

Behavioral Health ASO Update on Performance Standards

November 28, 2018



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Supporting Health and Recovery

Call Management



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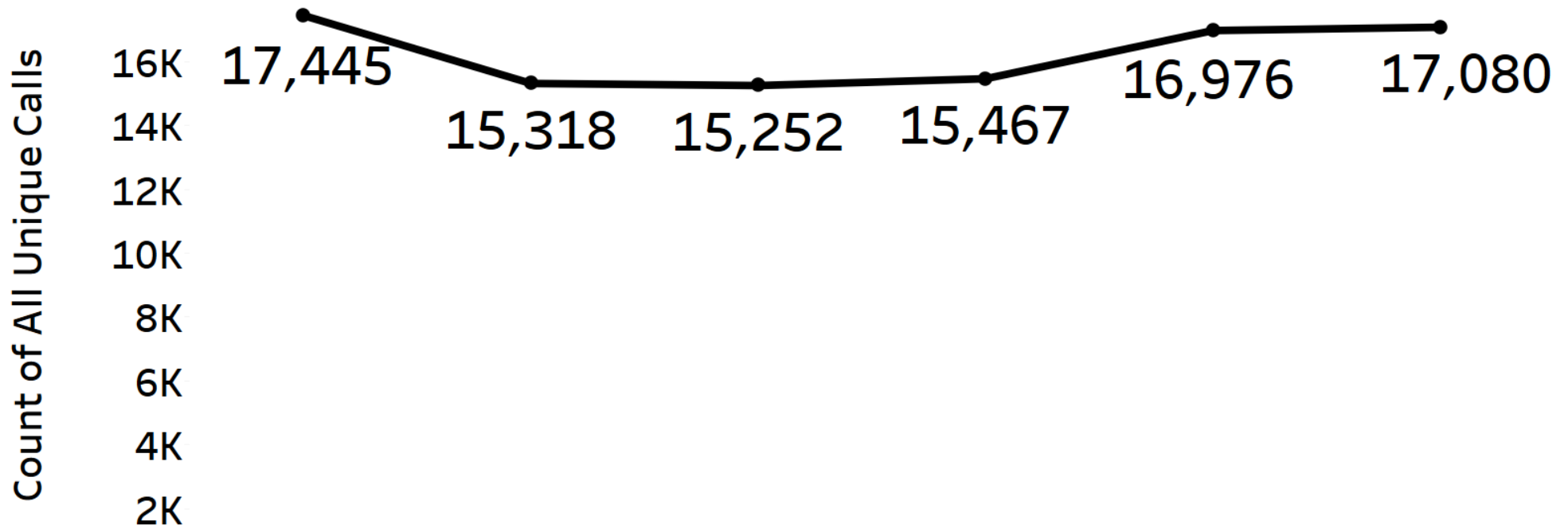
Performance Standards: Call Management

- Beacon continues to meet or exceed call performance standards.
- Total call volume has maintained approximately 16,000 calls per quarter.
- Average speed of answered member calls continues to trend downward as Beacon focuses on enhancing the member experience.
- Beacon has experienced slight increases in incoming provider calls during the expansion of web-based authorization processes.
- Technological efficiencies for the provider community continue to be a focus and primary impact for call volume.

Performance Standards: Call Management

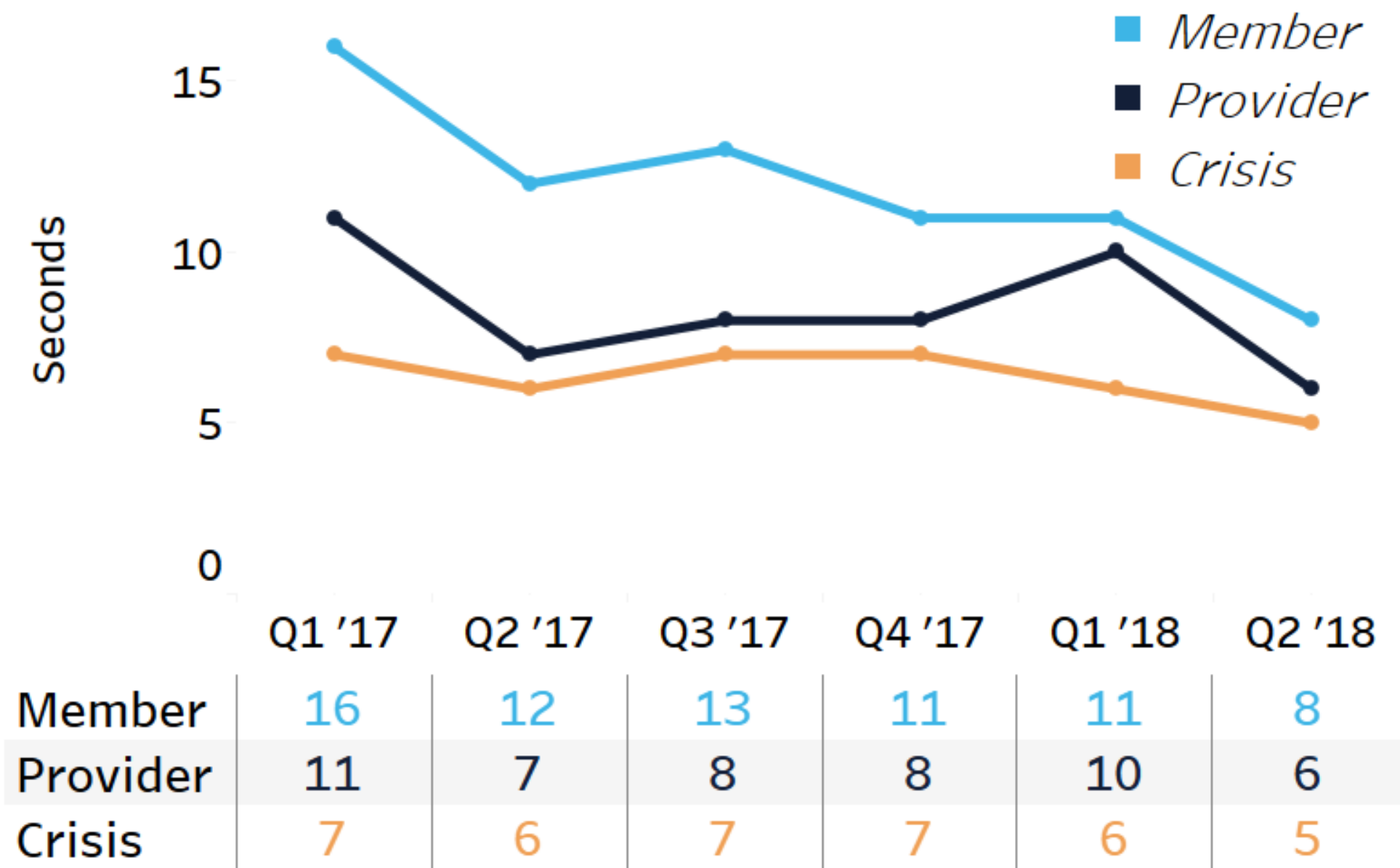
Section	Standard
Total Call Volume	--
Average Speed of Answer	<i>Provider and Member: 30 Seconds Crisis: 15 Seconds</i>
Call Abandonment Volume/Rate	<i>Less than or equal to 5%</i>
Calls Answered within Contract Standard (and Percent on Hold)	<i>Greater than or equal to 90%</i>

