

Thinking Outside the Box – Outlier Management Initiatives for 2012

VSHP Community Case Management
Outlier Analysis Initiative
December 20th, 2011



Today's Presenters

Host - Melissa Isbell, Director of Provider Relations

Speaker/Panelist - Cheryl McClatchey, LSPE,
Manager, Behavioral Health

Speaker/Panelist - Ron Melzer, Ph.D., BH QA Director

Speaker/Panelist - Bo Turner, VSHP BH
Administration



Background

- We identified CCM as a \$\$\$ item
- There appeared to be little consistency
- We looked at a pre-authorization system
- Based on feedback from TAMHO, DMH and providers we decided to:
 - Focus on outliers
 - Use a combination of audits and claims data review



Data Driven Analysis

- We reviewed eighteen months of data
- Trends we found included:
 - Approximately 4,000 members with no services other than Level II CCM (\$4.8 million in cost)
 - Among those with 20 or fewer CCM encounters, 22% had no medical management or other therapies
 - CCM overall had a ratio as high as 3.8/1 compared to other traditional services; some as high as 15/1
 - Little or no correlation to reduced inpatient



Outlier Indicators

- Coordination of services or reasonable expectations that members will receive other services
- Ordered by a licensed clinician providing care for the member



Process

- Pre-audits and continued outlier analysis 4th quarter 2011
- Meetings with the TennCare Bureau, TAMHO and TDMH
- Training of providers
 - Webinar
 - Individual as requested
- Ongoing analysis (claims and audits) starting January 1, 2012
- Re-education and provider meetings
- Recoupment (for claims identified as not part of the TennCare Benefit in July for April claims)
- Appeal rights



Questions?

Need Individualized Training?

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Closing Remarks

Thank You!

