Division of Behavioral Health Services

The ADHS/DBHS Outcome Framework and Performance Dashboard for Behavioral Health Performance Improvement

12th Annual Summer Institute

July 19, 2011
Presentation Outline

• ADHS/DBHS Dashboard
  – The Dashboard
  – History
  – Goals
  – Role of Outcomes
  – Implementation
• The Magellan Dashboard
• Community Partnership of Southern Arizona Dashboard
Presentation Objectives

• Understand the use of different types of measures to understand performance (balanced scorecard approach)

• Identify outcome and performance measurement methods at different levels in the behavioral health care system

• Compare methods for calculating outcomes and performance measurement
The ADHS/DBHS Dashboard

• Four Domains
  – Outcomes
  – Access
  – Service Delivery
  – Coordination/Collaboration

• Data Presented
  – Statewide
  – By Service Area
  – By Adults and Children
  – (Coming – Adult Populations)
Live!
http://www.azdhs.gov/bhs/dashboard/index.htm
• Note: If internet connection is available, use a link from the previous page to go over the dashboard and use slides 7-13 below in handouts only (need updates)

• If a connection is not available, use slides 7-13 below
### Statewide Access

- **Individuals**
  - Are satisfied with their access to services
  - Receive timely services
  - Live within 15 miles of an outpatient clinic

### Outcomes: Individuals

- **With a drug/alcohol use history are now abstaining**: 30.8%
- **Are not homeless**: 97.5%
- **Are employed**: 14.2%
- **Attend school**: 36.4%
- **Have no recent criminal justice system involvement**: 93.7%
- **Participate in self-help groups**: Coming in 2012

### Access: Individuals

- **Are satisfied with their access to services**: 81.8%
- **Receive timely services**: 89.2%
- **Live within 15 miles of an outpatient clinic**: 98.4%

### Service Delivery: Individuals

- **Participate in their treatment planning**: 91.6%
- **Have current and complete service plans**: 40.2%
- **Receive services identified on their service plan**: 82.9%

### Coordination/Collaboration: Individuals

- **Have their care coordinated with their medical doctor**: 88.0%
- **Return to a psychiatric hospital**: 18.9%
- **Stay in a psychiatric hospital an average of**: 9.9 days

### Outcomes

- With a drug/alcohol use history are now abstaining: 30.8%
- Are not homeless: 97.5%
- Are employed: 14.2%
- Attend school: 36.4%
- Have no recent criminal justice system involvement: 93.7%
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### Quality of Life

- Has quality of life improved for individuals served by the behavioral health system? 30.8%
- Are not homeless: 97.5%
- Are employed: 36.4%
- Attend school: 36.4%
- Have no recent criminal justice system involvement: 93.7%
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### Statewide

#### Outcomes: Individuals . . .

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<thead>
<tr>
<th>Outcome</th>
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Has quality of life improved for individuals served by the behavioral health system?

- 30.8%
- 97.5%
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Coming in 2012

ADHS/DBHS
Behavioral Health Outcomes Framework

- Outcomes
- Mission
- Recovery Principles
- Access
<table>
<thead>
<tr>
<th>Access: Individuals . . .</th>
<th>Statewide</th>
</tr>
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<tbody>
<tr>
<td>Are satisfied with their access to services</td>
<td>Do individuals and families have access to recovery and resiliency oriented services?</td>
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- Participate in their treatment planning
- Have current and complete service plans
- Receive services identified on their service plan

Are services provided based on the needs of individuals and families?

- 91.6%
- 40.2%
- 82.9%
Statewide

Coordination/Collaboration: Individuals . . .

- Have their care coordinated with their medical doctor: 88.0%
- Return to a psychiatric hospital: 18.9%
- Stay in a psychiatric hospital an average of: 9.9 days

Do individuals and families get seamless behavioral and medical care coordination?
### Access: Individuals
- Are satisfied with their access to services: 80.8% (Adult) 83.0% (Child)
- Receive timely services: 91.7% (Adult) 86.0% (Child)
- Live within 15 miles of an outpatient clinic: 98.5% (Adult) 98.3% (Child)

### Outcomes: Statewide Adult
- Has quality of life improved for individuals served by the behavioral health system? 80.8%
- With a drug/alcohol use history are now abstaining: 30.3%
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- Are employed: 19.4%
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### Outcomes: Individuals...

