

Policy/Procedure:	Quality Assurance & Performance Improvement
Reviewed and Accepted by:	John Migliore III & Brad A. Potter
Approved by:	John Migliore III
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Policy:

Bassett Community Health Navigation will take an active role in monitoring the quality of care management services provided by Bassett and its network partners. Periodic review and measurement of the process and outcome of the Health Home Program will assist in understanding the value of the overall program, the efficacy of any one component, and will also guide the program improvement process. Care management metrics will be assessed using information from HH-CMART and quality outcome metrics/Health Home Core Quality Measures for assessing the Health Home service delivery model. Bassett Community Health Navigation has established a continuous quality improvement program to collect and report on data that permits an evaluation of increased coordination of care and chronic disease management on individual-level clinical outcomes, experience of care outcomes, and quality of care outcomes at the population level.

Procedures:

A. Monthly QA Review of Care Management Records

- 1. Bassett CHN Quality Analyst will review at least 30 Member Care Management Records each month, apportioned by the number of Members currently enrolled with each CMA. Each month it will be ensured that the total cases reviewed include a combination of:
 - a. Standard Health Home Members, HARP & HH+
 - b. Opted-Out/Disenrolled Members

30 Case Reviews per month = 360 Case reviews per year
A yearly sample size of 360 Case Reviews per every 1300 Members yields a
Confidence Level of 95% with a Confidence Interval of +/- 4.39.

- 2. Bassett CHN Quality Analyst will complete 30 (or more) Monthly Audits to gauge policy adherence in the following areas:
 - Eligibility, Consents, Care Transitions, Continuity of Care, Transfers, & Plans of Care
 - Comprehensive Assessment & Person Centered Care Planning
 - Supporting Notes & Documentation, Billing Standards and Disenrollment

Note: Bassett CHN may also require that CMA's provide quality review spot checks (conducted internally) to be sent to BCHN Administration for review to policy adherence and timeliness of process changes to ensure network quality standards.



- B. Bassett CHN Quality Analyst will complete Care Management Record Reviews using the Bassett CHN Care Management Record/QA Review Tool to check each case for compliance with all current Bassett CHN, Federal, and NYS Policy and Guidance for Medicaid Health Home Services, Billing, and Quality Standards.
 - 1. If a QA Case Review Score is 89% or below, the Bassett CHN Quality Analyst will document required corrections and quality recommendations, which will be provided to Bassett CHN Team Leaders or Partnering Care Management Agency Supervisors when all monthly reviews are completed.
 - a. If a CHN /Care Manager has graded scores below 90% during two consecutive months, the Team Leader/Supervisor must create a training plan to assist the CHN/Care Manager in addressing needed changes to consistently meet scores above 90% and above.
 - 2. A graded score of 90-100% usually requires no further action, unless specified (not inclusive of monthly QA reporting corrections).
 - 3. Bassett CHN Quality Analyst will send a comprehensive Monthly QA Report, detailing the results of all QA Reviews completed, to the Bassett CHN Operations Manager by the 5th business day of following month
 - a. CHN/Partnering CMA staff must complete corrective actions and notify Bassett CHN Quality Analyst of completion by the 15th business day of the month.
 - b. Operations Manager will review results monthly with Bassett CHN Team Leaders.
 - 4. Bassett CHN Quality Analyst will send all completed Monthly QA Review Results to Bassett CHN Team Leaders and Partnering CMA Supervisors/Points of Contact by the 5th business day of the following month.
 - a. CHN/Partnering CMA staff must complete corrective actions and notify Bassett CHN Quality Analyst of completion by the 15th business day of the month.
 - b. If the CMA does not agree with Bassett CHN Quality Review finding(s), they can submit a request for review by emailing brad.potter@bassett.org. In addition, the CMA can request a meeting to further discuss the findings.
 - c. Operations Manager will review QA results with Partnering CMA's on a quarterly basis, or more frequently as needed.

C. Required Staff Training and HIT Access Audits

- 1. Bassett CHN Quality Analyst will maintain records of all staff training completed to ensure compliance with DOH & Bassett CHN Staff Training requirements.
 - a. Bassett CHN Quality Analyst will notify Bassett CHN Operations Manager and staff Team Leader/Supervisor of any outstanding training requirements not met by any staff.
- 2. Bassett CHN will conduct audits of HIT access & security levels for all Bassett CHN/CMA staff on a semi-yearly basis to ensure compliance with HIPPA and all Department of Health and Bassett CHN PHI/HIT policies.



a. Bassett CHN Quality Analyst will notify Bassett CHN Operations Manager and Systems Analyst of any findings in the course of auditing for corrective action to be taken.

D. Quality Site Visits with Care Management Agencies

- Bassett CHN Quality Analyst will conduct at least one site visit each year to review compliance
 with Bassett CHN Policy and Procedure requirements and facilitate the agencies partnership in
 Quality Assurance and Performance Improvement actions. These on-site reviews may include,
 but are not limited to:
 - a. Review of CMA Health Home Policy & Procedure
 - b. Review of current staff qualifications and required training compliance
 - c. Review of compliance with PHI/HIT security measures and audit of staff HIT access
 - d. Review of ability to provide 24/7 availability of Care Management services
 - e. Review of Health Home Marketing and Outreach efforts (to include ensuring effective Outreach to Homeless and Criminal Justice populations)
 - f. Review of QA Case Review findings and trends specific to each partnering agencies' performance.

