Quality Improvement and Patient Protection

Health Policy Commission

Committee Meeting
September 9, 2013
Agenda

- Approval of minutes from the July 23, 2013 meeting
- Presentation of the Behavioral Health Integration Task Force Report by Commissioner Marcia Fowler, Massachusetts Department of Mental Health
- Presentation of results of MassHealth PCMHI
- Update on Office of Patient Protection data
- Schedule of next Committee meeting (November 13, 2013)
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- Schedule of next Committee meeting (November 13, 2013)
Vote: Approving minutes

Motion: That the Quality Improvement and Patient Protection Committee hereby approves the minutes of the Committee meeting held on July 23, 2013, as presented.
Agenda

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- Update on Office of Patient Protection data

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Update

Massachusetts Patient-Centered Medical Home

Quality Improvement and Patient Protection Committee

September 9, 2013
Agenda

- Overview of program
- Behavioral Health Integration
- Accomplishments & Challenges
- Transitioning to Primary Care Payment Reform
Multi-payer, 3-year demonstration project (April 2011 to April 2014)

Governance included a council, a steering committee and multiple work groups

Currently includes 46 primary care practices, selected through a competitive RFR

Practices receive technical assistance on transforming into PCMHs, delivered through a Learning Collaborative model

Formal Evaluation underway (completed October 2014)
## Governance

<table>
<thead>
<tr>
<th>Governing body</th>
<th>Membership</th>
<th>Primary role</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sponsor</td>
<td>EOHHS</td>
<td>■ Set policy and strategy</td>
</tr>
<tr>
<td>Council</td>
<td>Payer, purchasers, employers, healthcare professionals, advocates</td>
<td>■ Sounding board for sponsor</td>
</tr>
<tr>
<td>Steering Committee</td>
<td>Practices and select council members</td>
<td>■ Evaluate performance and make recommendations</td>
</tr>
<tr>
<td>Workgroups</td>
<td>Practices, payers, stakeholder agencies, clinical experts</td>
<td>■ Specific workgroups on:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>– Evaluation</td>
</tr>
<tr>
<td></td>
<td></td>
<td>– Shared savings and data sharing</td>
</tr>
<tr>
<td></td>
<td></td>
<td>– Behavioral Health integration</td>
</tr>
<tr>
<td></td>
<td></td>
<td>– Clinical care management</td>
</tr>
<tr>
<td></td>
<td></td>
<td>– Consumer and community engagement</td>
</tr>
</tbody>
</table>
Agenda

- Overview of program
- Behavioral Health Integration
- Accomplishments & Challenges
- Transitioning to Primary Care Payment Reform
Approaches and Elements

Relationship and Communication Practices

- Non-Co-located
- Co-located
- Co-located & Fully Integrated

Approaches

Clinic System Integration

Patient Care and Population Impact

Community Integration

Care Management
## Elements of Integration

<table>
<thead>
<tr>
<th>Relationship &amp; Communication Practices</th>
<th>Patient Care and Population Impact</th>
<th>Community Integration</th>
<th>Care Management</th>
<th>Clinic System Integration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Triaged access</td>
<td>BH screening and referral</td>
<td>Self help &amp; community resource connections</td>
<td>Coordination of integrated treatment plan</td>
<td>Schedule accessibility</td>
</tr>
<tr>
<td>Smooth hand-offs</td>
<td>BH skills used by primary care team</td>
<td>Specialty mental health &amp; substance use referral</td>
<td>Use of behavioral health skills</td>
<td>Program Integration</td>
</tr>
<tr>
<td>Team membership</td>
<td>Integrated clinical pathways</td>
<td>Community resources connections</td>
<td>Use of community resources</td>
<td>Health information exchange</td>
</tr>
<tr>
<td>Program leadership</td>
<td>Health care team leader</td>
<td></td>
<td></td>
<td>Coordinated scheduling and same day visits</td>
</tr>
<tr>
<td>Sharing expertise</td>
<td>Family focused care</td>
<td></td>
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<tr>
<td></td>
<td>Patient safety practices</td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td>Patient feedback</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>Supporting health behavior change</td>
<td></td>
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</tr>
</tbody>
</table>
Integration Toolkit

- Web based technical assistance resource
- User friendly
- Provides detail guidance and multiple resources to support primary care practices in their efforts to integrate behavioral health
- Publically Available
Agenda

