

Peer and Family Run Organization Activity in Northern Arizona

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The Alliance ACO

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Executive Summary

PFro provider candidates were identified by Alliance ACO executive leadership in collaboration with Health Choice BCBSAZ executive leadership. The Alliance then discussed different fiscal and strategic approaches to on-boarding Peer and Family Run Organizations (PFros). In keeping with Alliance vision and principles, data will be used to drive fiscal and strategic decisions.

The Alliance has researched the prevalence and impact of PFros on members of the Alliance ACO. The results of this research will drive future decision making as we incorporate PFros into the Alliance ACO.

Initial data was collected in collaboration with the Alliance ACO, The Narbha Institute, and Health Choice BCBSAZ. By using the methodology outlined below, we found that 0.002%, or 183 of the 103,487 Alliance ACO members received peer and family run services in the 2022 calendar year. Of those, 0.0002%, or 13 people have been deemed eligible for a HEDIS/NCQA¹ VBP measure in the 2022 VBP measurement year. The greatest number of non case management services delivered respite services (S5150), family support services (S5110), and peer support services (H0038).

Method

Now, let us take you on a journey to how we reached these conclusions.

Data Sources

The Alliance ACO has a demonstrated secure, systematic approach to data acquisition, preservation, and production. The Alliance has worked in tandem with HC BCBSAZ software developers, quality management and clinical professionals, and finance administration to ensure the most up to date and accurate data is used.

Data elements used to drive fair and equitable decisions were:

- Member Enrollment data (as of 7/21/23)
 - Demographics
 - Residential information
- Behavioral health claims (1/1/22 - 12/31/22)
 - Service utilization

- Finances
- Value Based Purchasing Quality Roster (as of 03/23/23)
- Value Based Purchasing Quality Roster (as of 7/21/23)
- FUH7 and AMM2 validation data

These elements create a comprehensive dataset from which multiple variables can be used to create any desired combination of analysis tables. Variables include demographics, service utilization data, diagnostic groupings, financial spend, and value based measures.

Data Preparation

Alliance ACO Member Roster

First, we extract the current member roster from BCBSAZ Health Choice data warehouse. This roster was pulled on 7/21/23. This original Health Choice Global Member Roster includes all HCA members in the Arizona ACC health plan, regardless of location or enrollment status.

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Then, the HC Global Member Roster is filtered to include Alliance ACO members only by filtering for residential addresses in Northern Arizona, and auto-assignments to Alliance Providers. For this study, we include members who were enrolled as of 1/1/22, and who were not disenrolled until at least after 1/1/23. In other words, the member was enrolled for all of the 2022 calendar year, which coincides with the date range of HEDIS/NCQA guidelines. This is called the Alliance ACO Member Roster.

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Peer and Family Run Organization Activity

Next, we extracted all behavioral health claims for the 2022 VBP Measurement Year (1/1/2022-12/31/2022) from the BCBSAZ-Health Choice data warehouse that were delivered by key PFros in the Health Choice network. This data was extracted on 7/27/23. This dataset is called the PFro BH Claims.

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Now, we merge the Alliance ACO Member Roster with the PFro BH Claims records, attaching each behavioral health claim to its respective member information from the roster. The resulting table is a list of actively enrolled Alliance members with PFro behavioral health claims. This dataset is called PFro Activity (aka, "La Tabla Monstrua").

This table contains a record of all Alliance ACO members who have received a service from a PFro, the type of service, responsible provider, and other utilization data.

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Next, we add the Behavioral Health Services Matrix² description words for the service codes, just to make it more easily readable.

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Then, we add indicators for ICD-10 diagnostic group ranges to the PFro Activity dataset. The Alliance has previously conducted research that indicates Mood Disorder and Anxiety Disorder diagnostic group ranges are more predictive of negative health and system outcomes, like inpatient care and high cost claims. This is a potential target population for future Alliance PFro Providers[^_].

[] predictive modeling study reference here

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Value Based Purchasing Quality Reports

Next, add data from the aggregated Health Choice VBP Quality Roster. The Alliance has thoroughly documented and tested a validation model for the NCQA/HEDIS FUH measure³. One output of that project is an aggregated and cleaned roster containing all of the data from the Health Choice VBP Quality Rosters of ALL of the Alliance Providers.

Incorporating this data allows us to identify those members who have, and have not, been served by a PFro, who have also been deemed eligible for a VBP measure.

We import 2 sets of VBPQR data:

- Report date: 3/23/23, for historical comparison
- Report date: 7/21/23, for current activity (*To be used in future research*)

The report from 3/23/23 contains all VBP QR data for the 2022 measurement year (1/1/22-12/31/22), and provides the basis for historical comparisons.

The report from 7/21/23 gives us the most recently available VBPQR data in order to have insight into the members' needs today.

It should be noted that some members are listed more than once on the 2023 HC VBPQR for the same measure, sometime with different gap statuses. This inflates the data by only 3 records (3 table rows). There were no duplicates in the 2022 roster.

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Then, we add an indicator for Alliance ACO members who had a valid FUH7 inpatient service that would qualify them for the FUH7 VBP Measure.

This is largely for very near *future research*. The FUH7 data is for claims that were authorized and paid for the measurement year 2023-01-01 to 2023-12-31. While the year is out of sync with our historical PFro

Activity data set (2022-01-01 to 20232-12-31), the more current data from our active VBP Validation process gives us a better picture of the member’s needs today.

