

Provider Type: Hospital Providers
Area of Concentration: Adults with Behavioral Health Needs

Project: Hospitals

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Objective: To more effectively coordinate the care for adults with a primary discharge diagnosis of behavioral health and persons with serious mental illness designation, who are being discharged from an inpatient stay.

****Unless otherwise stated, demonstration that the practice has met the criteria listed in each Milestone Measurement is due by September 30th of the respective Milestone Measurement Period.***

Hospital Project		
Core Component	Milestone	Due Date
1	Develop protocols to identify members' primary care physicians and to obtain members health history	9/30/19
2	Make direct connections to community behavioral health providers	9/30/19
3	Schedule follow-up with behavioral health provider within 7 days of patient discharge	9/30/19
4	Conduct a review within 48 hours of discharge	9/30/19
5	Provides priority medications in sufficient amounts for patients	9/30/19
6	Participate in relevant TI program-offered training	N/A

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	those SDOH in the electronic medical record.	2) Convey any identified social determinants of health.
3.	For patients with a primary diagnosis of mental illness, the hospital must, with input from the patient, schedule a follow-up appointment with the patient's community behavioral health provider to occur within seven days of discharge.	
	<p>Milestone Measurement Period 1 (October 1, 2017–September 30, 2018*)</p> <p>◄—►</p> <p>Hospital Reporting Requirement to State</p>	<p>Milestone Measurement Period 2 (October 1, 2018–September 30, 2019*)</p> <p>◄—► ◄—►</p> <p>Hospital Reporting Requirement to State</p>
	By September 30, 2018, document the protocol for setting up follow-up appointments to occur within seven days of discharge with the patient's community behavioral health provider.	By September 30, 2019, based on a hospital record review of a random sample of at least 20 discharged members with a primary discharge diagnosis of behavioral health and/or persons with serious mental illness designation, attest that, 85% of the time, the hospital scheduled a follow-up appointment to occur within seven days of discharge with the patient's community behavioral health provider.
4.	Conduct a community-based, post-discharge medication review within 48 hours of discharge, for members with a primary diagnosis of mental illness and for members with complex medication regimens. Protocols developed by the hospital should identify for which members in home reviews will be conducted and for which members telephonic or telehealth-enabled review will be conducted. Any medication-related problems found on the review (including opioid use) must be communicated to the member's primary care and/or behavioral health provider.	
	<p>Milestone Measurement Period 1 (October 1, 2017–September 30, 2018*)</p> <p>◄—► ◄—►</p> <p>Hospital Reporting Requirement to State</p>	<p>Milestone Measurement Period 2 (October 1, 2018–September 30, 2019*)</p> <p>◄—► ◄—► ◄—►</p> <p>Hospital Reporting Requirement to State</p>
	<p>A. By September 30, 2018, document the criteria used to identify individuals who would most benefit from in-person medication reviews and those who could be supported with a telephonic or telehealth-enabled review, AND</p> <p>B. By September 30, 2018, document the protocol that governs the process for conducting the medication review within 48 hours of discharge to the community, including how the hospital ensures the primary care and/or behavioral health provider are contacted when a medication problem arises.</p>	By September 30, 2019, based on a hospital record review of a random sample of at least 20 discharged members who fit the hospital's medication review criteria attest that, 85% of the time, the hospital assisted in these reviews with the member, within 48 hours of discharge to the community, and communicated any medication-related problems to the PCP and/or behavioral health provider.
5.	The hospital provides priority medications (including opioid addiction-treatment drugs prescribed for any reason and naloxone, as per Arizona Opioid Prescribing Guidelines) in amounts sufficient to meet patient needs until his or her first scheduled outpatient follow-up appointment.	
	<p>Milestone Measurement Period 1 (October 1, 2017–September 30, 2018*)</p> <p>◄—►</p> <p>Hospital Reporting Requirement to State</p>	<p>Milestone Measurement Period 2 (October 1, 2018–September 30, 2019*)</p> <p>◄—► ◄—► ◄—►</p> <p>Hospital Reporting Requirement to State</p>
	<p>A. By September 30, 2018, document which medications the hospital has prioritized for this Core Component, AND</p> <p>B. By September 30, 2018, document policies and procedures for discharging members with prioritized medications in amounts sufficient to cover member needs until his or her first scheduled outpatient follow-up appointment and attest to their implementation.</p>	By September 30, 2019, based on a hospital record review of a random sample of at least 20 discharged members with a primary discharge diagnosis of behavioral health and/or persons with serious mental illness designation, attest that, 85% of the time, the hospital dispensed the priority medication in an amount sufficient to cover the member until the first scheduled outpatient follow-up appointment.

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6.	Participate in any Targeted Investment program offered learning collaborative, training and education, relevant to this project. In addition, utilize any resources developed or recommendations made during the Targeted Investment period by AHCCCS to assist in the treatment of AHCCCS-enrolled members.	
	<p align="center">Milestone Measurement Period 1 (October 1, 2017–September 30, 2018*)</p> <p align="center">Hospital Reporting Requirement to State</p>	<p align="center">Milestone Measurement Period 2 (October 1, 2018–September 30, 2019*)</p> <p align="center">Hospital Reporting Requirement to State</p>
	Not applicable. AHCCCS or an MCO will confirm hospital participation in training.	Not applicable. AHCCCS or an MCO will confirm hospital participation in training.

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Resource Links

Core Component #5

[Arizona Opioid Prescribing Guidelines](#)