Oklahoma Quality Improvement
Monthly Report
For
August 2010

September 28, 2010

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A total of 1300 records from June 2010 were requested by APS on July 20, 2010.

First Level Review Activities during August 2010

There were no technical denials for the sample month of May 2010. There were 62 technical denials for the sample month of June 2010. Twelve hundred and forty-one (1241) records from the May 2010 sample were closed after first level review. Twelve hundred and three (1203) records from the June 2010 sample were closed after first level review.

Second Level Review Activities during August 2010

At this review level, the primary workload during August 2010 involved records requested from the May 2010 and June 2010 samples.

A summary of second level findings appears in the table below. Second level review activities for the April 2010 sample are now complete, and are included as a comparison.

Second Level Finding	***Sample Month***			
	Apr 10	***May 10***	***Jun 10***	***Jul 10***
Billing Error	7	10	7	0
Denial - Continued Stay - Initial	0	0	0	0
Denial - Level of Care - Initial	18	10	6	0
Admission Denial - Initial	8	2	2	0
Admission Denial - Reversed	0	0	0	0
Admission Denial - Upheld	0	0	0	0
Denial - Level of Care - Reversed	0	0	0	0
Denial - Level of Care - Upheld	0	0	0	0
Quality - Initial	73	36	7	0
Quality - Reversed	13	4	0	0
Quality - Upheld	0	0	0	0

Third Level Review Activities during August 2010

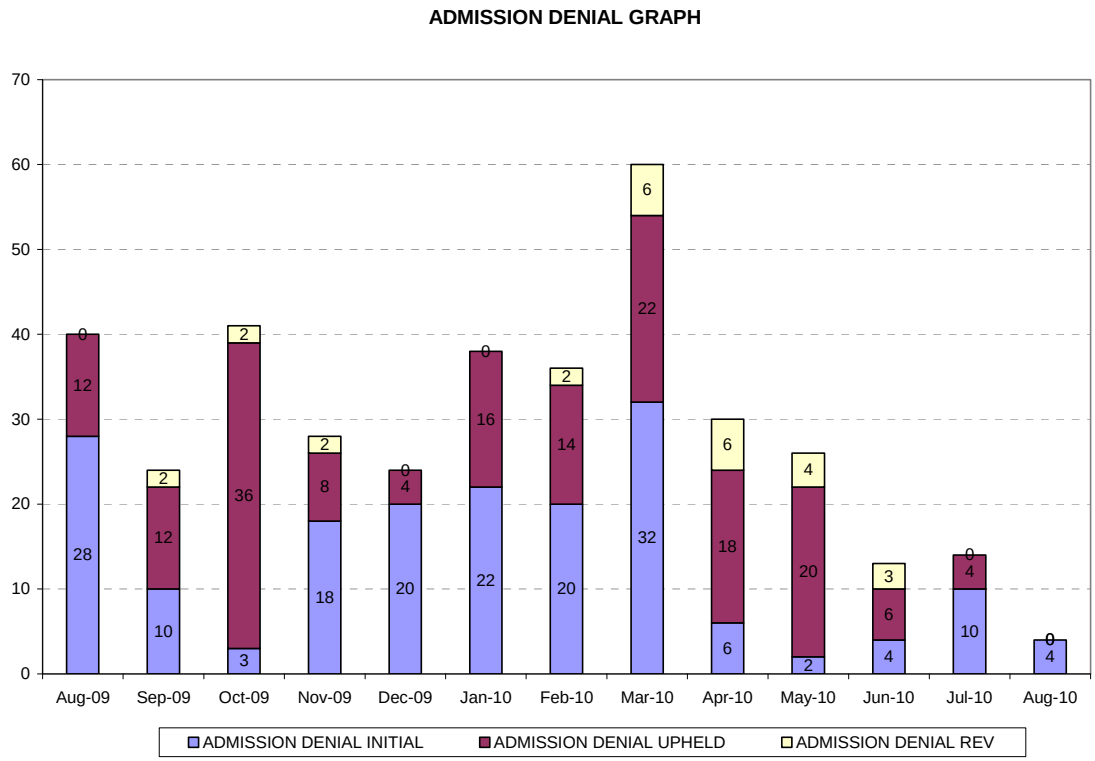
At this review level, the primary workload during August 2010 involved records requested from the April 2010, May 2010, and June 2010 samples.

A summary of third level findings appears in the table below. Third level review activities for the March 2010 sample are now complete, and are included for comparative purposes.

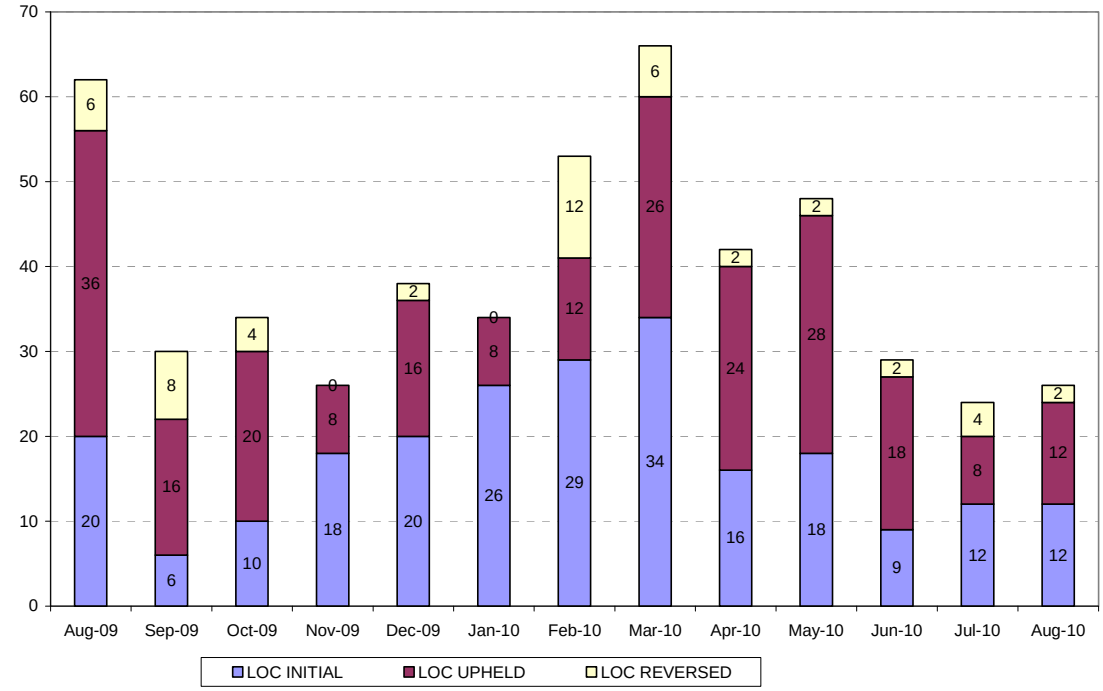
Third Level Finding	Sample Month			
	Mar 10	Apr 10	May 10	Jun 10
Billing Error	0	1	0	0
Denial - Continued Stay	0	0	0	0
Denial - Level of Care	4	0	2	0
Admission Denial - Initial	2	4	0	0
Admission Denial - Reversed	0	0	0	0
Admission Denial - Upheld	0	0	0	0
Denial - Level of Care Reversed	0	0	0	0
Denial - Level of Care Upheld	0	0	0	0
Quality - Initial	12	38	9	0
Quality - Reversed	2	11	4	0
Quality - Upheld	0	0	0	0

