

Magellan Behavioral Health of Nebraska, Inc.  
Utilization Management

July 21, 2016, 11:00 am – 12:00 pm  
Magellan Goldenrod Conference Room

Committee Chair: Carl Chrisman  
Minutes prepared by: Jamaree Maack

Participants	Capacity/Affiliation
Carl Chrisman	Director of Clinical Services Magellan Behavioral Health of Nebraska, Inc.
Chris Cole	Network Manager Magellan Behavioral Health of Nebraska, Inc.
Amanda Stratman	Peer Specialist II Magellan Behavioral Health of Nebraska, Inc.
Andrew Shapiro	COO Magellan Behavioral Health of Nebraska, Inc.
Lisa Christensen	VP of Quality Magellan Behavioral Health of Nebraska, Inc.
Lori Hack	Compliance Officer Magellan Behavioral Health of Nebraska, Inc.

**Prior minutes****Carl Chrisman**

Discussion: Minutes for the June meeting were approved unanimously.

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**Readmissions****Carl Chrisman**

Discussion: The readmission rate for members who were discharged from an inpatient setting during the month of February was 12.8%. This rate meets the contract requirement.

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**Ambulatory follow up****Carl Chrisman**

Discussion: The ambulatory follow up rate for individuals discharged from inpatient care in February was 58.4% at seven days and 84.9% at 30 days. These rates continue to meet identified targets.

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**Recovery Care Management****Carl Chrisman**

Discussion: RCM enrollment was 104 members in June. The acceptance rate for the program has remained consistent, but referrals were low. Additionally, many of the cases have increased in intensity and are taking much more time. There has been turn over in staffing in the program, but Care Managers have moved into the RCM rolls to maintain consistent delivery of care.

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**Requests for higher levels of care****Carl Chrisman**

Discussion: In June, Customer Service Associates resolved 69% of requests for higher levels of care. This is a high rate of resolution. Customer Service is at a low staffing level, but to this point they have maintained services and continue to meet all call statistic expectations.

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**Inter-rater reliability****Carl Chrisman**

Discussion: During the month of June the Care Managers completed the corporate Inter-rater reliability vignettes. The corporate requirement is that each individuals score a 90% or higher, which means that they can only have one error in the evaluation to pass. If a CM does not pass, they have to redo process within thirty days. Only one Care Manager did not pass.

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**Concordance rate****Carl Chrisman**

Discussion: In June the concordance rate at peer review was higher than is typical, but remained consistent at peer to peer. The team discussed the score and could not identify any reason of the variance. As it is the first month of the change, no trend has been established and the rate will be reviewed next month to determine if there is a sustained change that should be evaluated.

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**Task as requested by QIC**

**Lisa Christensen**

Discussion: Julie was not able to attend the meeting. The readmission rate for youth in 2015 will be discussed at a later date.

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**Tasks as requested by the Governance Board**

**Lisa Christensen**

Discussion: None at this time.

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**De-implementation**

**Carl Chrisman**

Discussion: Carl asked if there were de-implementation activities that should be put in place. Andrew reported that plans are in the early stages and most specific activities have not yet been determined. Carl expressed concern that the clinical team could lose staff quickly and he would like to be as proactive as possible with these tasks. It was agreed that this is a shared concern for all department.

One area that will require transition will be RCM cases, to allow the new entities to continue care without interruption. This is a process that could be built now and continuously updated as needed. This would eliminate the process of creating and completing the document when staffing is lower. Carl recommended a spreadsheet to list members, including summaries of basic historical information, what action Magellan has taken and the services that are in place.

The Clinical Advisory Committee members have declined to meet in recent month. It is unlikely that new initiatives could be moved forward on the remaining timeline, and this has eliminated agenda items.

Magellan has continues to offer to meet with the PH MCOs to coordinate care, but they have declined to have regularly schedule meetings. Magellan will remain available to them on as needed basis.

<b>Next Meeting</b>		
August 18, 2016	11:00 – 12:00	Magellan Goldenrod conference room

<b>Respectfully Submitted,</b>	(signature)	(date)
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