Guidance for CCO Behavioral Health Report

Contents

Purpose

This document provides instructions and definitions to Coordinated Care Organizations (CCOs) for completing the annual Behavioral Health Report (BHR) described in Exhibit M, Section 20 a. of the 2020 CCO contract. As stated in the preamble to Exhibit M, CCOs will administer behavioral health services designed to empower members to live, work, and thrive in their communities. The purpose of the first BHR is to understand access to behavioral health services throughout the state. It will be a starting point for a conversation to develop a standard process for measuring timely access to care and help inform network adequacy standards. The guidance document and template were developed to (1) explain the rationale for the measures selected; (2) detail the specifications for the measures OHA will calculate with CCO data already collected by OHA; (3) detail the specifications for the measures CCOs will report directly to OHA ; and (4) support CCOs in reporting on the measures.

OHA will use the BHRs to compare and contrast across CCOs and to monitor performance and contract compliance. This report will also be used to identify areas for improvement, identify and communicate best practices, acknowledge successes, and identify technical assistance needs. BHRs are subject to public posting and redaction as provided in Exhibit D, Section 14 of the CCO contract.

Timeline & Submission Process

CCOs will submit data for January 1, 2020-September 30, 2020, for the three CCO reported measures, numbers 4-6, in Table 1. **The deadline for submission has been extended from October 30, 2020, to November 2, 2020.** OHA will combine the CCO reported measures with the OHA measures also described in Table 1 to create a BHR for each CCO.

OHA will be communicating with CCOs to schedule one meeting with all CCOs to begin the conversation to develop a standard process for measuring timely access to care.

CCO Deliverable Submissions: Please submit the completed files to CCO.MCODeliverableReports@dhsoha.state.or.us. When submitting materials, please ensure that only materials pertinent to the focus area are submitted. All file names must clearly reflect the content (e.g., CCOxyz_Wraparound). The submitted spreadsheets must include the name and contact information (name, title, phone number, email) of the CCO Behavioral Health Director.

Instructions

Templates for the three CCO reported measures indicated in Table 1 are posted in the "Annual Behavioral Health Report" section of the OHA CCO Contract Forms website: www.oregon.gov/oha/HSD/OHP/Pages/CCO-Contract-Forms.aspx. For Measure 6 - Wraparound enrollment, the standard language codes and OHA Office of Equity and Inclusion REAL-D compliant race and ethnicity codes are also on this website. The data dictionaries for the two measures are in Appendices A, B and C of this guidance document.

Original: 10/2/2020
Last updated: 10/16/2020

Table 1: Behavioral Health Report Measures

Measure	Reported by	Source	Notes	Rationale
1. Network adequacy	OHA	Delivery System Network Provider Capacity Report – Health Systems Division (HSD), Quality Assurance Unit	# of providers adult/youth - Facility type - Provider type	OHA needs to understand what resources are available/needed to provide sufficient services
2. Provider capacity assessment methodology	OHA	Delivery System Network Provider Capacity Report – HSD, Quality Assurance Unit	Delivery System Network Provider Capacity Report narrative, first due 9/1/2020 and 30 days after each calendar quarter thereafter	OHA needs to understand provider capacity.
3. Cost and utilization of defined BH service codes (measured against prevalence)	OHA	Health Policy and Analytics Division (HPA), Health Analytics	Data (exclude Rx) at client level by: - Disorders on prioritized list - Age group - Gender - Cost PMPM - Provider types # of services per 1,000 MM	This information is needed to improve health equity and access to services. It also will aid in analyzing and controlling costs, as well as help determine how resources are assigned.
4. Percent of Prior Authorizations that are approved within 2 working days. Pertaining to the following services: *Youth:* - Substance use disorder residential *Adult:* - Substance use disorder residential - Detox residential	CCOs	CCOs	Numerator: # of PAs with determination made within 2 working days by service Denominator: # of PAs received by service For PA requests for new and continuing services received by the CCO from January 1, 2020-September 30, 2020	This will assist system partners in assessing the timeliness of processing PAs and initiation of treatment. It will also inform of system gaps and weaknesses.

