



## New York City Service Center 2014 Quality Corner

The ValueOptions® New York City Engagement Center is committed to being a center for excellence in developing and coordinating quality programs for members through our partnerships with you, our providers, and practitioners. We are committed to meeting and exceeding standards set forth by oversight bodies such as NCQA and URAC.

### **How do we do this? Our Quality Program Structure and Goals:**

Our Chief Executive Officer, Chief Medical Officer, and the other leaders of ValueOptions, guide our Quality Program. Staff from all areas in the company also works with the Quality Program. The Quality Program does its work here at our New York Service Center so that we are better able to know what you prefer and meet your needs. Our goals include:

- Making sure you can reach ValueOptions staff and providers when you need them
- Making sure that our network providers meet our high quality standards
- Making sure that our services respect the needs you have due to your race, culture, or religion
- Helping our members get the most out of our services so they can take charge of their health

### **The New York City Service Center is Accredited:**

We are proud to inform you that the New York City Engagement Center received external accreditation from two important organizations:

- The New York City Engagement Center was awarded Full Accreditation from the National Committee for Quality Assurance (NCQA). NCQA is a private, non-profit organization committed to improving the quality of health care. The NCQA seal is a good indicator that an organization provides quality care and service. This Accreditation is recognized across the country and is proof that ValueOptions is committed to providing members with access to the best care possible.
- The New York City Engagement Center was awarded Health Utilization Management 7.0 Accreditation from URAC. URAC is a health care accrediting organization that establishes quality standards for the health care industry.

## Provider and Member Satisfaction:

On an annual basis, Fact Finder's conducts member and provider surveys on behalf of ValueOptions the New York City Engagement Center (NYCEC). Data is analyzed on key areas of clinical and administrative services. Member satisfaction is evaluated through:

- Member Satisfaction Surveys
- Reviewing member comments from surveys
- Tracking and reviewing contents of the complaints and inquiries
- Soliciting qualitative feedback from stakeholders

Member survey data is assessed for opportunities to improve member satisfaction. Questions are asked about satisfaction in the following areas: Access to care, claims, outcomes of service, hospital services, toll free number services, Internet, therapist ratings, coordination of care and referral services.

The survey results are used to identify opportunities for improvement. Result from 2013 Member and Provider Satisfaction Survey, Indicates that 91.6 percent of overall members and 86.2 percent of overall providers were satisfied with ValueOptions mental health services.

## Screening Programs and Integrated Care:

ValueOptions® works closely with our health care partners. Together, we deliver programs that keep you healthy and prevent behavioral health problems, such as depression, from getting worse.

Research tells us that people with long term health issues may also suffer from depression. Depression is a treatable illness, but it is often undiagnosed. With EmblemHealth, ValueOptions works to diagnose members living with depression so that it can be treated.

Our integrated preventive health programs include screening for depression with members diagnosed with chronic health illness:

Post Cardiac Event Program  
Members with Diabetes  
Weight Management Program

### Bipolar and an Alcohol Disorders:

ValueOptions has developed a screening program for members who are diagnosed with a Bipolar Disorder and who may have a coexisting alcohol use disorder. Some people with bipolar disorder may try to treat their symptoms with alcohol which can make their symptoms worse. Our Intensive Case Management (ICM) team can assist members with providing educational materials, referrals and offer further support to assist you in your recovery needs. To learn more about the ICM program please call:

**1-855-589-2773, option #3.**

## Intensive Case Management Program

ValueOptions offers our members with complex health conditions the enhanced services of an Intensive Case Management (ICM) Program. The ICM Program is designed to help members who need additional support to benefit from the behavioral and medical healthcare service system. These members often:

- ✓ Have been admitted to mental health hospitals or substance use facilities several times
- ✓ Have a severe and persistent mental health disorder such as Psychotic Disorder, Bipolar Disorder or Severe Childhood Psychiatric Disorder
- ✓ Suffer from a coexisting chronic medical condition such as Diabetes or Heart Disease

### Members enrolled in the ICM Program are assigned an ICM Clinical Case Manager who will:

- ✓ Help you develop goals to maintain or improve your health status and well-being
- ✓ Encourage you in your efforts to meet your goals and plan ways to overcome obstacles to meeting your goals
- ✓ Help to coordinate your healthcare providers, community agencies, and family members to develop a unified treatment plan for you

## Self-Management Tools Can Help Improve Physical and Emotional Health

Identifying problems early on or avoiding them all together. Using a "Self-Management Tool", you can discover symptoms of physical and emotional conditions early, and then have the information needed to take positive steps toward improving your health.

