

# Monitoring and Oversight Committee

October 7, 2015



# Then - Now

## By the Numbers

**3/3/2014**

- Total Membership: ~26,000
- FC: 11,000
- AA: 14,000
- (1,600 opted out)
- DJJ: 300-400
- 50% of members in Fulton /DeKalb Counties

**9/3/2015**

- Total Membership: 23,873
- FC: 11,445
- AA: 12,023
- (250+ opted out)
- DJJ: 209
- 50% of members in Fulton/DeKalb counties



# DCH Oversight

- Prior Authorization Turnaround Time Report (Qtrly)
- PRTF Report (Qtrly)
- Geo-Access Report (Provider Network – Qtrly)
- Call Center Data
- UM Report
- EPSDT Medical Report
- E-Form Activity Reports
- Credentialing Reports
- Psychological Testing Oversight Reviews
- Onsite Review of Member Records
- Grievance Follow up
- Marketing and Training Events

# AGP Programs

- Intake Compliance Team
- Value Based Purchasing
- ST Denial Review Process
- Expedited Enrollment Process
- PRTF non-medical day grace period for placement
- Modified Medical Review Process
- QM Team
- DM and ER Team
- PRTF Specialty Team
- HFWA Complex Care Coordination (CC) Team (focus on our top complex members)
- Alternative Enrollment Process
- Group Home CC Team
- Co-Location Teams
- Stabilization Team
- DM and ER Team
- Judges E-mail box
- Stakeholder Web site

# AGP Programs

- Medication Oversight Program
- Prescriber Office Visits
- Health Promotion Team
- Member Locator
- My Health Direct
- BH Work Group
- Case Management Rounds
- Utilization Management Rounds
- Marketing and Education to AA/FC/CCI Providers
- Community Education Team
- 24/7 Call Center
- Steering Committee
- Community Collaborative (Pilot Program)
- GF 360 °Reporting Package
- Ombudsman
- GF 360 Specific Compliance Liaison
- Network Provider Sensitivity
- Member Marketing Events
- Expedite Provider Resolution Process
- Member Survey

# GF 360 Joint Task Force Meeting

(May 22, 2015)

## • Challenges

- Communication/Exchange of Information
- Eligibility/Enrollment
- E-Form Notification and Completion
- Education/Training
- Inaccurate Demographic Info or location
- Multiple Placement moves
- Contracts between caregiver and AGP not aligned related to medical exams
- Data Accuracy due to no standardization
- DFCS Turnover
- Medical exam requirements not aligned with CDC periodicity requirements.
- Unable to Discuss case with FC Caregiver

## • Opportunities

- Communication
- Collaboration
- Education/Training
- IT Enhancements (e-forms, GaHIN, enrollment etc.)
- Standardized Workflows
- Alignment of Contracts (AGP, CCFA and Foster Parent/Placement providers)
- Streamline Reporting
- Enrollment/Eligibility

# Georgia Families 360°

## Intake and Compliance Department

### Intake Communication Center

- Received more than 13,500 inbound calls since 3/3/14
- More than 90% of the calls have been answered in 30 seconds or less
- Less than 5% of the calls have been abandoned

### Health Promotions Team

- Collaborates with AA parents, DFCS, DJJ, placement, medical and dental providers to schedule appointments for existing members
- Scheduled more than 900 dental visits
- Over 21, 000 outbound calls
- Scheduled more than 900 EPSDT visits

### Intake Compliance Team

- Collaborates with DFCS, DJJ, placement, medical and dental providers to schedule appointments for newly enrolling members
- Scheduled more than 10,000 EPSDT visits
- Scheduled more than 6,500 dental visits
- Scheduled more than 4,500 trauma assessments



# DFCS Weekly Removal & Discharge

- ~800-1100 newly enrolled members monthly
- 40-60% remain in care for  $\leq 10$  days
- Care Coordination started upon notification (day 1 thru ????)

## Removal Report Example (9-21-2015)

- 177 Children Removed from homes Statewide
- 98 (55%) discharged  $\leq 10$  days
- 67 (37%) discharged  $\leq 3$  days

# Psychological Testing

	Volume	Approved	Denied	% Approved
May	224	87	137	39%
June	198	104	94	53%
July	174	113	61	65%
August	167	118	49	71%
September	143	123	20	86%

**NOTE: Prior Authorization requirement was implemented on May 1, 2015**

# Provider Recruitment

- 268 Behavioral Health providers added including:
  - 77 CORE agencies
  - 24 Intensive Family Intervention agencies
  - 22 Licensed Clinical Social Workers
  - 48 Licensed Professional Counselors
- 112 Dental providers added
- Overall Georgia Families 360 network sensitivities:
  - Behavioral Health – 98%
  - Dental – 98%
  - Primary Care – 97%
- Over 600 new providers brought into network through the addition of LPCs
  - Amerigroup petitioned DCH to allow CMO credentialing of LPCs in order to increase network access
- All 27 Community Service Boards state-wide are in the Amerigroup network providing behavioral health access in underserved areas

# Prior Authorization Report Example

Prior Authorization(04-2015 thru 06-30-2015)	% Compliant	# Authorized	# Denied	% Denied
PRTF	100%	149	2	1.3%
Medical Inpatient	100%	155	6	3.7%
Medical Outpatient	99.6%	725	35	4.6%
Therapies	99.4%	550	137	19.9%
BH Inpatient	100%	409	1	0.2%
BH Outpatient	99.6%	2842	1081	27.6%
Vison	100%	38	4	9.5%
Dental	100%	2217	306	12.1%

# Pathways to Permanence

An innovative, collaborative partnership with Amerigroup, CHRIS Kids, Youth Villages Inner Harbor, and the Multi-Agency Alliance for Children.

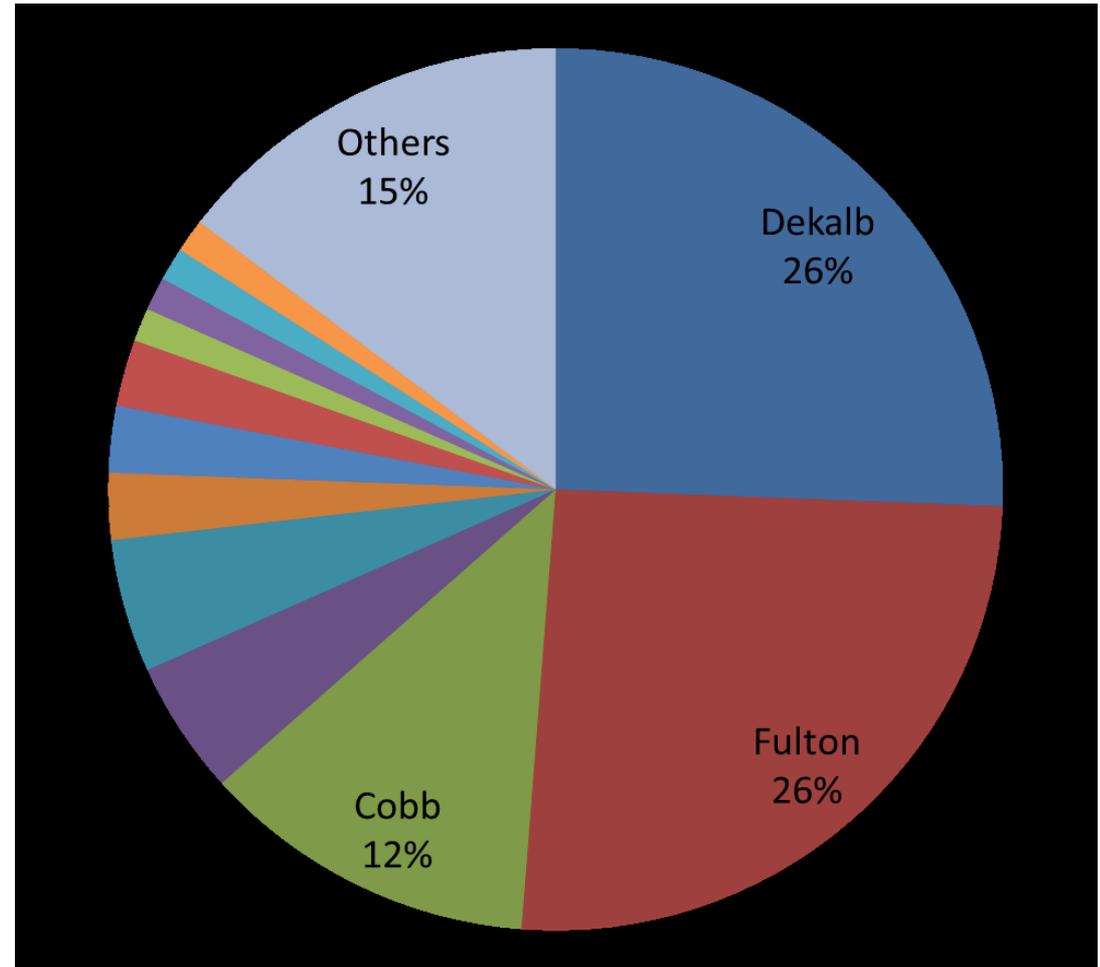
## Quick Stats:

- 88 referrals received
- 38 youth served
- 43% of referrals accepted
- Over 80% of youth remain stable in the community

## Youth Details

77% of youth referred are legally from one of the catchment areas: Cobb, Clayton, DeKalb, Douglas, Fulton or Gwinnett.

Pathways to Permanence has served a total of 38 youth. There are 24 active youth and the majority of participants are male, and most are between 11 and 15 years old.



# Health Outcomes

- The majority of youth served were up to date with their physical and dental health appointments, with 75% of both EPSDT and Dental checks being within appropriate timeframes for youth.
- 96% of youth were in compliance with having a follow-up visit with a mental health professional within 7 days and within 30 days of discharge from a Psychiatric Residential Treatment Facility or a Crisis Stabilization Unit.
- Over 80% of youth have been able to remain stable in the community while working toward permanence with the support of their teams ; 20% youth have returned to a PRTF or CSU.



# Quote of Success of Pilot Program

“I just want to say that whoever is responsible for creating and supporting the” Pathways to Permanency” program.....JOB WELL DONE!! It was the key to getting “LK” and his family back together after 2 years! The aftercare program will also be instrumental in sorting through issues that arise when children finally return home. This is a very thought out “refreshing” program that can make a huge difference with some of our challenging families. “LK’s” family has also expressed deep gratitude for the help of this program!

**Foster Care Case Manager**



GEORGIA DEPARTMENT  
OF COMMUNITY HEALTH

# Performance Measurement



Presentation to: Monitoring and Oversight Committee

Presented by: Kina DeWitt, LCSW



# Mission

The mission of the Department of Community Health is to provide access to affordable, quality health care to Georgians through effective planning, purchasing, and oversight.