Measure	Reported by	Source	Notes	Rationale
5. Percent of Prior Authorizations that are approved within 3 calendar days for youth mental health residential	CCOs	CCOs	Numerator: # of PAs for youth mental health residential with determination made within 3 calendar days by service Denominator: # of PAs received for youth mental health residential For PA requests for new and continuing services received by the CCO from January 1, 2020-September 30, 2020	This will assist system partners in assessing the timeliness of processing PAs and initiation of treatment. It will also inform of system gaps and weaknesses.
6. Wraparound enrollment	CCOs	CCOs	Numerator: # enrolled in wraparound from among those determined to meet criteria from January 1, 2020-September 30, 2020 Denominator: # met criteria for wraparound as determined from January 1, 2020-September 30, 2020 Race: #s by race Ethnicity: #s by ethnicity Language: #s by language	This will assist system partners in assessing the wraparound enrollment. It will also help identify underserved populations and help inform efforts to increase access to treatment.

CCO Reporting Measures for Adults with Serious and Persistent Mental Illness (SPMI)

This set of measures is specific to adults with SPMI.

Measure	Reported by	Source	Notes	Rationale
For members at Oregon State Hospital (OSH)				
1. Number and percentage of CCO members who, once determined Ready To Transition (RTT) by OSH, receive care coordination from CCO (for ACT)	OHA	Oregon Center for Excellence for ACT (OCEACT)	Numerator: CCO members who receive care coordination Denominator: CCO members discharged from OSH	This will help assess how efficiently CCOs are engaging members for ACT services and coordinating with OSH and Choice.

Measure	Reported by	Source	Notes	Rationale
For members being discharged from OSH who meet criteria for Assertive Community Treatment (ACT)				
1. Number and percentage of CCO members referred to ACT and meeting criteria for ACT	OHA	OSH/Avatar	Numerator: CCO members discharged from OSH who meet criteria for ACT Denominator: CCO members discharged from OSH referred to ACT	This measure is a component of the Oregon Performance Plan (OPP) to increase the number of individuals with SPMI in ACT. It will also help assess service delivery system processes and help target areas for improvement.
2. Number and percentage of CCO members accepted into ACT	OHA	OCEACT	Numerator: CCO members discharged from OSH accepted to ACT Denominator: CCO members discharged from OSH referred to ACT	This measure is a component of the OPP to increase the number of individuals with SPMI in ACT. It will also help assess service delivery system processes and help target areas for improvement.
3. Number and percentage of CCO members admitted into ACT	OHA	OCEACT	Numerator: CCO members discharged from OSH admitted to ACT Denominator: CCO members discharged from OSH accepted to ACT	This measure is a component of the OPP to increase the number of individuals with SPMI in ACT. It will also help assess service delivery system processes and help target areas for improvement.
4. Number and percentage of denials to ACT	OHA	OCEACT	Numerator: CCO members discharged from OSH denied admittance to ACT Denominator: CCO members discharged from OSH accepted to ACT	This measure is a component of the OPP to increase the number of individuals with SPMI in ACT. It will also help assess service delivery system processes and help target areas for improvement.
5. Number and percentage of program denials reviewed for appropriateness by CCO	OHA	OCEACT	Numerator: CCO members discharged from OSH denials reviewed for appropriateness Denominator: CCO members discharged from OSH denied admittance to ACT	This measure is a component of the OPP to increase the number of individuals with SPMI in ACT. It will also help assess service delivery system processes and help target areas for improvement.
6. Number and percentage of Notice of Action for Adverse Benefit Determination (NOABD) issued	OHA	OCEACT	Numerator: CCO members discharged from OSH issued a NOABD Denominator: CCO members discharged from OSH denied admittance to ACT	This measure is a component of the OPP to increase the number of individuals with SPMI in ACT. It will also help assess service delivery system processes and help target areas for improvement.