Value Options offers such tools in many forms, including quizzes, videos, workbooks, websites, surveys, member handbooks, and newsletters. Each tool is geared toward providing you with practical techniques to help manage physical and emotional topics that are common to many of us:

- Healthy Weight (BMI)
- Smoking and Tobacco Cessation
- Physical Activity
- Healthy Eating
- Managing stress
- Avoiding At-Risk Drinking
- Identifying Mental Health Symptoms Through Self-assessment
- Recovery and Resiliency
- Treatment monitoring

By identifying present and potential problems early the tools can allow you to stop the progression of physical and emotional problems which -in addition to improving wellbeing- saves time and money.

Like most things in life, some tools will be a better fit for you than others. Finding the right self-management tool and using it can be enjoyable and rewarding. Look through the tools, try some out, and discuss your results with your health care team.

Visit our achieve solutions website for more information.

[www.achievesolutions.net/achievesolutions](http://www.achievesolutions.net/achievesolutions)

## TREATMENT RECORD DOCUMENTATION:

The Quality Management Department of the ValueOptions New York City Engagement Center conducts an annual audit of patient treatment records. This audit mirrors behavioral health best practice standards as a contractual obligation for all ValueOptions providers. These requirements are set forth in your provider contract and noted in the ValueOptions Provider Handbook. ValueOptions has adopted the treatment record documentation standards to assure that records are maintained in an organized format, which permits effective and confidential patient care and quality review. These standards facilitate communication, coordination, and continuity of care, and promote efficient and effective treatment.

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For 2013, A total of 308 charts were reviewed from 107 practitioners.

The NYCEC recognizes that a profound barrier to the exchange of information with the PCP is due to the nature of a PPO product for which a gatekeeper PCP is not required. Approximately 60% of the total membership in 2013 was enrolled in a PPO product. Of the cases that were appropriate for the audit for both 2012 and 2013 the performance goal of 80% was achieved therefore no improvement opportunities were identified however exchange of information will continue.

The results of coordination of care questions are illustrated in the table below for the past two years. Data demonstrates increases in both indicators were above the 80% performance goal and no corrective action plans were required.

	2012	2013
PCP Coordination	80.1%	83.7%
Percent with PCP Release	80.0%	81.7%

## **Clinical Practice Guidelines:**

ValueOptions clinical practice guidelines are adopted from recognized sources such as professional behavioral health care organizations and professional literature. Development of the guidelines involves clinicians considered specialists in their respective fields, as well as feedback from practitioners in the community.

ValueOptions has adopted guidelines from the American Psychiatric Association (APA) for:

- \* Acute Stress Disorder, Post Traumatic Stress Disorder and Guideline watch
- \* Assessing and Treating Suicidal Behavior
- \* Schizophrenia, Guideline watch and Quick Reference guide
- \* Substance Abuse Disorder sand Guideline watch
- \* Bipolar Disorder and Guideline watch
- \* Major depression
- \* Panic disorder and Guideline watch
- \* Suicidal Behaviors
- \* Eating Disorders and Guideline watch

ValueOptions has adopted guidelines from the American Academy of Child and Adolescent Psychiatry (AACAP) for:

- \* Attention Deficit Hyperactivity Disorder (ADHD)
- \* Generalized Anxiety Disorder – Adolescents

ValueOptions has adopted guidelines from the Canadian Psychiatric Association for:

- \* Generalized Anxiety Disorder - Adults

ValueOptions has adopted guidelines from SAMHSA for ValueOptions has developed clinical practice guidelines for:

- \* Autism Spectrum Disorder and adopted guidelines from the AAP for Management for Children w/ASD and Identification and Evaluation of Children w/ASD.

All Clinical Practice Guidelines are available on the ValueOptions website:

[http://www.valueoptions.com/providers/Handbook/treatment\\_guidelines.htm](http://www.valueoptions.com/providers/Handbook/treatment_guidelines.htm).