E. Health Home Quality Management and Performance Improvement Program

- 1. Bassett CHN Quality Analyst will meet monthly with Bassett CHN Operations Manager and Management Team to review program performance metrics, overall QA Review results, and recommendations for Quality Improvement, and implement changes as needed.
- Bassett CHN will maintain a Quality Management Performance Improvement Committee (QMPIC) which will meet monthly to review to identify, address, and improve quality of performance.
 - a. The committee shall be composed of:
 - QMP Committee Chair (Bassett CHN Quality Analyst): facilitates committee meetings, reports on activities and findings of the Committee to leadership and/or management
 - ii. QMP Coordinator (Bassett CHN Operations Manager) designs, directs and oversees implementation of QMP projects to include review of data and performance measures, manage work plans, oversee performance improvement activities, and monitor progress.
 - iii. Various other entities that serve the Health Home population which should include: medical, clinical, technical, financial, Care Management Agencies, stakeholders such as PPS, housing providers, criminal justice, etc.
 (Must include Lead Health Home Administration staff)
 - iv. Feedback from members and family members to apply their input into QMP processes.



- v. Other subcommittees: Subcommittees/teams may be established in response to various QI activities.
- b. The QMP Committee shall include defining, overseeing and monitoring the objectives and goals of the QMPIC, which shall include:
 - Prioritizing performance improvement efforts utilizing strategic goals, aggregating and analyzing performance and benchmark data, and trend analysis
 - ii. identifying barriers and needed resources to support PI implementation
 - iii. monitoring performance improvement efforts for effectiveness
 - iv. making recommendations for changes in service provision or operations
 - v. Preparing written reports to leadership that include findings, actions, and outcomes of the Quality Management Program.
 - vi. Identify how negative outcomes will be addressed through the use of a Corrective Action Plan (CAP), a written document that clearly and objectively identifies:
 - areas where performance expectations and standards have not been met, including examples to clarify the patterns or severity of performance issues, and the impact of the unmet performance;
 - Review of Reportable Incidents and Fair Hearing Requests
 - root cause analysis;
 - expectations for improvement using measurable goals;
 - timeline for improvement to be reached;
 - assignment of tasks to appropriate staff;
 - the need for staff training or support;
 - expectations for reviewing progress including any barriers; and,
 - Sanctions that may be imposed if improvements are not made.

Note: Any audits (process, quality, or annual site visit) can result in a corrective action process (CAP). The CAP process is generally for information and is not punitive in nature. The corrective action process is designed to support the CMA through the process of resolving deficiencies as discovered during routine quality management processes.

Performance Improvement Plan will be issued for CMA's who fail to engage in the Corrective Action Process or who fail to resolve deficiencies in specified timeframes. CMA's will be placed on a formal Performance Improvement Plan (PIP). Bassett CHN Lead HH may impose sanctions, including suspension or termination, if they fail to comply with the Performance Improvement Plan. When determining the type of sanction to apply for violations of the Health Home Services Agreement and/or Bassett CHN Policies and Procedures, Bassett CHN Lead HH shall consider the following factors:

- Whether the violation was a first time or repeat offense
- The level of culpability of the CMA



- Whether the violation resulted in harm to a Health Home member or other person
- Whether the violation constitutes a crime under state or federal law
- 3. QMP Committee Chair (Bassett CHN Quality Analyst) will facilitate the communication processes of minutes, findings, goals/objectives, activities and progress of QMPIC to the Bassett CHN Health Home Administration, CMA Partners, and all network providers upon completion of regularly scheduled monthly meetings.
 - a. Bassett CHN Quality Analyst will retain and store all QMPIC documentation of activities in hard copy and within a shared Administrative folder.
 - b. Bassett CHN Quality Analyst will send QMPIC meeting minutes to CMA directors, supervisors, team leads and/or designee throughout the network. Each CMA will be required to review for overall performance data and to identify, address, and improve quality outcomes of health home members and network performance.

E. Additional Quality & Training Responsibilities

- 1. Bassett CHN Quality Analyst and Operations Manager will ensure ongoing review of Bassett CHN Policies & Procedures and training curriculum to improve staff and program performance.
 - a. Bassett CHN HH Policies must be reviewed and updated as changes occur in NYS Department of Health policy guidance, and as needed for Performance Improvement, within 30 days of DOH requirement.
 - Bassett CHN Quality Analyst and Operations Manager will ensure that as changes/updates are made to Policies, all Partnering CMAs are reviewed in subsequent HH/CMA Meetings, and training will be offered as needed
 - c. Bassett CHN will annually complete a network-wide training, on Quality Management and Performance Improvement, to improve CMA monitoring of the quality of care management services provided within our Health Home network.
 - d. Bassett CHN will reserve the right to request spot audit checks (See *Requirements of Partnering Care Management Policy*) from all CMA's, as necessary to ensure satisfactory compliance with quality requirements.

Related Forms & Documents:

- ♦ Bassett CHN QA Review Tool
- ♦ Bassett CHN Quality Management Performance Committee Minutes
- **♦ Bassett Quality Analyst Monthly Report**
- **♦ CAP & PIP Plans**