

Northwest Behavioral Health Partnership, Inc.

A Collaboration of Crawford, Mercer and Venango
Counties

Founded in 2007

Mission Statement

- *To provide a collaborative and coordinated approach to the administration and management of the HealthChoices Medicaid Managed Care initiative.*

NW 3 Model Overview

- This model incorporates the concepts of shared contractual oversight, State monitoring and review, policy and procedure, and multi-discipline expertise.
- Serves to centralize all HealthChoices oversight endeavors for the counties and facilitate and coordinate their completion.
- Allows for the sharing and combining of knowledge and expertise of the counties, MCO and corporation accomplished through representation and participation in oversight committees.

NW 3 Model Overview

Cont...

- The unique collective aspect of the model is invaluable in program development, need identification, data analysis, trend identification, training initiative and fiscal analysis.
- Provides the opportunity for learning and benefiting from the strengths and accomplishments of all involved.

Economy of Scale

- Corporate Oversight versus County Oversight
 - Eliminates the need for additional HealthChoices staff at County level
 - Centralized data location for all HealthChoices data and verification performance
 - Centralized Information System for all HealthChoices data gathering and sharing
 - Common Meeting area via physical facility and advanced technological means
 - One unified financial software package to ensure same format and consistency of HealthChoices information
 - Sharing information through corporate intranet
 - A single systematic method of collaboration of ideas, issues, policies and procedures

Economy of Scale

- Continued...
 - Centralized shared expertise ability to organize, collaborate and respond to all HealthChoices program issues in a timely and uniform manner
 - Adhoc reports to Counties
 - A focused method of communication with MCO/DPW
 - Non-duplication of effort
 - Unified policies and procedures for all counties, whereas being one county information is not shared
 - Single point of contact
 - Corporation summarizes and disseminates information to all parties
 - Corporate Internet and Intranet
 - Expertise of Corporation staff has significantly decreased the need for outside consultants

Economy of Scale: Technological Savings

- Corporation

- Centralized connections utilizing Remote Desktop Protocol, eliminating the expense of T1 lines
- Sharing of computer servers for all counties
- Shared network hardware for all counties
- Ability to have multiple user licenses with software applications
- Shared video conferencing equipment
- One shared teleconference account

- Counties

- T1 line per county to State and to MCO
- Computer servers for each county
- Network hardware for each county
- Single licenses for each software application
- Video conferencing equipment per county
- One teleconference account per county
- Internet Access per County

Economy of Scale: Personnel Savings

- Corporate Personnel:

- Administration: Executive Director, Special Projects Director, Account Representative, Administrative Assistant and Receptionist
- MIS: IS Director, Data QA & Reporting Analyst, Data Reporting Analyst, Data Analyst and Network Administrator
- Finance: Finance Director, Finance/Accounting Specialists, MIS/Finance Specialist
- Clinical: Clinical/Quality Director, MH Specialist, D&A Specialist, Member Specialist and School-Based Services Director

- County Personnel Needed:

- Administration: 1 Administrative Assistant **per county**
- MIS: 1 IS Director, 1 Data QA Analyst, 1 Data Reporting Analyst, 1 Data Analyst and 1 Network Administrator **per county**
- Finance: 1 Finance Director, 2 Finance/Accounting Specialist and 1 MIS/Finance Specialist **per county**
- Clinical: 1 Clinical Director, 1 MH Specialist, 1 D&A Specialist and 1 Member Services Specialist **per county**

Advantages of Corporate Facility

- One central location for oversight, committee meetings and Board of Director meetings
- Secure physical plant
- Use of advanced technology for video and telephonic communication
- Conference room accommodations for meetings of all sizes
- Central filing area
- Central communication center
- Central location for computer administration with VPN and Remote Desktop Protocol utilized for computer related applications and training.
- Central location for input and output of HealthChoices data to MCO, Counties and Commonwealth of PA
- Handicapped accessible
- Easy access to Route 422, Interstates 79, 76 and 60

Northwest Behavioral Health Partnership, Inc.

