

**Provider Type: Hospital Providers**  
**Area of Concentration: Adults with Behavioral Health Needs**

**Project:** Hospitals

**Area of Concentration:** Adults with Behavioral Health Needs



**Provider Type:** Hospital Providers





**Objective:** To more effectively coordinate the care for adults with a primary discharge diagnosis of behavioral health and persons with serious mental illness designation, who are being discharged from an inpatient stay.

|  |   |
|--|---|
| 1.   | <p>Participate in the Targeted Investments Program Quality Improvement Collaborative (QIC) offered by the Arizona State University College of Health Solutions. The QIC will support TI Program participants by providing interim updates on their Year 5 Milestone Performance Measures, assist with quality improvement, offer HEDIS™ technical assistance, and facilitate peer learning.</p> |
| <p style="text-align: center;"><b>Milestone#1</b><br/>(October 1, 2021–September 30, 2022)<br/><b>15%</b></p>  |   |
| <p>By September 30, 2022, attest that:</p> <ul style="list-style-type: none"> <li>A. The participating organization has registered both an administrative representative and licensed clinical representative to participate in the TI Program Quality Improvement Collaborative (QIC). Organizations with only one site participating in the TI Program may elect to have one representative if that person has both clinical and administrative Program responsibilities.</li> <li>B. The organization’s administrative <u>and</u> clinical QIC representatives (excepting one site participants as noted above) or their designees attend <b>four</b> of the Year 6 Quality Improvement Collaborative virtual group meetings offered for the Area of Concentration.</li> </ul> <p>Alternatively, organizations may complete the milestone by attending <b>three</b> QIC virtual meetings and <b>two</b> Quality Improvement Workgroups.</p> |   |

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**Performance Measure Targets:** Established per organization based on baseline performance

| Performance Measure  | Measure Description   | Measure Weighting | Measure Sets  |
|--|---|-------------------|---|
| <b>Follow up after hospitalization for mental illness: 18 and older (30 - Day)</b> | Percentage of discharges for beneficiaries age 18 and older who were hospitalized for treatment of selected mental illness diagnoses or intentional self-harm and who had a follow-up visit with a mental health practitioner within 30 days after discharge. | 20%               |  |
| <b>Follow up after hospitalization for mental illness: 18 and older (7 - Day)</b>  | Percentage of discharges for beneficiaries age 18 and older who were hospitalized for treatment of selected mental illness diagnoses or intentional self-harm and who had a follow-up visit with a mental health practitioner within 7 days after discharge.  | 65%               |  |

| <b>Measure Sets Key (Hyperlinked)</b>   |   |   |   |
|---|---|---|---|
| <a href="#">CMS Core Set Adult</a>  | <a href="#">CMS ScoreCard</a>   | <a href="#">Statewide (STCs)</a>  | <a href="#">NCQA HEDIS</a>  |
|  |  |  |  |