



Meeting Summary

Following is a summary of issues discussed at the DHMH Stat, held on January 31, 2011. Analysis is provided by StateStat and the Governor’s Delivery Unit (GDU).

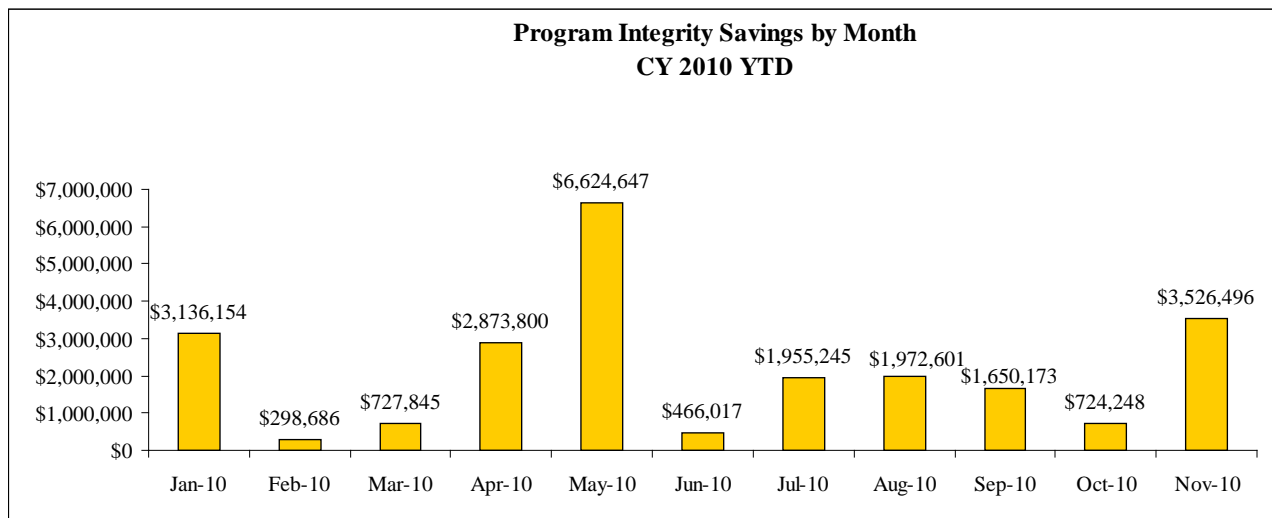
General Observations

- The following issues will be the focus of this executive briefing memo:
- Health IT
- Operations/Overtime
- Health Care Reform
- Repeat Audit Findings
- Alcohol and Drug Abuse Administration (ADAA)

Health IT. According to the CRISP monthly status report, DHMH planned to go live with Howard County and Frederick Memorial in January. The Department provided StateStat with a map of hospitals

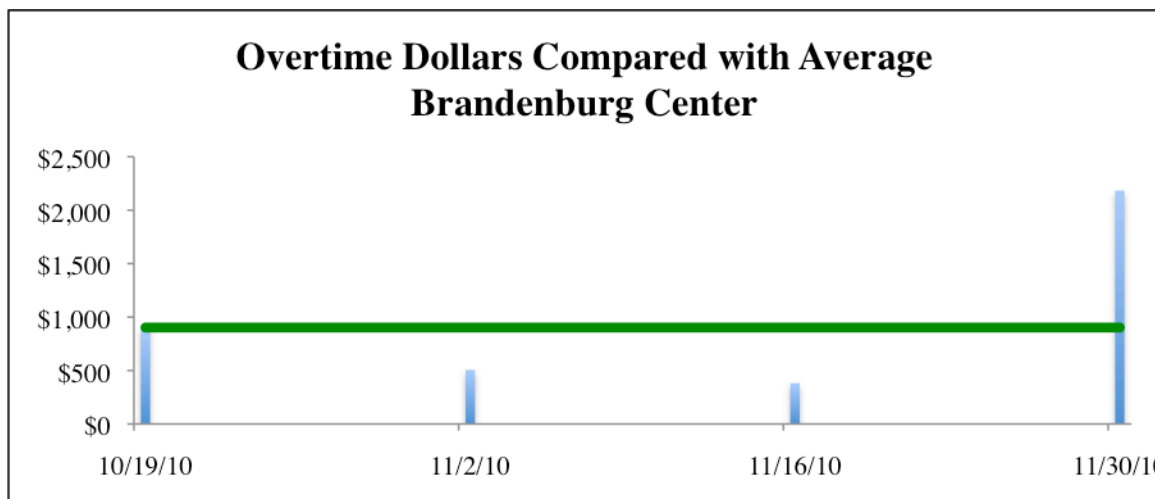
Operations/Overtime

- **Program Integrity Savings.** In November, program integrity savings reached the highest point since May 2010. Medicaid recoveries in November 2010 increased slightly, after dipping in October. Cost avoidance—or claims denied prior to payment—has been zero, as shown in the table below.



