Targeted Investments Year 3 Document Validation Criteria

Note: The intent is that NO protected health information [PHI] is uploaded through the TI attestation portal. Additional resources are available on the last page of this document

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Core Component	Milestone	Validation Method	Review Criteria
1	Progress Report; Updated IPAT Score	Submit IPAT score submitted through Survey Monkey to AHCCCS.	☐ Complete and submit an updated IPAT score between August 1 and September 30, 2019.
2	Attest that the care manager is utilizing the practice registry to track integrated care management.	Maintain evidence that member progress in tracked consistent with Core Component 3A and/or 3B.	☐ N/A
3	Document that care managers have been trained in motivational interviewing, are conducting motivational interviewing with high risk members, and attest that the care manager has completed all required documentation.	Upload certificate or other documentation of Motivational Interviewing training, and self-audit results through the Attestation Portal to AHCCCS. Upload Self -audit results through the Attestation Portal to AHCCCS;	Care Manager(s) motivational interviewing training requirement: ☐ CEU certificate and course description ☐ % Results submitted compared to 85% target.

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4	Attest that, the integrated care plan, which includes established data elements, is documented in the electronic health record 85% of the time.	Upload Self-audit results through the Attestation Portal to AHCCCS; Maintain evidence that integrated care plans are documented in the electronic health record 85% of the time.	☐ % Results submitted compared to 85% target.
5	Attest that 85% of members were screened using the identified tool, and for those who scored positively, the care manager connected the member to the appropriate community resource and documented the intervention/referral.	Upload Self-audit results through the Attestation Portal to AHCCCS; Maintain evidence that members were screened 85% of the time and connected to appropriate community resource.	☐ % Results submitted compared to 85% target.

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6	Attest that a warm hand-off if co-located or provider to provider referral if not co-located, consistent with the practice's protocol, occurred 85% of the time for members identified as having received behavioral health services.	Upload Self-audit results through the Attestation Portal to AHCCCS; Maintain evidence that members identified as having received behavioral health services were connected with a warm hand-off if co-located, or provider/licensed professional to provider/licensed professional referral if not co-located, 85% of the time.	☐ % Results submitted compared to 85% target.
7	Attest that a reassessment if clinically necessary occurred for within the evidence-based timeframe recommended 85% of the time.	Upload Self-audit results through the Attestation Portal to AHCCCS; Maintain evidence that reassessment if clinically necessary occurred for within the evidence-based timeframe occurred 85% of the time.	☐ % Results submitted compared to 85% target.

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8	Attest that the prescriber complied with the AZ guidelines for opioid prescribing 85% of time.	Upload Self-audit results through the Attestation Portal to AHCCCS; Maintain evidence that the prescriber complied with the AZ guidelines for opioid prescribing 85% of time.	☐ % Results submitted compared to 85% target.
9	A. Attest that the practice is transmitting data on a core data set for all members to Health Current; AND B. Implement policies and procedures that require longitudinal data received from Health Current to be routinely accessed and used to inform care management of high-risk members.	Maintain evidence that the practice is transmitting data on a core data set for all members to Health Current; AND Upload policies and procedures through the Attestation Portal to AHCCCS that require longitudinal data received from Health Current to be routinely accessed and used to inform care management of high-risk members.	N/A Policies and procedures must address: ☐ Timeframes ☐ The types of data reviewed ☐ Staff responsibility for the data review ☐ The criteria for the review and follow up

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10	Attest that the practice has implemented the **AHCCCS defined member and family experience survey questions** and that the information obtained from the surveys is used to improve the referral relationships with an action plan.	Upload the action plan through the Attestation Portal to AHCCCS summarizing the survey results and how response trends are addressed. Upload the Member/Family Survey Results Tabulation Excel Spreadsheet through the Attestation Portal to AHCCCS.	The action plan must include: ☐ Trends identified ☐ Process improvement Complete and Submit the Member/family Survey Results Tabulation Spreadsheet: ☐ Tabulation Spreadsheet Instructions for using the spreadsheet
11	Protocol used to prioritize access to appointments for members in the high risk registry (HRR).	Upload the protocol through the Attestation Portal to AHCCCS.	The protocol must include: ☐ The protocol for identifying individuals in the HRR at time of making appointments to be seen in the practice or appointments made on behalf of members when referred for BH care. ☐ The process for monitoring the effectiveness of the protocol.

Resource links

Core Component #1:

Organizational Assessment Toolkit (OATI)

Massachusetts Behavioral Health Integration Toolkit (PCMH)

PCBH Implementation Kit

Integrated Practice Assessment Tool (IPAT)

Core component #3:
Motivational Interviewing Training Examples

https://cabhp.asu.edu/content/motivational-interviewing

https://reliasacademy.com/browse/productDetailSingleSku.jsp?productId=c61576

https://ce.pharmacy.purdue.edu/mi/introduction

https://cne.nursing.arizona.edu/oltpublish/site/program.do?dispatch=showProgramSession&id=87836c34-5903-11e7-a6ac-0cc47a352510&inner=false

Core component #5:

Patient–Centered Assessment Method (PCAM)

The Health Leads Screening Toolkit

Hennepin County Medical Center Life Style Overview

The Protocol for Responding to and Assessing Patients' Assets, Risks and Experiences (PRAPARE)

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Core Component #6:

Riverside Protocol Example

Riverside Protocol Example (Word Version)

Core Component #8:

Arizona Opioid Prescribing Guidelines for acute and chronic pain

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