**Northwest Behavioral Health Partnership
Board of Directors**

**David Crowe, Secretary/Treasurer
Director, Crawford County
Human Services**

**Jill Merritt, Planning Coordinator
Crawford County Human Services**

**Anita Robinson, Assistant Administrator
Crawford County D&A Executive Commission, Inc.**

**Cathy Main, Administrator
Mercer County MH/MR Program**

**Dave Schuille, Human Services Director
Venango County Human Services**

**Ex-Officio Board Member
Drug and Alcohol Consumer/Family
Representative**

**Gail King, Associate Director
Crawford County Human Services**

**Deborah Duffy, Executive Director
Crawford County D&A Executive Commission, Inc.**

**George Cavanaugh, President
CEO, Mercer County Behavioral
Health Commission, Inc.**

**Jayne Romero, Administrator
Venango County MH/MR Program**

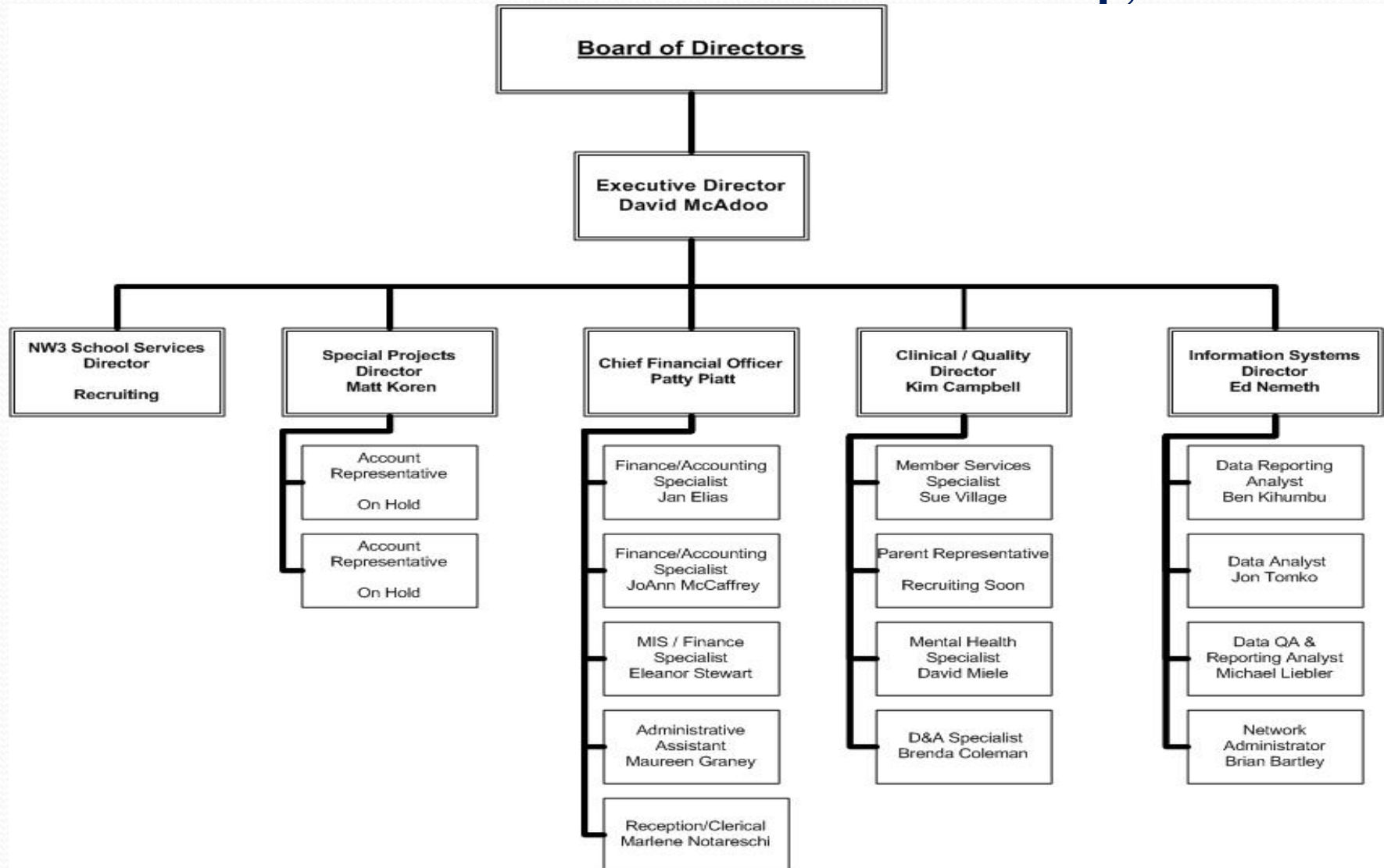
**Bonnie Summers, Vice President
Administrator, Venango County Substance
Abuse Program**

**Ex-Officio Board Member
Mental Health Consumer/Family
Representative**

Board of Directors

- Activities:
 - Meet on monthly basis at Corporate office
 - Approve policies & procedures that are recommended by the oversight committees
 - Approve Corporate policies & procedures
 - Govern the overall operation of the Corporation
 - Includes the following subcommittees:
 - Executive Committee
 - Personnel Committee
 - Finance Committee
 - Nominating Committee
 - By-Laws Committee
 - Evaluation Committee (Performance Incentives)

Northwest Behavioral Health Partnership, Inc.



Administrative Assignments

- Consists of Executive Director, Special Projects Director, , Account Representative, Administrative Assistant II and Receptionist
 - Support Executive Management Team with daily operations
 - Interacts with MCO Administration, Corporate Board of Directors and HealthChoices Team Leaders of the Commonwealth of PA
 - Administers the overall function of the Corporation

Special Projects Department

- Consists of Special Projects Director and Account Representative
 - Assists in identifying and defining the need for special projects and initiatives based upon consumer and County need as well as upon changing state, local and federal initiatives and requirements.
 - Develops plans for project development and implementation which utilize and coordinate the resources and expertise within the agency's clinical, Information Systems (IS) and Financial Departments.

Special Projects Department

- Coordinates efforts, tracks progress and works to identify and resolve any issues.
- Tracks projects after implementation to assure customer satisfaction as well as outcomes.
- Coordinates with committees, SBHM management team, BH-MCO, Counties, and SCAs in the development, review and approval of projects and initiatives.
- Provides a wide range of management and administrative support activities in the day-to-day resolution of corporate operational issues.

Finance Department

- Consists of Finance Director, Finance/Accounting Specialists, and MIS/Finance Specialist
 - Ensures the financial integrity of MCO through financial controls and the production of accurate and timely reports
 - Oversees claims payable, claims processing, statistical analysis, financial reporting and cash management
 - Reviews and assures contract compliance
 - Reviews and troubleshoots all financial reporting issues
 - Ongoing evaluation of medical expense liability

Finance Department

- Review and approval of a HealthChoices budget, which includes both medical claims and administrative expenditures
 - The budget is prepared on a Per Member Per Month expenditures by category of aid and level of care, which relates directly to the approved HealthChoices bid to Department of Welfare
 - Monitor and review the Managed Care Organization enrollment membership reports and analysis as prepared by information system and accounting staff. Monitor and review the Capitation Revenue remittance advice's as they are received each month
 - Review and approve all requests for provider rate changes

Finance Department

- Review appropriate bank/investment statements for the MCO
- Review financial cash flow statements
- Review Received But Unpaid Claims (RBUC) Reports
- Review and validate all reports and documents before submission to DPW
- Rate setting and ongoing analysis of current rate structure
- Maintains financial reporting software unique to the SW6 counties
- Chairs Finance Oversight Committee
- Review and coordinate responses to all DPW financial correspondence