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Then, we add another indicator to the PFro Activity dataset for Alliance ACO members who had a valid AMM antidepressant medication prescription that would qualify them for the AMM VBP Measure.

Again, this is largely for *future research*. We use the AMM Validation PBM claims data to identify any Alliance ACO members with a potentially eligible AMM pharmacy claim according to HC claims that have been approved and paid. This AMM data is for claims that were authorized and paid for the HEDIS/NCQA 2023 measurement year Intake Period (2021-05-01 to 2022-04-30).

The AMM Validation model is still under development at the time of this writing. However, the core dataset of PBMClaims data for antidepressant medications is fully valid. Completion of the model will give us more insight, but this is enough to be getting on with.

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PFro Summary

Finally, we select desired variables from this monster table into the final dataset, called the PFro Summary dataset. We are able to apply this data to create any desired combination of variables.

Some examples of these specialized datasets are contained the analysis below:

- Summary of All PFro activity
- Unduplicated list of members served by PFro
- PFro Engagement Matrix

Thank you for joining us on this journey. Now, enjoy the analysis.

Yours,

The Alliance

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Analysis

Overall Service Utilization and Cost

Table 1: PFro Services by Provider

Table 1 contains the total number of services delivered to Alliance members by each PFro, and how much they were paid, during the 2022 calendar year.

Combinations of provider and service code that accounted for less than 1% of the total services delivered were excluded from the analysis.

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Summary of PFro Services by Service Code

Provider Name	Service Code	Number of Services	Code Description	Percent of All Services	Amount Paid	Members Served	Avg Amount Paid per Person
FAMILY INVOLVEMENT CENTER	S5110	239	Home care training, family (family support), per 15 minutes	2.46%	\$41,831	15	\$2,789
FAMILY INVOLVEMENT CENTER	H2014	148	Skills training and development, per 15 minutes	1.53%	\$16,143	14	\$1,153
FAMILY INVOLVEMENT CENTER	S5150	187	Unskilled respite care, not hospice, per 15 minutes	1.93%	\$12,905	11	\$1,173
FAMILY INVOLVEMENT CENTER	T1016	421	Case management, each 15 minutes	4.34%	\$14,281	35	\$408
HOPE LIVES	S0215	172	Non-emergency transportation mileage, per mile	1.77%	\$14,547	14	\$1,039
HOPE LIVES	A0120	172	Non-emergency transportation: mini-bus, mountain area transports	1.77%	\$4,544	14	\$325
HOPE LIVES	H0038	601	Self-help/peer services (peer support), per 15 minutes	6.19%	\$31,490	16	\$1,968
HOPE LIVES	H2014	125	Skills training and development, per 15 minutes	1.29%	\$9,161	7	\$1,309
MIKID MENTALLY ILL KIDS IN DIST	S5110	588	Home care training, family (family support), per 15 minutes	6.06%	\$126,525	46	\$2,751
MIKID MENTALLY ILL KIDS IN DIST	S5150	2307	Unskilled respite care, not hospice, per 15 minutes	23.78%	\$669,508	64	\$10,461
MIKID MENTALLY ILL KIDS IN DIST	T1016	2950	Case management, each 15 minutes	30.41%	\$140,986	102	\$1,382
NAZCARE, INC. - FRIENDS RECOVER	S0215	189	Non-emergency transportation mileage, per mile	1.95%	\$3,074	3	\$1,025

Provider Name	Service Code	Number of Services	Code Description	Percent of All Services	Amount Paid	Members Served	Avg Amount Paid per Person
NAZCARE, INC. - FRIENDS RECOVER	A0120	189	Non-emergency transportation: mini-bus, mountain area transports	1.95%	\$3,236	3	\$1,079
NAZCARE, INC. - FRIENDS RECOVER	H0038	417	Self-help/peer services (peer support), per 15 minutes	4.30%	\$35,504	8	\$4,438
NAZCARE, INC. - FRIENDS RECOVER	H2014	249	Skills training and development, per 15 minutes	2.57%	\$11,217	3	\$3,739

Figure 1: PFro Services by Provider

This is a visualization of the percent of total services delivered to Alliance members by each PFro during the 2022 calendar year.

In this chart, each bar represents a portion of all services delivered from all providers. For example, MIKID's provision of 2,950 Case Management (T1016) services, accounts for 30% of all of the PFro services delivered to Alliance ACO members.

Combinations of provider and service code that accounted for less than 1% of the total services delivered were excluded from the analysis.

