





NARRATIVE B4 RANKING AND CONSENSUS BATCH#41				
<p>Narrative B4: There are many opportunities for clinical quality improvement for care of individuals living with Serious Mental Illness (SMI). The Officer shall:</p> <ol style="list-style-type: none"> <li>Describe methods the Officer uses to assess disparities or improvement opportunities for broad-based (system-wide) quality improvement and the related actions taken.</li> <li>Describe areas the Officer has identified as presenting the greatest opportunities for broad-based (system-wide) quality improvement and the related actions taken.</li> <li>Describe the Officer's experience in achieving quality outcomes for individuals living with an SMI or similar Medical Population. When applicable, provide statistically relevant results of previous interventions implemented by the Officer and</li> <li>Describe the Officer's proposed approach to a Clinical Performance Improvement Project (PIP) designed to improve outcomes for individuals living with an SMI. (Note: AKECCS will review the Awarded Officer's PIP and may require the Officer to implement the proposal as an AKECCS mandated PIP (subject to AKECCS required approval) for the Geographic Service Area (GSA) served.)</li> </ol> <p>Additional Evaluation Considerations:            Impactful            Strategies that improve outcomes            Address specific population needs            Other notable considerations</p>				
MOLINA COMPLETE CARE	MERCY CARE (MC)	BANNER UNIVERSITY FAMILY CARE (BUFC)	HEALTH CHOICE (HC)	ARIZONA COMPLETE HEALTH (ACH)/CAHST (CF)
RATIONALE AND MAJOR OBSERVATIONS				
Officer generally described the types of data and stakeholder feedback (including feedback related to SDOH) used to assess disparities and identify improvement opportunities. Officer described benchmarking performance against nationally recognized standards. Officer did not describe clearly how it identifies disparities and gaps.	Officer described the types of data and stakeholder feedback used to assess disparities and identify improvement opportunities. Officer described its process for assessing social risk factors and identifying gaps related to social determinants of health.	Officer described the types of data, as well as national resources and member/provider feedback, it uses to identify disparities and opportunities.	Officer discussed the types of data used and identified analytic tools to identify barriers and gaps, including social determinants of health.	Officer described the types of data and stakeholder feedback used to assess disparities and identify improvement opportunities. Officer described its process for assessing social risk factors and identifying gaps related to social determinants of health.
Officer described use of continuous quality improvement cycles, including Plan-Do-Study-Act (PDSA) cycles, and root cause analysis to address disparities. Officer generally described its approach for evaluating member/provider and system-wide interventions and their efficacy. Officer provided an example of an improvement project related to PIP capacity assessment.	Officer described use of the PDSA quality improvement framework. Officer provided an example of an identified disparity, its intervention and results related to cervical cancer screening rates for women with an SMI in the AZUSA population.	Officer described use of multiple tools with PDSA cycles, including root cause analysis and process mapping. Officer described its approach for developing interventions. Officer provided an example of an identified disparity and interventions related to oral health for members with an SMI and its investments to address SDOH disparities.	Officer provided examples of interventions taken to address identified disparities. Officer did not describe clearly its process to identify and evaluate potential interventions.	Officer described use of a PDSA Rapid Cycle Performance Improvement model to develop interventions. Officer provided examples of disparities specific to the SMI population, actions taken and results.
Officer identified four areas for improvement and described its interventions. Officer provided data to support the efficacy of its identified interventions.	Officer identified three areas for improvement and described its interventions. Officer provided data to support the efficacy of its identified interventions.	Officer identified five improvement opportunities that include areas for performance improvement and program enhancements. Officer described interventions and provided data to support the efficacy of the interventions for a sub-set of the identified areas for improvement.	Officer identified seven measures as leading indicators for improvement and provided performance results that align with its APN provider groups. Officer did not describe clearly its interventions.	Officer identified three metrics for improvement and described a series of innovative provider and member focused interventions. Officer provided data to support the efficacy of its identified interventions.
Officer described its experience with four initiatives. Officer provided improvement results for all four initiatives.	Officer described its experience addressing diabetes monitoring and prenatal care for members with SMI in Arizona. Officer provided performance measures with demonstrated improvement.	Officer described its experience achieving outcomes, vaccination rates for individuals with SMI, medication adherence, HSA, screening rates and CAHPS results. Officer provided performance measures with demonstrated improvement.	Officer described its experience implementing behavioral health related interventions and identified performance improvement rates.	Officer identified a series of health outcomes measures with demonstrated improvements, including measures related to utilization of inpatient hospital and ED on-axis, prescription drug usage, health screens, and treatment.
Officer proposed a Performance Improvement Project (PIP) to address diabetes care for individuals with schizophrenia or bipolar disorder, in alignment with the AKECCS Quality Strategy. Officer identified interventions to be undertaken and three HEDIS measures to evaluate the efficacy of the interventions.	Officer proposed a Performance Improvement Project (PIP) to address diabetes screening rates for individuals with schizophrenia or bipolar disorder using antipsychotic medications. Officer provided outcomes data to justify the PIP focus. Officer identified innovative interventions.	Officer proposed a Performance Improvement Project (PIP) to improve the care of individuals with SMI using Person Drive Outcomes Measure (PDOAM). Officer discussed its rationale for selection of the PIP. Officer did not clearly describe potential interventions to be undertaken or considered.	Officer proposed a Performance Improvement Project (PIP) for pregnant women with SMI. Officer provided outcomes data to support the PIP focus. Officer identified interventions to be undertaken. Officer identified performance measures to evaluate the efficacy of the proposed interventions and established performance improvement targets.	Officer proposed a Performance Improvement Project (PIP) to address health outcomes and quality of life for individuals living with a Schizophrenia Spectrum Disorder (SSD). Officer provided outcomes data to justify the PIP focus. Officer identified specific measures and performance improvement goals. Officer identified innovative interventions and measures that would be used to evaluate the efficacy of the interventions.
NARRATIVE				
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NARRATIVE B4 RANKING AND CONSENSUS BATCH#41 EVALUATOR TEAM SIGNATURES	
EVALUATOR FULL NAME (FIRST AND LAST):	Georgette Chukwuemeka
EVALUATOR TITLE:	Strategic Performance Administrator
DATE:	Nov 4, 2021
SIGNATURE:	 Georgette Chukwuemeka (Nov 4, 2021 08:13 PDT)
EVALUATOR FULL NAME (FIRST AND LAST):	Jakenna Lebsack
EVALUATOR TITLE:	Assistant Director, DHCM
DATE:	Nov 4, 2021
SIGNATURE:	 Jakenna Lebsack (Nov 4, 2021 06:55 PDT)
EVALUATOR FULL NAME (FIRST AND LAST):	Rohno Geppert
EVALUATOR TITLE:	Special Projects Advisor
DATE:	Nov 4, 2021
SIGNATURE:	 Rohno Geppert (Nov 4, 2021 09:13 PDT)
FACILITATOR FULL NAME (FIRST AND LAST):	Scott Wittman
DATE:	Nov 4, 2021
SIGNATURE:	 Scott Wittman (Nov 4, 2021 09:09 CDT)