## **Confidentiality:**

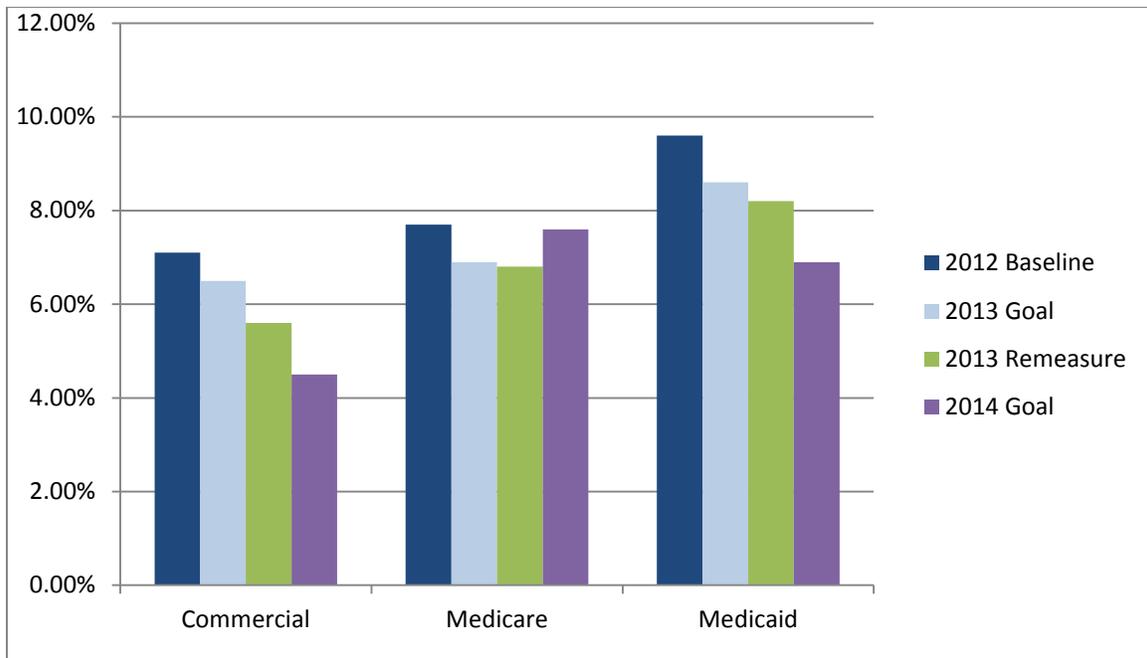
ValueOptions has written policies regarding protected health information (PHI). These policies address disclosure of PHI, restrictions on use of PHI, the ability to amend PHI, and accounting process for disclosures and internal/external protection of oral, written, and electronic information across the organization. To view the ValueOptions Privacy Statement follow this link: <http://www.valueoptions.com/Privacy.htm>

## 2013 Quality Improvement Activities

### Time in Community

#### Increasing Community Tenure for Members Diagnosed with Major Depressive Disorder (MDD) or Bipolar Disorder (BPD) and Have Had Two or More Psychiatric Hospital Admissions within a Twelve Month Period

Rate of readmission within thirty days of discharge from inpatient psychiatric hospitalization for New York City Engagement Center account members diagnosed with MDD or BPD, ages 18-65, which have had at least two admissions within a twelve month time period.



