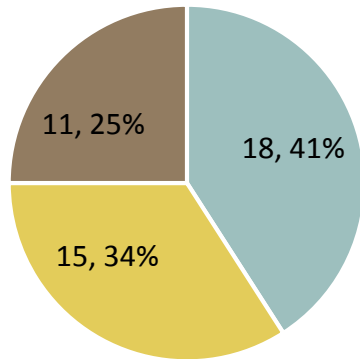


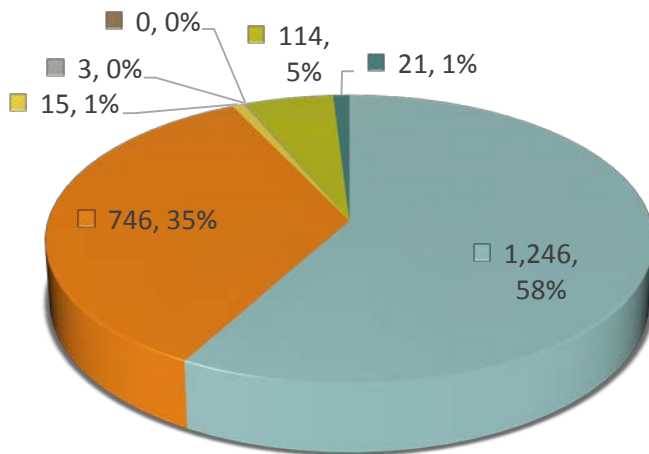
## CSoC Quality Report Status

(December 2016 through November 2017)



Accepted Not Accepted Under Review

## CSoC Enrollment Stratified by Race

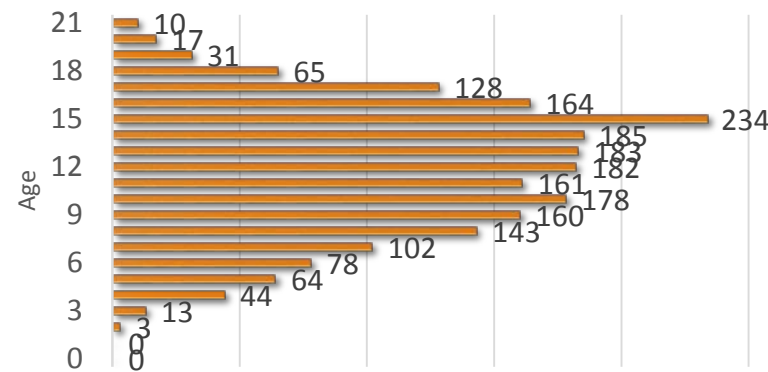


Black/African American  
White  
American Indian/Alaskan Native  
Asian  
Native Hawaiian/Other Pacific Islander  
Unknown  
Multi-Racial

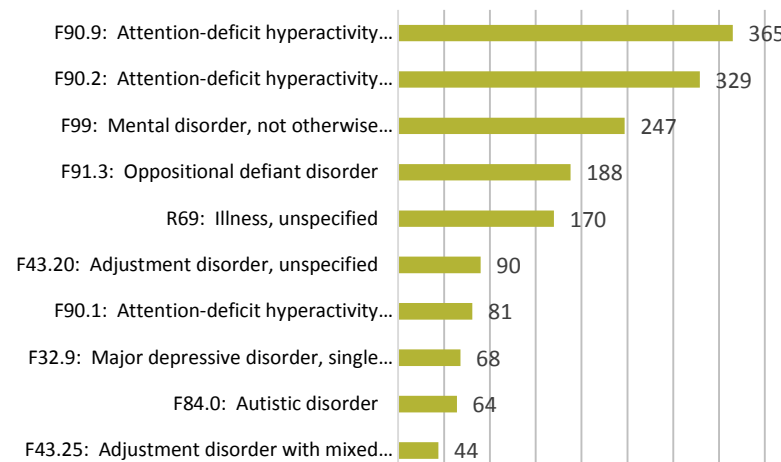
## CSoC Enrollment Report (for the week ending 05/12/17)

Total Referrals Received as of 3/1/12	Current Enrollment as of 05/12/17	Total Enrollment (Current & Discharged) since 3/1/12	Percent of Engagement since 3/1/12	Total Declined since 3/1/12	Total Discharged since 3/1/12
13,124	2,248	9,978	76%	3,012	7,730

## CSoC Enrollment Stratified by Age



## Top 10 Diagnosis



## Increase in the Attendance of Behavioral Health Providers at the Child and Family Team (CFT) Meetings

**RATIONALE:** Research indicates that consistent involvement by team members is essential in supporting the goals of the CSoC. In addition, provider participation in the CFT meetings can enhance development of interventions/strategies to assist members in meeting their goals.

**GOAL:** 50% participation in CFT meetings by behavioral health providers

**MARCH 2017 RESULTS:** 59.8% of providers participated in the CFT meeting

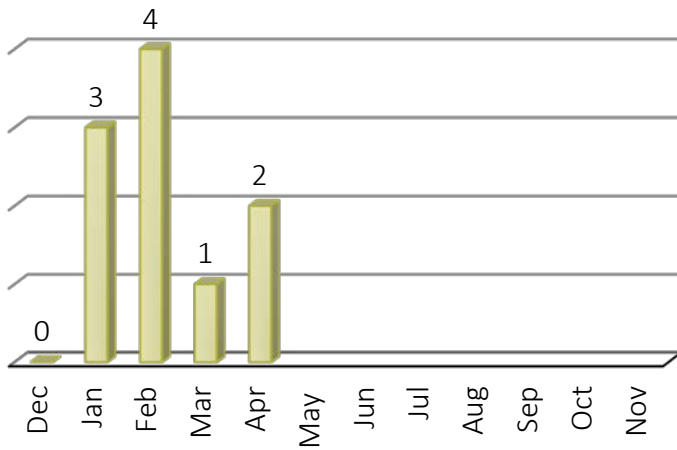
43.4% of BH providers actively participated in person during the CFT meeting

3.8% of BH providers actively participated by phone during the CFT meeting

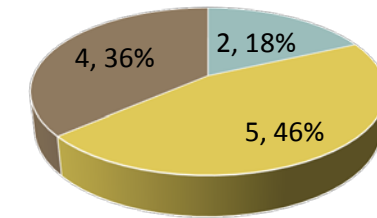
12.6% of BH providers participated in the CFT meeting by other means (e.g., submitted summary report, provided verbal report prior to meeting)

