Arizona Health Care Cost Containment System

QuickStart Guide

Quality Of Care Report

Note: Test data/information is displayed in the screenshots listed in this document

Table of Contents

1.	General remarks	2
2.	Access Quality of Care Reports	3
3.	Quality of Care Page	4
4.	Provider Information Panel	5
5.	Member Information Panel	7
6.	Clinical and Diagnosis Panel	8
7.	Treatment Information Panel	9
8.	QOC Referral Information Panel	. 10
9.	Information Sources Panel	. 11
10.	Timeline Panel	. 12
11.	Allegations Panel	. 13
12.	Case Summary Panel	. 18
13.	Attachments Panel	. 20
14.	Amendments Panel	. 21
15.	Electronic Signatures Panel	. 22
16.	QOC Tracking Panel	. 23
17.	QOC - Report - Read Only View	. 25
Appen	dix A – Incident Categories and SubCategories	. 26

Quality Of Care Report

1. General remarks

After each action, notification about the outcome with the appropriate message is displayed in the right upper corner of the screen. Successful actions will be in green and unsuccessful in red color. Message will automatically disappear from the screen after 5 seconds.



Validations are set for text fields that expect data input in certain format e.g. Date fields or number fields. If invalid data is entered in the field, error notification will appear next to the field in question and will be visible for 5 seconds. Field will be marked with a red color drop shadow until the error is corrected.



Like the validations, new features and changes on the pages will be announced in the same manner. They will not disappear after 5 seconds and need to be dismissed by clicking on the notification. This is not an error; it is just there to draw user attention to the new changes introduced in the new version.

All Date fields are date pickers which functionality is activated by clicking anywhere on the field.



Quality Of Care Report

2. Access Quality of Care Reports

Access to the Quality of Care Reports is allowed only to Contractor/TRBHA, Health Plan and AHCCCS users.

To access QOC reports, after logging in, follow "Search" link from the side menu, to enter the "Search Page".



Once on the "Search Page", search for existing cases by entering criteria in the available search fields and click on the "Search for Reports" button. If successful, results will be listed in the "Search Results" section of the page. Cases which are escalated to QOC will have button "QOC" on the right side. Click on that button next to the desired Report will open Quality of Care Report Page.



Quality Of Care Report

4

3. Quality of Care Page

Separate portion of QM Portal is used to manage and produce Quality of Care reports.

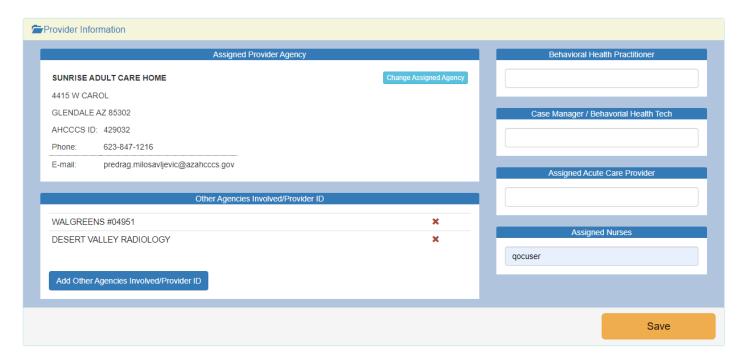
QOC Report sections are divided into separate panels. To access and manage information for particular Reports section, click on the Title of the desired panel.



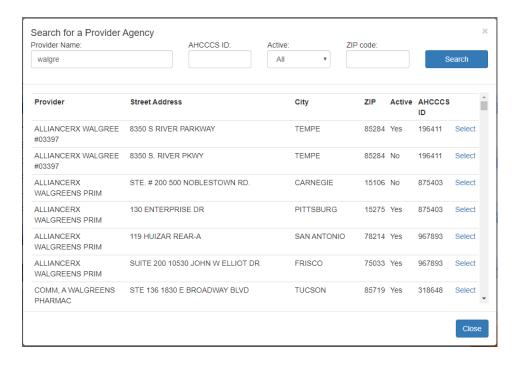
5

4. Provider Information Panel

This panel contains information about Assigned Provider.



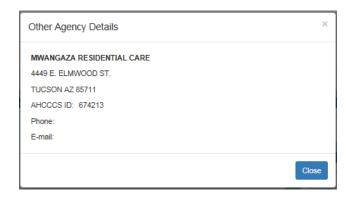
Assigned Provider Agency information can be changed only if the Case is created as an Internal Referral. Change is initiated by clicking "Change Assigned Agency" button. New modal window is open, containing form to search for Agencies using Name or AHCCCS Id. Clicking "Select" will change Assigned Agency.



