

APPENDIX 8



Memorandum

Date : April 8, 2010

To : Health Care Managers / Chief Executive Officers
Directors of Nursing / Chief Nursing Executives
Chief Medical Officers / Institution Medical Executives

From : Denny Sallade, Statewide Health Care Administrator
Karen Rea, PHN, MSN, FNP, Chief Nursing Executive
Dwight Winslow, M.D., Chief Physician Executive
Regional Healthcare Administrators
Regional Chief Nurse Executives
Regional Chief Medical Executives

Subject : **Medical Program Management Report – February 2010**

Attached is the Medical Program Management Report (MPMR) for February 2010. The MPMR is part of an overall effort to establish an organization-wide dashboard for the California Prison Health Care Services (CPHCS) that will provide information on access, utilization cost, clinical quality, and patient outcomes. As additional statewide performance objectives are established, they are incorporated into the MPMR, to allow for a consolidated “report card” for tracking high priority initiatives.

To ensure that institutions have access to data that can be accurately used to evaluate, analyze, and guide system improvements, CPHCS has adopted a standardized methodology for reporting on six access measures. The new methodology for reporting on these six measures, which incorporates sampling and total ascertainment strategies, will be released later this month, with statewide training and technical assistance.

A supplement to this month’s MPMR is included as **Attachment I**, showing each institution’s performance on four access measures over the course of three months. All CPHCS institutions have been directed to reduce backlogs in areas such as episodic care, chronic care, specialty care, and follow-up upon return from higher level of care. The information in Attachment I is intended to support the effort to monitor patient access, improve compliance with the access timeframes established in *Plata* litigation, and ultimately contribute to improving patient outcomes.

Please ensure that the regional and statewide versions of the February 2010 MPMR are distributed widely to staff of all disciplines and reporting levels, and that you facilitate discussion of the report information in order to continue to improve the system of care. It is expected that institution health care executives will review the statewide and regional reports in a variety of forums, such as the Quality Management Committee, program subcommittees, Quality Improvement Teams, and primary care team meetings, as well as other staff meetings.

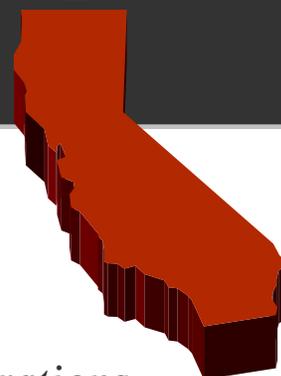
Please continue to work with us to make this report as useful as possible by forwarding your suggestions and input to your Regional Executive team and Ryan Jones, Associate Health Program Advisor with the Quality Improvement Unit.

Thank you for your continued efforts to monitor and improve patient care.

cc: C. Kelso
E. Bush
B. Noble
B. Epperly-Ellis
A. Frueh
D. Peterson
J. Mohle-Boetani
R. Barnett