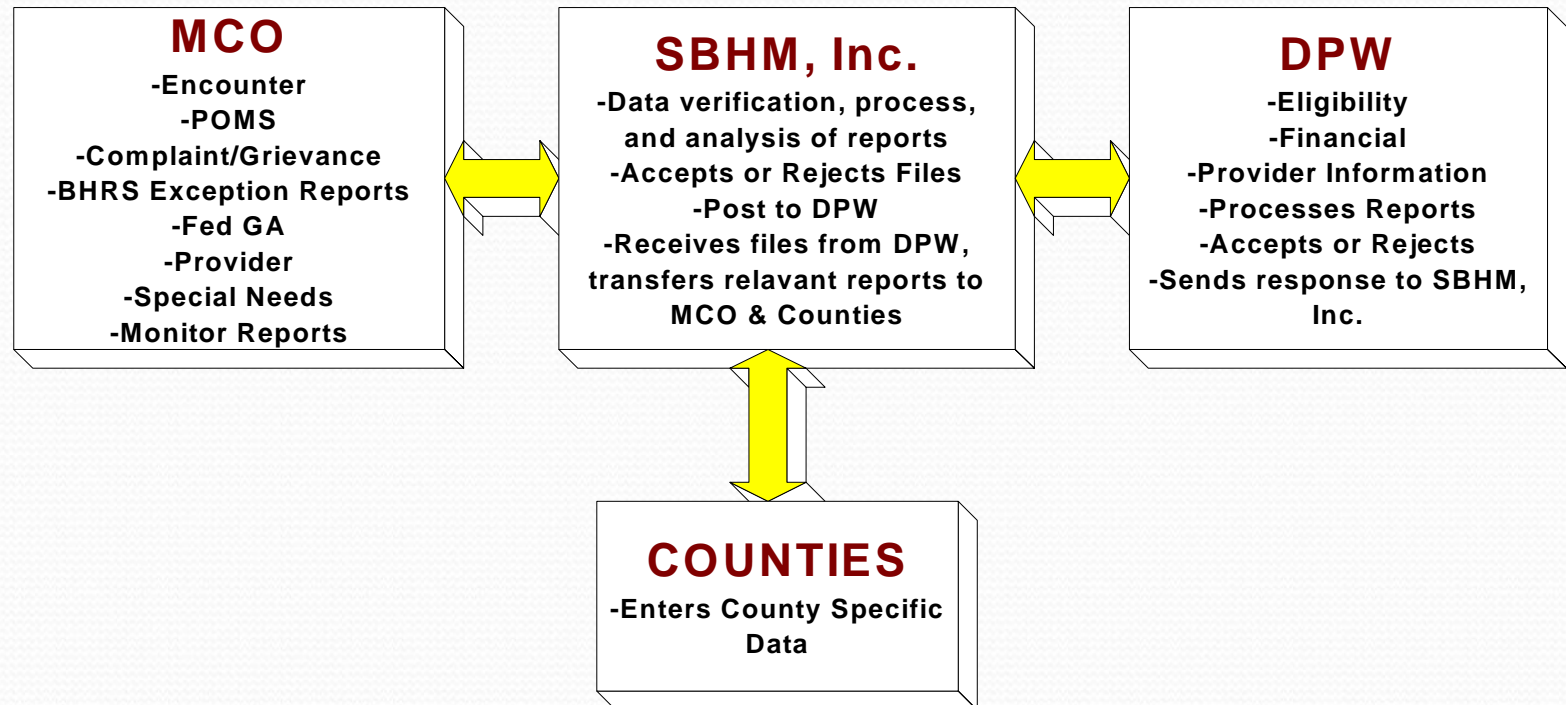
SBHM, Inc. Financial Report Flow



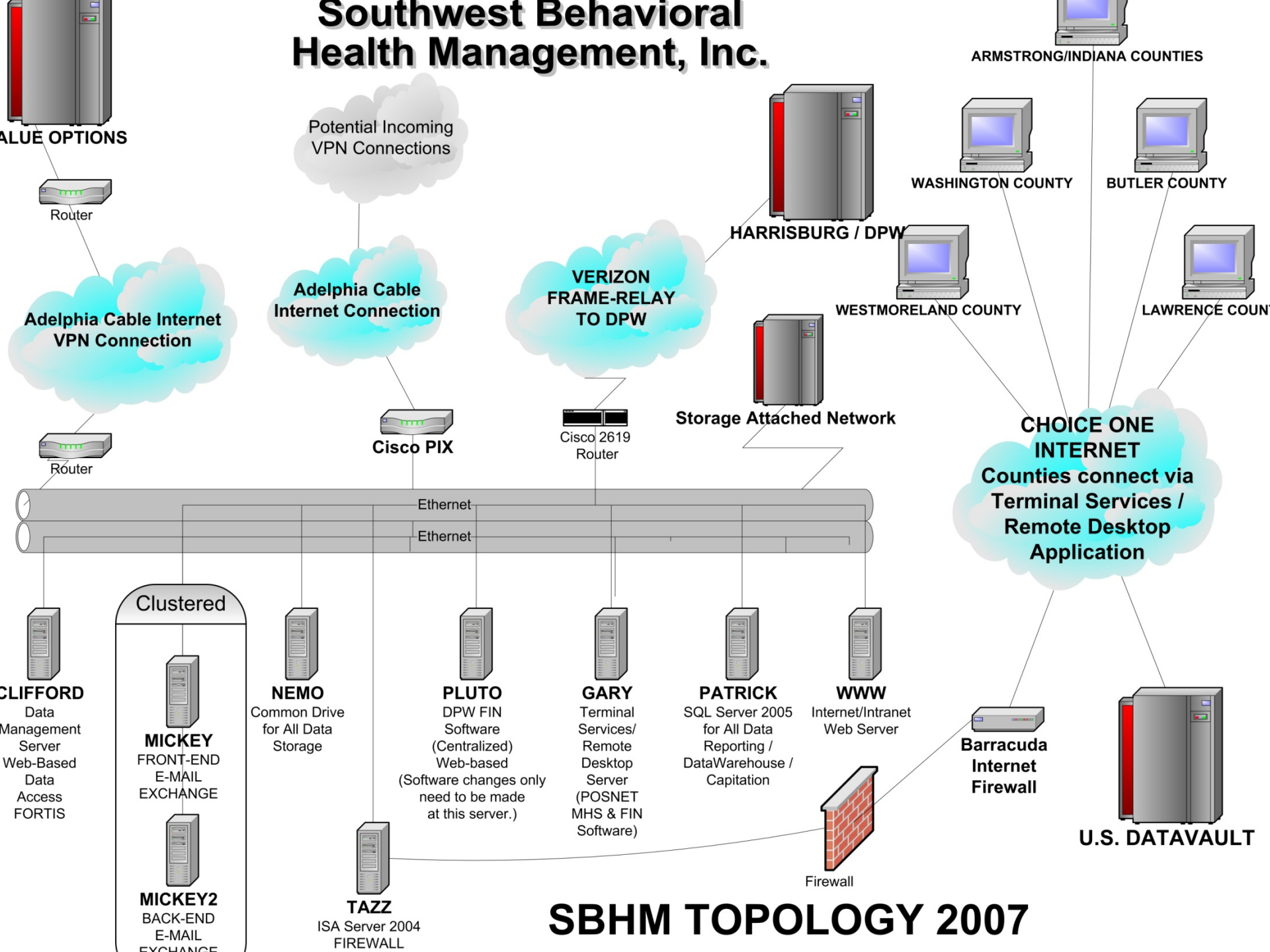
Management Information Systems

- Consists of IS Director, Data, QA & Reporting Analyst, Data Analyst, Data Reporting Analyst and Network Administrator
 - Ensures MCO maintains a comprehensive Management Information System to support the data integrity established by the Commonwealth of PA.
 - Collects and analyzes HealthChoices data to ensure appropriate delivery of services
 - HIPAA Compliance
 - Data verification on all DPW Reports
 - Management of Corporate Information System
 - Create and administers to Corporate Internet and Intranet
 - Chairs MIS Oversight Committee

SBHM, Inc. Data Flow & Verification



Southwest Behavioral Health Management, Inc.



SBHM TOPOLOGY 2007

Internet Site

- Company Internet site: www.sbhm.org
- Increases communication with outside agencies, providers, members and the general public
- Search the site for: Corporate Profile and Overview, Search Customer login for Counties Reports, Member Information, Career Opportunities, Directions to various counties, Useful Links and more



Southwest Behavioral Health Management, Inc.

[Home](#)
[Overview](#)
[Corporate Profile](#)
[SW 6 Contact Info](#)
[NW 3 Contact Info](#)
[Members Information](#)
[Careers](#)
[SCA](#)
[Directions](#)
[Useful Links](#)
[County Login](#)



Southwest Behavioral Health Management, Inc. provides the oversight of HealthChoices program and partnership with Value Behavioral Health of Pennsylvania.

Contact Information:

Located on 2520 New Butler Road, New Castle, Pennsylvania
Phone - 724-657-3470
Fax - 724-657-3461
[Email US](#)

Corporate Mission

Provide oversight of VBH-Pa's contract with the 9 counties
Act as liaisons between providers, consumers and VBH-Pa
Provide assistance with credentialing
Assist in assessment of program needs
Provide technical assistance and consultation to provider agencies on program issues
Assist in the interpretation of state regulations
Assure uniform medical necessity criteria
Assist in generating and monitoring DPW mandated reports for HealthChoices
Facilitate the adjudication of consumer's 2nd level complaints and grievances

Intranet Site

- Corporate Intranet site created and administered on the company's own web server