Quality Of Care Report

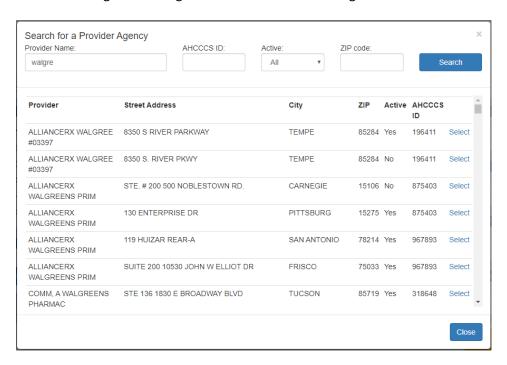
6

Click on Other Involved Agency name will open new modal window containing detailed information about chosen Other Provider Agency.



Clicking on the * next to the Other Involved Agency name, after user confirmation that action is desired, system will remove that Agency from the list.

Adding new Involved Agency is done by clicking "Add Other Agency" button. New modal window is open, containing form to search for Agencies using Name or AHCCCS Id. Clicking "Select" will add chosen Agency to the list.

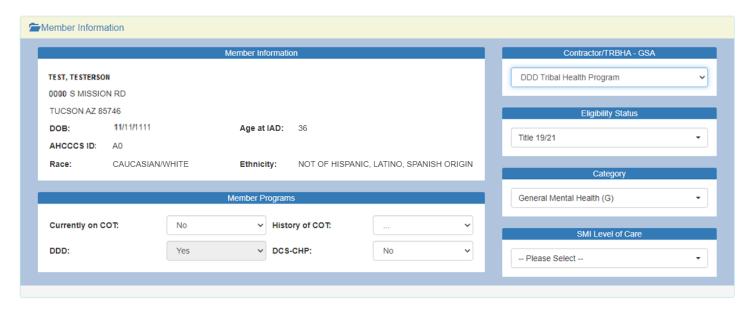


Pressing "Save" button located in the footer section of the panel will store data entered in the Behavioral Health Practitioner, Case Manager / Behavioral Health Tech, Assigned Acute Care Provider, and Assigned Nurses sections.

Quality Of Care Report

5. Member Information Panel

This panel contains information about Member.



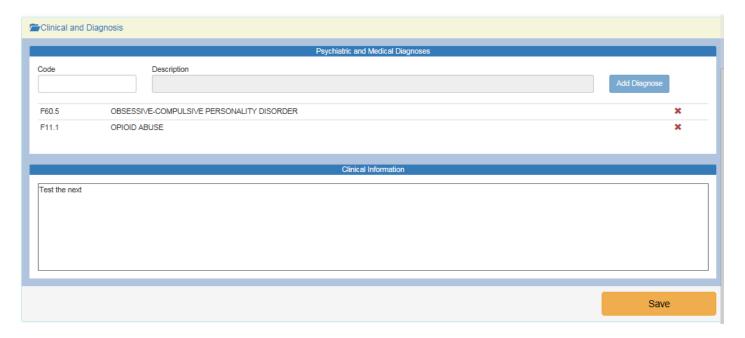
Member Information is read-only and cannot be changed.

Changing selection of the dropdown lists will instantly update information for that Case.

Quality Of Care Report

6. Clinical and Diagnosis Panel

This panel contains information about member's diagnoses and clinical information.



Psychiatric and Medical Diagnoses section lists all diagnoses member has at the time of the IAD.

Section allows adding new diagnoses by using ICD10 format only. Typing at least 3 characters in the Code field will open the dropdown list of diagnoses to choose from. When diagnose is chosen, description field is populated. Clicking on the "Add Diagnose" button will confirm addition action.

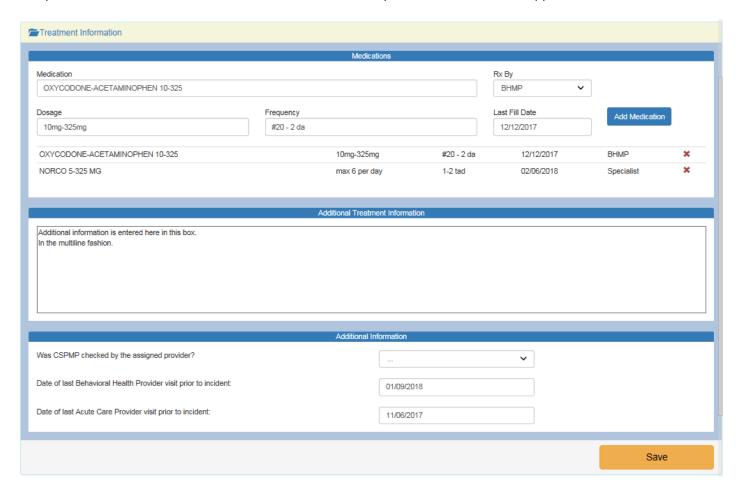
Clicking on the * next to the diagnose description, after user confirmation that action is desired, system will remove that diagnose from the list.

