



New Hampshire Medicaid Care Management Quality Performance Report

Evaluation Community Mental Health Directed Payment – 2021

A Report Prepared by the Medicaid Quality Program
Division of Medicaid Services
New Hampshire Department of Health and Human Services

April 2021

*The Department of Health and Human Services' Mission is to join communities and families
in providing opportunities for citizens to achieve health and independence*

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Overview

Introduction

On April 2, 2021 the Center for Medicare and Medicaid Services (CMS) approved New Hampshire's proposal for a directed payment for a uniform dollar increase for:

- Community mental health programs for assertive community treatment services;
- Mobile crisis response services;
- Specialty residential services;
- Same day/next day access upon hospital/ designated receiving facility discharges and weekly thereafter for up to 90 days post-discharge; and
- Step down community residence beds for individuals dually diagnosed with serious mental illness and development disabilities.

NH Managed Care Quality Strategy

The NH Medicaid Care Management Quality Strategy includes a broad objective related to monitoring the access to care and quality of care for members receiving services to treat mental health conditions. Monitoring associated with the Directed Payments aligns with these existing activities associated with objective #7.4, *Conduct ongoing monitoring of access to care and quality of care for members receiving services to treat mental health conditions*. Monitoring associated with this section of the quality strategy includes monitoring over 50 quarterly and annual performance measures related to access and quality of care. They include measures from the CMS Core Sets, HEDIS, and service utilization measures.

The requested Fee Service Arrangement will advance the goals of the New Hampshire Quality Strategy by improving Community Mental Health Program payments which will ensure and promote continued access to care.

Evaluation Measures, Baselines and Performance Targets

The measures and performance targets below outline how the state will advance goals and objective in the quality strategy associated with the directed payment.

Measure Name	Baseline Year	Baseline Statistic	Performance Target
Members receiving Community Mental Health Services who were discharged from New Hampshire Hospital or Designated Receiving Facility and readmitted within 30 calendar days*	CY 2019	6.4%	4.4%
Members receiving Community Mental Health Services who were discharged from New Hampshire Hospital or Designated Receiving Facility and readmitted within 90 calendar days*	CY 2019	15.5%	13.5%
Follow-up after hospitalization for mental illness: 7 Days of discharge	CY 2017	63%	65%
Follow-up after hospitalization for mental illness: 30 Days of discharge	CY 2017	80.2%	82.2%

* Lower Performance is desired.

Evaluation Methodology

The state's evaluation methodology utilizes a simple comparison of performance measure rates (calculated annually) with established performance targets. Performance targets represent a standard 2% increase in performance from the baseline statistic.

For evaluation report the state conducts an analysis to determine:

- If the performance target is met;
- The directionality of the performance trend; and
- If the trends represent statistically significant changes by evaluating overlapping 95% confidence intervals.

In the event that the performance target is not met, New Hampshire conducts quasi-root cause analysis of the performance period to determine potential:

- Impact of the intervention on the performance rate;
- Common cause variation related to performance rate; and
- Special cause variation related to the performance rate.

All findings are discussed with program managers for potential course correction and potential future changes to future directed payment applications.

Evaluation

Readmissions to NH Hampshire Hospital and/ or Designated Receiving Facility

Figure 1-1: Readmissions to NH Hospital and/or DRF within 30 Days for Members Receiving Community Mental Health Center Services

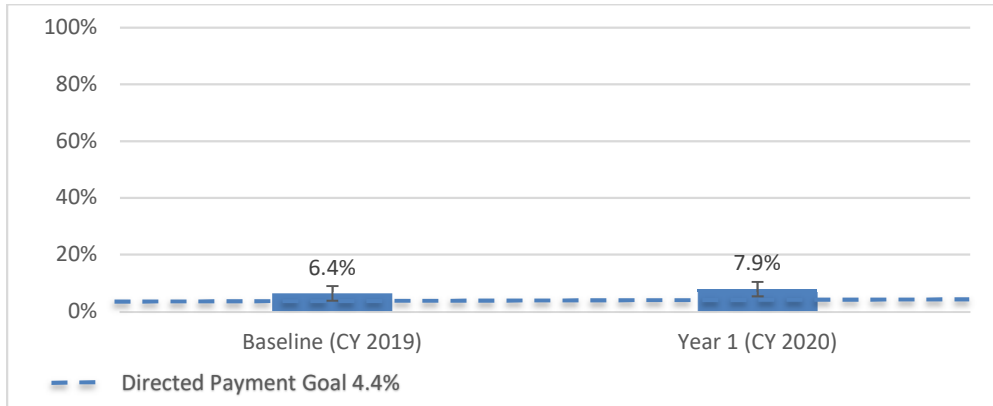
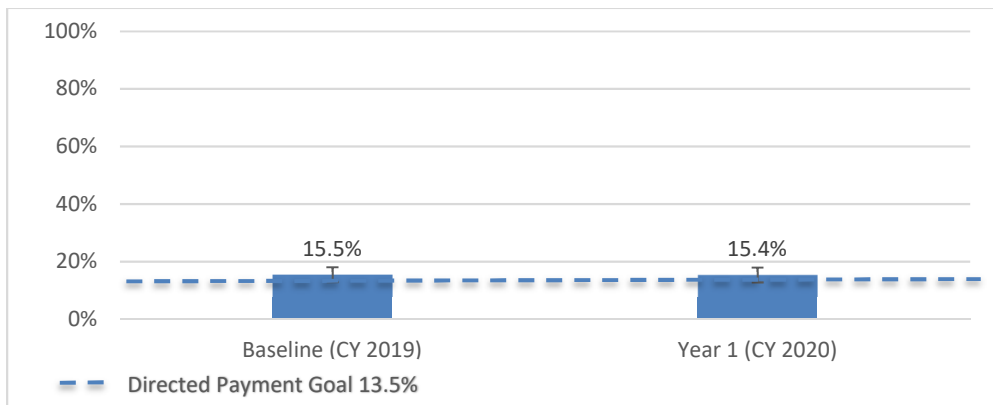


Figure 1-2: Readmissions to NH Hospital and/or DRF within 90 Days for Members Receiving Community Mental Health Center Services



Analysis: Calendar year 2020 data showed an increase of 1.5% of members readmitted to NH Hospital or DRFs within 30 days and no significant change for readmissions within 90 days.

