

Project Description:

The Performance Improvement Project (PIP) was chosen by the PIHP based on the needs of the population served, previous measurement and analysis of process, satisfaction, and/or outcome trends that may have an impact on the quality of service provided. Mid-State Health Network (MSHN) conducted a review of data to identify existing racial or ethnic disparities. The Non-clinical Performance Improvement Project will address access to services for the largest historically marginalized group, Black/African American, within the MSHN region. The identification of barriers for access to services for this group will result in action, ensuring all Black/African American individuals served have the same opportunities to be healthy both mentally and physically. The MSHN Quality Improvement Council, through consensus, recommended this topic to Operations Council for approval. Operations Council supported the PIP topic for 2022-2025. The goal of the indicator is to reduce or eliminate racial or ethnic disparities between the African American/Black minority penetration rate and the index (white) penetration rate.

Study Question 1:

Do the targeted interventions reduce or eliminate the racial or ethnic disparities in the penetration rate between the black/African American penetration rate and the index (white) penetration rate of those who are eligible for Medicaid services?

Study Indicators:

Numerator: The number of unique Medicaid eligible individuals who are black/African American and have received a PIHP managed service. (CMHSPs Combined)

Numerator: The number of unique Medicaid eligible individuals who are white and have received a PIHP managed service. (CMHSPs Combined)

Denominator:

The number of unique Medicaid eligible individuals within the Mid State Health Network region. (CMHSPs Combined)

Data Source and Collection Method: (Manual/Administrative/Hybrid, Frequency of committee review)

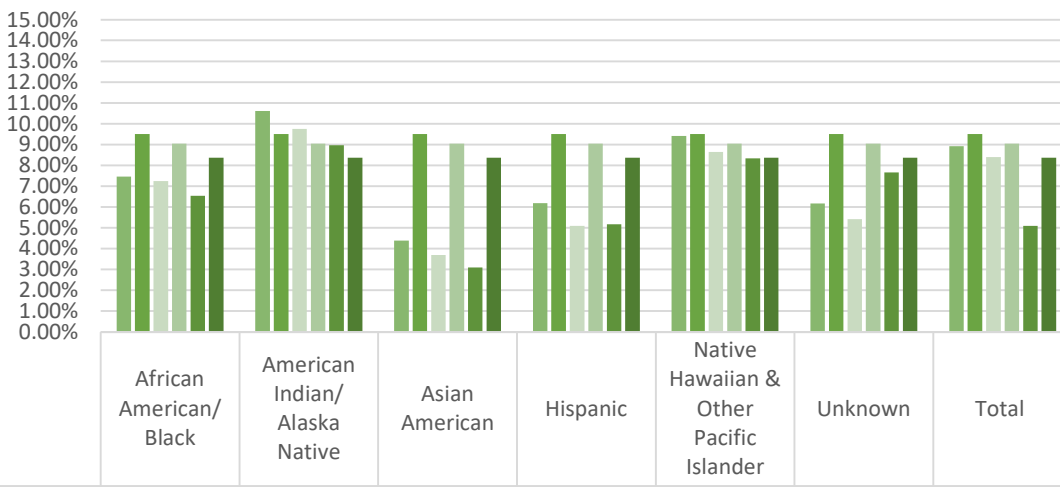
The PIP will utilize administrative data for the analysis. The data source will be a standard report within REMI which includes a programmed pull from claims/encounters and the 834 eligibility files. The estimated percentage of reported administrative data completeness at the time the data are generated is 95% complete.

Time Period of Report	Data Due to MSHN	Date Reviewed in Committee	Date Due to MDHHS
CY21 Baseline	NA	August	NA
CY22 (1/1/2022-12/31/2022)	NA	March	NA
CY23Q2 (1/1/2023-06/30/2023)	NA	August	NA
CY23 (1/1/2023-12/31/2023)	NA	March	NA

Data Analysis: (Compare each period to CY2021)