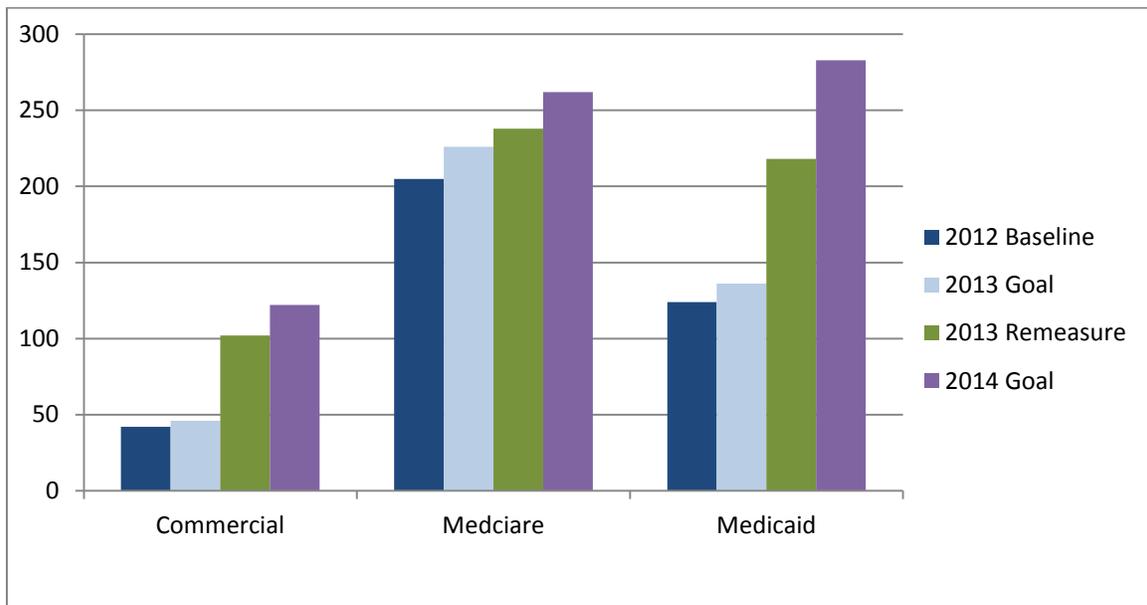
Members with Major Depressive Disorder (MDD) and Bipolar Disorder sometimes have a great deal of difficulty coping with their disorders. This makes it challenging to sustain themselves in their normal environment. Additionally, members with major depressive disorders tend to be readmitted within 30 days of an acute inpatient discharge.

Several interventions were implemented to address this concern.

- Members are referred to our Intensive case management (ICM) program
- Educational materials designed to improve awareness of depression, importance of medication compliance and continuation with mental health treatment after discharge were added to the ValueOptions external website [www.ValueOptions.com](http://www.ValueOptions.com)
- Providers were educated on engaging and treating difficult patients
- Geo-access monitoring was used to identify any network gaps, and assure adequate psychiatric resources via recruitment if gaps are identified.

## Follow Up Care Services

Average number of days between the dates of discharge from inpatient psychiatric hospitalization to the first day of readmission to an inpatient psychiatric hospital for the targeted population.



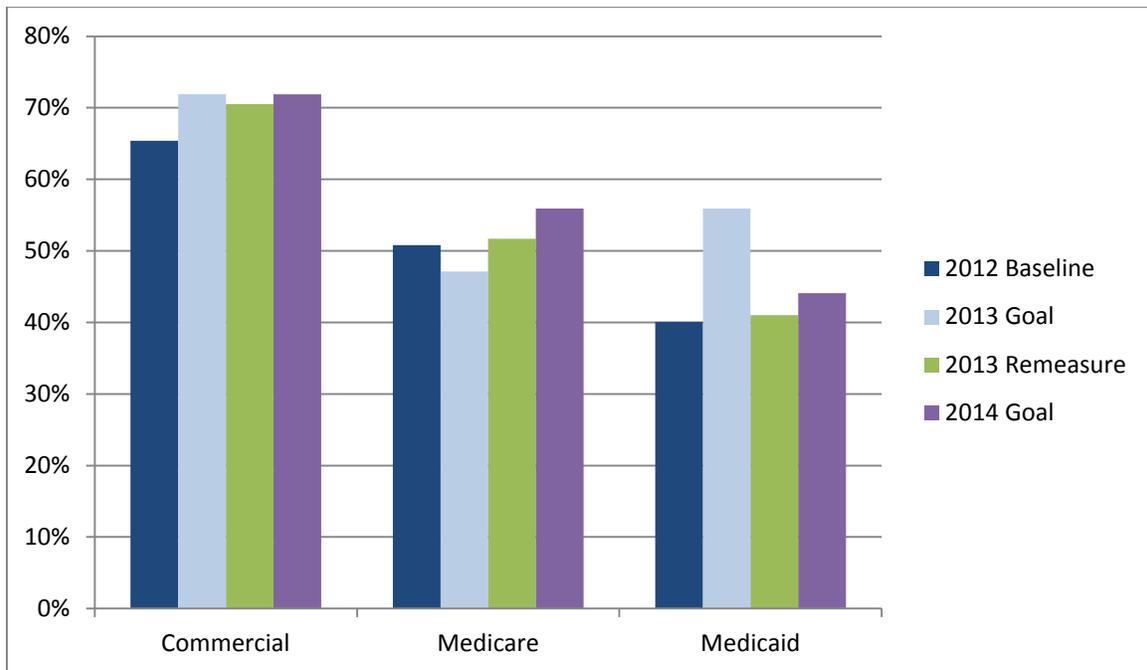
Follow-up care serves the critical function of promoting progress towards treatment goals, such as successful transition to the home or work environment and medication compliance. It is an essential component to insuring continuity of care and reducing the incidence of inpatient readmissions.

