



**Healthy Start Coalition
of Miami-Dade**
Health Management System (HMS) Meeting
Friday, January 10, 2014
Time: 11:00am - 1:00pm
Agenda

Welcome and Introductions

Ariel Morel, Program Manager
Melvin Hernandez, Quality Improvement Specialist

HMS SIG Conference Call Wrap Up

HMS Minutes

Review of November 8, 2013 and December 13, 2013 Minutes

HMS Access – Reminder

1. Gain Access to Citrix/HMS: TO: DLHMSSupport@flhealth.gov (*NEW Domain) and CC: HMSACCESSMD@hscmd.org
2. Remove Access to Citrix/HMS: TO: DLHMSSupport@flhealth.gov (*NEW Domain) and CC: ADMIN@hscmd.org – within one (1) business day from staff's departure – Reminder: All of staff's remaining cases must be reassigned to the program manager prior to making the request.
3. Protocols for requesting New Passwords (Reminder)

Healthy Start Programmatic Updates/Changes

1. Request for Case Transfers (*NEW Include participant's zip code) Reminder: E-mail casetransfer@hscmd.org
2. Utilizing HSCMD's website for all standing meetings within 24 hours and reporting website issues in a timely manner. Register only one time.

Quality Assurance & Improvement

a. HMS & Reports

1. Local Codes in HMS – Reminder to keep using as needed
2. Compliance with QA/QI Plans
3. Infant screening upload error (January 1, 2014 and January 2, 2014)
4. E-mails regarding HMS slowness

b. Monthly & Quarterly Report

1. Reminder: Mailing of hardcopies of both Monthly and Quarterly Reports – Attention to QI/QA Team and **not** Manny Fermin
2. Clarification for Review of Classification Level at Initial Contact (Quarterly Report)

c. Monitoring Visits

d. Care Coordination

1. Timeliness Report for October and November 2013
2. Incomplete Provider Follow Up letters
3. Timeliness for sending Provider Follow Up letters
4. Documenting and coding without a Care Plan (Use Progress Notes. Must enter comments once case is assigned)
5. Proper Linking of IC's (IC's completed prior to assignment need to be linked)
6. Incomplete IC and IA forms in HMS
7. All HMS documentation must be completed prior to transferring a case (IC & IA coding and forms)
8. Documenting the participant's source of entry into HS on the first encounter comment (attempt) in HMS
9. Offering all HS Services at time of IC as well as documenting if the participant accepts the services
10. Serving cases only in your approved catchment area (Do not request cases outside your catchment area)
11. Healthy Families Documentation in HMS – Refer back to Coding Training Handouts
12. Altering forms (forms should not be altered) – Unless approval given by Coalition
13. Returned correspondence (provide a copy of the letters with DOB with the monthly report to HSCMD)

VII. Trace Tickets

None

VIII. Other Items

Open Discussion

Next HMS Meeting: Friday, February 14, 2014 at 11:00 a.m.
Healthy Start Coalition of Miami-Dade
7205 NW 19th Street, Suite 500, Miami, Florida 33126



Healthy Start Coalition of Miami-Dade

Health Management System (HMS) Meeting

Friday, January 10, 2014

Time: 11:00am - 1:00pm

Minutes

Staff Completing Minutes:

Melvin Hernandez, Quality Improvement & Assurance Specialist
Ariel Morel, Program Manager

Meeting Started at: 11:00am

Meeting Ended at: 1:10pm

HMS SIG Conference Call Wrap Up

HMS Minutes- Approved by: Heather Baker, The Village South and Chinyere Woke, Jessie Trice Community Health Center

HMS ACCESS – Reminder

1. Gain Access to Citrix/HMS: TO: DLHMSSupport@flhealth.gov (*NEW Domain) and CC: HMSACCESSMD@hscmd.org – Ariel reminded the Healthy Start Contracted Providers (HSCPs) to utilize the correct e-mail addresses when requesting access for new staff and to assure that the staff is approved on their budget by the Healthy Start Coalition of Miami-Dade (HSCMD).
2. Remove Access to Citrix/HMS: TO: DLHMSSupport@flhealth.gov (*NEW Domain) and CC: ADMIN@hscmd.org – within one (1) business day from staff's departure – Ariel reminded the HSCPs to meet the required timeline when removing staff access as well as reassigning all of staff's remaining cases to the program manager prior to making the request.
3. Protocols for requesting New Passwords (Reminder) - HSCPs were once again advised to include the staff's contact information in order to be contacted for their new password.

Healthy Start Programmatic Updates/Changes

1. Request for Case Transfers (*NEW Include participant's zip code) Reminder: E-mail casetransfer@hscmd.org: There have been several instances in which providers are accepting case transfers outside their catchment area. In order to reduce the number of cases being assigned outside the HSCPs catchment area, the participant's zip code must be included in the case transfer request e-mail message. Manny Fermin stated that some cases may be served outside the provider's catchment area when providing psychosocial or CLC services and it's in the best interest of the participant. These cases will be handled in a case by case basis and the HSCP should contact HSCMD for guidance.
2. Utilizing HSCMD's website for all standing meetings within 24 hours and reporting website issues in a timely manner. Register only one time. The importance of registering via HSCMD's website was discussed. HSCPs were advised to be cautious when registering and assure that they input their correct e-mail and register only once.

