

Service Coordination Organization Performance Measures

Accountability implementation status

Substitute Senate Bill 5147, Section 3(2); Chapter 209; Laws of 2015

RCW 70.320.050

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Executive summary

This report is guided by Substitute Senate Bill 5147 (2015) which directs Department of Social and Health Services (DSHS) and the Health Care Authority (HCA) to:

Submit an annual report to the Washington State Legislature by December 1 each year on the incorporation of performance measures (referred to as the 1519 measures) developed under Chapter 70.320 RCW into Service Coordination Organization (SCO) contracts and progress toward achieving identified outcomes. This legislation directed the agencies to include:

- The number of Apple Health (Medicaid) clients enrolled over the previous year
- The number of enrollees receiving a baseline health assessment over the previous year
- An analysis of trends in health improvement for Apple Health clients in accordance with the measure sets established under RCW 41.05.690 and RCW 70.320
- Recommendations for improving the health of Apple Health enrollees

HCA completed both the annual review of the SCO performance measures and a review of the number of Apple Health covered lives and initial number of completed health screenings.

The SCO measures were initially addressed in contract in 2016 and continue to be addressed in contract changes year over year with the DSHS Area Agencies on Aging (AAA) and Managed Care Organizations (MCO). The reporting period within this report includes peak pandemic months, which created heightened access issues across the service system.

Report highlights

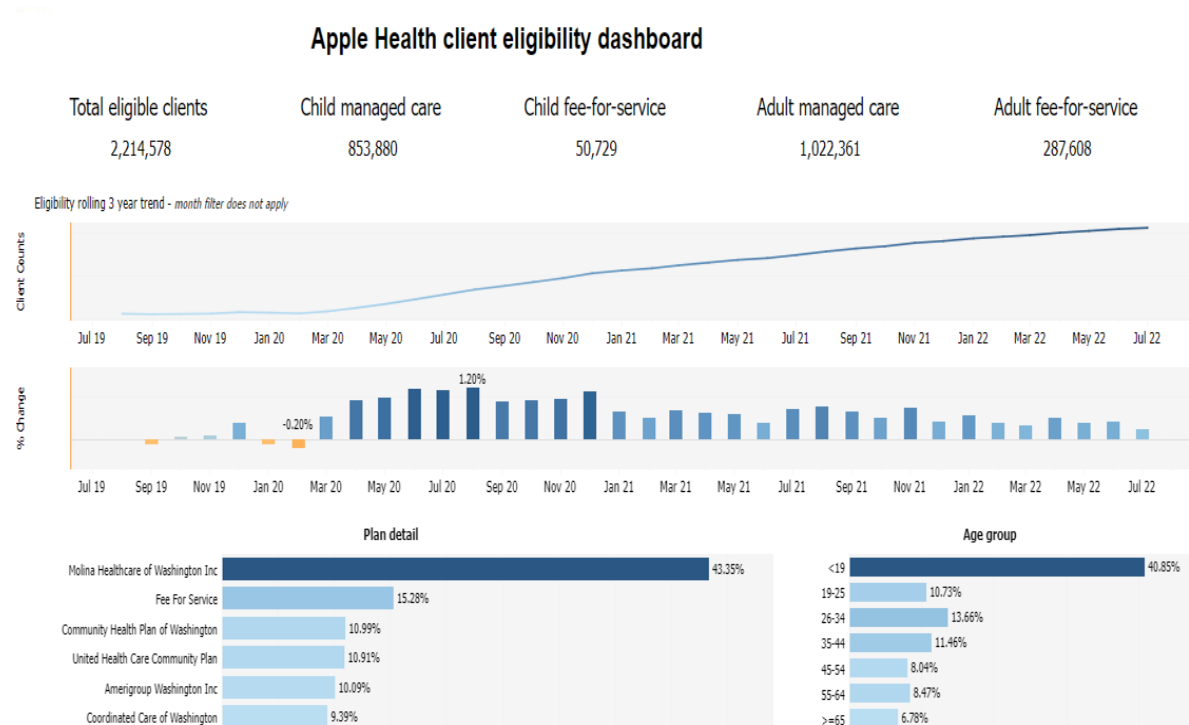
- Aging and Long-Term Support statewide measures were relatively stable during the past year:
 - Adults' Access to Preventative/Ambulatory Care and Percent Homeless changed by 0.1 percentage points
 - Home and Community Based Services (HCBS) and Nursing Facility Utilization Balance and Mental Health Treatment Rate showed improvement by at least two percentage points
 - Substance Use Disorder Treatment Rate increased by a percentage point
- Statewide measure for Apple Health managed care organizations performance that either remained stable or decreased during the past year:
 - Psychiatric inpatient 30-day re-admission decreased by one percentage point
 - Mental health treatment rate remained relatively the same
 - Engagement in Alcohol and Other Drug Dependence treatment decreased from 16.1 percent to 14.8 percent
 - Substance Use Disorder Treatment Rate decreased from 37.8 percent to 37 percent
- There was significant decrease (improvement) in managed care enrollees rates of homelessness and arrests from 2019 to 2021

