

MAGELLAN EXPLORER

QUALITY IMPROVEMENT QUARTERLY NEWSLETTER



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MESSAGE TO PROVIDERS

This quarter, Magellan is sharing important updates about substance use treatment services and related quality improvement projects. These efforts require a team approach where all players are valued and essential to successful outcomes.

As many readers are aware, Magellan, aligned County Primary Contractors, and SCAs continue working on OMHSAS' Performance Improvement Project titled: *Prevention, Early Detection, Treatment and Recovery (PEDTAR) for Substance Use Disorders: Addressing the Continuum of Care for Individuals with Substance Use Disorders*. Contracted providers have been great partners for this quality improvement initiative; thank you! In this edition, we are sharing best practices Magellan has observed about preventing AMA, and AWOL discharges from acute levels of care. There are also important updates about the start of ASAM Alignment quality reviews, scheduled to start this month.

As we enter the official start of summer, Magellan celebrates LGBTQIA+ Pride Month. We're **sharing tips** on how Magellan is working to support the LGBTQIA+ community and promote inclusivity. We encourage our providers to participate in similar activities.



Warm regards,

Maria Brachelli-Pigeon, LMFT, CPHQ,
Director, Quality Improvement

MAGELLAN QI IN THE NEWS: HITTING IT OUT OF THE PARK!

Recently, Magellan applied to the National Committee for Quality Assurance (NCQA) for a Managed Behavioral Healthcare Organization (MBHO) re-accreditation survey. At the completion of this review, Magellan achieved another three-year full-status MBHO accreditation. Thank you for being part of Magellan's Network and making a critical contribution to delivering quality care services to HealthChoices-eligible members.

Read more about this achievement [here](#).





ON DECK: ASAM ALIGNMENT

The Commonwealth of Pennsylvania, Department of Human Services - Office of Mental Health and Substance Abuse Services (OMHSAS), and Department of Drug and Alcohol Programs (DDAP) are committed to ensuring all persons in the Commonwealth have access to high-quality, clinically appropriate SUD treatment services. As part of the efforts to enhance SUD treatment, the Commonwealth is improving the models of care focused on supporting individuals in the community and at home, and strengthening the continuum of SUD services through application of the American Society of Addiction Medicine (ASAM) Criteria.



As part of this statewide initiative, all providers contracted with Single County Authorities (SCAs) and Behavioral Health Managed Care Organizations (BHMCOs) are being reviewed to determine if technical assistance is needed to make additional progress toward alignment with the ASAM, 3rd Edition, 2013. **Magellan will be scheduling ASAM Alignment reviews for all 3.1, 3.5, 3.7/WM services over the course of the next few months.** A representative from your County HealthChoices office, and your SCA may accompany Magellan QI and Clinical staff at your facility review. After the conclusion of the ASAM level 3 reviews, community-based services will undergo a similar review process.

For your information, Magellan shared a PDF version of the [Infrastructure Review](#) and the [Client Chart Review](#). If you have questions about the process, please contact us at ASAMAlignmentInquiries@magellanhealth.com.



READER'S NOOK

For additional resources to help your organization with ASAM Alignment, please consider this list.

The ASAM Criteria Training: <https://www.asam.org/asam-criteria/training-consulting>

The ASAM Criteria Textbook: <https://www.changecompanies.net/products?id=ASMO>

DDAP Website: <https://www.ddap.pa.gov/Professionals/Pages/ASAM-Transition.aspx>

Service Characteristics for each level of care: <https://www.ddap.pa.gov/Professionals/Pages/ASAM-Transition.aspx>

The ASAM Criteria Implementation Guide: <https://shop.changecompanies.net/products/asam-criteria-implementation-guide>

The ASAM Level of Care Manual: https://www.changecompanies.net/asam/loc_cert.phphttp://

The ASAM Level of Care Preparation Workbook: https://www.changecompanies.net/asam/loc_cert.php

Webinars on various topics to assist with ASAM Implementation: <https://www.trainforchange.net/webinars/on-demand>

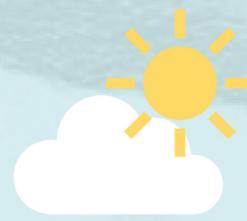
Information about the ASAM Level of Care Certification: <https://www.asam.org/asam-criteria/training-consulting>



SAFETY STANDOUTS: WATCHING THE BASES

Magellan recently made a minor adjustment to the electronic incident reporting portal on magellanofpa.com. For all reported incidents, there is a new field for reporters to respond if a weapon was involved in the incident. The response required is a simple yes/no drop-down. If yes, the system will issue a prompt for the type of weapon involved in the incident.