Data entered in the Clinical Information section is updated by pressing "Save" button located in the footer section of the panel

Quality Of Care Report

7. Treatment Information Panel

This panel contains information about member's visits to the provider and treatment applied.



Medications section lists all medications member was prescribed at the time of the IAD. Section allows adding new medications. Typing at least 3 characters in the Medication field will open the dropdown list of medications for user to choose from. All fields in this section are required. Addition is confirmed by clicking on the "Add Medication" button.

Clicking on the * next to the medication record, after user confirmation that action is desired, system will remove that medication record from the list.

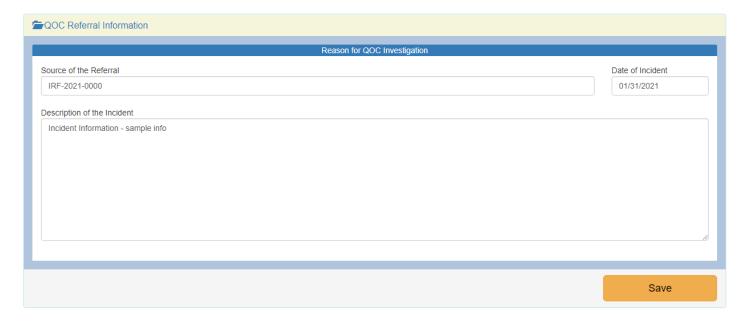
Additional Treatment Information section and Additional Information section are updated by pressing "Save" button located in the footer section of the panel.

Quality Of Care Report

10

8. QOC Referral Information Panel

This panel contains information about reason for Quality of Care investigation, transferred from the IAD at the time of the escalation to QOC.

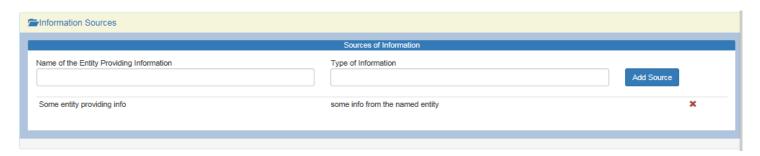


All information is updated by pressing "Save" button located in the footer section of the panel.

Quality Of Care Report

9. Information Sources Panel

This panel lists all sources of information connected to the Case.



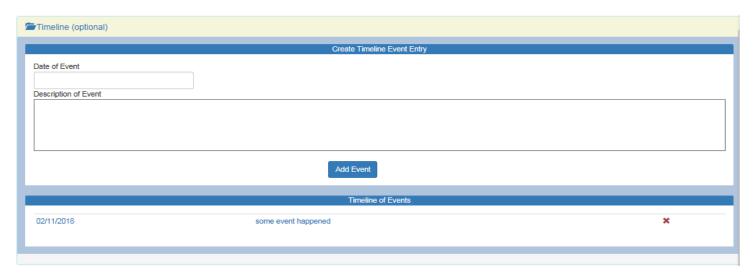
Section allows adding new sources of information. All fields in this section are required. Addition is confirmed by clicking on the "Add Source" button.

Clicking on the * next to the source of information record, after user confirmation that action is desired, system will remove that record from the list.

Quality Of Care Report

10. Timeline Panel

This panel lists all timeline events for the Case.



Section Create Timeline Event Entry allows adding new events. All fields in this section are required. Addition is confirmed by clicking on the "Add Event" button.

Clicking on the * next to the timeline event record, after user confirmation that action is desired, system will remove that record from the list.

Clicking on either date or description of the event in the list of Timeline of Events, will open separate modal window with a prepopulated form to allow user to update selected event. Pressing "Save" button will apply changes.



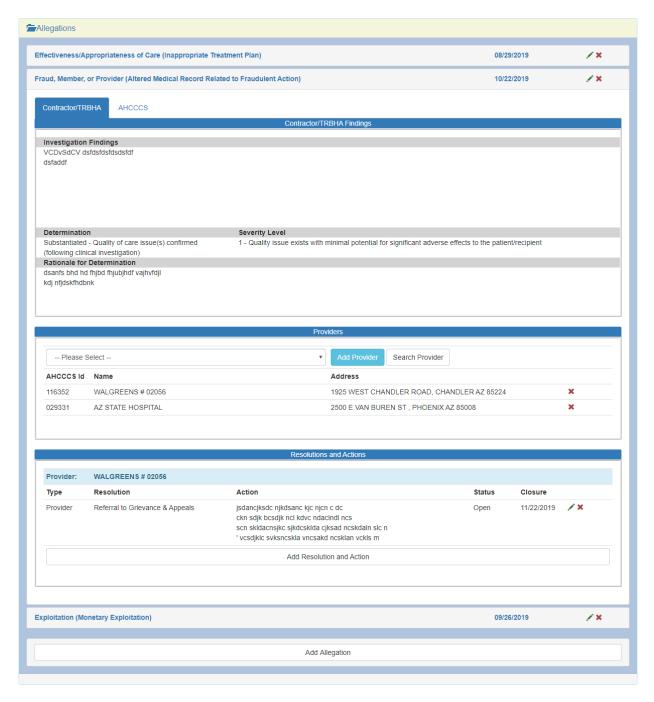
Quality Of Care Report

13

11. Allegations Panel

This panel lists all allegations as well as resolutions and actions connected to the Case.