California Prison Health Care Services

Medical Program Management Report Statewide Summary



Analysis of Various Aspects of Medical Program Operations

Reporting Period: February 2010

April 8, 2010

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SUMMARY OF BENCHMARKED PERFORMANCE INDICATORS

ACCESS INDICATORS

VALUE INDICATORS ³

	% of Medical 7362 seen Face-to-Face by RN within 1 working day	% of Routine 7362s referred to PCP and seen within 14 days	% of CCP Patients Evaluated by PCP within last 180 days	% of High Priority RFS Patients evaluated within 14 days	% of patients seen by PCP within five calendar days of Community ED or Hospital Institution Total Access Measures ¹	% of Non-Formulary Usage ²	Drug Purchases \$ PMPM reduced by 10%	Rx PMPM # reduced by 10%	RFS per 1,000 Inmates	Bed Days per 1,000 Inmates per Year
Northern Region										
CCC	■	■	■	■	■	■	■	■	■	■
CMF	■	■	■	■	■	■	■	■	■	■
DVI	■	■	■	■	■	■	■	■	■	■
FSP	■	■	■	■	■	■	■	■	■	■
HDSP	■	■	■	■	■	■	■	■	■	■
MCSP	■	■	■	■	■	■	■	■	■	■
PBSP	■	■	■	■	■	■	■	■	■	■
SAC	■	■	■	■	■	■	■	■	■	■
SCC	■	■	■	■	■	■	■	■	■	■
SOL	■	■	■	■	■	■	■	■	■	■
SQ	■	■	■	■	■	■	■	■	■	■
Central Region										
CCWF	■	■	■	■	■	■	■	■	■	■
CMC	■	■	■	■	■	■	■	■	■	■
CTF	■	■	■	■	■	■	■	■	■	■
KVSP	■	■	■	■	■	■	■	■	■	■
NKSP	■	■	■	■	■	■	■	■	■	■
SVSP	■	■	■	■	■	■	■	■	■	■
VSPW	■	■	■	■	■	■	■	■	■	■
WSP	■	■	■	■	■	■	■	■	■	■
Southern Region										
CAL	■	■	■	■	■	■	■	■	■	■
CCI	■	■	■	■	■	■	■	■	■	■
CEN	■	■	■	■	■	■	■	■	■	■
CIM	■	■	■	■	■	■	■	■	■	■
CIW	■	■	■	■	■	■	■	■	■	■
CRC	■	■	■	■	■	■	■	■	■	■
CVSP	■	■	■	■	■	■	■	■	■	■
ISP	■	■	■	■	■	■	■	■	■	■
LAC	■	■	■	■	■	■	■	■	■	■
RJD	■	■	■	■	■	■	■	■	■	■
Fourth Region										
ASP	■	■	■	■	■	■	■	■	■	■
COR	■	■	■	■	■	■	■	■	■	■
PVSP	■	■	■	■	■	■	■	■	■	■
SATF	■	■	■	■	■	■	■	■	■	■
Statewide										
	■	■	■	■	■	■	■	■	■	■

BENCHMARKS

Poor	<75%	<75%	<75%	<75%	<75%	<75%	>7%	<7%	<7%	> 120	>750
Fair	75-85%	75-85%	75-85%	75-85%	75-85%	75-85%	5-7%	7-10%	7-10%	100 - 120	600-750
Good	>85%	>85%	>85%	>85%	>85%	>85%	<5%	>10%	>10%	< 100	<600

Data Appear Implausible
Data Not Reported

1. Not calculated if one or more categories was not reported or submitted implausible
2. Includes Psychiatric medications
3. Value= Quality / Cost

BENCHMARKED MEASURES: ACCESS

The Medical Management Report includes multiple measures that help managers evaluate whether patients are receiving timely access to health care services.

Access measures, drawn from existing timeframes in the Inmate Medical Services Program Policies and Procedures, are the same metrics reviewed by the Office of the Inspector General (OIG) during periodic medical inspections and are included in each institution's monthly Key Indicator Report to headquarters. The performance objective for each access measure is the same, which is that eighty-five percent (85%) or more of patients are to be evaluated within *Plata* mandated timeframes. Institutions earn a "fair" rating if they report seeing seventy-five percent to eighty-five percent (75%-85%) of patients within the mandated timeframes, and are considered to have a "poor" performance if they report seeing less than seventy-five percent (75%) of patients within the mandated timeframes.

Table 1 below shows the statewide average for each access measure, as well as regional averages.