Has quality of life improved for individuals served by the behavioral health system?

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<tr>
<th></th>
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<th>GSA 2</th>
<th>GSA 3</th>
<th>GSA 4</th>
<th>GSA 5</th>
<th>GSA 6</th>
</tr>
</thead>
<tbody>
<tr>
<td>With a drug/alcohol use history are now abstaining</td>
<td>37.2%</td>
<td>50.4%</td>
<td>29.2%</td>
<td>29.1%</td>
<td>41.8%</td>
<td>9.9%</td>
</tr>
<tr>
<td>Are not homeless</td>
<td>97.5%</td>
<td>96.8%</td>
<td>96.7%</td>
<td>99.0%</td>
<td>96.3%</td>
<td>97.8%</td>
</tr>
<tr>
<td>Are employed</td>
<td>16.1%</td>
<td>16.5%</td>
<td>16.9%</td>
<td>15.2%</td>
<td>15.3%</td>
<td>12.9%</td>
</tr>
<tr>
<td>Attend school</td>
<td>29.7%</td>
<td>26.6%</td>
<td>30.8%</td>
<td>34.7%</td>
<td>32.6%</td>
<td>40.9%</td>
</tr>
<tr>
<td>Have no recent criminal justice system involvement</td>
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<td>96.2%</td>
<td>97.4%</td>
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<tr>
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<td></td>
<td></td>
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### Access: Individuals...

Do individuals and families have access to recovery and resiliency oriented services?

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<td>93.5%</td>
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<td>99.9%</td>
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### Service Delivery: Individuals...

Are services provided based on the needs of individuals and families?

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<td>Participated in their treatment planning</td>
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<td>92.3%</td>
</tr>
<tr>
<td>Have current and complete service plans</td>
<td>30.3%</td>
<td>38.1%</td>
<td>39.7%</td>
<td>58.2%</td>
<td>37.6%</td>
<td>38.3%</td>
</tr>
<tr>
<td>Receive services identified on their service plan</td>
<td>86.4%</td>
<td>81.0%</td>
<td>75.0%</td>
<td>80.8%</td>
<td>94.3%</td>
<td>73.0%</td>
</tr>
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### Coordination/Collaboration: Individuals...

Do individuals and families get seamless behavioral and medical care coordination?

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<td>81.9%</td>
</tr>
<tr>
<td>Return to a psychiatric hospital</td>
<td>10.1%</td>
<td>3.4%</td>
<td>10.0%</td>
<td>0.0%</td>
<td>18.6%</td>
<td>20.5%</td>
</tr>
<tr>
<td>Stay in a psychiatric hospital an average of . . . days</td>
<td>7.6</td>
<td>12.1</td>
<td>25.3</td>
<td>8.1</td>
<td>7.0</td>
<td>10.5</td>
</tr>
</tbody>
</table>

### Coming in 2012: Individuals...

- With a drug/alcohol use history are now abstaining
- Are not homeless
- Participate in self-help groups

### Outcomes: 93.5% (GSA 1), 99.4% (GSA 2), 88.1% (GSA 3), 99.5% (GSA 4), 99.1% (GSA 5), 99.6% (GSA 6)

### Outcomes: 86.0% (GSA 1), 93.6% (GSA 2), 90.1% (GSA 3), 96.6% (GSA 4), 93.6% (GSA 5), 97.7% (GSA 6)

### Outcomes: 97.5% (GSA 1), 96.8% (GSA 2), 96.7% (GSA 3), 99.0% (GSA 4), 96.3% (GSA 5), 97.8% (GSA 6)

### Outcomes: 86.4% (GSA 1), 89.9% (GSA 2), 86.8% (GSA 3), 87.0% (GSA 4), 81.0% (GSA 5), 79.4% (GSA 6)

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### Outcomes: 30.3% (GSA 1), 38.1% (GSA 2), 39.7% (GSA 3), 58.2% (GSA 4), 37.6% (GSA 5), 38.3% (GSA 6)

