Behavioral Health Concepts, Inc.

Overview of a Behavioral Health External Quality Review

March 8, 2023



Presenters

CalEQRO – Behavioral Health Concepts, Inc.

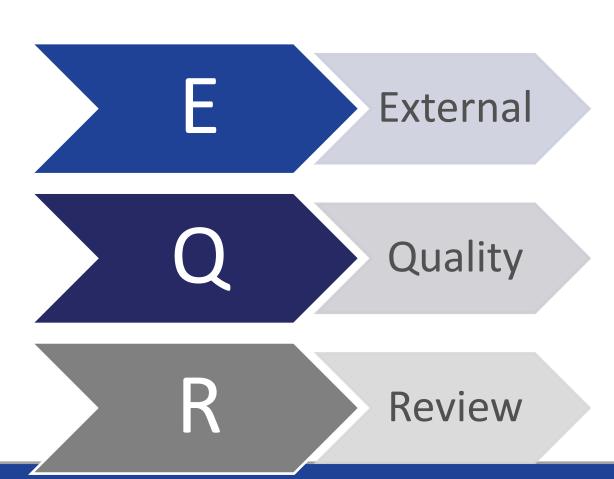
Samantha Fusselman, LCSW, CPHQ – Executive Director

Patrick Zarate – Assistant Director

Leah Hanzlicek, PhD, MSW – IS Reviewer Supervisor

External Quality Review (EQR)

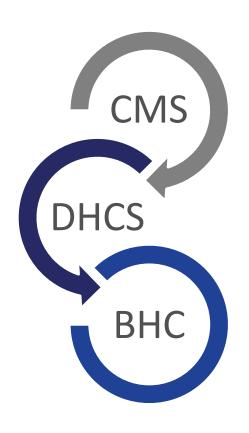




- EQR: analysis and evaluation of aggregated information on access, timeliness, and quality of health services that a Managed Care Plan or its contractors furnish to Medicaid beneficiaries.
- External Quality Review Organization (EQRO): an organization that meets CMS competence and independence requirements to perform EQR, EQR-related activities, or both. An EQRO is the only entity that may conduct an EQR.

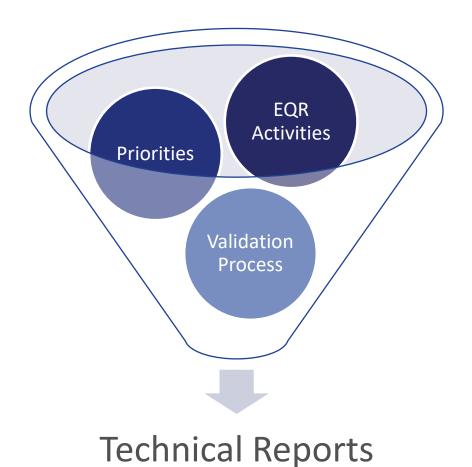
42 C.F.R. § 438, Subpart E

California's Behavioral Health EQR



- CMS: Establishes Federal EQR Protocol
- DHCS: Single State Medicaid Agency –
 Manages All EQRO Contracts
- BHC: California's Behavioral Health EQRO
 - 56 Mental Health Plans (MHPs)
 - 31 Drug Medi-Cal Organized Delivery Systems (DMC-ODSs)

Core Elements of the BH EQR



EQR-Related Activities*

Mandatory EQR Activities

Protocol 1: Validation of Performance Improvement Projects (BHC)

Protocol 2: Validation of Performance Measures (PMs) (BHC)

Protocol 3: Review of Compliance with Medicaid Managed Care Regulations

Protocol 4: Validation of Network Adequacy (BHC)

Optional EQR Activities

Protocol 5: Validation of Encounter Data Reported by the MCP

Protocol 6: Administration or Validation of Quality-of-Care Surveys (BHC)

Protocol 7: Calculation of Additional PMs (BHC)

Protocol 8: Implementation of Additional Performance Improvement Projects

Protocol 9: Conducting Focus Studies of Health Care Quality (BHC)

Protocol 10: Assist with Quality Rating of Medicaid and CHIP MCOs, PIHPs, and PAHPs