Measurement Period		Rate	Numerator	Denominator	Test used if applicable
CY21 Baseline	Index-White	9.51	35,532	373,783	
	Minority-African American/Black	7.45	5,236	70,267	
CY22	Index-White	9.04	34,891	385,878	
	Minority-African American/Black	7.24	5,241	72,377	
CY23Q3	Index-White	8.36	31731	379,529	
	Minority-African American/Black	6.54	4743	72,518	
CY23	Index-White				
	Minority-African American/Black				

Figure 1: MSHN-CMHSP Penetration Rates



	African American/Black	American Indian/Alaska Native	Asian American	Hispanic	Native Hawaiian & Other Pacific Islander	Unknown	Total
■ CY 21 Minority Penetration Rate	7.45%	10.61%	4.39%	6.19%	9.40%	6.17%	8.92%
■ CY 21 Index/White Penetration Rate	9.51%	9.51%	9.51%	9.51%	9.51%	9.51%	9.51%
■ CY 22 Minority Penetration Rate	7.24%	9.75%	3.70%	5.08%	8.64%	5.42%	8.40%
■ CY 22 Index/White Penetration Rate	9.04%	9.04%	9.04%	9.04%	9.04%	9.04%	9.04%
■ CY 23Q3 Minority Penetration Rate	6.54%	8.96%	3.09%	5.16%	8.33%	7.65%	5.09%
■ CY 23Q3 Index/White Penetration Rate	8.36%	8.36%	8.36%	8.36%	8.36%	8.36%	8.36%

Follow Up to Data Analysis:

Improvement Strategies					
Barrier Priority Ranking	Barrier Description	Intervention Initiation Date (MM/YY)	Intervention Description	Intervention Status	Member, Provider, or System Intervention
4	Lack of insight into what resources and community partners are available to address disparities.	10/1/2023	<ul style="list-style-type: none"> Identify survey/assessments/data sources to evaluate resources/community partners to address disparities within the local community. Conduct assessment/survey to clearly identify community partners and resources available to address disparities within those communities that demonstrate a significant disparity. 	New	Provider Intervention
2	No shows-lack of appointment follow up	10/1/2022	<ul style="list-style-type: none"> Implement appointment reminder system. Implement/modify process for coordination between providers (warm hand off) 	New	Provider Intervention

1	Workforce shortage-Lack of qualified -culturally competent clinicians resulting in inadequate limited available appointments within 14 days.	10/1/2022	<ul style="list-style-type: none"> Recruit student interns and recent graduates from colleges and universities with diverse student populations. Utilize external contractors to provide services. 	New	Provider Intervention
5	Workforce shortage-Lack of qualified -culturally competent clinicians resulting in limited available appointments within 14 days.	12/31/2022	<ul style="list-style-type: none"> Conduct feasibility study to collect information from CMHSPs and SUD Providers regarding specific cultural competency requests. 	New	System
3	Minority Groups are not aware of services offered	10/1/2023	<ul style="list-style-type: none"> Identify and engage with partner organizations that predominantly serve communities of color. (examples: faith-based/religious groups, community recreation centers, tribal organizations, etc) Distribute CMHSP informational materials to individuals through identified partner organizations within communities of color. 	New	Provider
6	Insufficient data to identify Social Determinants of Health (SDOH) such as inadequate Housing, food insecurity, transportation needs, employment/income challenges	6/1/2024 11/1/2024	<ul style="list-style-type: none"> Develop system to effectively collect SDOH for individuals served. Develop system to regionally analyze SDOH and develop action steps. 	New New	Provider System

Best Practice (Share process/experience)	Who

Any Additional Follow Up/Attachments:

Attachment 1: MSHN Penetration Rate Comparisons

Attachment 2: CMHSP Penetration Rate FY23Q3

Completed by: Sandy Gettel Quality Manager

Reviewed/Approved by: [Click or tap here to enter text.](#)

Date: 11/14/2023

Date:

Attachment 1

CY2021	Total Population	Total Consumers Served	CY 21 Minority Penetration Rate	CY21 Index/White Penetration Rate
CMHSPs Combined				
African American / Black	70267	5236	7.45%	9.51%
American Indian / Alaska Native	7078	751	10.61%	9.51%
Asian American	3147	138	4.39%	9.51%
Hispanic	29710	1838	6.19%	9.51%
Native Hawaiian & Other Pacific Islander	553	52	9.40%	9.51%
Unknown	40486	2497	6.17%	9.51%
Total (all race/ethnicity combined)	487464	43489	8.92%	9.51%
White	373783	35532	9.51%	9.51%
CY2022	Total Population	Total Consumers Served	CY22 Minority Penetration Rate	CY22 Index/White Penetration Rate
CMHSPs Combined CY22				
African American/ Black	72377	5241	7.24%	9.04%
American Indian/Alaska Native	7545	736	9.75%	9.04%
Asian American	2976	110	3.70%	9.04%
Hispanic	472	24	5.08%	9.04%
Native Hawaiian & Other Pacific Islander	579	50	8.64%	9.04%
Unknown	39411	2136	5.42%	9.04%
Total (all race/ethnicity combined)	518303	43555	8.40%	9.04%
White (Non-Hispanic)	385878	34891	9.04%	9.04%
CY23Q3	Total Population	Total Consumers Served	CY22 Minority Penetration Rate	CY22 Index/White Penetration Rate
CMHSPs Combined CY23Q3				
African American/ Black	72518	4743	6.54%	8.36%
American Indian/Alaska Native	7175	643	8.96%	8.36%
Asian American	4234	131	3.09%	8.36%
Hispanic	36475	1883	5.16%	8.36%
Native Hawaiian & Other Pacific Islander	660	55	8.33%	8.36%
Total (all race/ethnicity combined)	531169	40651	7.65%	8.36%
Unknown	36393	1852	5.09%	8.36%
White (Non-Hispanic)	379529	31731	8.36%	8.36%

Organization	Total Population	Total Served	Penetration Rate
CMHSPs Combined	1068153	81689	7.65%
African American/ Black	72518	4743	6.54%
American Indian/Alaska Native	7175	643	8.96%
Asian American	4234	131	3.09%
Hispanic	36475	1883	5.16%
Native Hawaiian & Other Pacific Islander	660	55	8.33%
Total (all race/ethnicity combined)	531169	40651	7.65%
Unknown	36393	1852	5.09%
White (Non-Hispanic)	379529	31731	8.36%
Bay-Arenac	81788	8816	10.78%
African American/ Black	1991	225	11.30%
American Indian/Alaska Native	545	59	10.83%
Asian American	123	2	1.63%
Hispanic	2674	219	8.19%
Native Hawaiian & Other Pacific Islander	35	2	5.71%
Total (all race/ethnicity combined)	40714	4394	10.79%
Unknown	2014	139	6.90%
White (Non-Hispanic)	33692	3776	11.21%
CEI	275288	16329	5.93%
African American/ Black	30555	1711	5.60%
American Indian/Alaska Native	1822	134	7.35%
Asian American	2908	66	2.27%
Hispanic	13608	568	4.17%
Native Hawaiian & Other Pacific Islander	222	14	6.31%
Total (all race/ethnicity combined)	136928	8115	5.93%
Unknown	11498	510	4.44%
White (Non-Hispanic)	77747	5211	6.70%
Central MI	179116	16234	9.06%
African American/ Black	3140	297	9.46%
American Indian/Alaska Native	2120	183	8.63%
Asian American	321	22	6.85%
Hispanic	3436	233	6.78%
Native Hawaiian & Other Pacific Islander	135	16	11.85%
Total (all race/ethnicity combined)	89134	8087	9.07%
Unknown	4987	265	5.31%
White (Non-Hispanic)	75843	7131	9.40%
Gratiot	28254	2973	10.52%
African American/ Black	298	33	11.07%
American Indian/Alaska Native	168	34	20.24%
Asian American	43	4	9.30%
Hispanic	1099	84	7.64%
Native Hawaiian & Other Pacific Islander	11	1	9.09%
Total (all race/ethnicity combined)	14073	1480	10.52%
Unknown	597	49	8.21%
White (Non-Hispanic)	11965	1288	10.76%