### Outcomes: 86.4% (GSA 1), 81.0% (GSA 2), 75.0% (GSA 3), 80.8% (GSA 4), 94.3% (GSA 5), 73.0% (GSA 6)

### Outcomes: 85.9% (GSA 1), 94.7% (GSA 2), 88.1% (GSA 3), 87.7% (GSA 4), 91.8% (GSA 5), 81.9% (GSA 6)

### Outcomes: 10.1% (GSA 1), 3.4% (GSA 2), 10.0% (GSA 3), 0.0% (GSA 4), 18.6% (GSA 5), 20.5% (GSA 6)

### Outcomes: 7.6 (GSA 1), 12.1 (GSA 2), 25.3 (GSA 3), 8.1 (GSA 4), 7.0 (GSA 5), 10.5 (GSA 6)
Outcomes Dashboard History

• Initiated Summer 2010

• Diverse Workgroup Created to Identify Outcomes, Supporting Measures and Analysis Plan
Dashboard Goals

• Direct Strategic Planning
  – Common Language for Planning
  – Data-Driven Decision-making
  – System of Care Planning
  – Guide Resource Allocation
  – Evaluate New and Existing Programs
  – Aid in Contracting
Dashboard Goals

• Improve Transparency
  – Statewide and by RBHA Look at Performance
  – Administrative Accountability
  – Individual and Family Education
Dashboard Goals

• Use Existing, Reliable Measures

• Focus on Results, Not Compliance

• Balanced Approach
  – Use Outcomes and Process Measures
Incorporating Outcomes

• Outcomes
  – Definition: The end result of the delivery and receipt of services as measured at a defined point in time...
  – Outcome indicators assist us in assessing the effectiveness of system processes and people’s satisfaction with our services
Outcomes – What Do They Tell Us?

• How well we are meeting our agency’s mission, vision and goals

• How well a process/system is functioning
Outcomes – What Do They Tell Us?

• Where we should direct resources/improvement activities

• How satisfied the individuals and families we serve are with the care they’ve received
Outcomes – What Don't They Tell Us?

• The reasons *WHY* a process or system is:
  – Effective or
  – Not functioning well

• Stand alone outcomes analysis does not:
  – Identify the root causes/barriers
  – Lead to improved effectiveness or systems functioning
Outcomes – Workgroup Integration

• Balance Outcomes and Process Measures in the Dashboard and Scorecard

• Use National Recommendations for Outcomes Indicators and Initiatives
  – Substance Use/Mental Health Prevention
  – Jail Diversion
  – Trauma Informed Care
  – Health Reform – Access/Disparity Reduction
  – Improve Housing/Decrease Homelessness
Feedback on the Dashboard

• Public
  – Positive Over Transparency
  – Requests for Additional Measurements

• Contractors
  – Positive – Requests On Reporting
  – Spurred RBHA Review
Feedback on the Dashboard

• Internal

  – Dashboard Model Used in Adult and Children’s System of Care Planning

  – Integrated into Quality Management Reporting
Magellan of Arizona’s Dashboard
Performance Measurement

• **Goal**
  • Transform Maricopa system from reactive mode driven by complaint/anecdote to anticipatory, collaborative, transparent and data-driven

• **Value Proposition**
  • Utilize interactive Provider Outcomes Dashboards to create predictability and accountability for network

• **Status**
  • Clinic and the child system dashboards generating strong results
  • Extend to other Maricopa sub-systems, e.g., General Mental Health Substance Abuse (GMH/SA) and Facility-based Crisis
Adult SMI Provider Trended Outcomes (2009-2011)

ISP Current: 55%
ISP Quality: 79%
Title XIX: 40%
Customer Satisfaction: 10%
ACT Fidelity: 34%
Encountering: 46%
Adult PNO Clinics Dashboard Average (# Elements Met/Exceeded of 18 Total)

Baseline (4/2009): 5.3

Present (5/11): 9.9

Increased by 89%
Adult PNO Clinics
(# Dashboard Elements Met/Exceeded)

Baseline (4/09)  Present (5/11)

1-2  0  1  0
3-4  0  5  0
5-6  10  0  0
7-8  2  0  0
9-10  3  0  0
11-12  9  1  0
13-14  1  0  1

1  2  3  4  5  6  7  8  9  10  11  12  13  14
Magellan of Arizona Outcomes Dashboard
Child / Youth Provider Network Organizations

Select Date
April-11

Overview

Child / Youth Overview

Trend
Composite of the following Provider Network Organizations: People of Color Network, Quality Care Network, and Southwest Network. Provides a high level view of the Children’s system as a whole.

