## QM Program Workplan (Appendix)

**Section 1: Tracking and Reporting** 

QI activities and Objectives for Improving	Performance Area	Owner/Lead	Start Date	Completion date	
Quality of Service	Practitioner and Service Availability *	Senior Director Provider Network Operations	7/1/2020	6/30/2021	Performance Monitoring In Progress
Quality of Service	Access to Appointments*	Member Services Senior Director	7/1/2020	6/30/2021	Performance Monitoring In Progress
Member's Experience	Member Experience	Performance Reporting Supervisor	7/1/2020	6/30/2021	Performance Monitoring In Progress
Member's Experience	Member Experience with UM Process	Senior Director of Care Management Strategy	7/1/2020	6/30/2021	Performance Monitoring In Progress
Quality of Clinical Care	Effectiveness of Complex Care Management*	Director of Population Health Outcomes	7/1/2020	6/30/2021	Performance Monitoring In Progress
Quality of Clinical Care	Adherence to Clinical Practice Guidelines	Senior Director of Care Management Strategy	7/1/2020	6/30/2021	Performance Monitoring In Progress
Quality of Clinical Care	Coordination of Care Across Behavioral Health Service Continuum	Director of Population Health Outcomes	7/1/2020	6/30/2021	Performance Monitoring In Progress
Quality of Service	Cultural competency and access to care for underserved groups	Senior Director Provider Network Operations	7/1/2020	6/30/2021	Performance Monitoring In Progress
Quality of Clinical Care	Initiation and engagement with MHSU Treatment*	Senior Director of Care Management Strategy	7/1/2020	6/30/2021	Performance Monitoring In Progress
Quality of Service	Integrated care and access to primary care (continuity of care, per DMA/DMH)	Senior Director of Care Management Strategy	7/1/2020	6/30/2021	Performance Monitoring In Progress
Quality of Clinical Care	Use of state facilities and local hospitals*	Senior Director Provider Network Operations	7/1/2020	6/30/2021	Performance Monitoring In Progress
Quality of Clinical Care	Use of emergency and crisis services and hospital ED's*	Senior Director Provider Network Operations	7/1/2020	6/30/2021	Performance Monitoring In Progress
Quality of Clinical Care	Service patterns and costs for high cost / high risk individuals	Senior Director Provider Network Operations	7/1/2020	6/30/2021	Performance Monitoring In Progress
Quality of Clinical Care	Use of evidence-based practices	Senior Director of Care Management Strategy	7/1/2020	6/30/2021	Performance Monitoring In Progress
Quality of Clinical Care	Member outcomes	Site Review Specialist	7/1/2020	6/30/2021	Performance Monitoring In Progress
Member's Experience	Grievance response and resolution	Resolution Team Clinician	7/1/2020	6/30/2021	Performance Monitoring In Progress
Member's Experience	Trends and patterns in grievances	Resolution Team Clinician	7/1/2020	6/30/2021	Performance Monitoring In Progress
Safety of Clinical Care	Trends and patterns in incidents*	Incident Report Team Supervisor	7/1/2020	6/30/2021	Performance Monitoring In Progress
Safety of Clinical Care	Incident response and reporting*	Incident Report Team Supervisor	7/1/2020	6/30/2021	Performance Monitoring In Progress
Member's Experience	Trends in denials and appeals	Senior Director of Care Management Strategy	7/1/2020	6/30/2021	Performance Monitoring In Progress
Quality of Service	Provider compliance with State Rules	Contract Performance Director	7/1/2020	6/30/2021	Performance Monitoring In Progress
Quality of Service	Provider compliance with LME/MCO contractual requirements	Contract Performance Director	7/1/2020	6/30/2021	Performance Monitoring In Progress

Quality of Service	Prevention, detection, and remediation of fraud, waste, and abuse	Special Investigation Director	7/1/2020	6/30/2021	Performance Monitoring In Progress
Quality of Service	Adequacy of LME/MCO supports for providers	Senior Director Provider Network Operations	7/1/2020	6/30/2021	Performance Monitoring In Progress
Member's Experience	Conduct of calls	Member Services Senior Director	7/1/2020	6/30/2021	Performance Monitoring In Progress
Quality of Service	Service authorization processes	Senior Director of Care Management Strategy	7/1/2020	6/30/2021	Performance Monitoring In Progress
Quality of Service	Credentialing and recredentialing of Providers	Provider Operation Director	7/1/2020	6/30/2021	Performance Monitoring In Progress
Quality of Service	Adherence and Consistency in UM Process/Decisions	Senior Director of Care Management Strategy	7/1/2020	6/30/2021	Performance Monitoring In Progress
Quality of Service	QI Program Evaluation	External Review Director & Performance Reporting Supervisor	7/1/2020	6/30/2021	Performance Monitoring In Progress