Total Call Volume

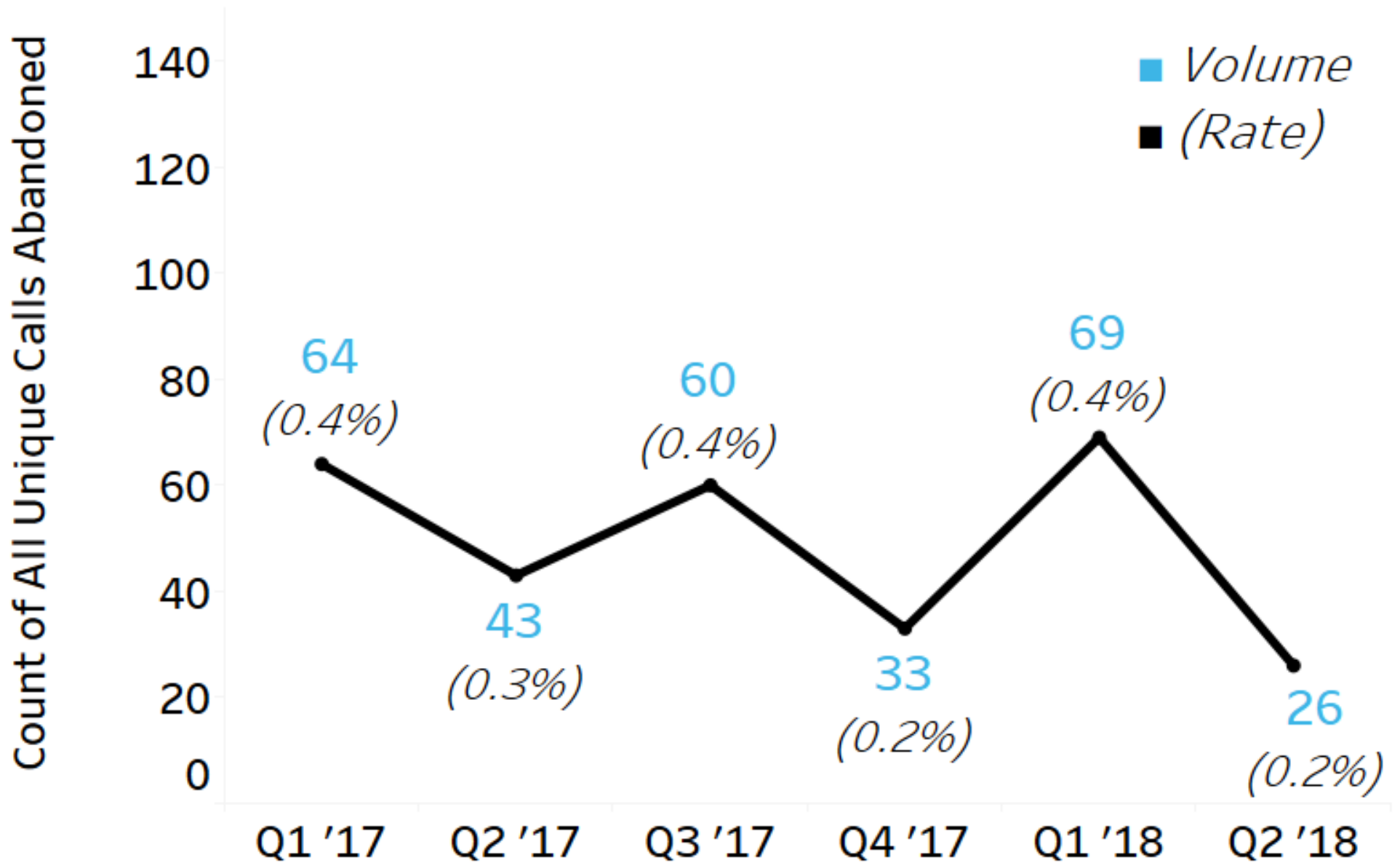


	Q1 '17	Q2 '17	Q3 '17	Q4 '17	Q1 '18	Q2 '18
Member	5,536	5,072	5,128	5,023	5,684	6,015
Provider	11,040	9,524	9,349	9,714	10,374	10,148
Crisis	869	722	775	730	918	917

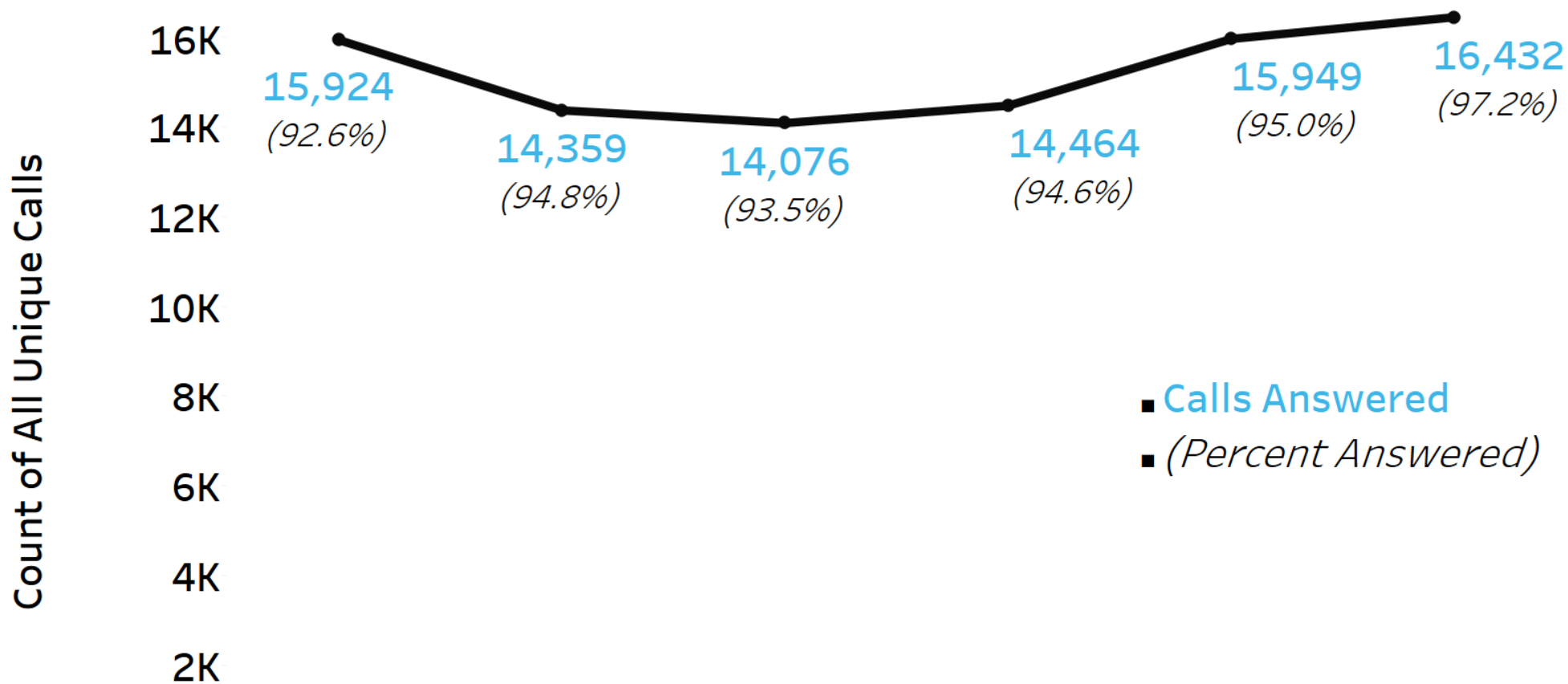
Average Speed of Answered Calls



Call Abandonment Volume



Calls Answered Within Contract Standard



	Q1 '17	Q2 '17	Q3 '17	Q4 '17	Q1 '18	Q2 '18
Member & Provider (30 sec)	15,137	13,699	13,370	13,810	15,096	15,582
Crisis (15 sec)	787	660	706	654	853	850

Utilization Management



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Performance Standards: Utilization Management

- Utilization Management is the program whereby Beacon, as the Behavioral Health ASO, ensures the right level of care at the right time for the right amount of time.
- Through collaboration with the individual served, family, and care team, UM promotes a strengths-based, person-centered approach focused on member success and recovery.
- Currently leverages data and technology to ease the administrative burden of the process on the providers (e.g. by-pass and registration).
- >90% of requested authorizations are processed via the web by licensed clinicians, minimizing administrative burden to providers.
- Beacon continues to meet or exceed utilization performance standards.