Findings for Letter Generation during August 2010

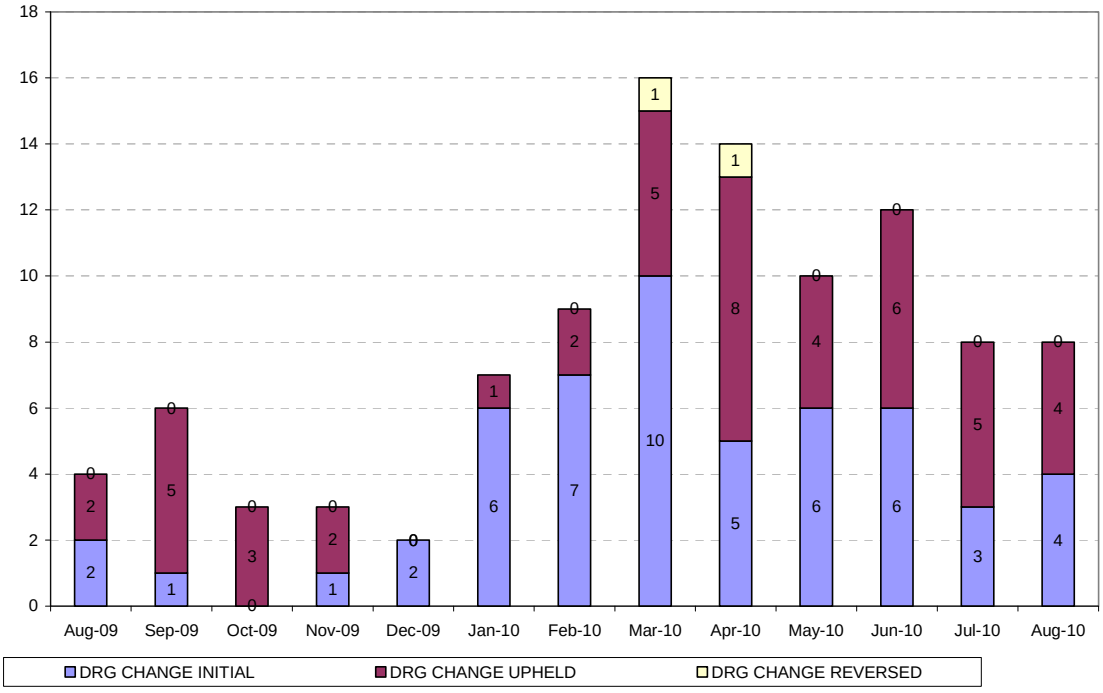
The following graphs depict letters mailed for each month, associated with their respective finding. Decisions that were upheld or reversed are included as well.