The following interventions help to increase our members' time in the community:

- Accurate assessment of discharge needs prior to discharge; and development of services to meet those needs
- Member participation in identifying appropriate services
- Member buy in and consent to discharge plan
- Immediate access to planned follow-up services
- Comprehensive case management of those members at risk for non-compliance
- Systematic monitoring of aftercare appointments
- Attention to transportation needs

## Increasing the Identification, Initiation and Engagement of Treatment for Members in Need of Alcohol or Other Drug Services

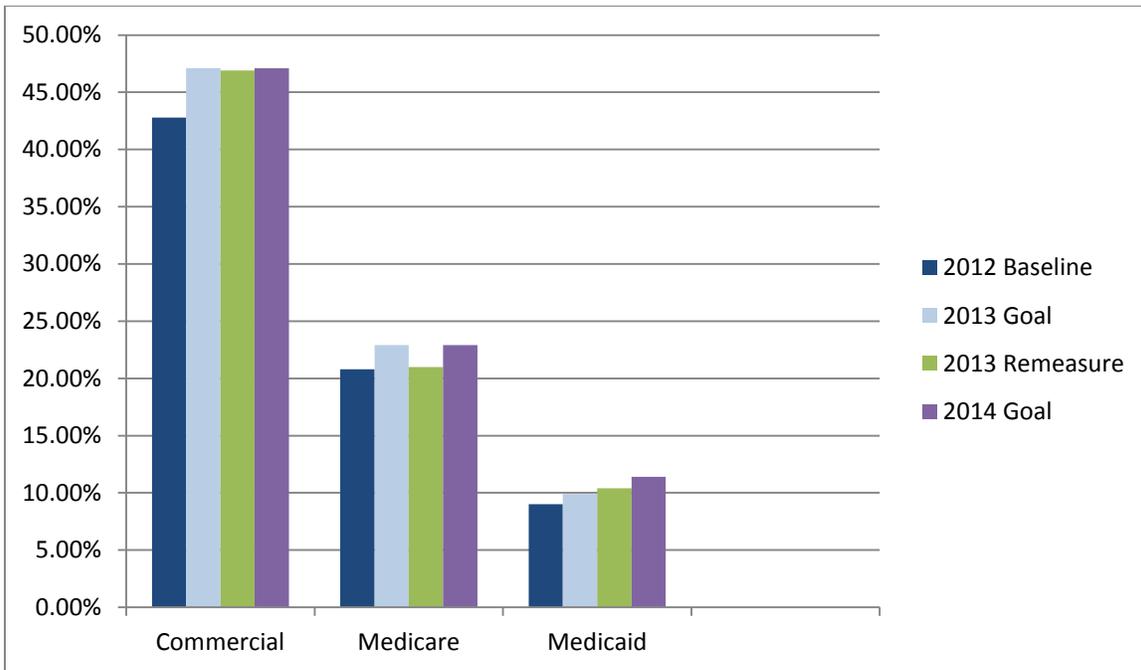
The percentage of New York City Engagement Center members 13 years of age or older who initiate treatment through an inpatient alcohol and other drug treatment (AOD) admission, outpatient visit, intensive outpatient encounter or partial hospitalization within 14 days of the diagnosis.



Addiction is a treatable condition with expectations as positive as those for other chronic diseases such as diabetes, asthma, and hypertension. Alcohol and other drug disorders (AOD) take a tremendous toll on people, their families, employers, health care providers, the economy, and the community at large. This quality improvement activity is designed to identify members with alcohol or other drug disorders, and initiate and engage them in treatment. Also, it is designed to determine if this helps to reduce the incidence of relapse and improves therapeutic outcomes. The following initiatives were implemented and designed to help our members with their recovery.