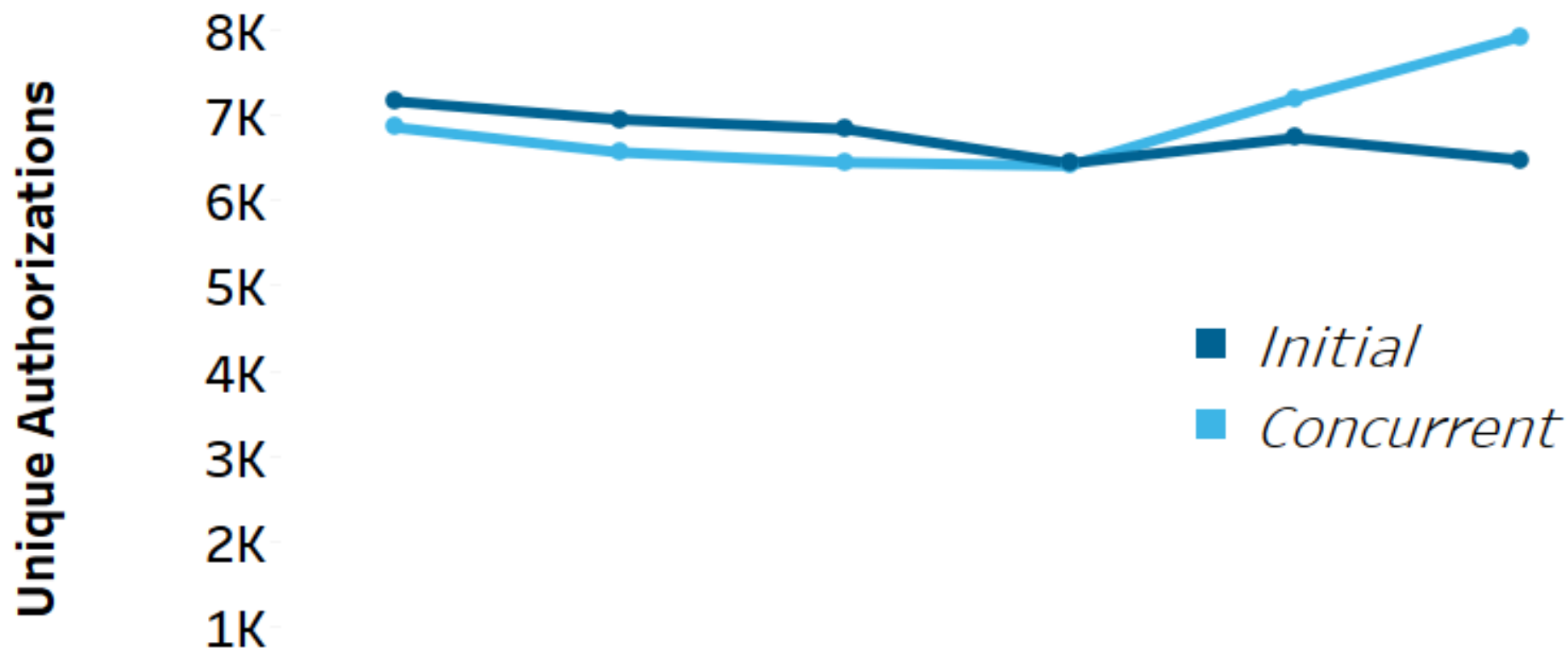
Performance Standards: Utilization Management

Section	Standard
Higher Level of Care* (HLOC) (Initial and Concurrent) Authorization Volume	--
HLOC Decision Timeliness	<i>Greater than or equal to 95%</i>
Lower Level of Care** (LLOC) (Initial and Concurrent) Authorization Volume	--
LLOC Decision Timeliness	<i>Greater than or equal to 95%</i>

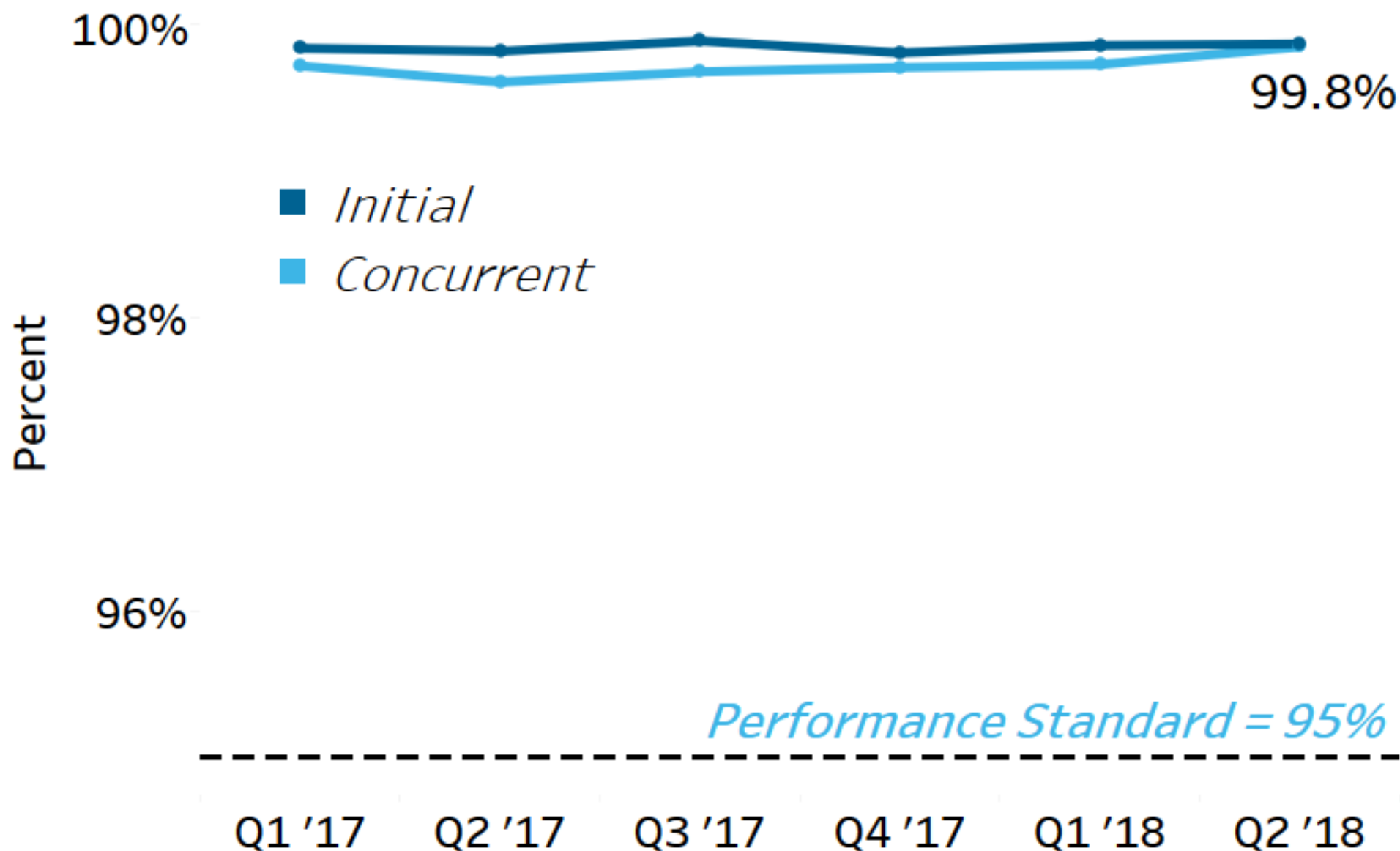
**HLOC: Treatment requiring overnight stay*

