

Integrated Care Network of Florida
2021 Utilization Management Monitoring (UMM) Program Work Plan
January 1st, 2021 through December 31st, 2021

The ICNF Utilization Management Monitoring (UMM) Annual Work Plan clearly defines the activities to be completed throughout the program year, based on the UMM Program Evaluation of the previous year. The UMM Work Plan is reviewed, updated, and approved annually by the Clinical Operations Committee and Board and includes the following:

- Time frame for completion of each activity
- Staff members role for completing each activity
- Monitoring of previously identified issues

The UMM Program Work Plan (UMM Work Plan) clearly defines the activities to be completed throughout the program year, based on the UMM Program Evaluation of the previous year. Because 2021 is the first year of operations for ICNF, much of the focus of 2021 will be on establishing the foundational benchmarks for utilization across the attributed population and provider network. Ongoing tracking of outcomes, activities, and trends during 2021 will inform the 2021 UM Work Plan Evaluation. That evaluation will guide the development of the 2022 UMM Work Plan which will have precise metrics, goals, objectives, and a prioritized focus on key operational elements that drive service utilization outcomes.

2021 OVERSIGHT, AUTHORITY, AND ROLES FOR UMM

ICNF's Board of Managers has authority and oversight of the development, implementation, and evaluation of the UMM Program and is accountable for oversight of the utilization of services provided to Attributed Members. The ICNF Board is responsible for authorizing and supporting Clinical Operations Committee and ICNF leadership recommendations and other initiatives and actions taken.

The Clinical Operations Committee is accountable to the Board of Managers and reports UMM Program activities, findings, recommendations, actions, and results to the Board of Managers no less than quarterly. ICNF leadership collaborates with Envolve, the Management Services Organization (MSO) for ICNF, for ongoing monitoring of utilization.

The ICNF Chief Clinical Officer is ICNF's senior executive that provides oversight of ICNF behavioral health utilization monitoring and contractual obligations. ICNF executive leadership is supported by Envolve, who performs data analytics and reporting to support the UMM Program. Envolve will:

- Produce reports and dashboards in a timely manner based on ICNF payer contractual agreements, input from ICNF committees, and approved by the ICNF Board
- Provide, document, and track monitoring activities and consultation/training/technical assistance as authorized by the ICNF Board, Clinical Operations, and Finance Committees

Envolve utilizes HealthEC (a population health platform) as the technology infrastructure and data analytics model to support utilization monitoring.

2021 UMM PRIORITIES AND GOALS

Utilization monitoring efforts support ICNF priorities, goals, and desired outcomes, and should ensure alignment with contracted payers utilization management programs. “Appropriate utilization” of services will be continuously determined as utilization and trend data is collected, assessed, and evaluated in the context of ICNF priorities, goals, and target outcomes. Priorities include:

- Ensuring access to timely, quality and high-value care;
- Evaluating attributed members level of engagement with ICNF providers based on utilization of services;
- Identifying utilization trends including under and over utilization of services with a focus on improving health outcomes and coordinating population health initiatives;
- Proactively assessing trends that impact total cost of care outcomes; and
- Provider support for ensuring appropriate utilization of services.

UMM ACTIVITIES FOR 2021, TIME FRAMES, AND STAFF ROLES FOR EACH

The following outlines the activities, time frames, and roles for each activity for UMM in 2021:

1. **Evaluating Member and Provider Engagement Levels.** By April 1st, 2021, the level of attributed member and provider engagement (based on overall engagement with a provider organization and specific licensed clinicians) will be compiled for review by the CCO and approval by the Clinical Operations Committee. While member engagement and direct provider engagement is difficult to measure, certain claims-based proxies can be used to evaluate the success of engagement metrics. Engagement may also be assessed based on billing data and any associated actions documented in HealthEC.
2. **Establishing utilization benchmarks based on claims data.** By June 30th, 2021, key utilization benchmarks will be established for the monitoring of utilization volumes, based on claims data from January through June, including the consideration of the impact of claims lag on these metrics. Envolve staff will compile the benchmarks for review by the CCO, recommendation by the Clinical Operations Committee, and approval by the ICNF Board.
3. **Physical and Behavioral Health benchmarks based on claims data.** By June 30th, 2021, specific utilization benchmarks will be established for evaluation of health outcomes that impact both physical and behavioral health outcomes, based on claims data from January through June, including the consideration of the impact of claims lag on these metrics. This activity will require the delivery of a comprehensive health claims data set from contracted payers for attributed members. Envolve staff will compile the benchmarks for review by the CCO, recommendation by the Clinical Operations Committee, and approval by the ICNF Board.
4. **Total Cost of Care benchmarks based on claims data.** By June 30th, 2021, specific total cost of care goals will be established, based on claims data from January through June, including the consideration of the impact of claims lag on these metrics. This activity will

