> Shameeka Jones , <i>Manager, SIU Investigations</i>
<input type="checkbox"/> May Trimmell , <i>Senior Legal Counsel</i>
<input checked="" type="checkbox"/> Vanessa Emlich , <i>SIU Investigator</i>

Section I. Policy and Procedure Review

Lori provided an update on all Local and Customized policies that were reviewed and updated during the previous quarter.

A. New and Updated Customized Policies:

Customized Policies adopted since last meeting:

- Termination of Providers from the Network -3/23/26
There were no significant changes to this policy.
- Benefit Certification and Appeal General Guidelines -3/29/26
This policy clarified what is meant by “Magellan Clinical Guidelines.”
- Medicaid: Enrollee Grievances -5/20/16
This corporate policy had significant changes, but the Nebraska practices already matched these changes. The language is being incorporated into the customized policy as needed.
- Medicaid Compliance Program -5/3/16
There were no significant changes to this policy.

B. New and Updated Local Policies or Procedures

Local Policies adopted since last meeting:

- Selection and Retention of Providers -3/2/16
There were no significant changes to this policy.
- Access to a Second Medical Opinion -5/18/16
There were no significant changes to this policy.
- Local Compliance Committee Description & Organization Chart -5/18/16
Policy was updated to reflect that the IT Department now oversees the claim appeal process.
- Policy Development, Review & Dissemination Procedure -5/18/16
There were no significant changes to this policy.
- Regulatory Compliance with Contract Requirements -5/18/16
There were no significant changes to this policy.
- Reporting of Suspected Fraud, Waste, and Abuse – 5/20/16
There were no significant changes to this policy.
- Medicaid: Third Party Liability -6/10/16
There were no significant changes to this policy.
- Medicaid: Identification of Network Capacity and Gaps in Service- 6/1/16
There were no significant changes to this policy.
- Medicaid: Nebraska provider Handbook Supplement – 6/1/16
There were no significant changes to this policy.
- Care Management Monitoring and Review- 6/6/16
The required number of audits changed in this policy.

C. Policies Currently Under Review

Corporate policy updates this quarter being reviewed to be customized:

- Medicaid: Enrollee Communication and Information Requirements (July)
Medicaid approved a proposal to reduce the materials provided to new members, as recommend by member feedback. The policy will be reviewed to see if the current language needs to be updated.
- Authorization to Use and Disclose PHI (August)
There are no significant changes expected to this policy.
- Provider Satisfaction Survey (August)
There are no significant changes expected to this policy.

Local policy updates being reviewed this quarter:

- Notification and Holding Harmless of Members in the Event of Contract Termination (July)
There are no significant changes expected to this policy.
- Covered Services & Substitute or Value-Added Behavioral Health Services (July)
There are no significant changes expected to this policy.
- Reinvestment Plan (July)
There are no significant changes expected to this policy.
- Indian Health Protections (August)
There are no significant changes expected to this policy.
- Members with Special Needs & Risk Assessment (August)
There are no significant changes expected to this policy.
- Non-Network Providers (August)
There are no significant changes expected to this policy.
- Staffing Adequacy (August)
The policy will be reviewed against expected contract amendments and updated to reflect transition responsibilities.

D. Corporate Policy Notifications:

Lori provided an update on all corporate policies that were reviewed and updated during the previous quarter.

Not applicable:

- Provider Reimbursement
Nebraska has an extensive local policy, so there would be no benefit to customizing the corporate policy.

New:

- Public Sector External Website Content Review and Monitoring Process Policy
This policy continues in development and the final draft is in review by the workgroup.
- Correspondence Production Services Policy
This policy does not have significant impact in Nebraska.
- Employee Participation in Advisory Boards and Other Outside Sponsored Committees
Typically participation had been seen as a conflict of interest and has often not been allowed. This policy provides more detail about the process to review potential conflicts in these situations.
- Reporting Abuse and Neglect
This policy now provides more direction and was distributed to directors.

Substantive Changes:

- Telecommuting
The policy now provides more detail about when telecommuting may not be appropriate for employees with performance concerns.
- Policy Development and Authority
Provides additional detail on the responsibilities for review and updating of policies.
- Network Organizational Provider Credentialing
Clarifies the required frequency of Magellan site reviews for non-accredited providers.
- Honoraria, Professional Education Credits and Outside Sponsored Events for Magellan Employees
This policy states that review by the Corporate Compliance Officer or designee is required.
- Information Sensitivity
The policy includes language that disciplinary action is possible.

- Excluded Individuals and Entities (Employees, Members of the Board of Directors, Volunteers, Contractors, Providers & Vendors)
This policy had changes to update titles.
- Call Documentation
This policy was updated to provide more detail about the elements that must be documented for each call.
- Creation and Review of Utilization Management and Related Claims Correspondence
A section on external approval of correspondence templates was added to the policy.
- Remote Network Access
This policy was updated to reflect current titles. A section was added stating that sanctions may be imposed for violations.
- Corporate Compliance Committee
The policy now requires that the corporate compliance committee meet quarterly at a minimum.
- Credentialing Program Description
Policy changes were primarily related to medical plans and do not impact Nebraska.
- Network Practitioner Credentialing and Recredentialing
Policy changes were primarily related to medical plans and do not impact Nebraska.
- Vendor Sourcing and Contracting
The policy provides a best value definition and information about diversity/equal opportunity.
- Disclosure
The policy identifies who can give approval before sharing certain types of information.