- Share and link to Corporate, MCO and HC Related Information
- Online Document Management Library to collaborate and access Documents related to Meetings and HC Data.

Southwest Behavioral Health Management, Inc.



INTRANET

SBHM	VBH	Health Choices Related
Comcare/SIGABA/CIS Training Board of Directors Meetings 2007 Conference Room Consumer Expense Statement Counties Executive Operations 2007 Finance Oversight Meetings 2007 SBHM.ORG SW 6 Model SW6 Model Brochure SCA Resources	Clinical P & P Getting Help with Grievances HIPAA Covered Services Grid Provider Manual 2005 Service Connect VBH Intranet	ACT 106 Comcare HealthChoices Intranet HIPAA OHMSAS Website Online Resources

[Fortis](#)

[Fortis Plug-in](#)

[Camera](#)

[Directions](#)

Clinical Department

- Consists of Clinical Director, MH Specialist, D&A Specialist and Member Services Specialist
 - Monitors clinical members and provider network services to assure the MCO's compliance with HealthChoices and County contractual requirements
 - Provides technical assistance to the Counties for clinical issues
 - Ensures consistency of clinical policies and procedures throughout the six counties
 - Analyze clinical data and make recommendations to address gaps in service, continuity of care, quality management, improvement and risk management
 - Identify clinical needs in our mental health chemical dependency provider network and refer those identified needs to the Director of Provider Relations
 - Monitor and participate in the complaint & grievance process
 - Chairs Mental Health, Provider Network, Member Services and Quality Management Committees
 - Fraud and Abuse: Clinical Director serves as Six County HealthChoices Designee
 - Chairs oversight workgroups

Additional Activities of Clinical Department

- Monitors and reviews the following:
 - Telephone Response Time
 - Provider 90% Capacity
 - Early Warning Reports
 - Review and coordinate feedback on MCO newsletter
 - BHRS Exception Reports
 - Credentialing Process/Provider 80
 - Clinical Policy Clarification on MCO Policies & Procedures
 - Access standards & submit waivers as needed
 - Provider presentations and trainings
 - Provider site visits/assessments for credentialing, compliance and quality of care
 - Review clinical records
 - Conduct audits of Clinical, Member Services and Provider Network functions
 - HIPAA Compliance

