Governance Board Meeting Minutes  
February 5, 2014  
Tuckahoe Public Library  
1901 Starling Drive  
Henrico, Virginia 23229

PRESENT:

Community Members of Governance Board:  
David A. Coe – Board Co-Chair, Colonial Behavioral  
Health/CSB Executive  
Kimberly Imanian, Parent of Child/Youth Receiving Services  
Joseph Hudson, Adult Service Recipient  
Mira Signer, NAMI Virginia/Advocate for Mental  
Health Services  
Marjorie Yates, SAARA of VA/Advocate for Substance Abuse  
Services  
Rene Cabral-Daniels, Community Care Network of  
VA/Community Health Center Representative  
Kimberly White, Creative Family Solutions, Inc./Association  
Representative  

Magellan Members of Governance Board:  
William Phipps, Board Chair, General Manager/Project  
Director, Magellan of VA  
Jim Forrester EdD, Director System of Care, Magellan of VA  
Varun Choudhary MD, Medical Director,  
Magellan of VA  
Suzanne Gellner JD, Director QI, Magellan of VA  
Stacie Fischer RN, MCO Liaison, Magellan of VA  
Robay Stroble-Lucas, Director of Customer Service,  
Magellan of VA  

Staff to Governance Board  
Shellie Archer, Public Relations and Community Outreach Manager, Magellan of VA  
Paula Gomolla, Executive Assistant, Magellan of VA

Governance Board Members Present via Conference Phone

ABSENT:  
Ajah Mills, Provider Network Director, Magellan of VA

Guests:  
Anne McCabe, President-Public Sector,  
Magellan of VA  
Brian Smock, Director of Network Services,  
Magellan of VA  
Jim Stringham, SVP-Operations  
Public Sector, Magellan of VA  
Sandy Brown, Program Manager,  
Office of BH, DMAS  
Evon Bergey, VP-Public Sector, Magellan of VA  
Sherry Confer, Supervisor, Office of BH,  
DMAS

IN SESSION:

This meeting was called to order at 10:00am EST. No Board minutes were submitted for approval.

Board Welcome and Introductions

- Inaugural meeting of the Governance Board meeting called for introduction of all new Board Members. Each  
  Board member introduced themselves and explained their role and responsibilities outside the Board.
- Bill Phipps noted that the Board is evenly split between Magellan members and community representatives.  
The non-Magellan community members were selected by the community through a community selection  
committee.
- Bill Phipps explained this Board will serve to provide oversight, review outcomes and provide  
  recommendations to improve the program.
### Magellan Overview

Anne McCabe introduced herself and shared her background in the industry. She then provided a brief overview of Magellan's company structure and experience with State contracts and health plans. A full report of this was included in the Board member binders.

### BHSA Overview

Bill Phipps covered the new BHSA contract and shared Magellan’s history of serving DMAS as the Medicaid Pharmacy Benefits Manager. Bill outlined that Magellan’s approach is to work with DMAS to improve access to quality behavioral health services and improve the value of behavioral health services purchased by the Commonwealth. Magellan is administering a comprehensive care coordination model which is expected to reduce unnecessary expenditures. This includes coordination with DMAS Managed Care Organizations, promotion of more efficient utilization of services and development and monitoring of progress towards outcome-based quality measures. This includes management of a centralized call center to provide eligibility, benefits, referral and appeal information, provider recruitment, issue resolution, network management, and training. As well as utilization management of behavioral health services, quality assurance, improvement and outcomes program, service authorization, member outreach, education and issue resolution, claims processing and reimbursement of behavioral health services that are currently carved out of managed care.

Bill Phipps explained that Magellan is managing the full spectrum of behavioral health services for:
- Medicaid and FAMIS members, including members who participate in Medicaid home and community based waiver programs
- Members who are not currently enrolled in one of the DMAS managed care organization (MCO) contracts.
- The subset of community mental health and rehabilitation services that are excluded from the DMAS MCO contracts.