Measure	Statewide Performance* Ratings Percent (N)	Northern Region Performance* Ratings Percent (N)	Central Region Performance* Ratings Percent (N)	Southern Region Performance* Ratings Percent (N)	Fourth Region Performance* Ratings Percent (N)
Percent of Medical 7362s seen Face-to-Face by RN within 1 working day	Good – 70% (23) Fair – 9% (3) Poor – 21% (7) * No Data: 0	Good – 73% (8) Fair – 0 Poor – 27% (3) No Data: 0	Good – 75% (6) Fair – 0 Poor – 25% (2) No Data: 0	Good – 70% (7) Fair – 30% (3) Poor – 0 No Data: 0	Good – 50% (2) Fair – 0 Poor – 50% (2) No Data: 0
Percent routine 7362s referred to Primary Care Provider (PCP) and seen within 14 days	Good – 41% (12) Fair – 14% (4) Poor – 45% (13) No Data: 4	Good – 86% (6) Fair – 0 Poor – 14% (1) No Data: 4	Good – 13% (1) Fair – 25% (2) Poor – 62% (5) No Data: 0	Good – 40% (4) Fair – 20% (2) Poor – 40% (4) No Data: 0	Good – 25% (1) Fair – 0 Poor – 75% (3) No Data: 0
Percent of Chronic Care Program patients evaluated by a PCP within the past 180 days	Good – 69% (18) Fair – 8% (2) Poor – 23% (6) No Data- 7	Good – 60% (6) Fair – 20% (2) Poor – 20% (2) No Data- 1	Good – 67% (4) Fair – 0 Poor – 33% (2) No Data- 2	Good – 86% (6) Fair – 0 Poor – 14% (1) No Data – 3	Good – 67% (2) Fair – 0 Poor – 33% (1) No Data – 1
Percent of High Priority RFS Patients evaluated within 14 days	Good – 88% (29) Fair – 3% (1) Poor – 91% (3) No Data: 0	Good – 91% (10) Fair – 0 Poor – 9% (1) No Data: 0	Good – 75% (6) Fair – 13% (1) Poor – 12% (1) No Data: 0	Good – 100% (10) Fair – 0 Poor – 0 No Data: 0	Good – 75% (3) Fair – 0 Poor – 25% (1) No Data: 0
Percent of Triage and Treatment Area patients seen in follow-up by a PCP within 5 days	Good – 53% (16) Fair – 3% (1) Poor – 44% (13) No Data - 3	Good – 60% (6) Fair – 0 Poor – 40% (4) No Data – 1	Good – 57% (4) Fair – 14% (1) Poor – 29% (2) No Data - 1	Good – 56% (5) Fair – 0 Poor – 44% (4) No Data – 1	Good – 25% (1) Fair – 0 Poor – 75% (3) No Data: 0

- Percentages are calculated using only those institutions that reported data. Data that were statistically impossible (exceeded 100%) were excluded

BENCHMARKED PERFORMANCE INDICATORS



Percentage of Non-Formulary Usage					
Institution	DEC 09	JAN 2010	FEB 2010	Goal Met February (<5%)	Progress (Dec-Feb)
CCC	4%	4%	2%	✓	
CMF	11%	11%	21%	-	
DVI	4%	4%	4%	✓	
FSP	3%	3%	4%	✓	
HDSP	8%	7%	7%	-	
MCSP	13%	12%	11%	-	
PBSP	4%	4%	3%	✓	
SAC	7%	7%	6%	-	
SCC	NA	4%	4%	✓	
SOL	NA	NA	17%	-	
SQ	7%	7%	7%	-	

Drug Purchases \$ PMPM reduced by 10%					
Institution	DEC 09	JAN 2010	FEB 2010	Goal Met February (-10%)	Progress (Dec-Feb)
CCC	76%	10%	-42%	✓	
CMF	30%	4%	-11%	✓	
DVI	25%	1%	9%	-	
FSP	14%	45%	42%	-	
HDSP	26%	1%	5%	-	
MCSP	64%	32%	10%	-	
PBSP	7%	-4%	22%	-	
SAC	26%	17%	0%	-	
SCC	25%	22%	8%	-	
SOL	23%	23%	5%	-	
SQ	64%	25%	21%	-	

Rx PMPM # reduced by 10%					
Institution	DEC 09	JAN 2010	FEB 2010	Goal Met February (-10%)	Progress (Dec-Feb)
CCC	20%	2%	11%	-	
CMF	20%	NA	-6%	-	
DVI	41%	26%	16%	-	
FSP	39%	29%	17%	-	
HDSP	16%	3%	5%	-	
MCSP	29%	15%	14%	-	
PBSP	-7%	-17%	-31%	✓	
SAC	20%	12%	12%	-	
SCC	32%	13%	18%	-	
SOL	23%	NA	-32%	✓	
SQ	39%	29%	21%	-	

RFS Rate per 1,000 Inmates					
Institution	DEC 09	JAN 2010	FEB 2010	Goal Met February (100)	Progress (Dec-Feb)
CCC	63	55	48	✓	
CMF	148	197	165	-	
DVI	77	72	53	✓	
FSP	39	43	36	✓	
HDSP	108	100	96	✓	
MCSP	59	49	84	✓	
PBSP	34	48	38	✓	
SAC	70	70	97	✓	
SCC	51	44	46	✓	
SOL	75	78	137	-	
SQ	108	114	100	✓	