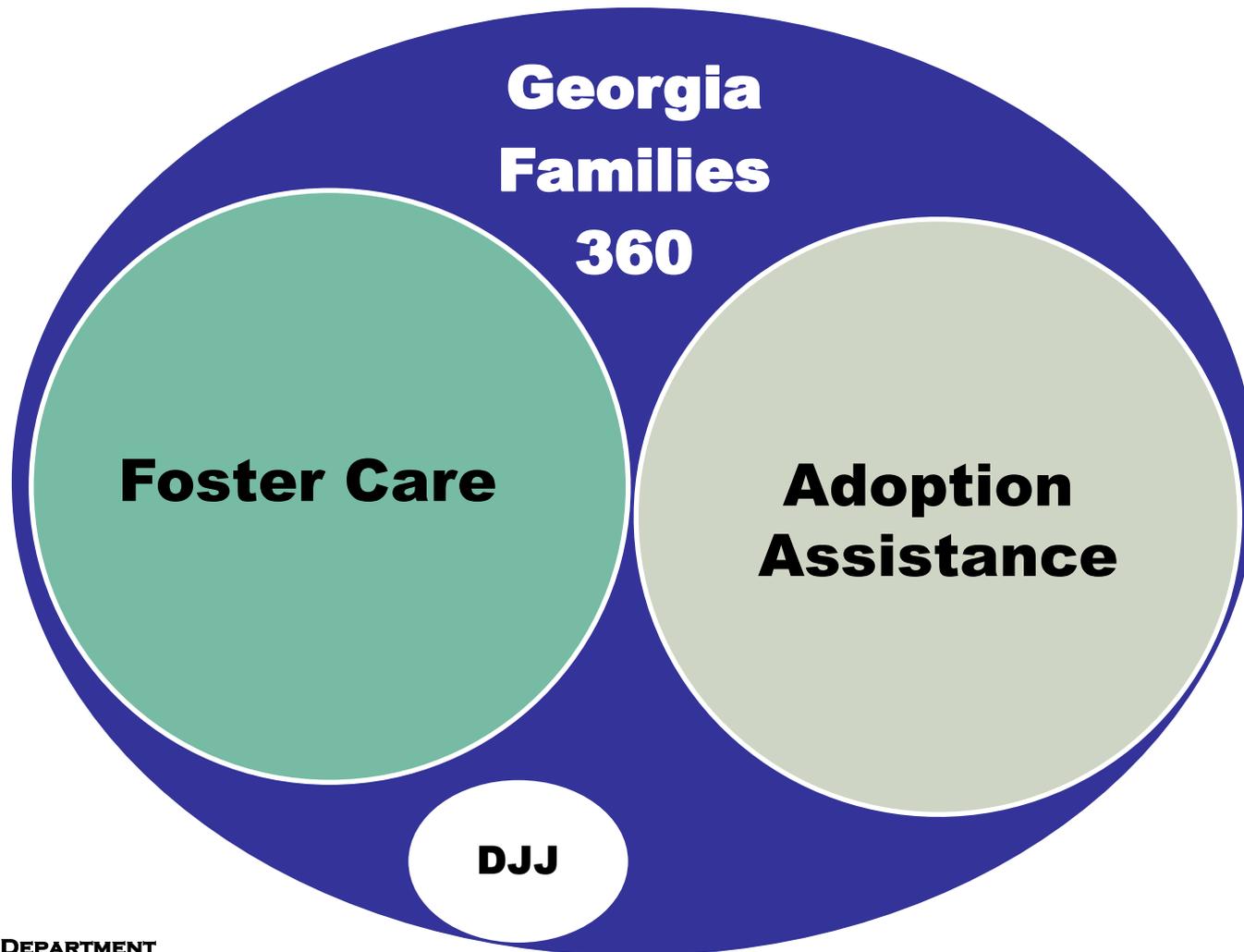
*We are dedicated to A Healthy Georgia.*

# Overview

- The Georgia Families 360 Population
- Performance Measures
  - What They Are?
  - What Purpose Do they Serve?
  - How Are The Rates Generated?
- Performance Measure Rates



# Georgia Families 360 Populations



# What are Performance Measures?

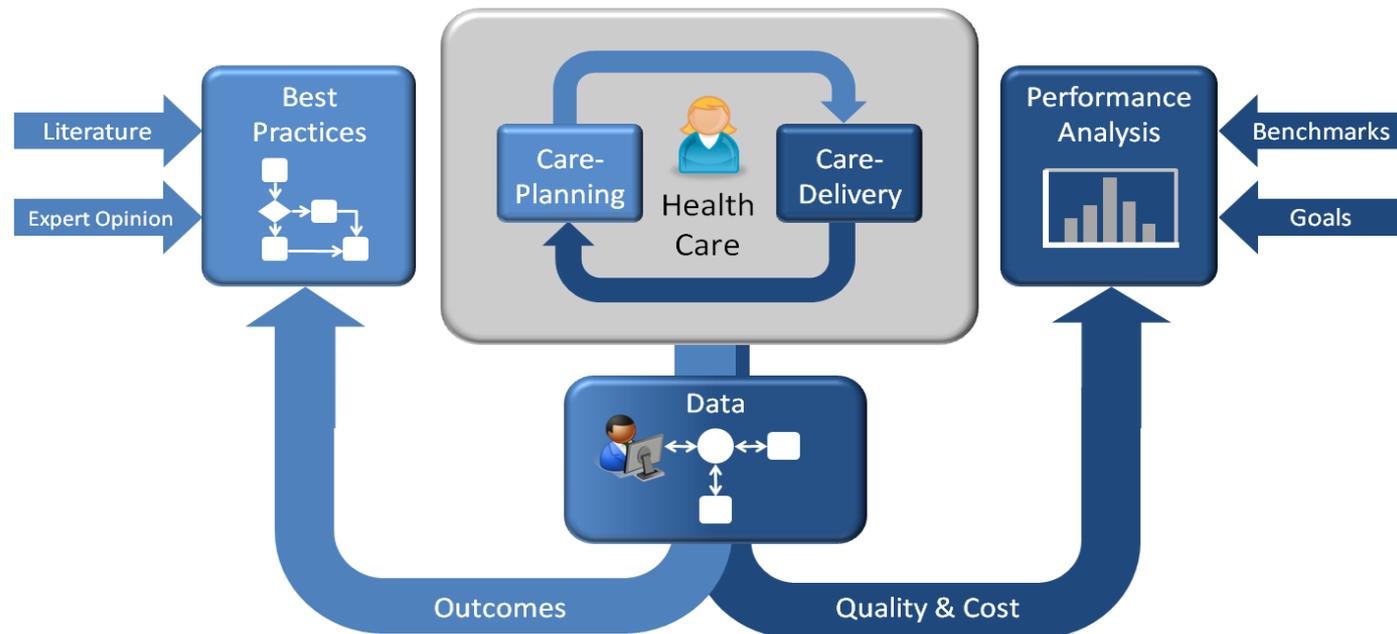
- Tools to assess the performance of individual clinicians, clinical delivery teams, delivery organizations or health insurance plans in the provision of care to their patients or enrollees.
- Our Measure Stewards include CMS and:
  - ✓ NCQA
    - Healthcare Effectiveness Data and Information Set (HEDIS)
  - ✓ Agency for Healthcare Research and Quality (AHRQ)
  - ✓ The Joint Commission



# The Purpose of Performance Measurement

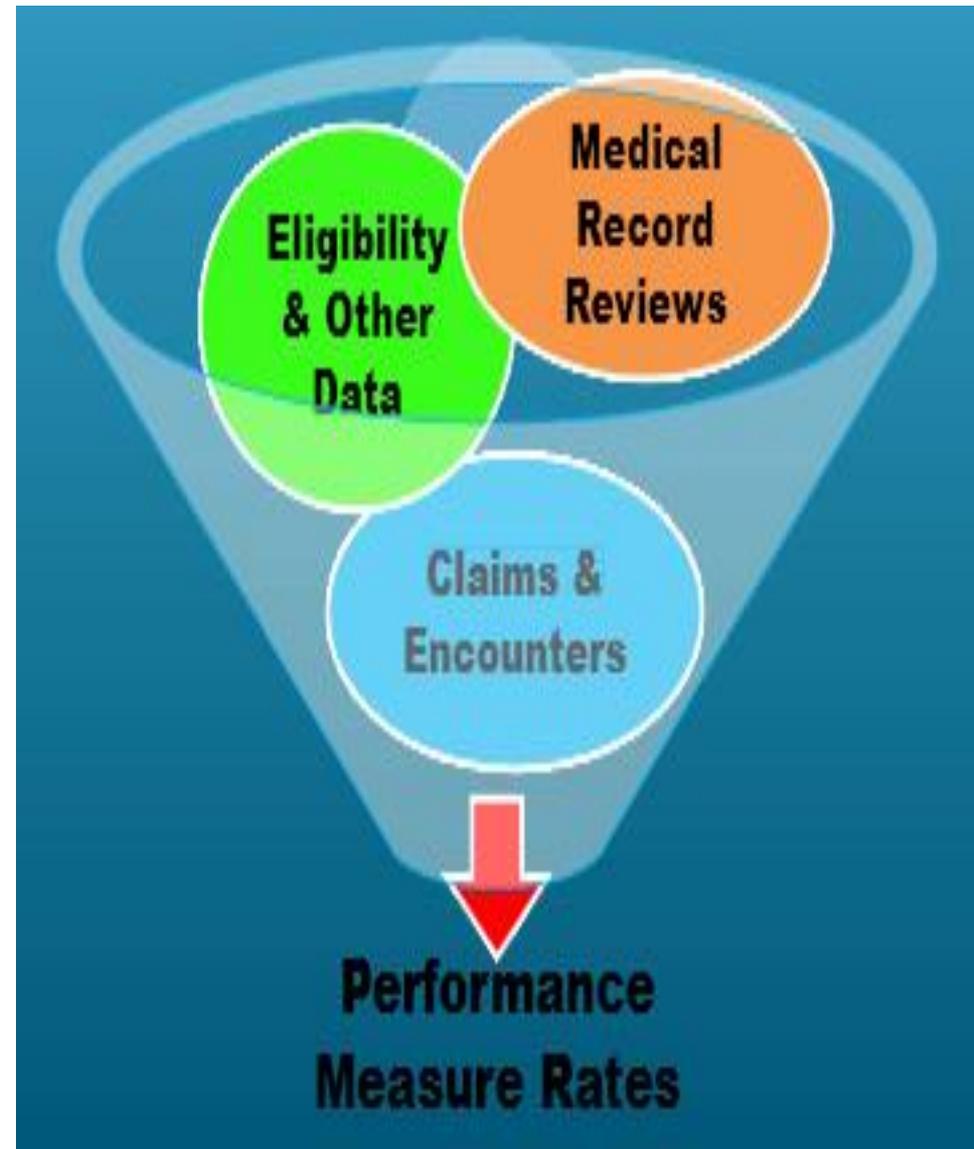
Performance Measurement helps us:

- Understand the healthcare delivery process
- Identify quality of care issues
- Increase the effectiveness of healthcare delivery



# How are Performance Measure Rates Generated?

- Specifications
- Claims & Encounters (Administrative Rate)
- Medical Record Review (Hybrid Rates)
- Rates are validated by the HEDIS auditor