All allegations are displayed as an array of sub-panels which holds specific information for that allegation. Those sub-panels are expandable and collapsible in the "accordion" manner.

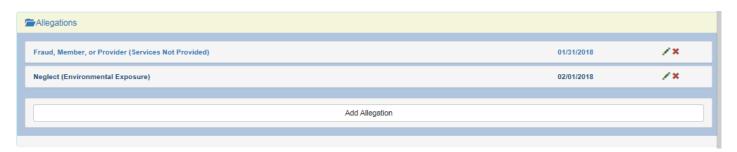


Quality Of Care Report

Header section of the subpanel information about allegation is displayed in the format of "Category (Sub Category)" and the date allegation was added. Two icons on the far right side of the sub-panel represent clickable links with following actions:

- Edit allegation information
- Remove allegation information

Clicking on the * icon, after user confirmation that action is desired, system will remove that allegation from the Case.



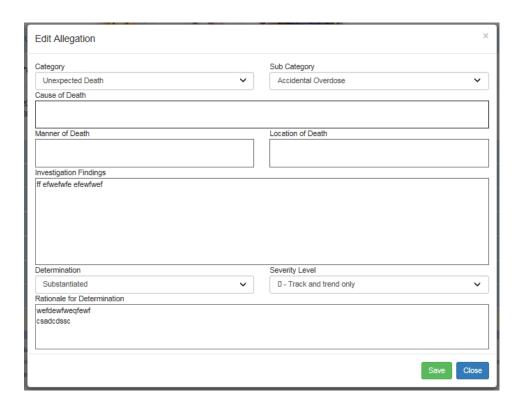
Adding allegation information is enabled by clicking on the button "Add Allegation" located on the bottom section of the Allegations main panel. This action will open separate modal window with a form to allow adding new allegation information. Information addition is restricted to logged-in user business entity. Contractor/TRBHA, State Agency or AHCCCS users will be able to add only parts of the allegation information that belongs to them.



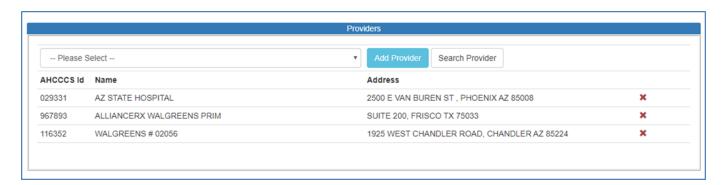
If Allegation Category "Unexpected Death" is chosen, form will present additional fields: "Cause of Death", "Manner of Death" and "Location of Death". Pressing "Save" button will apply changes.

Clicking on the ricon will open separate modal window with a prepopulated form to allow updating selected allegation information. Information update is restricted to logged-in user business entity. Contractor/TRBHA, State Agency or AHCCCS users are able to update only parts of the information that belongs to them. Pressing "Save" button will apply changes.

Quality Of Care Report



Users are able to associate providers to specific allegations in the case. This is done using Providers section form of the allegation. Section consist of a dropdown list of all providers associated with the case (main provider and additional facilities) and a button called Add Provider which associates a provider from the dropdown list with the specific allegation.



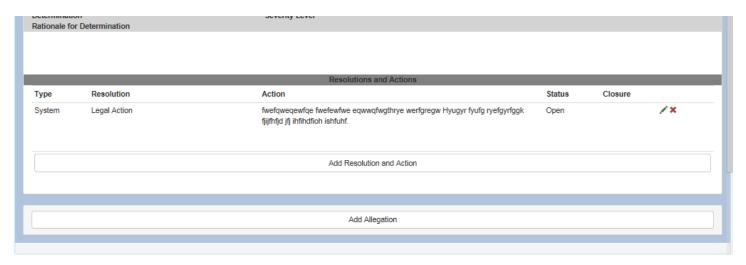
The Search Provider button will open a new modal window to allow users to search for and add providers that are currently not affiliated with the case. Selecting a provider from the list will both affiliate that provider with the allegation and with the case itself adding it to the Other Agencies list. Clicking on the xicon, after user confirmation that action is desired, system will remove that provider affiliation from the allegation.