# Member Grievances & Appeals

### Member Grievances Filed

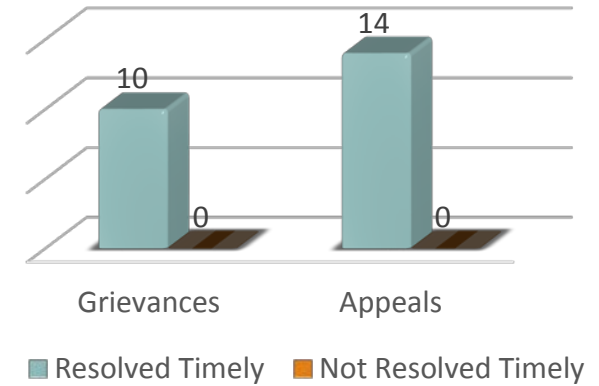


### Types of Grievances Filed YTD

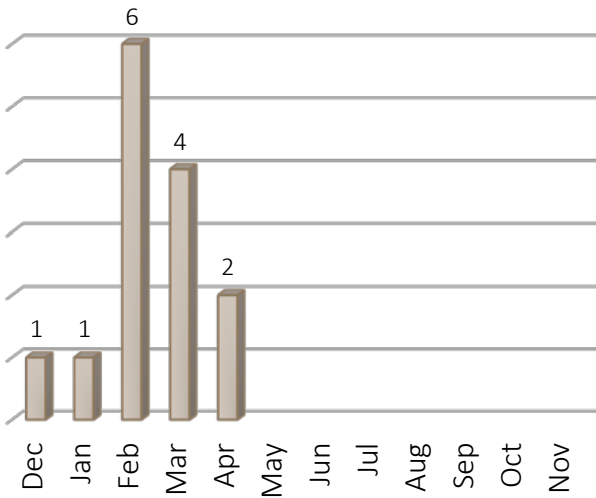


- Access to Care
- Interpersonal Aspects of Care
- Quality of Care

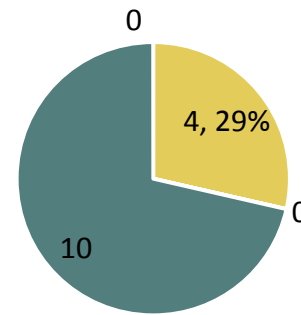
### Resolution Timeframes YTD



### Member Appeals Filed

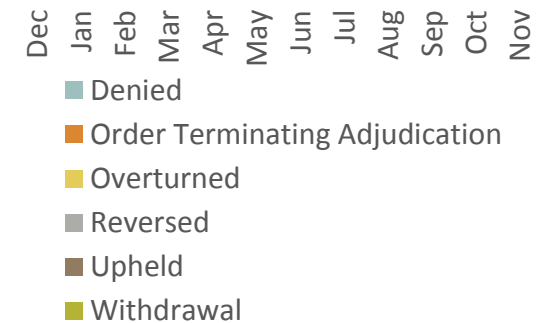


### Types of Appeals Filed YTD

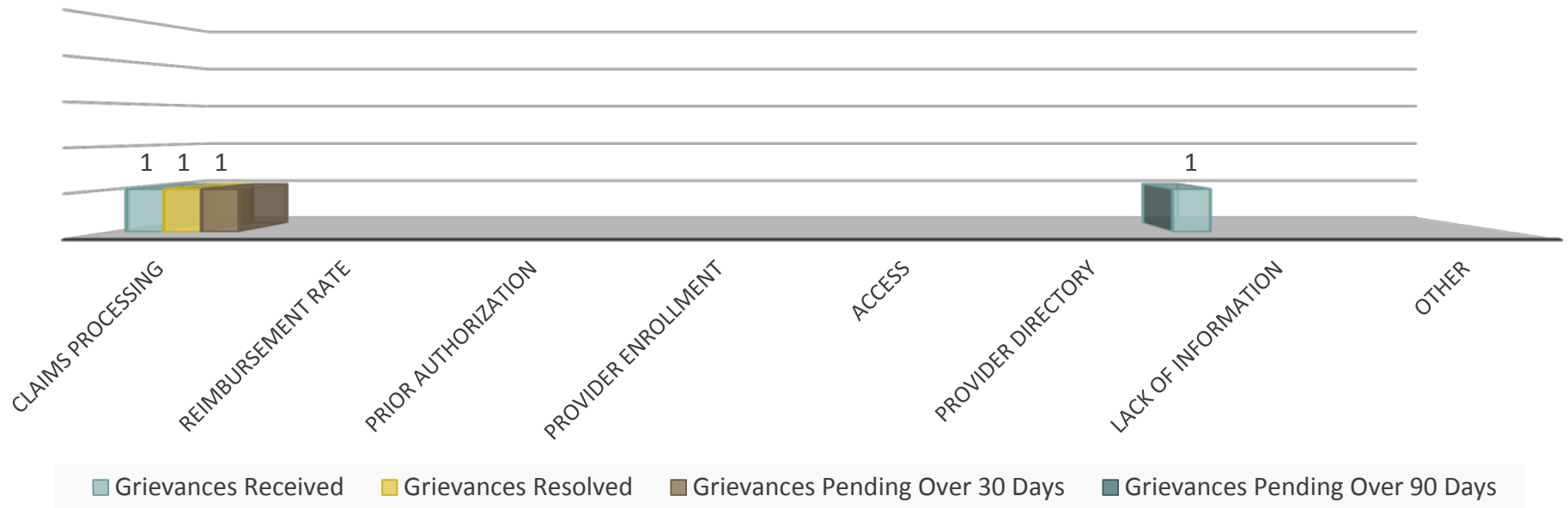


- Benefit Limitation
- Inpatient Admission
- Outpatient
- Eligibility

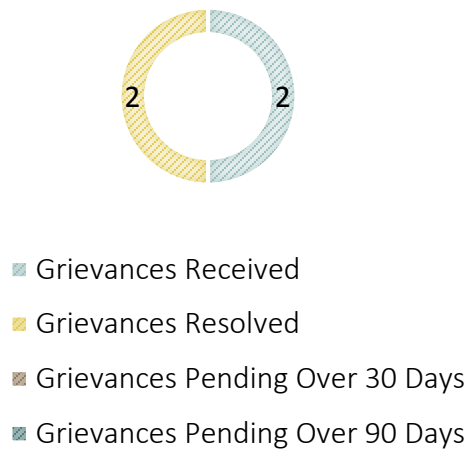
### State Fair Hearing Determinations



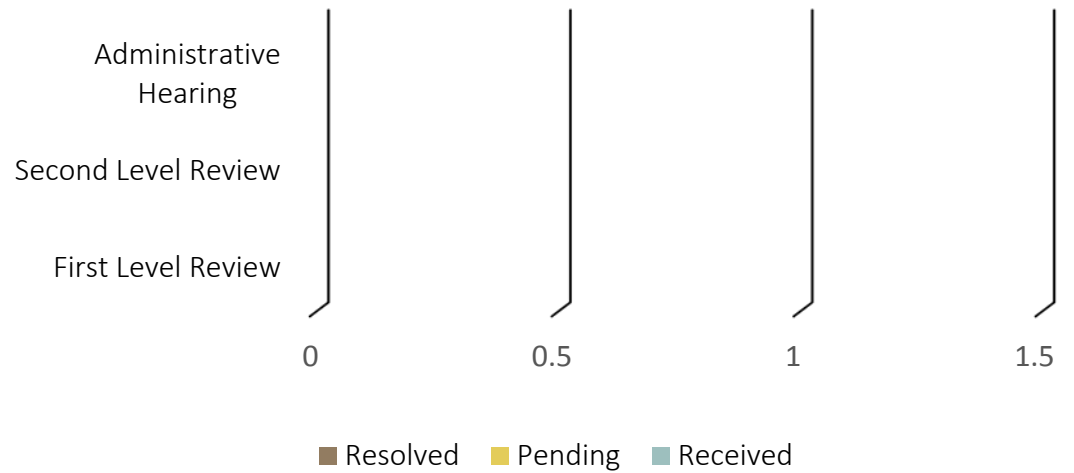
# Provider Grievances & Appeals Filed YTD