Priorities

- Access, Timeliness, Quality
- Outcomes
- Strengths, Opportunities,
 Recommendations
- Sharing Best Practices
- Technical Assistance



Validation Process

- Cal-EQRO Calculated PMs
- Documents Review and Validation
 - CalEQRO Forms
 - PIPs
 - Performance Measures
 - Source Data
- Site Review Sessions
 - Core Agenda Sessions
 - System Validation Sessions
 - Consumer Validation Sessions

Data Used to Generate CalEQRO PMs

MHP Reviews

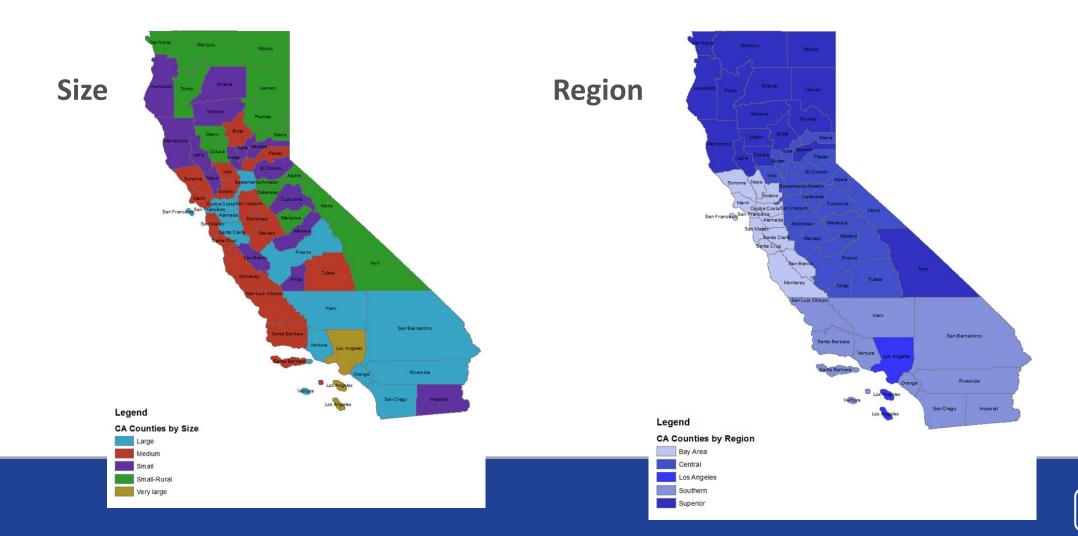
- Monthly Medi-Cal Eligibility Data System Eligibility File
- Short-Doyle/Medi-Cal Approved Claims
- Inpatient Consolidation File
- Consumer Perception Survey (CPS)*
- MHP-Provided Assessment of Timely Access (ATA)

DMC-ODS Reviews

- Monthly Medi-Cal Eligibility Data System Eligibility File
- DMC-ODS Approved Claims
- California Outcomes Measurement System (CalOMS)
- American Society of Addiction Medicine (ASAM) level of care (LOC) data
- Treatment Perception Survey (TPS)
- DMC-ODS-Provided ATA

^{*}Currently analyze annual aggregated statewide data

California County Comparisons



Access Performance Measures

- Indicators:
 - Medi-Cal Eligibles and Beneficiaries Served
 - Penetration Rates (PR)
 - Average Approved Claims per Beneficiary Served (AACB)
 - Units of Service
- Variables:
 - Age
 - Race/Ethnicity
 - Eligibility Category





Statewide – Penetration Rates by Race/Ethnicity – MHP Examples

MHP Example 1

| Race/Ethnicity | Annual Eligibles | Beneficiaries Served | PR MHP | PR State |
|------------------------|---------------------|-------------------------|--------|----------|
| African-American | 49,863 | 2,913 | 5.84% | 7.64% |
| Asian/Pacific Islander | 70,049 | 1,565 | 2.23% | 2.08% |
| Hispanic/Latino | 374,280 | 9,966 | 2.66% | 3.74% |
| Native American | 3,788 | 213 | 5.62% | 6.33% |
| Other | 284,205 | 11,377 | 4.00% | 4.25% |
| White | 174,038 | 9,586 | 5.51% | 5.96% |
| Total | 956,223 | 35,620 | 3.73% | 4.34% |

