



Adirondack Health Institute

Lead • Empower • Innovate

Practice Transformation Workgroup

PRESENTED BY:

Louann Villani, RN AHI

Brenda Stiles, RN ACO

The slide features a background image of hands clasped together in a circle. On the left side, there are three overlapping hexagons: a red outline, a yellow solid, and a green solid. On the right side, there are three overlapping hexagons: a grey solid, a yellow outline, and a teal solid. A green bar at the bottom contains the date 'July 16, 2020'.

July 16, 2020



- Opening/Welcome – L.Villani
- **NCQA Updates:** 2021 PCMH Standards and QPASS – L.Villani and J.Swartzman
- **DSRIP Data:** BH Follow Up – M. Adamick
- **PCMH, DSRIP and Behavioral Health 7/30 Day Follow Up** – L.Villani and B.Stiles

Please be prepared for discussion

Does your practice provide behavioral health services of any kind?

If so, what are you providing and how does it work?

If you don't provide internally, how do you connect patients who are in need?

- **Updates / Open Forum:**

Auto notification regarding PCMH Tracker Grid



- NCQA has published updates to their full PCMH/PCSP programs and Annual Reporting PCMH Program
- Updates to the Full program go into effect on 8/1/2020
- Annual Reporting updates for PCMH reflect changes for the 2021 reporting year
- It is strongly recommended that each practice download and review the new guidelines for both the full and annual reporting programs
- To download, Log into MyNCQA and then go to the “My Downloads” section.



- Some changes include:
 - There is no longer a separate NYS program guide. The NYS criteria are denoted in the Full Program Publication
 - Many criteria have been changed, in response to COVID-19, to include language regarding telehealth.
 - This allows for flexibility in meeting requirements by utilizing telehealth appointments
 - A number of policies may need to be updated in response
 - NCQA Published an FAQ document regarding a number of the changes that have been made to both PCMH and PCSP



PCMH Policies: update information regarding Telehealth

PCMH Program requirements have been updated. A key change involves the addition of telehealth to multiple criteria to allow for flexibility. Certain existing policies may need to be updated to reflect the use of telehealth in the practice. The list below indicates criteria which require a documented process and may need to be reviewed or updated based on the program updates.

Policy/Criteria	Update
TC08: Behavioral healthcare manager	Behavioral Health CM may use telehealth
TC09: Medical home information	Update policy and patient documents (website, brochure, letter, etc.) to include availability of telehealth appointments if utilized.
AC02/03: Same day appointments and appointments outside of regular business hours	Update to include the utilization of telehealth to meet these requirements if applicable
AC05: Documenting clinical advice in the medical record	Specify that clinical advice documentation is inclusive of telehealth appointments
AC12: Continuity of Medical Record Information	Update to indicate that continuity of the medical record is inclusive of telehealth appointments
CC09: Behavioral health referral expectations	May include contracted telehealth provider in policy/procedure if applicable
CC10: Behavioral health integration	Behavioral health integration using telehealth capabilities is acceptable if the behavioral telehealth provider is integrated into the workflow of the PCMH practice.
CC16: Post hospital/ ED follow up	Follow up visits may be conducted via telehealth if appropriate
Q103: Appointment Availability Assessment	Major appointments may be conducted in person or via telehealth.



- Updates over weekend 7/10/2020
- Q&A Webex 7/23 and 8/6; sign up thru NCQA

<https://www.ncqa.org/education-training/webinars-and-seminars/patient-centered-medical-home-pcmh/?event=a0v2M00000FHIWyQAL>

- Reorganized content to align with the standards and guidelines publication
- Updated and improved bulk clinician upload template
- Updated payment screen
- New Historical tab
- Archived section in the Evidence Library
- Dashboard updates to include “modified by” and time and date stamps



- Updated tracker to be available by August 15th
- Reminder to be sent on first Monday of the month
- If you need assistance, contact us!



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AHI PPS - PSYCKES QI Trends Past Year 7 & 30 Day Follow Up Metrics

PRESENTED BY:

Mark Adamick

Performance Improvement Specialist

July
2020



QI Trends Past Year



Office of
Mental Health | PSYCKES

De-identify

Settings ▾

Log Off

My QI Report ▾

Statewide Reports

Recipient Search

Provider Search

Usage Reports ▾

My QI Report
QI Trends Past Year

ADIRONDACK HEALTH INSTITUTE, INC. PPS

Quality Indicator Overview As Of 05/01/2020



Excel

PROGRAM: ALL AGE: ALL MANAGED CARE: ALL MC PRODUCT LINE: ALL

Filters

Reset

QI Report is based on clients attributed to PPS seen by any provider agency, whether the providers are in or out of the DSRIP Provider Network.

