



Section 3.28 Quality of Care Concerns

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3.28.1 Introduction

- a. To establish a uniform process for acknowledging, researching, evaluating and resolving Quality of Care (QOC) concerns identified through a variety of sources. While these sources can include complaints as identified and resolved under [NARBHA Policy 5.2 Member Complaints](#), the QOC process is separate and independent of the complaint investigation and resolution process.
- b. The Arizona Department of Health Services/Division of Behavioral Health Services (ADHS/DBHS) delegates QOC concerns to the Tribal/Regional Behavioral Health Authorities (T/RBHA) for investigation, and ensures all QOC concerns are acknowledged, researched, evaluated, resolved and used to improve the quality of the service delivery system in accordance with the [Arizona Health Care Cost Containment System \(AHCCCS\) Medical Policy Manual \(AMPM\), Section 960](#). All QOC concern cases are kept confidential under all applicable confidentiality laws and regulations. The QOC concern process is a standalone process and is not combined with any other meetings or processes.

3.28.2 Terms

Definitions for terms are located online at <http://www.azdhs.gov/bhs/definitions/index.php> or <http://www.narbha.org/for-providers/provider-resources/provider-policy-manual/definitions>. The following terms are referenced in this section:

[Behavioral Health Recipient](#)

[Behavioral Health Representative](#)

[Corrective Action](#)

[Guardian](#)

[Incident, Accident and Death](#)

[Peer Review](#)

[Quality of Care Concern \(QOC\)](#)

[Regulatory Agency](#)



Procedures 3.28.3

- a. QOC concerns may be referred by state agencies, internal ADHS/DBHS sources (e.g., Customer Service, the Office of the Deputy Director), and external sources (e.g., behavioral health recipients; providers; other stakeholders; Incident, Accident, and Death reports).
- b. Upon receipt of a QOC concern, ADHS/DBHS will acknowledge the QOC concern allegation and delegate the research, evaluation and resolution of the QOC concern to the T/RBHA according to the established guidelines in the Arizona Health Care Cost Containment Services (AHCCCS) AMPM Chapter 900, Sections 910 and 960. The T/RBHA will use [NARBHA PM Attachment 3.28.1](#) to provide an acknowledgment to ADHS/DBHS of the receipt of the QOC concern from ADHS/DBHS. The T/RBHA will use [NARBHA PM Attachment 3.28.2](#) to provide a response to ADHS/DBHS regarding the QOC concern.
- c. QOC concern cases will be kept confidential under all applicable confidentiality laws and regulations. The QOC concern process will be a standalone process and will not be combined with any other meetings or processes.
- d. The T/RBHA must research, analyze, evaluate, and resolve each QOC concern from a recipient perspective and, when appropriate, a system perspective. Recipient resolution and system resolution may occur independently of one another.
- e. ADHS/DBHS will report QOC issues as applicable to the appropriate regulatory agency for further research and/or action as required by law. The initial report may be made verbally, but must be followed by a written report.
- f. ADHS/DBHS may refer the information on a QOC concern case to its Peer Review Committee. The QOC concern case is closed upon referral to the Peer Review Committee. The Peer Review Committee may request a new QOC concern investigation based on the Committee's review of the concern.
- g. ADHS/DBHS may refer relevant QOC issues to other ADHS/DBHS offices or other state agencies.
- h. ADHS/DBHS will maintain a detailed file of all correspondence on each QOC concern case for review by AHCCCS upon request.
- i. ADHS/DBHS collects, analyzes and evaluates QOC concerns and tracks and trends data to determine areas of improvement related to the quality of care or service in the T/RBHA's service delivery system or provider network.
- j. The T/RBHA will incorporate information from the trends related to the quality of care or service as identified by ADHS/DBHS in determining system interventions for quality improvement.



- k. The T/RBHA will incorporate successful interventions from its corrective actions into its service delivery system.

3.28.4 References

The following citations can serve as additional resources for this content area:

- [42 U.S.C. 1320c-9](#)
- [42 U.S.C. 11101 et seq.](#)
- [A.R.S. §36-2401](#)
- [A.R.S. §36-2402](#)
- [A.R.S. §36-2403](#)
- [A.R.S. §36-2404](#)
- [A.R.S. §36-2917](#)
- [AHCCCS/ADHS Contract](#)
- [ADHS/RBHA Contracts](#)
- [ADHS/TRBHA IGAs](#)
- [AHCCCS Medical Policy Manual, Chapter 900, Sections 910 & 960](#)
- [NARBHA Policy 10.21 Peer Review](#)
- [NARBHA Policy 7.4 Reporting of Incidents, Accidents, and Deaths](#)
- [NARBHA Policy 5.2 Complaint Resolution](#)

3.28.5 PM Forms

None

3.28.6 PM Attachments

Signature on file	07/15/14
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Mary Jo Gregory	Date
President and Chief Executive Officer	

Signature on file	07/15/14
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Teresa Bertsch, MD	Date
Chief Medical Officer	

Reference [ADHS/DBHS Policy 1004](#)