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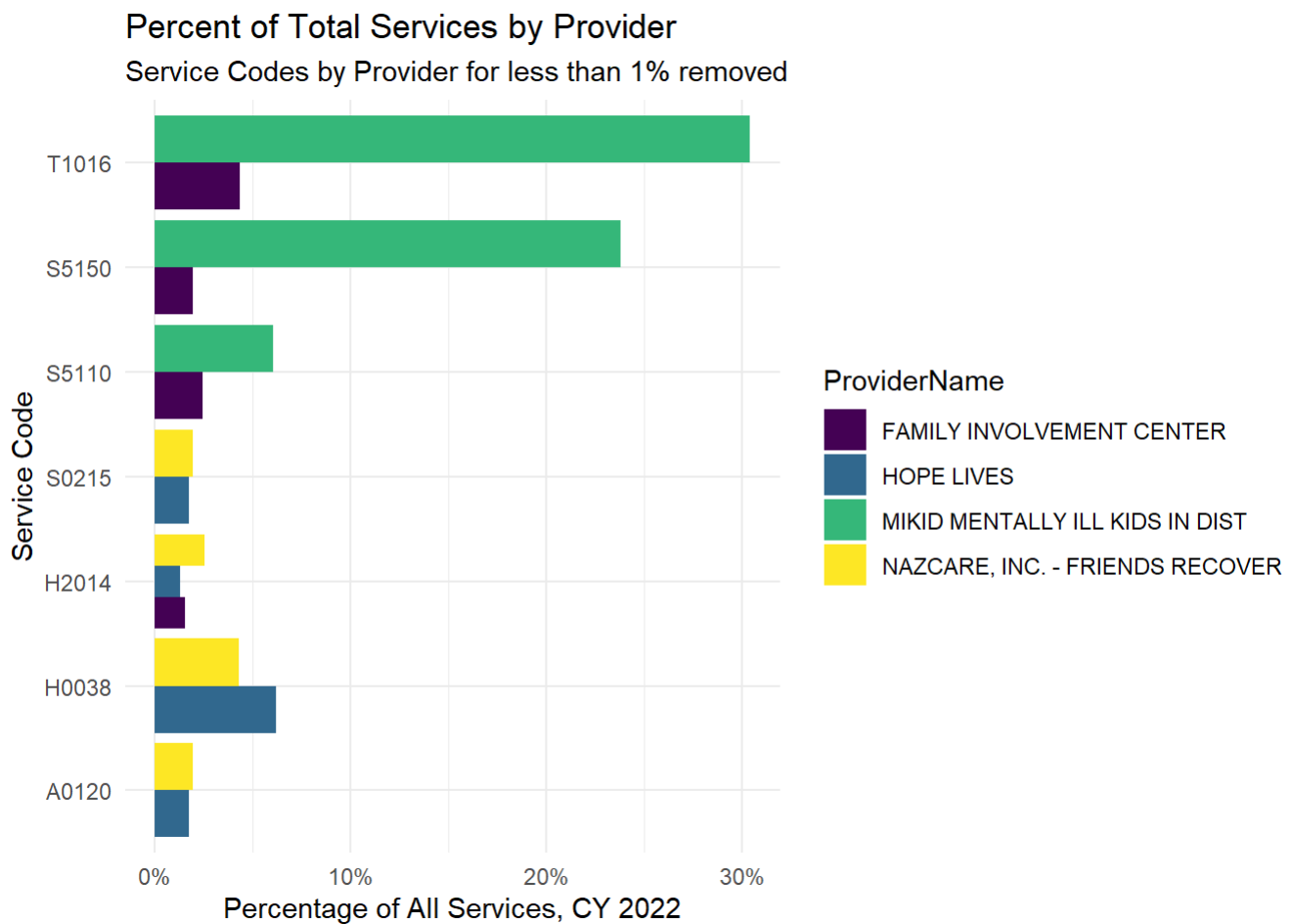