This reporting enhancement was made at the recommendation of Magellan's gun violence prevention workgroup. We greatly appreciate provider assistance with gathering this information. The intent of this change is to support data integrity, and to create a means to identify trends and potential opportunities for intervention around incidents involving weapons.



HERE COMES THE SUN

SAMHSA's recently shared some summer tips for "Heat Health Awareness: Why it's Important for Persons with Substance Use Disorders and Mental Health Conditions." Read more [here](#).

STRENGTH OF THE TEAM: IMPROVING CULTURAL COMPETENCE/HEALTH EQUITY THROUGH OUR PRACTICE



In 2023, Magellan is inviting network providers to participate in a self-assessment using Magellan's "Cultural Competency and Health Equity" tool.

The tool is an inventory that assesses the strengths and opportunities of a program with consideration to practices of inclusivity, diversity, and equity, with prioritization of the National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care ([The National CLAS Standards](#)). Magellan will send this instrument with instructions for completion for providers identified to participate in Treatment Record Review activities during this calendar year. All providers, at their request, are invited to conduct this self-assessment.

Magellan intends to utilize this year's results to establish an aggregate baseline competency rating for the network. This information will help inform needs and opportunities throughout the network.

If your organization is interested in contributing to this important effort, please contact Austin Hoffman, Quality Improvement Reviewer, for more information (hoffmana@magellan.com). Thank you in advance for your time and commitment to offering services that respect individual member preferences, needs, and values and are sensitive to residual stigma and discrimination.



IN FOCUS AMA/AWOL PREVENTION

Between 1/4 and 1/5 of discharges from high-intensity SUD services are AMA or AWOL discharges. Magellan has been tracking AMA and AWOL discharges from high-intensity SUD services, to identify which providers are showing excellent performance with AMA/AWOL prevention. Providers who have demonstrated consistently low AMA/AWOL rates, or rates decreasing over time, have been sharing their many strategies, and several common themes were noted:



Prevention of AMA/AWOLs starts at admission

If you are trying to prevent an AMA discharge when someone announces they wish to leave, you may already be too late. A common theme among the successful providers was that AMA/AWOL prevention starts the moment a client first arrives. Providers ensure that multiple staff focus on engagement during the first meeting. They not only focus on interpersonal engagement, but also focus on making the physical attributes of the facility as welcoming as possible.



Attending/listening to concerns immediately

Providers who are successful at AMA prevention agreed that it's often the "little things" or "life stuff" cited by people who decide to leave AMA. These providers ensure that staff are available to listen and respond to concerns about "little things" like uncomfortable pillows or not having enough toilet paper, or helping a person attend to "life stuff" like having to pay a bill or make arrangements for someone to feed their pets, so that these don't become reasons for leaving. Also, these providers ensure that staff are there to listen and validate when a person feels frustrated with a program policy or a conflict with a peer.



Maximizing comfort during withdrawal management

The providers who successfully prevented AMA/AWOLs from "detox" programs emphasized individualizing withdrawal management protocols to an individual's need, and a strong focus on minimizing discomfort. Recognizing that fentanyl use was associated with higher AMA/AWOL rates, providers employed innovative approaches to withdrawal management when a person has been using fentanyl. They mentioned being more flexible with program expectations when someone is going through withdrawal, such as holding less demanding group activities, and having more breaks.



Preventing contraband substances on campus

Providers who are successful at AMA noticed that AMAs increased when contraband substances are found in the facility. Not only are the people who brought in and used the substances discharged administratively, but others who witnessed or even heard about the substance use often leave around the same time. Their cited reasons might differ; seeing substances being used could trigger cravings or learned patterns or knowing that substances were being used in the facility can result in distrust of the program and concerns around a lack of safety. These providers also tended to be better at preventing illicit substances out of their facilities and campuses.