Bed Days per 1,000 Inmates per Year					
Institution	DEC 09	JAN 2010	FEB 2010	Goal Met February (600)	Progress (Dec-Feb)
CCC	133	146	99	✓	
CMF	1441	1877	1710	-	
DVI	476	378	264	✓	
FSP	355	352	216	✓	
HDSP	260	273	195	✓	
MCSP	348	363	463	✓	
PBSP	11	46	61	✓	
SAC	671	537	382	✓	
SCC	182	254	251	✓	
SOL	616	644	716	-	
SQ	927	911	956	-	





Percentage of Medical 7362 seen Face-to-Face by RN within 1 working day					
Institution	DEC 09	JAN 2010	FEB 2010	Goal Met February (>85%)	Progress (Dec-Feb)
CCWF	100%	100%	99%	✓	
CMC	98%	99%	91%	✓	
CTF	93%	97%	94%	✓	
KVSP	42%	30%	37%	-	
NKSP	70%	100%	100%	✓	
SVSP	87%	86%	95%	✓	
VSPW	88%	89%	87%	✓	
WSP	79%	62%	50%	-	

Percentage of Routine 7362s referred to PCP and seen within 14 days					
Institution	DEC 09	JAN 2010	FEB 2010	Goal Met February (>85%)	Progress (Dec-Feb)
CCWF	NR	NR	76%	-	
CMC	NR	50%	38%	-	
CTF	79%	42%	49%	-	
KVSP	27%	37%	43%	-	
NKSP	100%	100%	100%	✓	
SVSP	87%	87%	73%	-	
VSPW	81%	95%	84%	-	
WSP	36%	5%	9%	-	

Percentage of CCP Patients Evaluated by PCP within last 180 days					
Institution	DEC 09	JAN 2010	FEB 2010	Goal Met February (>85%)	Progress (Dec-Feb)
CCWF	100%	100%	100%	✓	
CMC	NR	25%	75%	-	
CTF	NR	NR	NR	-	
KVSP	***	***	***	-	
NKSP	98%	98%	96%	✓	
SVSP	90%	80%	89%	✓	
VSPW	85%	100%	100%	✓	
WSP	70%	68%	74%	-	

Percentage of High Priority RFS Patients evaluated within 14 days					
Institution	DEC 09	JAN 2010	FEB 2010	Goal Met February (>85%)	Progress (Dec-Feb)
CCWF	99%	100%	100%	✓	
CMC	100%	99%	100%	✓	
CTF	100%	100%	100%	✓	
KVSP	90%	96%	83%	-	
NKSP	91%	98%	97%	✓	
SVSP	100%	100%	74%	-	
VSPW	100%	100%	100%	✓	
WSP	99%	99%	99%	✓	

Percentage of patients seen by PCP within five calendar days of return from Community ED or Hospital					
Institution	DEC 09	JAN 2010	FEB 2010	Goal Met February (>85%)	Progress (Dec-Feb)
CCWF	-	-	68%	-	
CMC	-	-	93%	✓	
CTF	-	-	100%	✓	
KVSP	-	-	82%	-	
NKSP	-	-	***	-	
SVSP	-	-	55%	-	
VSPW	-	-	91%	✓	
WSP	-	-	86%	✓	



BENCHMARKED PERFORMANCE INDICATORS



Percentage of Non-Formulary Usage					
Institution	DEC 09	JAN 2010	FEB 2010	Goal Met February (<5%)	Progress (Dec-Feb)
CCWF	11%	10%	7%	-	
CMC	5%	4%	4%	✓	
CTF	4%	3%	3%	✓	
KVSP	4%	3%	3%	✓	
NKSP	8%	7%	5%	-	
SVSP	13%	8%	6%	-	
VSPW	8%	6%	5%	✓	
WSP	6%	6%	5%	✓	

Drug Purchases \$ PMPM reduced by 10%					
Institution	DEC 09	JAN 2010	FEB 2010	Goal Met February (-10%)	Progress (Dec-Feb)
CCWF	-9%	-17%	20%	-	
CMC	-1%	-9%	21%	-	
CTF	41%	34%	25%	-	
KVSP	23%	10%	1%	-	
NKSP	1%	13%	38%	-	
SVSP	-15%	-21%	-16%	✓	
VSPW	-8%	-5%	-23%	✓	
WSP	7%	36%	26%	-	