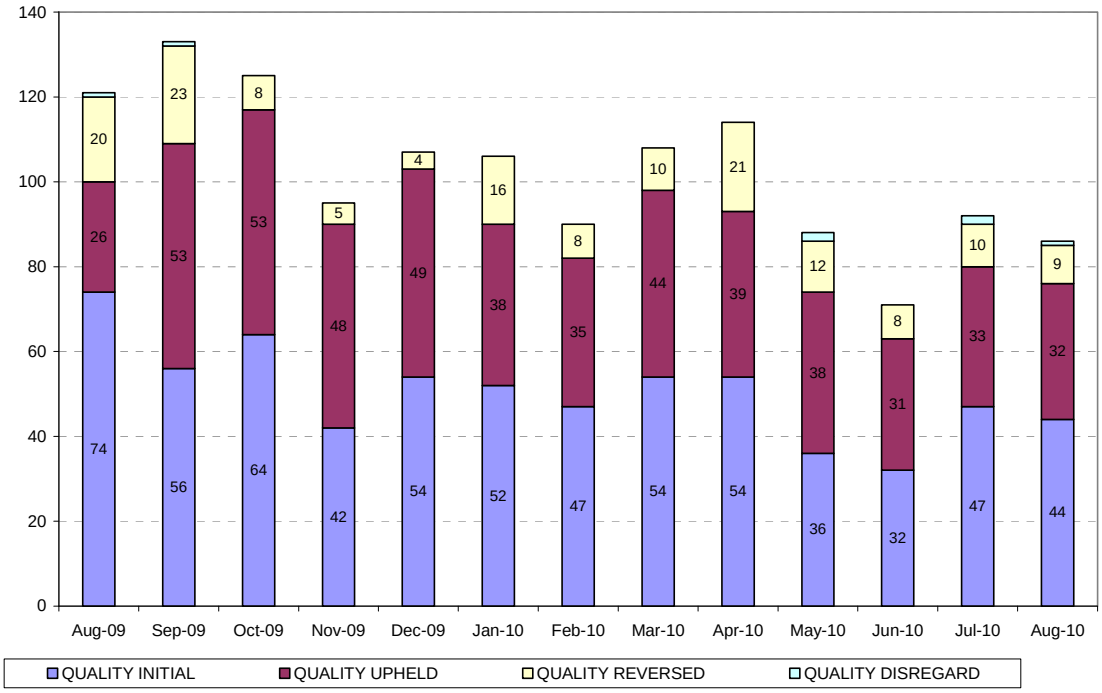
LOC DENIAL GRAPH



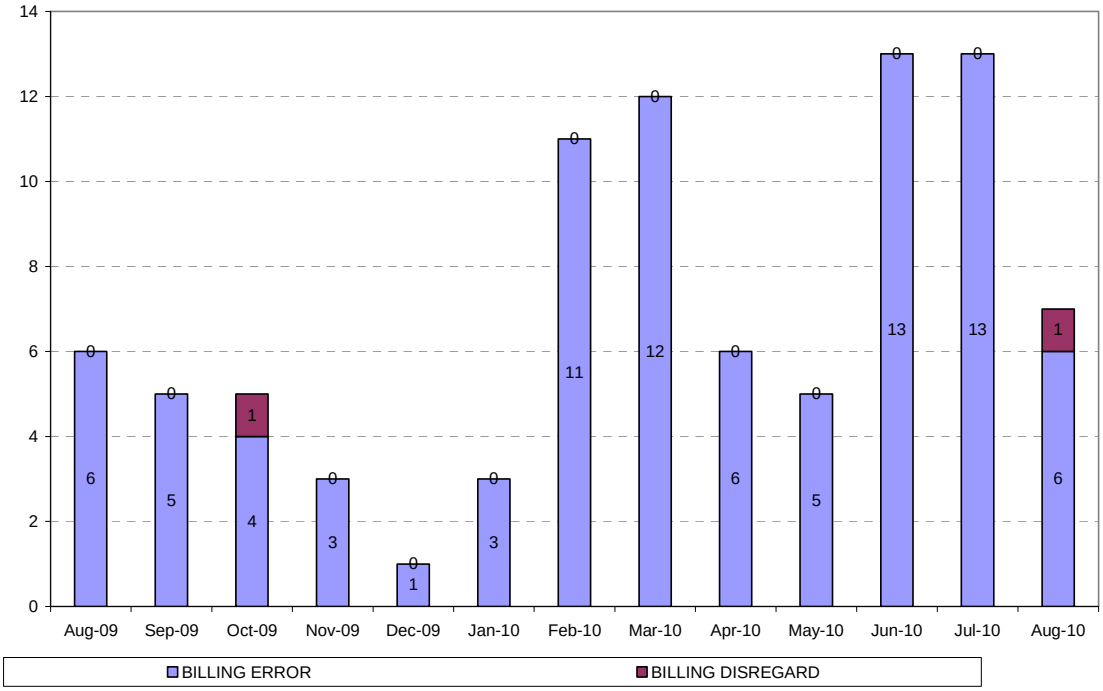
DRG CHANGE GRAPH



QUALITY LETTERS GRAPH



BILLING ERROR GRAPH



A table of activities and findings for inpatient cases appears behind the narrative portion of this report.

APS OKLAHOMA QIO

INPATIENT CASES

			Q1			Q2			Q3			Q4			
Sample From	**May 09**	**June 09**	**July 09**	**Aug 09**	**Sep-09**	**Oct-09**	**Nov-09**	**Dec-09**	**Jan-10**	**Feb-10**	**Mar-10**	**Apr-10**	**May-10**	**Jun-10**	**Jul-10**
Process Month	**June 09**	**July 09**	**Aug 09**	**Sept 09**	**Oct-09**	**Nov-09**	**Dec-09**	**Jan-10**	**Feb-10**	**Mar-10**	**Apr-10**	**May-10**	**Jun-10**	**Jul-10**	**Aug-10**
Running Total / Records Pulled															
(Inpatient Stays)	**914**	**933**	**926**	**909**	**913**	**900**	**1300**	**1300**	**1300**	**1300**	**1300**	**1299**	**1299**	**1300**	**1300**
Date records requested	**6/17/09**	**7/15/09**	**8/17/09**	**9/16/09**	**10/14/09**	**11/16/09**	**12/20/09**	**1/13/10**	**2/17/10**	**3/17/10**	**4/19/10**	**5/18/10**	**6/17/10**	**7/20/10**	**8/20/10**
First Level Review															
Received In Database Within 30 Days	828	826	854	851	810	842	1206	1229	1271	1107	1259	1253	1222	1258	253
Not Received Within 30 Days	86	107	72	58	103	58	94	71	29	193	41	46	77	42	1047
Excluded	3	1	3	0	18	0	7	7	2	1	2	7	2	1	0
Closed at First Level	855	870	873	859	854	865	1209	1227	1234	1244	1238	1234	1241	1203	109
Due Dates	**08/16/09**	**09/13/09**	**10/16/09**	**11/15/09**	**12/13/09**	**01/15/10**	**02/18/10**	**03/14/10**	**04/18/10**	**05/16/10**	**06/18/10**	**07/17/10**	**08/16/10**	**09/18/10**	**10/19/10**
Second Level Review															
Billing Error	4	6	6	3	1	2	10	12	7	7	4	7	10	7	0
Denial - Continued Stay - Initial	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Denial - Level of Care - Initial	24	16	22	24	22	34	44	30	36	18	17	18	10	6	0
Admission Denial - Initial	30	26	14	24	44	14	62	24	16	0	10	8	2	2	0
Admission Denial - Reversed	6	2	0	0	8	2	14	4	4	0	0	0	0	0	0
Admission Denial - Upheld	24	24	14	24	22	0	0	0	0	0	0	0	0	0	0
Denial - Level of Care - Reversed	6	2	4	4	4	8	12	0	8	8	0	0	0	0	0
Denial - Level of Care - Upheld	20	14	18	20	8	4	2	0	0	0	0	0	0	0	0
Quality - Initial	75	79	78	62	63	37	74	70	68	53	42	73	36	7	0
Quality - Reversed	28	9	15	8	18	8	19	18	21	12	2	13	4	0	0
Quality - Upheld	48	69	65	54	49	29	8	0	0	0	0	0	0	0	0
Closed - 2nd Level Review	129	100	113	89	83	58	152	124	124	82	81	89	60	39	4
Due Date	**09/15/09**	**10/13/09**	**11/15/09**	**12/15/09**	**01/12/10**	**02/14/10**	**03/20/10**	**04/13/10**	**05/18/10**	**06/15/10**	**07/18/10**	**08/16/10**	**09/15/10**	**10/18/10**	**11/18/10**
Third Level Review															
Billing Error	1	0	1	0	0	0	1	1	0	0	0	1	0	0	0
Denial - Continued Stay	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Denial - Level of Care - Initial	16	4	6	10	4	10	14	8	22	6	4	0	2	0	0
Admission Denial - Initial	12	12	4	2	10	2	14	6	6	0	2	4	0	0	0
Admission Denial - Reversed	4	2	0	0	2	2	8	2	2	0	0	0	0	0	0
Admission Denial - Upheld	8	10	4	2	8	0	0	0	0	0	0	0	0	0	0
Denial - Level of Care - Reversed	10	2	4	4	2	6	8	0	6	4	0	0	0	0	0
Denial - Level of Care - Upheld	10	2	2	6	0	2	2	0	0	0	0	0	0	0	0
Quality - Initial	47	33	36	20	36	11	29	32	43	15	12	38	9	0	0
Quality - Reversed	24	7	14	5	12	6	11	14	22	5	2	11	4	0	0
Quality - Upheld	24	26	23	15	26	5	8	0	0	0	0	0	0	0	0
Closed - 3rd Level Review	42	26	28	18	19	11	28	25	41	12	8	20	5	0	0
Due Date	**10/15/09**	**11/12/09**	**12/15/09**	**01/14/10**	**02/11/10**	**03/16/10**	**04/19/10**	**05/13/10**	**06/17/10**	**07/15/10**	**08/17/10**	**09/15/10**	**10/15/10**	**11/17/10**	**12/18/10**
Technical Denials	86	109	75	57	83	22	85	46	21	24	16	26	0	62	41
Recoupment	42	84	7	69	6	6	47	53	56	75	75	73	62	52	0