# Georgia Families 360

## Performance Measure Rates

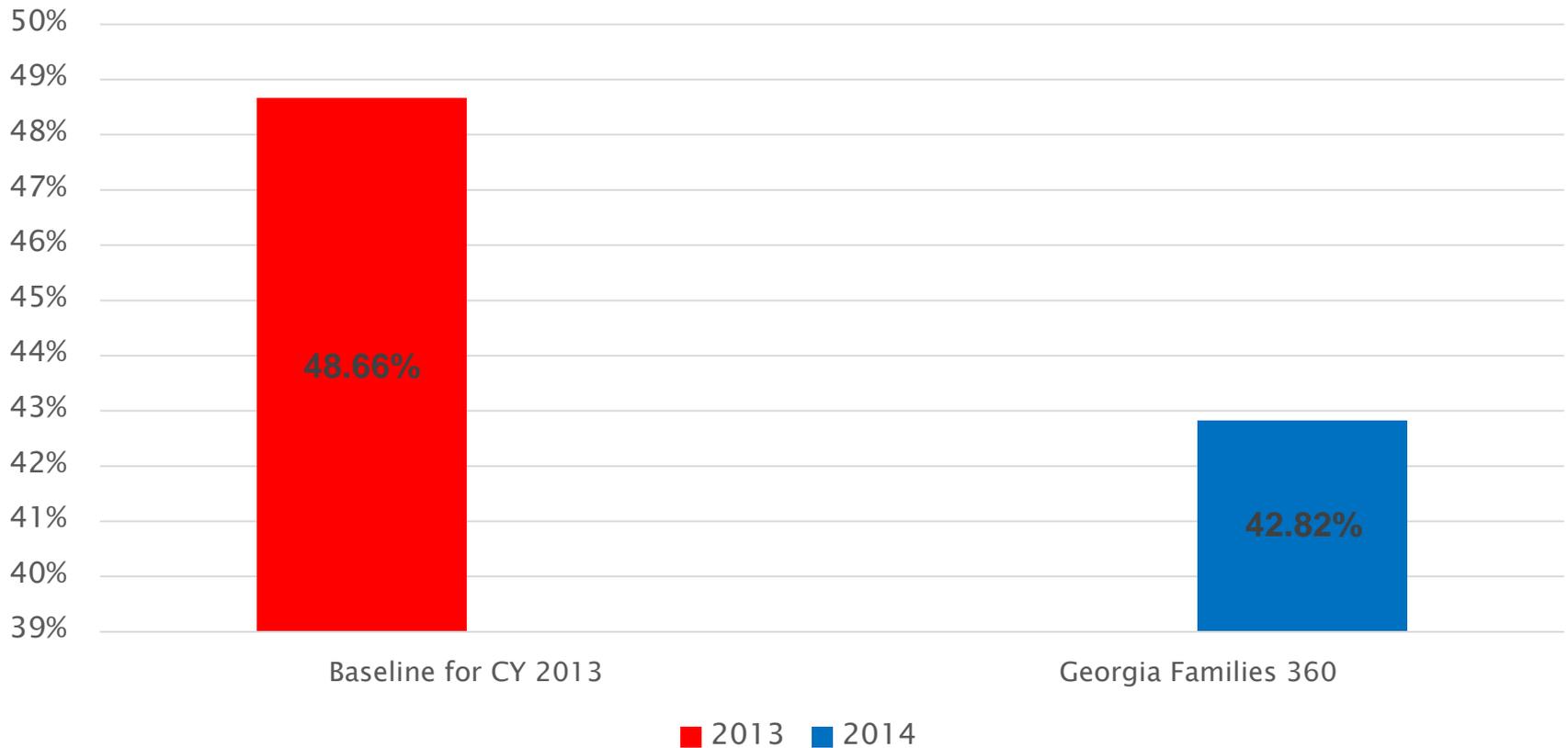
- The CY 13 baseline rates were generated when the adoption assistance, foster care, and Department of Juvenile Justice members were in Fee-for-Service (FFS) Medicaid and cover 12 months of enrollment. They were independently validated.
- The CY 14 rates were generated by Amerigroup and independently validated. They are the result of approximately 10 months of care coordination for these members.