The changes in 30 and 90 day readmissions rates in calendar year 2020 were consistent at both the state operated NH Hospital as well as the Designated Receiving Facilities located throughout the state.

While the early results did not meet either goal, they represent only six months of performance for the “same day/next day access upon hospital/designated receiving facility discharges” directed payment that began on 7/1/20.

While the readmission rates are too early to evaluate the success of the program, the evaluation provides an opportunity to review early utilization of the program. From 7/1 to 12/31/2020, there were 505 NHH/DRF discharges of which 237(46.9%) achieved at least the same day/next day visit. 30 (6.9%)

of the discharges in the period achieved same day/next day CMHC visits plus additional weekly visits (up to 90 days). These data represent an opportunity for NH to course correct by focusing on improving the program implementation. Efforts include the production of regular program utilization and readmission rate reports to be regularly discussed with the CMHCs for the identification of promising practices and opportunities for improvement. In the early stages of this practice, the Department identified gaps in notifying CMHCs when a member was discharged from a DRF and is currently determining if a new event notification system could be used to address this barrier.

Improving utilization rates for the program will then allow New Hampshire to maximize the impact on reducing rates of readmission to NH Hospital or DRFs.

Finally, the impact of the Public Health Emergency on the readmissions rates are unknown but could be a factor in the 30 and 90 day readmission rates.

Follow Up After Hospitalization for Mental Illness

Figure 1-3: Follow Up After Hospitalization for Mental Illness – 7 Days

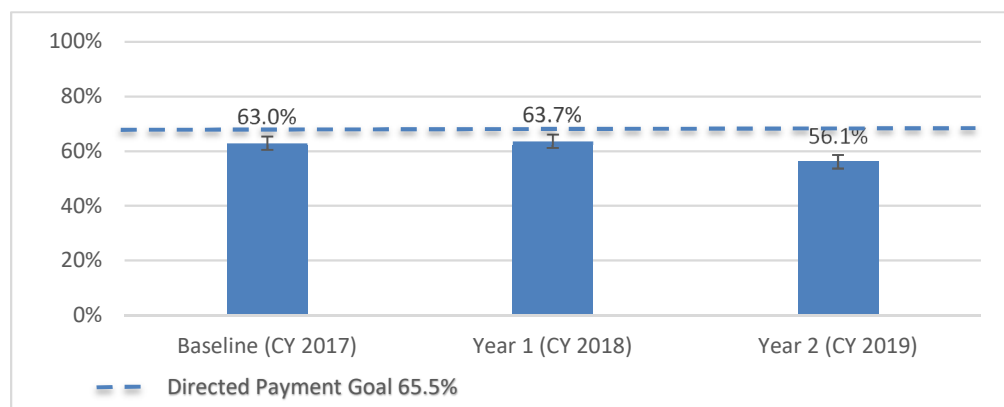
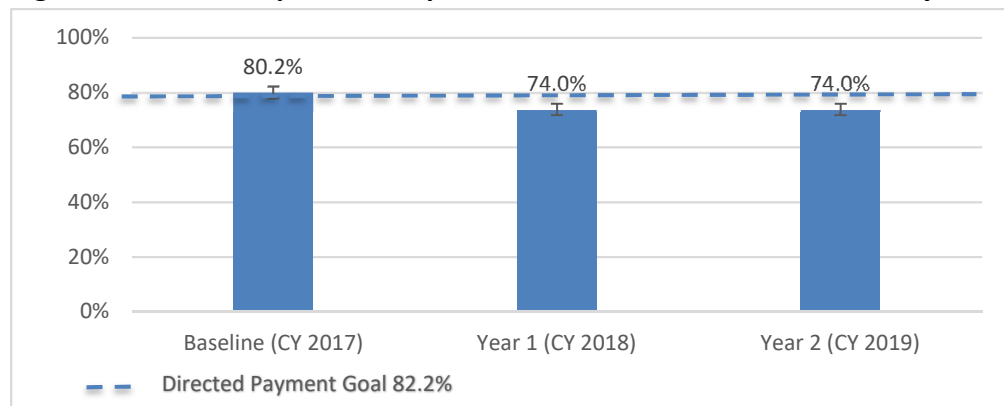


Figure 1-4: Follow Up After Hospitalization for Mental Illness – 30 Days



Analysis: Calendar year 2019 data did not meet the directed payment goals. While 30 day follow appointments showed no change there was a decrease of 7.6% of follow-up appointment within 7 calendar days after hospitalizations for mental illness.

While the results represent data periods inclusive of CMS approved directed payment prior to 1/1/2020, they do not include the “same day/next day access upon hospital/designated receiving facility discharges” directed payment that incentivizes follow-up appointments after discharge for mental illness. Data for calendar year 2020 for this CMS Core Set measure will be available in December 2020. These data will provide NH early results to consider the directed payment’s impact on the quality rate.