

## MQIT MEETING MINUTES

Meeting Chair: Sheri Dawson

Attendees Magellan: Don Reding, Lisa Christensen; Carl Chrisman; Sue Mimick and Lori Hack  
 GAP: Wanda Swanson; Division Sheri Dawson and Bob Bussard.  
 Phone: Region II: Kathy Seacrest and Angie Smith; Region III: Ann Tvrdik;  
 Region IV: Ginger Marr; Catholic Charties: Amber Marolf; Region V: Linda Wittmus  
 Region VI: John Murphy

Meeting Date: February 17, 2011

Attachments: Magellan Reason for Discharge

Meeting: MQIT

Topic/Issue	Discussion	Recommendations/ Action	Resp. party	Due Date	Status
<b>Welcome and Start Up</b>	<ul style="list-style-type: none"> <li>Review of Minutes and Welcome from Sheri.</li> <li>It has been decided that the MQIT meeting will be the 4<sup>th</sup> Tuesday of each month from 9:00am-10:00am and will be LIVE meeting. Will keep it with current group. If other issues need to be addressed additional attendees will be notified.</li> </ul>	Approved	Sheri Sheri & Don		Complete Complete
<b>Follow Up and Status Reports</b>	<ul style="list-style-type: none"> <li>Agenda Items from the previous meeting were reviewed.</li> <li><b>Resolution Log:</b> Adding each month to Matrix. In January 200 requests this is up significantly. In December there were 161. This is attributed to the increase in the clean up activity that has been taking place.</li> </ul>	Approved	Sheri  Don		Complete
<b>Appeals Phone Stats</b>	<ul style="list-style-type: none"> <li>Reports were passed out to members present.</li> <li>CSR - 3 minutes 14 seconds.</li> <li>Care Manager - 8 minutes 46 seconds. For the last 4 months the call time has been consistent.</li> <li>Appeals for 2011 by each region broken down.</li> </ul>		Lisa		Complete

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<b>MISC</b>	<p><b>Annual Report By County and out of region persons served</b></p> <ul style="list-style-type: none"> <li>Request for out of region persons by county will be considered for addition to annual report.</li> </ul>		Don & Bob		End of April
	<p><b>File Exchange Feed Pilot Status Report</b></p> <ul style="list-style-type: none"> <li>The date has been pushed back from March 1<sup>st</sup>. Waiting for full files so edits &amp; other things can be done. The hope is that this will be ready by the end of March.</li> </ul>				
	<p><b>Administrative discharge Status Project and D/C Regional/Provider Meetings.</b></p> <ul style="list-style-type: none"> <li>Administrative discharge 873 records have been cleaned up.                             <ul style="list-style-type: none"> <li>➤ November 2009 Discharge Report 18,526 records.</li> <li>➤ December 2010 Discharge Report 7,685 records.</li> <li>➤ January 2011 Discharge Report 6,812 records.</li> </ul> </li> </ul>	<p>Should be doing edit registration, change year &amp; date then go in from new &amp; existing. Do email blast about registrations.</p>	Sheri & Bob	<b>Next mtg</b>	
	<p><b>County of Admissions and County of Residence</b></p> <ul style="list-style-type: none"> <li>This is being defined as where the client came from, where they will return to and where they currently live.</li> </ul>				
	<p><b>Discharge Status Drop Down "Transfer":</b></p> <ul style="list-style-type: none"> <li>How is this being used?</li> <li>Are clients transferring within the program to different levels of care?</li> <li>Are they transferring to a new place?</li> </ul>	<p>Will work on discharge data drop down and work with definition clarification.</p>	Sheri & Bob	1 mo to 6 wks	

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	<ul style="list-style-type: none"> <li>Need to know how people are using the transfer field. Most have replied that they use it within their own agency for either a step down program or higher level.</li> </ul>				
<b>Next Meeting</b>	April 26, 2011 9:00 – 10:00 a.m.				

Respectfully submitted,

Eva Abbey 2/18/2011  
 (Name of minute's taker) (Date)

Sheri Dawson 2/18/2011  
 (Name of Chair) (Date)



SEARCH

- My Practice
- Nebraska
  - New Registration
  - New Registration From Existing
  - Edit Registration
  - New Discharge Summary
  - View Discharge Summary
  - TAD Reports
  - Auth Reports
  - Reports

Discharge :: New Discharge Information [Help?](#)

Cadillac Services, LLC

**Discharge Date:**    
**Date of Last Contact:**

**First Name:**  **Middle Initial:**  **Last Name:**

**Suffix (Jr., Sr., III, etc.):**   
**Previous Last/Maiden Name:**

- {None Selected}
- Choose to decline additional treatment
  - Client seen for assessment only/one time contact
  - Death, not suicide
  - Death, suicide completed
  - Incarcerated
  - Left against professional advice (drop out)
  - Other
  - Terminated by facility
  - Transferred to another service
  - Transferred to other SA Tx prog - did not report
  - Transferred to other SA Tx program
  - Treatment completed
  - Unknown
- {None Selected}

**ZIP Code:**

**Legal Status:**

**Mental Health Board Disposition:**