## Grievance Status YTD

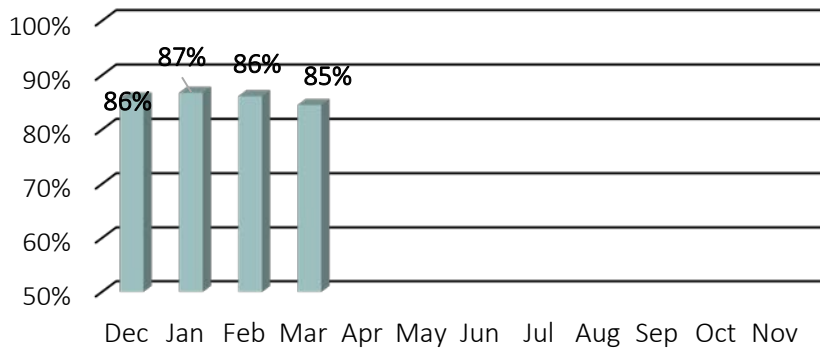


## Formal Claims Disputes

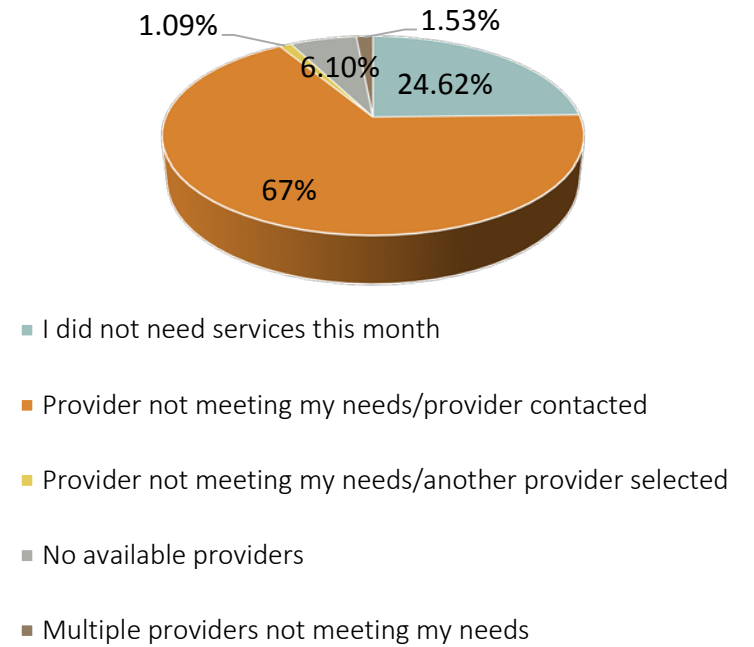


# Members who Received Services in the Type, Amount, Duration & Frequency Specified in the Plan of Care

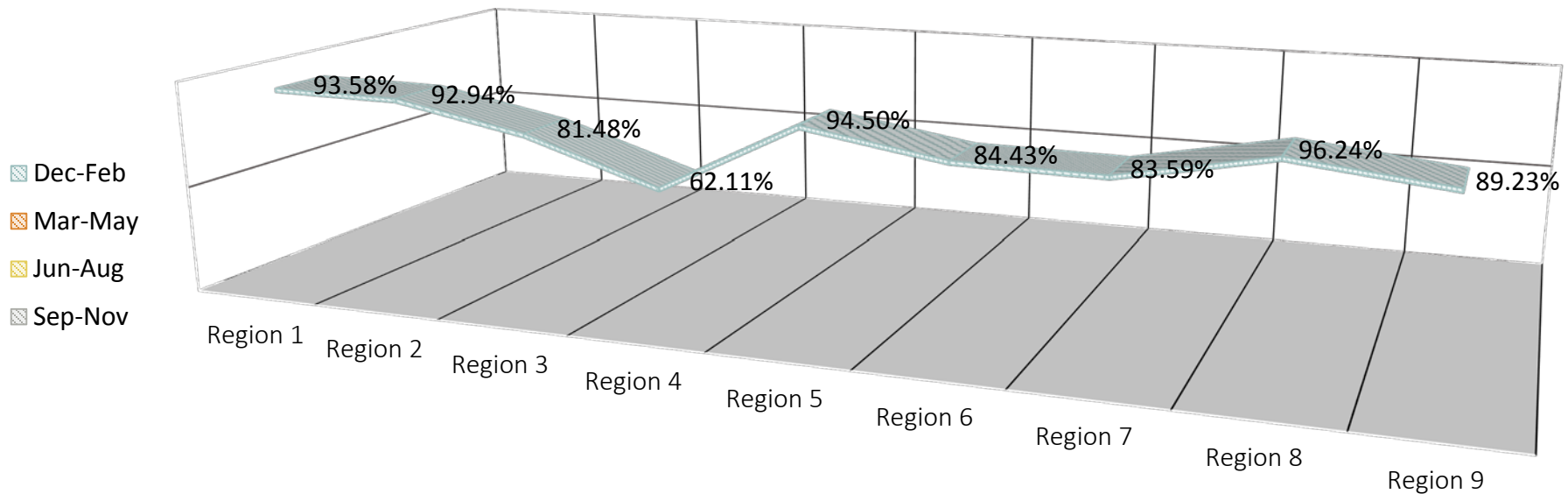
