CalEQRO Highlights, Updates, and Opportunities

Gale Berkowitz, DrPH
Deputy Director, CalEQRO
CalQIC 2018
Session At-A-Glance

CalEQRO Updates

• Gale Berkowitz, DrPH, Behavioral Health Concepts, Inc.

Leading Practices in PIPs

• Amy McCurry Schwartz, Esq., MHSA, Behavioral Health Concepts, Inc.

DMC-ODS EQRO Updates and Toolkit

• Rama Khalsa, PhD, and Tom Trabin, PhD, Behavioral Health Concepts, Inc.
CalEQRO Updates

Highlights from FY16-17 Annual Report
Status of FY17-18 Reviews
What’s New for FY18-19
CalEQRO Resources
CalEQRO FY17-18 Review Schedule
Highlights from FY16-17 Annual Report
Thank you!

Acknowledgments

• Department of Health Care Services, Mental Health Services Division

• 56 MHPs and staff, volunteers, contract providers, and many others.

• All of the consumers and family members
Rise in the number of Medi-Cal eligibles in comparison to the growth in California’s population:  
A widening and significant gap

<table>
<thead>
<tr>
<th></th>
<th>CY12</th>
<th>CY13</th>
<th>CY14</th>
<th>CY15</th>
</tr>
</thead>
<tbody>
<tr>
<td>California Population</td>
<td>37,881,357</td>
<td>38,239,207</td>
<td>38,567,459</td>
<td>38,907,642</td>
</tr>
<tr>
<td>California Population Change</td>
<td>0.9%</td>
<td>0.9%</td>
<td>0.9%</td>
<td></td>
</tr>
<tr>
<td>Medi-Cal Eligibles</td>
<td>7,956,900</td>
<td>8,606,311</td>
<td>9,618,620</td>
<td>10,071,073</td>
</tr>
<tr>
<td>Medi-Cal Eligibles Change</td>
<td>8.2%</td>
<td>11.8%</td>
<td>4.7%</td>
<td></td>
</tr>
<tr>
<td>Medi-Cal Eligibles w/ACA</td>
<td></td>
<td></td>
<td></td>
<td>13,116,379</td>
</tr>
<tr>
<td>Medi-Cal Eligibles Change w/ACA</td>
<td></td>
<td></td>
<td></td>
<td>36%</td>
</tr>
<tr>
<td>Medi-Cal SMHS Beneficiaries</td>
<td>469,651</td>
<td>485,798</td>
<td>495,912</td>
<td>485,261</td>
</tr>
<tr>
<td>Medi-Cal SMHS Beneficiaries Change</td>
<td>3.4%</td>
<td>2.1%</td>
<td>-2.1%</td>
<td></td>
</tr>
<tr>
<td>Medi-Cal SMHS Beneficiaries w/ACA</td>
<td></td>
<td></td>
<td></td>
<td>616,611</td>
</tr>
<tr>
<td>Medi-Cal SMHS Beneficiaries Change w/ACA</td>
<td></td>
<td></td>
<td></td>
<td>24.3%</td>
</tr>
</tbody>
</table>
Eligibles vs. Beneficiaries Trend, Statewide, CY12-15:
While Eligibles continue to increase, Beneficiaries lag.

Figure 2-1a: Statewide Eligibles and Beneficiaries Served, CY12-15
Penetration Rates Continue to Decline

Figure 3-1a: Overall Penetration Rates by Region, CY12-15
Timeliness Reporting:
MHPs are tracking the two HEDIS measures—first appointment timeliness and outpatient follow-up after inpatient discharge—in steadily greater numbers.

Figure 2-1: Timeliness Reporting Rates—Statewide 3-Year Trend
Range of Timeliness Standards:
Most MHPs met their standard. Most noticeable improvements were for timeliness for first appointment, but least likely for psychiatry appointments.

<table>
<thead>
<tr>
<th>MHP Size</th>
<th>First Appointment Standard in Days (Mean = 15) (Median = 14)</th>
<th>First Psychiatry Appointment Standard in Days (Mean = 27) (Median = 30)</th>
<th>Inpatient Follow-up Standard in Days (Mean = 7) (Median = 7)</th>
<th>Urgent Appointment Standard in Days (Mean = 1) (Median = 1)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Minimum</td>
<td>Maximum</td>
<td>Minimum</td>
<td>Maximum</td>
</tr>
<tr>
<td>Statewide</td>
<td>3</td>
<td>60</td>
<td>10</td>
<td>60</td>
</tr>
<tr>
<td>Large</td>
<td>8</td>
<td>30</td>
<td>15</td>
<td>30</td>
</tr>
<tr>
<td>Medium</td>
<td>3</td>
<td>15</td>
<td>10</td>
<td>30</td>
</tr>
<tr>
<td>Small</td>
<td>7</td>
<td>60</td>
<td>14</td>
<td>45</td>
</tr>
<tr>
<td>Small-rural</td>
<td>7</td>
<td>30</td>
<td>15</td>
<td>60</td>
</tr>
</tbody>
</table>
Key Components:
Similar to last year, among the three key component categories, the access to care ratings were highest.