# Performance Results



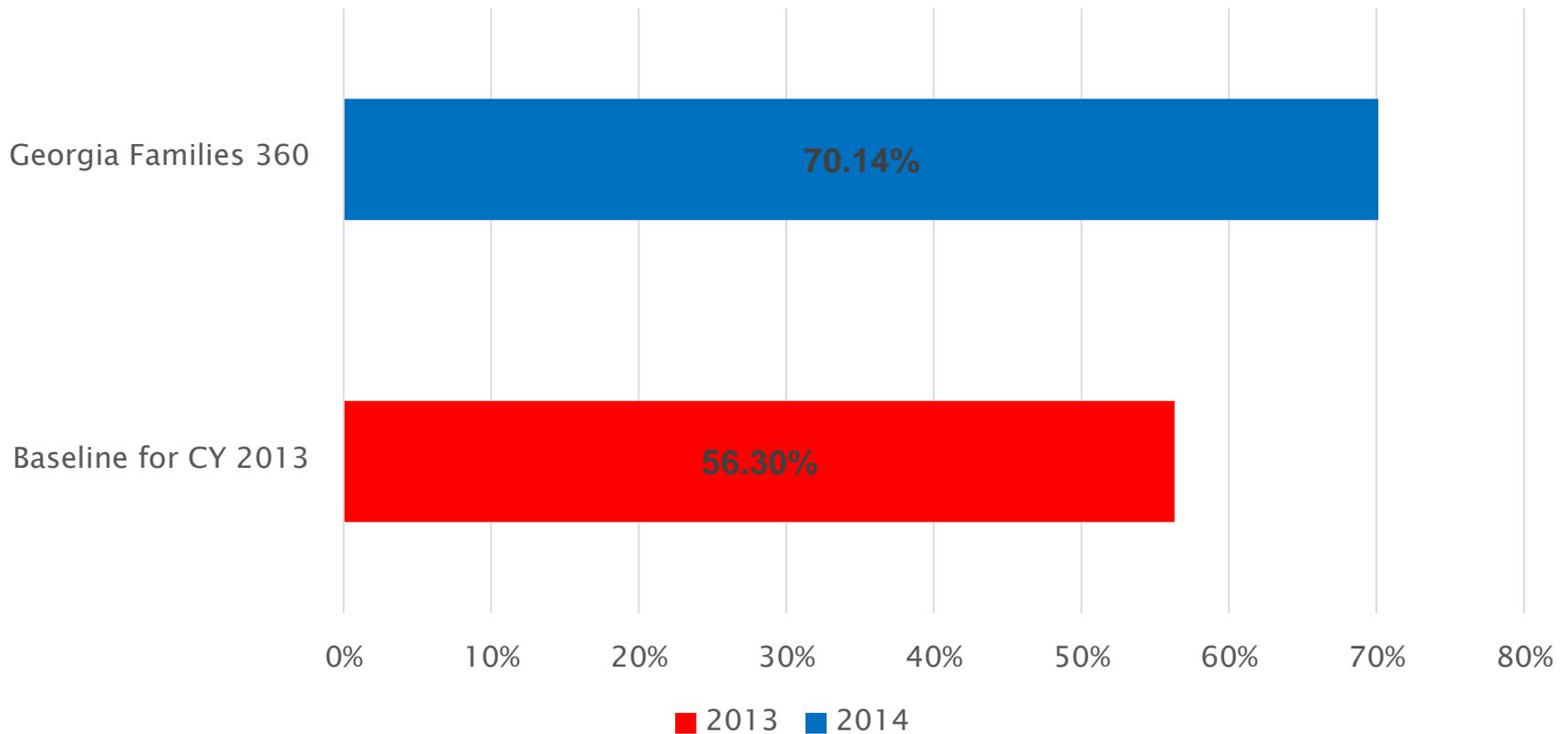
# Performance Results

Well-Child Visits in the First 15 Months of Life-6 or More Visits



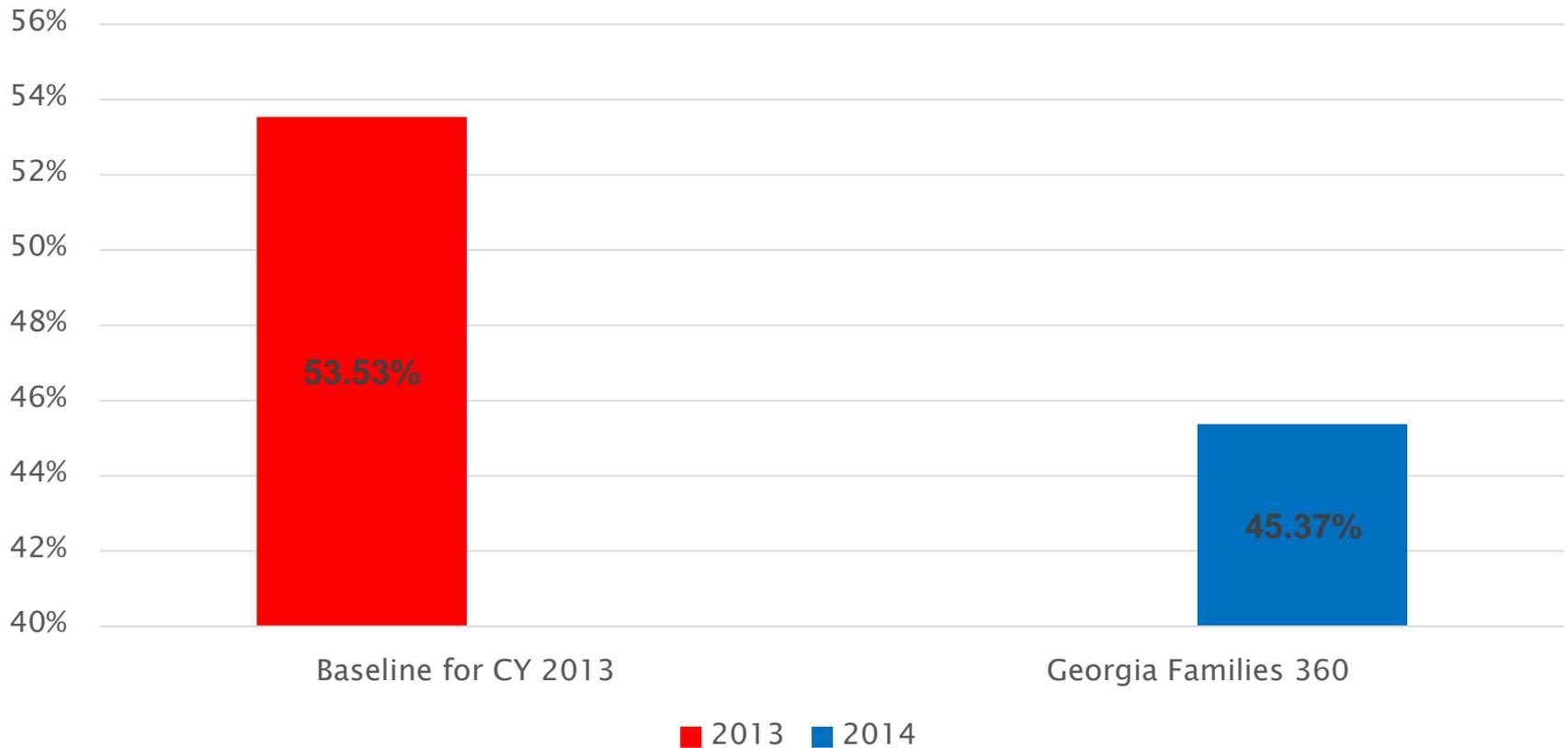
# Performance Results

Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life



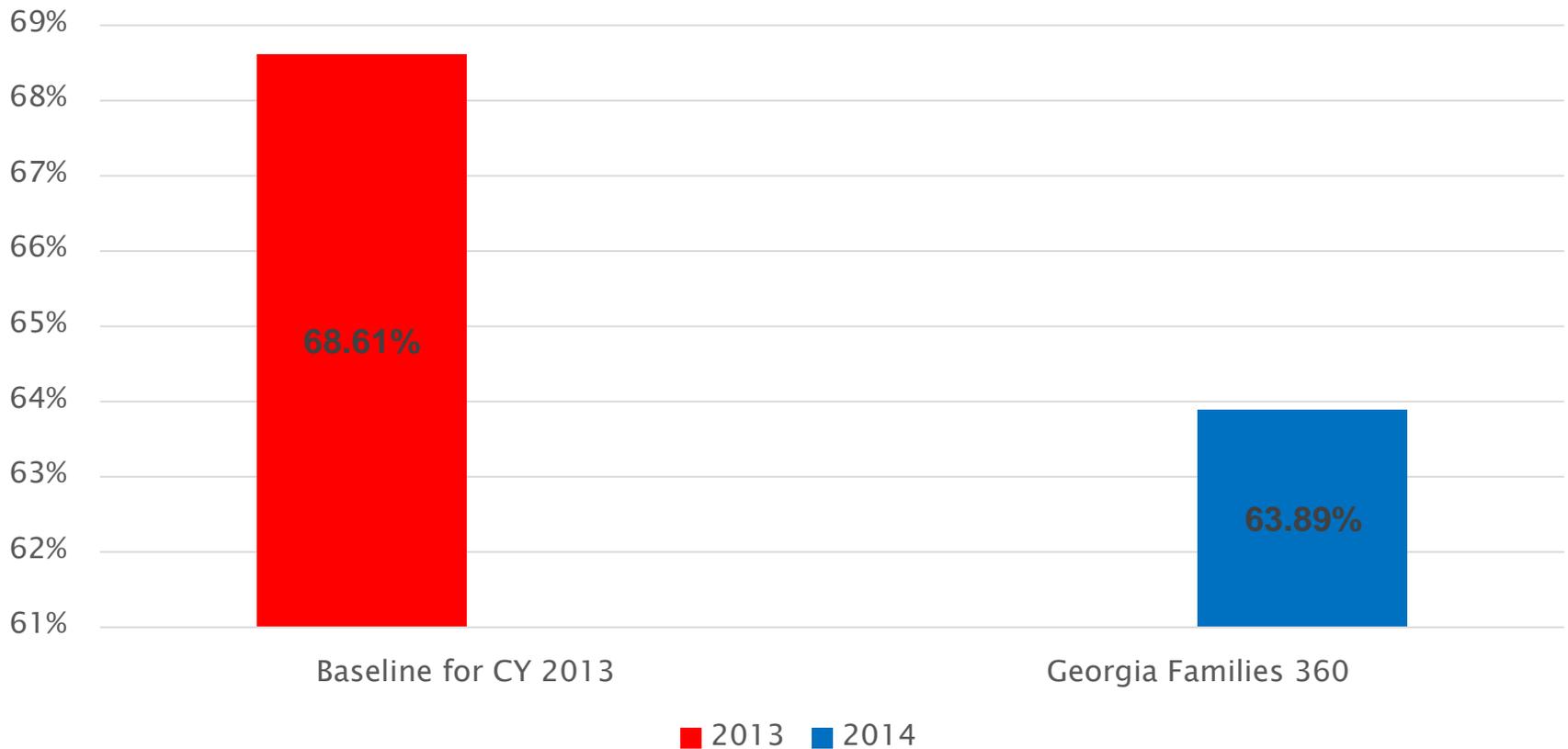
# Performance Results

Childhood Immunization Status (Combo 3)