38%

Targets Met (Weighted) - 6 of 16 (Goal 90%)

National Outcomes Measures

80%
Targets Met - 4 of 5

Functional Outcomes: Birth - 4

17%
Targets Met - 1 of 6

Definition: Place your mouse over any indicator to view the definition of that measure.

The Child / Youth Overview provides a high level view of how the Provider is doing in each of three categories. For specific measures, choose the category you wish to view.

About the Dashboard:
Like a thermometer, the dashboard is designed to take the "temperature" of Central Arizona’s public behavioral healthcare system. The dashboard represents our commitment to share with recipients and families areas that are working well and those that need improvement.

What it IS - A list of high level performance metrics, with National...
Child PNO First Quarter Performance

National Outcome Measures

- Education Status
- Primary Residence
- Without an Arrest
- No Substance use
- Reduction of Substance Use

Functional Outcomes Ages

- Emotional
- Ready to Learn
- Exploration/Adaptability
- Lives with
- Parent-Child
- Family Support

Functional Outcomes Ages 5-17

- Success in School
- Stable/PRODUCTIVITY
- Decreased...
- Lives with Family
- Improved Youth
- Family Support
Community Partnership of Southern Arizona’s Dashboard
Plan - The needed measures.

Do - Measure these and get them distributed.

Study - Look to see what these tell you.

Act - Find ways to improve and implement these improvements. Then you start again.
QM Performance & Dashboards Indicators

- CPSA QM has historically produced internal quarterly reports based on TXIX Performance Standards.
- These measures resided in both DBHS and CPSA QM Plans
- The DBHS Performance Improvement Specification Guide also detailed these measures.
The quarterly scores were derived from QM Liaison data, some encounter data and MHSIP data.

CPSA Collaborative Technical Assistance (CTA) Team Leads (EMT staff) used these internally to improve performance across the Networks (now CSPs).

CPSA also used these to demonstrate compliance with the DBHS’ Performance Measures and Administrative Review.
CPSA Website Report Cards

- CPSA polled members and families regarding the most important measures; these were based on QM and other internal CPSA measures.
- These are the measures currently presented on the CPSA Website.
CPSA Medical Management was tasked with replicating the DBHS measures for the CSPs.

CPSA QM, UM and Utilization Analysis teams met to produce these.

CPSA QM included additional incentive measures; these, along with some of the other measures, may not all be in the final presentation of data on the website.
CPSA’s internal methodology is different from DBHS’ as it looks at different time frames and may use some proxy measures; therefore, comparisons to the DBHS’ results are not directly possible.

The following is a brief presentation of the internal Quarterly Proposed QM Dashboard measures by population and by assigned CSP. Only the Children’s Measures are presented.
### CPSA Child Quarter 3 FY 2011

<table>
<thead>
<tr>
<th>Performance/Incentive/Outcome Measures</th>
<th>NOM Measure (Alcohol/Drug Abstinence)-demographic outcome data from begin EOC data to update or end EOC data.</th>
<th>NOM Measure (not homeless)-demographic outcome data from begin EOC data to update or end EOC data.</th>
<th>NOM Measure (are employed)-demographic outcome data from begin EOC data to update or end EOC data.</th>
<th>NOM Measure (attend school)-demographic outcome data from begin EOC data to update or end EOC data.</th>
<th>NOM Measure (criminal activity)-demographic outcome data from begin EOC data to update or end EOC data.</th>
<th>Demographic data of % participation in self-help groups.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Outcomes: Individuals . . .</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>With a drug/alcohol use history are now abstaining</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Are not homeless</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Are employed</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Attend school</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Have no recent criminal justice involvement</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Participate in self-help groups</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

Has quality of life improved for individuals served by the behavioral health system?