The role of trauma in AMAs/AWOLs

The providers who successfully prevented AMA noticed the relationship between trauma history and a higher risk of AMA/AWOL. Many otherwise helpful behavioral health treatments can have components that may be re-traumatizing to people who have experienced significant trauma. Providers that are not only trauma-informed but employ evidence-based trauma-focused services seem to be better at preventing the "flight" response and other patterns that a person may have developed in response to trauma.



AMA/AWOL prevention is woven into quality improvement programs

The most successful providers at AMA/AWOL prevention monitor, track, and routinely discuss AMA/AWOL discharges. They analyze AMAs and AWOLs to learn from each one. They identify factors that might be associated with a higher risk of AMA/AWOL, and use this information to evaluate each person's risk, which can change daily or hourly. They celebrate each prevented AMA, and incentivize teams to minimize AMAs and AWOLs.

Would you like to share other approaches you've found to be successful, or would you like to learn more from what the successful providers have been doing? Please contact Magellan QI Manager, Tracy Samuelson, at samuelsont@magellanhealth.com.



UPCOMING TRAININGS OFFERED BY MAGELLAN

LGBTQ+ Equity & Inclusion 101

June 14, 2023, Location: Zoom, 1:00-3:00 p.m.
Please register [here](#) in advance. After registering, you will receive a confirmation email containing information about joining the meeting.

June 27, 2023, Location: Zoom, 10:00a.m.-12:00 p.m.
Please register [here](#) in advance. After registering, you will receive a confirmation email containing information about joining the meeting.

Using Motivational Interviewing to Prevent AMA Discharges

June 22, 2023, Location: Zoom, 1:30 p.m. – 4:30 p.m.

For more information, please email Tracy Samuelson at samuelsont@magellanhealth.com

Using Motivational Interviewing for Precontemplation about Mental Health

September 12, 2023, Location: Zoom, 1:30 p.m. – 4:30 p.m.

For more information, please email Tracy Samuelson at samuelsont@magellanhealth.com

How Motivational Interviewing Increases Follow-Up Appointment Attendance

November 9, 2023, Location: Zoom, 1:30 p.m. – 4:30 p.m.

For more information, please email Tracy Samuelson at samuelsont@magellanhealth.com



COMING SOON



- Focus on HEDIS
- EBPs
- Language Assistance Services (PA Bulletin requirements)
- CPGs



“SWING AND A MISS” ON RETRO REVIEWS

Magellan wants all of our providers to hit a Grand Slam in their reimbursement for services offered. Unfortunately, there’ve recently been a high number of requests for SUD Residential services through Retro Review that we can’t cover.



STRIKE

Not providing eligibility verification and clinical information to support medical necessity with the Retro Review submission.



STRIKE

Requesting a Retro Review for situations that do not qualify under Magellan’s policy, like a provider missing a scheduled concurrent review.



STRIKE

Requesting a Retro Review due to an error in providers’ live authorization requests. We are seeing Retro Requests for “Enhanced” SUD Residential even though live requests and approvals were for regular SUD Residential levels of care.

Help us help you round the bases. Be sure to call in requests on time and ask for the right level of care. For situations that qualify for Retro Review, be sure to submit all needed information.



HEADS UP!



Over the next few months, Magellan staff will call community-based providers to conduct the annual “front door” customer service assessment.

This project aims to replicate a member’s experience of outreaching to schedule an appointment. Magellan shares feedback with providers after these calls are completed, so that providers can use the findings to inform their customer service practices.

Each year this project has run, Magellan has shared aggregate findings and opportunities with the Network, again with focus to improve member experience.

What do your staff need to know to perform well on this assessment? It’s as easy as A-B-C.

- Answer or return member call(s) with a friendly and professional manner.
- Be available to answer phones in a timely fashion.
- Completely as possible, provide answers to available for appointment access (and consult with others when needed to provide the best answer possible for members).