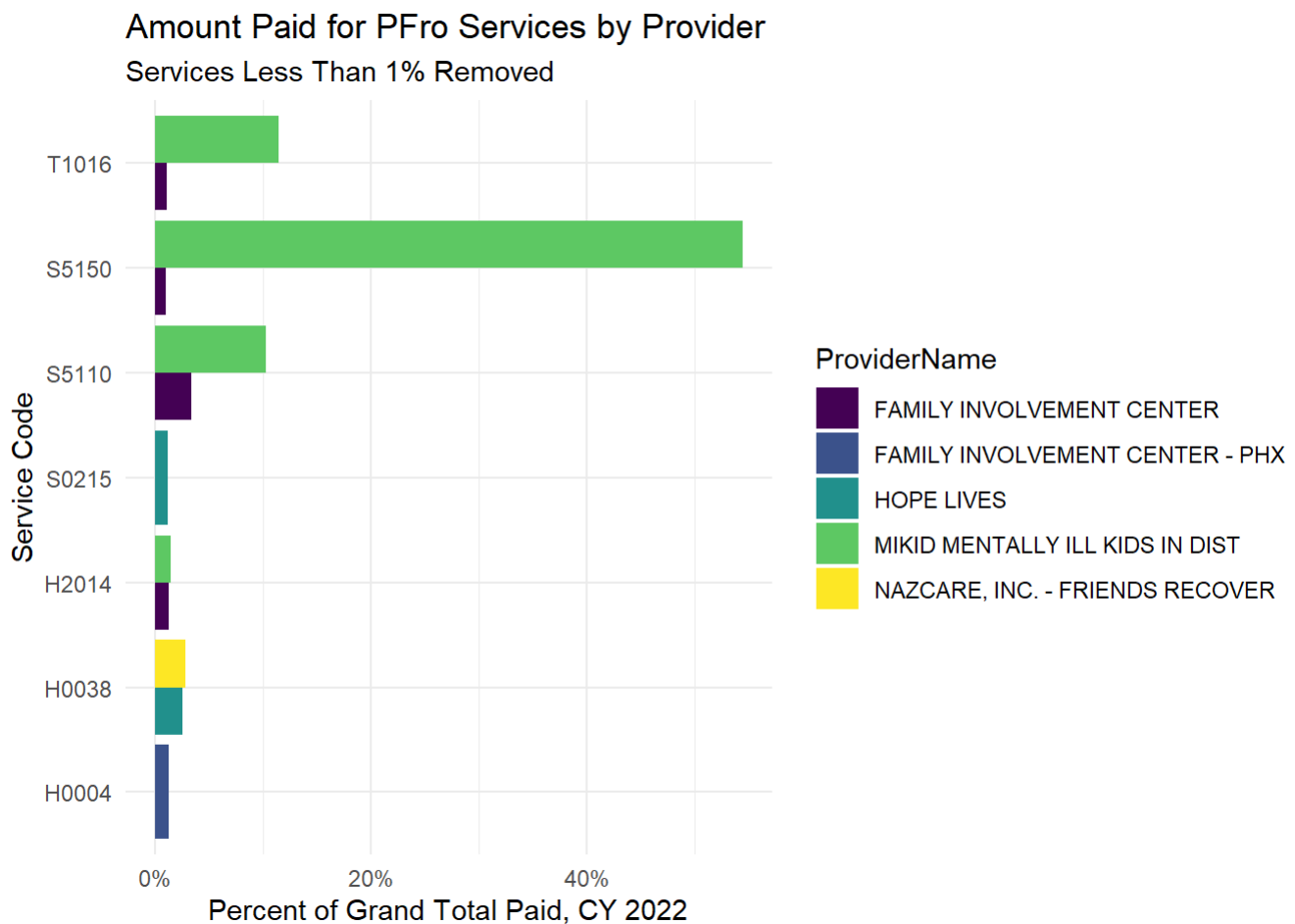
Figure 2: PFro Services by Amount Paid

This is a visualization of the percent of total amount paid to each PFro during the 2022 calendar year.

In this chart, each bar represents a portion of all of the money paid for services delivered from all providers. For example, MIKID's provision of 2,950 Case Management (T1016) services, for the amount of \$140,986, accounted for 30.78% of all of the PFro services, and 12% of all of the money paid for PFro services during the 2022 calendar year.

Combinations of provider and service code that accounted for less than 1% of the total services delivered were excluded from the analysis.

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PFro Member Engagement

Figure 3: PFro Member Engagement

This is a visualization of the Alliance ACO members who received services with a PFro during the 2022 calendar year. The bar chart indicates if the member was eligible for a HEDIS/NCQA VBP measure, or not.

For example, of the 53 members that MIKID served during the 2022 calendar year, 1 (0.8% of all members) was deemed eligible for a VBP Measure by the Health Choice VBPQR, and 52 (42% of all members) were not.

For this assessment, T1016 (Case Management) was excluded because the volume of services obscures other clinical services.

Combinations of provider and service code that accounted for less than 1% of the total services delivered were excluded from the analysis.

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Current PFro Engagement with Alliance ACO Members

