



STATE OF CONNECTICUT

DEPARTMENT OF MENTAL HEALTH & ADDICTION SERVICES

MONTHLY PROVIDER DATA QUALITY

NEWSLETTER

September 2014

SIX MONTH PERIODIC ASSESSMENT UPDATES

In an effort to continue to communicate to DMHAS funded and state operated providers data quality issues that greatly affect DMHAS' ability to report accurate information to providers, federal, state authorities and legislative committees, DMHAS EQMI will continue to send to all providers a **Monthly Provider Data Quality Newsletter** that will inform them of important data quality issues that have been identified and that will need provider's immediate attention to review and correct.

To that end, this newsletter addresses problems that some providers continue to have not reporting 6 month periodic assessment updates for their active clients. DMHAS has focused on this area for some time now because it creates many problems in many areas including the following:

- 1) DMHAS EQMI is unable to calculate human service contract performance outcome measures for contract monitoring and provider quality reports purposes resulting in provider poor performance evaluations in these areas.
- 2) DMHAS Federal reporting requirements, for example, TEDS data reporting, is greatly affected and if the federal data quality standard of 90% or better is not attained then federal funding levels for programs could be negatively affected.
- 3) Established Freedom of Information Requests, which are legislatively mandated, for accurate aggregate performance outcome data becomes negatively impacted.
- 4) The Legislative level Program Performance, Review and Investigation (PRI) Committee regularly review and evaluates DMHAS impact on program impact on consumer outcomes. Poor data affects DMHAS' ability to report accurate information to the committee.
- 5) Ongoing DMHAS System Analysis and Performance that determine "best practices" initiative impact on consumer's behavioral health outcomes is difficult when data is unreliable.

Although providers have made significant progress in this area for many levels of care, (CSP; CM; Methadone OP; etc), there are still two levels of care that have fiscal year 2014 statewide average completion rates well below the 50 percentile level. Substance use and mental health outpatient programs will be targeted this month and providers will receive a separate e-mail from DMHAS requesting a corrective action plan if they have been identified as being deficient in this area.

Still have Questions? Please e-mail Mark McAndrew, EQMI Project Manager, at mark.mcandrew@ct.gov