Indicator Set

Name

Population

Eligible Population

with QI Flag

%

Statewide %

25%

50%

75%

100%

BH QARR - DOH Performance Tracking Measure - as of 10/01/2019

All

5,419

3,407

62.87

64.29

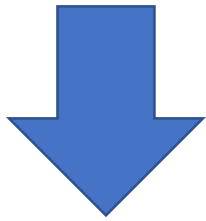
62.87

64.29

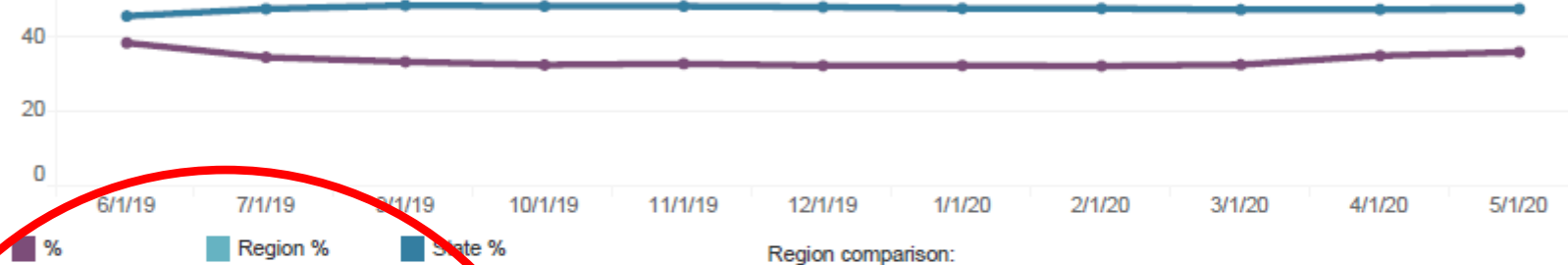


QI Trends Past Year – # of QI Flags

Lower is Better



6. No Follow Up after MH Inpatient (7 Days): The percentage of individuals ages 6 years and older discharged from a hospital for mental health treatment and not seen on an ambulatory basis or for intermediate treatment with a mental health provider within 7 days of discharge.

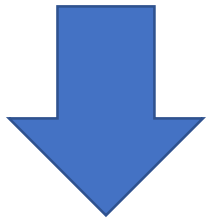


	Eligible Population	# with QI flag	%	Region %	State %
6/1/19	558	214	38.4	45.5	45.5
7/1/19	556	192	34.5	47.4	47.4
9/1/19	561	187	33.3	48.3	48.3
10/1/19	575	187	32.5	48.1	48.1
11/1/19	585	192	32.8	48.1	48.1
12/1/19	591	191	32.3	47.9	47.9
1/1/20	581	188	32.4	47.5	47.5
2/1/20	580	187	32.2	47.5	47.5
3/1/20	571	186	32.6	47.2	47.2
4/1/20	535	187	35.0	47.2	47.2
5/1/20	557	200	35.9	47.3	47.3



QI Trends Past Year – # of QI Flags

Lower is
Better



	6/1/19	7/1/19	9/1/19	10/1/19
■ %		■ Region %	■ State %	
	Eligible Population			
6/1/19	558			
7/1/19	556			
9/1/19	561			
10/1/19	575			
11/1/19	585			
12/1/19	591			
1/1/20	581			
2/1/20	580			
3/1/20	571			
4/1/20	535			
5/1/20	557			