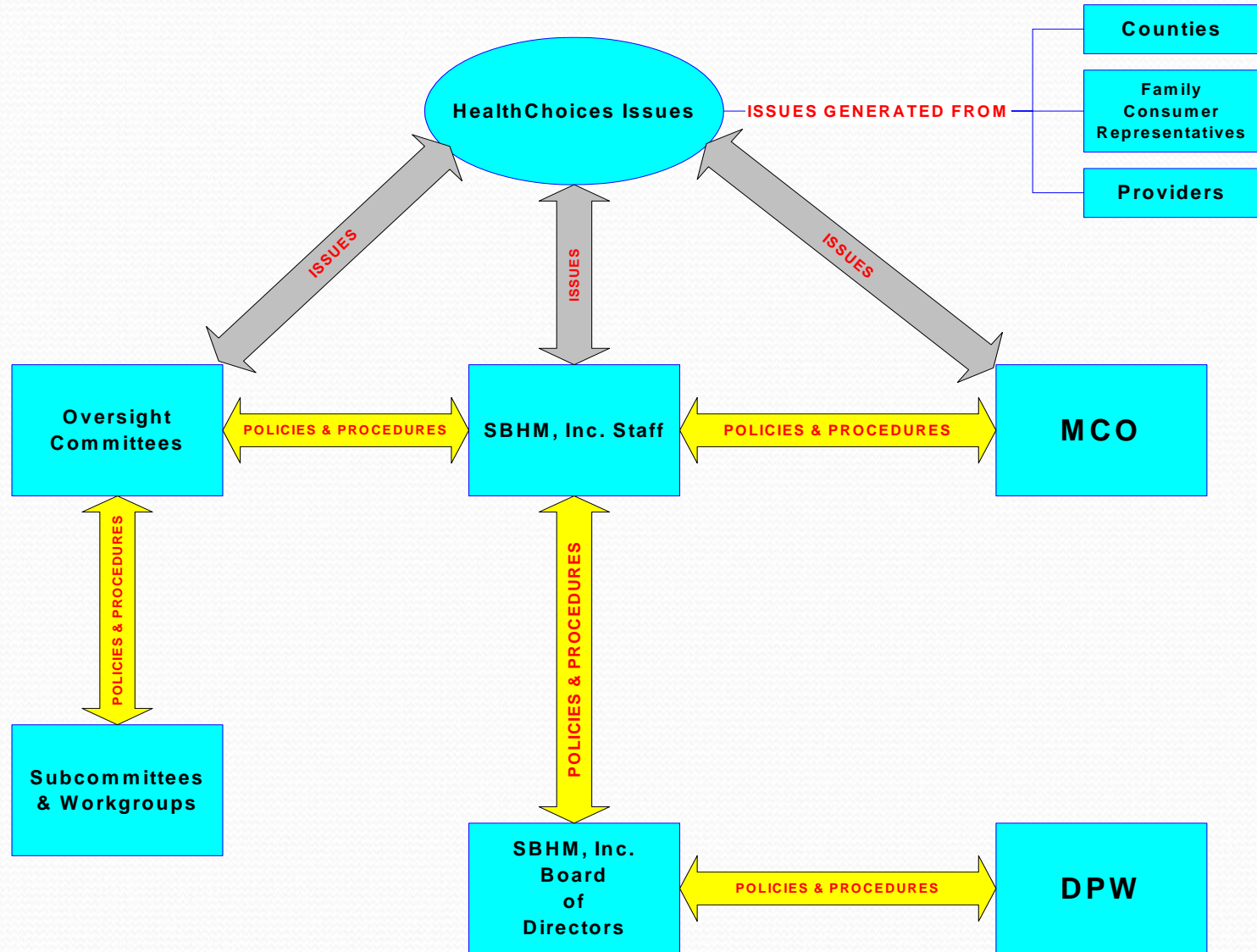
Corporate Oversight Responsibilities

- Role of the Corporation in oversight committees:
 - Committee Chairperson
 - Organize & facilitate meeting agenda, location and members
 - Record & retain meeting minutes

Oversight Committees

Executive Oversight Committee	Members Oversight Committee	Mental Health Oversight Committee	Finance Oversight Committee
MIS Oversight Committee	Drug & Alcohol Oversight Committee	Quality Management Committee	

POLOCIES AND PROCEDURES WORKFLOW



Executive Operations

- Goals:
 - Responsible for monitoring the entire administrative infrastructure of the MCO.
 - Ensure that the MCO is in compliance with all contract obligations.

Executive Operations

- Meeting Frequency: Meets on a Monthly Basis
- Members include:
 - Executive Director, SBHM, Inc.
 - NWBHP, Inc. Management Staff
 - All County D&A Directors and MH/MR Administrators
 - Chief Executive Officer, MCO
 - Account Executive, MCO

Executive Operations

- Objectives:
 - Monitor contract requirements between counties and the Commonwealth for Compliance
 - Monitor contract requirements between counties and MCO for Compliance
 - Monitor response and procedures in MCO contract and RFP for compliance with actual operations
 - Act as clearinghouse for issues that arise regarding HealthChoices and delegate to proper committee

Members Oversight Committee

- Goals:
 - Ensures that MCO responds to member complaints and/or grievances in an appropriate and timely fashion
 - Ensure that the MCO provides for all appropriate member education e.g. Member Handbook, Complaints and Grievances Information, etc.
 - Ensure that MCO plans for and delivers a full and appropriate range of behavioral health treatment modalities and supportive services including the active participation of consumers, persons in recovery, families, advocates and community groups in this process
 - Ensure the MCO develops advocacy and outreach programs for it's members
 - Ensure that the rights of members are adhered to by the MCO

Members Oversight Committee

- Meeting Frequency: Meets on a Monthly Basis
- Members Include:
 - Clinical Director, SBHM, Inc.
 - Member Specialist, SBHM, Inc.
 - Director, Crawford County Human Services
 - Program Director, Armstrong/Indiana D&A Commission
 - MH Specialist, Crawford County Human Services
 - MH Specialist, Mercer County MH/MR Program
 - MH Specialist, Venango County Human Services
 - Quality Analyst, MCO
 - Account Executive, MCO
 - Prevention, Education & Outreach Coordinator, MCO
 - Consumer/Family Representative

Members Oversight Committee

- Objectives:
 - Review all substantial information before it is released to the members
 - Review grievance and complaint reports and address as necessary
 - Review Six County CST reports and activities
 - Review all MCO's education, outreach and advocacy efforts
 - Review Members Satisfaction Surveys and results
 - Review MCO's action taken in significant member incidents
 - Review all newly developed or revised Policy and Procedures pertaining to member rights and satisfaction e.g. complaints and grievances, confidentiality, significant member incidents, etc.