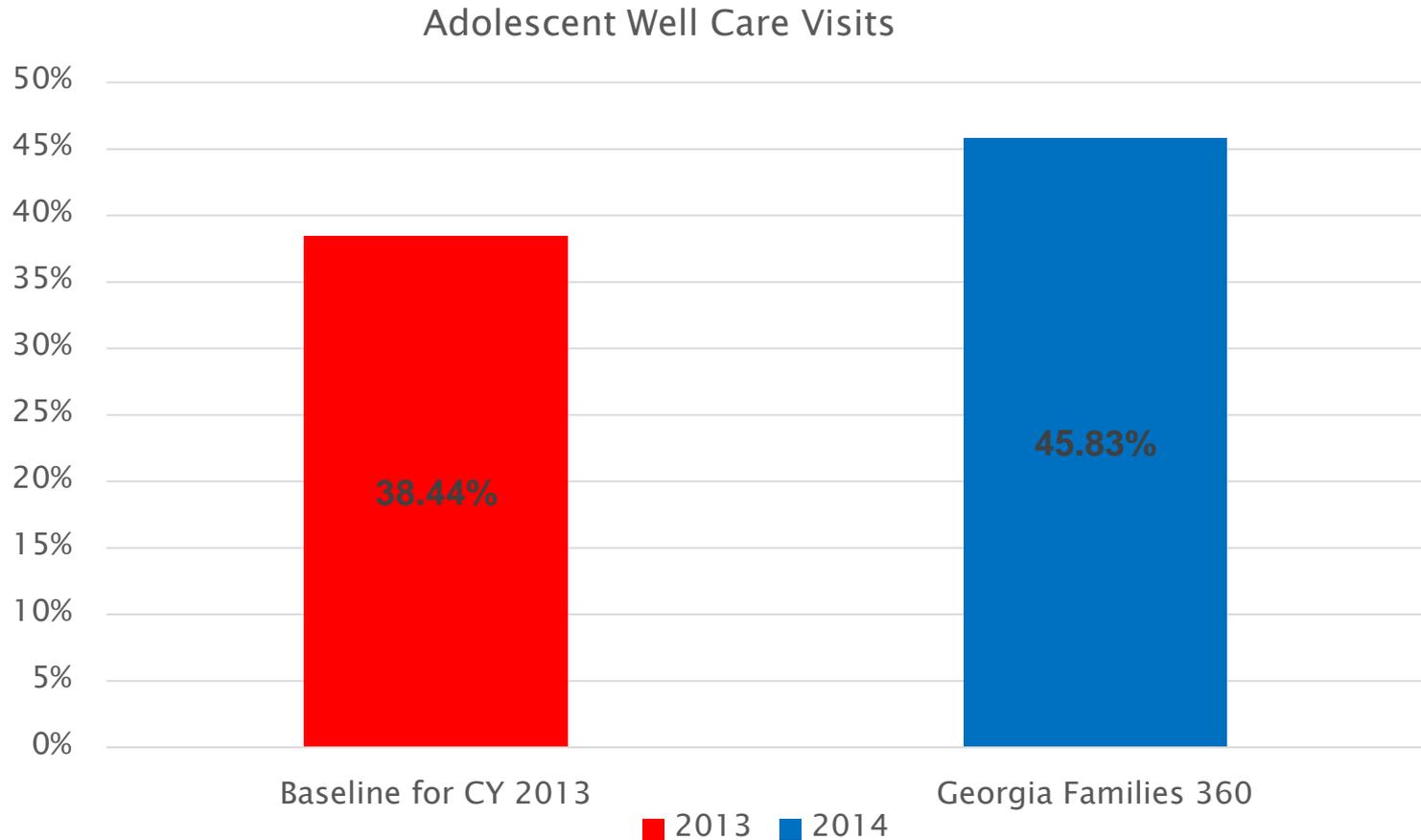


# Performance Results

## Lead Screening in Children

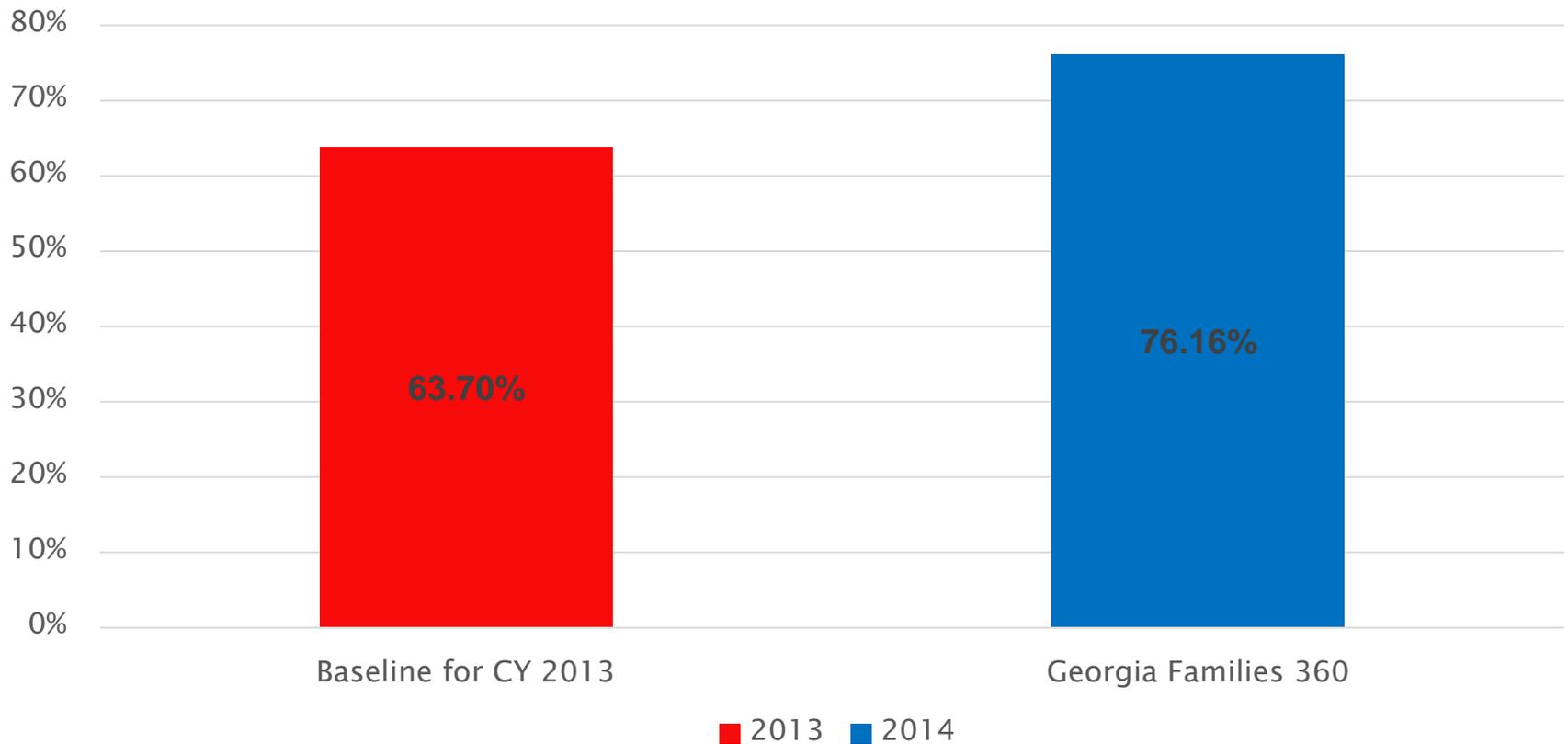


# Performance Results

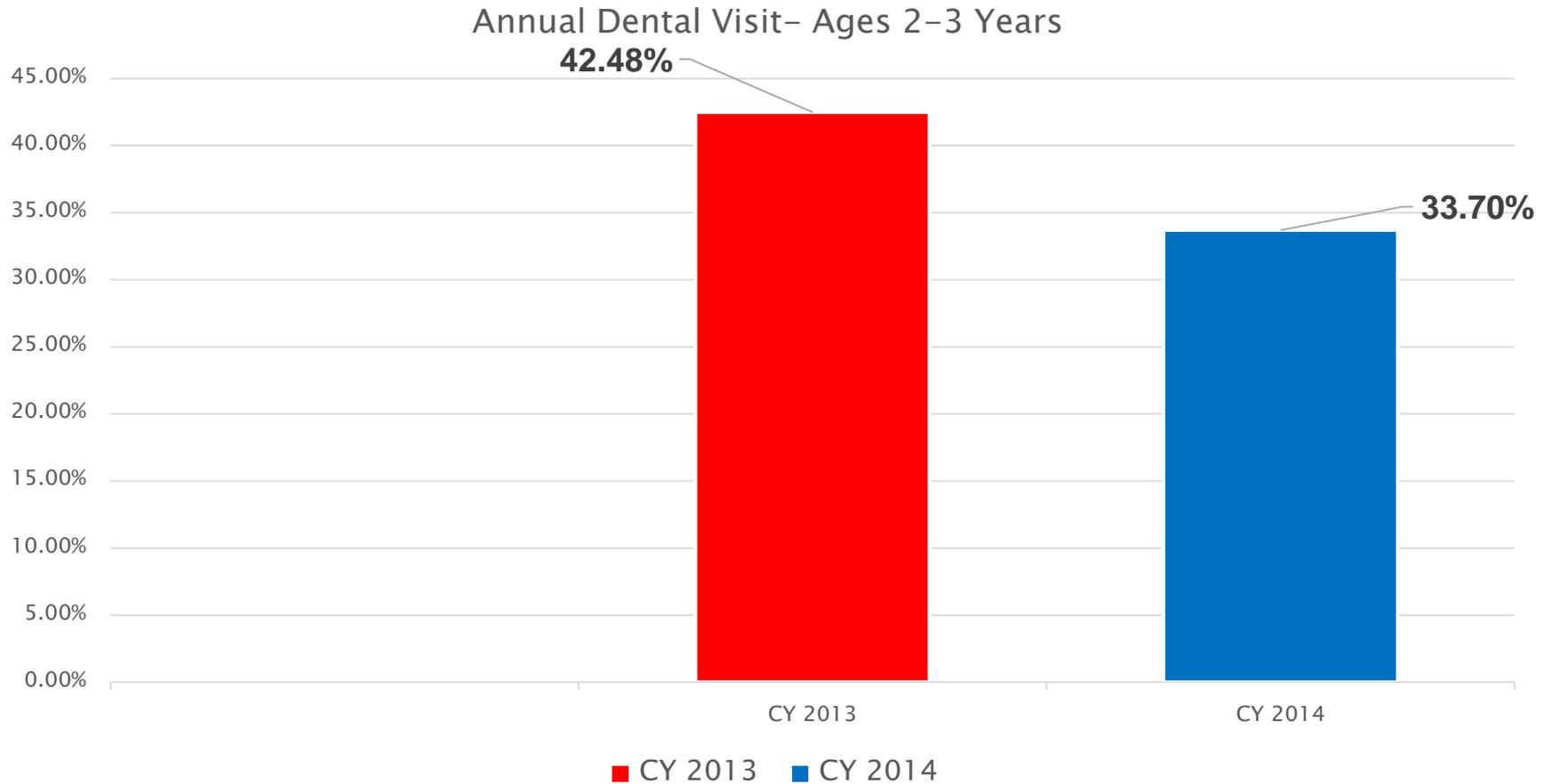


# Performance Results

## Immunizations for Adolescents

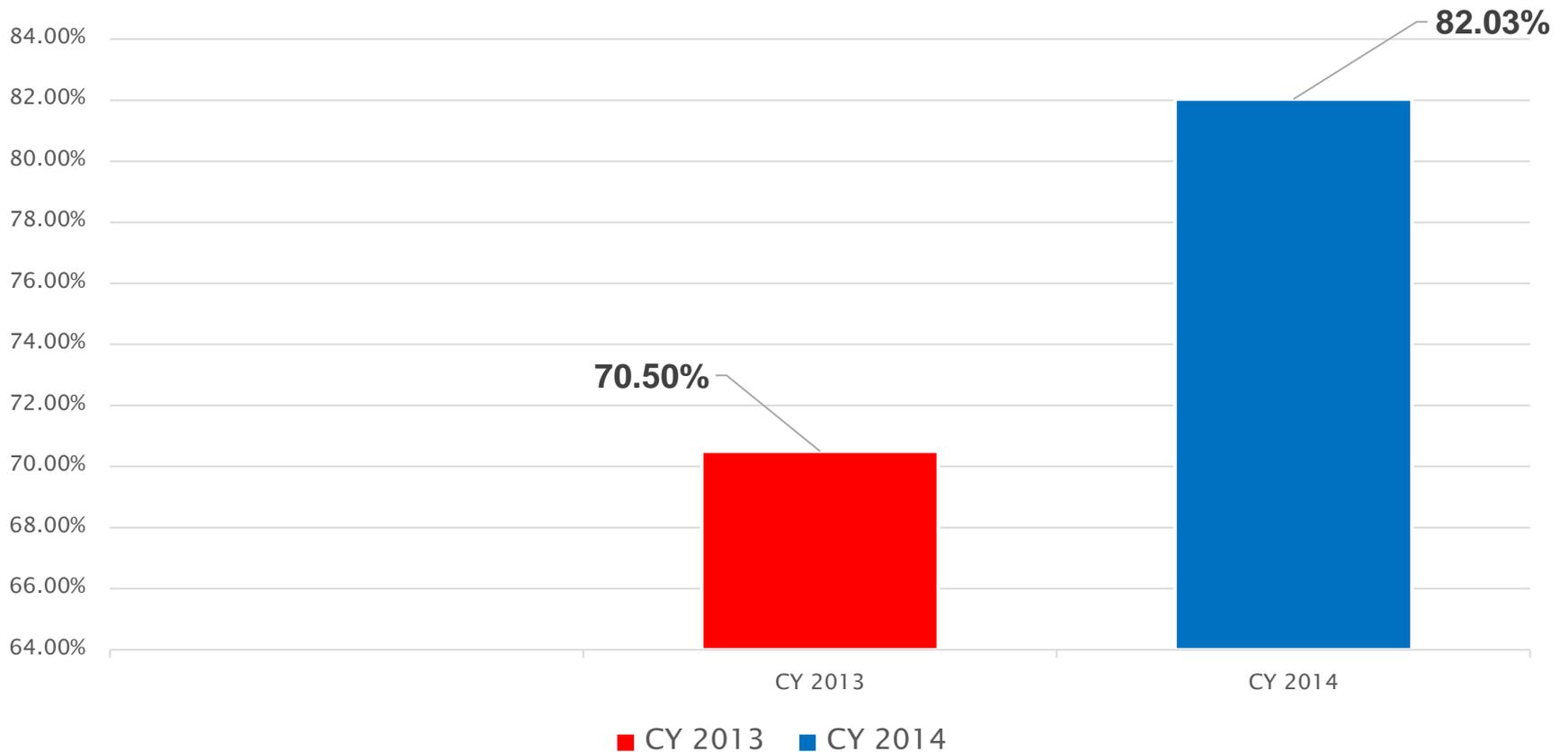


# Performance Results

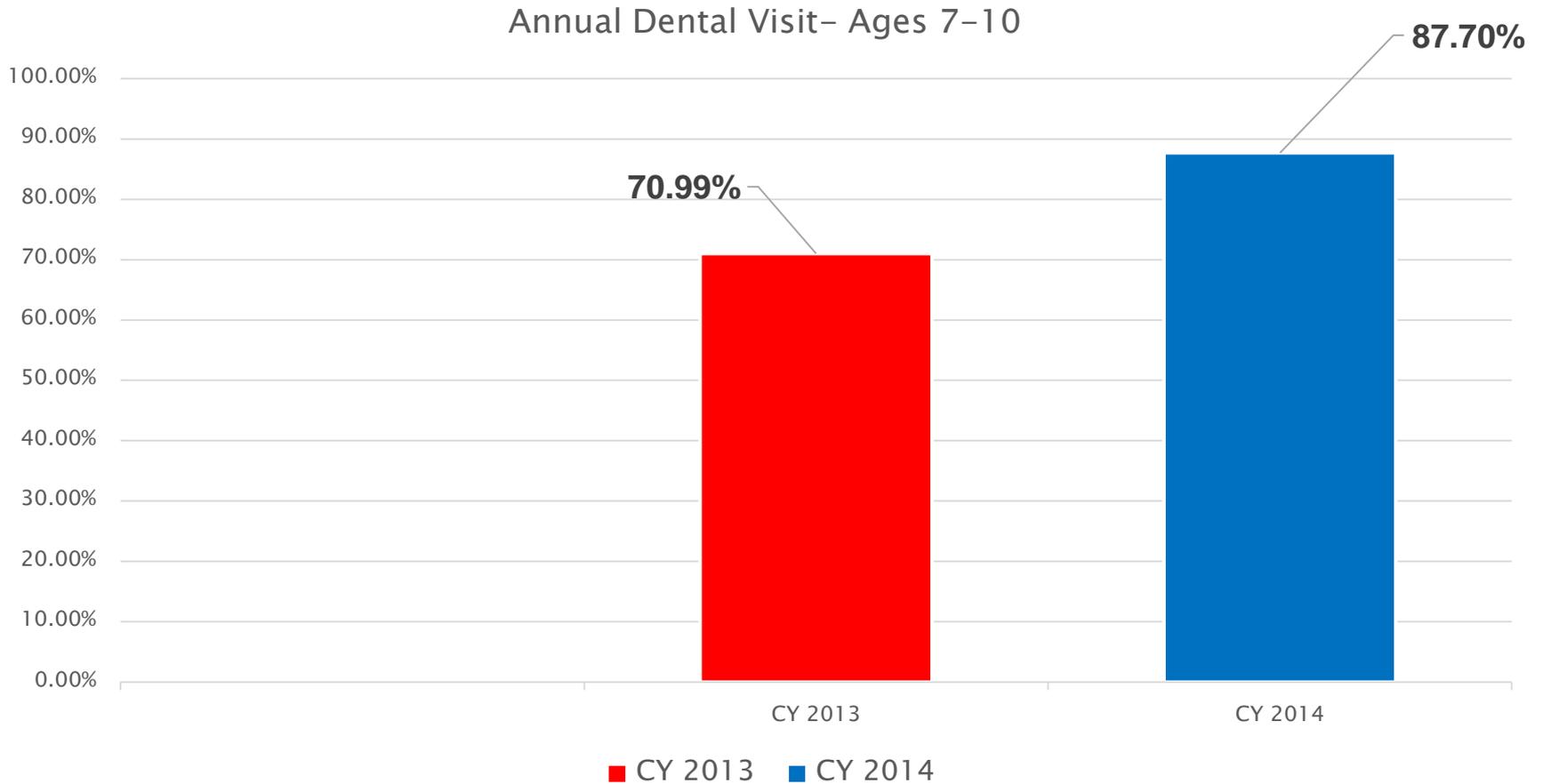


# Performance Results

Annual Dental Visit- Ages 4-6 Years

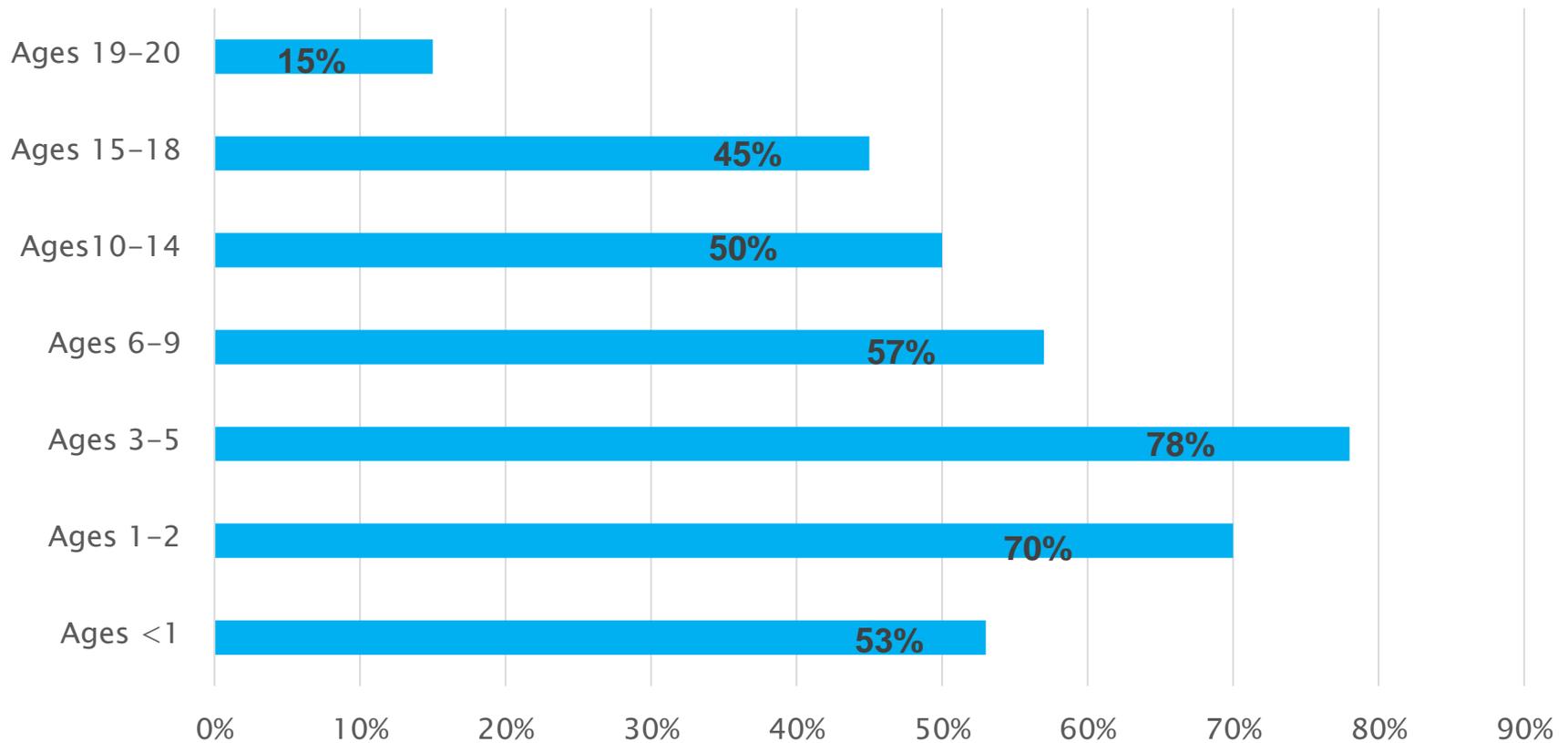


# Performance Results

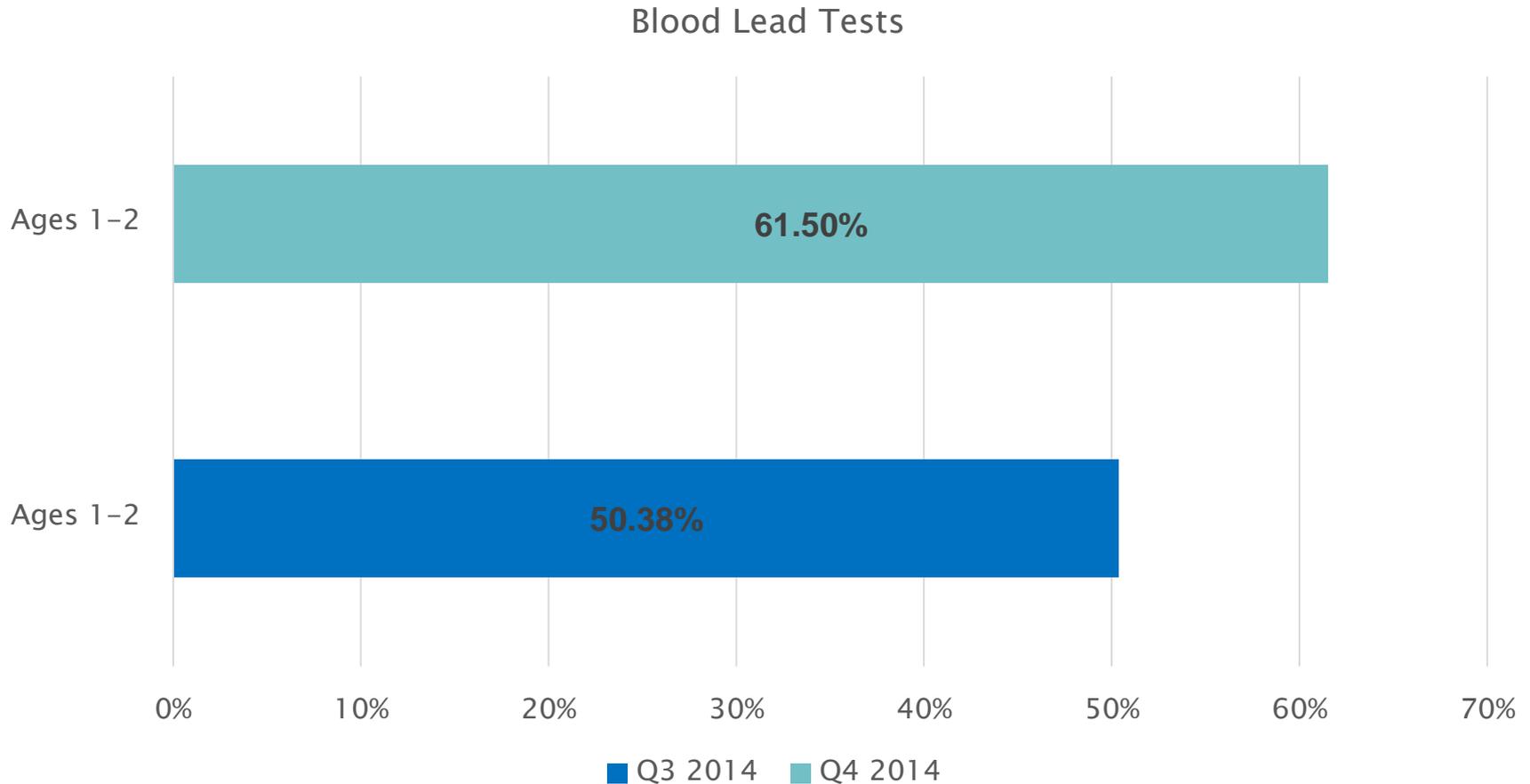


# CMS-416 EPSDT Screening Ratios

CMS-416 EPSDT Screening Ratios

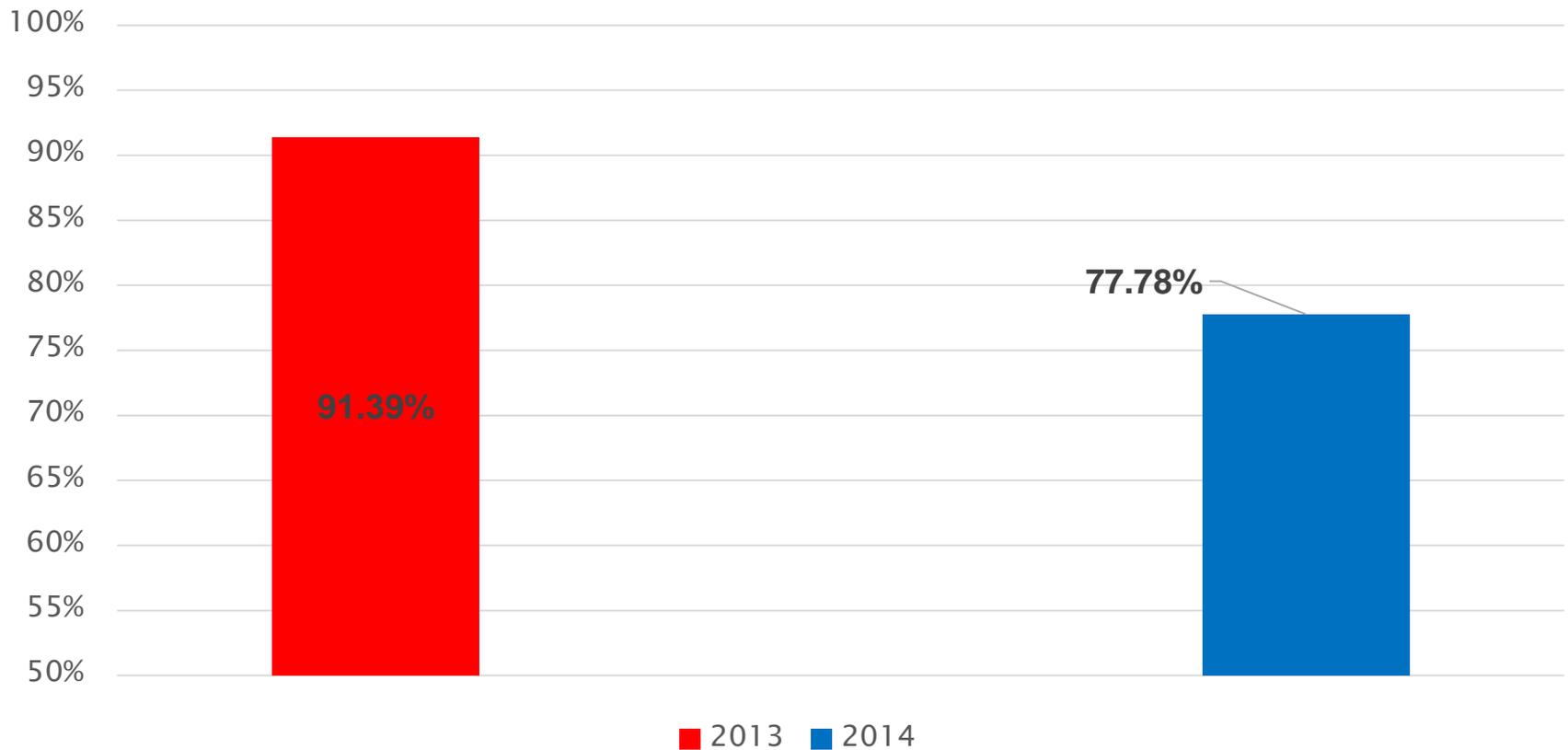


# CMS-416 Blood Lead Tests



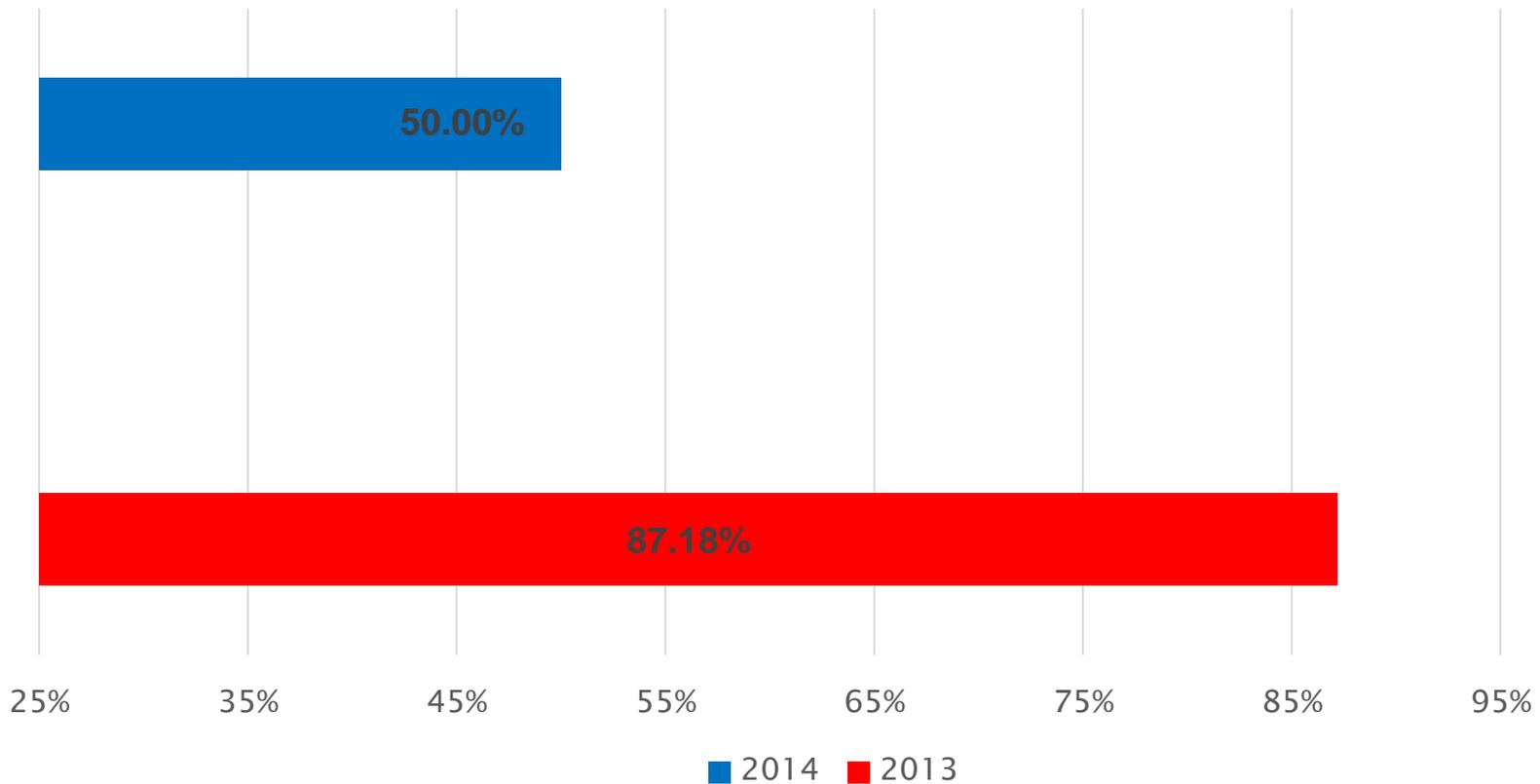
# Performance Results

Use of Appropriate Medication for People wth Asthma- Ages 5-11 Years



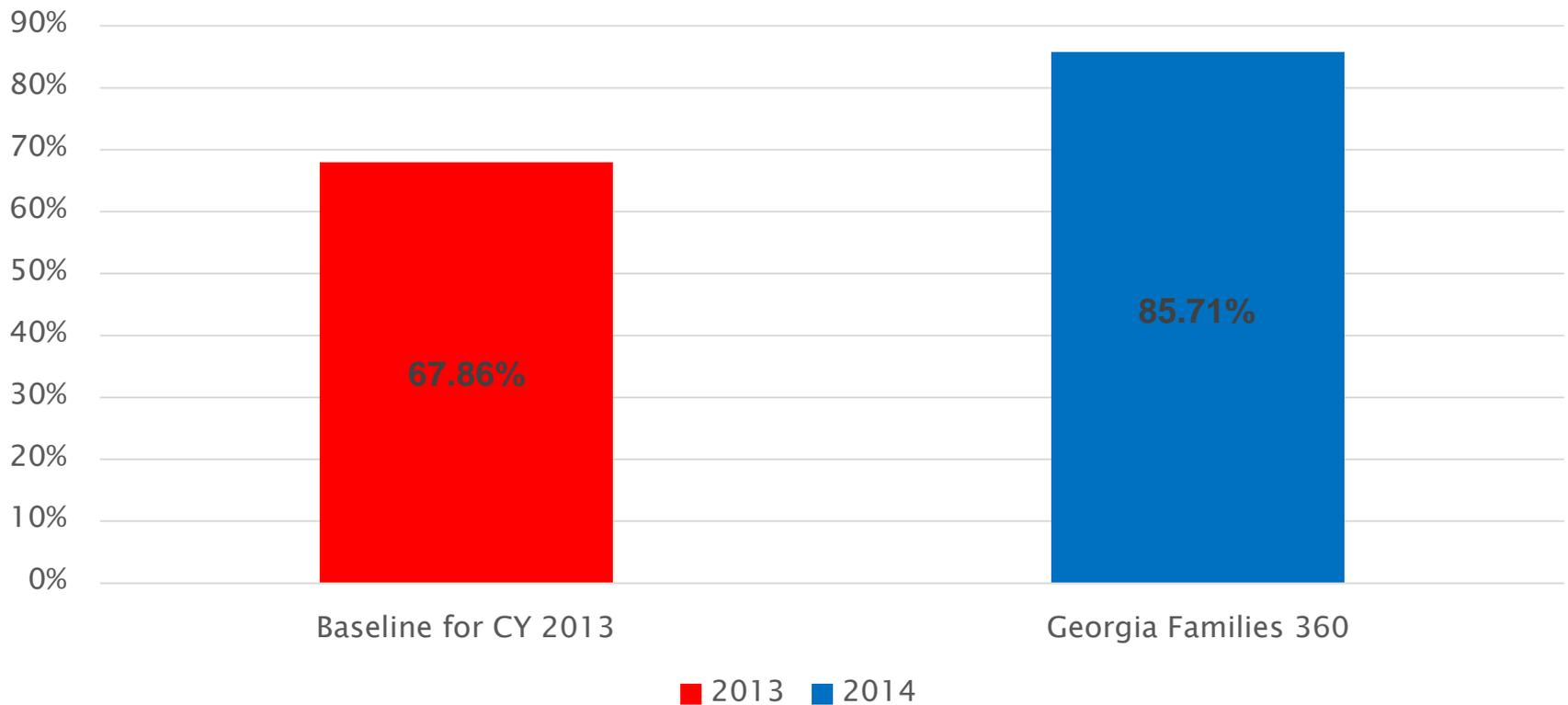
# Performance Results

Use of Appropriate Medication for People with Asthma– Ages 12–18 Years



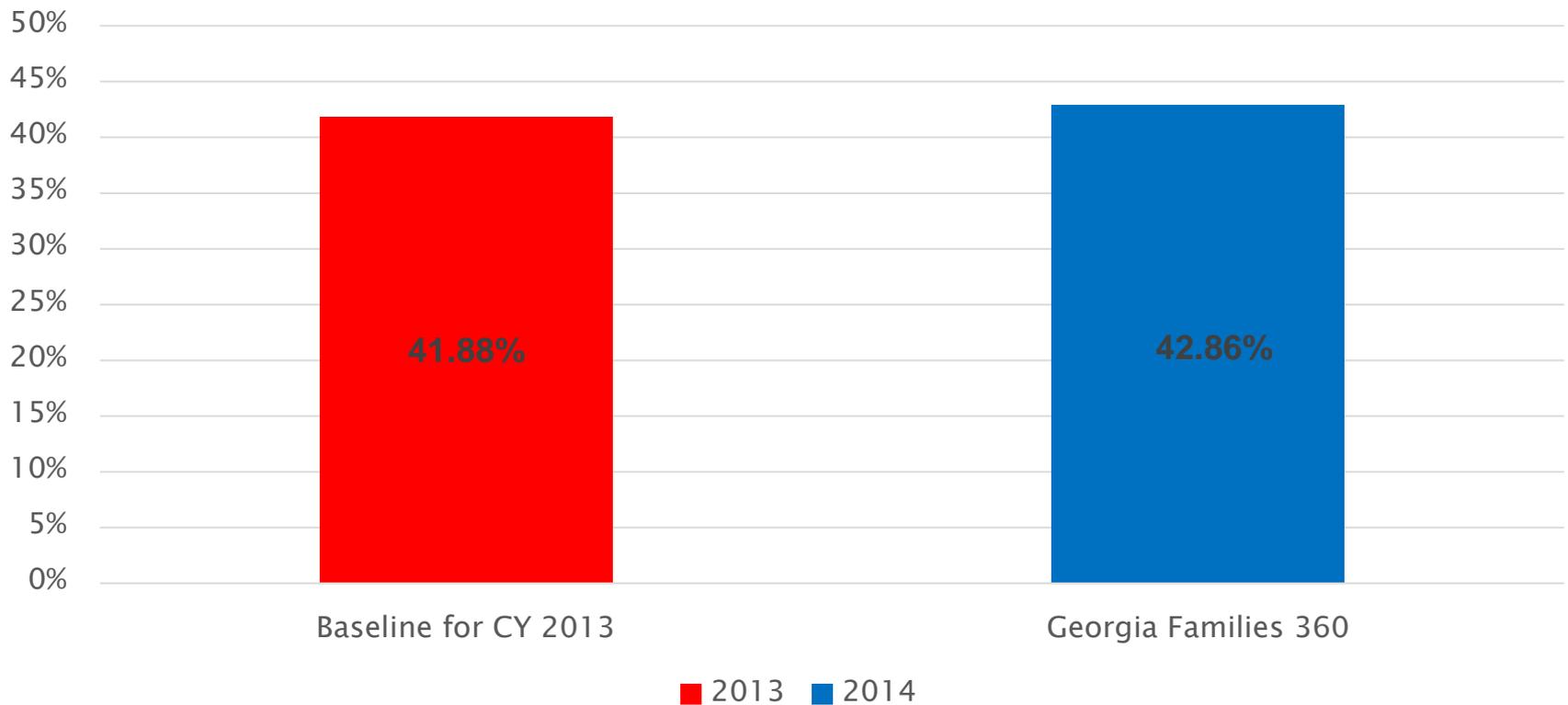
# Performance Results

Medication Management for People with Asthma- 50% of the Treatment Period  
Ages 5-11



# Performance Results

Medication Management for People with Asthma– 75% of the Treatment Period  
Ages 5–11



# Asthma Clinical Practice Guideline (CPG)

- Provider compliance with the CPG monitored on an annual basis and documented in the CY 2014 Annual CPG Report
- Findings:
  - ✓ The Georgia Families and the Georgia Families 360 CMOs are working together to create a standardized Asthma CPG across all plans