InProcess

Complete

Oklahoma Quality Improvement
Monthly Report
For
August 2010

September 28, 2010

ATTACHMENT B

A total of 29 records from June 2010 were requested by APS on July 17, 2010. A total of 10 records from July 2010 were requested by APS on August 20, 2010.

First Level Review Activities during August 2010

There were no technical denials for the sample month of June 2010. There was one technical denial for the sample month of July 2010. Now completed, 31 records from the May 2010 sample month were closed after first level review. Twenty-two records from the May 2010 sample month were closed after first level review.

Second Level Review Activities during August 2010

At this review level, the primary workload during August 2010 involved records requested from the June 2010 and July 2010 samples.

A summary of second level findings appears in the table below. Second level review activities for the April 2010 sample are now complete, and are included as a comparison.

Second Level Finding	***Sample Month***			
	Apr 10	***May 10***	***Jun 10***	***Jul 10***
Billing Error	2	3	3	0
Denial - Continued Stay	0	0	0	0
Denial - Level of Care	0	0	0	0
Admission Denial - Initial	0	0	0	0
Admission Denial - Reversed	0	0	0	0
Admission Denial - Upheld	0	0	0	0
Denial - Level of Care Reversed	0	0	0	0
Denial - Level of Care Upheld	0	0	0	0
Quality - Initial	0	1	0	0
Quality - Reversed	0	1	0	0
Quality - Upheld	0	0	0	0

Third Level Review Activities During August 2010

At this review level, the primary workload during July 2010 involved records requested from the April 2010, May 2010, and June 2010 samples.

A summary of third level findings appears in the table below. Third level review activities for the February 20010 samples are now complete, and are included for comparative purposes.

Third Level Finding	***Sample Month***			
	Feb 10	***Mar 10***	***Apr 10***	***May 10***
Coding Error	0	0	0	0
Denial - Continued Stay	0	0	0	0
Denial - Level of Care	0	0	0	0
Admission Denial - Initial	0	0	0	0
Admission Denial - Reversed	0	0	0	0
Admission Denial - Upheld	0	0	0	0
Denial - Level of Care Reversed	0	0	0	0
Denial - Level of Care Upheld	0	0	0	0
Quality - Initial	0	0	1	0
Quality - Reversed	0	0	1	0
Quality - Upheld	0	0	0	0

A table of activities and findings for observations cases appears behind the narrative portion of this report.

