TN Division of
TennCare

STATE OF TENNESSEE

2020 Health Link Program Enhancements

12/16/2019

Agenda

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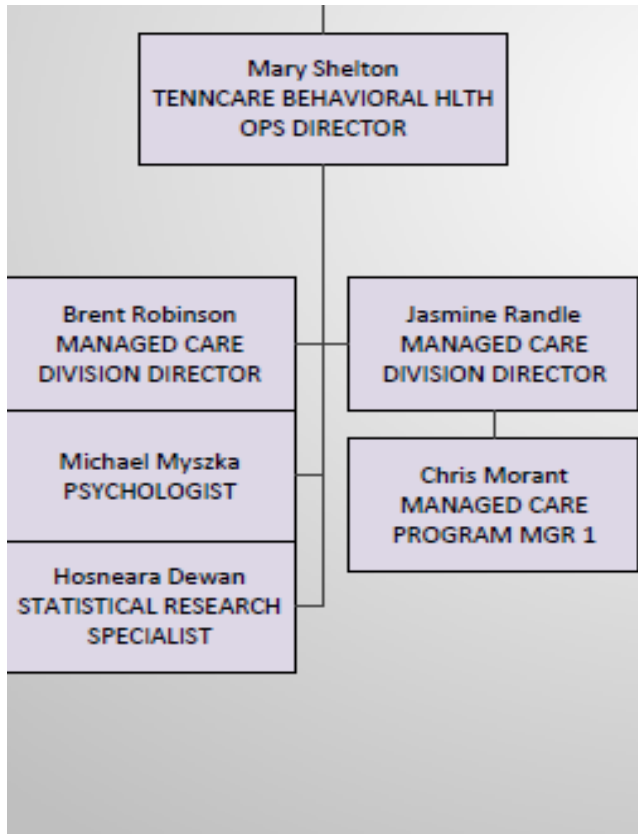 - Questions

Interactive Webinar

Communicating during the webinar:

- For questions or comments during the presentation, please click on the **chat box** function

- Select "Everyone" and enter your question or comment

- This will also be used during all Q&A portions of the presentation
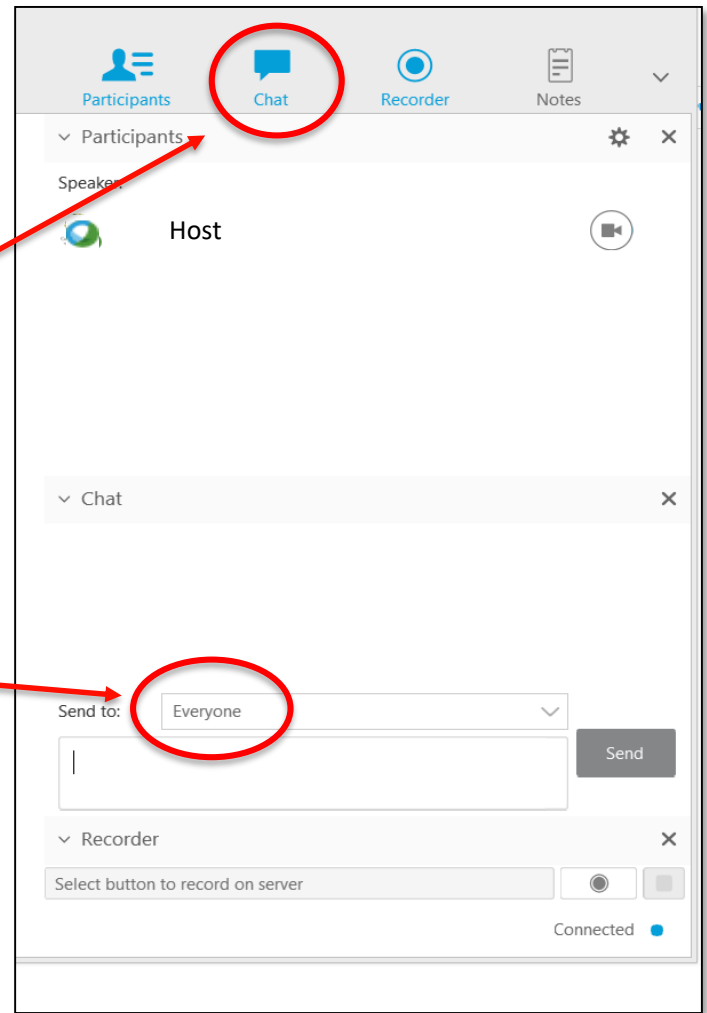
General Updates

Behavioral Health Operations Organizational Chart

- **Mary Shelton:** MAT, OUD, BH Episodes, etc.

- **Jasmine Randle:** THL lead, Clinical liaison, etc.