Mental Health

- Goals:
 - Ensures that MCO develops and administers a comprehensive service delivery system for members with mental health problems
 - Ensure that MCO plans for and coordinates the delivery of covered services to Medical Assistance recipients and respectively work closely with the county agencies (including: County MHMR Offices, State Offices, County SCA's, and respective County BSU and Case management Units, Department of Human Services, Emergency Shelter Services, Courts, School Districts and Housing Authorities) and the Commonwealth (Including: Bureau of Maternal and Child Preventive Health, Bureau HIV/AIDS, Bureau of Preventive Health Programs, Bureau of Epidemiology, Bureau of Primary Care Resources, Bureau of Community Program Standards, and Office of Drug and Alcohol) to ensure a full and appropriate range of behavioral health treatment modalities and supportive services are being delivered

Mental Health Oversight Committee

- Meeting Frequency: Meets on a Monthly Basis
- Members Include:
 - Clinical Director, SBHM, Inc.
 - MH Specialist, SBHM, Inc.
 - Special Projects Director, SBHM, Inc.
 - Administrator, Venango County MH/MR Program
 - MH Program Analyst, Crawford County Human Services
 - CASSP Coordinator, Crawford County Human Services
 - MH Specialist, Mercer County MH/MR Program
 - CASSP Coordinator, Mercer County MH/MR Program
 - MH Specialist, Venango County Human Services
 - CASSP Coordinator, Venango County Human Services
 - Program Director, MCO
 - Account Executive, MCO
 - Clinical Director, MCO
 - Member & Provider Services Director, MCO
 - Provider Field Coordinator, MCO
 - Consumer/Family Representative, Crawford, and Venango Counties

Mental Health Oversight Committee

- Objectives
 - Review any newly developed or revised clinical mental health policies and procedures and medical necessity criteria
 - Review activities of Clinical Advisory Committee and mental health workgroups
 - Monitor adequate access to all mental health in-plan services
 - Review issues that the counties and/or MCO have with mental health providers

Mental Health Oversight Committee

- Objectives Continued...
 - Review new or updated state/federal regulations and ensure the MCO's compliance with these regulations
 - Monitor utilization of mental health services for trends and outliers
 - Review any other mental health related issues pertinent to the counties or MCO

Mental Health Oversight Committee

- Objectives Continued...
 - Ensure that county residents with mental health needs receive the most appropriate and effective treatment in the least restrictive and most cost effective setting
 - Ensure that the MCO establishes and maintains a service management department where they will complete the following: coordination of care, authorization of services, level of care destinations, concurrent reviews, liaison with providers, scheduling of assessments, verification of eligibility, and determination of special needs
 - Ensure the MCO's general adherence to all conditions of the HealthChoices contract regarding clinical mental health issues

Finance Oversight Committee

- Goals:
 - Ensure the financial integrity of the MCO through the establishment of financial controls and the production of accurate and timely reports
 - Perform specific finance review functions including the financial analysis, claims processing, budgeting, statistical analysis, financial reporting and cash management
 - Safeguard limited funds allocated under the contract
 - Ensure that MCO has developed an extensive claims management department to process and pay each contracted and out-of-network provider for all valid claims for eligible recipients
 - Ensure that MCO has developed and maintains a comprehensive rate schedule to process and pay each valid claim within the ranges negotiated with the Commonwealth

Finance Oversight Committee

- **Meeting Frequency:** Meets on a Monthly Basis
- **Members Include:**
 - Finance Director, SBHM, Inc.
 - Finance Accounting Specialists, SBHM, Inc.
 - MIS/Finance Specialist, SBHM, Inc.
 - Director, Crawford County Human Services
 - Associate Director, Crawford County Human Services
 - Fiscal Officers, Crawford D&A Executive Commission, Inc.
 - Fiscal Officer, Crawford County Human Services
 - Fiscal Director, Mercer County Behavioral Health Commission, Inc.
 - Fiscal Staff, Mercer County Behavioral Health Commission, Inc.
 - Fiscal Officer, Venango County Human Services
 - Chief Financial Officer, MCO
 - Consumer/Family Representative

Finance Oversight Committee

- Objectives:
 - Development and review of Financial Conditions for the Counties and Capitation Rate Proposal of the HealthChoices Request for Proposal response;
 - Review of MCO, Counties and NWBHP, Inc. financial policies and procedures for the HealthChoices Program.
 - New and revised financial policies and procedures are routinely submitted to the committee for review and recommendation to the Board of Directors

Finance Oversight Committee

- Objectives Continued...
 - Monitor all financial and other performance indicators against the approved budget
 - Monitor all financial and performance indicators as specified in the DPW RFP
 - Monitor monthly financial summary reports prepared by Corporation
 - Review all independent auditor reports
 - Monitor the timeliness of all financial quarterly and yearly reports

Finance Oversight Committee

- Objectives Continued...
 - Ongoing evaluation of medical claim liability and the adequacy of capitation rates
 - Review monthly PA analysis and IBNR accrual reports prepared by MCO
 - Approve any IBNR adjustments proposed by MCO
 - Review the monthly IBNR Summary reports by category of aid and by level of care and all analysis reports as prepared by the Southwest Behavioral Health Management Corporation to explain variances from budget and current trends

Finance Oversight Committee

- Objectives Continued...
 - Monitor MCO and Corporation cash flow to ensure that it can meet its day-to-day obligations
 - Review paid claim reports for the month
 - Review claim lag reports
 - Monitor the accuracy and timeliness of payment to providers for medical claim liabilities
 - Monitor the MCO to ensure their reserve requirements are being met

MIS Oversight Committee

- Goals:
 - Ensures that the MCO and NWBHP, Inc. establish and maintain a comprehensive MIS system to support the data integrity by establishing data input controls, produce accurate and timely reports, and collection and analysis of HealthChoices data to ensure appropriate delivery of services
 - Ensures that the MCO maintains data integrity by establishing data input controls, produces accurate and timely data reports and advises management of trends based on data analysis

MIS Oversight Committee

- Meeting Frequency: Monthly Basis
- Members Include:
 - IS Director, SBHM, Inc.
 - Data, QA & Reporting Analyst, SBHM, Inc.
 - Data Analyst, SBHM, Inc.
 - Data Reporting Analyst, SBHM, Inc.
 - Network Administrator, SBHM, Inc.
 - IS Staff, Crawford County Human Services
 - IS Staff, Crawford County D&A Executive Commission, Inc.
 - IS Staff, Mercer County Behavioral Health Commission, Inc.
 - IS Staff, Mercer County MH/MR
 - IS Staff, Venango County Human Services
 - IS Staff, Venango County Substance Abuse Program
 - Director of Information Services, MCO

MIS Oversight Committee

- Objectives
 - Maintain oversight of systems (Security, Documentation of Applications, Backup Procedures, Preparation of Management Reports, Preparation of Mandatory State and County Reports, Maintenance of Computer Hardware and Software)
 - Survey and comment on all requests for systems software and hardware
 - Monitor and review all required systems reports as specified in the DPW RFP
 - Monitor recipient enrollment/eligibility and the reconciliation of the data
 - Manage VPN and Remote Desktop Connections