	Aug-10	Sep-10	Oct-10	Nov-10
MA Recoveries				
Recoveries	\$0.00	\$9,994,242.00	\$5,048,488.00	\$6,861,502.00
Cost Avoidance	\$0.00	\$0.00	\$0.00	\$0.00

- **Overtime.** Overtime dollars at Brandenburg were above the FY 2011 average for the two-week period beginning 11/30/10 as shown in the chart below. The center has eight residents, 136 staff members, and approximately 12 contract employees. The panel responded that the increase in overtime dollars may be related to the reduction in employees.

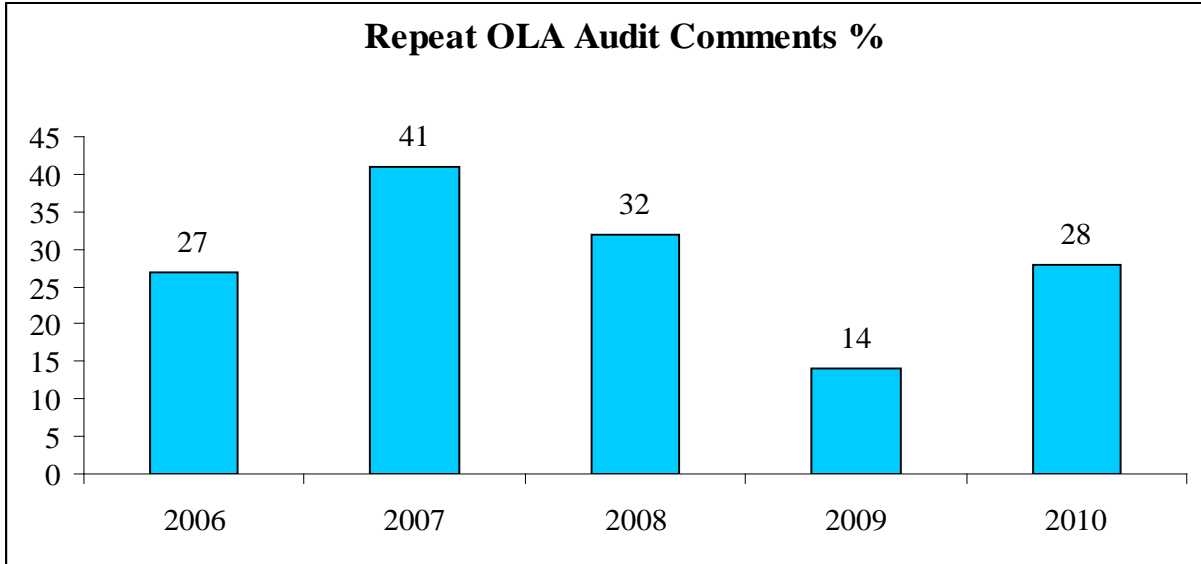


Health Care Reform

- **Health Reform Coordinating Council Recommendations.** One of the recommendations of the Health Reform Coordinating Council is to encourage active participation of safety net providers in health reform and new insurance options.

Repeat Audit Findings

- According to the Analysis of the FY 2012 Maryland Executive Budget conducted by the Office of Legislative Audits (OLA), 35 percent or more repeat audit findings are of some concern. After exceeding the 35 percent threshold in fiscal 2007, the number of repeat findings for DHMH fell in both fiscal 2008 and 2009 before rising again in fiscal 2010 as shown in the chart below.
- For the purpose of this analysis, performance analysis review is limited to measures of specific administrative activities of the units included in the DHMH Administration analysis rather than larger system measures. The measure illustrates how many audit comments for DHMH units with audit reports in that fiscal year are repeated from the previous audit of the same unit. While the measure is imperfect, since it does not take into consideration the severity of different audit comments, it does point to some measure of effort to improve fiscal compliance.



ADAA

- **Bupe Patients.** The number of patients receiving Bupe treatment decreased slightly in October as shown in the chart below. Other measures suggested by ADAA include:
 - Average daily active patients
 - Length of stay of treatment through all levels of care (not just outpatient)
 - How many patients that are in Level III.7 (residential) make it to a lower level of care (halfway house, IOP, outpatient etc)
 - How many patients are in the Continuing Care level of care