- Member and provider educational materials were added to the ValueOptions external website [www.Valueoptions.com](http://www.Valueoptions.com)
- Alcohol Self Screening was added to our external website to help members identify possible alcohol dependence
- Members with multiple admissions were referred directly to our Intensive Case Management (ICM program)
- Providers were educated on the importance of scheduling timely aftercare appointments

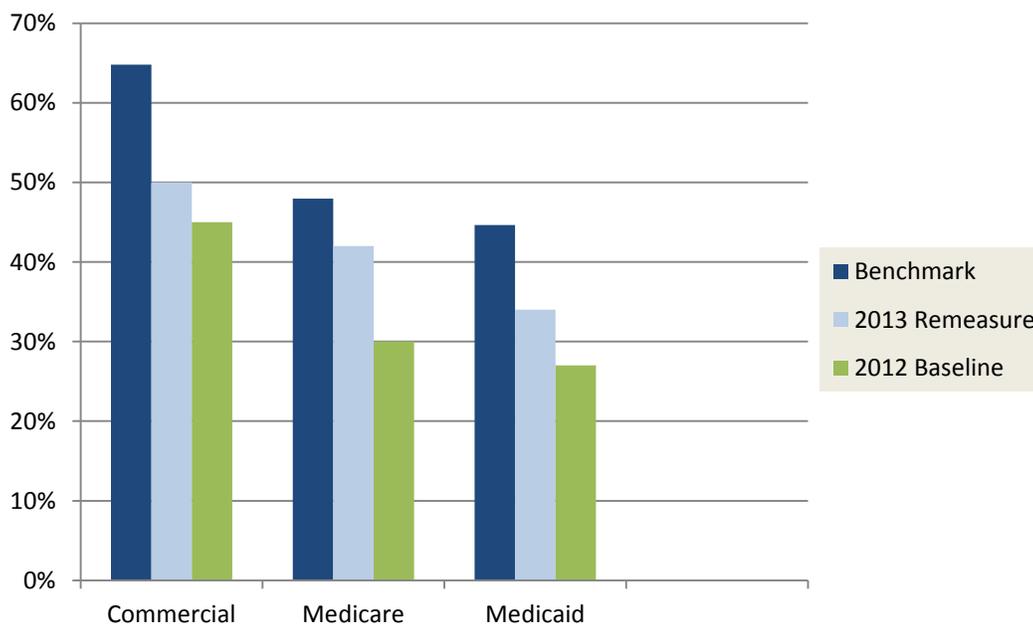
The percentage of New York City Engagement Center members 13 years of age or older who initiated treatment and who had two or more additional services with a diagnosis of alcohol and other drug treatment (AOD) within 30 days of the initiation visit.



The 2013 goal was met for our Commercial and Medicaid plans. We did not meet our goal for Medicare.

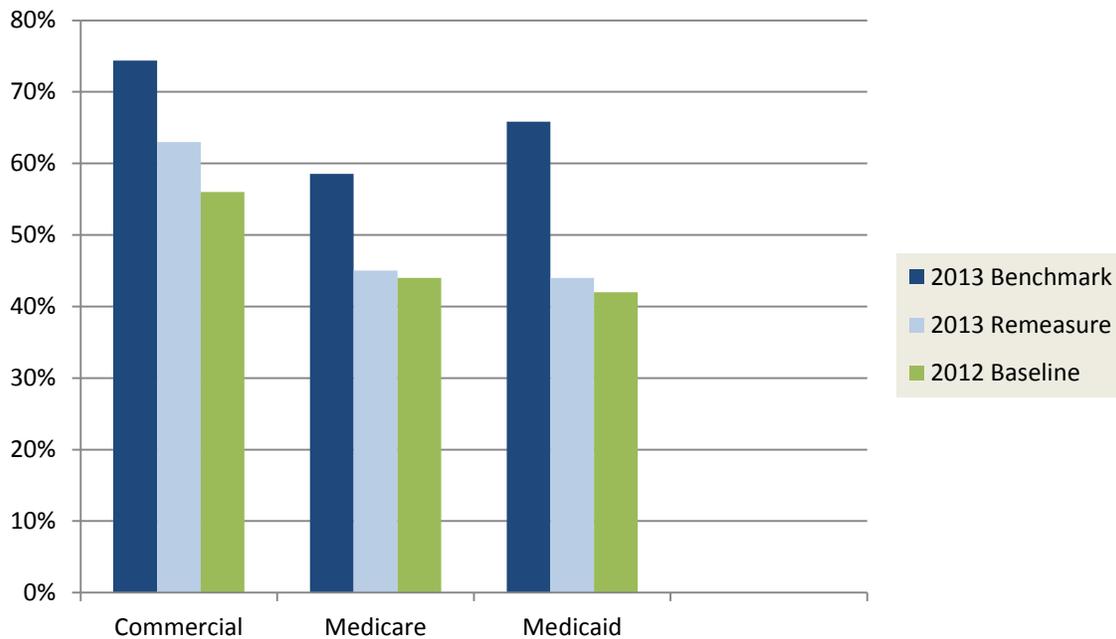
### Improving Ambulatory Follow-Up Care after discharge from Inpatient Psychiatric Hospitalization

Follow-up rate within seven (7) days after discharge with a mental health provider.