Organization	Total Population	Total Served	Penetration Rate
Huron	18523	1872	10.11%
African American/ Black	96	10	10.42%
American Indian/Alaska Native	88	13	14.77%
Asian American	17	2	11.76%
Hispanic	328	23	7.01%
Native Hawaiian & Other Pacific Islander	3	0	0.00%
Total (all race/ethnicity combined)	9227	934	10.12%
Unknown	374	19	5.08%
White (Non-Hispanic)	8390	871	10.38%
Ionia	37122	4056	10.93%
African American/ Black	363	32	8.82%
American Indian/Alaska Native	190	28	14.74%
Asian American	41	4	9.76%
Hispanic	1070	93	8.69%
Native Hawaiian & Other Pacific Islander	21	1	4.76%
Total (all race/ethnicity combined)	18486	2024	10.95%
Unknown	1159	81	6.99%
White (Non-Hispanic)	15792	1793	11.35%
LifeWays	141717	10671	7.53%
African American/ Black	8687	586	6.75%
American Indian/Alaska Native	758	69	9.10%
Asian American	258	9	3.49%
Hispanic	2850	143	5.02%
Native Hawaiian & Other Pacific Islander	52	4	7.69%
Total (all race/ethnicity combined)	70302	5301	7.54%
Unknown	6240	363	5.82%
White (Non-Hispanic)	52570	4196	7.98%
Montcalm	46975	4516	9.61%
African American/ Black	362	48	13.26%
American Indian/Alaska Native	287	31	10.80%
Asian American	36	2	5.56%
Hispanic	1016	75	7.38%
Native Hawaiian & Other Pacific Islander	20	3	15.00%
Total (all race/ethnicity combined)	23377	2253	9.64%
Unknown	1411	68	4.82%
White (Non-Hispanic)	20466	2036	9.95%
Newaygo	39358	3497	8.89%
African American/ Black	408	40	9.80%
American Indian/Alaska Native	265	37	13.96%
Asian American	43	4	9.30%
Hispanic	1415	76	5.37%
Native Hawaiian & Other Pacific Islander	9	0	0.00%
Total (all race/ethnicity combined)	19590	1742	8.89%
Unknown	858	55	6.41%
White (Non-Hispanic)	16770	1543	9.20%

Organization	Total Population	Total Served	Penetration Rate
Saginaw	153105	10340	6.75%
African American/ Black	26597	1795	6.75%
American Indian/Alaska Native	616	53	8.60%
Asian American	347	13	3.75%
Hispanic	8158	343	4.20%
Native Hawaiian & Other Pacific Islander	128	11	8.59%
Total (all race/ethnicity combined)	76108	5138	6.75%
Unknown	5141	222	4.32%
White (Non-Hispanic)	36010	2765	7.68%
Shiawassee	46174	2477	5.36%
African American/ Black	357	26	7.28%
American Indian/Alaska Native	253	10	3.95%
Asian American	76	2	2.63%
Hispanic	668	33	4.94%
Native Hawaiian & Other Pacific Islander	23	0	0.00%
Total (all race/ethnicity combined)	23003	1235	5.37%
Unknown	1174	46	3.92%
White (Non-Hispanic)	20620	1125	5.46%
Tuscola	38038	2359	6.20%
African American/ Black	376	31	8.24%
American Indian/Alaska Native	195	15	7.69%
Asian American	40	2	5.00%
Hispanic	664	41	6.17%
Native Hawaiian & Other Pacific Islander	10	4	40.00%
Total (all race/ethnicity combined)	18925	1175	6.21%
Unknown	1270	56	4.41%
White (Non-Hispanic)	16558	1035	6.25%

Attachment 3

PIP Team

Project Sponsor (Provide/Approve Resources)

- Amanda Ittner-Deputy Director

Process Owner (Person responsible for continued implementation/maintenance of the project)

- Paul Duff-Integrated Care Coordinator

Quality Improvement Experience (Formal training or experience with QI initiatives)

- Sandy Gettel-Quality Manager
- QIC

Technical/Clinical Expertise-(Subject matter experts relative to the project)

- Technical-Joe Wager/Ron Meyer
- Clinical-Skye Pletcher Chief Population Health Officer
- Integrated Care/UM

Consumer Experience (Person who represents the consumer point of view)

- Dani Meier Chief Clinical Officer
- REACH

Knowledge of Process/System- (Person who are impacted-include differing perspectives)

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