Bill Phipps explained Magellan is NOT managing traditional behavioral health inpatient and outpatient services for members in DMAS managed care organization (MCO) contracts.

Bill Phipps covered what is the same comparing the new BHSA program to the previous program:
- Regulations, manuals, licensing, covered services and service descriptions
- Eligible members – Medicaid
- Eligibility determination and process remains the same
- Rates, procedure codes
- Service limitations remain the same
- Services requiring authorization will continue to require authorization
- Any changes to the VICAP process, to rates, or to anything else will be announced via memos and communications in the future.

Bill Phipps covered what is different for Members and the Community at Large:
- A shared Governance Board was created to assure the voice and participation of community stakeholders in the BHSA program
- CSA offices have access to the toll-free line to inquire about Medicaid behavioral health network providers, coordinate care between CSA and DMAS covered services and to discuss care issues as needed
- Members and CSA Coordinators and providers have access to on-line tools and resources to improve health and wellness
- Magellan provides authorizations (not KePRO)
- Magellan performs Utilization Management & Care Coordination to “shape” and improve quality of care, emphasizing evidence-based practices

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• Magellan engages in Quality Assurance & Quality Improvement efforts

Bill Phipps covered what is different for Providers:
• Credentialing - NCQA compliant – more rigorous than what you may have seen before
• Magellan platforms for claims payment offers multiple claims submission methods
• Magellan of VA website is a robust source of information including training claims submission and program updates and educational materials
• Local provider relations team is dedicated to supporting the BHSA program and to provide technical assistance and problem resolution
• Magellan offers Free Continued Education Units (CEU’s)

BOARD UPDATES

No updates were provided at this first meeting

PURPOSE OF THE BOARD

Jim Stringham presented details regarding the purpose of the new Governance Board:
• Designed to promote transparency, accountability, and collaboration
• Creation of a Governance Board to include the voice and participation of all stakeholders and assure that the implementation and operation of the program is responsive to local needs
• Stakeholder representation on the Board includes members, persons in recovery, parents or custodians of children and adolescents, CSBs, private community providers, advocates, and health plan/community health representatives
• Magellan’s shared governance structure is inclusive of both Magellan and community representation with equal representation

MAGELLAN’S INDUSTRY INNOVATIONS

Bill Phipps shared this information:
• Pioneered “Reinvestment” (IA)
• Integrated Health Home initiatives
  – Iowa
  – Maricopa
• Publicly available “Dashboards” to provide stakeholders with provider performance profiles
  – First in the industry
  – Self-directed care for adults with a serious mental illness (IA)
  – Self-directed care for families of children with autism (PA)
  – Shared governance to ensure voice and participation of ALL stakeholders; subsequently implemented elsewhere
• Free online Resiliency and Recovery E-Learning Center (See Provider/Customer Partnerships Section)

COVERED SERVICES

Bill Phipps stated the current covered services are the same as those offered prior to December 1:
Community Mental Health Rehabilitative Services (CMHRS) such as:
• Intensive In-Home
• Therapeutic Day Treatment
• Mental Health Support
• Psychosocial Rehabilitation
Intensive Community Treatment
Inpatient and Outpatient Psychiatric and Substance Abuse Treatment Services such as medication management, and individual, family, and group therapies for non-MCO enrolled members.

MH/SA Targeted Case Management and Treatment Foster Care Case Management
Residential Treatment (Levels A, B & C)
EPSDT Behavioral Therapy
Substance Abuse Services

SYSTEM TRANSFORMATION

A dedicated team led by Jim Forrester here locally. Jim stated this will not be done overnight. The first year will be developing a multi-year strategy, collecting data and getting stakeholder input to identify where gaps exist. This should be locally focused due to the complexity of member's location throughout Virginia. The Governance Board should make meaningful impact and this must be recovery oriented.