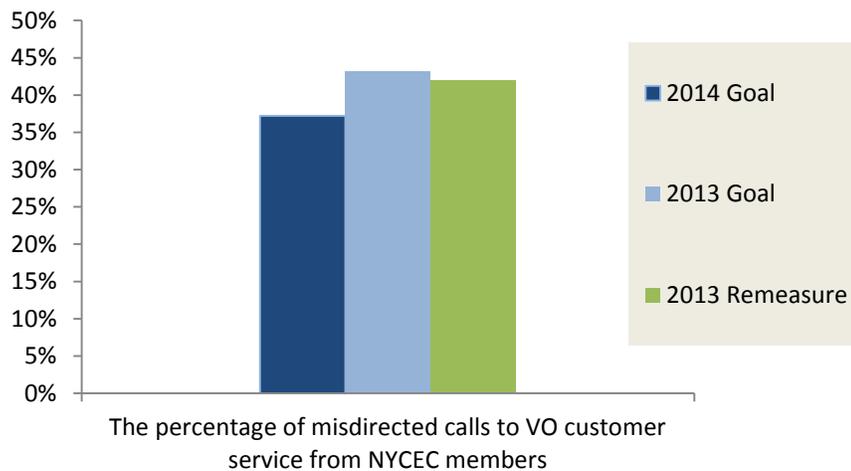
We exceeded our 2012 baseline but did not meet our benchmark.

## Follow-up rate within 30 days after discharge with a mental health provider



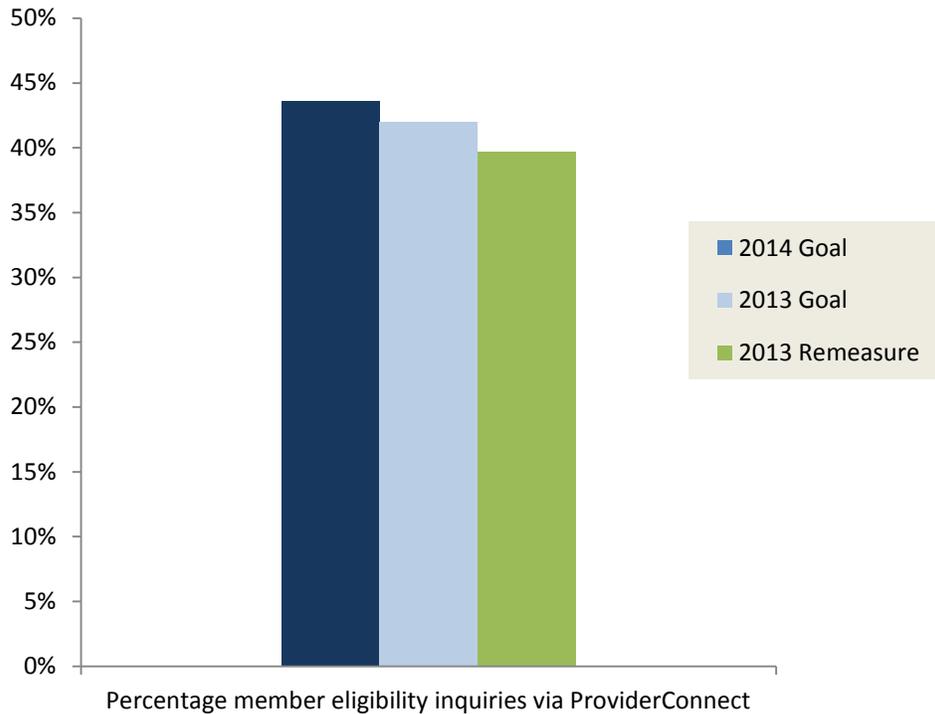
Although we did not meet our follow-up rate goals for 2013, we made progress over the past three years. We are looking to learn from previous years and improve our rates in 2014.

