

2020 Quality Plan

Description	Scope	Goal(s)
Quality Monitoring/Improvement		
Assessment, Care Planning, Service Delivery	P, FCP, FC	A composite score of >90% for all indicators reviewed.
Long Term Care Functional Screens	P, FCP, FC	Monitor and maintain the completeness, accuracy, and timeliness of functional screens.
Monitoring of Home and Community Based Settings (HCBS) Rule	P, FCP, FC	100% of members living in settings that meet the HCBS rule.
Care Management for Vulnerable High Risk Members (VHRM)	P, FCP, FC	a) 100% accuracy in the identification of members who meet the DHS definition of "Vulnerable High Risk". b) 100% of care plans address supports and appropriate interventions are documented on the MCP to mitigate risk.
Satisfaction – Member	P, FCP, FC	a) Achieve thresholds for DHS pay-for-performance (FCP & FC). b) Achieve high overall member satisfaction scores and 5 star member satisfaction ratings on the DHS MCO Scorecard. c) Reduce rates of voluntary disenrollment due to lack of satisfaction.
Satisfaction – Caregiver	P	Improve caregiver satisfaction.
Satisfaction – Provider	P, FCP, FC	Improve provider satisfaction.
Member Incidents	P, FCP, FC	a) >90% reporting of incidents b) >90% timely reporting of incidents
Appeals and Grievances	P, FCP, FC	a) 100% of appeals will be processed timely b) ≥ 50% resolution rate will occur with appeals c) 100% of grievances will be processed timely d) ≥ 90% resolution rate will occur with grievances
Service Delivery – Provider Access	P, FCP, FC	100% compliance with provider access standards
Service Delivery - Verification that Services were Provided	P, FCP, FC	Ensure that 100% of services authorized were provided and assessed for effectiveness
Service Delivery - Provider Quality	P, FCP, FC	a) Caregiver background checks; b) Education/skills training for individuals who provide specific services c) Reporting of member incidents to Community Care d) Compliance with DQA standards, where applicable e) Appropriateness of staff providing medical services
Utilization Management	P, FCP, FC	a) Monitor and detect underutilization and overutilization of services. b) Assess the quality of care and services furnished to members. c) Provide key information to ensure the members' individual outcomes are supported in an efficient and cost effective manner.
Participation in the Quality Management Program (QMP)	P, FCP, FC	Increase participation in the QMP by members, community representatives of the target populations, staff, and provider
Restrictive Measures	P, FCP, FC	Ensure appropriate use of approved restrictive measure
Competitive Integrated Employment (CIE) Pay for Performance (P4P)	FCP, FC	Maintain/Increase of the number of members in CIE between the 2019 P4P cohort and the 2020 P4P cohort
DHS Quality Indicators		
Care Management Staff Turnover	P, FCP, FC	a) Decrease Care Team Turnover b) Maintain/Increase "Care Team Characteristic" Star Rating. c) Maintain staff turnover at or below the MCO average.
Influenza Vaccinations	P, FCP, FC	a) Increase influenza vaccination rate for members to >90% b) Increase influenza vaccination rate for staff to >80%
Pneumococcal Vaccinations	P, FCP, FC	Increase the pneumococcal vaccination for members to >90%
Dental Visits	P, FCP	Ensure appropriate access to dental services
Formal & Informal Projects		
Advance Care Planning (DHS non-clinical PIP)	P, FCP, FC	Decrease invalid advance directive documents of new enrollees
Opioid Education and Wellness (CMS CCIP, DHS clinical PIP)	P, FCP, FC	a) Assessment and education of members meeting Morphine Equivalent Dosage (MED) that would place them at risk of a potential opiate overdose. c) Support member access to an opioid antagonist to reduce the risk of Overdose.
Reducing antipsychotic medication	P, FCP	Decrease or discontinue anti-psychotic medications
Increase/monitoring of dementia screening	P, FCP, FC	Continue to increase/maintain dementia screening.