• Dedicated team of professionals focused on identifying system gaps and developing community based partnerships to enhance the system
• Multi-year approach
• Strategic plan under development, includes peer services and telepsychiatry
• Year one focus is assessment and identification of system inefficiencies/gaps
• Change based on locally focused, strengths based approach
• Collaborative approach, engage stakeholders via Governance Board

OBTAINING SERVICES

Bill Phipps stated there is “no wrong door” to obtain services at Magellan. Both members and providers will get the assistance they need. It is important that we get people to right place so they get the help they need. Staff can even make appointment calls to assist members and members can make self-referrals using on-line tools and resources. Provider data base on line so they can find a particular background or approach using that search. Our team can help them navigate through that.

• Members may contact Magellan to get information on services and with help for referrals
• Members may make self referrals or obtain referrals from others
• Magellan assists in finding providers for members (if not already in Targeted Case Management)
• Some services need to be “authorized” by Magellan. These authorization decisions are made by Magellan licensed clinicians; only licensed psychiatrists make non-authorizations

CARE COORDINATION AND PEER SUPPORT

Bill Phipps explained this will be done holistically to identify the need for medical care that may impact behavioral services offered.

Care management coordination of care for members:
• Ambulatory follow-up and discharge planning for all members in inpatient and/or residential settings under our management

Coordination of care with the MCOs and PCPs:
• MCO liaison works with MCOs to develop strategies for identification of members with co-morbid mental health and medical needs and facilitate referrals into respective systems of care
• Implementation of initiatives to improve the coordination of care between PCPs and behavioral health providers:
  • PCP toolkit; PCP consult line; and PCP training program
• Peer Support is an evidence-based practice that complements care coordination that reaches people who are minimally engaged or unengaged in services
• Magellan has a dedicated Recovery and Resiliency Director. Cheryl DeHaven will be critical to this rollout.
• In January 2014, DMAS and Magellan will began implementation of:
  • Peer Bridger Pilot
  • Integrated Health with Non-traditional Services Learning Collaborative
• Partnerships and collaboration with Virginia’s peer support community present unique opportunities and Magellan has begun outreach to develop closer working relationships with peer and family organizations, support groups, etc.
• Effective Care Coordination + Wellness-informed Peer Support Services = Recovery, Increased Resiliency, and Better Quality of Life

**UTILIZATION AND QUALITY MANAGEMENT**

Bill Phipps explained that Magellan has a robust quality improvement with Suzanne Gellner leading this department. They will be implementing strategies to assure efficiency of the program and wellness for our members.

- Utilization management and quality structure provides a member-centered, recovery- and resiliency-oriented, evidence-based behavioral health care model.
- Quality management program focuses on driving and rewarding quality; measuring, continually assessing, and improving member outcomes; and ensuring the use of evidence-based practices.
- UM/QM program enables members to receive safe and appropriate treatment in the least-restrictive setting for their level of assessed risk.
- Utilization measurements can identify statistics that signal potential over- or under-utilization of specific services.
- NCQA and URAC Accreditation will be achieved within 2 years

**EARLY PROGRAM RESULTS**

Bill Phipps provided an update for first month of program (December 2013):

- 6,936 calls received by the call center
- 60% of calls received were from members
- 40% of calls received were from providers
- 2,455 calls managed by the care management team - Member assistance with determining appropriate care, precertification, other situations where clinical judgment is required
- 38 crisis calls managed - Risk of harm (suicidal/homicidal thoughts or attempts), abuse (child, elder, domestic), emotional distress
- 7,066 authorization requests processed
- 2,201 registration requests processed
- 100 calls received on the Primary Care Physician Consultation Line
- PCP resources available: BH consultation, toolkit, clinical monograph
- 63,550 claims received
- 63,256 electronic submission
- 26,225 submitted via Magellan’s free Claims Courier tool
- $6.6M claims paid in December

**BHSA ORGANIZATIONAL STRUCTURE & LOCATION**

Bill Phipps shared his team structure outlining the leaders for each area:

