The Medical Management (MM) Work Plan Guide applies to ACC, ALTCS E/PD, CMDP, DES/DDD (DDD), and RBHAs. The purpose of this Guide and Template is to provide instructions to Contractors for completion of the MM Work Plan for submission, to, and review by, the Division of Health Care Management (DHCM)

The MM Work Plan in addition to the MM Plan and MM Evaluation shall be submitted by the Contractors as specified in Contract.

Contractors shall utilize the MM Work Plan as a working document. This working document shall be updated quarterly and at the end of the contract year with results/analysis and measurable outcomes for each Goal. The completed MM Work Plan for the previous contract year shall then be submitted as the basis for the MM Plan Evaluation. Contractors shall then develop a new MM Work Plan for the upcoming contract year.

**Definitions**

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| **Assess Or Evaluate** | To study or examine methodically and in detail, typically for purposes of explanation and interpretation. |
| **Delegated Entity** | Is a qualified organization, agency, or provider that holds a subcontract to perform delegated management/administrative functions or responsibilities for the Contractor. |
| **Goal** | A desired result the Contractor envisions plans and commits to achieve within a proposed timeframe. |
| **Medical Management (MM) Work Plan** | A document that identifies the Contractor’s Goals, Methodology for improvement utilizing the Plan-Do-Study-Act (PDSA) method, and Monitoring efforts related to the MM program requirements. |
| **Methodology** | The planned process, steps, activities, or actions taken by a Contractor to achieve a Goal or objective or to progress toward a positive outcome. |
| **Monitoring** | The process of auditing, observing, evaluating, analyzing and conducting follow-up activities, and documenting results. |
| **Plan-Do-Study-Act (PDSA) Cycle** | A scientific method for testing a change or intervention, designed to result in improvement in a specific area. The cycle is completed by planning the change/intervention, trying it, observing the results, and acting on what is learned. When these steps are conducted over a relatively short time period; i.e. over days, weeks or months, the approach is known as Rapid Cycle Improvement. |

* 1. **Medical Management Work Plan**

Contractors shall adhere to all requirements specified in Contract and AMPM Chapter 1000 related to MM scope of work, components and activities. Contractor activities aimed at improving medical and utilization management functions shall be documented in the MM Work Plan. The Contractor shall use the MM Work Plan Template as specified in this Attachment.

* 1. **Medical Management Work Plan Template**

The MM Work Plan Template shall include the following MM Components/Activities:

1. Utilization Data Analysis and Data Management,
2. Concurrent review,
3. Discharge Planning,
4. Prior Authorization and Service Authorization,
5. Inter-Rater Reliability,
6. Retrospective Review,
7. Clinical Practice Guidelines,
8. New Medical Technologies and New Uses of Existing Technologies,
9. Contractor Care Management,
10. Disease/Chronic Care Management,
11. Drug Utilization Review,
12. Other MM Activities.
13. Service Delivery System (Including Wheelchair Maintenance and Delivery),
14. At a minimum one additional Goal, in any other identified areas that will promote program improvement.
    1. **MM Component Monitoring**

Each MM component has specific requirements or Goals that the Contractor shall monitor. The MM Work Plan outlines the processes used by the Contractor to ensure requirements are met and Goals are achieved. The MM Work Plan shall include the following elements specific to each MM component requirement:

1. Goals
2. Determine desired Goals based on analysis of data and AHCCCS requirements,
3. Develop Goals specific to each MM component,
4. Goals must be measureable, and
5. Reasonably attainable.
6. Activities/Tasks
7. Clearly defined,
8. Frequently measure/monitor data,
9. Frequently measure/monitor activities for effectiveness,
10. Evaluate activities for barriers and/or reasons why the interventions have not achieved the desired effect,
11. Document all activities and barriers from begin to end date, and
12. Change to new activities when existing interventions are proven to be ineffective.
13. Responsible Individuals(s)

The Contractor shall indicate designated Contractor staff (listed by position) that is responsible for the components and Monitoring of the MM Work Plan.

1. Status Reports
2. Develop and document quarterly and annually,
3. Include measurable outcomes,
4. Include a summary of analysis of the data and show whether or not the interventions are successful in reaching the Goal,
5. Summarize barriers and/or successes,
6. Identify new activities that are implemented or need to be implemented or changed,
7. Continue the cycle as new data becomes available until improvement or the desired effect is achieved at a rate that meets or exceeds the Goal, and
8. End of year results/analysis and measurable outcomes.

Contractors shall utilize the Plan Due Study Act (PDSA) Cycle.

| **Medical Management Components/Activities (Utilization Data Analysis And Data Management)** | |
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| Example: Length of Stay | |
| Measurable Goals | Example: Decrease ALOS by 10% |
| Activities/Tasks |  |
| Responsible Individuals(s) |  |
| Status Report  Q1 Oct-Dec 20XX |  |
| Status Report  Q2 Jan-Mar 20XX |  |
| Status Report  Q3 Apr-Jun 20XX |  |
| Status Report  Q4 Jul-Sep 20XX |  |
| End of Year Results/Analysis and Measurable Outcomes |  |