APS OKLAHOMA QIO

OBSERVATION CASES

		Q4	Q1			Q2			Q3			Q4			
Sample From	May 09	June 09	July 09	Aug 09	Sep-09	Oct-09	Nov-09	Dec-09	Jan-10	Feb-10	Mar-10	Apr-10	May-10	Jun-10	Jul-10
Process Month	June 09	July 09	Aug 09	Sept 09	Oct-09	Nov-09	Dec-09	Jan-10	Feb-10	Mar-10	Apr-10	May-10	Jun-10	Jul-10	Aug-10
Running Total / Records Pulled															
(Observation Stays)	4	4	6	6	9	6	5	33	21	34	50	34	22	29	10
Date records requested	6/17/09	7/15/09	8/17/09	9/16/09	10/14/09	11/16/09	12/20/09	1/13/10	2/17/10	3/17/10	4/19/10	5/18/10	6/17/10	7/20/10	8/20/10
First Level Review															
Received In Database Within 30 Days	0	3	6	6	9	6	5	32	21	24	50	34	22	28	1
Not Received Within 30 Days	4	1	0	0	0	0	0	1	0	10	0	0	0	1	9
Excluded	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0
Closed at First Level	4	3	5	6	8	6	5	32	21	34	47	31	31	27	27
Due Dates	07/17/09	08/14/09	09/16/09	10/16/09	11/13/09	12/16/09	01/19/10	02/12/10	03/19/10	04/16/10	05/19/10	06/17/10	07/17/10	08/19/10	09/19/10
Second Level Review															
Billing Error	0	0	1	0	1	0	0	0	0	0	2	3	3	0	0
Denial - Continued Stay - Initial	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Denial - Level of Care - Initial	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Admission Denial - Initial	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Admission Denial - Reversed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Admission Denial - Upheld	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Denial - Level of Care - Reversed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Denial - Level of Care - Upheld	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Quality - Initial	0	1	0	0	0	0	0	0	0	0	0	1	0	0	0
Quality - Reversed	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0
Quality - Upheld	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0
Number Closed - 2nd Level Review	0	1	1	0	1	0	1	4	0	0	3	5	3	0	0
Due Dates	08/16/09	09/13/09	10/16/09	11/15/09	12/13/09	01/15/10	02/18/10	03/14/10	04/18/10	05/16/10	06/18/10	07/17/10	08/16/10	09/18/10	10/19/10
Third Level Review															
Billing Error	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Denial - Continued Stay - Initial	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Denial - Level of Care - Initial	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Admission Denial - Initial	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Admission Denial - Reversed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Admission Denial - Upheld	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Denial - Level of Care - Reversed	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Denial - Level of Care - Upheld	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Quality - Initial	0	1	0	0	0	0	0	0	0	0	0	1	0	0	0
Quality - Reversed	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0
Quality - Upheld	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0
Number Closed - 3rd Level Review	0	1	0	0	0	0	0	0	0	0	0	1	0	0	0
Due Dates	09/15/09	10/13/09	11/15/09	12/15/09	01/12/10	02/14/10	03/20/10	04/13/10	05/18/10	06/15/10	07/18/10	08/16/10	09/15/10	10/18/10	11/18/10
Technical Denials	1	1	0	0	0	0	0	1	0	0	1	0	0	1	0
Recoupment	0	0	0	0	0	0	1	1	0	10	0	0	4	2	

In Process

Complete

Oklahoma Quality Improvement Organization
Monthly Report
For Behavioral Health:
Attachments H, I, J and K

August 2010

September 28, 2010

ATTACHMENT H

Inspections of Care in Psychiatric Facilities

The SFY 2010 Inspections of Care (IOCs) for inpatient facilities began July 2010 at Southwestern Behavioral. This met the contract specified start date of September 15, 2009.

Facility	Provider Number	Level of Care	Date of On-site Audit	Final Report to OHCA (invoice date)	CAP Requested (Date)	CAP for 2010	CAP for 2009	Referral to OHCA MEIT	Quality Score 2011 (%)	Quality Score 2010 (%)	Quality Score 2009 (%)	Recommended Recoupement
Southwestern Behavioral	100697950B	Acute	07/14-15/2010	Pending	8/11/2010	Yes	No	NA	Pending	66	77	$1,350.00
Southwestern Behavioral	100697950F	RTC	07/14-15/2010	Pending	8/11/2010	Yes	No	NA	Pending	81	75	$3,800.00
Positive Outcomes	100699540P	Rtc	08/10-11/2010	Pending	NA	NA	NA	NA	Pending	91	78	$850.00
Rolling Hills	100701680A	Acute	7/28/2010	Pending	Yes	Yes	Yes	Pending	Pending	60	NA	$850.00
Camelot of OKC	2001068860A	RTC	8/23/2010	Pending	Pending	Yes	Yes	Pending	64	72	75	Pending
White Horse Ranch	200211500A	RTC	8/25/2010	Pending	Pending	Yes	Yes	Pending	47	41	46	Pending
Cedar Ridge	20085660A	Acute	09/07-09/2010	Pending	Pending	Yes	Yes	Pending	Pending	67	74	Pending
Cedar Ridge	20085660B	RTC	09/07-09/2010	Pending	Pending	Yes	Yes	Pending	Pending	66	72	Pending
Piney Ridge – Fayetteville	200131960A	RTC	9/21/2010	Pending	Pending	Yes	Yes	Pending	Pending	76	73	Pending
Vista Health Fayetteville	2000120120D	Acute	9/22/2010	Pending	Pending	No	NA	NA	Pending	71	NA	Pending
Vista Health Fayetteville	2000120120E	RTC	9/22/2010	Pending	Pending	NA	NA	NA	Pending	NA	NA	Pending

ATTACHMENT I

Outpatient Behavioral Health, Substance Abuse, and Psychologist Services

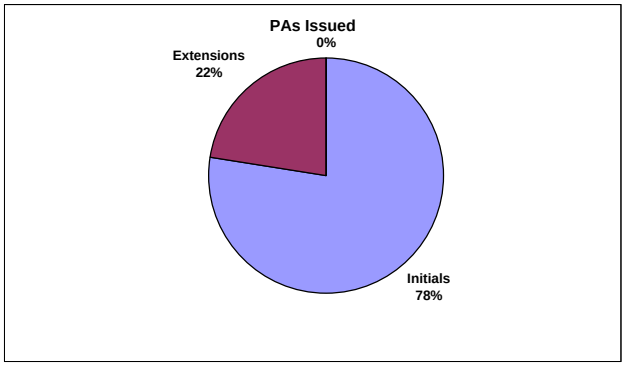
During this month 22,733 outpatient behavioral health, substance abuse, psychologist and case management prior authorizations were processed, with 22,732 (99.9%) approved. The average turnaround time was 9.21 days.