Rx PMPM # reduced by 10%					
Institution	DEC 09	JAN 2010	FEB 2010	Goal Met February (-10%)	Progress (Dec-Feb)
CCWF	4%	1%	5%	-	
CMC	21%	6%	8%	-	
CTF	14%	13%	20%	-	
KVSP	12%	5%	8%	-	
NKSP	-5%	-7%	14%	-	
SVSP	47%	28%	-39%	✓	
VSPW	15%	15%	9%	-	
WSP	-4%	-8%	7%	-	

RFS Rate per 1,000 Inmates					
Institution	DEC 09	JAN 2010	FEB 2010	Goal Met February (100)	Progress (Dec-Feb)
CCWF	138	122	40	✓	
CMC	152	127	72	✓	
CTF	116	98	100	✓	
KVSP	75	73	103	-	
NKSP	97	85	107	-	
SVSP	137	114	121	-	
VSPW	97	77	132	-	
WSP	44	50	138	-	

Bed Days per 1,000 Inmates per Year					
Institution	DEC 09	JAN 2010	FEB 2010	Goal Met February (600)	Progress (Dec-Feb)
CCWF	348	420	305	✓	
CMC	115	161	232	✓	
CTF	330	336	363	✓	
KVSP	664	644	723	-	
NKSP	653	686	775	-	
SVSP	815	805	513	✓	
VSPW	298	267	238	✓	
WSP	1036	875	567	✓	





Percentage of Medical 7362 seen Face-to-Face by RN within 1 working day					
Institution	DEC 09	JAN 2010	FEB 2010	Goal Met February (>85%)	Progress (Dec-Feb)
CAL	100%	100%	100%	✔	
CCI	99%	93%	92%	✔	
CEN	***	100%	84%	-	
CIM	87%	89%	98%	✔	
CIW	79%	91%	81%	-	
CRC	NR	53%	87%	✔	
CVSP	***	100%	100%	✔	
ISP	85%	***	100%	✔	
LAC	62%	73%	91%	✔	
RJD	68%	41%	83%	-	

Percentage of Routine 7362s referred to PCP and seen within 14 days					
Institution	DEC 09	JAN 2010	FEB 2010	Goal Met February (>85%)	Progress (Dec-Feb)
CAL	90%	97%	70%	-	
CCI	NR	100%	94%	✔	
CEN	4%	6%	7%	-	
CIM	100%	100%	100%	✔	
CIW	84%	91%	92%	✔	
CRC	NR	100%	100%	✔	
CVSP	52%	93%	69%	-	
ISP	23%	19%	42%	-	
LAC	12%	67%	79%	-	
RJD	50%	60%	82%	-	

Percentage of CCP Patients Evaluated by PCP within last 180 days					
Institution	DEC 09	JAN 2010	FEB 2010	Goal Met February (>85%)	Progress (Dec-Feb)
CAL	NR	NR	NR	-	
CCI	100%	100%	100%	✔	
CEN	***	***	91%	✔	
CIM	100%	100%	100%	✔	
CIW	100%	100%	100%	✔	
CRC	94%	94%	98%	✔	
CVSP	NR	NR	NR	-	
ISP	NR	NR	NR	-	
LAC	53%	57%	28%	-	
RJD	91%	96%	97%	✔	

Percentage of High Priority RFS Patients evaluated within 14 days					
Institution	DEC 09	JAN 2010	FEB 2010	Goal Met February (>85%)	Progress (Dec-Feb)
CAL	100%	100%	100%	✔	
CCI	95%	100%	100%	✔	
CEN	100%	100%	100%	✔	
CIM	100%	96%	92%	✔	
CIW	100%	100%	100%	✔	
CRC	87%	86%	93%	✔	
CVSP	100%	100%	100%	✔	
ISP	100%	100%	100%	✔	
LAC	100%	100%	100%	✔	
RJD	100%	95%	95%	✔	

Percentage of patients seen by PCP within five calendar days of return from Community ED or Hospital					
Institution	DEC 09	JAN 2010	FEB 2010	Goal Met February (>85%)	Progress (Dec-Feb)
CAL	-	-	93%	✔	
CCI	-	-	50%	-	
CEN	-	-	31%	-	
CIM	-	-	100%	✔	
CIW	-	-	96%	✔	
CRC	-	-	89%	✔	
CVSP	-	-	54%	-	
ISP	-	-	NR	-	
LAC	-	-	98%	✔	
RJD	-	-	57%	-	