Original: 10/2/2020
Last updated: 10/16/2020

Measure	Reported by	Source	Notes	Rationale
For members discharged from OSH				
1. Number and percentage discharged to Secure Residential Treatment Facilities (SRTF)	OHA	HSD/OSH/IQA	Numerator: CCO members discharged from OSH to Secure Residential Treatment Facilities Denominator: CCO members discharged from OSH	This metric is a component of the OPP and is intended to help lower the length of stay and utilization of SRTFs.
2. Number and percentage of members admitted to Acute Care Psychiatric Hospital (ACPH) within thirty (30) days and one hundred and eighty (180) days of discharge.	OHA	USDOJ Report – HPA, Health Analytics	Numerator: CCO members discharged from OSH and admitted to ACPH within 30 days Denominator: CCO members discharged from OSH Numerator: CCO members discharged from OSH and admitted to ACPH within 180 days Denominator: CCO members discharged from OSH	Admissions to ACPHs for adults with SPMI after an OSH discharge can be an indicator of inadequate care in community settings. It could mean barriers to access, lack of services, inadequate case management, or inadequate engagement on the part of community providers. Improving community services is a good way to lower these hospitalizations.
For members living in the community				
1. Number and percentage of members receiving ACT	OHA	HPA, Health Analytics	Numerator: CCO members receiving ACT Denominator: Adult CCO members with SPMI	These are metrics OHA collects pursuant to the OPP to determine the availability and utilization of community-based services.
2. Number and percentage of members receiving Supported Employment	OHA	HPA, Health Analytics	Numerator: CCO members receiving Supported Employment Denominator: Adult CCO members with SPMI	These are metrics OHA collects pursuant to the OPP to determine the availability and utilization of community-based services.
3. Number and percentage of members receiving Peer Delivered Services	OHA	HPA, Health Analytics	Numerator: CCO members receiving Peer Delivered Services Denominator: Adult CCO members with SPMI	These are metrics OHA collects pursuant to the OPP to determine the availability and utilization of community-based services.

Original: 10/2/2020
Last updated: 10/16/2020

Measure	Reported by	Source	Notes	Rationale
4. Number and percentage of members receiving Secure Residential Treatment Services	OHA	HPA, Health Analytics	Numerator: CCO members receiving Secure Residential Treatment Services Denominator: Adult CCO members with SPMI	These are metrics OHA collects pursuant to the OPP to determine the availability and utilization of community-based services.
5. Number and percentage of members receiving Residential Treatment Services (non-Secure)	OHA	HPA, Health Analytics	Numerator: CCO members receiving Residential Treatment Services (non-Secure) Denominator: Adult CCO members with SPMI	This metric can help assess if a disproportionate number of a particular CCO's members are utilizing residential care, perhaps indicating gaps in services and processes that can improve access to community-based treatment.
For members living in the community re: Acute Care Psychiatric Hospitals				
1. Number and percentage of members admitted to ACPHs for MH diagnosis	OHA	HPA, Health Analytics	Numerator: CCO members admitted to ACPHs for MH diagnosis Denominator: Adult CCO members with SPMI	This metric is associated with the OPP and can inform system partners about patterns of ACPH utilization among different CCOs and can inform regarding gaps in outpatient services.
2. Number and percentage of members discharged from ACPHs with documentation of linkages to appropriate behavioral and primary health care prior to discharge	OHA	Comagine	Numerator: CCO members discharged from ACPHs with documentation of linkages to appropriate behavioral and primary health care prior to discharge Denominator: CCO members discharged from ACPHs	This metric is associated with the OPP and can inform system partners about how well CCOs and community partners coordinate continuing care after discharge from an ACPH.
3. Number and percentage of members discharged with documentation of Warm Handoffs	OHA	Comagine	Numerator: CCO members discharged from ACPHs with documentation of Warm Handoffs Denominator: CCO members discharged from ACPHs	This metric is associated with the OPP and can inform system partners about how well CCOs and community partners coordinate continuing care after discharge from an ACPH.
4. Number and percentage of members who received a follow-up visit within seven (7) days	OHA	HPA, Health Analytics	Numerator: CCO members discharged from ACPHs who received a follow-up visit within 7 days Denominator: CCO members discharged from ACPHs	This metric is a long standing HEDIS measure to assess how comprehensively post discharge engagement occurs across CCOs.

