

Executive Summary

PerformCare's QI/UM Program systematically monitors and evaluates the quality and safety of clinical care and the quality of service provided by PerformCare and network providers. Quality of care is defined as the degree to which health care services are consistent with current professional knowledge and industry best practices. This approach looks both **outward** to the provider network and **inward** to the provision of services by PerformCare to Members and providers.

The 2023 Program Evaluation provides the accomplishments and project details based on PerformCare's 10 Strategic Clinical Quality Improvement Initiatives.

The COVID-19 pandemic continued to impact calendar year 2023, specifically regarding staff shortages among our provider networks. Quality efforts continued to occur throughout 2023 via TRRs, with chart reviews being conducted through virtual desktop reviews; however, we did significantly expand to on-site meetings throughout the calendar year. Meetings continued to occur as scheduled using Zoom technology, with the choice to meet in person depending on the attendee's comfort level. Zoom will remain an option indefinitely.

Overall, every PerformCare function and responsibility to its Members and Providers was sustained with little interruption throughout 2023.

This Executive Summary provides just a few highlights from calendar year 2023:

Competency

- Complied with any/all changes to the PS&R and provided feedback to the draft 2024 PS&R
- Participated in all QPQM and PIP meetings and submitted required reports timely
- Planning and implementation for the PIP extension into 2024
- Secured the new 2024 NCQA Accreditation Standards for both accreditations
- Implemented and fully operationalized the contract with Inovalon (certified HEDIS® vendor)
- Implemented the AmeriHealth Caritas HEDIS team into PerformCare operations
- Successfully completed all required ASAM Alignment audits for 2023

- Contracted and coordinated with a vendor (Accreditation Guru) to conduct ASAM Alignment infrastructure and chart reviews effective December 2023 and moving forward
- Provided ASAM technical assistance to SU providers upon request
- Uploaded all Triennial Review documents per due date December 22, 2023
- Conducted trauma-informed care staff training

Performance

- A revised value-based purchasing incentive measure called “Transitions to Community,” addressing Follow-Up After Hospitalization and MH Inpatient readmission shared savings, was approved by OMHSAS.
- Continued an outreach project focused on reducing emergency department utilization that incorporated TCM, ACT, and FQHC providers in diversion efforts
- Held quarterly Integrated Quality meetings with two PH-MCO plans focused on improving joint outcomes measures
- Submitted the 2021–2023 PEDTAR Performance Improvement Project Baseline Recalculation and Quarterly Updates
- Follow-Up Specialist successfully engaged Members recently discharged from MH IP and SU IP
- CABHC Individual IBHS and Individual ABA providers were trained to complete the CANS as part of the initial IBHS Assessment and the six-month ITP update, in addition to the evaluators’ CANS assessments, for additional data comparisons during treatment
- 47 TRRs were conducted in alignment with the 2023 credentialing cycle
- Completed the 2022/23 review and revision of all Policies and Procedures
- Inter-rater reliability: Demonstrated a 98.36% average consistency in MNC decision-making across all reviewers in 2023
- Ambassador Program members successfully participated in numerous virtual and in-person community events
- PerformCare completed annual Member and provider satisfaction surveys
- The Tobacco Cessation Initiative was updated, submitted, and implemented for 2023
- Telephone service access was 81.88%, which did not meet the performance goal of greater than 97%
- MSS achieved the targeted goal of 90% for compliance with documentation audits
- Continued discussions to expand Project RED

Safety

- Conducted 201 QOCC reviews and 481 follow-up actions with providers throughout 2023
- C&G resolved 50 Level I and one-6-Criteria complaints throughout 2023
- Conducted interdepartmental quarterly review of QOCC and CIR data to determine trends among individual providers and high-risk Members to provide additional monitoring
- Expanded reporting and monitoring of restraints and seclusions

All stakeholders, including Members, providers, counties, the Pennsylvania DHS, and PerformCare employees, are encouraged to review and utilize the information contained in the

2023 QI/UM Program Annual Evaluation. PerformCare strives for full transparency in sharing its HC MCO activities and results.

All QI documents, including this evaluation and the 2024 QI/UM Program Description, are available upon request to any stakeholder. This Executive Summary is also shared with providers and Members through the PerformCare website annually.

A handwritten signature in black ink, reading "Joseph Buttacci".

Joseph Buttacci, MA, LPC, CAADC
Director of Quality Improvement

PerformCARE®