Non-substantive Changes:

- Media Inquiries
- Provider Performance Inquiry and Review
- Emergency Credentialing of Practitioner Volunteers
- Software/Hardware/Data Change Management
- Network Provider Site Visits
- Provider Not Available
- Provider Network: Ongoing Monitoring
- Provider Network Participation Appeals
- Review of Grants and Sponsorships from/to External Entities
- Provider Availability (previously titled Provider to Member Access and Density)
- Security Breach Involving Social Security Numbers

No Changes:

- Network Provider Credentialing and Exclusion Monitoring
- Appropriate Uses for Social Security Numbers
- Obligation to Report Potential Compliance Violations
- Stock Trading
- Information Technology Security

Section II. Regulation/Legislative and Training

A. Legislative and Regulatory Updates

The Nebraska Legislature adjourned on April 20, 2016. There were no bills that directly targeted Magellan during the session. Information was provided to involved parties as requested.

B. Compliance-Related Staff Trainings

Annual Code of Conduct Training was required to be completed by June 15, 2016. All staff members completed the training by the corporate deadline. A concern for CMCs was that the local training lead can not see a full staff completion list in Saba. This is being changed so that local Compliance Officers will now be able to run complete/incomplete lists for required trainings.

Section III. Compliance Reporting and Communication

A. Fraud, Waste and Abuse (FWA) Identification and Investigation Activities

There are currently 32 open cases/incidents. This is a slight decrease from 37 last quarter and 35 the prior quarter. Twelve cases are in review or on hold with MFCU, three cases have resulted in payment suspension and two cases have resulted in federal fraud charges, including one conviction. Sentencing is complete on that case. There are 74 closed cases since 9/1/2013.

B. Provider monitoring and appeals

The CMC Dispute and Appeal Review Committee continues to review provider disputes/appeals on claim denials and overpayment refund requests as needed. The number of appeals has decreased significantly, both in the initial appeal and in the cases that require committee review.

The process is in place to track State Fair Hearing holds and subsequent overpayment recoveries. State Fair Hearings continue to be resolved in favor of Magellan.

C. HIPAA & Unauthorized Disclosures

The Nebraska CMC had one unauthorized disclosure in March. This was addressed directly with the individual, as well as a reminder in the All-staff meeting. There were no unauthorized disclosures in April or May.

Desktop audits were conducted on a monthly basis. There was one violation in March, which was an unlocked PC. This is the most common violation found in the audits. There were no violations in April or May.

D. Letter/Form Development & Protection

The CMC letter/form development work group meets annually and is not due to meet until 2017. The Revised (combined) SIU findings and overpayment refund request letter continues in use. This new (combined) letter has eliminated the need to reconcile differences in claims identified in the SIU and CCD letters.

Section IV. Enforcement of Compliance Standards, Policies and Procedures

A. Identified Areas of Non-Compliance

There were no identified areas of non-compliance

Section V. Auditing and Monitoring

A. Internal Auditing Activities

The Eligibility to Capitation Reconciliation reports have been received through April 2016 and show a very small number of discrepancies. It is not anticipated that there will be concerns with resolving these issues.

B. External Auditing Activities

IPRO conducted the annual on-site audit on 5/23/16. No CAPs or significant issues were identified in the verbal summary. Feedback during the review was very favorable and a written summary has not yet been received.

Magellan participated in an MCO review as part of a CMS audit of Nebraska Medicaid on 5/18/16.

No CAPs or concerns were identified at time of review, and both Nebraska Medicaid and CMS were very complimentary of the documentation provided for review. A written summary is not expected for up to a year.

Section VI. Corrective Action Planning (CAP) and Monitoring

A. Creation of new CAPs

There were no new CAPs created during the review period and there have been no issues identified that would require a CAP.

B. Monitoring of Approved CAPs

There were no ongoing CAPs to monitor during the review period.

Section VII. Annual Review of Compliance and FWA Policies

A. Nebraska Anti-Fraud Policies

The Reporting of Suspected Fraud, Waste, and Abuse Policy was updated 5/20/16.

B. Nebraska Compliance Policies

The Medicaid Compliance Program Policy was updated on 5/3/16. The Local Compliance Committee Description & Org Chart was updated on 5/18/16.

C. Nebraska Annual Fraud & Abuse Compliance Plan

The fraud, waste and abuse compliance policies are included in annual Fraud and Abuse Compliance Plan, which is due to MLTC by June 30, 2016. Lori distributed the 2016 plan and policies to committee members for review prior to the meeting, and all feedback received was incorporated into the plan.

Included in the plan was information about site visits by SIU. The number of these visits has increased and MFCU has expressed that these results are valuable to them. Since the review in 2015 Lori has received feedback that the communication between Magellan, Medicaid, and MFCU has become seamless.

The most common FWA allegation is services not rendered, and this corresponds with national findings. There continue to be a significant number of allegations based on services that are not covered.

The plan was approved by the committee and will be submitted to Medicaid for approval.