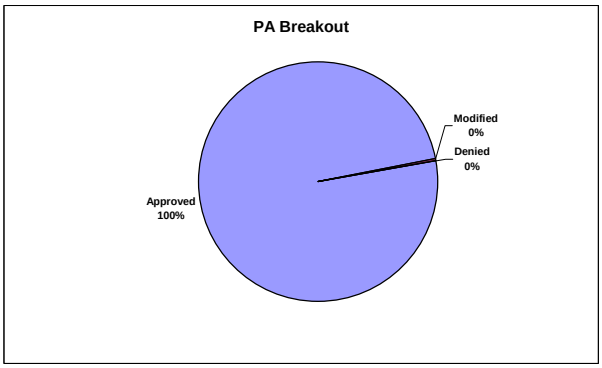
Section: I.25a: *Monthly Activity:*

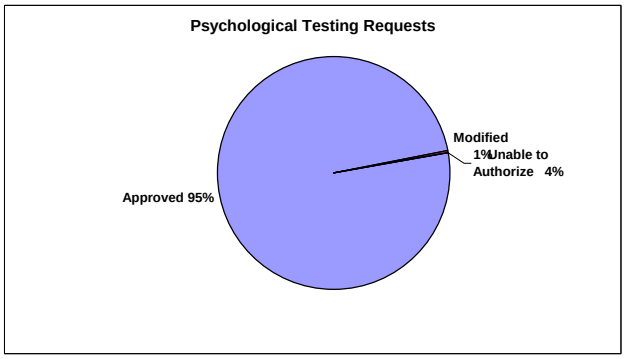
1. Total Number of PA Requests	**OHCA** Total: 16151 Initial: 12187 Extensions: 3964	**ODMHSAS** Total: 6582 Initial: 5461 Extensions: 1121	**Combined** Total: 22733 Initial: 17648 Extensions: 5085
2.a Number of PAs Approved	12151 init / 3941 ext	5446 init / 1107 ext	17597 init / 5048 ext
2b. Number of PAs Modified**	35 init / 23 ext	15 init / 14 ext	50 init / 37 ext
2c. Number of PAs Denied/ Unable to auth	1 init / 0 ext	0 init / 0 ext	1 init / 0 ext
3. Average Response Time of PA decisions	-----	-----	9.21
4. Number of Reconsiderations	n/a	n/a	n/a
5. Reconsideration Detail	n/a	n/a	n/a
6. Average Response Time for Reconsideration.	n/a	n/a	n/a
7a. All cases by Level of Care: Level 1***	1323	636	1959
7a. All cases by Level of Care: Level 2***	1243	404	1647
7a. All cases by Level of Care: Level 3***	4234	1490	5724
7a. All cases by Level of Care: Level 4***	1015	112	1127
7a. All cases by Level of Care: 0-36 mo	20	0	20
7a. All cases by Level of Care: ICF-MR	59	0	59
7a. All cases by Level of Care: RBMS	1	0	1
7a.PACT cases	31	23	54
8. Psychologist/ Testing requests*			
Approved*	1796	0	1796
Modified*	5	0	5
Denials/unable to auth*	1	0	1
9. Transfers	542	unk	542
10. LBHP Initial PA's **	1731	N/A	N/A
10 a. LBHP Extension PA's **	0	N/A	N/A

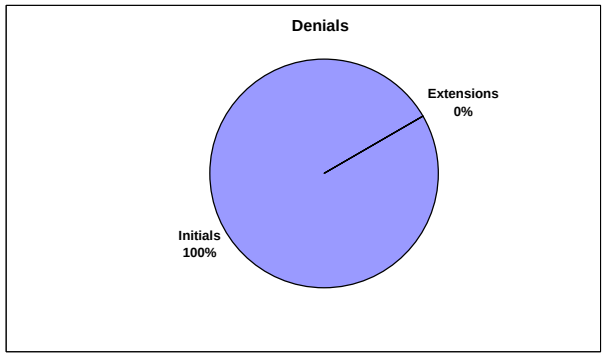
*Included in total count ** Included in approved PAs *** Approved PAs only; Level of care field not required in CC
********A decrease in denials can be attributed to the prescreening function of auto authorization that went into effect 07/01/2010.

One denial and 87 modifications were made for outpatient behavioral health services during August 2010.





