



### What information is being requested?

- Monthly totals for uses of approved restricted measures and total minutes for each measure

The Department of Health Services (DHS) is now requiring that MCOs work with providers to obtain and submit the total number of uses and total number of minutes used for each approved restricted measure every month. Reporting is due to DHS quarterly. *\* Data regarding unapproved restrictive measures will not be included in this monthly reporting. Please continue to follow the current incident reporting process for emergency unapproved restrictive measures.*

### Why is this data being requested?

- To satisfy current contract requirements

Data collection and analysis is important in helping identify trends and patterns to help support the member in the least restrictive ways and reduce and eliminate the use of restrictive measures. For years, the MCO-DHS contract has included language regarding submission of monthly restrictive measure use data to DHS, but until recently DHS didn't have the means to efficiently collect this data. To satisfy this contract requirement, the DHS Restrictive Measures Database was recently updated to include an area dedicated to the collection of this data. Prior to this, the requirement for restrictive measure data within Inclusa's policy read "Providers will send data tracking monthly to Inclusa for the IDT staff to monitor and review".

### How does this differ from the restrictive measure data tracking that providers currently share with IDT staff from Inclusa?

- In addition to any restrictive measures reporting that is happening currently, providers will be asked to calculate and include monthly totals for each measure

This new monthly reporting requirement will be in addition to any incident reporting or other incident communication that may already be occurring regularly. The provider may currently be sending communication regarding restrictive measure use for incidents as they happen throughout the month or sending "raw" monthly data that is not summarized. Inclusa and DHS are now asking providers to send the total number of uses and total number of mins used for each approved measure to the Inclusa IDT staff, composed of a Community Resource Coordinator and Health and Wellness Coordinator, each month. If the provider is already providing totaled data for each approved measure monthly, there will be no changes needed.

### How will this information be used?

- Providers and IDT staff will continue to collaborate on regular reviews and analysis of data
- DHS may do quality audits to ensure documentation standards
- DHS will be able to review data if any concerns arise for a specific member or situation

Providers and IDT staff will continue to review and analyze the data collected to identify trends and patterns to help support the member in the least restrictive ways and reduce and eliminate the use of restrictive measures. DHS has stated that they don't have the capacity, nor has their intention ever been, to review all the data that is entered. They may do quality checks on random samples to audit and ensure documentation standards are being met, or maybe if they get a question regarding a specific member with an approved restrictive measure plan, this will give them some

info to look at, etc. But the initial intention is just to fulfill the contract requirement and then they will develop and expand on it from there.

### Who is doing the reporting?

- Providers will report monthly data to IDT staff - IDT staff will document monthly data within Inlusa RM Utilization App - The Behavioral Health and Wellness Team (BHWT) will compile monthly data into a quarterly report to submit to DHS

IDT staff will continue to monitor and review the data they receive, only they will now be asked to enter the total number of uses and total number of mins (as provided by the provider) into the RM Utilization power app. The Inlusa BHWT will compile all the monthly data into a report that will be sent to DHS quarterly.

### What is the expectation and timeline for reporting?

- Within 15 days after the end of each month

Best practice will be for IDT staff to obtain, review and enter the data within 15 days after the end of each month. A quarterly report will be assembled by the BHWT and submitted to DHS within 45 calendar days after the end of each reporting period/quarter.

Send questions/inquiries to [behavioralhealth@inlusa.org](mailto:behavioralhealth@inlusa.org)