Quality Of Care Report

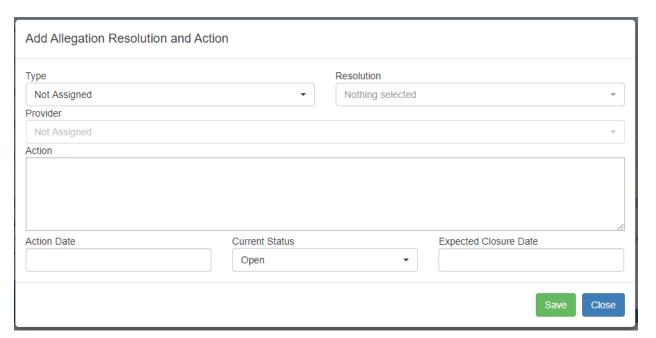
Resolutions and Actions section of the Allegation sub-panel is in the form of the list, with two icons on the far right side representing clickable links with following actions:

- Edit resolutions and actions information
- Remove resolutions and actions information

Clicking on the **x** icon, after user confirmation that action is desired, system will remove that action and resolution from the allegation.

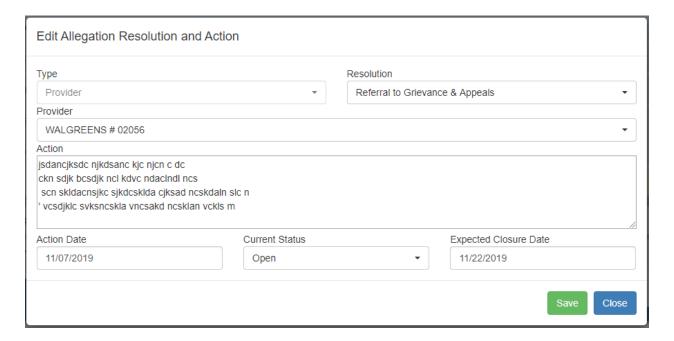


Button "Add Resolutions and Action" located on the bottom of the section will open separate modal window with a form to allow adding new resolution and action for the allegation. Information addition is not restricted to logged-in user business entity. Pressing "Save" button will apply changes.



Quality Of Care Report

Clicking on the ricon will open separate modal window with a prepopulated form to allow user to update selected action and resolution record. Information update is not restricted to logged-in user business entity. Pressing "Save" button will apply changes.

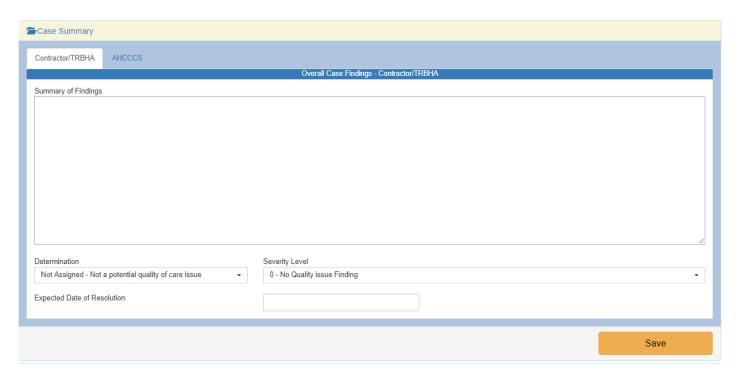


Quality Of Care Report

18

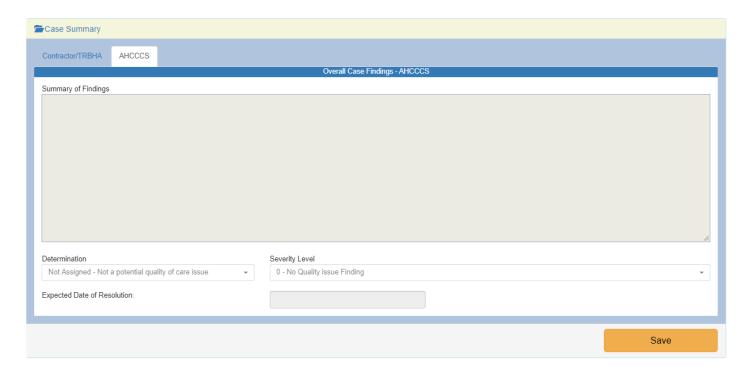
12. Case Summary Panel

This panel holds information about overall Case findings.



It contains two or three tabs, depending on affiliated member designations, one for each of the business entity: Contractor/TRBHA, State Agency (DES / DCS) and AHCCCS. Initially, visible tab will be one that corresponds with the logged-in user business entity, click on the tab header to view other entity read-only overall Case findings.