Key findings and analysis

Apple Health covered lives and initial health screenings

The [Apple Health Client Dashboard](#) provides information on Apple Health participation, using the month of June, 2022 as a sample, figure 1 demonstrates the growth of the various Apple Health products throughout the last three years of the public health emergency, stemming from COVID19. As of June 30, 2022, there were 2,214,578 Washingtonians enrolled in Apple Health.

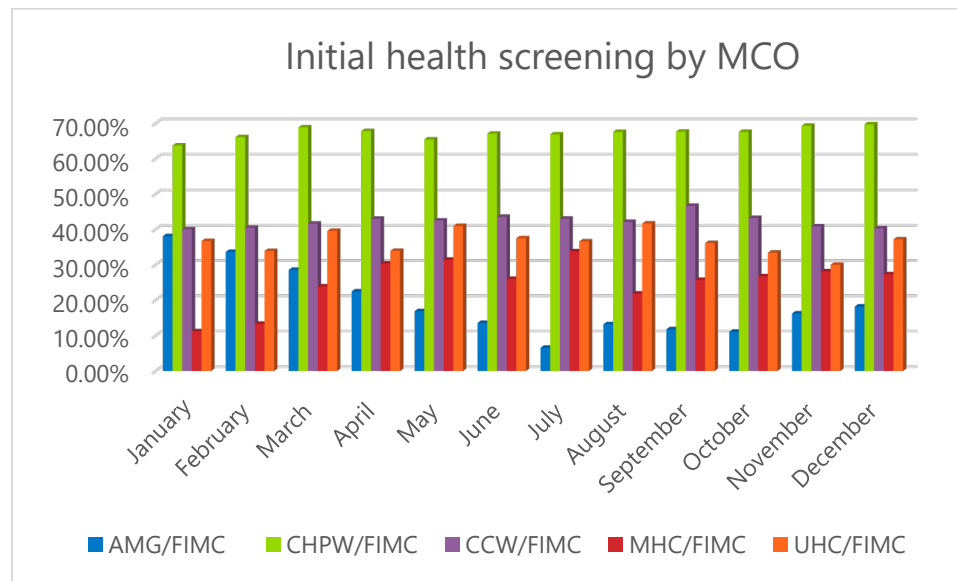
Figure 1. Apple Health client eligibility dashboard



Molina Healthcare of Washington is the largest carrier of Apple Health with 43.35 percent of Washington's Medicaid enrollees. Slightly over 40 percent of the enrollees in Apple Health are under 19 years old and approximately 57 percent have identified as White.

As a standard process, Apple Health managed care plans conduct initial health screenings with enrollees. These numbers fluxuate based on levels of enrollment throughout the year. Figure 2 describes the percentages of screens conducted by health plan during calendar year 2021.

Figure 2. Initial health screening by managed care plan during calendar year 2021¹



Service coordination organizations performance measure review

The data reported within this document is compiled and analyzed by DSHS Research and Data Analysis and can be accessed and viewed in full on their [website](#).