  - ✓ All plans to use a standard Asthma Action Plan

# Asthma Action Plan



## Asthma Action Plan

### General Information:

Name \_\_\_\_\_  
 Emergency contact \_\_\_\_\_ Phone numbers \_\_\_\_\_  
 Physician/healthcare provider \_\_\_\_\_ Phone numbers \_\_\_\_\_  
 Physician signature \_\_\_\_\_ Date \_\_\_\_\_

Severity Classification	Triggers	Exercise
<input type="radio"/> Intermittent <input type="radio"/> Moderate Persistent <input type="radio"/> Mild Persistent <input type="radio"/> Severe Persistent	<input type="radio"/> Colds <input type="radio"/> Smoke <input type="radio"/> Weather <input type="radio"/> Exercise <input type="radio"/> Dust <input type="radio"/> Air Pollution <input type="radio"/> Animals <input type="radio"/> Food <input type="radio"/> Other _____	1. Premedication (how much and when) _____ 2. Exercise modifications _____

### Green Zone: Doing Well

#### Symptoms

- Breathing is good
- No cough or wheeze
- Can work and play
- Sleeps well at night

#### Peak Flow Meter

More than 80% of personal best or \_\_\_\_\_

### Peak Flow Meter Personal Best =

#### Control Medications:

Medicine	How Much to Take	When to Take It
_____	_____	_____
_____	_____	_____

### Yellow Zone: Getting Worse

#### Symptoms

- Some problems breathing
- Cough, wheeze, or chest tight
- Problems working or playing
- Wake at night

#### Peak Flow Meter

Between 50% and 80% of personal best or \_\_\_\_\_ to \_\_\_\_\_