require the delivery of a comprehensive health claims data set from contracted payers for attributed members and may include the estimation of paid claims figures if not provided by the payers. Envolve staff will compile the reports for review by the CCO, recommendation by the Clinical Operations Committee, and approval by the ICNF Board.

2021 UMM METRICS OF FOCUS

The “cohorts” for each of the metrics may include the following, based on available data:

Population cohorts: Attributed members of ICNF, geographic cohorts, socio-economic and racial cohorts; cohorts splitting utilization by physical health, behavioral health non-ICNF utilization including crisis stabilization, emergency department and inpatient care, and behavioral health ICNF utilization. Additional cohorts and considerations may include risk levels of members, diagnoses, and other elements as appropriate based on data volumes and available analytic source data.

Assigned Provider Organization cohorts: A critical element of focus for 2021 will be the reporting of utilization of members assigned to providers, and may include cohorts such as members with services with at least one assigned provider, members without services with assigned provider, and other cohorts of analytical focus.

1. Total Cost of Care:
 - a. Month to month total cost of care trends, with cohorts by assigned provider organization, and focus on in-scope service utilization (outpatient behavioral health services) as well as out of scope service utilization (e.g. inpatient and physical health services, all cause admissions and ED utilization, pharmacy).
2. Physical Health and Behavioral Health:
 - a. Month to month trend of ED visits or inpatient utilization for attributed members, by assigned provider organization and across regional and socio-economic and ethnic markers as available
 - b. Month to month trend of ED visits or inpatient utilization for attributed members, by assigned provider organization
3. Potential Over Utilization:
 - a. All claims data will be reviewed for a compilation of variances across provider organizations to assess potential indicators of trends related to overutilization.
4. Potential Under Utilization:
 - a. All claims data will be reviewed for a compilation of variances across provider organizations to assess potential indicators of trends related to underutilization.
5. Provider Engagement levels:
 - a. Month to month trend of attributed members who have not had a successful contact or completed appointment with assigned provider organization.

FREQUENCY AND REVIEW PROCESS FOR REPORTS

Three tiers of utilization monitoring are coordinated to ensure appropriate oversight:

1. Quarterly reports on less frequently used, low cost, or typically used outpatient services needed for the attributed population;

2. Monthly reports on services that need more close attention and monitoring for potential over, under, or overall provision of services; and
3. Prior Notification requirements for a small set of services that have the highest potential for over, under, or overall service utilization.

The specific codes in each tier of utilization monitoring may be adjusted during 2021 as needs, priorities, and objectives change. Appendix A lists the service codes included in each utilization monitoring tier.

At least quarterly, the Clinical Operations Committee will review utilization monitoring reports for outlier issues that may require action, from an ICNF, population, member, or provider perspective. Monthly reports will be actively monitored by Envolve and ICNF leadership for potential actionability. Prior notification entry will allow for ongoing review of the provision of a very small subset of services, without the delay in reporting due to claims lag. **Prior Notification is not required for payment and is not a clinical review of appropriateness such as what is required under a prior authorization model.**

The ICNF Chief Clinical Officer will be the primary conduit for assessment of reports and taking action as needed based on utilization reports but will report all related actions and activities to the Clinical Operations Committee for oversight, and/or the Board of Managers as necessary.