Figure 3-1: Statewide Compliance by Key Components of Access, Timeliness, and Quality for FY16-17
## Range of PIP Topics

<table>
<thead>
<tr>
<th>PIP Topic</th>
<th>PIP Focus</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access To Care</td>
<td>Improved Access to Specific Service or Clinic</td>
</tr>
<tr>
<td>Access To Care</td>
<td>24/7 Access Line</td>
</tr>
<tr>
<td>Timeliness of Care</td>
<td>Timeliness to Appointment</td>
</tr>
<tr>
<td>Timeliness of Care</td>
<td>No-show Rates</td>
</tr>
<tr>
<td>Quality of Care</td>
<td>Youth and Children</td>
</tr>
<tr>
<td>Outcomes of Care</td>
<td>Wellness and Recovery</td>
</tr>
</tbody>
</table>
Status of PIP Submissions

Figure 4-6: FY16-17 Clinical PIP Submissions

- Large: 8 Active & Ongoing, 1 Completed, 1 Concept Only, 4 Inactive
- Medium: 11 Active & Ongoing, 1 Completed, 1 Concept Only, 3 Inactive
- Small: 3 Active & Ongoing, 3 Completed, 4 Concept Only, 1 Inactive
- Small-rural: 4 Active & Ongoing, 5 Completed, 1 Concept Only, 3 Inactive

Figure 4-7: FY16-17 Non-Clinical PIP Submissions

- Large: 7 Active & Ongoing, 2 Completed, 1 Concept Only, 1 Inactive, 2 Determined Not a PIP
- Medium: 9 Active & Ongoing, 2 Completed, 2 Concept Only, 3 Determined Not a PIP, 1 No PIP Submitted
- Small: 6 Active & Ongoing, 2 Completed, 2 Concept Only, 1 Determined Not a PIP, 1 Inactive
- Small-rural: 4 Active & Ongoing, 3 Completed, 3 Concept Only, 4 Determined Not a PIP, 1 Inactive
Information Systems:
Very few MHPs are considering new systems

<table>
<thead>
<tr>
<th>System Replacement Status</th>
<th>Large</th>
<th>Medium</th>
<th>Small</th>
<th>Small-rural</th>
<th>Total</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>No plans to replace current system (in place more than 5 years)</td>
<td>5</td>
<td>6</td>
<td>11</td>
<td>7</td>
<td>29</td>
<td>52%</td>
</tr>
<tr>
<td>Considering a new system</td>
<td>2</td>
<td>2</td>
<td></td>
<td></td>
<td>4</td>
<td>7%</td>
</tr>
<tr>
<td>New system selected, not yet in implementation phase</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td>1</td>
<td>2%</td>
</tr>
<tr>
<td>Implementation in progress</td>
<td>3</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>9</td>
<td>16%</td>
</tr>
<tr>
<td>New system in place (use this for systems installed in past 5 years)</td>
<td>2</td>
<td>4</td>
<td>1</td>
<td>6</td>
<td>13</td>
<td>23%</td>
</tr>
<tr>
<td>Total by MHP Size</td>
<td>13</td>
<td>15</td>
<td>14</td>
<td>14</td>
<td>56</td>
<td>100%</td>
</tr>
</tbody>
</table>
Themes and Findings from the 2016-17 CalEQRO Annual Report

- Pressures from increasing demand
- Recruitment and retention pressures
- Coordination and collaboration as essential to promoting access, timeliness, quality, and outcomes
- Timeliness improvements and lags
- Variability in technology systems
- Trends toward data-driven and evidence-based practices
- Challenges measuring consumer outcomes
- Evolving the continuum of care
- Moving toward a broader view of wellness and recovery
- Power of consumer voice
Status of FY17-18 Reviews

As of March 8, 2018

- 39 Reviews Completed (of 56)
- Several were rescheduled due to fires
- 26 Final MHP Reports Submitted
- 4 DMC CalEQRO reviews in FY17-18
CalEQRO New Website!

www.caleqro.com
CalEQRO Resources

Check out the PIP Library

Performance Improvement Project (PIP) Library

Review Performance Improvement Projects (PIPs) examples and best practices from counties around California.

PIP Video Trainings

CalEQRO’s Performance Improvement Project (PIP) video series guides county staff through the PIP process.

- **BHC PIP 101 #1**: Bringing Ideas to Successful PIP Concept
- **BHC PIP 101 #2**: From Idea to PIP - SUD Example
- **BHC PIP 101 #3**: Tips and Common Mistakes
What’s New for FY18-19

- Comings and Goings on the CalEQRO team
- Network Adequacy
- SB1291
- Additional trainings during summer 2018
What’s New for FY18-19

- Integration with DMC EQRO reviews
  - Estimates 17-20 reviews in 18-19 depending on start dates
  - There are two side-by-side reviews scheduled to continue testing this option.
  - Note that even for side-by-side reviews, two completely separate reports will be required. Counties interested should share this with Rama Khalsa or Tom Trabin.
CalEQRO FY18-18 Review Schedule

- Draft schedule to be shared during CalQIC 2018
- Review internally
- Please connect with designated CalEQRO lead reviewer with questions.
Questions?