Quality Of Care Report



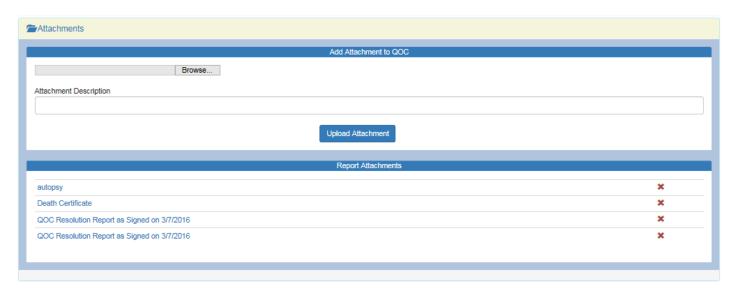
Information update is also restricted to logged-in user business entity. Contractor/TRBHA, State Agency or AHCCCS will be able to update only panel which hold the information that belongs to them.

All information is updated by pressing "Save" button located in the footer section of the panel.

20

13. Attachments Panel

This panel purpose is to list all attachments for the Case.



Add Attachment to QOC section allows uploading files and attaching it to the Case. Maximum file size allowed for the upload is 12 MB. If the file size exceeds this value, error notification will be displayed. There are no limits for file type that can be uploaded. But system will refuse to upload files that are considered unsecure, such as HTML files or script files.

Using "Browse" button, user is able to choose file for upload from users local file system. Attachment Description is the single line text box, and it is required field. Upload action is confirmed by clicking on the "Upload Attachment" button.

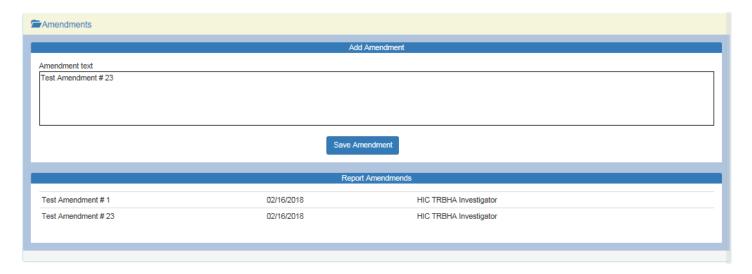
Clicking on the * next to the attachment, after user confirmation that action is desired, system will remove that attachment from the list.

Clicking on the attachment description in the list of Report Attachments, system will download selected attachment and offer user to open or save the downloaded file.

21

14. Amendments Panel

This panel lists all amendments to the Case.



Section Add Amendment allows adding new amendments and contains one field Amendment Text. User can confirm addition action by clicking on the "Save Amendment" button.

Once added, amendment cannot be removed from the case!

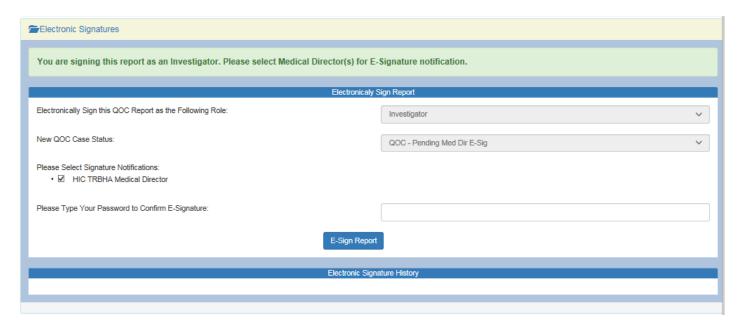
In addition to the amendment text, Report Amendments list contains information about the date and user name who added the amendment.

Quality Of Care Report

22

15. Electronic Signatures Panel

This panel purpose is to list all signatories and allow user to sign the Quality of Care Report.



Content of this panel depends on logged-in user business entity, status of the QOC Case signatures and user roles in the Contractor/TRBHA business entity. For AHCCCS users only list of signatories will be visible, while Contractor/TRBHA user will be able to sign the QOC Case Report.

If QOC Case is not yet signed by any of the Contractor/TRBHA users, user with the role of "Investigator" will be required to sign first. After him user with the "Medical Director" role will be required to sign. If the Contractor/TRBHA business entity employ "Third Level Review" role, then user who has that role is required to sign before QOC Case Report is sent to AHCCCS department. If not Report is sent after second level ("Medical Doctor") signature.

Top portion of the panel (in green) will display messages according to the above mentioned rule.

