



## **2017 Behavioral Health Quality Improvement Program**

### **Evaluation Executive Summary**

This Executive Summary provides an analysis and evaluation of the overall effectiveness and key accomplishments of the Behavioral Health Quality Improvement program for Health Care Service Corporation (HCSC), Inc.

### **2017 Accomplishments**

1. Since the inception of the Increasing Community Tenure Quality Improvement Project, readmissions for the identified Commercial and Retail high re-admitters decreased significantly at 78.2% and 76.6%, respectively.
2. Reporting for complaints and adverse incidents was streamlined across all lines of business.
3. Expanded member and provider satisfaction surveys to include facility services received and facility providers.
4. Updated adverse incident process to include incidents occurring in the last 30 days versus the last 90 days to better identify cases where there is an ability to have more of an impact.
5. Received a National Committee for Quality Assurance (MCQA) Accreditation “Commendable” rating in partnership with BCBS NM.
6. External Quality Review Organization Performance Measure (PM)/Project Improvement Plan (PIP) Audit Results indicated Full Compliance (100%) for 2014, 2015 and 2016 with the PM score only (PIP score pending).
7. Implemented the Outpatient Incentive Project in New Mexico to improve Centennial Care (NM Medicaid) Performance Measure around 7-day follow up after hospitalization and Healthcare Effectiveness Data and Information Set (HEDIS) seven-day and thirty-day follow up after hospitalization, as well as a Depression Screening Incentive project to improve outcome rates on the associated Clinical Screening for Depression performance improvement project.
8. The Follow-up After Hospitalization Measure achieved greater than the two (2) percentage point improvement target from 2016 to 2017.
9. Successful completion of the 2017 Behavioral Health Consumer, Family/Caregiver Satisfaction Project (CSP), with marked improvement of 3.9 and 4.1 percentage points, respectively, on the Access Domain for both adult and family surveys from 2016 to 2017.
10. The Behavioral Health (BH) inter-rater reliability measure for Government Programs Utilization Management achieved a score of 90.9% agreement.
11. One Hundred percent (100%) compliance for timely resolution of Behavioral Health Adverse Incidents, Critical Incidents and Complaints/Grievances.
12. Embedded Care Coordinators or Recovery Support Assistants with lower levels of care providers in 2017, expanding from only acute hospitals with BH beds in 2016, to address members’ needs and facilitate transitions to lower levels of care.

### **Program Focus for 2018**

Based on the review of the 2017 program goals, an increased understanding of barriers to improvement, and attention to lessons learned during the year, the following primary areas for focus of the HCSC BH Quality Improvement Work Plan for 2018 include:

1. Measure, monitor, and continuously improve performance of behavioral health care in key aspects of clinical and service quality for members, providers, and customers;
2. Maintain a high level of satisfaction among providers and members;
3. Focus continuous quality improvement efforts on those priority areas defined in the annual BH QI Work Plan.
4. Increase the rate of seven-day and thirty-day ambulatory follow-up after psychiatric hospitalization for mental health.
5. Improve the integrated delivery of behavioral health and medical care to members with co-morbid conditions.
6. Measure, monitor, and continuously improve performance of behavioral health care in key aspects of clinical and service quality for members, providers, and customers;
7. Achieve a two-percentage point improvement from baseline over a one-year period for key performance metrics.
8. Collaborate with Pharmacy Department to consider extending Pharmacists Adding Value and Expertise (PAVE) to antidepressant medication.
9. Continue initiative of incentivizing outpatient providers to see members for follow-up sessions within seven-days post discharge.
10. Continue initiative of incentivizing providers to screen for depression and report outcomes.
11. Determine how quality interventions impact the outcomes of the yearly Behavioral Health Consumer, Family/Caregiver Satisfaction Project surveys.