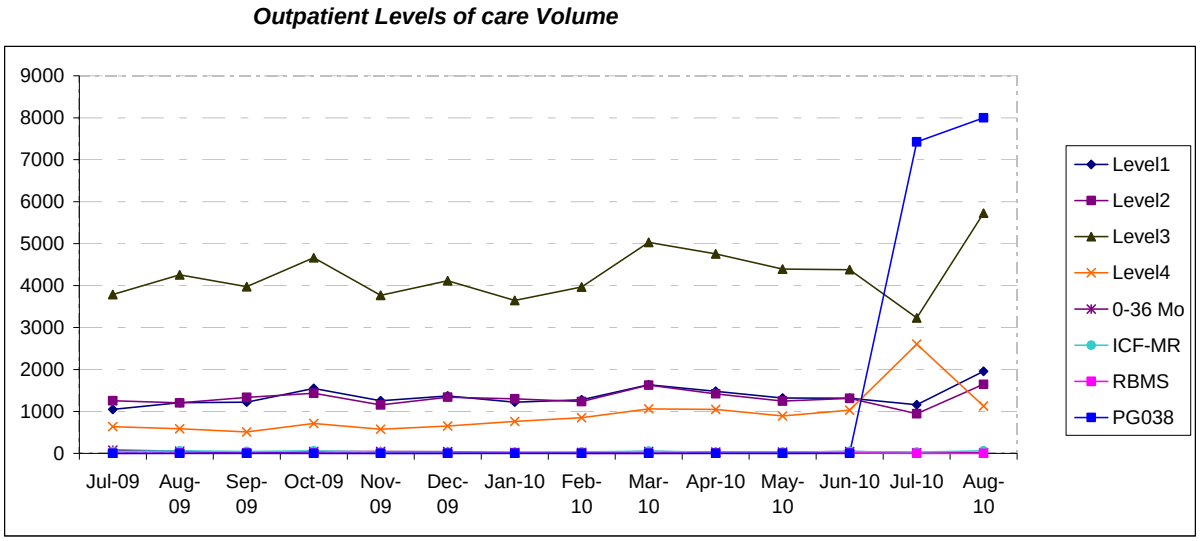




CODE	OHCA	ODMHSAS	Combined	CODE	OHCA	ODMHSAS	Combined
PG001	54	48	102	DH501	32	188	220
PG002	1323	636	1959	DH502	1	22	23
PG003	1243	404	1647	DH503	7	7	14
PG004	4234	1490	5724	DH504	12	2	14
PG007	8	0	8	DH505	43	179	222
PG008	1015	112	1127	DH506	13	14	27
PG011	61	3	64	DH507	91	110	201
PG013	0	0	0	DH508	1	0	1
PG014	33	56	89	DH509	188	300	488
PG015	16	1	17	DH510	40	25	65
PG016	3	0	3	DH511	32	81	113
PG018	31	23	54	DH514	142	167	309
PG019	59	0	59	DH516	0	0	0
PG025	20	0	20	DH517	126	105	231
PG026	16	0	16	DH518	1	0	1
PG027	1	0	1	PG035	3	0	3
PG028	4	0	4	PG036	3	6	9
PG029	728	0	728	PG037	2	7	9
PG030	1003	0	1003	PG038*	5436	2563	7999
PG031	1	0	1	PG040	65	0	65
PG033	134	22	156	PG041	0	0	0
PG034	3	4	7				

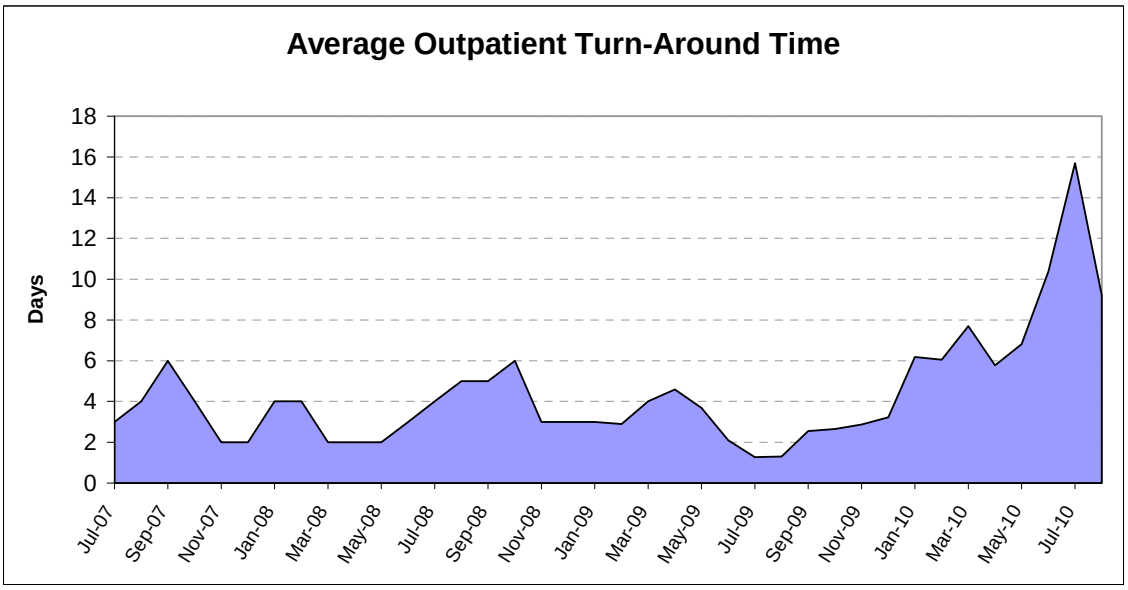
* The increase in PG038 is due to the DMH implementation; APS is working with OHCA to identify the cause for the underlying trend.

The chart below depicts the volume of level of care since the beginning of August 2009.



Outpatient Average Turnaround Time

The chart below depicts the average turnaround time for PA decisions since July 2007. The increases in 2010 are attributable to several factors: the behavioral health reorganization into care management teams; EDI technical issues resulting in duplicate records which needed closing; and the placement by OHCA of a test eligibility file into the CareConnection production environment, which was subsequently loaded into production. Each of these factors caused an increase in the processing turnaround time. APS Healthcare is working diligently to bring the turnaround time back within contractual standards. Since July APS has added additional staff and overtime; due to this change the turn-around time has been reduced to nine days.



Section I.40: Case Management:

The APS Care Connection system no longer contains the specific procedure code for Case Management services. APS will consult with OHCA to determine an appropriate methodology for identifying and counting case management services.

EDI Project
APS' Electronic Data Interchange (EDI) has been in production since October, 2007. There are currently 96 provider accounts for file transfer.

APS is continuing our effort to conduct on-site trainings to help increase the submission of outpatient PA requests through CareConnection®.

Section I.30:

Training and Education Activities
This report is submitted separately.

Section I.8-10

Outpatient Behavioral Health performs both Inter- Rater Reliability (IRR) and Internal Quality Control (IQC) studies monthly.

Section I.9:

OUTPATIENT INTERNAL QUALITY CONTROL:
For IQC, the Outpatient Manager reviews five cases per reviewer that were completed in the previous month. The Manager determines the appropriateness of the decision and identifies any areas for clarification or education. Both IRR and IQC have a benchmark of 85%; however continuous quality improvement and education are ongoing. For August 2010, the IQC result is 99%; therefore no specific reviewer training is required.

Section I.13:
INTER-RATER RELIABILITY:
For IRR at least three cases are reviewed by all reviewers. The responses to the individual questions are compared in order to discover any disagreement. The overall agreement between all reviewers to each question is determined. Any disagreement is reviewed with the reviewer. The Outpatient Manager is also available to staff to discuss any questions regarding criteria and processes. For August 2010, the IRR outcome is 94%; therefore no specific reviewer training is required. Although these issues impacted the IRR outcome no specific reviewer training is required. Informal training is ongoing.

ATTACHMENT J

Inpatient, TFC, and Medical Prior Authorization of Behavioral Health Services

Section J.5.J:
Out of State Census and Case Study Report:
The full report will be delivered under separate cover. The cases are reviewed in a monthly joint meeting with OHCA, DHS and APS representatives.