## Percent of Members Reporting Receipt of Needed Services



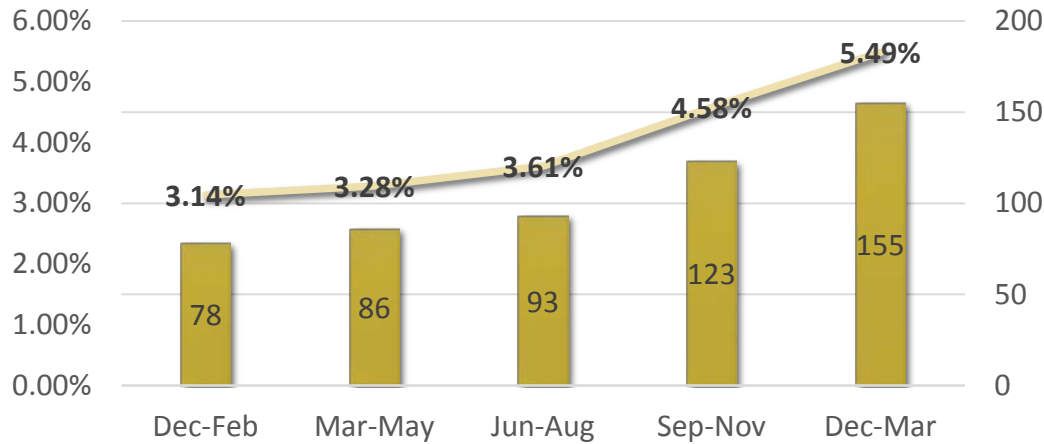
## Reasons Members Did Not Receive All Services on the POC for Current Reporting Month



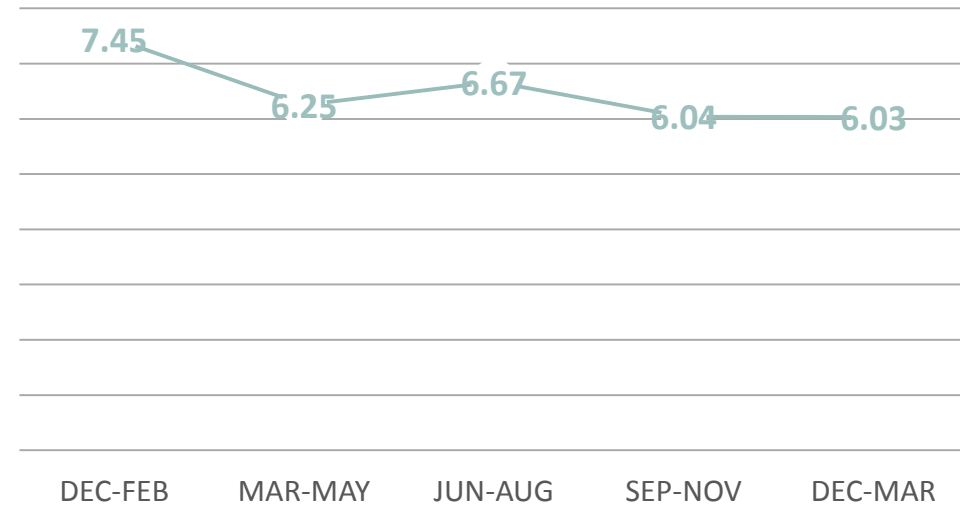
## Regional Trends



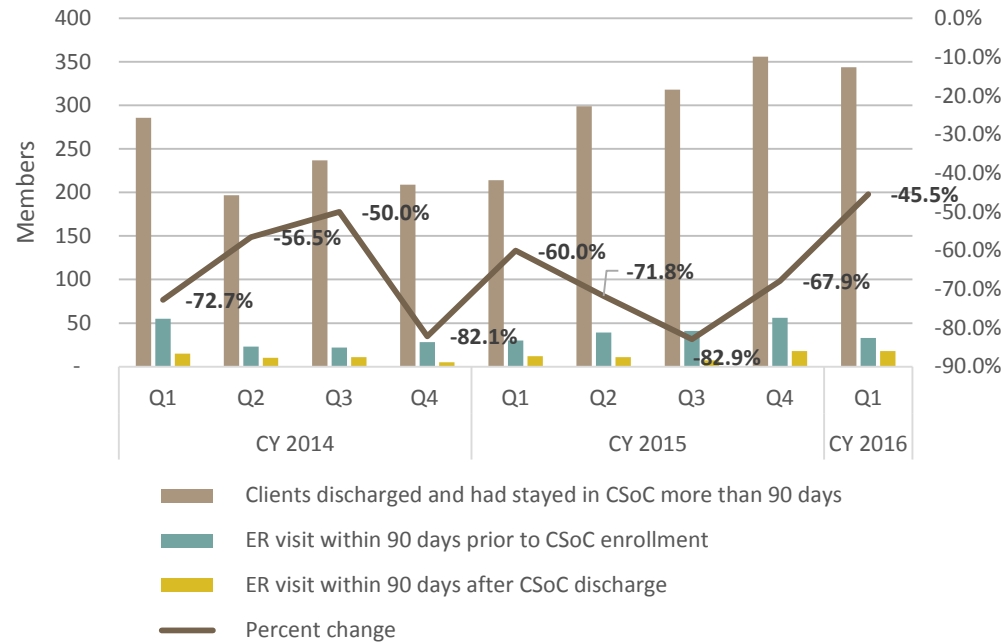
## Members Receiving Inpatient Psychiatric Hospital Services