2021 UMM ACTIONS BASED ON OUTLIER TRENDS

Reports that identify consistent trends above or below target thresholds may result in recommendations for ICNF operational changes, such as member-focused, provider-focused, or community and collaborative payer-focused initiatives to improve outcomes. As noted above, 2021 will be primarily focused on establishing the foundational utilization benchmarks for ICNF. However, certain actions may be taken by ICNF if significant outlier trends are identified during the year. These may include:

1. Consultation and performance review
2. Root cause analysis conducted to identify opportunities for improvement
3. Technical assistance, training, and resources offered
4. ICNF provider organization requested to provide a written response and plan to improve performance to Clinical Operations Committee within 30 business days
 - a. 90-day performance measure review completed to determine if improvements have been achieved
 - b. If improvement has not been achieved at the 90-day review, the ICNF Clinical Operations Committee could recommend a Corrective Action Plan (CAP) be issued
5. If a corrective action plan (CAP) is issued and expectations are not met within the agreed upon timeframe (as determined by ICNF Clinical Operations Committee and approved by ICNF Board), the ICNF Board could decide to minimize potential impact to ICNF by
 - a. Stopping new client assignment
 - b. In extreme circumstances, suspension from the ICNF network may be considered in accordance with contract requirements

- c. In the case of suspension: ICNF will issue written notice of suspension that includes detailed criteria to be completed to be considered for reinstatement and any specific timelines, if applicable

The ICNF Board has approved the focus areas and utilization metrics listed below for the period of January 2021 – December 2021

ALL OF THESE DOCUMENTS REQUIRE A UNIFORM DATE APPROVED, SIGNATURE OF CCO AND DATE OF SIGNATURE

Appendix A – Frequency of Utilization Monitoring by ICNF In-Scope Service Code

Code	Service	Prior Notification	Monthly Monitoring	Quarterly Monitoring
99341	Home Visits			X
99342	Home Visits			X
99343	Home Visits			X
99344	Home Visits			X
99345	Home Visits			X
99347	Home Visits			X
99348	Home Visits			X
99349	Home Visits			X
99350	Home Visits			X
90836 GT	Psychotherapy – Add on Services - Telehealth			X
90838 GT	Psychotherapy – Add on Services - Telehealth			X
90845	Psychoanalysis			X
96116 GT	Telehealth: Neuro- Psychological Testing			X
99201	Individual Psychotherapy with Medication Management			X
99201 GT	Telehealth: Individual Psychotherapy with Medication Management			X
99202	Individual Psychotherapy with Medication Management			X
99202 GT	Telehealth: Individual Psychotherapy with Medication Management			X
99203 GT	Telehealth: Individual Psychotherapy with Medication Management			X
99204	Individual Psychotherapy with Medication Management			X
99204 GT	Telehealth: Individual Psychotherapy with Medication Management			X
99205	Individual Psychotherapy with Medication Management			X
99205 GT	Telehealth: Individual Psychotherapy with Medication Management			X
99211	Individual Psychotherapy with Medication Management			X
99211 GT	Telehealth: Individual Psychotherapy with Medication Management			X
99212 GT	Telehealth: Individual Psychotherapy with Medication Management			X
99213 GT	Telehealth: Individual Psychotherapy with Medication Management			X
99214 GT	Telehealth: Individual Psychotherapy with Medication Management			X
99215 GT	Telehealth: Individual Psychotherapy with Medication Management			X
H0001 TS	In-depth Assessment, Established Patient, Substance Abuse			X
H0020	Medication-assisted treatment services: Methadone Administration			X