Drug & Alcohol Oversight Committee

- **Goals:**

- To ensure that the MCO develops, maintains and administers a comprehensive service delivery system for members who abuse or are addicted to alcohol and other drugs.
- To ensure that members with substance abuse/addiction needs receive the most appropriate and effective treatment in the least restrictive and most cost effective setting
- To ensure that the MCO establishes and maintains a service management department where they will complete the following: coordination of care, authorization of services, level of care determinations, concurrent reviews, liaison with providers, scheduling of assessments, verification of eligibility, and determination of special needs
- To ensure that the MCO plans for and coordinates the delivery of covered services to members and respectively works closely with the county agencies (including State Offices, SCA's and respective County BSU and Case Management Units, Department of Human Services, Emergency Shelter Services, Courts, School Districts and Housing Authorities) and the Commonwealth (including Bureau of Maternal and Child Preventive Health, Bureau of HIV/AIDS, Bureau of Preventive Health Programs, Bureau of Epidemiology, Bureau of Primary Care Resources, Bureau of Community Program Standards, and Bureau of Drug and Alcohol Programs) to ensure a full and appropriate range of behavioral health treatment modalities and supportive services are being delivered
- To ensure the MCO's general adherence to all conditions of the HealthChoices contract regarding clinical alcohol and other drug issues

Drug & Alcohol Oversight Committee

- Meeting Frequency: Meets on a Monthly Basis
- Members Include:
 - Clinical Director, SBHM, Inc.
 - Executive Director, SBHM, Inc.
 - Special Projects Director, SBHM, Inc.
 - D&A Specialist, SBHM, Inc.
 - Executive Director, Crawford County D&A Executive Commission, Inc.
 - Assistant Administrator, Crawford County D&A Executive Commission, Inc.
 - Case Management Supervisor, Crawford County D&A Executive Commission, Inc.
 - D&A Administrator, Mercer County Behavioral Health Commission, Inc.
 - D&A Representatives, Mercer County Behavioral Health Commission, Inc.
 - Administrator, Venango County Substance Abuse Program
 - Program Director, MCO
 - Account Executive, MCO
 - Clinical Director, MCO
 - Clinical Manager, MCO
 - Member & Provider Services Director
 - Project Manager, MCO
 - Provider Field Coordinator, MCO
 - Consumer/Family Representatives

Drug & Alcohol Oversight Committee

- Objectives:
 - Review newly developed or revised clinical drug and alcohol policies and procedures, and medical necessity criteria
 - Review activities of the drug and alcohol workgroups and Clinical Advisory Committee that are drug and alcohol related
 - Monitor adequate access to all in-plan drug and alcohol services
 - Monitor all in-plan drug and alcohol services operating under a waiver for member utilization and need, and assure corrective action plan development

Drug & Alcohol Oversight Committee

- Objectives Continued...
 - Review issues that the counties and/or the Managed Care Organization have with drug and alcohol providers
 - Review new or updated state/federal regulations and ensure the MCO's compliance with these regulations
 - Monitor utilization for drug and alcohol services for trends and outliers
 - Review any other drug and alcohol related issues pertinent to the Counties or MCO

Quality Management Committee

- Goals:
 - To provide a systematic method for continuously improving the quality, efficiency and effectiveness of the entire range of behavioral health services provided to all members of the six counties' HealthChoices Program

Quality Management Committee

- **Meeting Frequency:** Meets 10 Times a Year
- **Members Include:**
 - Clinical Director, SBHM, Inc., Co-Chair
 - Director, Butler County MH Services
 - MH Program Director, Armstrong/Indiana MH/MR Program
 - Mental Health Coordinator, Westmoreland County MH/MR Program
 - Administrator, Washington County MH/MR Program
 - D&A Representative, Westmoreland County D&A Commission
 - MH Specialist, Lawrence County MH/MR Program
 - Provider Representative, Lawrence County Human Services
 - Provider Representative, ARC Manor
 - Provider Representative, Indiana County Children and Youth Services
 - Quality Director, MCO, Co-Chair
 - Clinical Team Leader, MCO
 - Quality Analyst, MCO
 - Consumer/Family Representatives

Quality Management Committee

- Objectives:
 - Develop and implement a yearly Quality Management Work Plan which reflects the quality improvement initiatives identified through an analysis of the previous year's Quality Management activities
 - Monitor procedures for risk management
 - Monitor procedures for primary healthcare
 - Monitor procedures for the evaluation of effectiveness of service
 - Monitor procedures for the evaluation for the quality and effectiveness of internal processes
 - Evaluate the quality and performance of the provider network

Quality Management Committee

- Objectives Continued...
 - Monitor procedures for the reporting of suspected/substantiated fraud & abuse
 - Monitor clinical records content, retention and storage
 - Continue procedures for assessing member satisfaction with services
 - Monitor preventive behavioral health programs

Other Committees Attended

Clinical Advisory Committee	DPW Required Sessions	Quality of Care Committee	Physical Health Behavioral Health Committee	DPW Monitoring Meeting
Southwest Regional CSP	Ombudsman Meetings	Stakeholders Advisory Committee	Consumer Satisfaction Team	Provider Advisory Committee

Other Meetings Attended

- Clinical Advisory
 - Monthly Meeting at MCO, Provide Clinical Expertise
- DPW Required Sessions
 - TA Sessions, Rate Setting
- Quality of Care Committee
 - Monthly Meetings at MCO, Quality Management Monitoring
- Physical Health/Behavioral Health
 - Bi-Monthly at MCO, Monitor PH/BH Coordination
- DPW Monitoring Meeting
 - Monthly Meeting at MCO, Monitor six-county HealthChoices issues
- Southwest Regional CSP
 - Held 10 Times a Year,
- Ombudsman Meetings
 - Monthly Meetings at MCO, Monitor Programmatic issues
- Stakeholders Advisory
 - Bi-Monthly at Mayview State Hospital, Monitor consumer issues
- Consumer Satisfaction Team
 - Bi-Monthly at MCO, Monitor consumer issues
- Provider Advisory Committee
 - Monthly meeting at MCO, Monitor provider issues

Complaint and Grievance

- The SBHM Clinical Department takes an active role in the Complaint and Grievance process along with the MCO.
- The MIS Department enters the data into it's own database and maintains reports and verifies data.
- At the 1st level the logs are received and reviewed and disseminated to the counties. The staff also monitors time lines for resolutions.
- At the 2nd level the clinical department facilitates and records the hearing and, if needed, represents county as panel participant.
- Monitors process for compliance with state regulations.
- Serves as the Northwest county contact for fair hearings and communicates with hearing officer.