***LLOC: Community-based treatment, including Routine Outpatient*

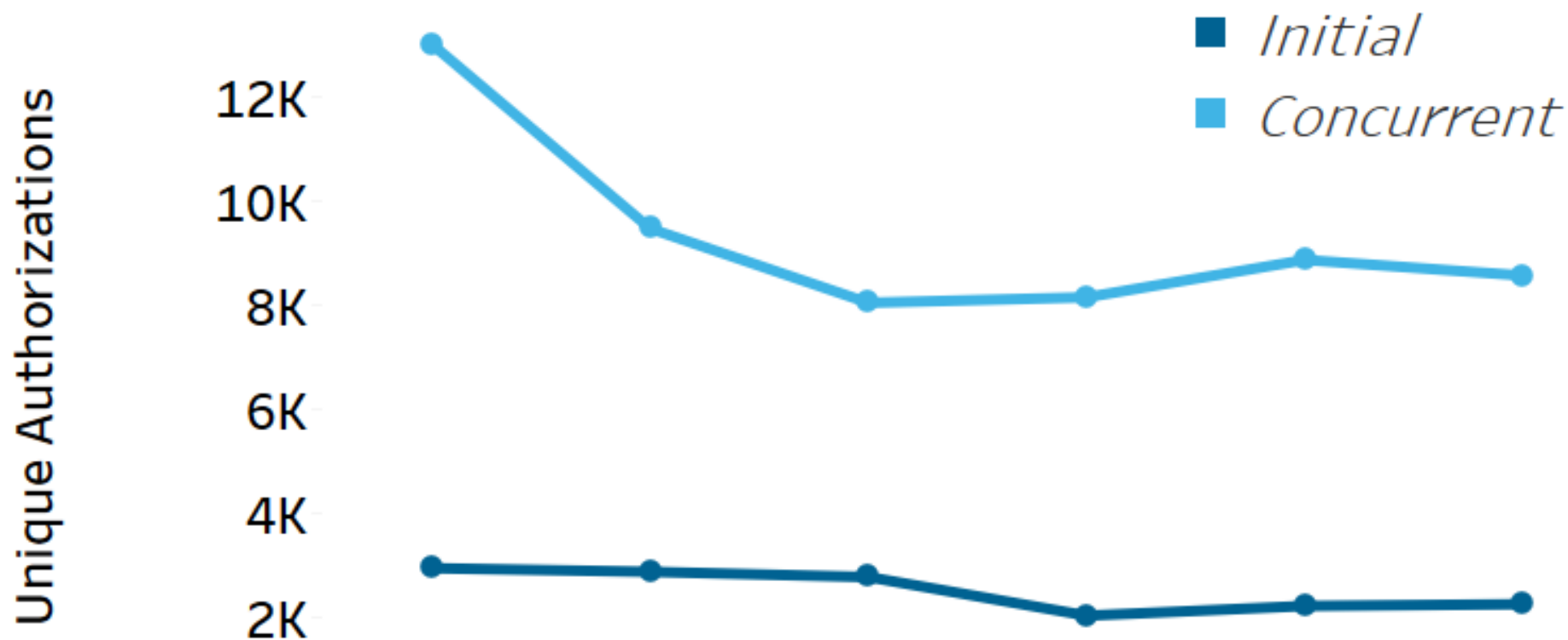
Higher Level of Care Authorization Volume