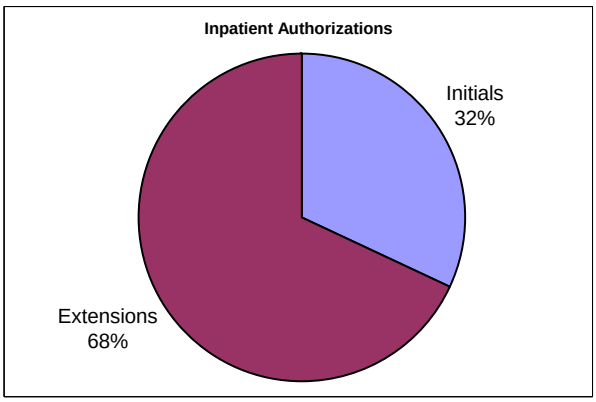
Section J.6.A
Monthly Activity:
A total of 3,066 prior authorizations requests were made for inpatient behavioral health services during August 2010. 3,013 requests were approved (98.3%). A total of 41 denials (1.3%) were rendered for inpatient behavioral health services during the month.

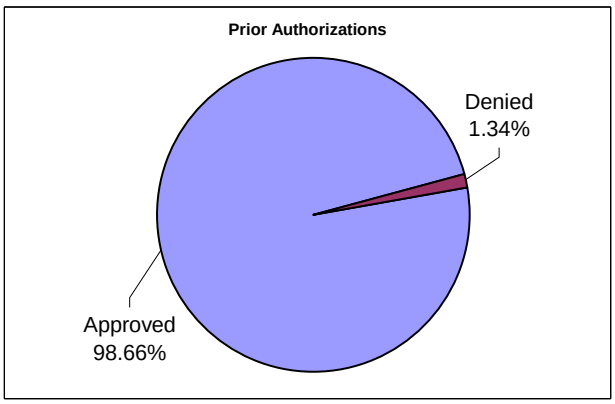
1. Total Number of PA Requests	Total Requests: 3,056 Initial Requests: 972 (956 Approved, 16 Denied) Extension Requests: 2,094 (2,057 Approved, 27 Denied)
2a Number of PAs Approved	3,013 (98.3%)
2b. Number of PAs Modified	0
2c. Number of PAs Denied	41 (1.3%) 16 initials, 27 extensions
3. Average Response Time of PA decisions	1 day
4. Number of Reconsiderations	0
5. Reconsideration Detail	NA
6a. All cases by Level of Care: Acute*	Initials: 407
	Extensions: 119
6b. All cases by Level of Care: RTC*	Initials: 451
	Extensions: 1,715
6c. All cases by Level of Care: TFC*	Initials: 73
	Extensions: 250
6c. All cases by Level of Care: CCU*	Initials: 41
	Extensions: 0

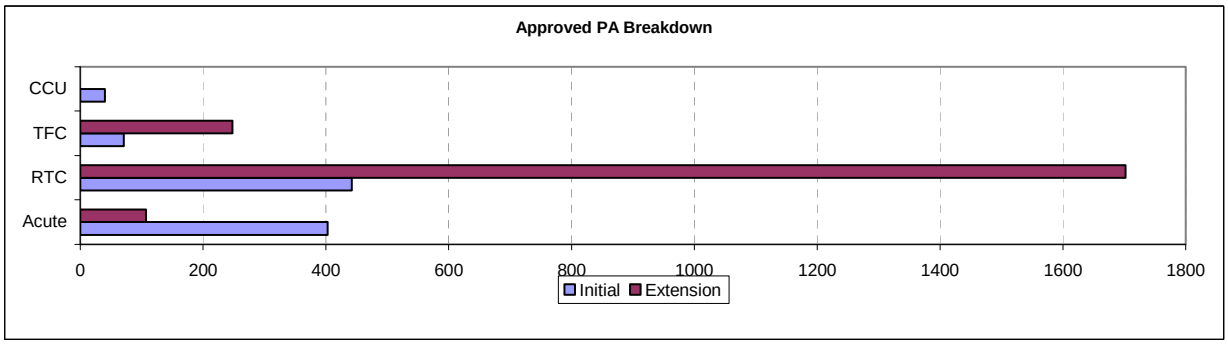
Denials added to respective request line.

Section J. 6. Detail:

Action	*Acute*	*RTC*	*TFC*	*CCU*
Approved	510	2,144	319	40
Denials	16	22	4	1
Units approved	2,259	24,127	21,024	6,690







Section J.7

Inpatient Behavioral Health performs both Inter-Rater Reliability (IRR) and Internal Quality Control (IQC) studies monthly. Care coordination and management documentation will be emphasized as part of the quality assurance process.

Section J.8-10

INTERNAL QUALITY CONTROL:

For IQC, the Outpatient Manager reviews five cases per reviewer that were completed in the previous month. The Manager determines the appropriateness of the decision and identifies any areas for clarification or education. Both IRR and IQC have a benchmark of 85%; however continuous quality improvement and education are ongoing. For August 2010, the IQC result is 99%; therefore no specific reviewer training is required.

Section J.12-13

INPATIENT INTER-RATER RELIABILITY

For IRR at least three cases are reviewed by all reviewers. The responses to the individual questions are compared in order to discover any disagreement. The overall agreement between all reviewers to each question is determined. Any disagreement is reviewed with the reviewer. The Outpatient Manager is also available to staff to discuss any questions regarding criteria and processes. For August 2010, the IRR outcome is 94%; therefore no specific reviewer training is required. Although these issues impacted the IRR outcome no specific reviewer training is required. Informal training is ongoing.

ATTACHMENT K

Inspections of Care of Therapeutic Foster Care Programs

The SFY 2010 Inspections of Care (IOCs) for Therapeutic Foster Care (TFC) programs began July 2010, at Western Plains. This met the contract specified start date of July 31, 2009.

Facility	Provider Number	Date of On-site Audit	Final Report to OHCA (invoice date)	CAP Requested (Date)	Cap FOR 2010	CAP for 2009	2011 Quality Score	Referral to OHCA MEIT	Recommended Recoupement
Western Plains	100732920A	07/13/2010	08/30/2010	NA	No	No	49	NA	$50.00
Wesleyan	100803130B	08/11/2010	Pending	Pending	No	No	Pending	Pending	Pending