7 Day Follow Up – Mental Health Discharge – AHI PPS

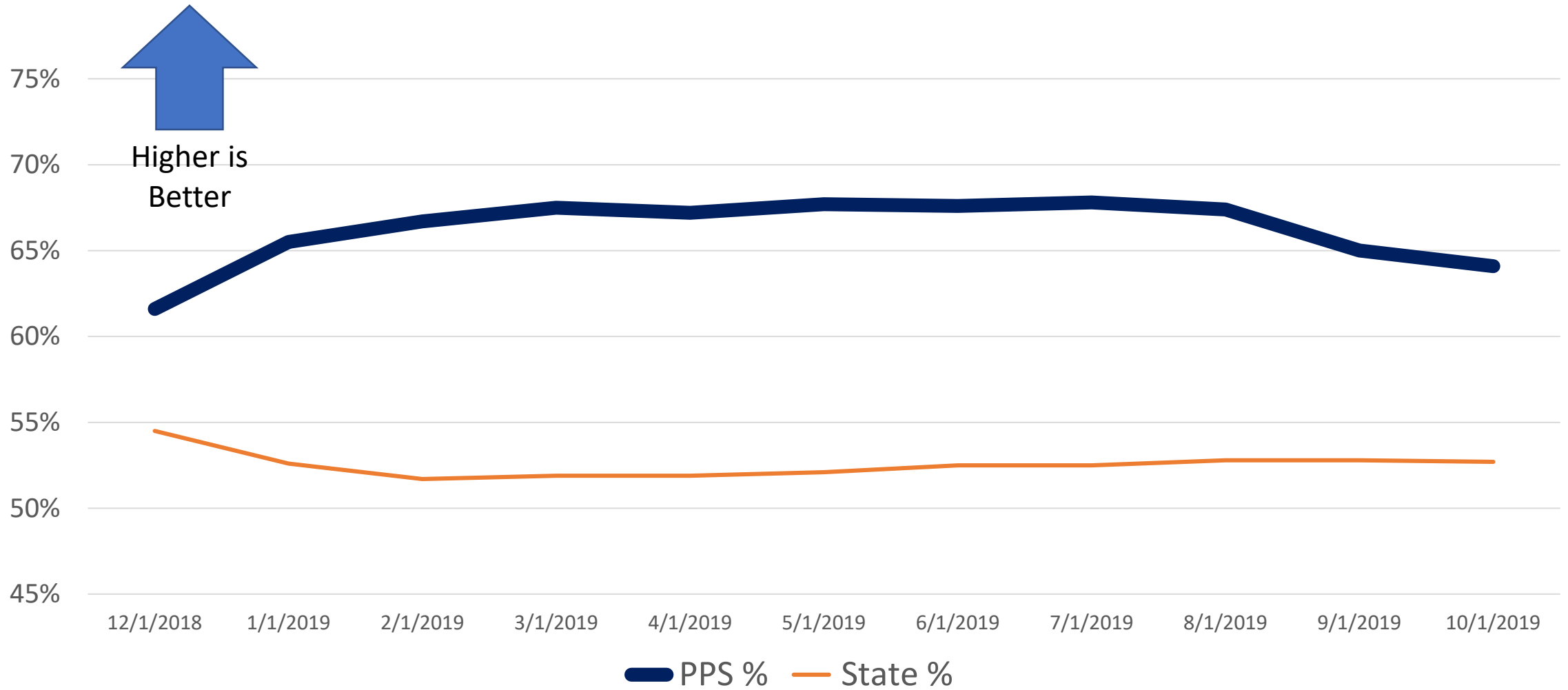


Higher is
Better

Report Date	Actual Date	PPS %	State %
6/1/2019	12/1/2018	61.6%	54.5%
7/1/2019	1/1/2019	65.5%	52.6%
9/1/2019	2/1/2019	66.7%	51.7%
10/1/2019	3/1/2019	67.5%	51.9%
11/1/2019	4/1/2019	67.2%	51.9%
12/1/2019	5/1/2019	67.7%	52.1%
1/1/2020	6/1/2019	67.6%	52.5%
2/1/2020	7/1/2019	67.8%	52.5%
3/1/2020	8/1/2019	67.4%	52.8%
4/1/2020	9/1/2019	65.0%	52.8%
5/1/2020	10/1/2019	64.1%	52.7%