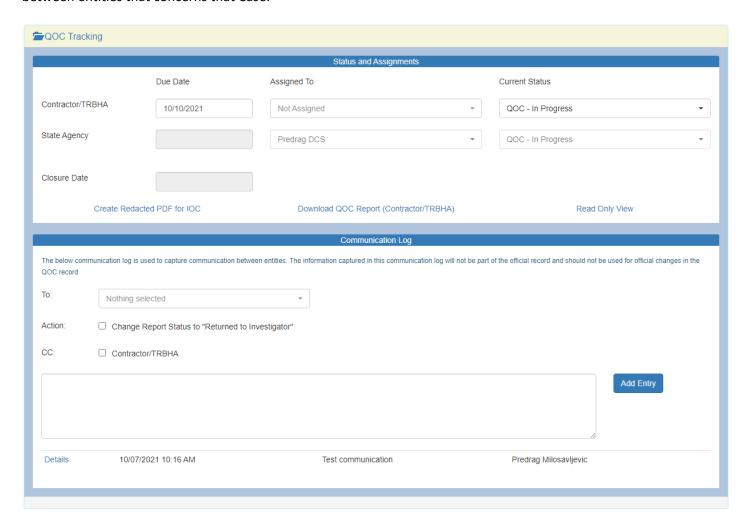
Electronically Sign Report section fields: Role and Case Status are always disabled and will change according to above explained rule. Signature Notifications check box list will offer all users that may be necessary to inform after the QOC Case report was signed.

QOC Case Report is signed by user using their password used to log-in to the QM Portal. After verification, system will make all necessary changes to the Case, send an email correspondence to selected users, and create and attach to the Case Report in Microsoft Word format. Attached Report will be named "QOC Resolution Report as Signed on MM/DD/YYYY".

23

16. QOC Tracking Panel

This panel purpose is to show/change Case status and users assigned to the Case, as well as list all internal communications between entities that concerns that Case.



Status and Assignments section contains form with one set of fields for each user business type: Contractor/TRBHA, State Agency (DES / DCS) and AHCCCS. Each business type can update just their set of the fields. Due Date field is mandatory if Contractor/TRBHA Investigator is assigned!

Three links on the bottom of the section are used to:

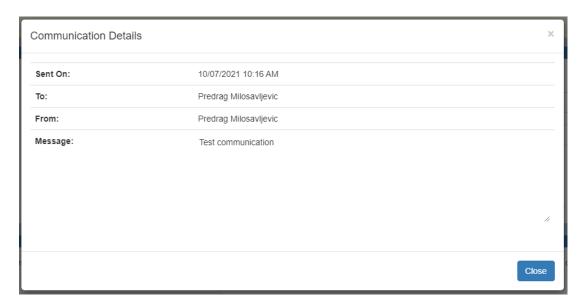
- Create Redacted PDF for HRC link, loads page for uploading documents prepared for Human Rights Committees
- Download QOC Report link will create and download QOC Report in Microsoft Word format. User will be presented with a choice to open or save the downloaded document.
- Read Only View link, loads page that shows read-only version of the QOC Report.

Quality Of Care Report

Communication Log section is used for communication between users and business entities. Action field check box is used to change Case status to "Returned to Investigator" if left checked at the time of clicking "Add Entry" button.

Clicking on "Add Entry" system will send the email message to selected parties and set Case status (if action check box is checked).

List of all communications are at the bottom of the Communication Log panel. Click on the Details link button in the list will open new window with the details about the communication.

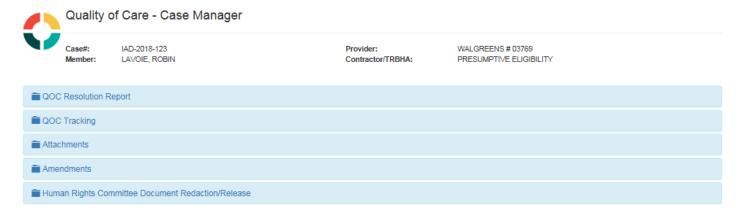


Quality Of Care Report

17. QOC - Report - Read Only View

This is a separate page used to display read only information about the Case. That happens when status of the Case is set to one of the following:

- QOC Administrative Close
- Resolution Report Sent to DBHS
- Resolution Report Sent to AHCCCS
- Resolution Report Sent to State Agency
- Response Letter Sent to AHCCCS
- AHCCCS Closure Letter Rcvd



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Whole on-screen read-only report will be visible by opening "QOC Resolution Report" panel
Other visible panels on this page have exactly the same functionality as on the QOC page, and are explained in detail earlier in the document.