### Contact physician if using quick relief more than 2 times per week.

#### Continue control medicines and add:

Medicine	How Much to Take	When to Take It
_____	_____	_____
_____	_____	_____

#### IF your symptoms (and peak flow, if used) return to Green Zone after one hour of the quick-relief treatment, THEN

- Take quick-relief medication every 4 hours for 1 to 2 days.
- Change your long-term control medicine by \_\_\_\_\_
- Contact your physician for follow-up care.

#### IF your symptoms (and peak flow, if used) DO NOT return to Green Zone after one hour of the quick-relief treatment, THEN

- Take quick-relief treatment again.
- Change your long-term control medicine by \_\_\_\_\_
- Call your physician/Healthcare provider within \_\_\_\_\_ hour(s) of modifying your medication routine.

### Red Zone: Medical Alert

#### Symptoms

- Lots of problems breathing
- Cannot work or play
- Getting worse instead of better
- Medicine is not helping

#### Peak Flow Meter

Less than 50% of personal best or \_\_\_\_\_ to \_\_\_\_\_

### Ambulance/Emergency Phone Number:

#### Continue control medicines and add:

Medicine	How Much to Take	When to Take It
_____	_____	_____
_____	_____	_____

#### Go to the hospital or call for an ambulance if:

- Still in the red zone after 15 minutes.
- You have not been able to reach your physician/healthcare provider for help.
- \_\_\_\_\_

#### Call an ambulance immediately if the following danger signs are present:

- Trouble walking/talking due to shortness of breath.
- Lips or fingernails are blue.