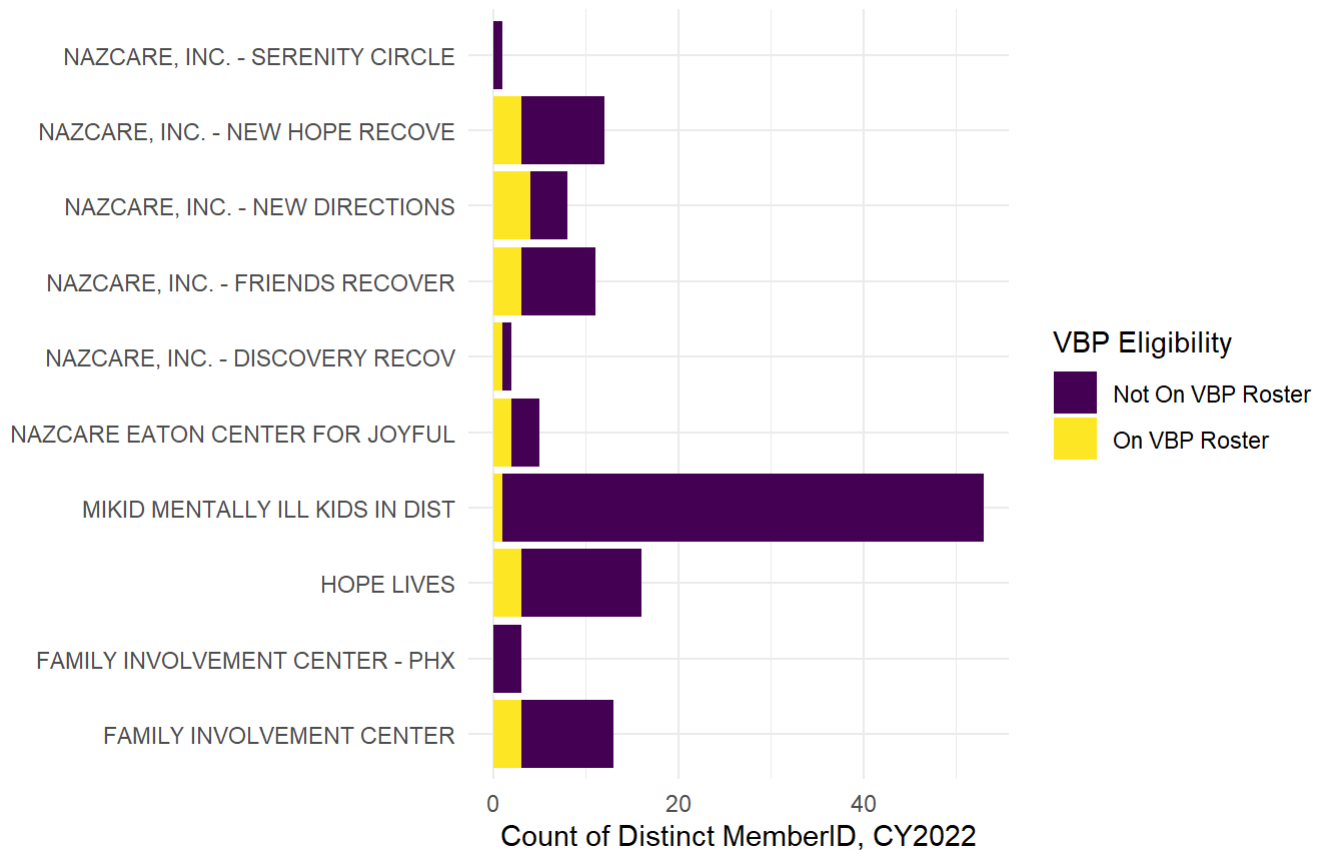


Table 2: PFro Member Engagement

This table contains the distribution of distinct Alliance members, who received a PFro service, and whether or not they were deemed eligible for a HEDIS/NCQA VBP measure according to the HC VBP Quality Roster during the 2022 VBP measurement year.

T1016 (Case Management) was excluded because the volume of services obscures other clinical services.

Combinations of provider and service code that accounted for less than 1% of the total services delivered were excluded from the analysis.

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PFro Engagement of Alliance Members, CY 2022

Provider Name	VBP Eligible	Members	Percent of Members Served
FAMILY INVOLVEMENT CENTER	Not On VBP Roster	10	8.06%
FAMILY INVOLVEMENT CENTER	On VBP Roster	3	2.42%
FAMILY INVOLVEMENT CENTER - PHX	Not On VBP Roster	3	2.42%
HOPE LIVES	Not On VBP Roster	13	10.48%
HOPE LIVES	On VBP Roster	3	2.42%

Provider Name	VBP Eligible	Members	Percent of Members Served
MIKID MENTALLY ILL KIDS IN DIST	Not On VBP Roster	52	41.94%
MIKID MENTALLY ILL KIDS IN DIST	On VBP Roster	1	0.81%
NAZCARE EATON CENTER FOR JOYFUL	Not On VBP Roster	3	2.42%
NAZCARE EATON CENTER FOR JOYFUL	On VBP Roster	2	1.61%
NAZCARE, INC. - DISCOVERY RECOV	Not On VBP Roster	1	0.81%
NAZCARE, INC. - DISCOVERY RECOV	On VBP Roster	1	0.81%
NAZCARE, INC. - FRIENDS RECOVER	Not On VBP Roster	8	6.45%
NAZCARE, INC. - FRIENDS RECOVER	On VBP Roster	3	2.42%
NAZCARE, INC. - NEW DIRECTIONS	Not On VBP Roster	4	3.23%
NAZCARE, INC. - NEW DIRECTIONS	On VBP Roster	4	3.23%
NAZCARE, INC. - NEW HOPE RECOVE	Not On VBP Roster	9	7.26%
NAZCARE, INC. - NEW HOPE RECOVE	On VBP Roster	3	2.42%
NAZCARE, INC. - SERENITY CIRCLE	Not On VBP Roster	1	0.81%

Table 3: PFro VBP Engagement Matrix

This table demonstrates the number of Alliance ACO members who have received PFro Services, or not, and if that member was eligible for a HEDIS/NCQA VBP measure.

During the 2023 measurement year, of the total Alliance ACO membership of 103,487 members, 202 have received services from a PFro. 19 of those 202 members were deemed eligible for a HEDIS/NCQA VBP measure.

In other words, PFro service providers are currently providing care to 0.2% of the Alliance ACO membership, including 0.002% of VBP eligible members.

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PFro Engagement and VBP Eligibility, CY 2022

Included In VBP Measure	Received PFro Service	Members	Percent of All Alliance Members
No VBP, No PFro Svc	NoPFroServices	103285	0.9980481
Not On VBP Roster	PFroServices	183	0.0017683
On VBP Roster	PFroServices	19	0.0001836

Figure 4: PFro Engagement of Eligible VBP Members

This figure is a description of the level to which PFro providers have engaged with Alliance members who have been deemed eligible for a HEDIS/NCQA VBP measure according to HC VBPQR.

