

055: PROMOTING SERVICE EXCELLENCE IN A MANAGED BEHAVIORAL HEALTHCARE DELIVERY SYSTEM

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Objective:

To improve member accessibility to outpatient behavioral healthcare services.

Methods:

PBH-SW monitors accessibility to outpatient behavioral healthcare services to ensure members gain prompt access to behavioral health benefits and services and the availability of timely appointments with appropriate practitioners. Telephone accessibility is the primary means for PBH members to access their benefits. A pattern of decreasing performance in the organization’s ability to answer calls within 30 seconds indicated a customer service failure. In 1999, the managed behavioral healthcare organization (MBHO) identified a problematic trend in obtaining timely appointments with prescribing practitioners for members with specialty care needs. This was particularly concerning as assessment and treatment in a timely manner addresses the immediate clinical symptoms, reduces the worsening of symptoms, and minimizes the risk of unnecessary and more restrictive care. Barrier analyses performed by the MBHO revealed opportunities for improvement in technology resources, organization and staff performance, member knowledge, call volume, and recruiting and retaining practitioners. Interventions implemented to improve accessibility include:

- 1) utilization of daily telephone performance and call volume data to
 - provide guidance for supervisors in individual and group coaching sessions with staff regarding specific areas of under-performance,
 - reconfigure phone queues to allow for greater coverage of incoming calls,
 - develop staff schedules driven by peak and low volume call times, and
 - establish a recognition program for high-performing staff.
- 2) Interventions specific to appointment accessibility include: increased practitioner recruitment efforts, recruited prescribing non-psychiatrist practitioners who have prescriptive privileges, reduced paperwork requirements for practitioners, and reduced administrative requirements related to authorizations and reimbursement.

Results:

Implementing process and system changes resulted in improved accessibility for members.

**Calls Answered by a non-recorded voice
prescribing
within 30 seconds
business days**

<u>Time Period</u>	<u>Results</u>
01/01/00-12/31/00	78%
01/01/01-12/31/01	89%
01/01/02-12/31/02	95%

**Routine Appointment with
practitioner within 10**

<u>Time Period</u>
01/01/99-12/31/99
01/01/00-12/31/00
01/01/01-09/30/01 (YTD)

These were results of performance monitoring and targeted interventions to improve performance.

- Increased efficiencies and staff retention correlating with significant improvement in telephone accessibility performance.
- Improved appointment availability with prescribing practitioners was primarily driven by improvements in network availability
- Improved practitioner satisfaction as a result of changes made by the managed behavioral healthcare organization related to the utilization management process.
- Improved practitioner satisfaction with utilization management processes
- Enhanced practitioner interest in accepting referrals from the organization.

Conclusions:

Based on performance results, implementing process and system changes increases accessibility to outpatient behavioral health services. Knowledge gained from the project includes:

- Producing reliable data, detailed call volume and performance data is necessary to identify areas of weakness and develop targeted interventions
- Retaining experienced staff is key to ensuring timely handling of calls
- Expanding practitioner recruitment activities increases practitioner availability and accessibility for appointments
- Reducing paperwork and administrative requirements for practitioners positively impacts timely accessibility to practitioners.