Higher Level of Care Decision Timeliness



Lower Level of Care Authorization Volume



Initial

Q1 '17

Q2 '17

Q3 '17

Q4 '17

Q1 '18

Q2 '18

2,949

2,880

2,779

2,037

2,223

2,257

Concurrent

13,016

9,475

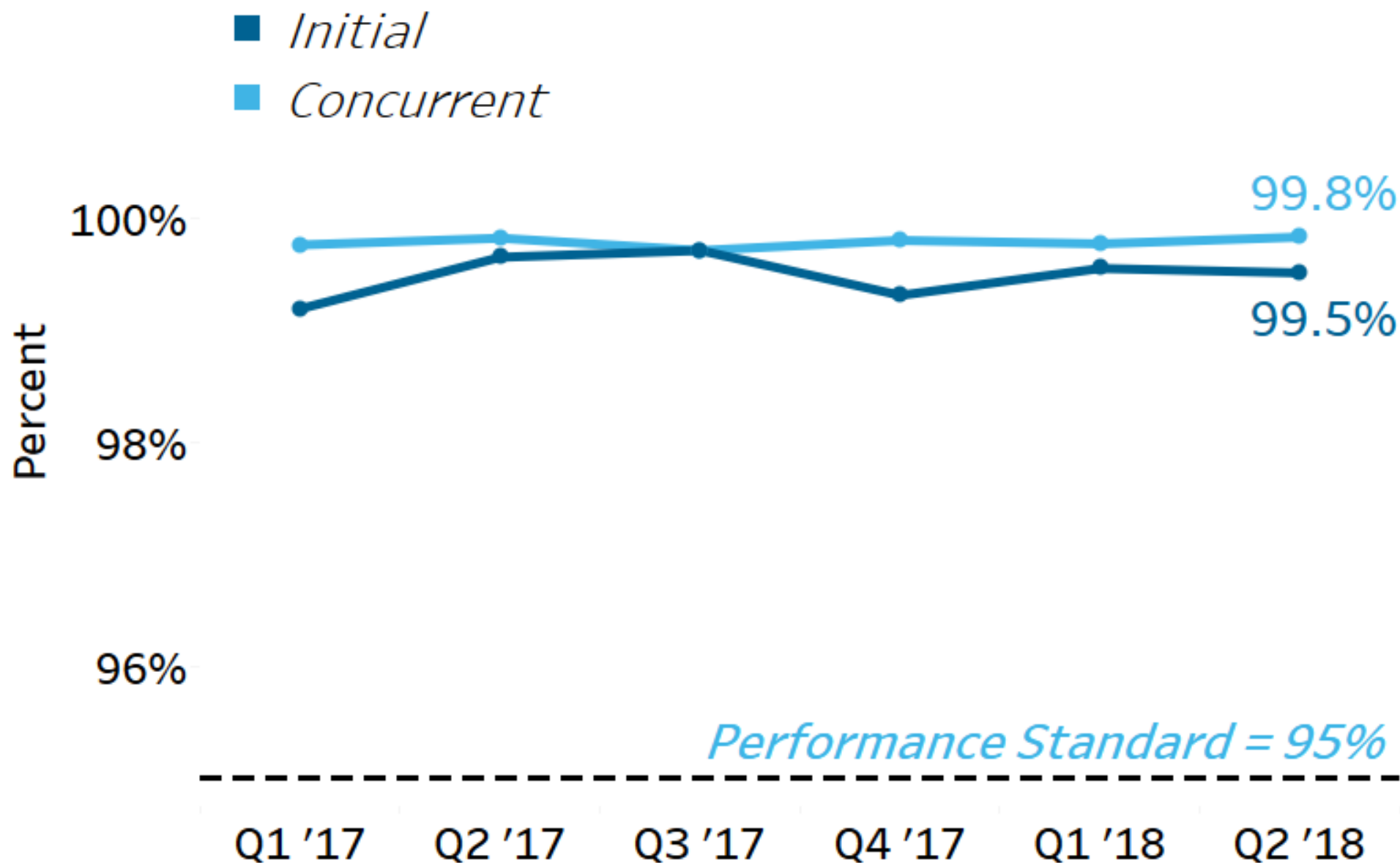
8,050

8,156

8,874

8,573

Lower Level of Care Decision Timeliness



Denials and Appeals



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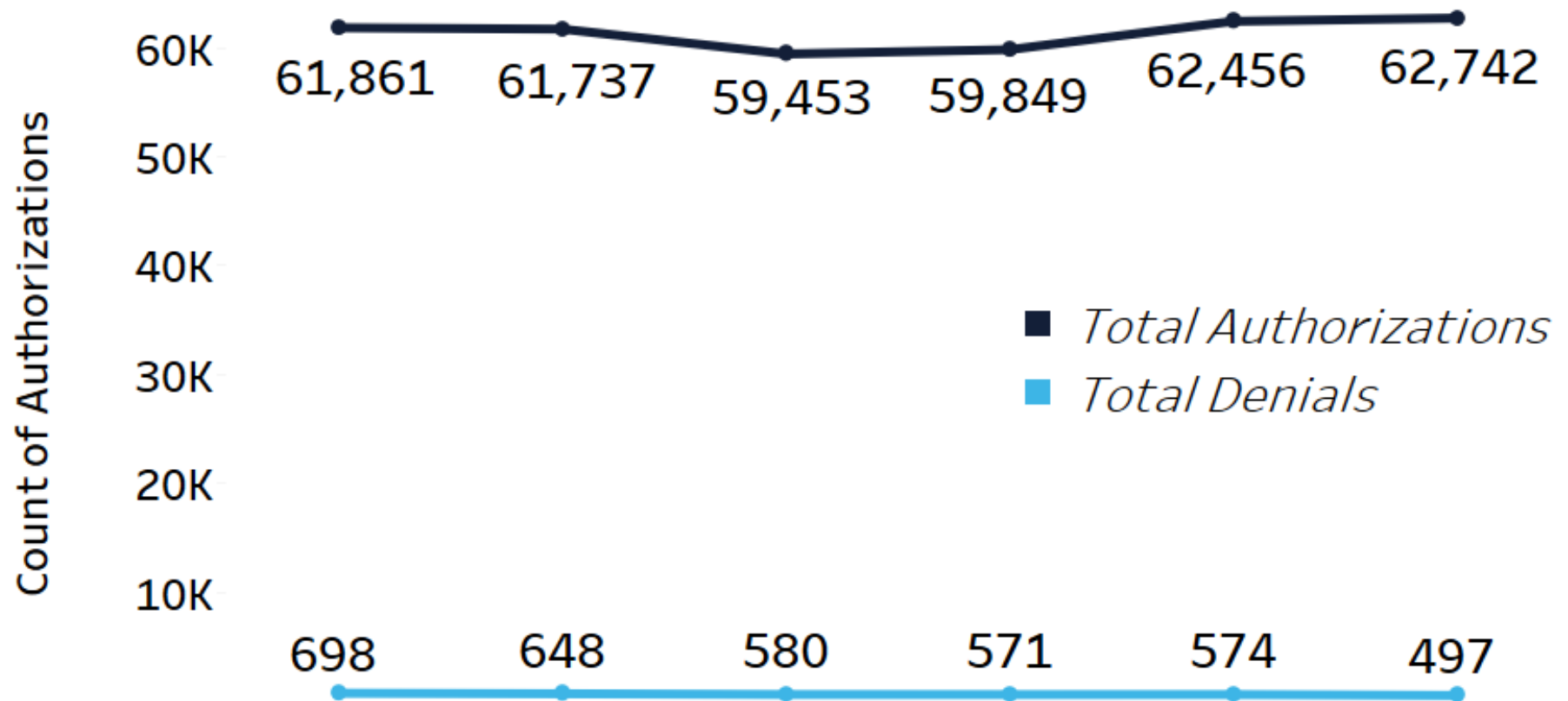
Performance Standards: Notices of Action (NOA) and Administrative Denials

- Two types of denials:
 - *Clinical (Medical necessity)* – Notice of Action (NOA) to member with copy to provider
 - *Administrative* – notice to provider with no impact to member
- Both member and provider have the right to appeal on a Notice of Action at two levels of appeal.
- Beacon exceeds all targets related to both types of denials and appeals.

Performance Standards: Notices of Action (NOA) and Administrative Denials

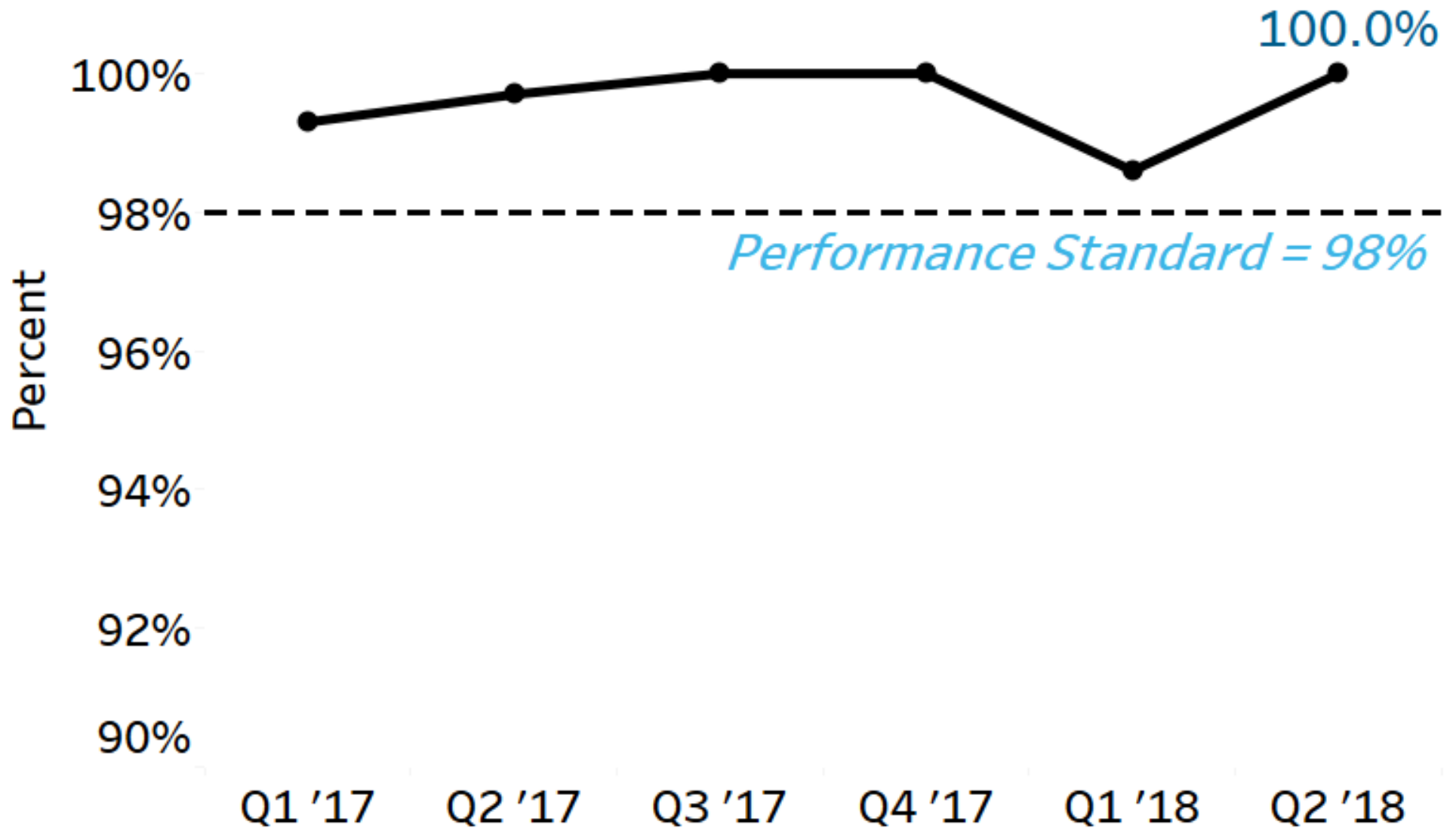
Section	Standard
Medical Necessity (NOA) and Administrative Denial Volume and Rate	--
NOA and Administrative Denial Letters Issued within 3-Business Days	<i>Greater than or equal to 98%</i>