- **Dr. Myszka:** BFT, Project Echo, OUD, Clinical Manager

- **Brent Robinson:** Safe Sleep, DCS Liaison, Ace Nashville, etc.

- **Chris Morant:** Compliance Manager, CTT/CCFT, BH Claims issues, CRA, IPS, THL support, etc.

- **Hosneara Dewan:** BH Episodes, THL data analytics

Health Link Facts & Figures

	January-March 2018 (Quarter 1)	January-March 2019 (Quarter 1)	April-June 2018 (Quarter 2)	April-June 2019 (Quarter 2)
Total Eligible	112,224	147,644	128,956	118,836
Active	62,254	79,377	73,589	56,085
• 0-17 years old	29,529	34,770	31,489	21,129
• 18+ years old	39,725	44,607	42,100	34,956
Attributed Not Enrolled	49,970	68,267	55,367	62,751

	January-March 2018 (Quarter 1)	January-March 2019 (Quarter 1)	April-June 2018 (Quarter 2)	April-June 2019 (Quarter 2)
Total Contacts	512,373	425,089	296,720	253,470
• Face to Face (UC)	292,638	224,127	163,033	133,839
• Indirect (UD)	219,735	200,962	133,687	119,631
• Member (UA)	372,044	301,319	231,669	176,452
• Collateral (UB)	140,587	123,738	114,072	76,950

Quality Updates

THL Analytics: Key Findings

Finding 1	Quality has improved across 16 of 18 core quality measures
Finding 2	Total cost of care for members active In Tennessee Health Link, which was increasing by 17 percent per year in the two years before program launch, only increased by 1 percent per year in the two years following program launch
Finding 3	The rate of both inpatient hospital admissions and emergency department visits declined for active Tennessee Health Link members post-Tennessee Health Link when compared to pre-Tennessee Health Link
Finding 4	The program appears to encourage active Tennessee Health Link members to seek more follow-up visits with a primary care provider following discharge from an inpatient hospital admission, when compared to the control group
Finding 5	Providers report being better able to improve care for their patients

Overview of quality metric performance for THL program

From CY 2016 – CY 2018

● Desirable change > 1%   ● Not desirable change > 1%   ● Change ≤ 1%   (⬭) Definition change

Metric	Submetric	Change per year[1], in %
EPSDT Screening Rate (composite for older kids)	Well-child visits ages 7-11 years	3%
	Adolescent well-care visits ages 12-21 years	0%
BMI and weight assessment	Adult BMI screening rate	29%
	BMI percentile (children/adolescents)	44%
Comprehensive diabetes care (composite 1)	Eye exam	17%
	BP < 140/90	131%
	Nephropathy	-1%
Comprehensive diabetes care (composite 2)	HbA1c testing	2%
	HbA1c poor control (>9%)	-6%
Use of multiple concurrent antipsychotics in children/adolescents	Use of multiple concurrent antipsychotics in children/adolescents	-16%

Metric	Submetric	Change per year[1], in %
7- and 30-day psychiatric hospital / RTF readmission rate	RTF 7 day rate	8%
	RTF 30 day rate	4%
Antidepressant medication management (adults only)	Effective acute phase treatment	-10%
	Effective continuation phase treatment	-3%
Follow-up after hospitalization for mental illness within 7 and 30 days[2]	FUH 7 Day Rate	-18%
	FUH 30 Day Rate	-7%
Alcohol & drug (A&D) dependence treatment	Initiation of A&D dependence treatment	-1%
	Engagement of A&D dependence treatment	3%

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CY2020 THL Core Quality Metrics

Metric	Threshold
1. 7- and 30-day psychiatric hospital / RTF readmission rate (custom)	
- 7 day rate	≤5%
- 30 day rate	≤13%
2. Adherence to Antipsychotic medications for individuals with Schizophrenia (SAA)	≥59%
3. Antidepressant medication management (AMM): Effective Continuation Phase Treatment	≥ 40%
4. Comprehensive diabetes care (CDC) (composite 1): Eye Exam	≥51%
5. Controlling High Blood Pressure (CBP)	≥49%
6. Diabetes screening for people with Schizophrenia or Bipolar Disorder who are using antipsychotic medications (SSD)	≥82%
7. EPSDT Adolescent well-care visits ages 12-21 years (AWC)	≥47%
8. EPSDT Well-child visits ages 7-11 years (custom)	≥55%
9. Follow-up after hospitalization for mental illness (FUH): Within 7 days of Discharge	≥35%
10. Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM)	≥33%

Controlling High Blood Pressure (CBP)

Description

The percentage of members 18–85 years of age who had a diagnosis of hypertension (HTN) and whose BP was adequately controlled (<140/90 mm Hg) during the measurement year