Medical Director – Varun Choudhary, MD
Finance Manager – Thomas Mallavarapu
Director of Provider Relations – Ajah Mills
Director of QI – Suzanne Gellner
ENSURING ACCESS TO QUALITY CARE – MAGELLAN’S NETWORK OF PROVIDERS

Bill Phipps shared the details regarding the network of providers:

- Medicaid providers were grandfathered into Magellan’s network through 3/31/14 to ensure no disruption in care to our members
- Initial credentialing is to be completed prior to 4/1/14. Credentialing is a rigorous process and is NCQA compliant to ensure member access to qualified, high quality providers
- 7,587 providers (facilities, groups, practitioners) in network
- 86% of providers are in various stages of credentialing at present
- Magellan has instituted a peer review committee to provide oversight to participation in the Magellan network
- Enhanced provider directory for ease of locating an appropriate provider

TOOLS AND RESOURCES TO PROMOTE EDUCATION AND WELLNESS

- Magellan conducts free webinars on a range of topics featuring nationally recognized subject matter experts, including a partnership with ACMHA, the College for Behavioral Leadership. Most webinars are eligible for free CE credits.
- Our Recovery and Resiliency e-Learning Center free online e-courses on Recovery, Resiliency and Peer Specialist have been viewed over 15,000 times
- We have sponsored free Peer Support Whole Health trainings for over 450 certified peer specialists in our Public Sector programs.
- Our industry-first Peer Support Whole Health and Wellness e-newsletter is distributed quarterly to over 3000 individuals and organizations.
- Magellan developed health education/literacy materials for members to improve personal health outcomes and wellness through self-management. Materials are available in English and Spanish. Examples: How to Lose Weight Safely, Smoking Cessation Basics
- Our Cultural Competency Resource Kit provides assessment tools, guidelines and resources designed to help providers enhance cultural and linguistic competencies at the organizational and individual practitioner level.

BOARD CHARTER AND RESPONSIBILITIES

Jim Stringham covered the importance of having a charter that fits this Board. There are resources on-line from other Governance Boards that are available to help form this board (http://magellantofaz.com and http://www.magellanoflouisiana.com). The charter includes authority of the Board, term limits, structure of the Board, outlines Co-Chairs and is an important contractual requirement. The charter will be finalized at the next Board meeting.

Jim Stringham stressed that work needs to be done between the monthly meetings to prepare. Participation and dialog are essential and to get passionate about the initiatives and rally around the initiatives to make significant impacts.

Bill Phipps will act as Co-Chair for the Governance Board and a member of the community should act as Co-Chair. A ten minute break was taken so the community Board members could vote on who would represent them. Once the
TERM LIMITS

Term limits were established by each non-Magellan board member pulling numbers from a bowl. The term limits are as follows:

- Kimberly Imanian – One year
- Renee Cabral-Daniels – One year
- Mira Signer – Two years
- David A. Coe – Two years
- Joseph Hudson – Two years
- Kimberly White – One year
- Marjorie Yates – One year

BOARD MEETING DATES

The Board agreed that the second Tuesday of each month from 10:00am until 12:00 noon will be the meeting schedule for the Governance Board.

COMMUNITY INPUT

- Bill Phipps requested feedback from the audience. None was provided during the session.
- Bill Phipps noted that the Magellan of Virginia website (http://magellanofvirginia.com) can be utilized for input from the community at anytime.

NEXT MEETING AND FUTURE AGENDA ITEMS

The next meeting of the Governance Board will be held on Tuesday, March 11, 2014 at the Tuckahoe Public Library, 1901 Starling Drive, Henrico Virginia 23229. Agenda items carried forward are:

1. Opportunities in regards to access/barriers
2. Pilot project updates
3. Feedback from providers and members regarding the program

ADJOURN

Bill Phipps thanked the guests from DMAS and all in attendance for joining the meeting and adjourned at 11:10am EST.