<table>
<thead>
<tr>
<th>MPS</th>
<th>GSA 5 Child</th>
<th>CDLN</th>
<th>La Frontera</th>
<th>Marana Health Center</th>
<th>Pantano Child</th>
<th>Providence</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td>91.14%</td>
<td>99.37%</td>
<td>88.52%</td>
<td>86.05%</td>
<td>92.25%</td>
<td>92.57%</td>
</tr>
<tr>
<td>N/A</td>
<td>99.67%</td>
<td>100.00%</td>
<td>100.00%</td>
<td>100.00%</td>
<td>100.00%</td>
<td>99.73%</td>
</tr>
<tr>
<td>N/A</td>
<td>1.55%</td>
<td>0.63%</td>
<td>3.43%</td>
<td>0.00%</td>
<td>0.00%</td>
<td>0.00%</td>
</tr>
<tr>
<td>N/A</td>
<td>81.97%</td>
<td>80.00%</td>
<td>84.62%</td>
<td>50.00%</td>
<td>85.71%</td>
<td>60.00%</td>
</tr>
<tr>
<td>N/A</td>
<td>92.24%</td>
<td>98.11%</td>
<td>88.24%</td>
<td>86.05%</td>
<td>89.37%</td>
<td>96.28%</td>
</tr>
<tr>
<td>N/A</td>
<td>0.90%</td>
<td>0.00%</td>
<td>0.49%</td>
<td>2.33%</td>
<td>0.76%</td>
<td>0.53%</td>
</tr>
<tr>
<td>Performance/Incentive/Outcome Measures</td>
<td>CPSA Child Quarter 3 FY 2011</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>--------------------------------------</td>
<td>-------------------------------</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Access: Individuals . . .</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are satisfied with their access to services</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Receive timely services</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Live within 15 miles of an outpatient clinic</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Do individuals and families have access to recovery and resiliency oriented services?**

<table>
<thead>
<tr>
<th>2010 MHSIP Access to Care Domain</th>
<th>MPS</th>
<th>GSA 5 Child</th>
<th>CDLN</th>
<th>La Frontera</th>
<th>Marana Heath Center</th>
<th>Pantano Child</th>
<th>Providence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Members receive a service within 23 days of Open EOC. Data based on encounters with 90 day lag period to account for submission.</td>
<td>85%</td>
<td>74%</td>
<td>N/A</td>
<td>71%</td>
<td>N/A</td>
<td>77%</td>
<td>73%</td>
</tr>
<tr>
<td>Geo Mapping (currently 99% GSA 5 live within 10 miles of Service Sites)</td>
<td>85%</td>
<td>86%</td>
<td>81.4%</td>
<td>85.8%</td>
<td>76.9%</td>
<td>96.7%</td>
<td>73.8%</td>
</tr>
</tbody>
</table>

**Coming in 2011**
<table>
<thead>
<tr>
<th>Performance/Incentive/Outcome Measures</th>
<th>CPSA Child Quarter 3 FY 2011</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Service Delivery: Individuals . . .</strong></td>
<td>Are services provided based on the needs of individuals and families?</td>
</tr>
<tr>
<td>Participate in their treatment planning</td>
<td>2010 MHSIP Participation in Treatment Planning Domain 88% 88% N/A 82% N/A 90% 92%</td>
</tr>
<tr>
<td>Have current and complete service plans</td>
<td>Quarterly ADHS Behavioral Health Service Plan Performance Measure. (QML proxy data) 85% 87.0% 95.5% 79.5% 98.6% 78.6% 93.1%</td>
</tr>
<tr>
<td>Receive services identified on their service plan</td>
<td>Quarterly Service Provision Performance Measure. From ADHS Assessment and Service Plan Review. 85% Coming in 2011</td>
</tr>
<tr>
<td>Performance/Incentive/Outcome Measures</td>
<td>CPSA Child Quarter 3 FY 2011</td>
</tr>
<tr>
<td>---------------------------------------</td>
<td>-------------------------------</td>
</tr>
<tr>
<td><strong>Coordination/Collaboration: Individuals . . .</strong></td>
<td></td>
</tr>
<tr>
<td>Have their care coordinated with their medical doctor</td>
<td></td>
</tr>
<tr>
<td>Return to a psychiatric hospital</td>
<td></td>
</tr>
<tr>
<td>Stay in a psychiatric hospital an average of . . .</td>
<td></td>
</tr>
<tr>
<td>Follow up after hospitalization for mental illness within 7 days</td>
<td></td>
</tr>
<tr>
<td>Follow up after hospitalization for mental illness within 30 days</td>
<td></td>
</tr>
</tbody>
</table>