- Overview of program
- Behavioral Health Integration
- Accomplishments & Challenges
- Transitioning to Primary Care Payment Reform
Accomplishments

Key accomplishments and findings

**Program**
- 44 of 46 practices remain in initiative
- Nearly 100% attendance to seven learning collaboratives held to date
- 95% compliance with NCQA recognition
- 85% compliance with reporting clinical measures

**Practice transformation**
- Statistically significant increase across: access, patient-centered care, practice-based care teams, care coordination, care management

**Patient experience**
- Adult patients positively perceived communication with providers and office staff
- Experience of children with chronic conditions similar to the experience of children without chronic conditions
- Parents/guardians report excellent communication with providers and courteous office staff
- Provision of more comprehensive care
Accomplishments

Key accomplishments and findings

Staff experience

- Moderate adoption of a culture of quality and development of teamwork
- Practices with strong leadership showed greater adoption of a quality culture and teamwork
- Smaller practices had higher adoption of a quality culture and development of teamwork

Clinical

- Five of the twenty-two clinical measures showed improvement from April 2011 to June 2013:
  - Screened for depression for adult diabetic patients,
  - Immunization status of multiple vaccines in pediatric patients,
  - Action plan for children diagnosed with persistent asthma,
  - Adult highest-risk patient who have care plan,
  - Pediatric highest-risk patient who have care plan
- None of the measures showed a statistically significant decrease from baseline to June 2013
# Challenges

<table>
<thead>
<tr>
<th>Level</th>
<th>Challenge</th>
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</thead>
<tbody>
<tr>
<td>State</td>
<td>Involvement and investment across all payers</td>
</tr>
<tr>
<td>EOHHS/MassHealth</td>
<td>Alignment of medical home model across diverse programs, plans and initiatives, Funding to support transformation</td>
</tr>
<tr>
<td>Provider Community</td>
<td>Leadership involvement, Initial technological shortcomings, Adequate composition for lost FFS revenue, Limited engagement from non-clinical staff</td>
</tr>
<tr>
<td>Patient/Member</td>
<td>For adult patients, weak experience of:</td>
</tr>
<tr>
<td></td>
<td>- “Knowing the patient as a person”</td>
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<td></td>
<td>- Providers encouraging questions</td>
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<td></td>
<td>- Shared decision making</td>
</tr>
<tr>
<td></td>
<td>- Behavioral health integration</td>
</tr>
<tr>
<td></td>
<td>- Access after-work and on weekends</td>
</tr>
</tbody>
</table>
Agenda

■ Overview of program
■ Behavioral Health Integration
■ Accomplishments & Challenges
■ Transitioning to Primary Care Payment Reform
The Primary Care Payment Reform Initiative (PCPRI) builds off of PCMHI’s strong foundation to reach more providers in an impactful way:

- The health care delivery model embedded in PCPRI centers around a medical home model that parallels the model in PCMHI and emphasizes behavioral health integration.
- Clinical measures monitored in PCPRI include PCMHI clinical measures.
- Provider data portal in PCPRI is an enhanced version of PCMHI portal.

PCMHI sites that elect to participate in PCPRI will receive PCPRI payments in lieu of PCMHI payments at the initiation of the program.
QUESTIONS
Agenda

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- Presentation of results of MassHealth PCMHI
- **Update on Office of Patient Protection data**
- Schedule of next Committee meeting (November 13, 2013)
2012 Internal Reviews

Number of internal reviews*

- 12,783 total internal reviews
  - 5,058 approved
  - 570 partially approved or resolved
  - 6,689 denied or dismissed
  - 215 withdrawn

Results in 2012*

Results for grievances received by carriers
100% = 12,783

- Approved: 40%
- Partially approved/resolved: 5%
- Denied and/or dismissed: 53%
- Withdrawn: 2%

* Data as reported by carriers to OPP
2012 External Reviews

2012 Requests for external review

- 387 total cases
  - 287 eligible
  - 100 ineligible

Outcomes of eligible external review requests

Results for 287 eligible cases:
- 178 upheld
- 88 overturned
- 4 partially overturned
- 12 resolved
- 3 withdrawn
- 2 no data
Office of Patient Protection 2012 External Reviews
Results for Eligible Cases