## Inpatient Psychiatric Hospital ALOS

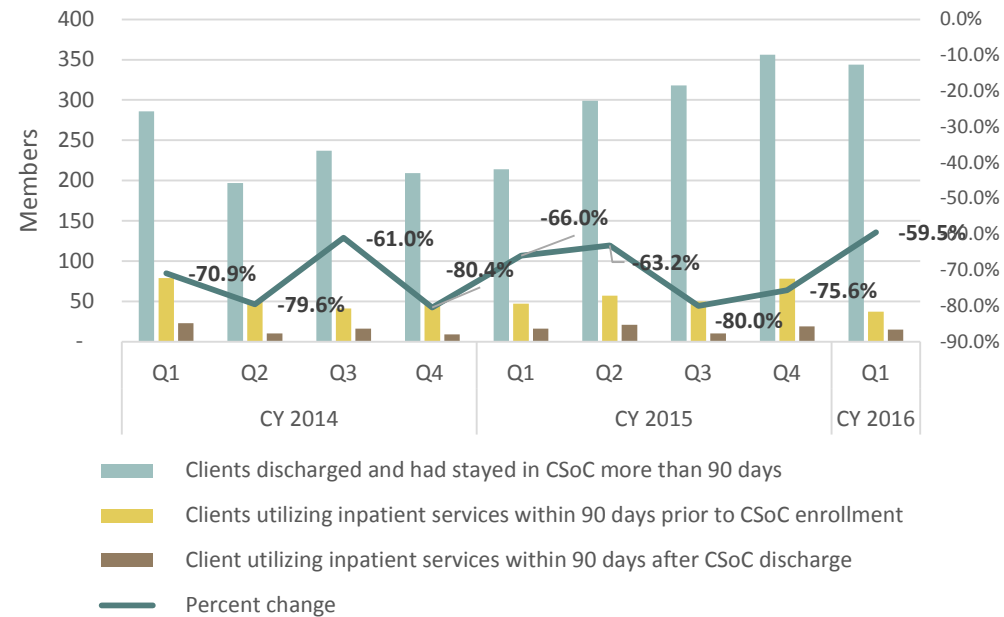


## Percent Change in ER Visits



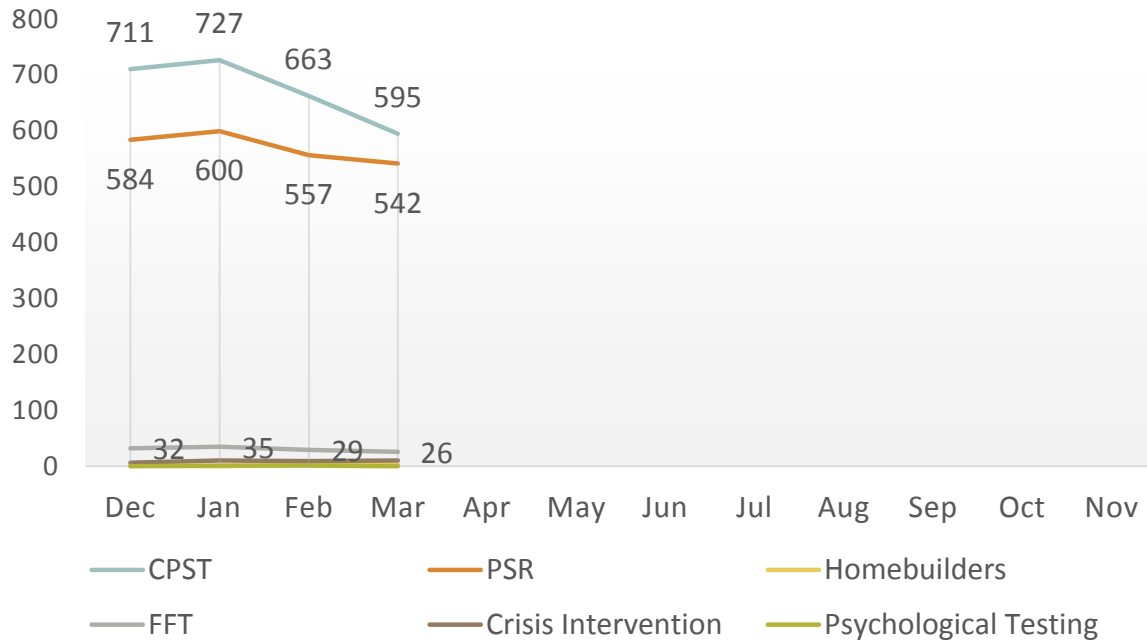
**Current data indicates there is a 45% decrease in psychiatric ER visits for youth 90 days post discharge from the CSoC program compared to the number of ER visits for youth prior to enrollment in CSoC.**