Quality Assurance & Improvement

HMS & Reports

1. Local Codes in HMS – Reminder to keep using as needed- Ariel advised the HSCPs on the importance in continuing to utilize all local codes as appropriate; Supervisor, QA/QI, Medicaid, Contact Healthcare Provider and Case Transfer. HSCMD will run reports to assure compliance and productivity.
2. Compliance with QA/QI Plans- HSCPs must adhere to their QA/QI plans as such HSCMD will be reviewing the plans to assure that they are being followed. Back up documentation will be requested during monitoring visits.
3. Infant screening upload error (January 1, 2014 and January 2, 2014) – HSCPs were advised that there was an error with the upload of infant screens and that they should wait for assignment notification in order to properly link the screen at registration and at Initial Contact.
4. E-mails regarding HMS slowness – HSCPs were advised not to e-mail Tallahassee each time the system is slow and that they are aware of the issues and are working to fix them.

Monthly & Quarterly Report

1. Reminder: Mailing of hardcopies of both Monthly and Quarterly Reports – Ariel reminded the HSCPs that both the electronic and hard copies are due on the same day. Hard copies need to be made attention to QI/QA Team and not Manny Fermin. Monthly invoicing/billing should be sent separately to the fiscal department in order to avoid delays in billing.
2. Clarification for Review of Classification Level at Initial Contact (Quarterly Report) – Melvin Hernandez provided guidance on how to complete this section of the report. It is based on the Initial Contacts completed for cases assigned for the reporting month. Initial Contacts completed for cases assigned in prior months will be placed in the Previous Month row.

Monitoring Visits

Ariel reminded the HSCPs that although the annual monitoring visits have been scheduled, HSCMD can visit more than one time per year with a 48 hour courtesy notice.



Care Coordination

1. Timeliness Report for October and November 2013 – **The timeliness reports were shared. HSCPs were reminded to continue documenting their percentages in the monthly/quarterly reporting spreadsheet's annual report section.**
2. Incomplete Provider Follow Up letters – **HSCMD staff has received incomplete provider letters. HSCPs were advised to complete provider letters in their entirety.**
3. Timeliness for sending Provider Follow Up letters – **HSCMD completed an analysis of provider letters received for MomCare referrals to Healthy Start. In October HSCMD received 16 out of 23 (69%) and 6/14 (46%) for November. HSCPs were reminded that this is a contractual measure.**
4. Documenting and coding without a Care Plan (Use Progress Notes. Must enter comments once case is assigned) – **HSCPs were reminded that they must utilize the Progress Notes in HMS when documenting cases which do not have a care plan. Comments must be entered by the provider who is assigned the case (“Case received by another HS Provider on such date, please see progress note for more information”)**
5. Proper Linking of IC's (IC's completed prior to assignment need to be linked) – **Linking is attached to specific reports therefore it is imperative that all Initial Contacts be linked to the referring screen. If IC is completed without a care plan, the HSCP must wait for assignment in order to link the IC form. IC forms must also be completed for “Unable to Complete” and “Unable to Locate” cases. The IC form can be updated and completed if needed. There should be only one IC form per pregnancy or infant. HSCPs were reminded to link the postnatal screen to the mother. The most efficient way to locate the mother when searching is to delete the name and social security and only utilize the date of birth.**
6. Incomplete IC and IA forms in HMS – **HSCPs were reminded to complete all sections of the IC and IA. There should not be any blanks on the forms. Comments must be utilized. All standard IC & IA requirements must be documented on the actual form in HMS.**
7. All HMS documentation must be completed prior to transferring a case (IC & IA coding and forms) – **It is the referring provider's responsibility to have all required documentation complete in HMS and physical file (if applicable) upon transferring a case.**
8. Documenting the participant's source of entry into HS on the first encounter comment (attempt) in HMS – **Melvin advised the HSCPs that the first encounter/attempt note in a participant's file (in HMS) must clearly indicate if the case was a screen or self referral and document the name of the referring provider or community agency.**
9. Offering all HS Services at time of IC as well as documenting if the participant accepts the services – **The Initial Contact form must contain all required documentation such as education on WIC, Medicaid, federally funded clinics, immunizations, well child check ups, post partum follow up and Safe Haven for newborns. All wraparound services must be offered whether the participant accepts or declines the services must be clearly documented as well. Historically, this documentation was inserted in the comments section but needs to be on the IC form.**
10. Serving cases only in your approved catchment area (Do not request cases outside your catchment area) - **HSCPs should refrain from requesting cases which are not in their targeted zip code areas.**
11. Healthy Families Documentation in HMS – **HSCPs were reminded to document when a case has been referred to Healthy Families by utilizing the local code in HMS and to refer back to Coding Training Handouts for specific documentation example.**
12. Altering forms (forms should not be altered) – **HSCPs were advised not to alter forms unless approval given by Coalition**
13. Returned correspondence - Melvin reminded HSCPs to include copies of returned letters with the monthly reports and to write the participant's DOB on the copy.

Trace Tickets – NONE

Other Items/Open Discussion

HSCPs were reminded that a review of the file along with a Supervisor Review (local code) and note must be completed in HMS for a paraprofessionals entering documentation in HMS. Several HSCPs reported that they have not been utilizing the Contact Healthcare Provider local code in HMS. Melvin and Ariel advised HSCPs that this code must be utilized when sending provider letters along with documenting in your progress notes or comments.

Ariel will be updating the HSCP contact list in order to include languages, psychosocial counselors and CLC.

Technical assistance visits are on hold until further notice due to several changes at HSCMD.

Manny stated that there will be a lot of trainings being offered in the near future and the HSCPs should take advantage of the training opportunities being offered. He reminded HSCPs that they could request specific trainings if needed (such as Excel) and that they may be approved by HSCMD as long as they are appropriate.