



July 25, 2012

Madeline McAndrew
Bayou Health Director
Department of Health and Human Services
628 North 4th St.
Baton Rouge, LA 70802

Re: Concurrent Review Corrective Action Plan

Dear Ms. McAndrew,

On behalf of Louisiana Healthcare Connections, I would like to submit for your approval our corrective action plan in response to the initial phase of the concurrent review turnaround time audit recently conducted. In addition, as requested, is also a sample outlier report for any future outliers in the 30-day reporting period.

We would like to request that we only be required to provide drill-down on outliers if we are below the performance metric of 95% of concurrent review authorizations within the 1 business day turnaround time instead of the 100% as mentioned. Please let us know your decision on this.

I would also like to mention that one of the records documented as non-compliant was actually in compliance however; my staff did not retrieve the documentation of verbal request for medical records during the audit. Since that time, I have offered time-stamped proof of this documentation as proof of compliance, and this was turned down by DHH.

In addition, I would like to make sure that you have our correct initials as LHC and not CHS, as indicated in certain parts of the letter from DHH to the plan, as well as the correct address, as the letter had an address in Virginia Beach, VA. Our address is 8585 Archives Avenue, Suite 310, Baton Rouge, Louisiana, 70809.

Feel free to contact me should you have any questions about this action plan or the sample outlier report.

Sincerely,

A handwritten signature in blue ink, appearing to read "Jamie Schlottman", is written over a light blue circular stamp.

Jamie Schlottman
Plan President, CEO

Attachment



Concurrent Review Corrective Action Plan - Revised

Explanation: Problem Identification

Louisiana Healthcare Connections did recognize during the roll out of GSA-B that we were not meeting turnaround times for concurrent review authorizations. The major contributors to not meeting our contractual turnaround times included two issues:

- We were selected by Centene corporate to be the pilot site for a new data capture software and management platform, FileNet. This changed the way we took in faxed requests for authorizations, as well as how we processed them in our system. This system went live on April 15th. Immediately, we identified many bugs and gaps in the system and worked diligently with our corporate office over a 4 week time period to get these issues ironed out; however, in the end, we could not make this new system work effectively. We terminated the use of this system around May 15th, and reverted back to our original processes. This process caused a delay in our staff gaining experience and proficiency, since we had been in operations just a little over 3 months and continually had new staff coming on board due to the rolling go-lives. This system and the process change also put us behind for over two months, as we had a lot of after-termination clean up and catch-up that had to occur.
- In addition to the system challenges we had, we were also understaffed in this area once GSA-B hit. We had planned a rolling hire for the plan, but we had a greater turnover than expected due to the challenges we were finding in the workforce applying for our positions. During this time, we had 3 unexpected concurrent review positions turn over, which left us even more understaffed. Once the volume from GSA-C hit, we were extremely understaffed in this area.

Explanation: Prevention of Future Occurrence

- We terminated the pilot of the new software platform, FileNet, after 4 weeks for constant attempts to correct the issues.
- We have since reorganized the entire Utilization Management department, including the placement of a new Manager over Concurrent Review.
- A new Concurrent Review Supervisor position was approved and hired in July.
- We have had many new concurrent review nurses hired over the last few months – turnover rate is high in this area and we are focusing efforts on retention and better hires.
- A new Manager of Education and Training position was approved and hired in July.

- Our initial new hire training program has been expanded to better equip staff and help prevent turnover.
- Our existing staff received reinforced training in systems, processes, and the importance of turnaround times.
- The responsibility for notification letters for approvals was removed from Concurrent Review Nurses and given to the Referral Specialists (non-clinical staff) to allow the nurses more time to focus on reviews.
- We are in the process of developing a denial letter unit which will also allow the other nurses to further focus on quality and timeliness.
- Change in Medical Director.