## Percent Change in Inpatient Utilization

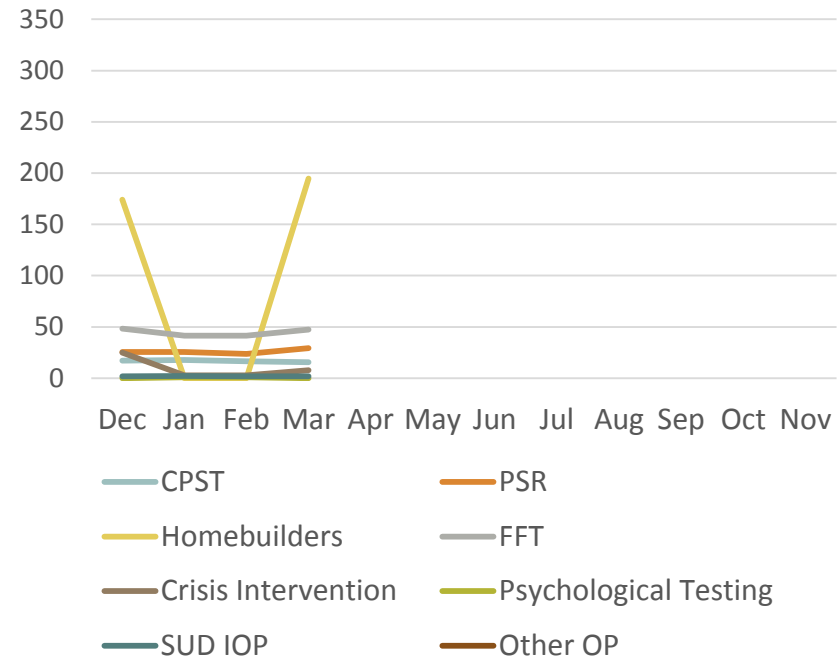


**Current data indicates there is a 59% decrease in inpatient psychiatric hospitalizations for youth 90 days post discharge from the CSoC program compared to the number of inpatient psychiatric hospitalizations for youth prior to enrollment in CSoC.**

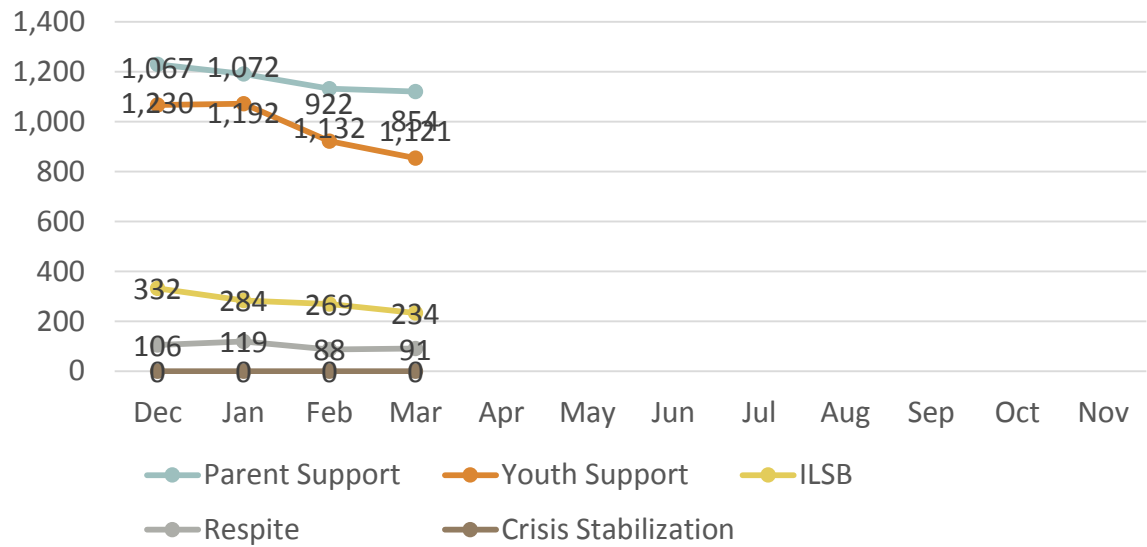
### Members Receiving Outpatient Services