## Reducing the Percentage of Misdirected Calls to Customer Service



We did not meet our goal to reduce the percentage of misdirected calls. This gives us an opportunity to improve our procedures and provide optimum customer service to our members.

## Increasing member benefit eligibility verifications through Provider Connect



We did not meet our 2013 goal to increase member benefit eligibility verifications through provider connect.

### Learn More about Utilization Management Programs

#### How we make authorization decisions:

ValueOptions decision making is based on appropriateness of care and service and existence of coverage. ValueOptions does not reward practitioners, or other individuals, for issuing denials of coverage or service. Decision makers are not given financial incentives that would encourage decisions that result in less care than needed.

ValueOptions strives to help people live their lives to the fullest potential. We see ourselves as an integral part of the communities in which we provide service, and we understand that many factors impact the state of a person's health. To best serve a given population, we seek to learn from, and work with, individuals in their communities in order to ensure relevant design of appropriate programs and services. As managers of the behavioral health benefits of millions of people, we are acutely aware of our responsibility to afford every opportunity for each individual to achieve optimal outcomes.

## Learn More about Utilization Management Programs Continued.

ValueOptions is proud of its focus on quality care and best practices. The primary responsibility of the utilization management staff is to guide and oversee the provision of effective services in the least restrictive environment and to promote the wellbeing of the members. We are committed to supporting individuals in becoming responsible participants in their treatment.

### **Criteria:**

ValueOptions utilizes internally developed behavioral health clinical criteria. The criteria are assessed, and if necessary revised, at least annually, by the ValueOptions Corporate Executive Medical Management Committee. Clinical criteria may vary according to individual contractual requirements and benefit coverage. The criteria are available for your review in your provider handbook or on our Web site at:

<http://www.ValueOptions.com/providers/Handbook.htm>.

### **Financial Incentives:**

ValueOptions does not provide rewards or incentives, either financially or otherwise, to any individuals involved in conducting utilization review, for issuing denials of coverage or service, or inappropriately restricting care. Utilization-related decisions are based on the clinical needs of the members, benefit availability and appropriateness of care. Objective, scientifically based criteria and treatment guidelines, in the context of provider or member-supplied clinical information, guide the decision-making process.

### **Wait Time Standard:**

The New York City Engagement Center has established standards for participating practitioners and providers to ensure that ValueOptions members can obtain the care they need within a reasonable time frame.

Emergencies (life-threatening): The member must be offered the opportunity to be seen immediately.

- Non-life-threatening emergencies: The member must be offered an appointment within six hours of request.
- Urgent: The member must be offered an appointment within 48 hours of request.
- Routine: The member must be offered an appointment within 10 business days of request.

It is important that all practitioners adhere to the above standards. If you are not able to meet the standard, you should refer the patient to the New York City Engagement Center Clinical Referral Line where ValueOptions staff can offer more options.

# Members' Rights & Responsibilities

ValueOptions is committed to respecting Member's rights and responsibilities

## Members have a right to:

- Recognize information about the organization, services, practitioners and providers,, and Members' rights and responsibilities;
- Be treated with respect and recognition of their dignity and right to privacy;
- Participate with practitioners in making decisions about their health care;
- A candid discussion of appropriate or medically necessary treatment options for their conditions, regardless of cost or benefit coverage;
- Voice complaints or appeals about the organization or care it provides;
- Make recommendations regarding the organization's Members' rights and responsibility policies.

## Members have a responsibility to:

- Supply information (to the extent possible) that the organization and its practitioners and providers need in order to provide care;
- Follow plans and instructions for care that they have agreed to with their practitioners;
- Understand their health problems and participate in developing mutually agreed-upon treatment goals, to the degree possible.

## How to contact us...

### **EmblemHealth CompreHealth**

**HMO/EPO:** 1-877-347-2552

**EmblemHealth EPO/PPO:** 1-866-208-1424

**GHI PPO NYC residents:** 1-800-692-2489

**GHI PPO non-NYC residents:** 1-866-208-1424

**GHI HMO:** 1-888-447-2526

**HIP:** 1-888-447-2526

**Medicaid/Family Health Plus** 1-888-447-2526

**TTY/TTD #**1-866-835-2755

[www.ValueOptions.com](http://www.ValueOptions.com)

[www.achievesolutions.net/achievesolutions](http://www.achievesolutions.net/achievesolutions)