# **Behavioral Health Partnership Oversight Council**

## ADULT Quality Management & Access Committee-

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## Co-Chairs: Elizabeth Collins & Howard Drescher

### Adult Quality Committee Meeting Summary: Sept. 13, 2011

Next meeting of New Adult Quality, Access and Policy Committee: <u>TBA</u>



## BHP OC Committee Changes



The BHP OC reviewed the various Council Committee oversight focuses and consolidated several of the Committees for efficiencies for both State Agency participants, Committee participants and staff support. These changes will be discussed at the Sept. 14 BHP OC meeting.

Adult services and policy will be thru the: <u>Adult Quality, Access & Policy Committee</u> a blend of the DMHAS advisory and Adult Quality Committee. The co- Chairs are: Howard Drescher, Heather Gates and Alicia Woodsby. The meeting date for this committee <u>will be announced</u>.

- ✓ The Chairs will discuss:
  - Expansion of Committee consumer participation with Lori Szczygiel (VO): VO may assign an adult peer liaison to the meeting.
  - Meeting time to encourage family/member participation in meetings.

### CTBHP/VO report

### Geo-Access Update

Purpose of a Geo Access analysis is to identify the number of providers in close proximity to members in an area: develop a ratio of denominator of members to the numerator –providers. Status of this VO initiative:

- Prepared to undertake the analysis that includes providers that have treated at least four (4) Medicaid members over the last Calendar year. VO is working with their national company on this analysis.
- The largest provider increase in the CTBHP network is independent practitioners who may

accept local Medicaid clients.

- VO can determine who is NOT taking new patient via provider relations information, sampling method and consumer input.
- Begin the process with out patient service, child, adult and life span clinics. VO and DCF meet monthly with Enhanced Care Clinics (ECCs) with reports on intake numbers and monthly client volume.
- Howard Drescher noted that a key question rose when this committee began related to service gaps and what happens to the patient waiting for specific level of service. VO said ECC/CTBHP key focus area included access standards/clinic performance, quality coordination of BH services with PCP, dual co-morbidity assessment and treatment and family engagement. ECCs performance is assessed through quarterly 'mystery shopper' cycles and ECCs have the opportunity to take corrective action in areas of under performance.

## VO will present an update on Adult ECC in Oct and Geo Access in November.

(Click icon below for Home Health Initiative and Adult ED delays)



(*Slides 7-8*) *Adult ED delays*: the number of discharge delays has decreased from April – July 2011. The admission rates of adults delayed in the ED (*Slide 8*) were highest in April/May with a reduction noted in the following 2 months.

- DMHAS receives daily reports on available detox beds and VO calls EDs regarding adult patients "stuck" in the ED.
- About 50% of patients seen in the ED for adult BH are admitted to the hospital; there is significant variability among hospital ED inpatient admit rates.
- At the end of the CY VO will develop ED profiles on admit rates, client gender, demographics. While CTBHP total performance dollars remain unchanged, CTBHP will look to adding performance initiatives. The above data analysis will contribute to a performance incentive appropriate to this population.

### Follow up ED data analysis at the Oct/November meetings.

*Home Health Initiative* (*Slides 2-5*) derives from the VO performance target for CY2011 that focuses on data collection and analysis and collaborative development of best practices in the home care setting with the Home Care providers.