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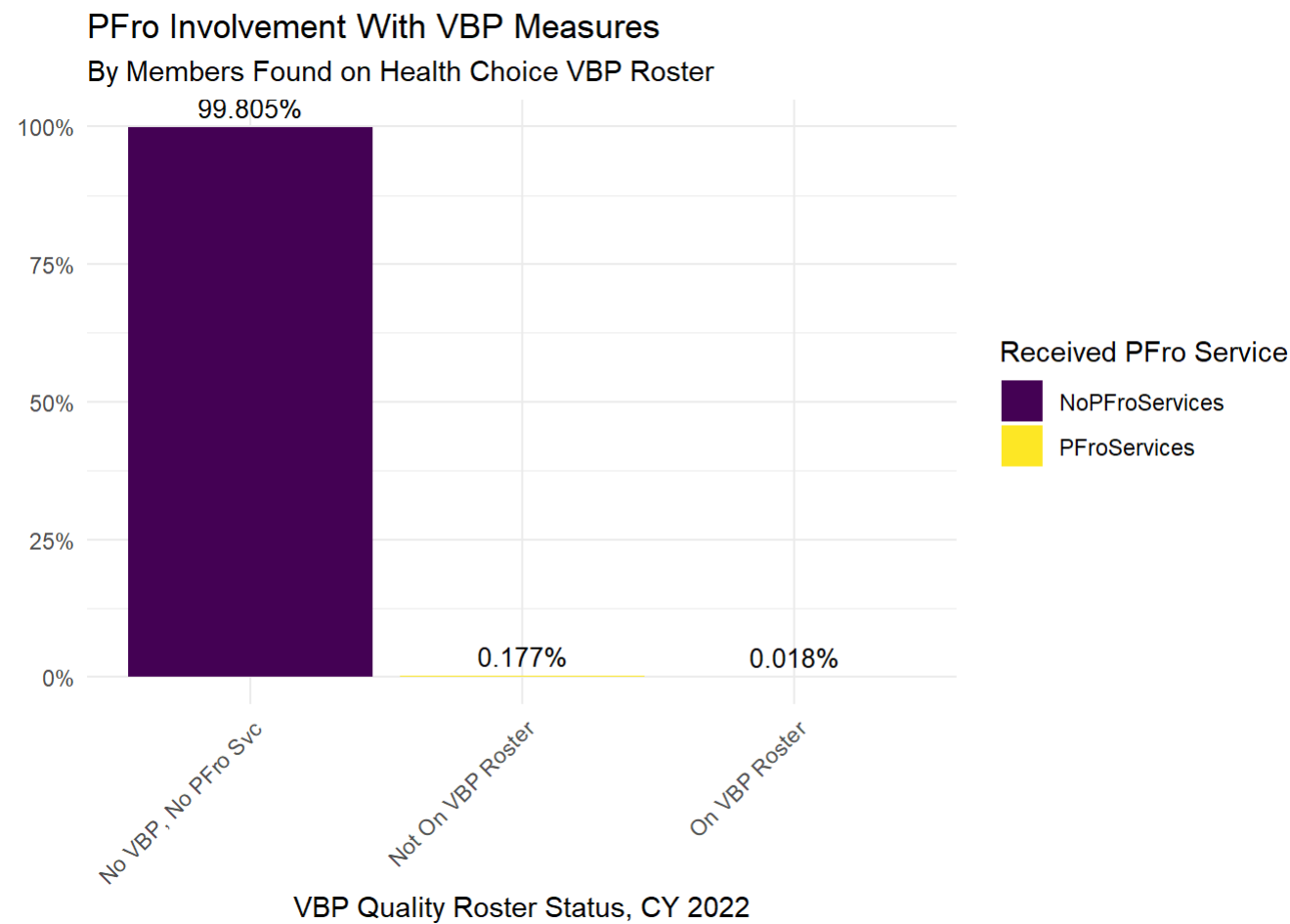


Figure 5: PFro Member Engagement by County

This figure demonstrates the prevalence of PFro Services throughout the Northern Region. This is a count of distinct members receiving PFro services.

For example, Family Involvement Center provided services to the following number of members per county in the calendar year 2022:

- Coconino: 12
- Mohave: 1
- Yavapai: 4

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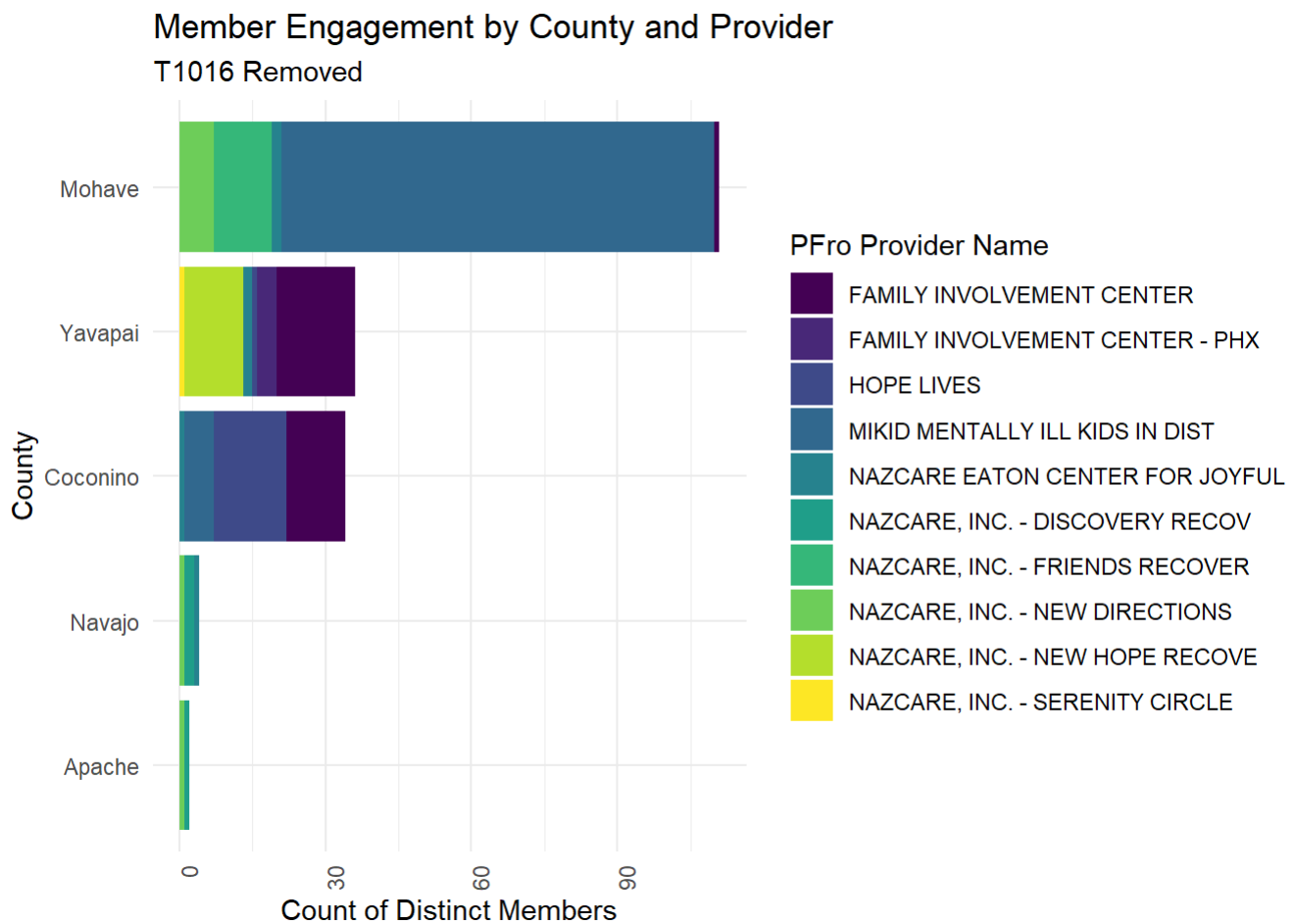