Threshold: >49% (25th Percentile)
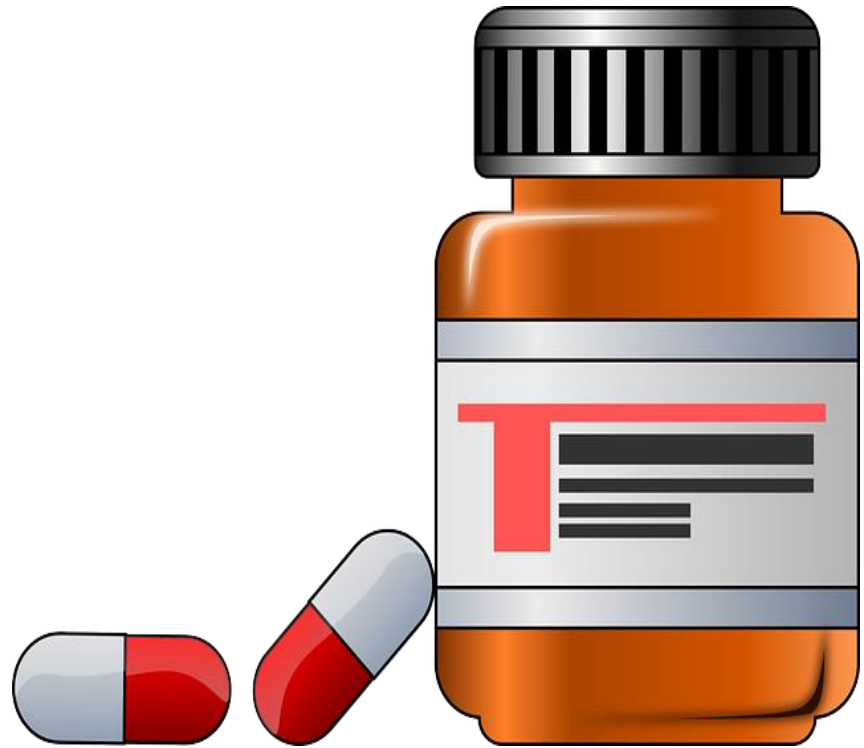
2020 Reporting-Only Quality Metrics

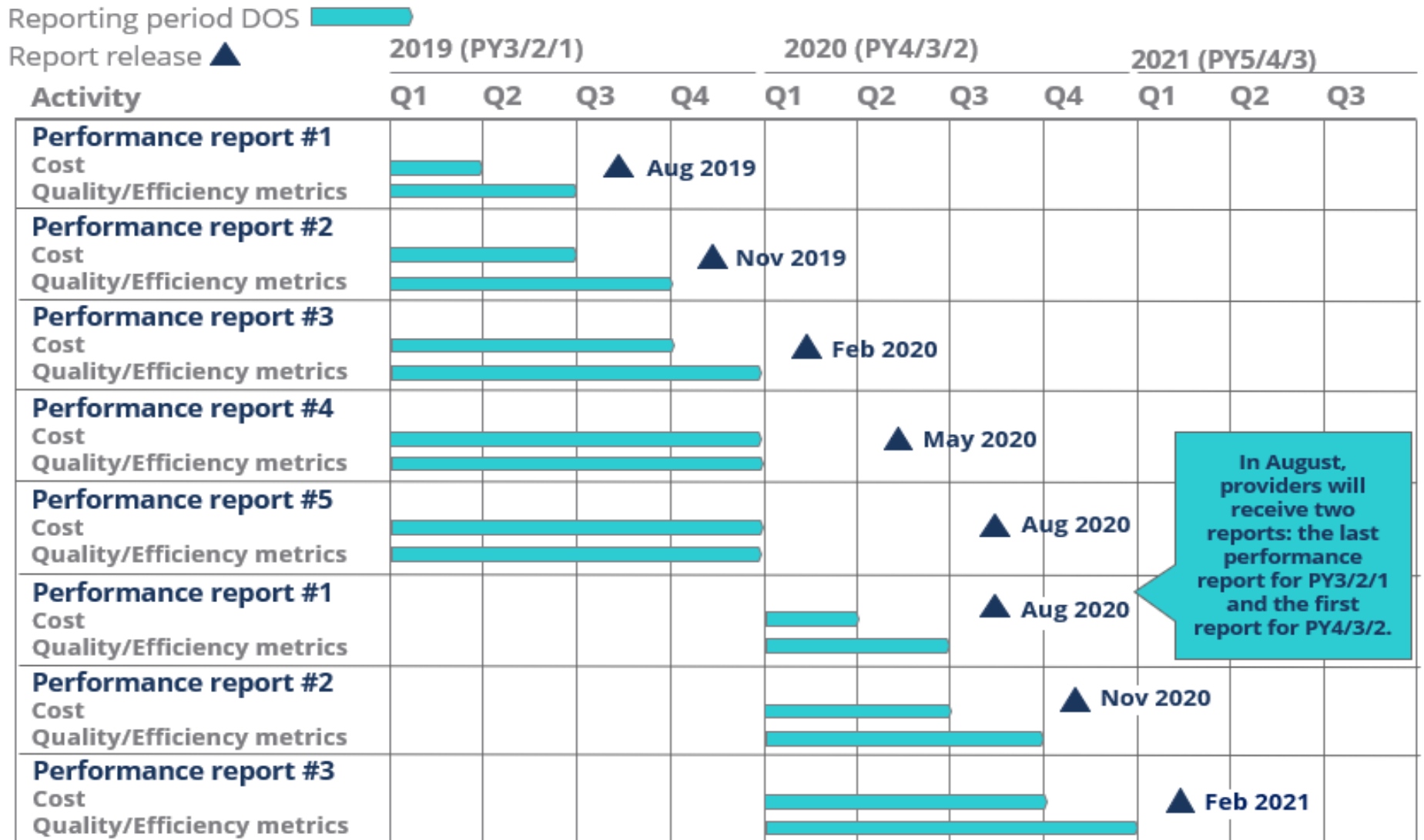| Metric |
| --- |
| 1. **Annual monitoring of patients on persistent medications (adults only) – Total rate (MPM)** |
| 2. **Comprehensive Diabetes Care (CDC) - Nephropathy** |
| 3. **Statin therapy for patients with cardiovascular disease (SPC)**
• Statin therapy for patients with cardiovascular disease – Received statin therapy
• Statin therapy for patients with cardiovascular disease – Statin adherence 80% |
| 4. **Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP)** |