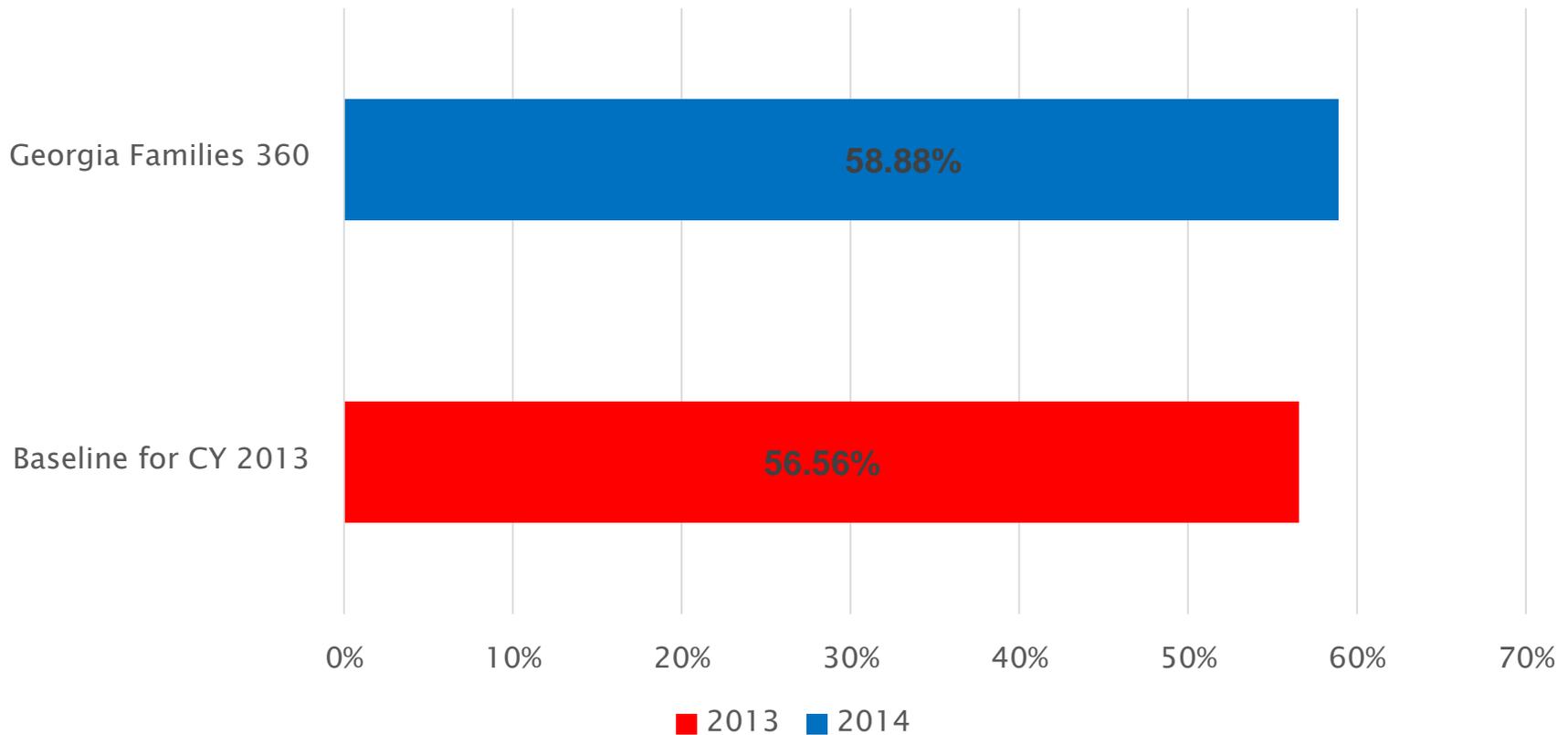


# Performance Results

- Follow-Up Care for Children Prescribed ADHD Medication metric to be monitored
  - The CY 13 baseline rates determined
  - Measure specifications require children to be identified by February of the measurement year – GF 360 transition did not occur until March 2014
  - Metric to be reported in 2016 using CY 2015 data

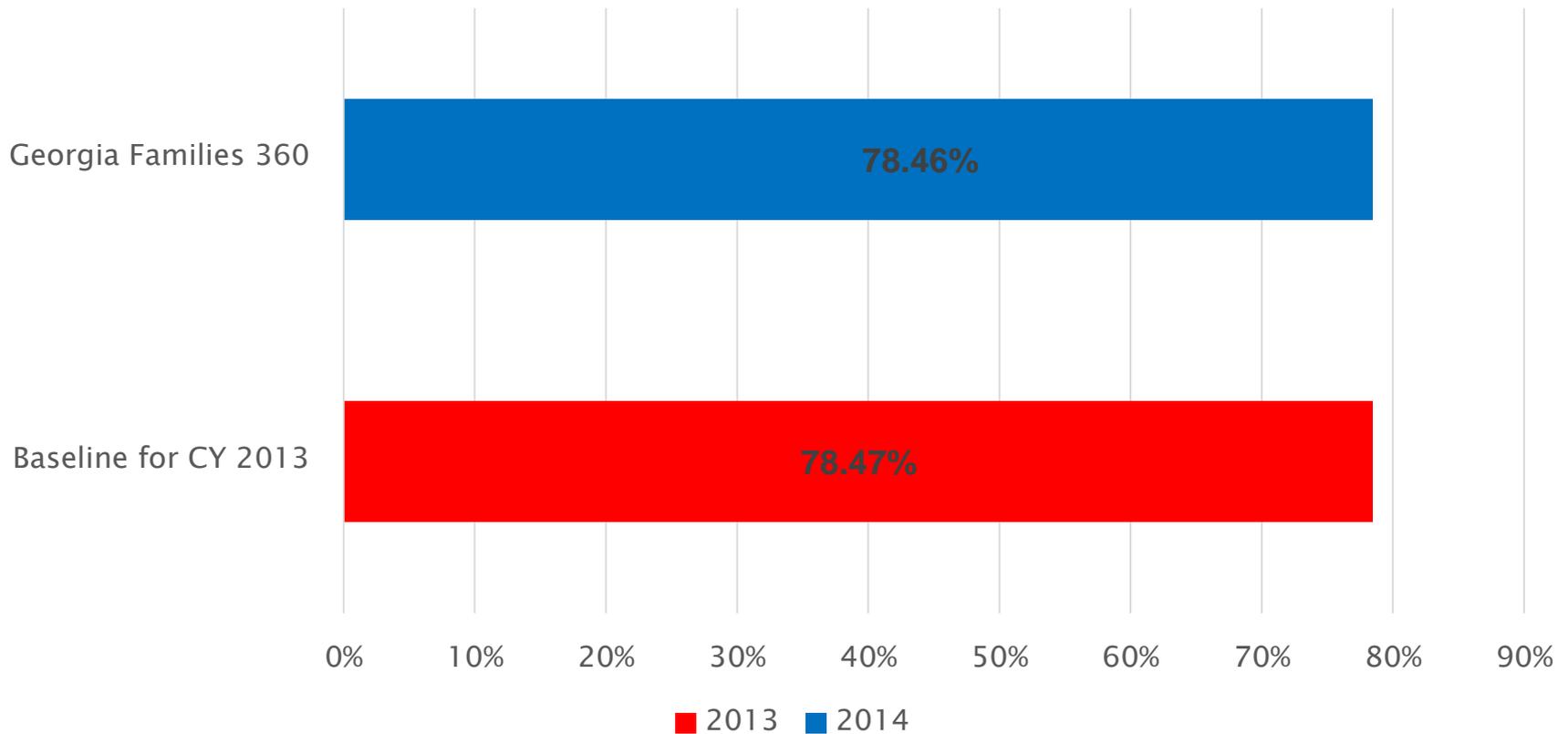
# Performance Results

Follow-up After Hospitalization for Mental Illness – 7-Day Follow-up



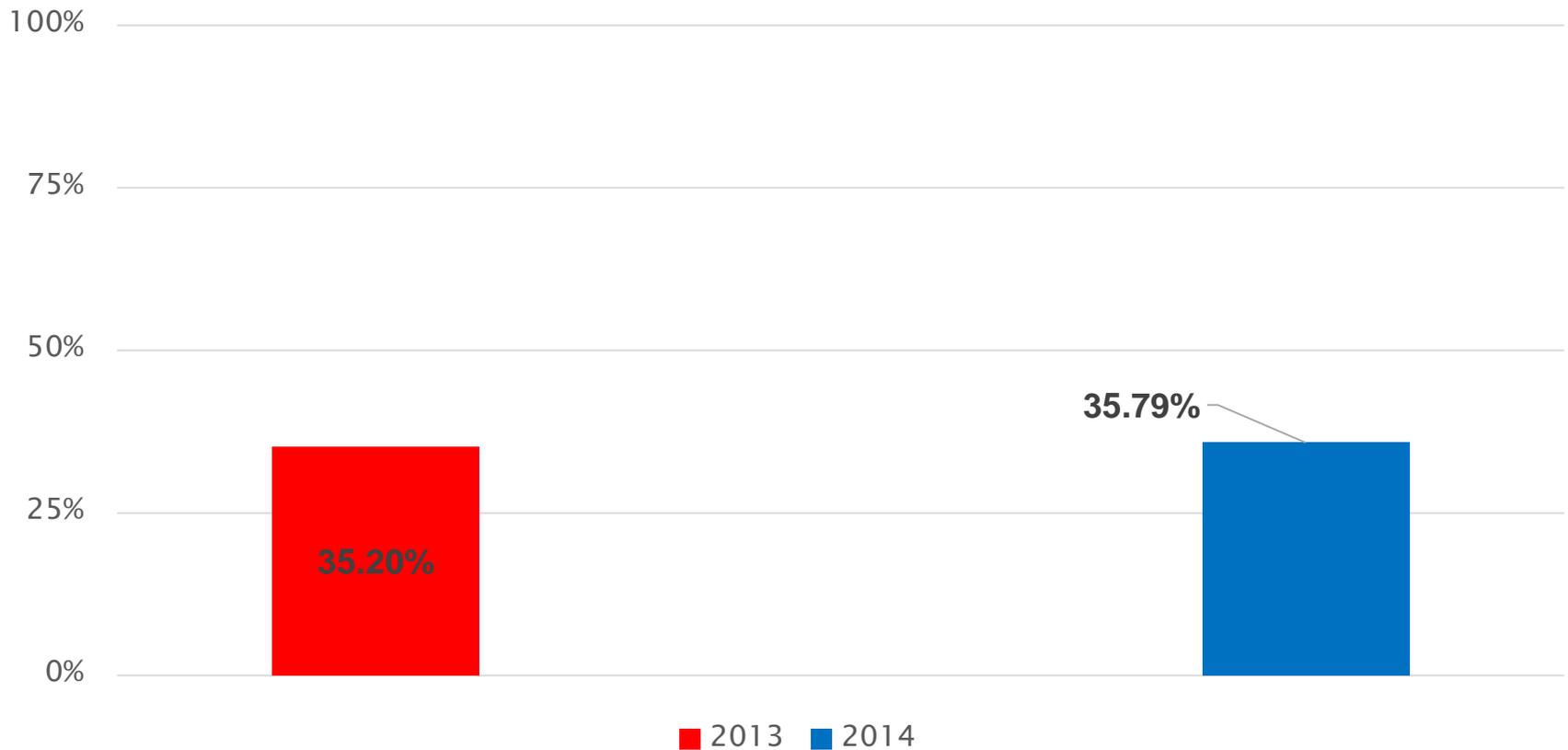
# Performance Results

Follow-up After Hospitalization for Mental Illness– 30-Day Follow-up



# Performance Results

Ambulatory Care- ER Visits per 1,000 Member Months



# Summary

- Performance measure rates based on CY 2014 data identified some successes and some areas needing improvement
- We will continue to work closely with Amerigroup to drive improved health outcomes for the Georgia Families 360 program

# Questions