Measure	Reported by	Source	Notes	Rationale
5. Number and percentage of members who are homeless, that are connected to a housing provider with an appropriate documented housing assessment	OHA	Comagine	Numerator: CCO members discharged from ACPHs who are homeless, that are connected to a housing provider with an appropriate documented housing assessment Denominator: CCO members discharged from ACPHs	This is another OPP metric, and gauges how effectively the CCOs and other system partners address SDH, especially housing. Gaps in services can be identified and mitigation strategies identified.
6. Number and percentage of members who are readmitted within thirty (30) and one hundred and eighty (180) days	OHA	USDOJ Report – HPA, Health Analytics	Numerator: CCO members discharged from ACPHs who are readmitted in 30 days Denominator: CCO members discharged from ACPHs Numerator: CCO members discharged from ACPHs who are readmitted in 180 days Denominator: CCO members discharged from ACPHs	An OPP metric, Readmissions to ACPHs for adults with SPMI can be an indicator of inadequate care in community settings. It could mean barriers to access, lack of services, inadequate case management, or inadequate engagement on the part of community providers. Improving community services is a good way to lower readmission rates to ACPHs.
For members living in the community re: Emergency Departments (EDs)				
1. Number and percentage of members admitted to the ED for a MH diagnosis	OHA	HPA, Health Analytics	Numerator: CCO members admitted to the ED for a MH diagnosis Denominator: Adult CCO members with SPMI	When an adult with SPMI visits the ED, this is sometimes an indication that the individual was not receiving or not benefiting from community services and supports. Community services and supports may prevent crises or allow for earlier intervention and potential avoidance or mitigation of a crisis. A decreased rate of emergency department visits can be an indicator that individuals are having their mental health treatment needs met in the community.

Measure	Reported by	Source	Notes	Rationale
2. Number and percentage of #1 who have follow-up visit within seven (7) days	OHA	HPA, Health Analytics	Numerator: CCO members admitted to the ED for a MH diagnosis who have a follow-up visit within 7 days Denominator: CCO members admitted to the ED for a MH diagnosis	This metric is similar to the HEDIS measure for follow up after discharge from an ACPH but is limited to those who visited the ED and were not admitted. This measure can assess how comprehensively post discharge engagement occurs across CCOs.

Data Dictionary: Prior Authorization for Adult/Youth SUD Residential Measure

Data Field	Description	Format
CCOName	Name of the Coordinated Care Organization	Alpha
PlanID	ID of the Coordinated Care Organization for CCOA plan type	Number
RptEndDte	Date of the reporting period	Date
ServiceCode	The CPT Service code	AlphaNumeric
PriorAuth LT 2 Wkg Days	Numerator: number of Prior Authorizations processed within 2 working days of receipt for this service code	Number
PriorAuth Total	Denominator: total number of PAs received for this service code	Number
Percentage	Percentage of PAs processed within 2 working days of receipt for this service code	Percentage

Original: 10/2/2020
Last updated: 10/16/2020

Data Dictionary: Prior Authorization for Youth MH Residential Measure

Data Field	Description	Format
CCOName	Name of the Coordinated Care Organization	Alpha
PlanID	ID of the Coordinated Care Organization for CCOA plan type	Number
RptEndDte	Date of the reporting period	Date
ServiceCode	The CPT Service code	AlphaNumeric
PriorAuth LT 3 Days	Numerator: number of Prior Authorizations processed within 3 calendar days of receipt for this service code	Number
PriorAuth Total	Denominator: total number of PAs received for this service code	Number
Percentage	Percentage of PAs processed within 3 calendar days of receipt for this service code	Percentage

Original: 10/2/2020
Last updated: 10/16/2020

Data Dictionary: Wraparound Measure

Data Field	Description	Format
CCOName	Name of the Coordinated Care Organization	Alpha
PlanID	ID of the Coordinated Care Organization for CCOA plan type	Number
RptEndDte	Date of the reporting period	Date
Race Code	REAL-D compliant Reconciled Race Codes and Descriptions	Alpha
Ethnicity Code	REAL-D compliant Reconciled Race Codes and Descriptions	Alpha
Language Code	Standard codes	Alpha
Cumulative Enrolled	Numerator: number of children and youth enrolled in wraparound	Number
Cumulative Eligible	Denominator: total number of children and youth eligible for wraparound	Number
Percentage	Percentage of children and youth enrolled in wraparound	Percentage