Area Agencies on Aging measure results

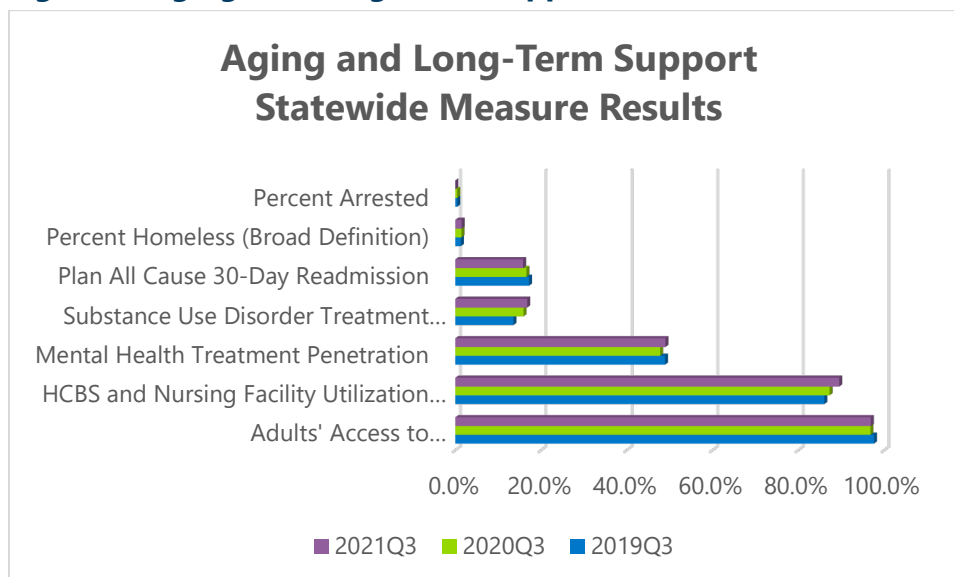
Area Agencies on Aging (AAA) measures are calculated and reported for both the state and regional service areas; this report will focus on state-wide measures that are required within AAA contracts that include Apple Health and dual-eligible (Medicare and Medicaid eligible) clients. These data are for the period through September 2021 for data completeness.

Aging and Long-Term Support statewide measures were relatively stable during the past year, as demonstrated by slight fluctuations within the Adults' Access to Preventative/Ambulatory Care and Percent Homeless which changed by 0.1 percentage point. The Substance Use Disorder Treatment Rate increased by a percentage point. The only measures to demonstrate larger growth were the HCBS and Nursing Facility Utilization Balance and Mental Health Treatment Rate which showed improvement by at least two percentage points.

¹ AMG= Amerigroup; CHPW = Community Health Plan of Washington; CCW= Coordinated Care of Washington; MHC= Molina Health of Washington; UHC= United Healthcare; FIMC= Fully integrated managed care

Table 1: Statewide measure results for Aging and Long-Term Support

Aging and Long-Term Support Statewide Measure Results	Twelve months ending		
	2019Q3	2020Q3	2021Q3
Adults' Access to Preventative/Ambulatory Care Health Care Services	97.7%	96.8%	96.9%
HCBS and Nursing Facility Utilization Balance	86.1%	87.3%	89.6%
Mental Health Treatment Rate	49.0%	47.8%	49.0%
Substance Use Disorder Treatment Rate	13.6%	15.9%	16.8%
Emergency Department Visits per 1,000 Coverage Months	87.2	77.5	84.9
Plan All Cause 30-Day Readmission	17.2%	16.6%	15.8%
Percent Homeless (Broad Definition)	1.3%	1.4%	1.5%
Percent Arrested	0.5%	0.5%	-