Figure 6: Alliance Population Pyramid

This figure demonstrates the the sex and age groupings of the Alliance Members who have received services from a PFro.

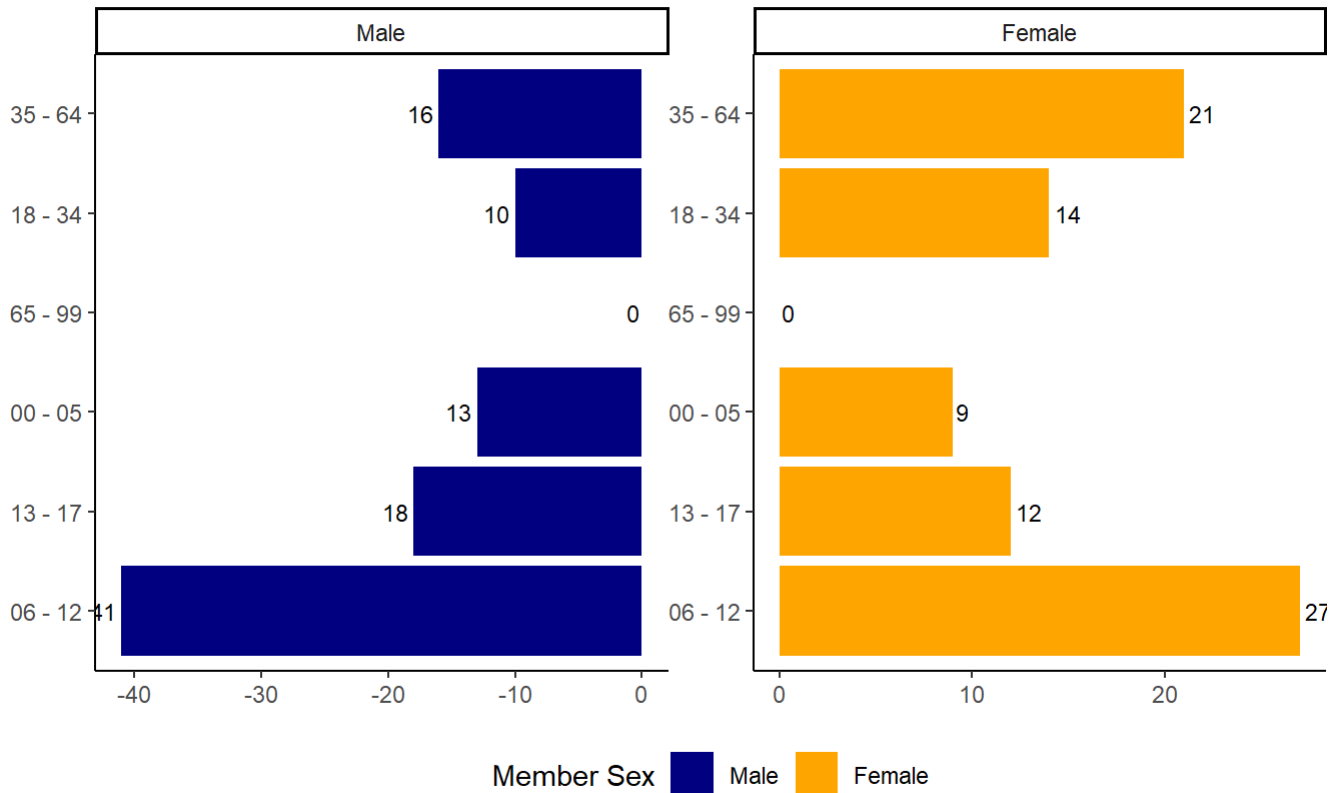
Note: Currently having an issue getting the age groupings to sort correctly. They don't obey normal ordinal rules because they are text, not numbers.