**Do individuals and families get seamless behavioral and medical care coordination?**

- **Quarterly Coordination of Care (Ongoing)**
  - Performance Measure: CPSA submits the sample and DBHS conducts this. (QML proxy data)
  - MPS: 70%, GSA 5 Child: 79.7%, CDLN: 45.5%, La Frontera: 89.4%, Marana Health Center: 100%, Pantano Child: 81.8%, Providence: 81.7%

- **Readmission Rates (Current UM Reporting)**
  - MPS: 10%, GSA 5 Child: 5.88%, CDLN: 0.00%, La Frontera: 5.30%, Marana Health Center: 33.33%, Pantano Child: 7.90%, Providence: 2.90%

- **Average length of Stay (Current UM Reporting)**
  - MPS: 10, GSA 5 Child: 12.00, CDLN: 5.00, La Frontera: 8.00, Marana Health Center: 6.00, Pantano Child: 18.00, Providence: 8.00

- **Encounter data of provision of a mental health service within 7 days of discharge from a facility**
  - MPS: 70%, GSA 5 Child: 68.0%, CDLN: No Data, La Frontera: 77.3%, Marana Health Center: 100.0%, Pantano Child: 58.0%, Providence: 70.0%

- **Encounter data of provision of a mental health service within 30 days of discharge from a facility**
  - MPS: 80%, GSA 5 Child: 73.0%, CDLN: No Data, La Frontera: 84.0%, Marana Health Center: 100.0%, Pantano Child: 61.0%, Providence: 74.0%
<table>
<thead>
<tr>
<th>Performance/Incentive/Outcome Measures</th>
<th>CPSA Child Quarter 3 FY 2011</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>MPS</td>
</tr>
<tr>
<td>Annual Demographic Assessment Update (FY 11)</td>
<td>85%</td>
</tr>
<tr>
<td>Demographic updated annually</td>
<td></td>
</tr>
<tr>
<td>Overall Satisfaction (FY 11)</td>
<td>70%</td>
</tr>
<tr>
<td>Overall Satisfaction &quot;Satisfied&quot; or better on annual DBHS survey (based on 2011 MHSIP)</td>
<td></td>
</tr>
<tr>
<td>TXIX Eligibility Ratio (FY 11)</td>
<td>65%</td>
</tr>
<tr>
<td>Using the Enrollment/Penetration Report data, divide the number of enrolled TXIX SMI individuals by the total number of all enrolled SMI individuals</td>
<td></td>
</tr>
</tbody>
</table>
CPSA QM has distributed these measures to CSPs to review and verify that these are reflective of their data as well as their member population.

CSPs will address any discrepancies.

CPSA will use these results to continually improve the system of care.

- To this end, CPSA has taken the PDSA approach to improvement through the implementation of the newly designed CSP Teams.
Plan: Formed CSP Teams consisting of CPSA executive leadership and the CSP executive leadership to improve the system.

Do: CPSA Team Leads have begun meeting with CSP Teams at least quarterly.

Study: CPSA Team Leads use the QM Dashboards along with other data sets (e.g., Member Services complaints, Grievance and Appeals, Quality of Care Issues, ongoing QM liaison monitoring as well as clinical concerns that may arise) to improve the system.

Act: The CPSA Leads address the most salient issues with CSP’s Leadership staff to implement real-time solutions. Start over again.....
CPSA staff will continue to discuss these measures, along with other functional area measures currently produced, to decide what measures will be posted on the website.

Continue to evolve measures across time.

Continue to inform members, families, stakeholders and providers with relevant and important data to perpetually improve the system.
Questions???