Medical Necessity (NOA) and Administrative Denial Volume



	Q1 '17	Q2 '17	Q3 '17	Q4 '17	Q1 '18	Q2 '18
NOA	110	108	87	116	38	32
NOA%	0.2%	0.2%	0.1%	0.2%	0.1%	0.1%
Admin	588	540	493	455	536	465

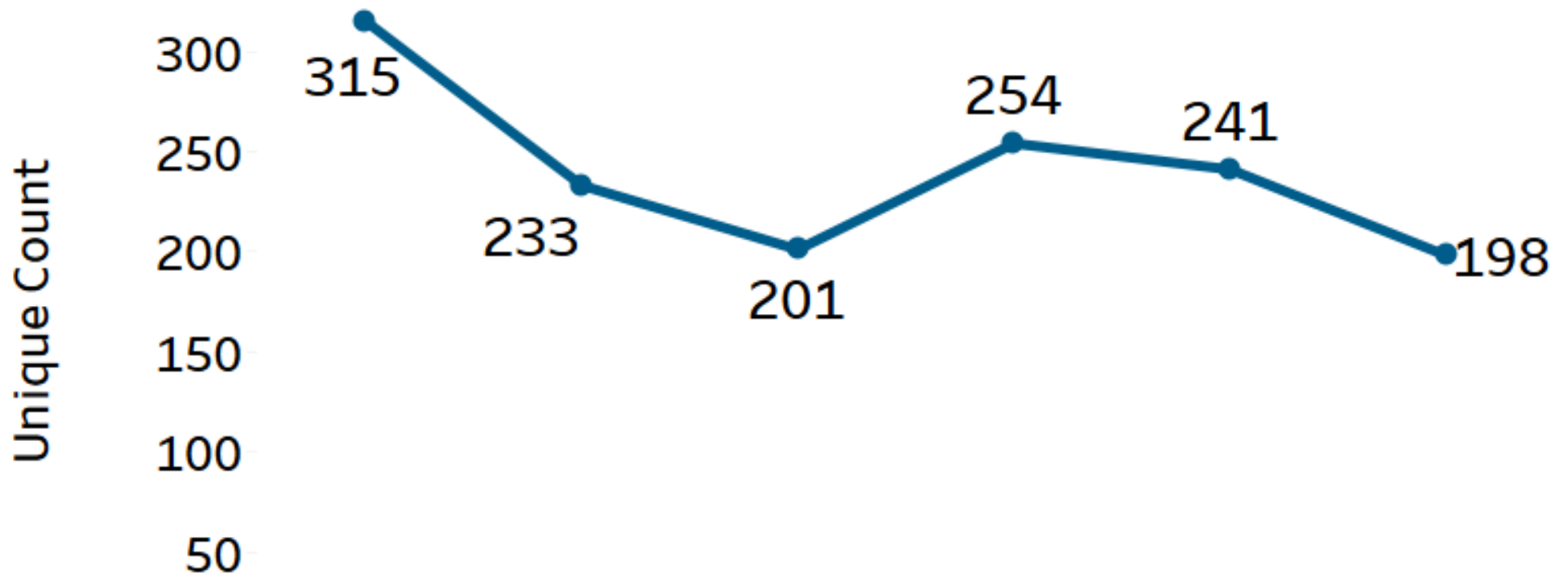
NOA and Admin Denial Letters Within 3 Days



Performance Standards: Appeals

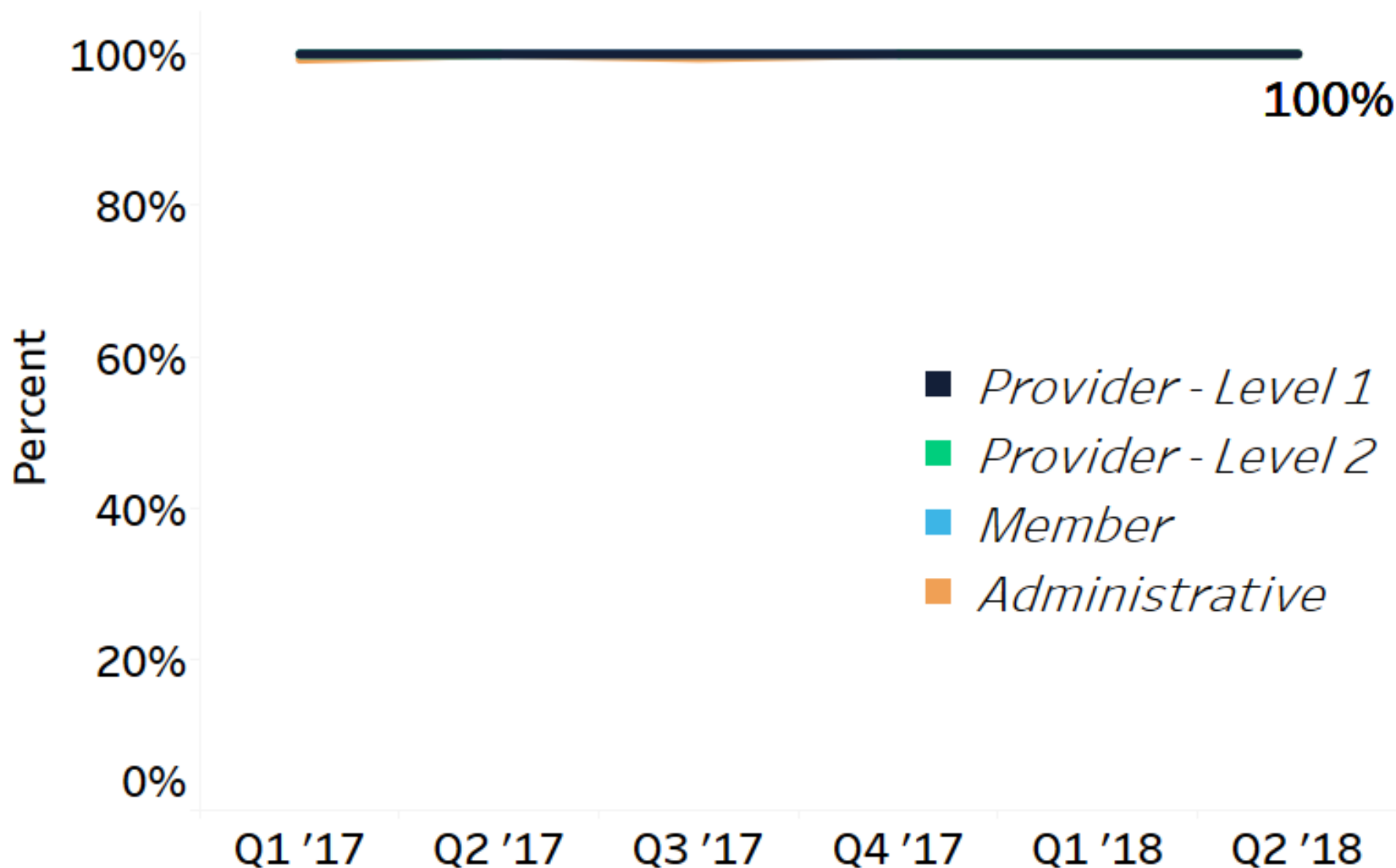
Section	Standard
Medical Necessity (NOA) and Administrative Appeals Volume	--
Appeals Determination Timeliness	<i>Greater than or equal to 90%</i>

Appeals Volume



	Q1 '17	Q2 '17	Q3 '17	Q4 '17	Q1 '18	Q2 '18
Admin	299	226	197	236	228	175
NOA	16	7	4	18	13	23

