

February 14, 2019

Douglas A. Ducey
Office of the Governor
1700 W. Washington
Phoenix, AZ 85007

Dear Governor Ducey:

Pursuant to A.R.S. § 36-2917.01, please find enclosed the 2018 AHCCCS Report on Clinical Oversight Review Committee Activities. Please do not hesitate to contact me if I can answer any questions or provide additional information.

Sincerely,



Jami Snyder
Director

cc: The Honorable Karen Fann, President, Arizona State Senate
The Honorable Russell Bowers, Speaker, Arizona House of Representatives
The Honorable Nancy Barto, Arizona House of Representatives
The Honorable Kate Brophy McGee, Arizona State Senate



Report to Governor Doug Ducey, Senate President Karen Fann, House Speaker Russell Bowers, Senator Kate Brophy McGee, and Representative Nancy Barto Regarding the AHCCCS Clinical Oversight Committee Activities for 2018

February 2019

Jami Snyder, Director

BACKGROUND

Pursuant to A.R.S. §36-2917.01, annually on or before February 1st, AHCCCS shall provide a report to the Governor, the President of the Senate, the Speaker of the House of Representatives, the chairperson of the health and human services committee, or its successor, in the senate and the chairperson of the health committee, or its successor, in the House of Representatives and shall provide a copy of this report to the Secretary of State.

The report shall include:

1. A summary of topics reviewed by the clinical oversight review committee in the preceding year; and
2. Any recommendations relating to quality performance metrics stemming from the committee's activities.

COMMITTEE STRUCTURE

The AHCCCS Clinical Oversight Committee was established in 2016. For 2018, the Committee met on the following dates:

- March 28, 2018
- June 6, 2018
- October 24, 2018 (*scheduled*, meeting canceled due to a power outage at the agency)
- December 26, 2018 (*scheduled*, meeting rescheduled to January 2, 2019 due to scheduling conflicts with key staff)

The Committee includes representatives from the following Divisions:

- Office of the Director
 - Agency Leadership
 - Clinical Project Management
 - Office of Business Intelligence
- Office of Intergovernmental Relations
- Division of Health Care Management
 - Clinical
 - Operations (including Network)
 - Finance
- Division of Health Care Advocacy and Advancement (DHCAA)
 - Office of Human Rights (OHR)
 - Office of Individual and Family Affairs (OIFA)
- Division of Fee-for-Service Management

Information from the Committee is presented at the following meetings to ensure transparency and frequent communication with/feedback from members and stakeholders:

- AHCCCS Community Quality Forum
- OIFA Advisory Council
- AHCCCS Opportunities and Trends Committee (led by OHR)
- ALTCS Advisory Council (as needed)
- AHCCCS Policy Committee, including the Financial Review Committee (when recommendations are incorporated into reviewed policy)

COMMITTEE TOPICS AND RECOMMENDATIONS

March 2018 Committee Meeting

The March meeting was chaired by Director Tom Betlach, with all appropriate areas from the agency represented. The agenda and recommendations were as follows:

- Legislative Report Summary
 - *Discussion:* The Committee reviewed the submission of the 2017 Annual Clinical Oversight Committee Report. The posting location on the AHCCCS website was also shared for reference.
 - *Recommendations:* No recommendations were made.
 - *Follow-Up:* No follow-up items were identified.
- Review of Follow-Up Items from November 2017 Meeting
 - *Discussion:* The Committee reviewed three items:
 1. The Psychiatric Inpatient Readmission Project (PIRP)
 2. General Mental Health/Substance Use (GMH/SU) Service Utilization
 3. Performance Improvement Project (PIP) Options for Consideration (see PIP topic below)
 - *Recommendations:* Regarding the PIRP, the group questioned the timeline of the project; it was shared that these types of projects with Health Services Advisory Group (HSAG) and Arizona Department of Health Services (ADHS) typically run about two years, but a formal timeline has not yet been established as the group is still in the planning phases. For the GMH/SU Service Utilization follow-up item, it was shared that ongoing monitoring is occurring in the Opportunities and Trends Committee. The group asked if other populations were being considered (e.g. individuals determined to have a serious mental illness/SMI). At this time, the major concern is the GMH/SU population; however, data is available to analyze any population as the need arises.
 - *Follow-Up:* Once a timeline is established for the PIRP, the group would like to learn more about the interventions and processes that the managed care organizations (MCOs) will be engaged in. No other follow-up items were noted. For the GMH/SU service utilization, the team will continue as planned with the targeted population.
- Clinical Project Manager Update
 - *Discussion:* An overview of the process related to the redesign of the behavioral health audit process was provided. An overview of the AHCCCS Community Quality Forum was also shared. The Community Quality Forum brings together AHCCCS MCOs as well as members and community stakeholders to provide feedback on AHCCCS initiatives, relevant data, and program development.
 - *Recommendations:* No recommendations were made.
 - *Follow-Up:* Director Betlach requested to be included in the AHCCCS Community Quality Forum meetings as an optional attendee. Ongoing updates related to the behavioral health audit tool revisions were requested.
- Performance Improvement Project (PIP) Options
 - *Discussion:* An overview of federal PIP requirements was provided along with a list of current PIPs. The group discussed options for new PIPs across all lines of business.
 - *Recommendations:* It was recommended that there be a “Back to Basics” approach with the PIPs, meaning that the MCOs should focus on fundamental aspects of health care given the 2017 Performance Measure results (e.g. well child visits).
 - *Follow-Up:* The Quality Improvement team will take Committee’s feedback and provide an update once the final PIP topics are selected.

- Maternal Child Health (MCH)/Early and Periodic Screening, Diagnostic and Treatment (ESPDT) Updates
 - *Discussion:* Pregnancy data was reviewed for underage (<19 years of age) members. There was a discussion about targeted vs. universal lead screening and the impact to targeted screening based on new requirements from the Arizona Department of Health Services (ADHS).
 - *Recommendations:* Some refinements to the pregnancy data were requested as well as inclusion of American Indian Health Program (AIHP) members. It was recommended that the agency go back to Universal Lead Screen in order to minimize provider burden; however, prior to finalizing the decision, it was also recommended that the proposal be reviewed by the Financial Review Committee (FRC) to determine financial impact. .
 - *Follow-Up:* Depending on the outcome of the FRC, any changes to the AHCCCS Lead Screening program need to be communicated to ADHS, Centers for Medicare and Medicaid Services (CMS), and the Center for Disease Control (CDC).
- MCO Review
 - *Discussion:* Any immediate concerns were asked to be shared; none were reported. In depth review to be conducted at next meeting.

June 2018 Committee Meeting

The June meeting was chaired by Director Tom Betlach with all areas represented. The agenda and recommendations were as follows:

- Follow-Up from March 2018 Meeting
 - *Discussion:* An update was provided regarding the behavioral health audit process; there were no additional topics requested and no questions were presented regarding historical topics.
 - *Recommendations:* It was requested that the MCOs be included in all efforts regarding the audit process. It was recommended that the workgroup work through a process to minimize provider burden, perhaps with the assistance of the Arizona Association of Health Plans.
 - *Follow-Up:* A workgroup update related to minimizing provider burden was requested to be on the agenda for the next Committee meeting.
- MCO Review
 - *Discussion:* Specific metrics from each of the clinical areas was presented for review, including performance measures, Incident/Accident/Death (IAD) statistics, MCO-based Quality of Care investigations, Emergency Department diversion, and out-of-state placements. New data points related to Performance Measures and Lead Screening were included.
 - *Recommendations:* Due to lack of clarity around the AZ Long-term Care System (ALTCS) case management data points, a change to the methodology was recommended for the next Clinical Oversight meeting to ensure meaningful/actionable data as well as cross-MCO comparability. It was recommended that a more stringent process be implemented for review of deliverables (from which data for this review is generated) and MCO leadership can be updated regarding all trends and/or year-to-date performance.
 - *Follow-Up:* Additional follow-up with specific MCOs was completed regarding two data elements to ensure future compliance.