STANDARD COMPLAINT PROCEDURES

Any issue, except a denial of services, that a member presents to the MCO, either verbally or in writing.

Member Complaint goes to BHMCO

Member has a minimum of 45 days to register complaint from date of occurrence

1st Level Complaint

- BHMCO complaint confirmation letter
- Proposed resolution within 30 days of request
- Letter must be sent to member within 5 business days of resolution decision

Member Satisfied?

YES
End of
Complaint

NO

2nd Level Complaint Review

- BHMCO letter acknowledges 2nd level request & explains process
- Panel Review within 30 days from request with 15 days advance notice to member
- Panel must include 1/3 member representation
- Proposed resolution must be sent to member within 5 business days of panel review

Member Satisfied?

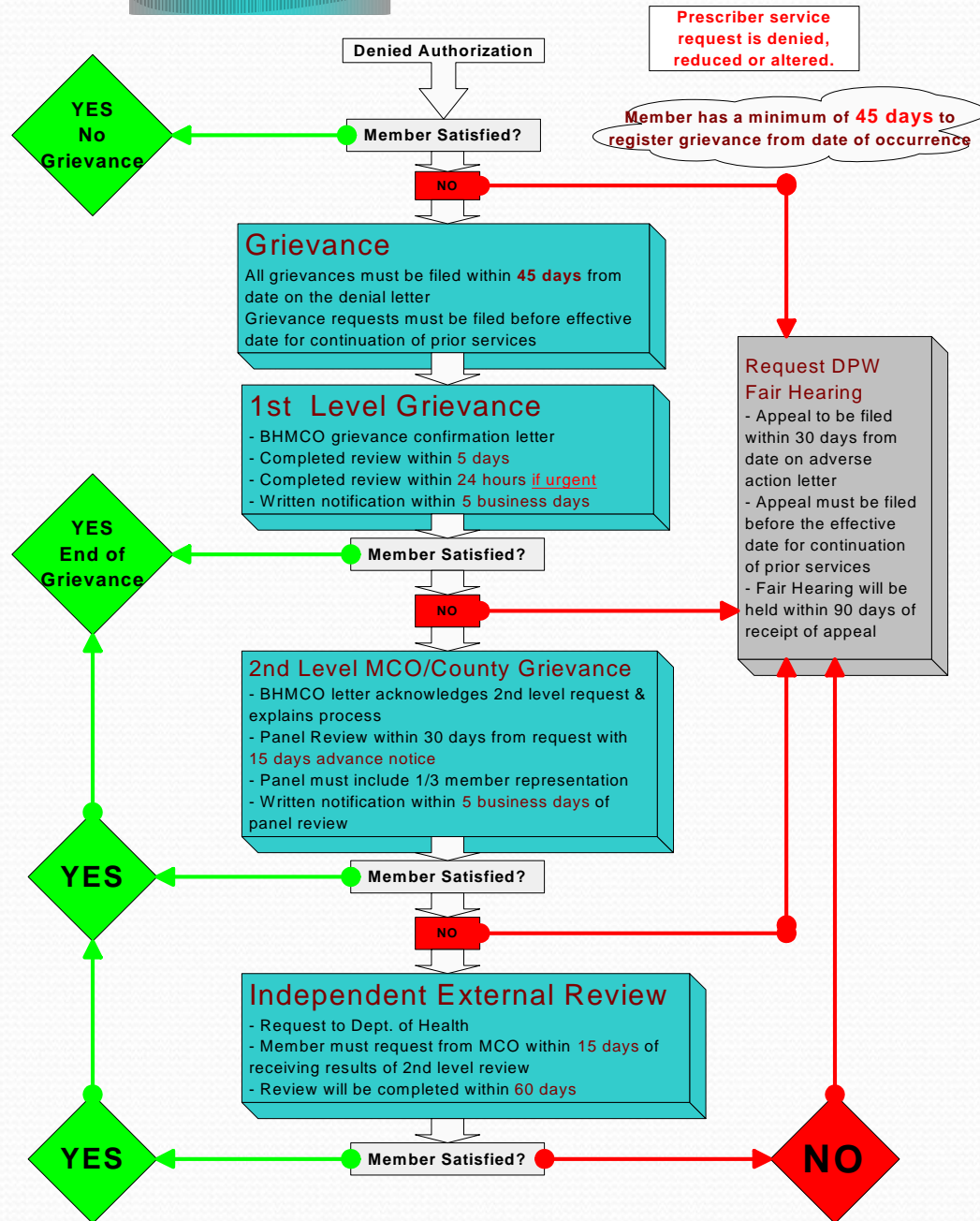
YES

NO

Independent External Review

- Request to Dept. of Health or Dept. of Insurance
- Member request must be sent within 15 days of receiving results of 2nd level review
- External decision is binding on MCO

GRIEVANCE PROCEDURE



Significant Member Incidents

- Clinical department receives and forwards critical and adverse incidents to counties and state.
- All adverse incidents are reported within 24 hours to state and counties.
- All incidents are monitored for follow-up and appropriate action.
- Clinical Director serves as six county HealthChoices project director

Utilization Task Force

- This task force was formed by the Corporation to interact with and coordinate efforts between the Corporation, Counties and MCO to analyze data from both clinical and financial perspectives
 - Proactive comprehensive quarterly analysis of trends in utilization, cost and penetration
 - Identify individuals that are high dollar and unit cases

Utilization Task Force

- Activities Continued...
 - Queries the MCO database for high dollar and unit cases
 - Each individual is then researched on the MCO's clinical records for reconciliation of services
 - Clinical department evaluates these records to verify appropriate level of care
 - Reports are then created and forwarded to MCO for response
 - Provider Profiling