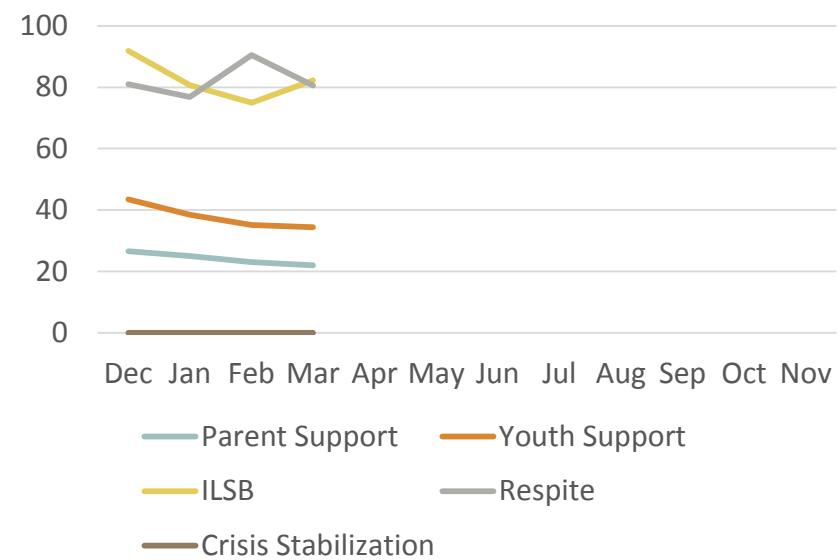
### Outpatient Services ANOU



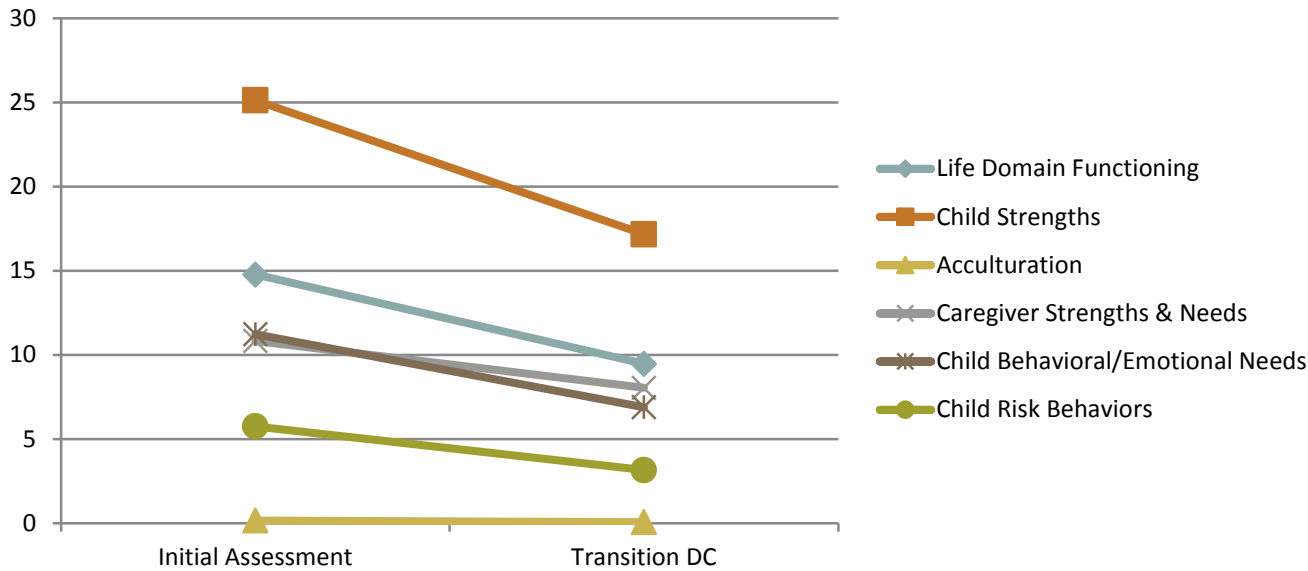
### Members Receiving Waiver Services



### Waiver Services ANOU

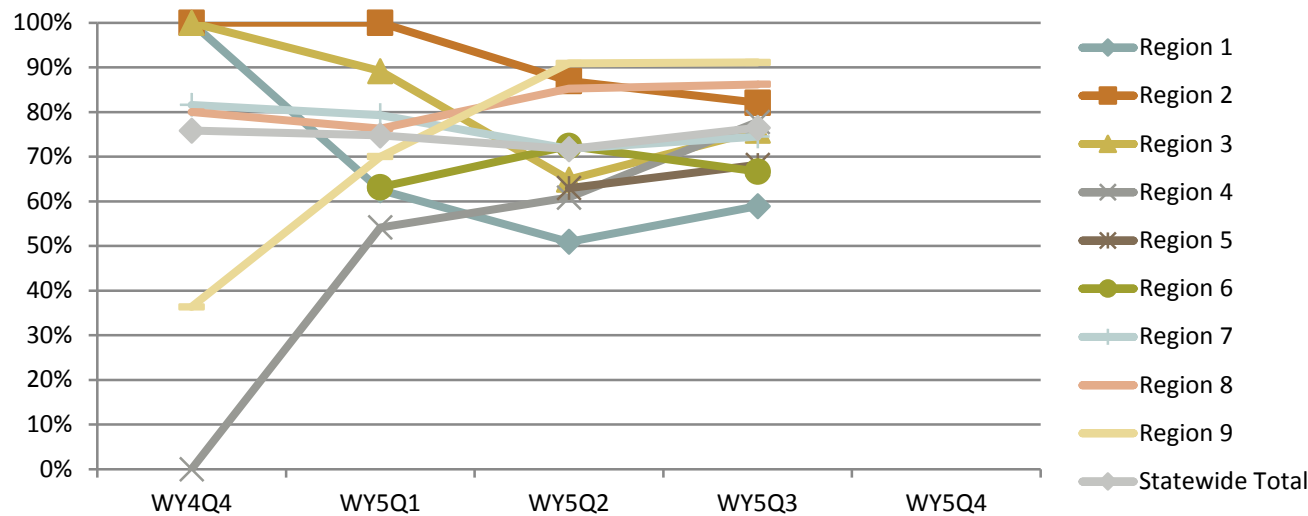


## Domain-Specific Average Change Scores



The CANS tool assesses child/youth functioning in the above domains at enrollment, every 180 days following enrollment, and at discharge. **A positive trend on the CANS is a decrease in score, which signifies a decrease in child/youth risk and emotional/behavioral needs.**

## Percent of Youth Showing Improved Clinical Functioning

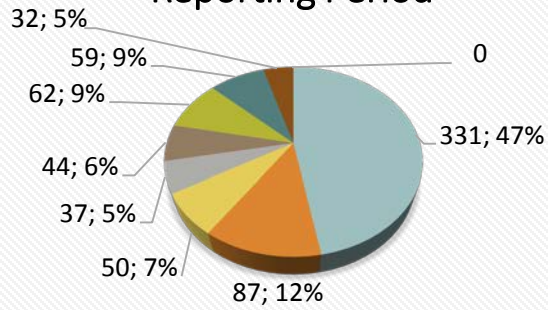


**76.48% of discharged youth showed improved clinical functioning**

### LEGEND

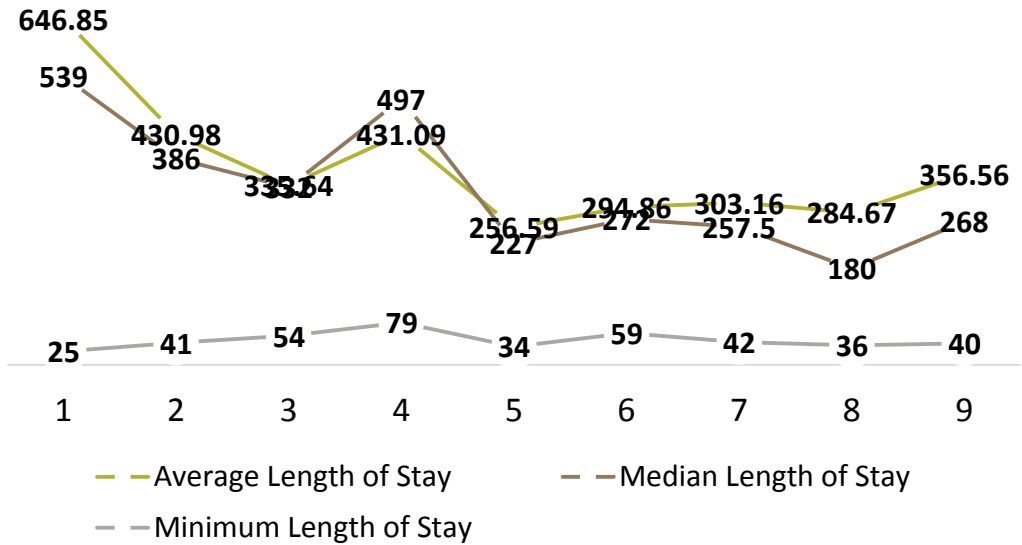
WY4Q4	DEC 2015 -FEB 2016
WY5Q1	MAR--MAY 2016
WY5Q2	JUN--AUG 2016
WY5Q3	SEP-NOV 2016
WY5Q4	DEC-2016-MAR 2017

