

Behavioral Health Partnership Oversight Council

Quality Management & Access Subcommittee

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Meeting Summary: January 19, 2007

Co-Chairs: Dr. Davis Gammon & Robert Franks Vice-Chair – Paula Armbruster

Next meeting: Friday Feb. 16, 2007 @ 11:30 AM at VOI, Rocky Hill

BHP Updates

CTBHP /ValueOptions (VOI):

- ✓ **Outpatient (OP) screens**, under ideal conditions (i.e. no technology delays), take 3 & 1/2 minutes, on average now less than 10 minutes as providers become more familiar with the system. Last count, 142 of 3000 providers have opted out of web-based submission of OP screens.
- ✓ **Outpatient Re-authorizations (re-auth.)** for sessions beyond the initially approved 26 sessions:
 - Concerns have been expressed about 1) the anticipated re-auth volume and VOI capacity to manage that volume and 2) the administrative time burden of the process. VOI stated the present concurrent review (CR) form is being reviewed and revised and then can be down-loaded of CTBHP site: www.CTBHP.com Observable administrative time for concurrent review was 5 minutes at Wheeler Clinic. VOI does assign consistent clinical teams to work with large provider practices.
 - While there may be web-based access in the future for CR, the current VOI clinician/provider phone review has helped in the understanding of various “crafted” programs and may result in the development of more formal intensive levels of care.

The Chair reflected on CTBHP/VOI flexibility and interest in considering evidenced-based community models and expressed appreciation for VOI’s efforts.

HSRI Behavioral Health Performance “Report Card” Initiative

There are about 80 indicators chosen, many of which will be applicable to adult BH services in HUSKY. (The indicators are on web site: www.CTBHP.com. Click on ‘member’, then on the left ‘performance measures’). **HSRI timeline** provided by DSS:



Revised CT BHP PI
Project Timeline 12-2006

CTBHP/VOI Performance targets 2007

Key performance measures of the Administrative Service Organization, ValueOptions, are

associated with financial withholds that total 7.5% of the dollars. See attached 2007 draft performance targets below with 2 new indicators that replace ED use and hospital readmissions.



Inpatient Delays-
Performance Target v



Disrupted Foster
Children- Performance

Discussion:

- Inpatient delays: VOI met with 3 large hospitals regarding hospital discharge delay data reported regularly to the Operations SC. The hospital and CTBHP data are reportedly comparable in the number of hospital discharge delays. All children with discharge delays are assigned an Intensive Case Manager in VOI. (*See proposed target- click on 1st doc*).
- The second performance indicator first looks at the correlation of children's out-of-home placement disruption with BH service use; if a correlation is identified, VOI & DCF could use BH indicators to identify children/youth at risk for disruption and develop early interventions.
- BHP Consumer Satisfaction report is completed. Further discussion at the **February meeting**.
- Provider Satisfaction survey items have been narrowed to items based on the CTBHP/VOI contract provisions. There were positive responses in both surveys.
- Both surveys provide opportunities for a Quality Improvement process. Next steps would be to report findings to the BHP OC in March under a "2006 year in review", then to State agencies, advocates and the General Assembly.

2006 ASO Performance Targets Results

Target results are being gathered and reviewed. Dr. Schaefer (DSS) stated the SC can view the VOI 3 page summary of the 2006 target achievement when available. Other performance data based on the 3rd and 4th Quarter of 2006 will be provided through the DSS data warehouse to identify performance for certain targets.

BHP will provide a matrix of the Exhibit E priority level reports at the Feb. Subcommittee meeting.