7 Day Follow Up – Mental Health Discharge – AHI PPS





30 Day Follow Up – Mental Health Discharge – AHI PPS

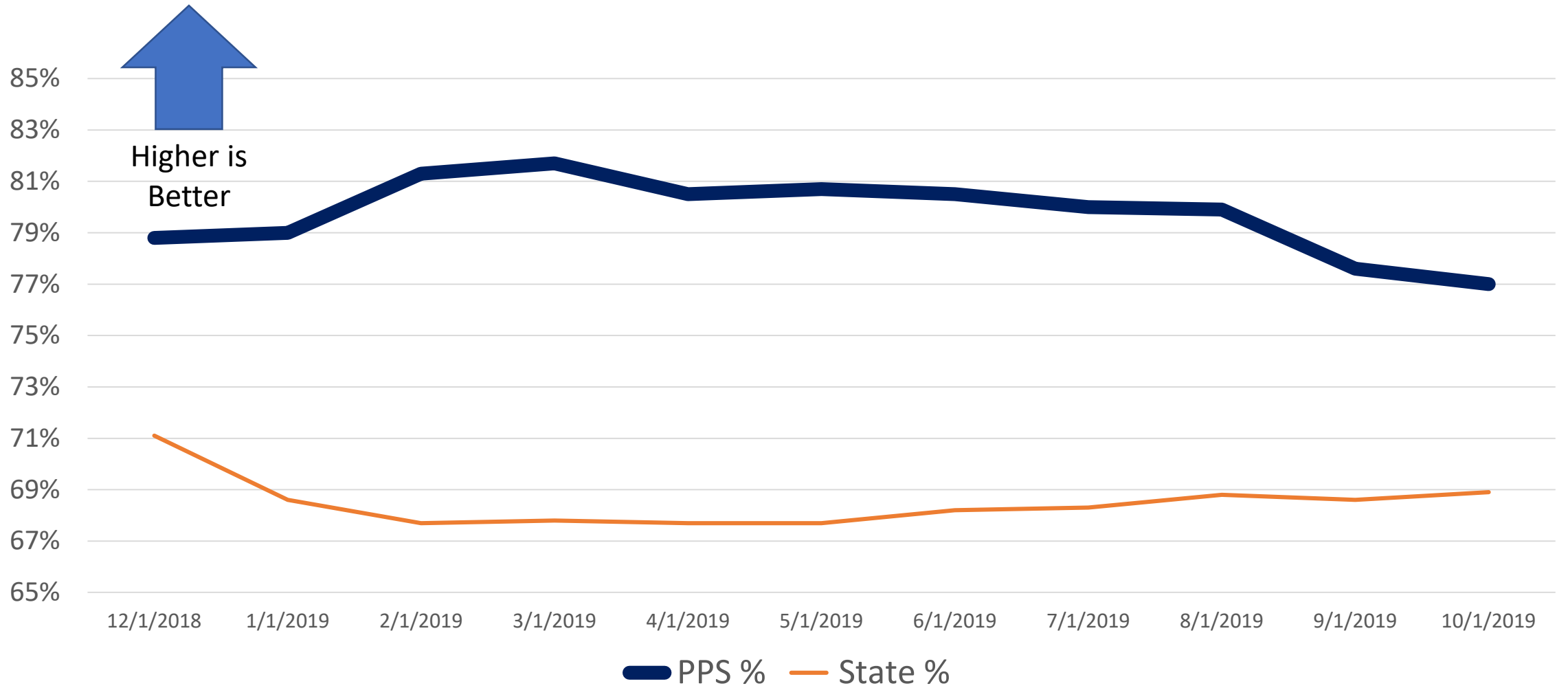


Higher is
Better

Report Date	Actual Date	PPS %	State %
6/1/2019	12/1/2018	78.8%	71.1%
7/1/2019	1/1/2019	79.0%	68.6%
9/1/2019	2/1/2019	81.3%	67.7%
10/1/2019	3/1/2019	81.7%	67.8%
11/1/2019	4/1/2019	80.5%	67.7%
12/1/2019	5/1/2019	80.7%	67.7%
1/1/2020	6/1/2019	80.5%	68.2%
2/1/2020	7/1/2019	80.0%	68.3%
3/1/2020	8/1/2019	79.9%	68.8%
4/1/2020	9/1/2019	77.6%	68.6%
5/1/2020	10/1/2019	77.0%	68.9%



30 Day Follow Up – Mental Health Discharge – AHI PPS



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Adirondack Health Institute





PCMH, DSRIP and Behavioral Health 7/30 Day Follow Up

- Does your practice provide behavioral health services of any kind?
- If so, what are you providing and how does it work?
- If you don't provide internally, how do you connect patients who are in need?



Open Forum / Next Agenda



- AHI Website: <https://ahihealth.org/>
 - *recordings from meeting are there
- AHI COVID Newsletter – Monday's
- ACO Newsletter

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