Figure 3: Aging and Long-Term Support Statewide Measure Results

Apple Health managed care organizations measure results

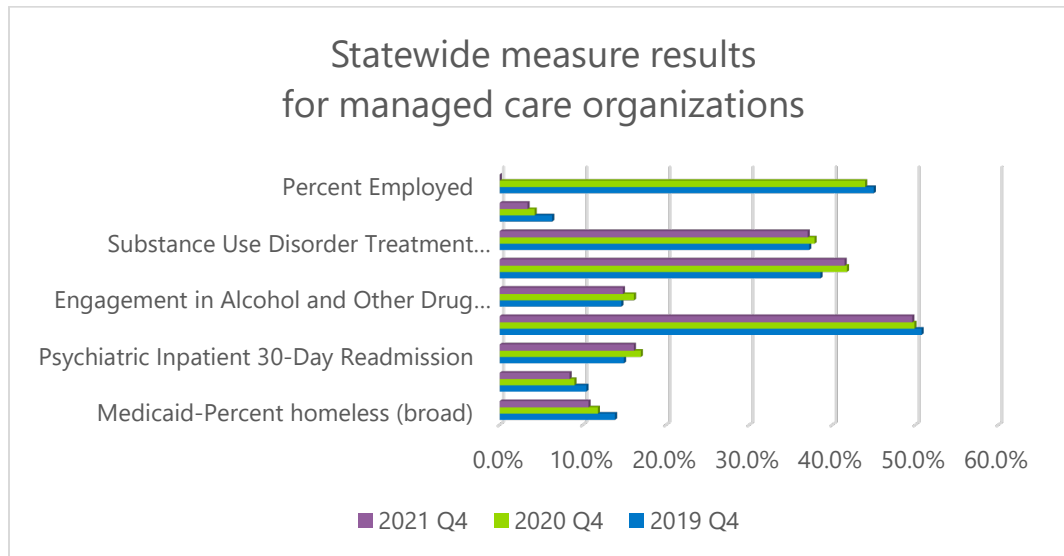
Statewide measures for Apple Health managed care organizations are calculated and reported for both the state and regional service areas; this report will focus on state-wide measures that are required within managed care (both integrated managed care and behavioral health service only) contracts. These data are for the period through December 2021 for data completeness.

Statewide measures for managed care organizations either remained stable or decreased during the past year. It is notable that the percent of enrollees in Apple Health managed care are experiencing significantly less homelessness and arrests in 2021 than they did in 2019. Psychiatric inpatient 30-day re-admission decreased by one percentage point, while mental health treatment rate remained relatively stable. Engagement in Alcohol and Other Drug Dependence treatment decreased from 16.1 percent to 14.8 percent but is back to a pre-pandemic level. However, Substance Use Disorder Treatment Rate decreased from 37.8 percent to 37 percent.

Table 2: Statewide Measure Results for managed care organizations

Statewide Measure	Twelve Months Ending		
	2019 Q4	2020 Q4	2021 Q4
Medicaid-Percent homeless (broad)	13.9%	11.8%	10.7%
Percent Homeless (narrow)	10.4%	9.0%	8.4%
Psychiatric Inpatient 30-Day Readmission	14.9%	17.0%	16.1%
Mental Health Treatment Rate (Broad)	50.7%	49.9%	49.6%
Engagement in Alcohol and Other Drug Dependence treatment	14.6%	16.1%	14.8%
Initiation of Alcohol and Other Drug Dependence treatment	38.6%	41.7%	41.5%
Substance Use Disorder Treatment Rate	37.2%	37.8%	37.0%
Medicaid--Percent arrested	6.3%	4.2%	3.3%
Percent Employed	45.0%	43.9%	-

Figure 4: Statewide Measure Results for managed care organizations



Conclusion and recommendations

Overall, the measure results for Apple Health managed care and service coordination organizations performance are relatively stable for the second year of the COVID19 pandemic. The most notable impacts of the public health emergency have been the rise in Apple Health enrollees, availability to telehealth services, and housing stability, brought on by the eviction moratorium.

The eviction moratorium played a role in decreasing the percentage of homelessness experienced by Apple Health enrollees during the past year. It is unclear whether this trend will continue as the moratorium and the public health emergency end.

Additionally, the increased access to services using telehealth may have contributed to the rise in Substance Use Disorder treatment and Mental Health treatment rates within the AAA populations.

Recommendations for care improvement include:

- Continue improving behavioral health integration efforts (e.g., integration improvement decision package)
- Create a more systematic way to measure progress in terms of housing instability and treatment integration for individuals who are arrested or incarcerated returning to the community;
- Increase efforts to promote housing stability now that the eviction moratorium has ended;
- Increase access to Medicaid through Apple Health Expansion;
- Improve integrated care for individuals with serious mental illness through Certified Community Behavioral Health Centers;
- Continue Medicaid transformation projects under the 1115 Waiver that promote increasing access, coordination, and quality care across our system;
- Maintain and improve access to services using telehealth options for individuals who have barriers to care or geographic limitations in their care networks;
- Continue outreach and education services for individuals who have behavioral health care needs to encourage follow up services; and
- Continue to monitor data to watch for emerging trends that differ from pre-pandemic experience to support system recovery.