Detailed Action Plan

Identified Issue	Details of Proposed Changes	Responsible Party or Unit to Implement Change Process	Anticipated Impact on Affected Unit and Supporting Units	Testing of Process or System Change	Effective Date of Change
Reorganization and Staffing of UM Department	<p>Change in Manager for Concurrent Review</p> <ol style="list-style-type: none"> 1. Discuss change with both current and proposed Manager and HR – June 15 2. Move current Manager into another, better suited position - July 2 3. Move Manager of PA into Manager of Concurrent Review role – July 2 	Sr. Director of Medical Management, HR	Improved Morale and Productivity	<p>Ongoing evaluation of new Manager in role</p> <ol style="list-style-type: none"> 1. Use ongoing company self-evaluation and manager evaluation programs 2. 360 Assessment in process for Supervisors, Managers and above (direct report, peer, and supervisor feedback) 	July 2

	<p>4. Make change in employee management and financial software platform – July 2</p> <p>Addition of Supervisor role to UM Departments</p> <ol style="list-style-type: none"> 1. Create job in HR system – July 2 2. Post positions and run ads on Centene website, local papers, or CareerBuilder – July 2 3. Interview appropriate candidates – July 2 thru August 1 for concurrent review 4. Select and make offers to top candidates – August 30 for concurrent review 	<p>Managers of UM, Sr. Director of Medical Management, VP Medical Management, Human Resources</p>	<p>Improved Morale and Productivity</p>	<p>3. Evaluate compliance with state contracts and NCQA requirements</p> <p>Ongoing evaluation of new Supervisor in role</p> <ol style="list-style-type: none"> 1. Use ongoing company self-evaluation and manager evaluation programs 2. 360 Assessment in process for Supervisors, Managers and above (direct report, peer, and supervisor feedback) 3. Evaluate compliance with state contracts and NCQA 	<p>August 3 for concurrent review</p>
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	5. Make change in employee management and financial software platform – July 16			requirements	
Staffing of Concurrent Review	<p>Addition of 10 RNs to Concurrent Review Staff – some onsite in other markets</p> <ol style="list-style-type: none"> 1. Continue to run ads on Centene website, local papers, or CareerBuilder – start May 1 (ongoing) 2. Continue to interview appropriate candidates and send to background when identified as potential hire – start May 19 (ongoing) 3. Make competitive offers and offer sign on bonuses when needed or relocation bonuses to attract 	Managers of UM, Sr. Director of Medical Management, VP of Medical Management, Human Resources	Improved productivity and turnaround times, minimize overtime and weekend work for current staff	<p>Continue to implement retention strategies to keep employee morale up</p> <ol style="list-style-type: none"> 1. Considering implementing company car program for onsite concurrent review nurses 2. Provide Key Contributor Awards to those concurrent review nurses who continue to demonstrate dedication or work overtime routinely 3. Encourage Managers and Directors to provide little spot rewards and departmental 	<p>See detailed concurrent review staffing grid below this table</p> <p>3 new hires came out of training at end of June, 1 came out of training mid-August, 5 came out of training at the beginning of September, 1 came out of training at the end of September, and 5 new hires starting in November</p>

	<p>top candidates – start May 1 (ongoing)</p>			<p>treats as they see fit – fund those through planned budget items</p> <p>4. Encourage continued education with tuition reimbursement program and payment for certifications or unique educational opportunities</p>	
<p>Addition of Manager of Training and Education for plan</p>	<p>Addition of Manager of Training and Education</p> <ol style="list-style-type: none"> 1. Create job in HR system – May 9 2. Post position and run ads on Centene website, local papers, or CareerBuilder - May 9-June 30 3. Interview appropriate candidates – July 2 	<p>Sr. Director of Medical Management, HR</p>	<p>Improvement in quality and quantity of Education and Training programs, including initial orientation – this will help better prepare employees for their specific roles</p>	<p>No need for testing – position was implemented and training schedule has since been evaluated and revamped to include an additional week for new hire clinicians</p>	<p>July 9</p>