Appeals Determination Timeliness



Complaints and Grievances



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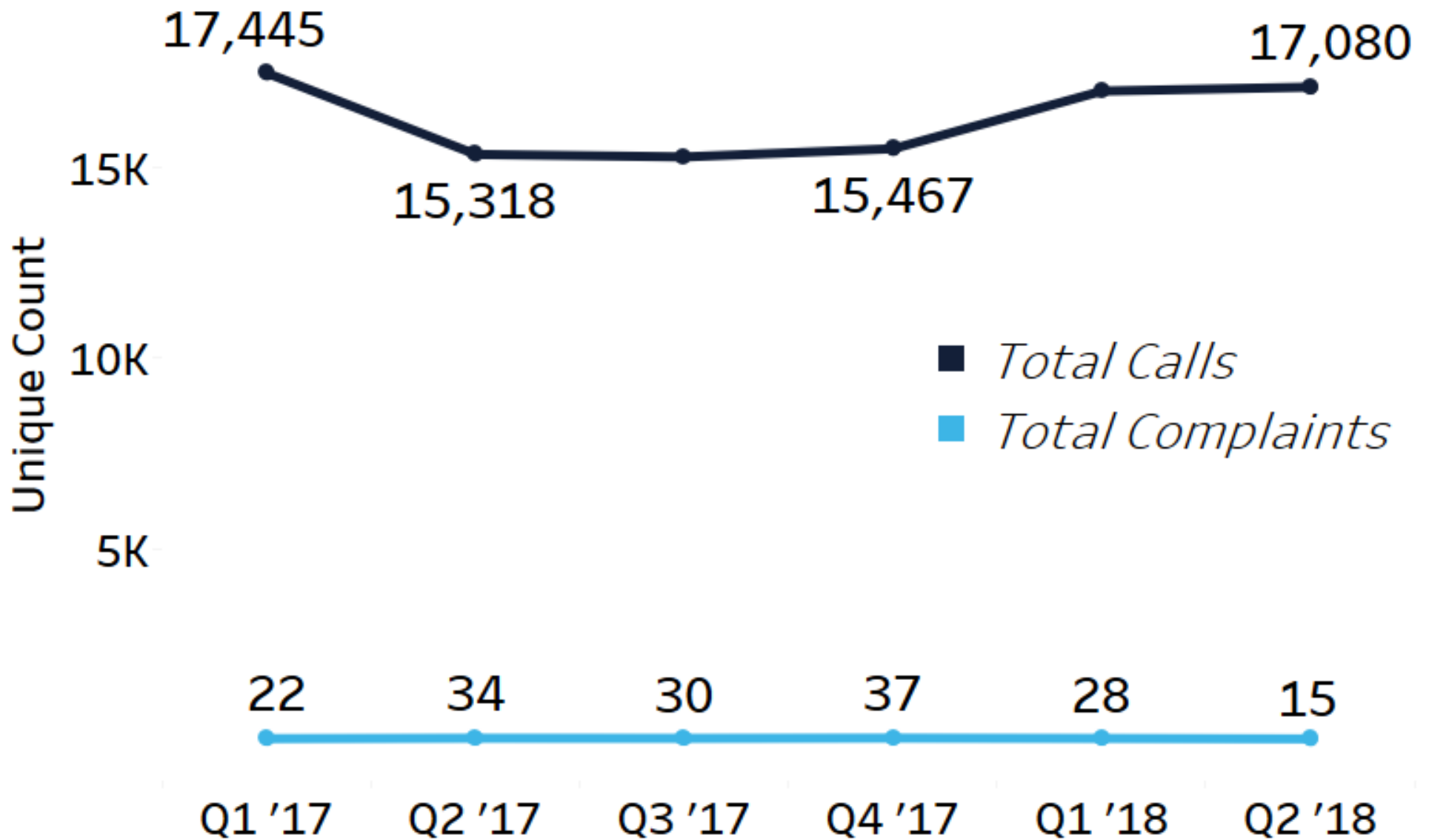
Performance Standards: Complaints and Grievances

- The majority of complaints and grievances are resolved within 30 days. For the benefit of the member, there is an option for an extension up to 45 days.
- Beacon staff have been trained to support members who express dissatisfaction, including offering a formal complaint process.
- Beacon continues to be responsive to any member complaint or grievance.

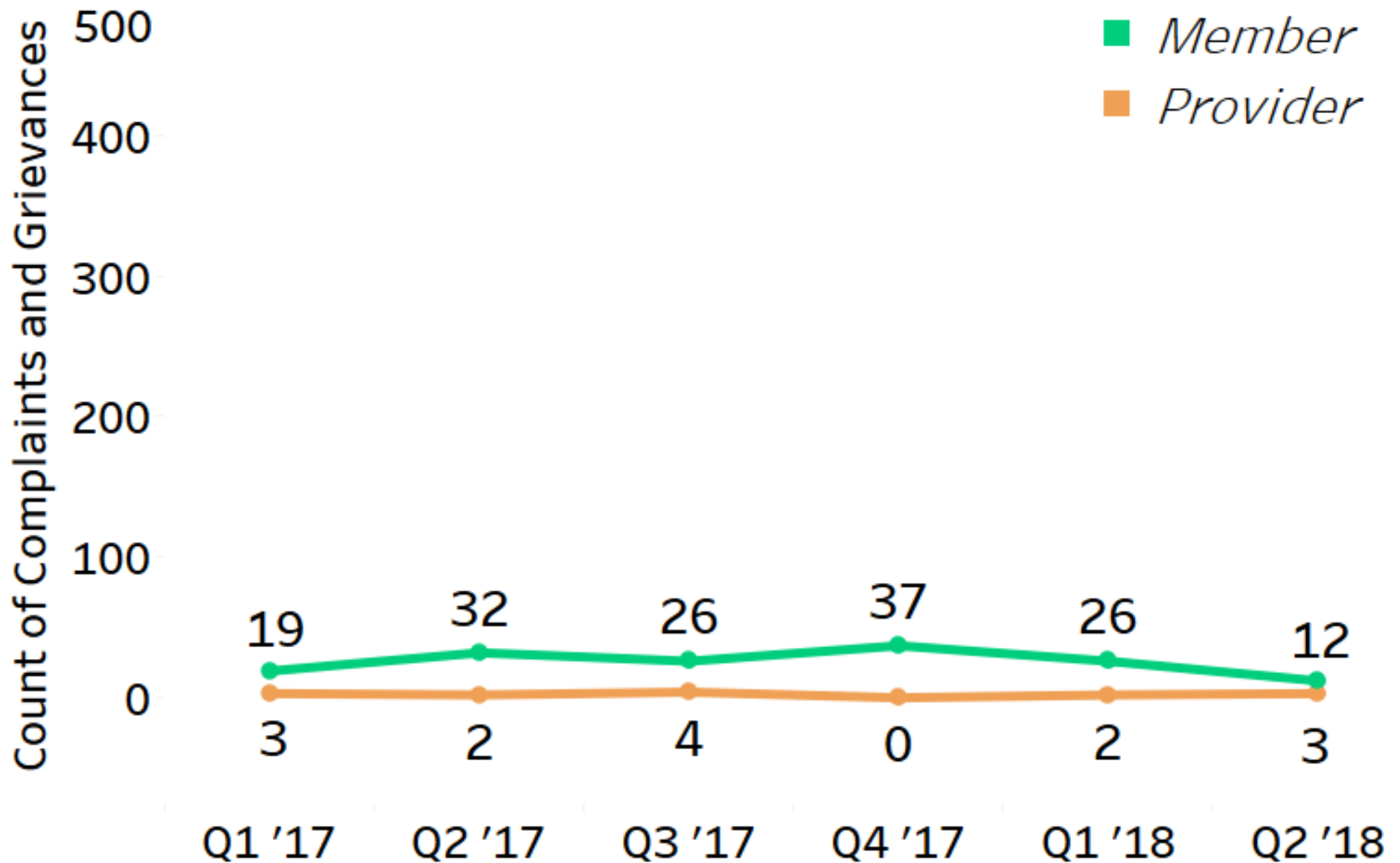
Performance Standards: Complaints and Grievances

Section	Standard
Complaints and Grievances Volume and by Category	--
Timely Resolution of Complaints and Grievances (within 30 or 45 days)	<i>Greater than or equal to 90%</i>