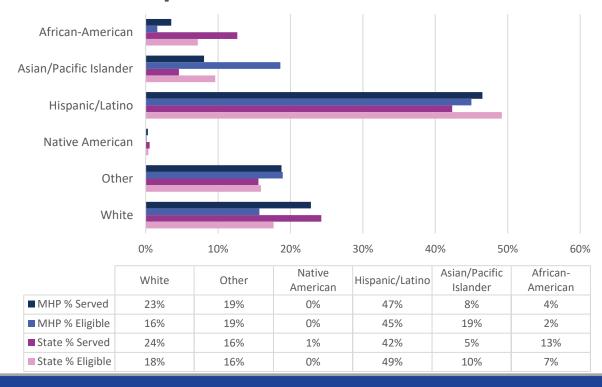
MHP Example 2

| Race/Ethnicity | Annual Eligibles | Beneficiaries Served | PR MHP | PR State |
|------------------------|---------------------|-------------------------|--------|----------|
| African-American | 15,436 | 900 | 5.83% | 7.64% |
| Asian/Pacific Islander | 177,504 | 2,055 | 1.16% | 2.08% |
| Hispanic/Latino | 429,250 | 11,831 | 2.76% | 3.74% |
| Native American | 1,376 | 77 | 5.60% | 6.33% |
| Other | 180,793 | 4,772 | 2.64% | 4.25% |
| White | 150,035 | 5,807 | 3.87% | 5.96% |
| Total | 15,436 | 900 | 2.67% | 4.34% |

Statewide – Proportion of Beneficiaries Served, Relative to Eligible Population, by Race/Ethnicity

MHP Example 1 African-American Asian/Pacific Islander Hispanic/Latino Native American Other White 0% 10% 20% 30% 40% 50% 60% Asian/Pacific Native African-White Hispanic/Latino Other American Islander American ■ MHP % Served 27% 32% 1% 28% 4% 8% ■ MHP % Eligible 18% 30% 0% 39% 7% 5% ■ State % Served 24% 16% 1% 42% 5% 13% ■ State % Eligible 18% 16% 0% 49% 10% 7%

MHP Example 2



Three Year Trend of PR and AACB, Overall – MHP Example

Penetration Rate



Average Claims



Units of Service for Adults CY 2021 – MHP Example

| | | MHP N = | 14,108 | | Statewide N = 391,900 | | |
|--------------------------------|-------------------------|---------------------------------|------------------|--------------|----------------------------------|------------------|-----------------|
| Service Category | Beneficiaries Served | % of Beneficiaries Served | Average Units | Median Units | % of Beneficiari es Served | Average Units | Median Units |
| Per Day Services | | | | | | | |
| Inpatient | 4,145 | 29.4% | 28 | 12 | 11.6% | 16 | 8 |
| Inpatient Admin | <u>≤</u> 10 | - | 8 | 9 | 0.5% | 23 | 7 |
| Psychiatric Health Facility | 14 | 0.1% | 10 | 7 | 1.3% | 15 | 7 |
| Residential | <u>≤</u> 10 | • | 31 | 31 | 0.4% | 107 | 79 |
| Crisis Residential | 508 | 3.6% | 17 | 14 | 2.2% | 21 | 14 |
| Per Minute Services | 3 | | | | | | |
| Crisis Stabilization | 2,497 | 17.7% | 1,523 | 1,200 | 13.0% | 1,546 | 1,200 |
| Crisis Intervention | 2,211 | 15.7% | 161 | 113 | 12.8% | 248 | 150 |
| Medication Support | 7,385 | 52.3% | 234 | 150 | 60.1% | 311 | 204 |
| Mental Health Services | 7,384 | 52.3% | 646 | 262 | 65.1% | 868 | 353 |
| Targeted Case Management | 4,310 | 30.6% | 264 | 124 | 36.5% | 434 | 137 |