- Upheld: 62%
- Partially Overturned: 4%
- Overturned: 1%
- Resolved: 1%
- Withdrawn: 1%
- No Data: 31%
2012 Disposition of Cases Eligible for External Review

<table>
<thead>
<tr>
<th>Result of External Review</th>
<th>Behavioral Health</th>
<th>Experimental</th>
<th>Infertility Care</th>
<th>Inpatient Care</th>
<th>Rehabilitative Services</th>
<th>Outpatient Care</th>
<th>Cosmetic/Reconstructive Surgery</th>
<th>Diagnostic Services</th>
<th>Pharmacy</th>
<th>Emergency Care</th>
<th>Durable Medical Equipment</th>
<th>Dental</th>
<th>Excluded Services</th>
<th>Visual Services</th>
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<tr>
<td>Upheld</td>
<td>110</td>
<td>5</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
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<td>0</td>
<td>0</td>
<td>0</td>
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<tr>
<td>Partially Overturned</td>
<td>0</td>
<td>21</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
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<td>Overturned</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
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<tr>
<td>Resolved</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
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<tr>
<td>Withdrawn</td>
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<td>0</td>
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</table>
## 2012 Behavioral Health External Reviews

### 2012 Behavioral Health (percentages given for eligible cases only)

147 total cases (132 eligible, 1 no data, 14 ineligible)

<table>
<thead>
<tr>
<th>Requests</th>
<th>Total</th>
<th>Eligible</th>
<th>Upheld</th>
<th>Partially</th>
<th>Overturned</th>
<th>Resolved</th>
<th>Withdrawn</th>
<th>No Data</th>
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<tr>
<td>Behavioral Health</td>
<td>147</td>
<td>132</td>
<td>79</td>
<td>4</td>
<td>41</td>
<td>6</td>
<td>2</td>
<td>1</td>
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</tbody>
</table>

- Upheld: 79 (59.8%)
- Partially Overturned: 4 (3.03%)
- Overturned: 41 (31.1%)
- Resolved: 6 (4.55%)
- Withdrawn: 2 (1.52%)
- No Data: 1 (0.08%)
Office of Patient Protection
2012 Behavioral Health External Reviews

- Upheld: 59%
- Partly Overturned: 1%
- Overturned: 1%
- Resolved: 1%
- Withdrawn: 5%
- No Data: 31%
## 2012 Behavioral Health – Detail by Type of Service (eligible cases only)

147 cases, 132 eligible

<table>
<thead>
<tr>
<th>Subcategory</th>
<th>Eligible</th>
<th>Upheld</th>
<th>Partially Overturned</th>
<th>Overturned</th>
<th>Resolved</th>
<th>Withdrawn</th>
<th>No Data</th>
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<tbody>
<tr>
<td>Eating Disorder</td>
<td>10</td>
<td>2</td>
<td></td>
<td>8</td>
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<td></td>
<td></td>
<td></td>
<td>20.0%</td>
<td></td>
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<td></td>
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<tr>
<td>Inpatient Care – not medically necessary</td>
<td>81</td>
<td>48</td>
<td>4</td>
<td>23</td>
<td>4</td>
<td>2</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>59.3%</td>
<td>4.94%</td>
<td>28.4%</td>
<td>9.84%</td>
<td>2.47%</td>
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<td>Inpatient out of plan provider</td>
<td>6</td>
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<tr>
<td></td>
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<td>100%</td>
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<td>Other</td>
<td>1</td>
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<tr>
<td></td>
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<td>100%</td>
<td></td>
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<tr>
<td>Outpatient out of plan provider</td>
<td>11</td>
<td>6</td>
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<td>3</td>
<td>2</td>
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<tr>
<td></td>
<td></td>
<td>54.5%</td>
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<td>27.3%</td>
<td>18.2%</td>
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<tr>
<td>Partial Hospital Care</td>
<td>1</td>
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<td>1</td>
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<td></td>
<td></td>
<td>100%</td>
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<tr>
<td>Substance Use Disorder</td>
<td>22</td>
<td>16</td>
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<td>6</td>
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<td>72.7%</td>
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<td>27.3%</td>
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<tr>
<td>TOTAL Behavioral Health</td>
<td>132</td>
<td>79</td>
<td>4</td>
<td>41</td>
<td>6</td>
<td>2</td>
<td>0</td>
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<tr>
<td></td>
<td></td>
<td>59.8%</td>
<td>3.03%</td>
<td>31.1%</td>
<td>4.55%</td>
<td>1.52%</td>
<td>0.00%</td>
</tr>
</tbody>
</table>
2012 Behavioral Health External Reviews (by type of treatment or service)

