



## **2016 Quality Improvement Program Evaluation: Executive Summary**

This Executive Summary provides an analysis and evaluation of the overall effectiveness and key accomplishments of the Health Care Service Corporation, Inc. as described in detail in the 2016 annual evaluation of the Quality Improvement (QI) and Utilization Management (UM) programs.

### **2016 Accomplishments**

1. Successful completion of the URAC CM re-accreditation in partnership with the Texas plan in May 2016.
2. Enterprise Quality and Accreditation (EQ&A) organized the preparation for the Initial FEP Single Site Multiple Entity survey to include the NM, IL, and TX plans. BH participated in compiling evidence and participated in two (2) mock surveys to ensure compliance for the FEP NCQA survey that will occur in March 2017.
3. Retail achieved full NCQA Health Plan accreditation in partnership with BCBSIL in August 2016.
4. Participation in two (2) mock surveys to ensure compliance for the New Mexico National Committee for Quality Assurance (NCQA) survey that will occur in April 2017.
5. Partnered in the successful completion of five (5) URA certificate renewals with BCBSTX and one (1) with BCBSOK.
6. Implemented opportunity to reduce medically unnecessary treatment for Mental Health Intensive Outpatient Program (adherence to medical necessity guidelines, increased staffing with team lead/supervisor/medical director) and hit target of less than or equal to ten sessions – effective June 2016.
7. Increased Utilization Management cost savings from \$196,147 in 2015 to \$1,297,192 in 2016 which is an 84.9% increase in cost savings.
8. Planning and development of Applied Behavioral Analysis (ABA) Prior Authorization Program to be effective 1/1/17, including creation and approval of new ABA-specific medical policy.
9. Behavioral Health (BH) lead initiative to review and analyze ABA claims issues resulting in increased Special Investigations Department involvement in potentially fraudulent billing practices, changes to certain inaccurate claims payment logic and pursuit of updates to ABA rates in all plan states.
10. Sustained a high level of overall member satisfaction (93%) with BCBS Behavioral Health for the 4th consecutive year.
11. Received “The Most Ethical Company in the World” Award.
12. Maintained a high level of overall provider satisfaction (94%), with an increase for MT (79% to 92%) and OK (93% to 95%).
13. Successful completion of the BH Annual Privacy Review Assessment (APRA), achieving a 100% and recognition for best practices across the organization.
14. In collaboration with Enterprise Medical Management, the policy review process has been streamlined to ensure Enterprise policies are reviewed and approved through a new approval body including all the plans and BH.

15. Supported Diversity and Inclusion as evidenced by utilizing three bilingual team members in member facing positions, following the Health Care Disparities program, working with network to contract with Texas Mental Health and Mental Retardation (MHMR) Centers so members in areas with limited BH services available could be served, and creating a Health Care Disparity Guide available on BCBS's internal webpage.
16. Behavioral Health Retail continued to initiate a monthly Integration and Co-Management workgroup with Physical Health Retail throughout 2015 involving the following topics: members with comorbid diagnoses, reporting, referral process, quality of referrals, and acceptance of referrals.
17. Implemented High Complexity Management Program to identify and improve clinical outcomes of high risk Illinois Government Programs (MMAI, ICP and FHP) members.
18. Published an article in October's Blue Review provider article, with goal of improving HEDIS IET performance in 2017.
19. Implemented the facility incentive project in New Mexico for New Mexico Centennial Care members to improve 7/30 Day FUH HEDIS outcomes.

### **Program Focus for 2017**

Based on the review of the 2016 program goals, an increased understanding of barriers to improvement, and attention to lessons learned during the year, the following primary areas for focus of the HCSC BH Quality Improvement Work Plan for 2017 include:

1. Successfully achieve renewal for NCQA Health Plan accreditation in partnership with BCBSNM in July 2017 and BCBSTX in December 2017;
2. Participate in the preparations and mock surveys with BCBSNM and BCBSTX in pursuit of NCQA Health Plan re-accreditations;
3. In partnership with the Texas, Illinois, and New Mexico plans, BH will participate in the FEP Single Site Multiple Entity survey for NCQA initial accreditation submission and onsite in March 2017;
4. Continue to collect and submit BH materials for The Most Ethical Company in the World Award;
5. Maintain a high level of satisfaction among providers and members;
6. Increase the rate of 7-day and 30-day ambulatory follow-up after psychiatric hospitalization for mental health;
7. Continue to monitor member accessibility and availability to the full range of behavioral health services through member satisfaction ratings and complaint assessment;
8. Ensure appropriate safeguarding of member personal health information (PHI) and sensitive personal information (SPI);
9. Improve the integrated delivery of behavioral health and medical care to members with co-morbid conditions;
10. Measure, monitor, and continuously improve performance of behavioral health care in key aspects of clinical and service quality for members, providers, and customers;
11. Ensure the BH Care Management program is compliant with, and responsive to, applicable requirements of health benefit plan sponsors, federal and state regulators, and appropriate certification or accreditation entities;
12. Focus continuous quality improvement efforts on those priority areas defined in the annual BH QI Work Plan that are aimed at improving member experience, member satisfaction and member health and wellness;
13. Continue to monitor updates to the National Committee for Quality Assurance (NCQA) and URAC standards to ensure the BH Program's approach meets the requirements;
14. BH QI will be partnering with BH Clinical Operations to ensure all privacy related activities are appropriately managed and help support clinical staff during the transition process;

15. In partnership with the Texas plan, BH will submit eight (8) Utilization Review Agent (URA) certificate renewals. BH will complete the annual BCBS Oklahoma URA renewal in partnership with the plan;
16. BH Accreditation will be partnering with the plans to address member and provider communications to ensure compliance with all NCQA and URAC requirements across the accredited lines of business.
17. In partnership with the Illinois plan, BH will participate in the survey for NCQA initial accreditation in January 2017 for Illinois Government Programs.
18. Improved oversight and management of Community Support services for Illinois Government Programs members by reviewing rule 132 utilization.
19. In collaboration with the plan, Behavioral Health will continue to participate in the NCQA re-accreditation efforts, submission, and onsite in 2017 for Illinois Government Programs (MMAI, ICP and FHP).
20. Emphasis on achieving Performance Measure and Delivery System Improvement targets for New Mexico Centennial Care.