- American Society of Addiction Medicine (ASAM) Assessment Update
 - *Discussion:* Due to ongoing licensing concerns as well as the associated costs to be ASAM-certified, it is becoming increasingly difficult for providers to utilize the ASAM assessment. It is currently a Targeted Investment initiative, but it is challenging for providers not participating in TI. AHCCCS intends to work with ASAM to determine a path forward, which may include a blanket license that all AHCCCS-registered providers may be able to utilize.
 - *Recommendations:* No recommendations were made.
 - *Follow-Up:* It was determined that the Quality Management team must be made aware that the ASAM can no longer be a requirement due to the ongoing concerns; this was completed within a day of the meeting.
- Network Updates
 - *Discussion:* The new MCO deliverable template for Network Adequacy was shared for group review and feedback; it was shared that Health Services Advisory Group is being engaged to support review of MCO network adequacy and ensure AHCCCS compliance with the new Managed Care Regulations. Additional discussion related to a recent Access to Care Notice to Cure issued to Division of Developmental Disabilities (DDD) took place as the Division has identified a substantial number of service gaps for members, including therapies and respite. The Division will submit ongoing updates related to resolving these gaps.
 - *Recommendations:* The Committee recommended a standing agenda item for DDD oversight be added to future meetings. The Committee would like to see data on all aspects of DDD services and potential gaps in care.
 - *Follow-Up:* Provide data on all aspects of DDD services and potential gaps in care.
- State of the State: Opioid Epidemic
 - *Discussion:* The Committee reviewed national and state-level statistics related to the epidemic. An overview of the Opioid Epidemic Act was provided and the group discussed the three target groups (chronic opioid users, diverters, and opioid-naïve individuals) as well as the state strategies to address the epidemic.
 - *Recommendations:* It was recommended that the Committee receive an update at least once a year (or more frequently if needed) to enhance awareness of current agency and state initiatives.
 - *Follow-Up:* No follow-up items were identified.
- E-Prescribing PIP, 2nd Remeasurement – CYE 2017
 - *Discussion:* The group reviewed data related to 15 MCOs, including Acute, ALTCS, Comprehensive Medical and Dental Program (CMDP), and Children’s Rehabilitative Services (CRS) lines of business. The goal of the PIP (to increase the number of prescriptions that are e-prescribed as well as the number of prescribers who e-prescribe) was reviewed along with the data. From CYE 2014, the baseline year, to CYE 2017, remeasurement year 2, data showed a 7.8 percent increase in the number of prescribers who e-prescribed with a 14.8 percent increase in the number of prescriptions that were e-prescribed.
 - *Recommendations:* No recommendations were made.
 - *Follow-Up:* No follow-up items were identified.

October 2018 Committee Meeting

The October meeting was canceled the day of the meeting due to a power outage at the agency. Information was shared with all relevant parties and a request for any urgent concerns or issues was made; none were identified. General updates were shared in other meetings, including Executive Management meeting, AHCCCS Operations meeting, Opportunities and Trends meeting, and other internal workgroups, as appropriate.

December 2018 Committee Meeting

The December meeting was rescheduled to January 2, 2019 due to scheduling conflicts of multiple key staff. The January 2019 meeting was chaired by the interim Clinical Administrator, Dr. Eric Tack, with all areas represented. The agenda and recommendations were as follows:

- Review and Follow-Up from Previous Meetings:
 - *Discussion:* Behavioral health audit tools and alignment of the audit process with AHCCCS policy was discussed. Links were shared for the three tools (Children; GMH/SU; and SMI)
 - *Recommendations:* Further review of the tools and audit process for alignment with AHCCCS policy will be completed.
 - *Follow-Up:* No follow-up items were identified
 - *Discussion:* A review of the revised teen pregnancy data was shown with the corrected rates per 1000 eligible members.
 - *Recommendations:* Provide Annual update of the preceding year's data as a standing agenda item for all future meetings.
 - *Follow-Up:* No follow-up items were identified.
 - *Discussion:* A presentation was made on the status of current performance improvement processes. The e-prescribing PIP is not closed.
 - *Recommendations:* The QI team will report back with a timeline for the development of baseline data for the new selected PIPs.
 - *Follow-Up:* The QI group will tentatively present an update at the June 2019 meeting.
- AHCCCS Complete Care (ACC) Implementation
 - *Discussion:* Updates related to education and technical assistance completed during the ACC readiness process were shared. An overview was provided of the recent Back to Basics weekly WebEx sessions provided to the MCOs.
 - *Recommendations:* Explore the possibility of a pre and post test regimen to assess comprehension and satisfaction with both the content and platform for such technical assistance presentations.
 - *Follow-Up:* No follow-up items were identified.
- CMDP Oversight
 - *Discussion:* A presentation of new deliverables for CMDP and data collection was provided with emphasis on the CMDP Dashboard. Clarification was provided that some reporting elements are contractually required (e.g., shelter status reporting). The dashboard on the AHCCCS website includes many of these data points. Clarification was provided related to the definition of rapid response timeframes. Data is available for services during the first 72 hour timeframe and for services after the first 72 hour timeframe.
 - *Recommendations:* The Committee preferred to have the data presented as a standing item at each meeting; rapid response data stratified for times, for MCOs,

for RBHAs and other aggregate data to also be stratified by RBHA. The Committee requested to review the methodology for the reporting elements.

- *Follow-Up:* No follow-up items were identified.
- DDD Oversight
 - *Discussion:* An initial high level overview of current administrative actions and areas of non-compliance was provided. These areas include Quality Management focused audit findings and a subsequent plan for outsourcing all QM functions by the Division with oversight by AHCCCS; procurement of a third party to triage and investigate a backlog of incidents; and Access to Care/Vendor Call compliance with initiation of service requirements; Per CMS request, AHCCCS will provide monthly status updates regarding systemic issues and progress on resolution. AHCCCS executive leadership will meet with DDD executive leadership later this month to discuss strategies for resolving open compliance actions.
 - *Recommendations:* Continue to provide status updates at future meetings.
 - *Follow-Up:* No follow-up items were identified.
 - *Discussion:* An overview of access to therapy (rehabilitative v. habilitative) services and responsibility for provision of these services (DDD v. DDD sub-contracted health plans or new integrated plans effective 10/1/19) was provided. The split assignment responsibility remains in the Integrated Request For Proposal from DDD for integrated health plans to manage physical and behavioral health services and some therapies. This assignment of responsibility (a nurse v. the support coordinator) for determining the assessment for services is another factor impacting timely access to therapy services.
 - *Recommendations:* Updates will be provided at future meetings.
 - *Follow-Up:* Follow up with DDD subsequent to their integrated health plan awards on operational processes to ensure no barriers to services.
- Long-Acting Reversible Contraception (LARC) Utilization Data
 - *Discussion:* Initial review of the LARC utilization data from 2017 and 2018 was provided.
 - *Recommendations:* The AHCCCS Chief Medical Officer (CMO) agreed to conduct further review and provide a comprehensive review at the next meeting.
 - *Follow-Up:* CMO to review data prior to the next meeting.
- Childhood and Adolescent Immunization Audit Reports
 - *Discussion:* Data related to the immunization of two-year olds as well as adolescents was presented and the current status of the MCO corrective action plan submissions and sanctions imposed due to rates below the minimum performance standards and failure to improve year over year.
 - *Recommendations:* Progress report to be provided at a future meeting.
 - *Follow-Up:* No follow-up items were identified.

The Committee continues to support greater awareness of clinical activities across the Agency while providing a forum for member and stakeholder feedback to be evaluated and incorporated into clinical operations. As a result of the Committee, there is enhanced monitoring and oversight of MCO performance and new opportunities to review system-wide clinical performance in areas such as network adequacy and quality of care.