26

Appendix A - Incident Categories and SubCategories

ALLEGATION_CATEGORY_DESCR	ALLEGATION_SUBCATEG_DESCR
	Delay in treatment, service, or referral
	Inadequate access to care and or services
Availability, Accessibility, Adequacy	Inadequate access to medical records
	Organ Transplant Issues
	Transportation Issues
	Emotional abuse on a member
	Physical abuse on a member
	Physical assault (i.e., battery) on a member
	Sexual abuse/assault on a member
ABUSE	Sexual Abuse/assault on a member within or on the grounds of a
	healthcare setting
	Verbal abuse on a member
	Exploitation of a member
	Neglect of physical, medical, or behavioral needs of a member
	Death - Suicide
	Death - Substance Use Disorder - ETOH
	Death - Substance Use Disorder - METHAMPHETAMINE
	Death - Substance Use Disorder - HEROIN
	Death - Substance Use Disorder -PRESCRIPTION OPIOID
	Death - Substance Use Disorder - POLY PHARMACY
	Death - Substance Use Disorder - OTHER
Death - Member	Death - Unexpected
	Death - Other
	Member death associated with a missing person
	Member suicide Due to Opioid or Multi-Drug Toxicity
	Member death associated with a Medication Error
	Member death associated with a fall while being cared for in a healthcare setting
	Member death associated with the use of seclusion and/or restraints
	Death of a member resulting from a physical assault
	Inadequate or Inappropriate Discharge Planning
	Inadequate or Inappropriate Discharge Planning with a Readmission for
	Same Condition Lack of Continuity of Care
	Lack of Continuity of Care Lack of Coordination of Care
Effectiveness/Appropriateness of	
Care	Delay in Diagnosis or Missed Diagnosis
	Inadequate Documentation; Example, ASAM Not Completed
	Ineffective or Inappropriate Case Management
	Lack of engagement/re-engagement of member
	Treatment Below Medical Standards/Ineffective Treatment

Quality Of Care Report

	Ineffective or Inadequate Service Plan and/or Treatment Plan
	<u> </u>
	Ineffective or Inappropriate Management of Substance Use Disorder (SUD)
	Ineffective or Inappropriate Management of Opioid Use Disorder - OVERDOSE
	Ineffective or Inappropriate Management of Opioid Use Disorder - MEDD greater than 90
	Ineffective or Inappropriate Management of Opioid Use Disorder - Co-
	Occurring use of MUSCLE RELAXANT Ineffective or Inappropriate Management of Opioid Use Disorder - Co-
	Occurring use of BENZODIAZEPINE
	Ineffective or Inappropriate Management of Opioid Use Disorder - Co- Occurring use of LONG ACTING OP
	Fraudulent actions - billing, documentation, services, licensure
FRAUD	Fraudulent Utilization: Over utilization of covered services
	Fraudulent Utilization: Inappropriate utilization of covered services
	Any Stage 1, Stage 2 pressure ulcers acquired after admission/presentation to a healthcare setting
	Avoidable Healthcare Associated Infection (HAI)
	Any Stage 3, Stage 4, and unstageable pressure ulcers acquired after
	admission/presentation to a health care institution
OPPC-HCAC	Avoidable Injury/Trauma: Fractures, Dislocations, Intracranial Injuries,
	Crushing Injuries, Burns, O
	Avoidable Complication & Other (Surgical Site Infections, Deep Vein Thrombosis, Pulmonary Embolism,
	Wrong Surgical or Other Invasive Procedure Performed on a Patient, Performed On The Wrong Body Part,
	Inappropriate Use of Physical, Mechanical, Personal, Chemical Restraint, or Seclusion
	Cultural Competency Issue(s)
Member Rights/Respect and Caring	Disrespectful/unprofessional conduct by provider
	HIPAA Breach
	Member dissatisfaction with treatment plan or care provided
	Failure to Report a Change in Condition
	Failure to follow up or communicate laboratory, pathology, or radiology
	Missing person from secured setting (e.g., Dementia or memory care
	locked unit) Missing person from a licensed Facility
	Missing person not associated with a residential setting
	Unsafe environment
Safety/Risk Management	Any instance of care ordered by or provided by someone impersonating
	a physician, nurse, pharmacist,
	Attempted suicide
	Suicide attempt resulting in medical attention
	Self-harm, attempted and/or completed
	Avoidable Injury or Complication
	Discharge or release of a patient/resident of any age, who is unable to
	make decisions

Quality Of Care Report

	Failure /Delay or Inadequate Regulatory Agency Reporting
	Inadequate Staffing
	Inappropriate Use of Medical Equipment
	Medication error (e.g., errors involving the wrong drug, wrong dose, wrong patient, wrong time, wrong
	Medication Error occurring at a licensed residential Provider site i
	Pharmacological Management Issues
	Treatment rendered outside clinician scope of practice
	Injury occurring on the premises or during a registered Provider sponsored activity that requires me
	Injury resulting from the use of a personal, chemical, physical, mechanical restraint, or seclusion
	Serious injury associated with member disappearance (missing person)
	Attempted suicide, or self-harm that results in serious injury, while being cared for in a healthcare
	Serious injury associated with a Medication Error
	Serious injury associated with a fall while being cared for in a healthcare setting
	Serious injury associated with the use of seclusion and/or restraints
	Serious injury of a member resulting from a physical assault that occurs during the provision of ser
	Homicide committed by or allegedly committed by a member
	Alleged or Suspected Criminal Activity
	Police/Fire/EMS called to a licensed facility
Other	Other