Services Used by Beneficiaries CY 2021 – DMC-ODS Example

| County | Statewide | | | |
|----------------------------|----------------|---------|---------|---------|
| Service Categories | # | % | # | % |
| Ambulatory Withdrawal Mgmt | 0 | 0.00% | 41 | 0.03% |
| Intensive Outpatient | 135 | 11.81% | 14,586 | 9.73% |
| Narcotic Treatment Program | 212 | 18.55% | 40,196 | 26.81% |
| Non-Methadone MAT | <u><</u> 10 | - | 7,837 | 5.23% |
| Outpatient Drug Free | 438 | 38.32% | 44,111 | 29.42% |
| Partial Hospitalization | 0 | 0.00% | 19 | 0.01% |
| Recovery Support Services | - | - | 5,439 | 3.63% |
| Res. Withdrawal Mgmt | 64 | 5.60% | 10,869 | 7.25% |
| Residential Treatment | 268 | 23.45% | 26,859 | 17.91% |
| Total | 1,143 | 100.00% | 149,957 | 100.00% |



Timeliness PMs

- Indicators:
 - Offered Appointments
 - Delivered Services
 - Follow-up after Acute Care
 - No Shows
- Data Sources:
 - County Report
 - Medi-Cal Claims
- Variables:
 - Non-Urgent vs Urgent Requests
 - Service Type
 - Population Subgroup



Assessment of Timely Access – MHP Example

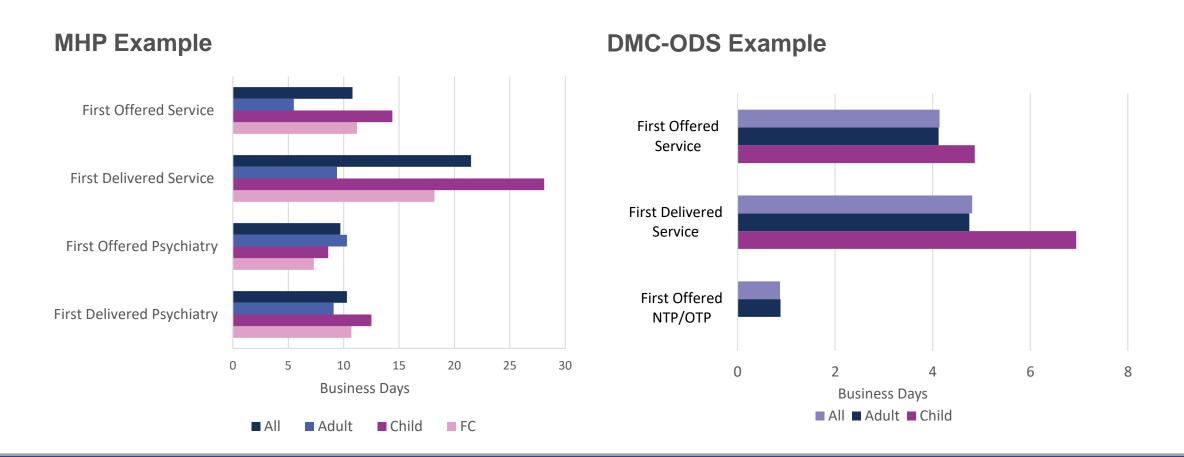
| Timeliness Measure | Average | Standard | % That Meet Standard |
|------------------------------------------------------------------------------------------------|-----------------------|-----------------------|-------------------------|
| First Non-Urgent Appointment Offered | 10.8 Business Days | 10 Business Days* | 79.3% |
| First Non-Urgent Service Rendered | 21.5 Business Days | 10 Business Days** | 51.4% |
| First Non-Urgent Psychiatry Appointment Offered | 9.7 Business Days | 15 Business Days* | 77.3% |
| First Non-Urgent Psychiatry Service Rendered | 10.3 Business Days | 15 Business Days** | 77.3% |
| Urgent Services Offered (including all outpatient services) – Prior Authorization not Required | 203.1 Hours | 48 Hours* | 54.8% |
| Follow-Up Appointments after Psychiatric Hospitalization | 5.8 Days | 7 Days** | 26.5% |
| No-Show Rate – Psychiatry | 16.9% | 20%** | n/a |
| No-Show Rate – Clinicians | 7.2% | 15%** | n/a |

