

CATHY BETTS DIRECTOR

JOSEPH CAMPOS II
DEPUTY DIRECTOR

STATE OF HAWAII DEPARTMENT OF HUMAN SERVICES

Med-QUEST Division Health Analytics Office P.O. Box 700190 Kapolei, Hawaii 96709-0190

June 4, 2021

MEMO NO. QI-2111 CCS-2105

MEMORANDUM

TO: QUEST Integration (QI) Health Plans

Community Care Services Health Plan

FROM: Judy Mohr Peterson, PhD.

Med-QUEST Division Administrator

SUBJECT: COMMUNITY INTEGRATION SERVICES (CIS) RAPID CYCLE ASSESSMENTS (RCAs)

<u>Introduction</u>

CIS aims to help eligible QI members experiencing housing instability 1) become fully integrated members of the community, and 2) achieve improved health outcomes and life satisfaction.

To ensure the optimal implementation and quality of this ambitious effort, Med-QUEST Division (MQD) requires Health Plans to engage in Rapid Cycle Assessments (RCAs) with an independent Evaluation Team from the University of Hawaii (UH). RCAs will be conducted as part of "CIS Learning Communities" established by MQD, as noted in Memo No. QI-2105, CCS-2102.

RCAs are a form of program evaluation that use a rigorous, scientific approach to generate timely and actionable evidence of program implementation and ongoing process improvement to evaluate adherence to the implementation protocol, identify and resolve issues proactively, and determine if operational changes improve program outcomes. RCAs can help avoid investments in programs and protocols that are unlikely to produce desired results. RCAs for the CIS program shall begin on July 1, 2021, concomitantly with CIS program implementation,

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and are expected to continue at least until July 31, 2024, but may be extended beyond this date as determined by MQD.

The Evaluation Team

The UH Evaluation Team supports the evaluation of MQD's current 1115 Waiver Demonstration (2019-2024) as a whole; a critical part of the evaluation design and efforts are focused on the CIS program, which incorporates both rapid cycle assessments and traditional evaluation components.

Led by Dr. Jack Barile with the UH Social Science Research Institute, the Evaluation Team consists of faculty, doctoral-level researchers, staff, and graduate students from a variety of social science fields. The Evaluation Team takes a collaborative, community-based approach to evaluation and works closely with programs to understand and improve their practice.

Specifically with respect to its evaluation of the CIS program, the UH Evaluation Team has extensive experience working directly with individuals experiencing homelessness, severe and persistent mental illness, and chronic health conditions. Additionally, the team has in-depth knowledge of local homelessness and housing issues. Team members have collaborated with local homeless service agencies and the local Continuum of Care to develop and evaluate programs and provide consultation on best practices. Together, the team has over 20 years of experience in conducting research and evaluation in this area.

Quarterly Meetings

In order to conduct RCAs, MQD will schedule quarterly meetings and notify the Health Plans. These quarterly meetings will provide the opportunity to create CIS Learning Communities to ensure that Health Plans and providers are discussing sharing and adopting best practices throughout the duration of the CIS program.

Representatives from each Health Plan shall be present at each quarterly meeting. Due to their vital role in program success, the CIS Coordinator must attend. Additionally, the Health Plans shall send staff who support quality improvement and assurance, reporting, and analytics. Based on the specific focus of the RCA, the Evaluation Team or MQD may request the presence of additional stakeholders. The Evaluation Team will be present at each meeting, along with at least one representative from MQD.

Individual Meetings

The Evaluation Team may request individual meetings with each CIS Coordinator. The purpose of these meetings will be to understand program process and implementation, and support quality improvement and assurance for each CIS program. Additionally, these one-on-one meetings will help to establish rapport between the Evaluation Team and CIS Coordinators and promote collaboration to identify and address potential challenges to program implementation, data collection, reporting, and achieving the intended outcomes of the CIS program. The

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Evaluation Team will contact individual CIS Coordinators to schedule these meetings on a case-by-case basis with support from MQD.

Additional, Focused Studies

In addition to the quarterly meetings, the Evaluation Team may conduct additional, focused studies to better understand particular aspects of CIS implementation or impact on members. For example, the Evaluation Team may request Health Plan assistance in surveying or interviewing a subset of stakeholders, such as Health Plan staff, providers, CIS members, or related organizations.

Data

The RCAs will utilize data from a variety of sources including but not limited to direct communication with Health Plan staff (via individual interviews), quarterly reports submitted to MQD, encounter data, data collected using various methodologies during the focused studies, and other CIS documentation available from MQD. The Evaluation Team will analyze these data and discuss the findings during quarterly meetings. During these meetings, the Evaluation Team may ask qualitative questions related to RCA findings. Where questions require additional research and information gathering, the Evaluation Team will contact the Health Plans at least two (2) weeks prior to the meeting to give time for Health Plans to prepare their responses. Should further data to better understand program implementation or outcomes be required, the Health Plans will be notified and a mutually agreed upon time frame between the health plans and MQD shall be determined.

Process and outcome metrics will provide insight on progress towards implementation and achievement of CIS goals, and a subset of these metrics will be submitted to CMS annually. The findings shall support identification of implementation challenges or issues impeding the program's ability to achieve its intended goals. The CIS Learning Communities shall be engaged in brainstorming potential solutions and strategies, and adjusting the program as needed to ensure optimal implementation and achievement of program objectives. Data collected and these discussions between CIS program coordinators, staff, MQD, and the Evaluation Team will also guide the future implementation of value-based purchasing (VBP) within CIS.

Pathway to Value-based Purchasing

The CIS Learning Communities, and RCA metrics will provide a pathway to establish VBP initiatives specific to the CIS program. Both VBP initiatives between MQD and the Health Plans, as well as those between the Health Plans and CIS Providers, shall be addressed. To ensure that data and health outcomes drive the program, and that the program provides high quality care, Med-QUEST will work with the Health Plans, and invite other stakeholders as needed, to identify indicators for quality improvement that may be incentivized through the proposed payment initiatives/structures. These strategies will differ based on the program year with further information released to the Health Plans as CIS implementation progresses.

Please contact Ranjani Starr via e-mail at rstarr@dhs.hawaii.gov should you have any questions.