



Northeast Quality Improvement Program: Accomplishments and Opportunities

The Magellan Northeast Care Management Center conducts an annual evaluation of its quality improvement (QI) program with the overall goal of working with providers to deliver high-quality care and service to members. Looking at 2010 performance data, we reviewed components of our QI program including the attainment of quality goals and the identification of trends and opportunities for improvement.

The Northeast Care Management Center's 2010 Quality Work Plan contained a number of key goals, many of which were accomplished during the year.

Key Accomplishments

Key accomplishments during this evaluation period included:

1. HEDIS ambulatory follow-up rates were strong overall.
2. Readmission rates showed a statistically significant improvement from 9.2 percent to 7.4 percent.
3. The average speed of call answer results for 2010 improved for all accounts.
4. The call abandonment rate continued to be strong in 2010 and exceeded all account standards.
5. Telephone service level was strong and exceeded all account standards.

Program Focus for 2011

Based on the review of the 2010 program goals, an increased understanding of barriers to improvement, and attention to lessons learned during the year, the following primary areas of focus for 2011 include:

1. Improve the rate of mental health seven-day ambulatory follow-up post discharge from inpatient care (HEDIS).
2. Improve the rate of *Initiation and Engagement of Alcohol and Other Drug Dependence (AOD) Treatment* (HEDIS).
3. Improve the rate of *Acute and Continuation Phase Treatment for the Antidepressant Medication Management* HEDIS measures.
4. Improve the rate of *ADHD Initiation and Continuation and Maintenance* HEDIS measures.
5. Decrease the rate of readmission to acute inpatient care within 30 and 60 days of discharge.
6. See improved results on the *Inpatient Facility Patient Safety Survey* for the measurements pertaining to use of restraints and seclusion, discharge summary and labs sent to the primary care physician (PCP), and coordination of care across levels of care at discharge.
7. Continue to demonstrate the effectiveness of the intensive care management (ICM) program via use of the SF-BH outcomes measurement tool follow-up data:
 - a. Engagement rates (percent of members enrolled of those pursued) greater than or equal to 90 percent
 - b. Planned discharges greater than or equal to 85 percent
 - c. Average completed SF-BH greater than or equal to two per discharged member
 - d. Length of stay in ICM program less than or equal to 180 days.
8. Improve PCP/behavioral health provider communication.

9. Improve member and provider satisfaction results through clinical and service improvements.
10. Reduce repeat contacts and increase first-contact resolution.
11. Through Med Psych/Health coaching, 64 percent of members will have a minimum of a 5-point increase in their *Mental Health* component score (SF-BH).

We look forward to continuing to collaborate with you on these efforts. You can obtain additional information regarding the QI program by sending an email to Edward Martin, Ph.D., director of quality improvement, at EMartin@MagellanHealth.com.