

2011 ABCD III PIP Q & A's

Q: If the success of the ABCD III PIP is not solely dependent upon MCOs/PCO and MHO collaboration how will the collaboration with community partners be conducted?

A: This project has the greatest resources on the data sharing side. That is, DMAP will bring the knowledge, skills, and abilities to the table, to aid in enhancing and building these linkages. Leading national experts, as well as local advocates, are committed to the project's success. In principal, that is why we asked for volunteers, the players are there because they want to be. The Department of Education is a willing partner, more plans have asked to partner than DMAP expected. In that sense we have already succeeded.

While we do not have control over what the MHOs do, we can create the greatest chances for success with the MCOs/PCO by providing a considerable amount of locally relevant support. We are in a different arena, have different resources, and a much different spotlight than we were during our earlier physical/mental health collaborative. Moreover, there has been considerable effort and learning that has already occurred.

Q: Who is the EQRO for the ABCD III PIP?

A: O-PIP (Oregon Pediatric Improvement Partnership)

States are able to contract with an External Quality Review Organizations (EQRO) **or** qualifying "EQRO-like" entity to conduct PIPs. O-PIP is an EQRO-like entity.

Background Information: Oregon formed an Improvement Partnership (IP) comprised of the Pediatric Society, Children's Health Foundation, Child and Adolescent Health Measurement Initiative (CAHMI), the Oregon Rural Practice Research Network (ORPRN), and State Officials from Title V and Medicaid. The IP has become the lead advisory body for Oregon's ABCD III project. The Division of Medical

Assistance Programs has finalized the scope of work the inter-agency agreement with the IP, which will serve as the entity to conduct the Performance Improvement Project (PIP).

Q: When will the eight participating Plans be introduced to the O-PIP Oregon Pediatrics Improvement /EQRO-like team?

A: The state and the Oregon Pediatric Improvement Partnership will be providing additional background data, as plan-specific as possible. Establishing plans' baselines is one of the next steps. O-PIP will contact the participating plans to schedule their meetings for March 2011.

Q: If this serves as a MH collaborative are we required to continue a partnership with an MHO?

A: No, *there is not a requirement to collaborate with an MHO.* The primary objective is "Closing the Loop" -- to document that results of referral and treatment plans are communicated to PCP.

Although mental health providers are an integral partner in care and the comprehensive treatment plan should include the services of the MHOs and other mental health services, it is not an explicit requirement.

Q: What is the intent of the Community Cafés?

A: The Community Cafe's are intended to help understand where breakdowns in the communication flow might be occurring. Understanding how parents see their role, their expectations and actions in this process may, or may not, add insight to build sustainable quality improvement interventions. That's one of the things we hope to learn more about. That part will be mostly lessons or 'take-aways.'

Q: Who determines the interventions? I know we are participating in the community cafés but are we expected to develop additional interventions? It's not clear what it is we're trying to improve.

A: OPIP will develop interventions, based on what they learn from each MCO/PCO and from others serving children at risk for developmental disabilities in the communities you serve. The community cafés are one tool OPIP is using to develop interventions.

Q: What are the measures and targets to be used for this project? Are we to determine them or DMAP?

A: OPIP will determine them, based on data your plan provides.

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