	<ol style="list-style-type: none"> 4. Select and make offer to top candidate – July 5 5. Make change in employee management and financial software platform - July 9 				
Education Improvement	<p>Changed new hire clinical orientation from 2 weeks to 3 weeks</p> <ol style="list-style-type: none"> 1. Training and orientation schedules evaluated – June 1 to June 30 (ongoing) 2. Employees evaluated and asked to comment on initial hire training June 1 to June 30 (ongoing) 3. Change made to increase new hire clinical orientation from 2 weeks to 3 weeks – July 1 	Trainer, Manager of Training and Education, Sr. Director of Medical Management	Improved quality of initial orientation which will result in more confident and qualified staff members able to better handle the production environment and productivity measures	Plan leadership and corporate regularly conduct audits of concurrent review staff as well as require baseline and annual InterQual assessments for staff	July 11

	<p>4. Change - 3 week new hire sessions were conducted: July 5th July 31st August 20th September 17th October 15th</p> <p>Re-education of current staff on systems and processes as well as turnaround times Ongoing education provided:</p> <ol style="list-style-type: none"> 1. June 14th NICU and General Inpatient Authorization 2. July 26th TAT Requirements 3. July 26th Letter and phone notification 4. July 27th Updated Auth guidelines 5. July 27th Temp ID and Birth Events 	<p>Trainer, Manager of Training & Education, Managers of UM, Supervisors of UM</p>	<p>Improved quality of ongoing education which will result in more confident and qualified staff members able to better handle the production environment and productivity measures</p>	<p>Same as above</p>	<p>July 26 & Ongoing</p>
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	<p>6. August 10th CAP expectations to meet TAT (Staff Meetings)</p> <p>7. September 11th Reinforced education on TAT (staff Meeting)</p> <p>8. October 12th Inpatient Authorization dates (system education)</p> <p>9. October 25th Education on State/Corporate/NC QA guidelines for authorizations</p> <p>10. October 31 Staff huddle meetings to discuss system and process changes to allow discrete data fields to be completed so that TAT report can be automatically pulled</p>				
Process Improvements	Notification letter creation and distribution moved as	Managers of UM, Sr. Director	Allow clinicians to function at	Plan and corporate audit functions evaluate the	July 27

	<p>efficiency June 30</p> <ol style="list-style-type: none"> 3. Create jobs in HR system – July 1 4. Post position and run ads on Centene website, local papers, or CareerBuilder – July 1 (ongoing) 5. Interview appropriate candidates July 1 – October 15 6. Select and make offers to top candidates Sept 18th and October 3 7. Make change in employee management and financial software platform Sept 18 and Nov 12 				<p>to personal issues September 28th</p> <ul style="list-style-type: none"> • Assigned internal staff member to focus on denial letters on September 26th for PA denials and Supervisor assistance for CR denials • Two new denial nurses hired with start date November 12th • Updated target completion date December
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System Improvements	<p>Termination of File Net pilot data capture program (see detail in first paragraph on page 1)</p> <ol style="list-style-type: none"> 1. Too many steps in this 4 week long initial pilot program to describe, implementation handled by corporate IS Dept 2. System was not functioning properly so it was terminated 	VP Medical Management, Centene Corporate	Return back to original processes – this will improve turnaround times and decrease chance for error with auth processes	Testing continued to validate that the system was not functioning properly	May 15
	<p>Dual monitors added for all concurrent review staff</p> <ol style="list-style-type: none"> 1. Discussed need with Centene corporate for dual monitors for concurrent review and PA staff – July 1 2. Approval granted from CEO, VP Finance, and VP 	VP Medical Management, Sr. Director of Medical Management, Managers of UM	Improved turnaround and completion times since 2 systems can be accessed and viewed at the same time – also staff morale as this should make their job easier	Time studies were conducted to evaluate the efficiency of dual monitors on the concurrent review role – the tests did prove that dual monitors improved completion time of an authorization	July 23