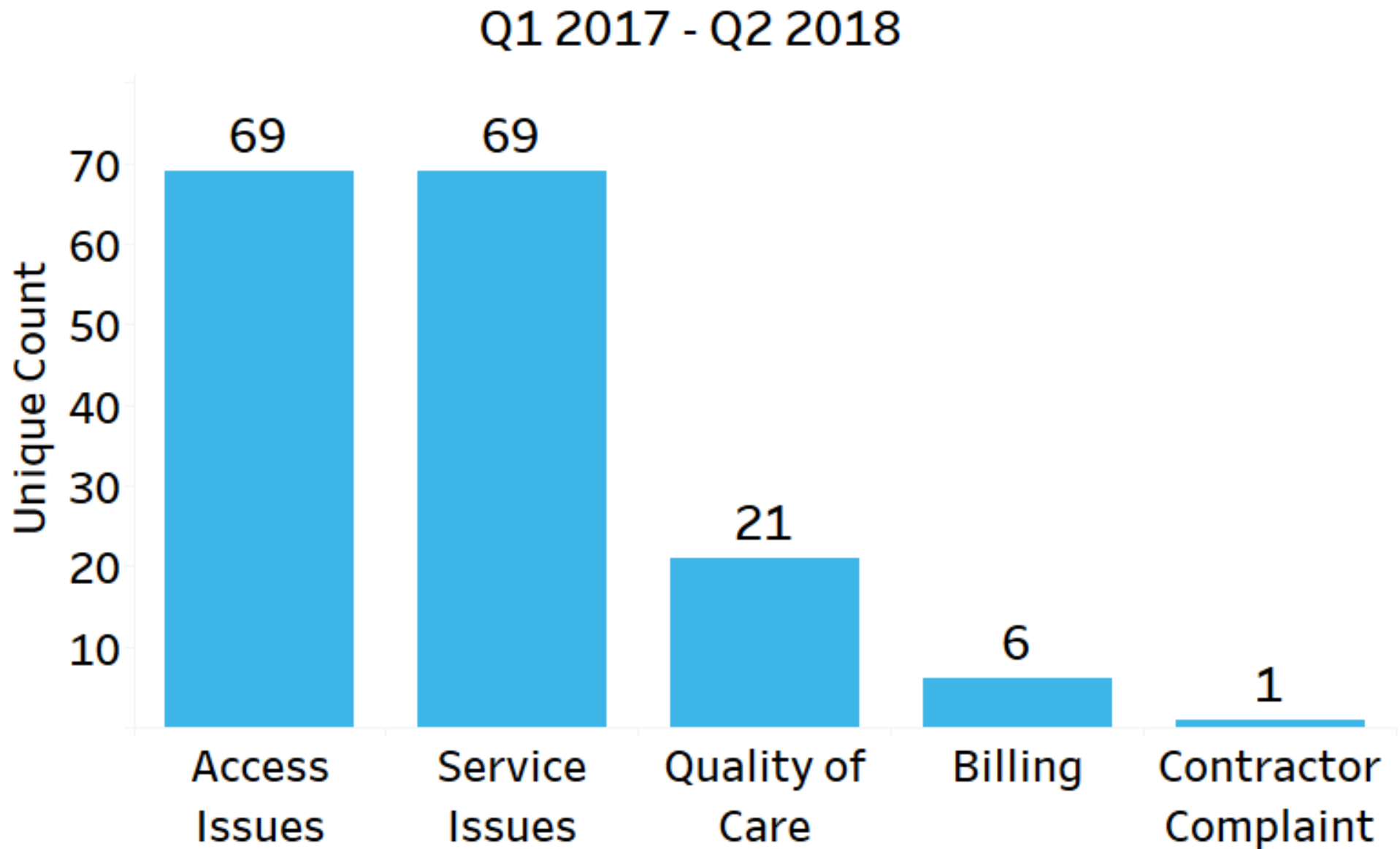
Total Complaints and Grievances



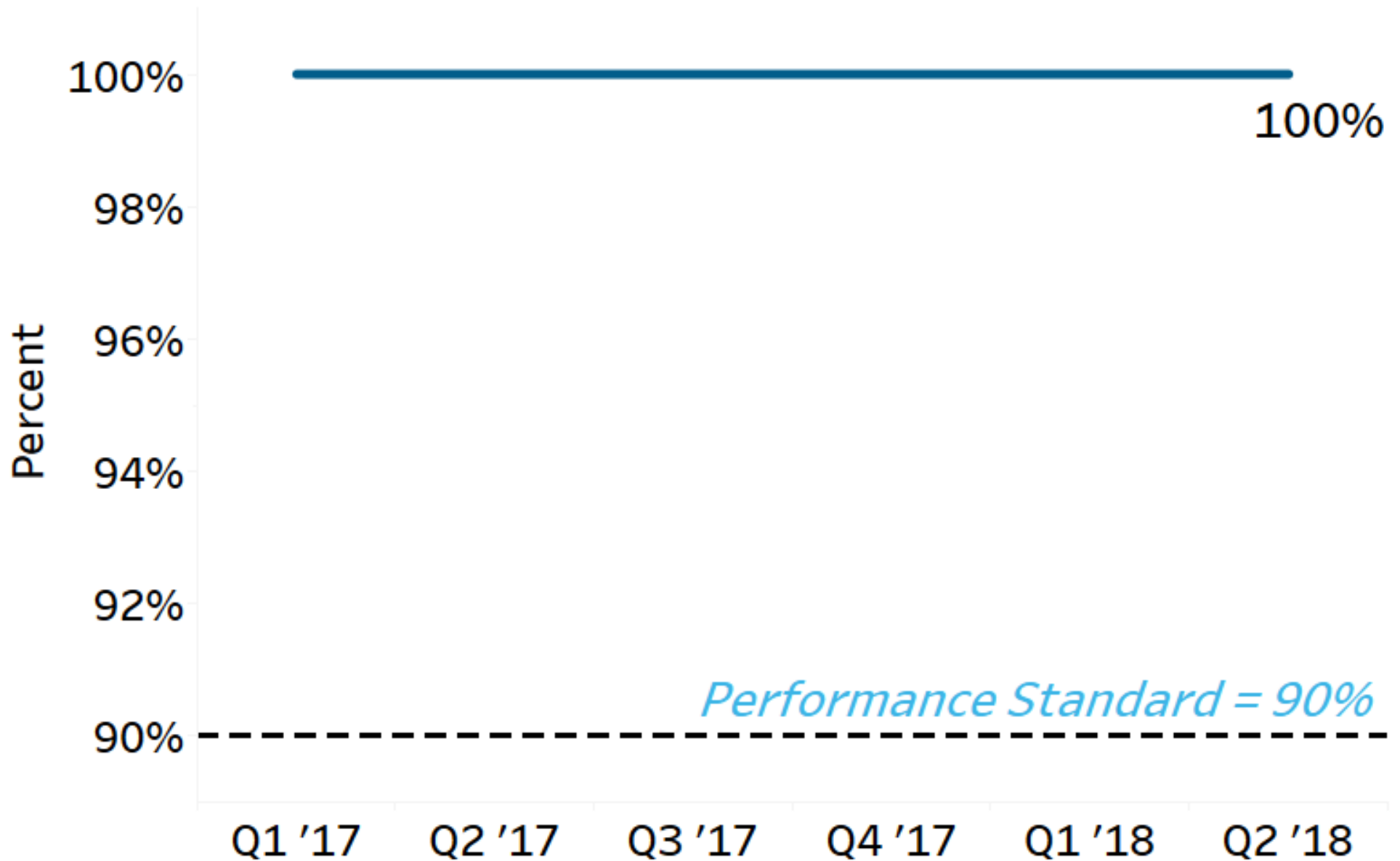
Total Complaints and Grievances by Member and Provider



Complaints and Grievances by Category



Complaints and Grievances Timeliness



Thank you.



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