^{*} DHCS-defined timeliness standards as per BHIN 21-023 and 22-033

For the FY 2022-23 EQR, the MHP reported its performance for the following time period: FY 2021-22

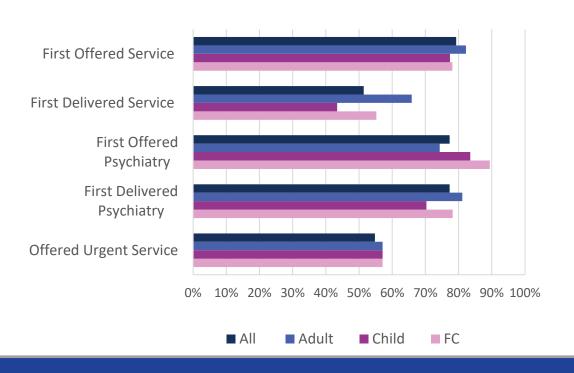
^{**} MHP-defined timeliness standards

Wait Times to Services, per BHP's Self Report

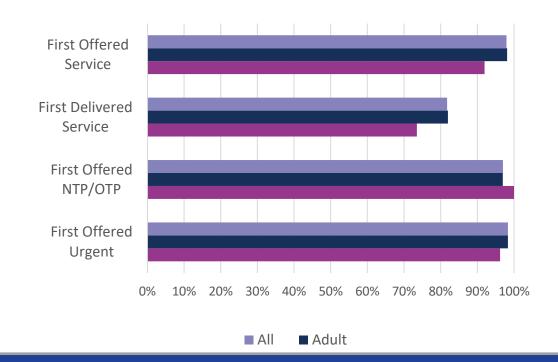


Percentage of Services that Met Timeliness Standards, per BHP Self-Report

MHP Example



DMC-ODS Example



Quality PMs

- Diagnosis of Beneficiaries Served
- Acute Service Utilization, Follow-Up, and Readmissions
- Residential Withdrawal Management
- Non-Methadone MAT
- High-Cost (High-Risk) Beneficiaries
- ASAM Congruence
- Initiation, Engagement, and Retention
- Cumulative Length of Stay
- CalOMS Admission and Discharge Status
- Treatment and Consumer Perception Surveys





MHP Psychiatric Inpatient Utilization, Three-Year Trend – Example

| Year | Unique Medi-Cal Beneficiary Count | Total Medi-Cal Inpatient Admissions | MHP Average LOS in Days | Statewide Average LOS in Days | MHP AACB | Statewide AACB | Total Approved Claims |
|---------|--------------------------------------------|----------------------------------------------|----------------------------------|----------------------------------------|-------------|-------------------|-----------------------------|
| CY 2021 | 555 | 1,320 | 11.57 | 8.86 | \$20,275 | \$12,052 | \$11,252,523 |
| CY 2020 | 622 | 1,114 | 10.68 | 8.68 | \$22,112 | \$11,814 | \$13,753,641 |
| CY 2019 | 758 | 1,278 | 9.10 | 7.80 | \$19,534 | \$10,535 | \$14,807,034 |