**Section 2: Quality Improvement** 

Program Goals/Objectives	Quantifiable Measures	Standard	Data source	Start Date	Phase	Expected	Lead/Owner
Improvement Activity Title		(Goal or Benchmark)				End Date	
Increase Rate of Routine Care within 14 days	Outcome/Primary:	75%	Outpatient	3/20/2019	Implementation	12/31/20	Senior Director
of Call for Service	Rate of Routine Calls receiving a service		Claims, Call Log,		(Do)		Member
	within 14 days		Slot scheduler				Services
	Process/Predictive:	50%	Outpatient	3/20/2019	Implementation	12/31/20	Senior Director
	Rate of individuals who receive a		Claims, Call Log,		(Do)		Member
	service within 14 days of being		Slot scheduler				Services
	released from prison						
Increase Follow up Rate after ADATC	Outcome/Primary 1:	Primary 1: 40%	Inpatient and	2/4/2019	Implementation	6/30/20	Senior Director
Discharge	For all non-Medicaid discharges from	Primary 2: 40%	Outpatient		(Do)		Provider
	substance use inpatient services,		Claims, Call				Network
	increase the 1-7-day follow-up rate		Logs, Care				Operations
	Outcome/Primary 2:		Coordination				
	For all non-Medicaid discharges from		Electronic				
	ADACT, increase the 1-7-day follow-up		Health Record				
	rate						
	Process/Predictive 2:	Predictive 1: 50%	Inpatient and	2/4/2019	Implementation	6/30/20	Senior Director
	For those discharged from ADATC and	Predictive 2: 50%	Outpatient		(Do)		Provider
	enrolled in the ADATC VIP program,		Claims, Call				

	increase the follow-up after discharge rate Process/Predictive 2: For those discharged and opted-in for Care Coordination, increase the follow-up after discharge rate		Logs, Care Coordination Electronic Health Record				Network Operations
Increase PN Housing Used By TCLI	Outcome/Primary: # TCLI housed per month	10	TCLI Database, CLIVe Housing Report & Housing Supports TCLI Reports	10/19/2018	Monitoring (Study/Check)	6/30/20	Transition to Community Living Manager
	Process/Predictive: # PN housing units used by TCLI per month	4	TCLI Database, CLIVe Housing Report & Housing Supports TCLI Reports	10/19/2018	Monitoring (Study/Check)	6/30/20	Transition to Community Living Manager
Increase Rate of Innovations Incident Report Timely Filing	Outcome/Primary: Rate of incident reports submitted timely	85%	IRIS	2/4/2019	Monitoring (Study/Check)	5/27/20	Incident Report Team Supervisor
	Process/Predictive: Rate of learned incidents reported and submitted timely on weekends	25%	IRIS	2/4/2019	Monitoring (Study/Check)	5/27/20	Incident Report Team Supervisor
Community-Based Crisis Management	Outcome/Primary: Rate of crisis service utilization		Inpatient and Outpatient Claims		Implementation (Do)	12/31/20	Performance Reporting Supervisor
	Process/Predictive: Rate of community-based crisis alternative service utilization		Inpatient and Outpatient Claims		Implementation (Do)	12/31/20	Performance Reporting Supervisor

## **Section 3: Monitoring Previously Identified Issues:**

Vaya Health ("Vaya") monitors previously identified issues via a two-tiered approach that includes Quality Assessment/Assurance and Quality Improvement. This progressive approach enables Vaya to maintain focus on clearly defined indicators of success, proactively detect measurable gaps or deficiencies in quality and safety and respond to gaps in a timely manner with customized improvement efforts:

**Quality Assessment/Assurance** is a structured program for monitoring and evaluating and assessing potential and existing problems to ensure that quality standards are being met. The process begins with the review and analysis of member-outcome and safety measures that reflect system performance. Measure owners and the QIC evaluate performance against established standards, goals or benchmarks and make decisions regarding potential improvement activities intended to address identified gaps.

**Quality Improvement** provides a methodology to systematically address issues that adversely impact quality. Quality Improvement is guided by a well-defined, cross-functional process to define problems in quantifiable terms and to design Quality Improvement Activities that address root causes. Continuous quality improvement ensures that activities are evaluated over time and that incremental improvements are made that further improve performance and both internal and external customer satisfaction.