

# Investing in Quality: Putting Your Money Where Your Values Are

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# Quality Issues

- What are the current national initiatives?
- By what method does clinical research become standard in clinical practice?
- What is the role of managed care in quality improvement?

# Alliance Behavioral Care

- MBHO owned by the Department of Psychiatry, University of Cincinnati
- Founded 1990
- Currently manages 150,000+ lives
- No medical necessity reviews

# Developmental Stages of Managed Care

- Managed Access
- Managed Benefits
- Managed Care



- Managed Outcomes/Quality

# IOM Six Aims for Improving American Health Care

Health Care should be:

- **Safe** – avoiding injuries from care that is intended to help them
- **Effective** – providing services based upon scientific knowledge and avoiding those not likely to benefit
- **Patient-centered** – care that is respectful and responsive to individual patient preferences, needs, values, and includes patient values in clinical decision making

# IOM Six Aims for Improving American Health Care

Health Care should be:

- **Timely** – reducing waits and sometimes harmful delays for those who receive and give care
- **Efficient** – avoiding waste, in particular - of equipment, supplies, ideas and energy
- **Equitable** – care that does not vary in quality due to personal characteristics (gender, ethnicity, geographic location, or socio-economic status)

# Practice Standards/Guidelines

- Practice Standards- statements of belief, based on clinical evidence, about what constitutes good practice
- Practice Guidelines-A description of specific behaviors that ensure implementation of a practice standard
  - NCQA requires the adoption and dissemination of practice guidelines

# Implementing Practice Standards

- Can use control/bureaucratic methods
  - Assumes that you have power
  - Is administratively expensive to implement
  - Poorly received by providers and patients (worse than formularies!)
  - Conflicting guidelines by discipline

# Implementing Practice Standards

- Can use a market-based approach
  - Does not require power
  - Potentially increases medical loss ratio, unless medical cost offset occurs
  - Administratively less expensive
  - Popular with providers
  - Rewards providers who provide quality based on evidence

# Alliance Behavioral Care Practice Standards

- I. If a patient has a diagnosis of Major Depression and has received 6 treatment sessions in the ABC network; and has not been seen by a psychiatrist nor been prescribed antidepressant medication; and there is minimal or no improvement in symptoms; then the patient will be referred for a psychiatric evaluation.

# Alliance Behavioral Care Practice Standards

- II. If an ABC member is hospitalized, at discharge the patient must have:
  - An ambulatory appointment with a credentialed provider within 7 working days
  - An emergency phone number for this provider;
  - ABC case management follow-up

# Alliance Behavioral Care Practice Standards

- III. All members under the age of 18 who are receiving care in the ABC network should complete a family visit (90846/90847) within the initial 6 sessions of treatment

# The Project

- *Baseline data (1999):* 25% had at least one family visit in first 6 sessions
- *Initial Barrier analysis:*
  - Family visits might actually be that low;
  - Providers might avoid the 90847 code, as some insurances don't cover family therapy
- *Intervention:* Letter to all network providers; article in provider newsletter

# The Project

- *Second Measure (2000)*: Increase to 45.1%
  - Comparable to national averages
  - Exceeded 2000 goal (40%), fell short of 2001 goal (60%) and 2002 goal (80%)
- *Barrier Analysis*- reimbursement was low relative to amount of work and time required
- *Intervention*: Increase reimbursement 25% above previous level

# The Project

- *Third Measurement (January 2001 to September 2001): 84.2% had at least one family visit in first 6 sessions.*
- *Did this intervention improve quality?*

# Other Findings

- Social workers had a lower incidence of family visits than psychiatrists or psychologists
- Adolescents had fewer family visits than did children
- Social workers treated a higher proportion of adolescents, which may explain the above finding

## Other Initiatives

- “Direct Access Visits”- pays a 25% bonus to providers who see members within 7 working days of discharge, or who see members with urgent clinical issues within 1 working day
- Required special coding to trigger payment
- Has not had a significant impact on post-hospital follow-up