Psychiatric Inpatient Readmission – Example





Non-Methadone MAT Services, by Age, CY 2021 – Example

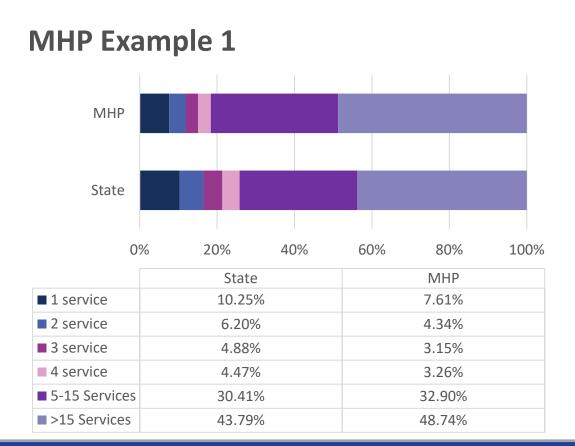


| County | | | | Statewide | | | | |
|------------|-----------------------|----------------------------|-----------------------|----------------------------|-----------------------|-------------------------|-----------------------|-------------------------|
| Age Groups | At Least 1 Service | % At Least 1 Service | 3 or More Services | % 3 or More Services | At Least 1 Service | % At Least 1 Service | 3 or More Services | % 3 or More Services |
| Ages 0-17 | <u><</u> 10 | - | <u><</u> 10 | - | 12 | 0.37% | 6 | 0.19% |
| Ages 18-64 | 203 | 6.33% | 46 | 1.44% | 7,505 | 7.96% | 3,873 | 4.11% |
| Ages 65+ | - | - | <u>≤</u> 10 | - | 447 | 5.01% | 172 | 1.93% |
| Total | 221 | 5.90% | 48 | 1.28% | 7,964 | 7.15% | 4,051 | 3.63% |

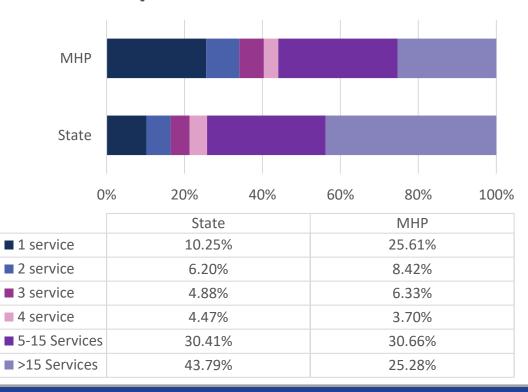
Congruence of LOC Referrals with ASAM Findings – Reasons for Lack of Congruence – Example

| ASAM LOC Referrals | Initial Screening | | Initial Assessment | | Follow-up Assessment | |
|----------------------------------|-------------------|--------|--------------------|--------|----------------------|--------|
| | # | % | # | % | # | % |
| Not Applicable/No Difference | 3,062 | 98.4% | 2,176 | 82.0% | 4,867 | 93.4% |
| Patient Preference | 16 | 0.5% | 330 | 12.4% | 161 | 3.1% |
| Level of Care Not Available | <u><</u> 10 | - | 20 | 0.7% | 12 | 0.2% |
| Clinical Judgement | 23 | 0.7% | 92 | 3.5% | 144 | 2.8% |
| Geographic Accessibility | 0 | 0.0% | <u><</u> 10 | - | 0 | 0.0% |
| Family Responsibility | 0 | 0.0% | <u><</u> 10 | - | <u><</u> 10 | - |
| Legal Issues | <u><</u> 10 | - | <u><</u> 10 | - | <u><</u> 10 | - |
| Lack of Insurance/Payment Source | <u>≤</u> 10 | - | <u><</u> 10 | - | 12 | 0.2% |
| Other | <u>≤</u> 10 | - | 23 | 0.9% | <u><</u> 10 | - |
| Actual Level of Care Missing | 0 | 0.0% | <u><</u> 10 | 0 | 0.0% | 0.0% |
| Total | 3,113 | 100.0% | 2,652 | 100.0% | 5,211 | 100.0% |

Retention in Services, MHP vs State, CY 2021



MHP Example 2



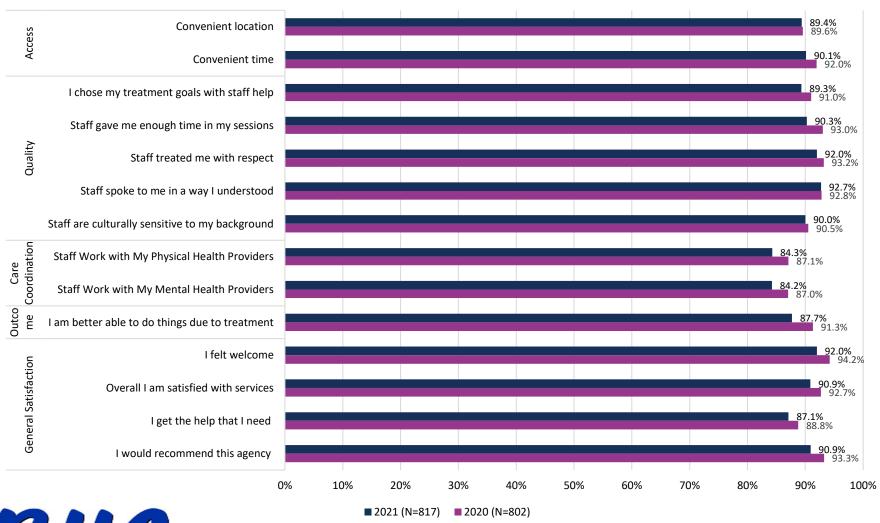
Cumulative Length of Stay (LOS) – DMC-ODS – Example