2020 Reporting Timeframes

Reporting Timeframe- PCMH Wave 1,2,3 and Health Link

Reporting period DOS ▬
Report release ▲

Activity	2019 (PY3/2/1) Q1	Q2	Q3	Q4	2020 (PY4/3/2) Q1	Q2	Q3	Q4	2021 (PY5/4/3) Q1	Q2	Q3
Performance report #1 Cost Quality/Efficiency metrics	▬ ▬			▲ Aug 2019							
Performance report #2 Cost Quality/Efficiency metrics	▬ ▬			▲ Nov 2019							
Performance report #3 Cost Quality/Efficiency metrics	▬ ▬				▲ Feb 2020						
Performance report #4 Cost Quality/Efficiency metrics	▬ ▬				▲ May 2020						
Performance report #5 Cost Quality/Efficiency metrics	▬ ▬					▲ Aug 2020					
Performance report #1 Cost Quality/Efficiency metrics					▬ ▬	▲ Aug 2020					
Performance report #2 Cost Quality/Efficiency metrics					▬ ▬	▲ Nov 2020					
Performance report #3 Cost Quality/Efficiency metrics					▬ ▬		▲ Feb 2021				

> In August, providers will receive two reports: the last performance report for PY3/2/1 and the first report for PY4/3/2.

Program Updates

Onsite Support and Educational Offerings

- Navigant's support **will end for both PCMH and THL January 31, 2020**

- MCOs will host conferences in each grand region three times per year
- MCOs will also begin hosting the webinars
- Beginning in 2020, the Regional Collaboratives will no longer be offered

- Curriculum will no longer be offered via the Navigant SharePoint site
  - Curriculum has been uploaded to the THL website under *Additional Resources*
  - The Compendium of Resources will be available through the MCOs

- Conference ideas? Email Jasmine.Randle@tn.gov or contact your MCO representative

Engagement Evaluations & Coaching

- Engagement Evaluations will move from quarterly to semi-annually for each MCO

- A minimum of 10 records will be reviewed; however, additional files may be requested

- The MCO representative may request physician or nurse notes

- **Any documentation** made in the file **after date of notice** for chart review will be **excluded** from the Engagement Evaluation review

- Participation of clinical oversight staff

- Coaching sessions with MCOs

Provider Attestation

- Email sent to THLs on May 10th

- "Providers must attest to members via MCO-specific methods within 30 days of the initial date of service. Attestations should be submitted at least 14 days prior to filing the claim. Any claims submitted without an attestation submission within 30 days from the date of service will deny appropriately.

- Effective 07/01/19, MCOs will not pay or reprocess claims without an attestation submission within 30 days from the date of service.

Conclusion

Dates & Announcements

- **December 24-25 & 31st**: State offices closed
- **January 1st**: State offices closed
- **February conferences**: February 18th (West), 19th (Middle) and 20th (East)

Division of TennCare

THANK YOU

Questions?