	<p>Medical Management July 5</p> <ol style="list-style-type: none"> 3. Monitors ordered through IT – July 5 4. Monitors arrived and were installed by IT – July 23 5. Staff instructed how to maximize use of dual monitors – July 23 6. Monitors in use – July 23 <p>Upgrades to TruCare, the clinical documentation system used by Medical Management</p> <ol style="list-style-type: none"> 1. Centene corporate notified plan of upcoming TruCare upgrades – Aug 2012 (ongoing) 2. Centene corporate 	<p>Centene Corporate – with testing and execution by plans</p>	<p>Updates provide continued improvement in processes and functionality</p>	<p>Quality testing provided by Centene corporate Medical Management – User Acceptance Testing completed by all participating health plans – including Louisiana Healthcare Connections</p>	<p>September 29</p> <ol style="list-style-type: none"> 1. TruCare 4.8.2 updates to note summary, utilization letters, provider search, etc...
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	<p>sent out education to Medical Management staff regarding details of each upgrade Sept 29 and Oct 27</p> <ol style="list-style-type: none"> 3. Quality testing conducted by corporate Medical Management department - Prior to rollout (ongoing) 4. User Acceptance Testing conducted by each health plan- including Louisiana Healthcare Connections - to ensure proper user functionality Sept 29 and Oct 27 5. Processes or protocols changed as needed to match new functionality (ongoing) 6. Once all passed – corporate upgraded system each time an update was available 				<p>October 27</p> <ol style="list-style-type: none"> 2. Updated access to 2012 InterQual criteria <p>Ongoing as needed</p>
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	- Sept 29 and Oct 27 7. Staff began using new version of 2012 InterQual criteria software Oct 29				
Change in Medical Director	Medical Director no longer with the plan as of October 30 th 1. Corporate Medical directors licensed in Louisiana are assisting until a new CMO or Medical Director is hired	CEO, HR	Significantly improved morale of concurrent review staff, along with better adherence to required turnaround times for concurrent review	No testing needed	October 30

Concurrent Review Staffing Grid

First Name	Job Title	Hire Date	Termination Date
CW	Case Mgr (Concurrent Rev)	1/17/2012	10/10/2012
PF	Case Mgr (Concurrent Rev)	1/17/2012	
DJ	Case Mgr (Concurrent Rev)	3/19/2012	9/28/2012
SP	Case Mgr (Concurrent Rev)	4/16/2012	
JM	Case Mgr (Concurrent Rev)	4/16/2012	5/22/2012
AM	Case Mgr (Concurrent Rev)	4/16/2012	
HB	Case Mgr (Concurrent Rev)	5/7/2012	6/13/2012
CP	Case Mgr (Concurrent Rev)	5/14/2012	6/25/2012
CD	Case Mgr (Concurrent Rev)	5/14/2012	6/19/2012

VN	Case Mgr (Concurrent Rev)	5/29/2012	
SR	Case Mgr (Concurrent Rev)	6/11/2012	
LS	Case Mgr (Concurrent Rev)	6/11/2012	8/10/2012
WD	Case Mgr (Concurrent Rev)	6/11/2012	
ET	Case Mgr (Concurrent Rev)	7/30/2012	9/25/2012
TP	Case Mgr (Concurrent Rev)	8/20/2012	
PK	Case Mgr (Concurrent Rev)	8/20/2012	
CA	Case Mgr (Concurrent Rev)	8/20/2012	
PM	Case Mgr (Concurrent Rev)	8/20/2012	
AC	Case Mgr (Concurrent Rev)	8/20/2012	
DF	Case Mgr (Concurrent Rev)	9/17/2012	10/11/2012
LJ	Case Mgr (Concurrent Rev)	11/12/2012	
AR	Case Mgr (Concurrent Rev)	11/12/2012	
LS	Case Mgr (Concurrent Rev)	11/12/2012	
SS	Case Mgr (Concurrent Rev)	11/12/2012	
AD	Case Mgr (Concurrent Rev)	11/12/2012	

Sample Outlier Report

Total # of Concurrent Review Authorizations	# of Authorizations Completed Within 1 Business Day	% of Authorizations Completed Within 1 Business Day	# of Authorizations Not Completed Within 1 Business Day	% of Authorizations Not Completed Within 1 Business Day

Total # of Concurrent Review Authorizations	# of Authorizations Completed Within 2 Business Days	% of Authorizations Completed Within 2 Business Days	# of Authorizations Not Completed Within 2 Business Days	% of Authorizations Not Completed Within 2 Business Days

Outliers from Above Report (Those Over 1 or 2 Business Day Turnaround)

Date of Request	Provider Requesting	Date of Decision	# of Days out of Compliance	Comments