Code	Service	Prior Notification	Monthly Monitoring	Quarterly Monitoring
H0046	Behavioral Health Services: Verbal Interaction MH			X
H0046 GT	Telehealth: Behavioral Health Services: Verbal Interaction MH			X
H0047	Behavioral Health Services: Verbal Interaction, Substance Abuse			X
H0047 GT	Telehealth: Behavioral Health Services: Verbal Interaction, Substance Abuse			X
H0048	Behavioral Health Services: Specimen Collection, Substance Abuse			X
H2000	Psychiatric Review of Records			X
H2010 GT HE	Telehealth: Brief Individual Medical Psychotherapy, MH			X
H2010 GT HF	Telehealth: Brief Individual Medical Psychotherapy, Substance Abuse			X
H2010 GT HO	Telehealth: Brief Behavioral Health Status Exam			X
H2010 HE	Brief Individual Medical Psychotherapy, MH			X
H2010 HF	Brief Individual Medical Psychotherapy, Substance Abuse			X
H2010 HO	Brief Behavioral Health Status Exam			X
H2010 HQ	Brief Group Medical Therapy			X
H2019 GT HR	Telehealth: Individual and Family Therapy			X
H2019 HQ	Group Therapy			X
H2019 HR TF	Individual and Family Therapy w/Art Therapy			X
T1015 HE	Behavioral Health Services, Medical Procedures, MH			X
T1015 HF	Behavioral Health Services: Medical Procedures, Substance Abuse			X
90833 GT	Psychotherapy – Add on Services - Telehealth			X
99234	Psychiatric Evaluation and Management, New			X
99236	Psychiatric Evaluation and Management, New			X
90847 GT	Telehealth- Family Psychotherapy			X
H0031 HA	Comprehensive Behavioral Health Assessment			X
90853	Group Psychotherapy			X
96105	Assessment of Aphasia			X
90832 GT	Psychotherapy, 30 min w/patient - telehealth			X
90834	Psychotherapy - 45 min w/patient			X
G0176	Art therapy > age 21			X
H0038	Self-help/Peer Services (In Clinic/Out of Clinic)			X
H0038 HQ	Self-help/Peer Services (Group)			X
H2019 HM	Therapeutic Behavioral On-Site Services, Therapeutic Support, Behavioral Management, Intervention			X
H2019 HN	Therapeutic Behavioral On-Site Services, Behavior Management			X
H2019 HO	Therapeutic Behavioral On-Site Services, Therapy			X

Code	Service	Prior Notification	Monthly Monitoring	Quarterly Monitoring
H2019 HR	Individual and Family Therapy			X
H2019 HS	Individual Therapy Sessions for Caregivers			X
H2020 HA	Behavioral Health Overlay Services, Child Welfare Setting			X
T1017	Targeted Case Management for Adults			X
T1017 HF	Targeted Case Management for Adults			X
T1017 HA	Targeted Case Management for Children			X
T1027	Family Training and Counseling for Child Development			X
90845 GT	Telehealth: Family Psychotherapy			X
90785 TF	Individual Psychotherapy w/ Art therapy			X
90832	Psychotherapy, 30 min w/patient			X
90837	Psychotherapy - 60 min with patient			X
90837 TF	Individual Psychotherapy w/ Art therapy			X
90847	Family Psychotherapy, with patient			X
90847 TF	Family Psychotherapy, with patient w/Art Therapy			X
90853 TF	Group Psychotherapy w/ Art Therapy			X
H2019 U9	Behavioral Management, Intervention			X
H2020	Behavioral Management, Intervention			X
H2020 HM	Behavioral Management Assessment, Per Diem			X
90845 TF	Psychoanalysis w/ Art therapy			X
90791	Comprehensive Assessment		X	
99203	Individual Psychotherapy with Medication Management		X	
99212	Individual Psychotherapy with Medication Management		X	
99213	Individual Psychotherapy with Medication Management		X	
99214	Individual Psychotherapy with Medication Management		X	
99215	Individual Psychotherapy with Medication Management		X	
99241	Consultations: Office & Outpatient		X	
99242	Consultations: Office & Outpatient		X	
99243	Consultations: Office & Outpatient		X	
99244	Consultations: Office & Outpatient		X	
99245	Consultations: Office & Outpatient		X	
99324	Psychiatric Evaluation & Management, New patient		X	
99325	Psychiatric Evaluation & Management, New patient		X	
99326	Psychiatric Evaluation & Management, New patient		X	
99327	Psychiatric Evaluation & Management, New patient		X	
99328	Psychiatric Evaluation & Management, New patient		X	
99334	Psychiatric Evaluation & Management, Established patient		X	
99335	Psychiatric Evaluation & Management, Established patient		X	

