## Provider Type: Justice
## Area of Concentration: Adults Transitioning from Criminal Justice System

**Project:** Ambulatory

**Area of Concentration:** Adults Transitioning from the Criminal Justice System

**Provider Type:** Integrated Clinics

**Objective:** To integrate primary care and behavioral health services for the purposes of better coordination of the preventive and chronic illness care for adults with behavioral health needs transitioning from the Criminal Justice System.

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| **1.** | **Participate in the Targeted Investments Program Quality Improvement Collaborative (QIC) offered by the Arizona State University College of Health Solutions. The QIC will support TI Program participants by providing interim updates on their Year 5 Milestone Performance Measures, assist with quality improvement, offer HEDIS ™ technical assistance, and facilitate peer learning.** |
| | **Milestone#1**<br>(October 1, 2021–September 30, 2022)<br>15% |
| | By September 30, 2022, attest that:<br><br>A. The participating organization has updated and submitted the TIP Justice Initiative Tracker by the Friday before each Justice QIC session (i.e. 1/14/2022, 5/13/2022, and 9/16/2022), AND<br><br>B. The participating organization has presented updates on their TIP Justice initiatives at all three of the Y6 Justice QIC sessions. |

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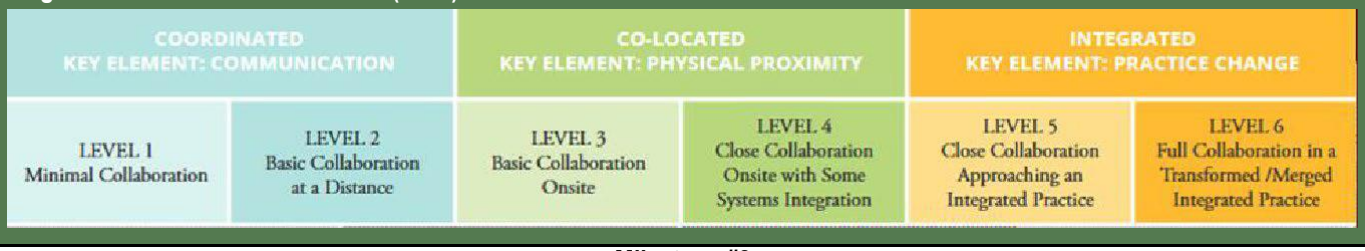
| **2.** | **Identify where along the Levels of Integrated Healthcare continuum the practice falls (see table below). To do so, please complete the Integrated Practice Assessment Tool (IPAT).** |

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| | **Milestone#2**<br>(October 1, 2021–September 30, 2022)<br>5% |
| | Complete an updated IPAT score between August 1, 2022 and Sept 30, 2022 and report the practice site's level of integration using the results of the IPAT level of integration tool to AHCCCS (participants will be inputting the score in the Attestation Portal). |

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**Performance Measure Targets:** Established per organization based on baseline performance

| Performance Measure | Measure Description | Measure Weighting | Measure Sets |
|---|---|---|---|
| Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (34 - Day) | Percentage of beneficiaries age 18 and older with a new episode of alcohol or other drug (AOD) abuse or dependence who received continued engagement of AOD Treatment. Percentage of beneficiaries who initiated treatment and who had two or more additional AOD services or medication treatment within 34 days of the initiation visit. | 30% |  |
| Follow up after hospitalization for mental illness: 18 and older (30 - Day) | Percentage of discharges for beneficiaries age 18 and older who were hospitalized for treatment of selected mental illness diagnoses or intentional self-harm and who had a follow-up visit with a mental health practitioner within 30 days after discharge. | 10% |  |
| Follow up after hospitalization for mental illness: 18 and older (7 – Day) | Percentage of discharges for beneficiaries age 18 and older who were hospitalized for treatment of selected mental illness diagnoses or intentional self-harm and who had a follow-up visit with a mental health practitioner within 7 days after discharge. | 25% |  |
| Diabetes Screening for people with Schizophrenia or Bipolar Disorder who are using antipsychotic medications | Percentage of beneficiaries ages 18 to 64 with schizophrenia, schizoaffective disorder, or bipolar disorder who were dispensed an antipsychotic medication and had a diabetes screening test during the measurement year. | 15% |  |

| Measure Sets Key (Hyperlinked) | | | |
|---|---|---|---|
| CMS Core Set Adult | CMS ScoreCard | Statewide (STCs) | NCQA HEDIS™ |
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