- Inpatient Care, Not Medically Necessary: 61%
- Substance Use Disorder: 17%
- Outpatient Care, Out of Plan Provider: 8%
- Eating Disorder: 8%
- Inpatient Care, Out of Plan Provider: 4%
- Other: 1%
- Partial Hospital Care: 1%
2012 Disposition of Behavioral Health Cases Eligible for External Review (by type of treatment or service)

Number of Eligible Cases for External Review

- Inpatient Care – Not medically necessary
- Substance Use Disorder
- Outpatient Out of Plan Provider
- Eating Disorder
- Inpatient Out of Plan Provider
- Other
- Partial Hospital Care

Appeal Type:
- Upheld
- Partially Overturned
- Overturned
- Resolved
- Withdrawn
- No Data
Comparison of 2012 Eligible External Reviews for Behavioral Health and All Other Appeal Types

Analysis of external review outcomes, categorized by appeal type, with distribution of upheld, partially overturned, overturned, resolved, withdrawn, and no data cases.
Comparison of 2012 Eligible Inpatient Care Cases for Behavioral Health and All Other Appeal Types

Inpatient Care - Behavioral Health

- Upheld
- Partially Overturned
- Overturned
- Resolved
- Withdrawn
- No Data

Inpatient Care - All Other Appeals (medical/surgical)

- Upheld
- Partially Overturned
- Overturned
- Resolved
- Withdrawn
- No Data
All External Review Requests, 2001-2012

Number of Requests for External Review

Calendar year external review was filed

<table>
<thead>
<tr>
<th>Year</th>
<th>Eligible</th>
<th>Ineligible</th>
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<tbody>
<tr>
<td>2001</td>
<td>45</td>
<td></td>
</tr>
<tr>
<td>2002</td>
<td>93</td>
<td></td>
</tr>
<tr>
<td>2003</td>
<td>224</td>
<td>149</td>
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<td>2004</td>
<td>201</td>
<td>111</td>
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<td>2005</td>
<td>214</td>
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<td>2006</td>
<td>227</td>
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<td>2007</td>
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<td>2008</td>
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<td>2009</td>
<td>291</td>
<td>104</td>
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<td>2010</td>
<td>390</td>
<td>87</td>
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<tr>
<td>2011</td>
<td>328</td>
<td>86</td>
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<tr>
<td>2012</td>
<td>287</td>
<td>100</td>
</tr>
</tbody>
</table>
Percent Outcomes of All External Review Requests, 2001-2012

- Upheld
- Overturned
- Partially Overturned
- Resolved
- Withdrawn
- No Data
- Ineligible
Percent Outcomes of *Eligible* External Reviews, 2001-2012
2001-2012 External Review Requests: Comparison of behavioral health with medical/surgical

Number of Requests for External Review (incl. ineligible)

Ext. Review Request Received Year

- All Behavioral Health
- All Other External Review Types (medical/surgical)
- No Data

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External Review Requests: Behavioral Health and Medical/Surgical

![Bar chart showing the number of external review requests from 2001 to 2012 for behavioral health and medical/surgical categories. The chart indicates a trend where the number of requests varies each year, with peaks in 2003, 2008, and 2010. The legend explains that the blue bars represent all behavioral health requests, the light blue bars represent all other external reviews (medical/surgical), and the purple bars represent no data.](chart.png)
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- Presentation of results of MassHealth PCMHI
- Update on Office of Patient Protection data

**Schedule of next Committee meeting (November 13, 2013)**
Contact Information

For more information about the Health Policy Commission and the Office of Patient Protection:

- Visit us: [http://www.mass.gov/hpc](http://www.mass.gov/hpc)
- Follow us: [@Mass_HPC](https://twitter.com/Mass_HPC)
- E-mail us: [HPC-Info@state.ma.us](mailto:HPC-Info@state.ma.us) or [HPC-OPP@state.ma.us](mailto:HPC-OPP@state.ma.us)