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PFro Member Engagement by Gender and Age Group

Enrolled during 2022 calendar year



Source: BCBSAZ Global Members, Extracted 2023-07-26

Table 4: PFro Engagement With Eligible VBP Members

This table is a list of actively enrolled Alliance Members, who are listed on the Health Choice VBP Quality Roster and received services from a PFro, and all of the indicators, by claim, from the PFroSummary. There are multiple claims for 13 individuals. This table is found in the project output folder.

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Figure 7: Provider Engagement with VBP Eligible Members as Percent of Grand Total of Services

This figure visualizes the engagement of only those members who have been deemed eligible for a HEDIS/NCQA VBP measure according to the HC VBPQR, who have also received services from a PFro. All of the claims are included for each of the 13 affected individuals.

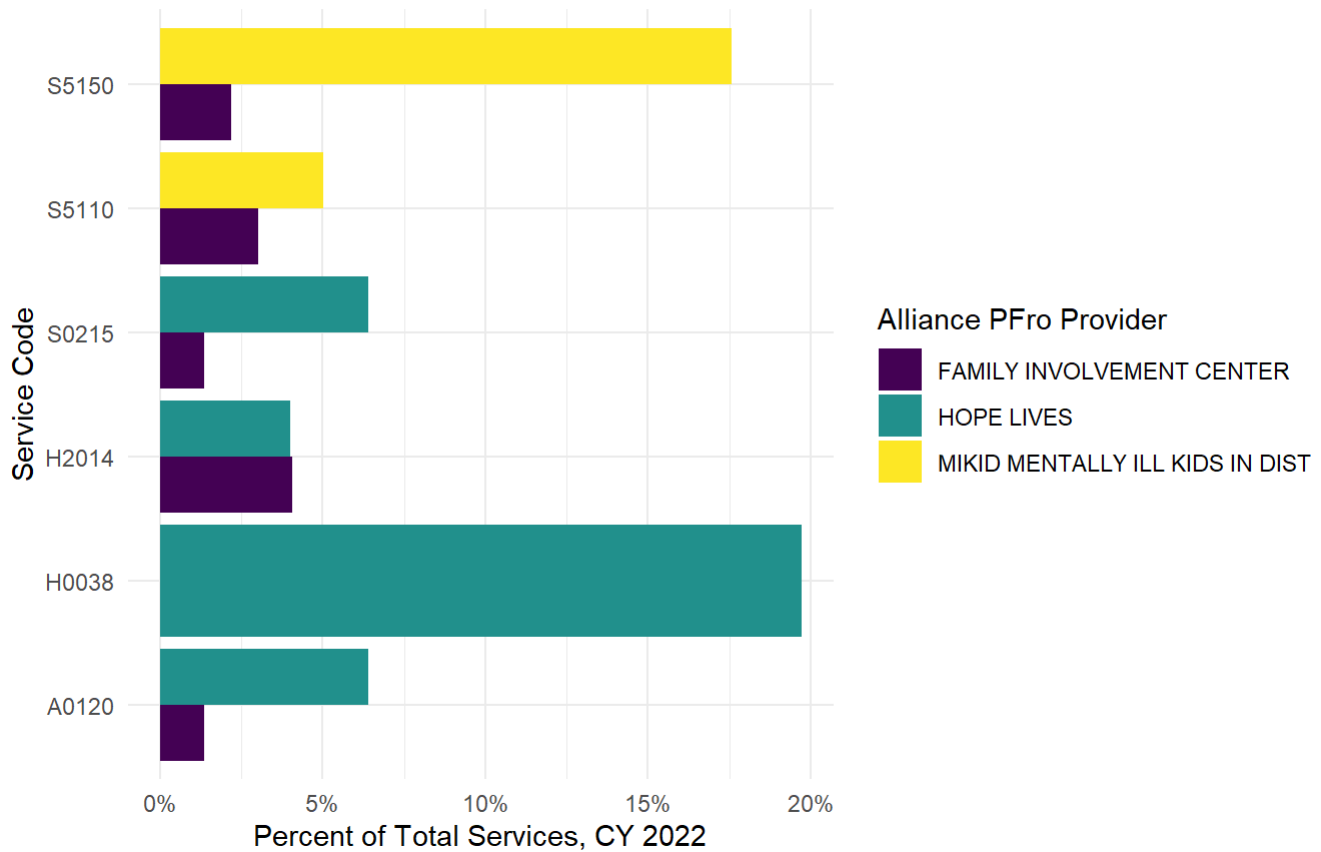
Combinations of provider and service code that accounted for less than 1% of the total services delivered were excluded from the analysis.

Service code T1016 (Case Management) has been removed because its volume of service obscures other clinical measures.

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PFro Engagement With VBP Members

As percent of grand total



Footnotes

1. NCQA. (2023). *HEDIS and Performance Measurement*. <https://www.ncqa.org/hedis/>
2. AZAHCCCS. (2023). *Behavioral Health Services Matrix*. <https://www.azahcccs.gov/PlansProviders/Downloads/MedicalCodingResources/>
3. Kivela, J.R. (July, 2023). Value Based Purchasing Report. *The Northern Arizona Regional Behavioral Health Alliance*.