Code	Service	Prior Notification	Monthly Monitoring	Quarterly Monitoring
99336	Psychiatric Evaluation & Management, Established patient		X	
99337	Psychiatric Evaluation & Management, Established patient		X	
99231	Subsequent Hospital Care		X	
99231 GT	Telehealth: Subsequent Hospital Care		X	
99232	Subsequent Hospital Care		X	
99232 GT	Telehealth: Subsequent Hospital Care		X	
99233 GT	Telehealth: Subsequent Hospital Care		X	
99235	Psychiatric Evaluation and Management, New		X	
H0001	Limited Functional Assessment, Substance Abuse		X	
H0001 GT	Telehealth: Limited Functional Assessment, Substance Abuse		X	
H0001 GT HN	Telehealth: Bio-Psychosocial Evaluation, Substance Abuse		X	
H0001 GT HO	Telehealth: In-depth Assessment, New Patient, Substance Abuse		X	
H0001 GT TS	Telehealth: In-depth Assessment, Established Patient, Substance Abuse		X	
H0001 HN	Bio-Psychosocial Evaluation, Substance Abuse		X	
H0001 HO	In-depth Assessment, New Patient, Substance Abuse		X	
H0031	Limited Functional Assessment, MH		X	
H0031 GT	Telehealth: Limited Functional Assessment, MH		X	
H0031 GT HA	Telehealth: Comprehensive Behavioral Health Assessment		X	
H0031 GT HN	Telehealth: Bio-Psychosocial Evaluation, MH		X	
H0031 GT HO	Telehealth: In-depth Assessment, New Patient, MH		X	
H0031 GT TS	Telehealth: In-depth Assessment, Established Patient, MH		X	
H0031 HN	Bio-Psychosocial Evaluation, MH		X	
H0031 HO	In-depth Assessment, New Patient, MH		X	
H0031 TS	In-depth Assessment, Established Patient, MH		X	
H0032	Treatment Plan Development, New and Established patient, MH		X	
H2000 HO	Psychiatric Evaluation By Non-Physician		X	
H2000 HP	Psychiatric Evaluation By Physician		X	
S9484	Mobile Crisis Assessment And Intervention		X	
S9485	Mobile Crisis Assessment And Intervention		X	
T1007	Treatment Plan Development, New and Established Patient, Substance Abuse		X	
T1007 TS	Treatment Plan Review, Substance Abuse		X	
T1015	Medication Management		X	
T1017 SE	Targeted Case Management Child Health Service – Medical Foster Care		X	
T1023 HE	Behavioral Health Screening, MH		X	

Code	Service	Prior Notification	Monthly Monitoring	Quarterly Monitoring
T1023 HF	Behavioral Health Screening, Substance Abuse		X	
96116	Neuro-Psychological Testing		X	
H0015	Intensive outpatient		X	
H2014	Life Skills Development		X	
H2014 HM	Life Skills Development		X	
H2014 HQ	Life Skills Development		X	
H2014 TE	Life Skills Development		X	
H2019	Psychological Testing, Behavioral Management, Intervention		X	
H2022	Community Based Wraparound Services		X	
H2030	Clubhouse Services		X	
S5102 HE	Drop-In Center		X	
S9475	Ambulatory Detoxification Services		X	
S9480	Intensive Outpatient		X	
T1017 HK	Intensive team targeted case management for adults		X	
H2012	Behavioral Health Day Services, MH, age 6 and older, Behavioral Health Day Services, MH (for children ages 24 months through 5 years)	X	X	
H2012 HF	Behavioral Health Day Services, Substance Abuse	X	X	
S5145	Specialized Therapeutic Foster Care Services, Level 1	X	X	
S5145 HE	Specialized Therapeutic Foster Care Services, Level 2 and Crisis Intervention	X	X	
S5145 HK	Specialized Therapeutic Foster Care Services, Level 2 and Crisis Intervention	X	X	
H2017	Psychosocial Rehabilitation Services	X	X	
H0019	Therapeutic Group Care Services	X	X	
T1023 HA	Infant Mental Health Pre and Post testing Services (0 - 5)	X	X	