| | County | | Statewide | | |
|----------------------------------------------------------|---------|--------|-----------|--------|--|
| Clients discharged from care (no treatment for 30+ days) | | 801 | | 89,610 | |
| LOS for clients across the sequence | Average | Median | Average | Median | |
| of all their DMC-ODS services | 122 | 89 | 123 | 87 | |
| | # | % | # | % | |
| Clients with at least a 90-day LOS | 396 | 49% | 43,937 | 49% | |
| Clients with at least a 180-day LOS | 210 | 26% | 25,334 | 28% | |
| Clients with at least a 270-day LOS | 114 | 14% | 14,774 | 16% | |

CalOMS Discharge Status, CY 2021 - Example

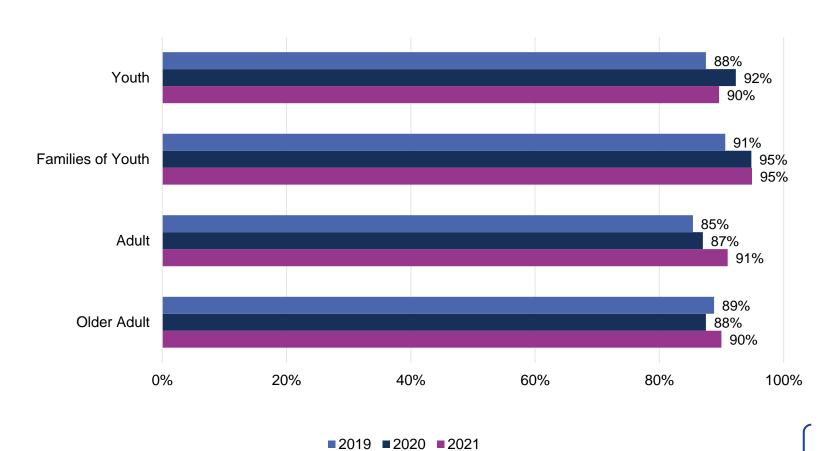
| Discharge Status | County | | Statewide | | |
|------------------------------------------------------------------------------|----------------|--------|-----------|--------|--|
| Discharge Status | # | % | # | % | |
| Completed Treatment - Referred | 627 | 29.8% | 11,892 | 19.1% | |
| Completed Treatment - Not Referred | <u><</u> 10 | - | 3,798 | 6.1% | |
| Left Before Completion with Satisfactory Progress - Standard Questions | 308 | 14.6% | 10,888 | 17.5% | |
| Left Before Completion with Satisfactory Progress – Administrative Questions | 673 | 32.05 | 4,643 | 7.4% | |
| Subtotal | 1,609 | 76.5% | 31,221 | 50.1% | |
| Left Before Completion with Unsatisfactory Progress - Standard Questions | 52 | 2.5% | 10,791 | 17.3% | |
| Left Before Completion with Unsatisfactory Progress - Administrative | 440 | 20.9% | 18,522 | 29.7% | |
| Death | 0 | 0.0% | 1,301 | 2.1% | |
| Incarceration | <u><</u> 10 | - | 485 | 0.8% | |
| Subtotal | 495 | 23.5% | 31,099 | 49.9% | |
| TOTAL | 2,104 | 100.0% | 62,320 | 100.0% | |

Treatment Perception Surveys, Example





Consumer Perception Surveys – Perception of Access, CY 2019-21



EQR Conclusions



Strengths

 Acknowledge Work Being Done

Opportunities

 Identify Areas for Improvement

Recommendations

- Actionable
- Individually Tailored
- Achievable

Thank You

