

QI Spotlight

February 2006

The following is the Executive Summary from the 2004-05 QI Annual Program Evaluation.

The QI Program of CBHNP systematically monitors and evaluates the quality and safety of clinical care and the quality of service by CBHNP and network providers. Quality of care is defined as the degree to which health care services for individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge. This approach looks both *outward* to the provider network and *inward* to the provision of services by CBHNP to Members and providers.

The CBHNP QI Program has been organized around ten Strategic CQI Initiatives. These are listed below with highlights of some of the activities from the 2004-05 Contract Year:

1. Access
 - Interventions to improve access to routine care appointments continued to be a strong focus
 - Established additional specific access measures for Targeted Case Management, BHRS evaluations, and psychological testing
 - Reinvestment funding by counties improved access to substance abuse treatment via the scheduled opening of a new methadone maintenance / opioid treatment center in Lebanon County
2. Appropriateness
 - Closely monitored service denial and grievance trends, with a significant reduction noted in both denials and grievances
 - Children's BHR service delivery percentage continued to increase, approaching the 70% performance goal
3. Competency
 - Provider Profiling and Treatment Record Reviews of high-volume providers expanded and were principal tools for provider performance monitoring
 - Notable improvement was seen in the treatment record documentation by providers
 - A CRNP Pilot Project for initial evaluations was initiated and completed in Perry County, with planned expansion to other counties
 - Improved the "best practice" documentation standards for Clinical Care Managers to include the ongoing monitoring of timeliness, proper written notification, application of medical necessity criteria, and identification of high risk and quality of care issues
4. Consumer and Family Involvement
 - Integrated findings of Member and Provider satisfaction survey processes, including Consumer / Family Satisfaction Team(C/FST) surveys by CSS, Inc.
 - With stakeholder partners, completed transition of C/FST surveys to revised requirements for a Member satisfaction process specific to provider and level of care
 - Initiated use of an external vendor for the ECHO Member Satisfaction Survey
5. Continuity and Care Coordination
 - Met established performance objectives for readmission rates and completed a Barrier Analysis to identify additional areas for improvement
 - Initiated OMHSAS pilot project for readmission rates of Seriously Mentally Ill persons

- in Lebanon County
 - Established compliance with revised quarterly reporting requirements and ongoing measurement of ambulatory follow-up rates after hospitalization
 - Established compliance with revised quarterly reporting requirements and ongoing measurement of youth receiving substance abuse services
 - Clinical Practice Guideline measures were initiated for the ADHD and Bipolar Disorder guidelines
 - Identified and completed continuity and coordination activities between Behavioral Health and Medical Care
 - Implemented Information System enhancements for Care Managers to quickly identify Special Populations, including individuals with Co-Occurring Disorders, High-Risk, Autism Spectrum Disorders, and MR Dual Diagnosis
6. Diversity and Cultural Competency
 - Monitored penetration rates and treatment denials by race and county for any identified health disparities
 - Continued the focus on network capacity of Spanish-speaking providers
 - Reinstated provider cultural competency assessments during credentialing site visits
 7. Outcomes and Efficacy
 - Completed new technology assessment of telepsychiatry
 - Achieved continued progress and a re-design of the CBHNP Children's Outcome Monitoring Program in partnership with the University of Maryland
 8. Prevention and Community Outreach
 - Implemented two preventive behavioral health programs – Early Identification of ADHD and Improving Treatment Compliance for Adults with Depression
 9. Safety
 - Expanded Critical Incident reporting categories, inclusive of all seclusion and restraint incidents. As a result, submitted Critical Incident reports increased to 1,644 for the year, from 346 the prior year.
 - Completed RTF Restraint Analysis by facility and included in Provider Profiling
 - Quality of Care Council identified and investigated 94 issues, and will set additional restraint review triggers in 2005-06 as a safety measure
 - Completed quarterly Complaint Analyses and included monthly complaint updates for ongoing complaint monitoring by the Credentialing Committee
 10. Service Excellence
 - Telephone service access continued to exceed stringent performance goals
 - Continued reduction of overall claims denials and claims denial percentages for reasons of No Authorizations and Untimely Filing
 - Continued improvement in the timeliness of administrative appeal decision-making and notification

All stakeholders, including Members, providers, counties, the Pa. Department of Public Welfare, and CBHNP employees are encouraged to reference this QI Program Annual Evaluation. CBHNP strives for transparency in its HealthChoices managed care operations. All Quality Improvement documents including this evaluation and the QI Program Description are available upon request to any stakeholder.