### Reasons for Discharge During the Current Reporting Period

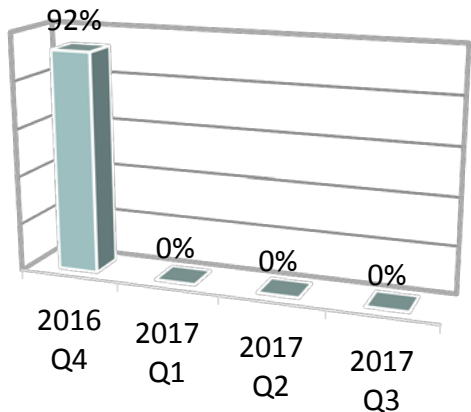


- Successful
- Fair
- Discontinued Services
- Relocation
- Unspecified
- Good
- Moved to Residential Placement
- Disengaged
- Other

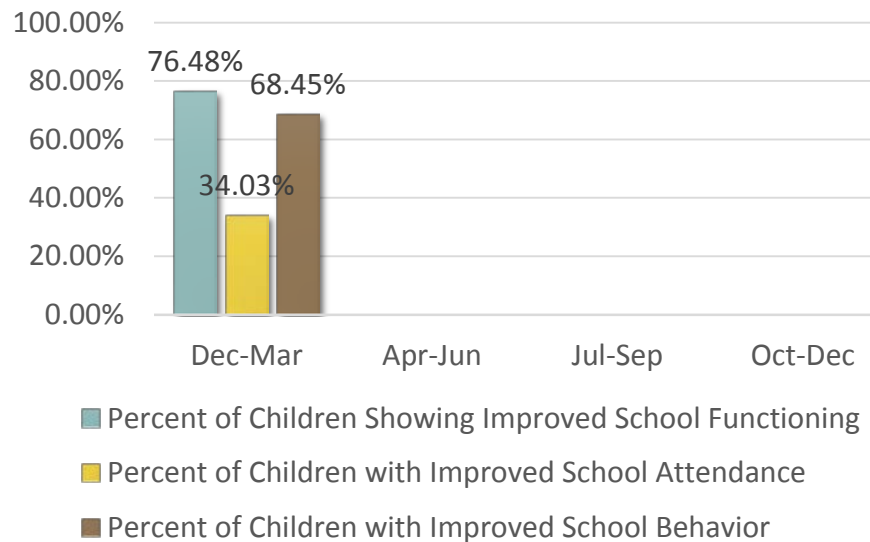
### Length of Stay During the Current Reporting Period by Region



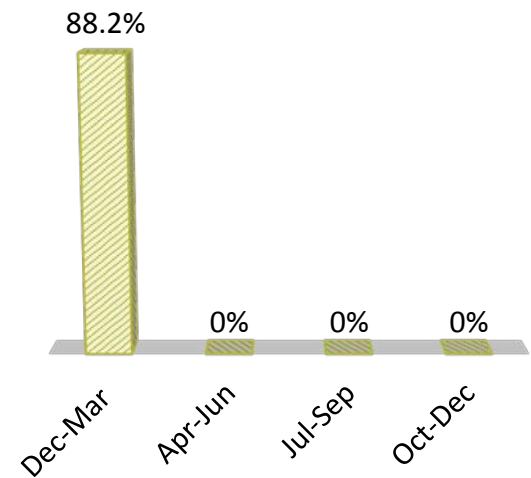
### Percent of Members Whose Living Situation at Discharge is a HCB-Setting



### Improved School Functioning



### Utilization of Natural Supports





## Level of Care Performance Measures

Measure	Target	2016 Q4 (Dec-Mar)	2017 Q1 (Apr-June)	2016 Q2 (Jun-Aug)	2016 Q3 (Sep-Nov)
Number and percent of initial participants who meet the level of care requirements prior to receipt of services	90%				
Number and percent of participants whose level of care determination form was completed timely as required by the state	90%				
Number and percent of participants whose level of care determination was made by a qualified evaluator	90%				

## Plan of Care Performance Measures

Measure	Target	2016 Q4 (Dec-Mar)	2017 Q1 (Apr-Jun)	2017 Q2 (Jul-Sep)	2017 Q3 (Oct-Dec)
Number and percent of participants whose plan of care reflects supports and services necessary to address the participant's goals	90%				
Number and percent of participants whose plan of care include supports and services consistent with assessed health needs, including risks	90%				
Number and percent of participants who participated in the plan of care development, as documented by the participant's and parents/caregiver's signature on the plan of care	90%				
Number and percent of participants whose plans of care were updated timely, as specified in the waiver application	90%				
Number and percent of participants whose plan of care was updated when the participant's needs changed	90%				
Number and percent of participants given a choice among service providers, as documented by the participant/authorized representative's signature on the State-approved form	90%				
Number and percent of participants who received information on available HCBS, as documented by the participant/authorized representative's signature on the State-approved form	90%				

## Qualified Providers Performance Measures

Measure	Target	2016 Q4 (Dec-Mar)	2017 Q1 (Apr-Jun)	2017 Q2 (Jul-Sep)	2017 Q3 (Oct-Dec)
Number and percent of providers initially meeting licensing and training requirements prior to furnishing waiver services	100%	100%			
Number and percent of providers continuously meeting licensing and training requirements	100%	100%			
Number and percent of non-licensed direct care staff of providers that meet State requirements	90%	52%			

## Health & Welfare Performance Measures

Measure	Target	2016 Q4 (Dec-Mar)	2017 Q1 (Apr-Jun)	2017 Q2 (Jul-Sep)	2017 Q3 (Oct-Dec)
Number and percent of participants who received information about how to report critical incidents, as documented by the participant/authorized representative's signature on the State-approved form	100%				
Number and percent of participants who received coordination and support to resolve health needs identified through case management contacts	90%	100%			

## Fiscal Accountability Performance Measures

Measure	Target	2016 Q4 (Dec-Mar)	2017 Q1 (Apr-Jun)	2017 Q2 (Jul-Sep)	2017 Q3 (Oct-Dec)
Number and percent of paid claims that are coded according to the services rendered	100%	48.6%			
Number and percent of claims that paid no less than the approved rate contained in the waiver application	100%				