BENCHMARKED PERFORMANCE INDICATORS



Percentage of Non-Formulary Usage					
Institution	DEC 09	JAN 2010	FEB 2010	Goal Met February (<5%)	Progress (Dec-Feb)
CAL	6%	5%	4%	✓	
CCI	4%	4%	3%	✓	
CEN	5%	6%	4%	✓	
CIM	3%	3%	2%	✓	
CIW	5%	5%	3%	✓	
CRC	5%	4%	3%	✓	
CVSP	3%	3%	3%	✓	
ISP	10%	9%	4%	✓	
LAC	2%	2%	2%	✓	
RJD	2%	2%	1%	✓	

Drug Purchases \$ PMPM reduced by 10%					
Institution	DEC 09	JAN 2010	FEB 2010	Goal Met February (-10%)	Progress (Dec-Jan)
CAL	5%	6%	-21%	✓	
CCI	16%	-12%	-25%	✓	
CEN	-12%	-29%	-34%	✓	
CIM	27%	17%	-12%	✓	
CIW	38%	10%	19%	-	
CRC	40%	39%	26%	-	
CVSP	16%	18%	15%	-	
ISP	49%	56%	39%	-	
LAC	41%	0%	25%	-	
RJD	58%	3%	9%	-	

Rx PMPM # reduced by 10%					
Institution	DEC 09	JAN 2010	FEB 2010	Goal Met February (-10%)	Progress (Dec-Feb)
CAL	23%	0%	-3%	-	
CCI	25%	10%	13%	-	
CEN	17%	4%	1%	-	
CIM	39%	22%	16%	-	
CIW	20%	9%	8%	-	
CRC	35%	18%	9%	-	
CVSP	34%	13%	12%	-	
ISP	25%	14%	7%	-	
LAC	22%	10%	9%	-	
RJD	29%	NA	14%	-	

RFS Rate per 1,000 Inmates					
Institution	DEC 09	JAN 2010	FEB 2010	Goal Met February (100)	Progress (Dec-Feb)
CAL	109	85	74	✓	
CCI	69	55	47	✓	
CEN	63	58	57	✓	
CIM	66	59	68	✓	
CIW	116	128	118	-	
CRC	90	72	63	✓	
CVSP	80	64	77	✓	
ISP	81	70	66	✓	
LAC	83	75	129	-	
RJD	101	122	117	-	

Bed Days per 1,000 Inmates per Year					
Institution	DEC 09	JAN 2010	FEB 2010	Goal Met February (600)	Progress (Dec-Feb)
CAL	245	375	328	✓	
CCI	444	232	247	✓	
CEN	223	223	195	✓	
CIM	784	886	952	-	
CIW	643	685	318	✓	
CRC	727	763	661	-	
CVSP	634	390	198	✓	
ISP	711	477	314	✓	
LAC	654	584	334	✓	
RJD	1175	1242	1368	-	





Percentage of Medical 7362 seen Face-to-Face by RN within 1 working day					
Institution	DEC 09	JAN 2010	FEB 2010	Goal Met February (>85%)	Progress (Dec-Feb)
ASP	40%	77%	56%	-	
COR	100%	93%	95%	✔	
PVSP	38%	45%	64%	-	
SATF	90%	90%	90%	✔	

Percentage of Routine 7362s referred to PCP and seen within 14 days					
Institution	DEC 09	JAN 2010	FEB 2010	Goal Met February (>85%)	Progress (Dec-Feb)
ASP	38%	46%	48%	-	
COR	40%	90%	90%	✔	
PVSP	90%	45%	35%	-	
SATF	50%	50%	50%	-	

Percentage of CCP Patients Evaluated by PCP within last 180 days					
Institution	DEC 09	JAN 2010	FEB 2010	Goal Met February (>85%)	Progress (Dec-Feb)
ASP	NR	NR	NR	-	
COR	86%	86%	85%	✔	
PVSP	88%	86%	92%	✔	
SATF	79%	70%	70%	-	

Percentage of High Priority RFS Patients evaluated within 14 days					
Institution	DEC 09	JAN 2010	FEB 2010	Goal Met February (>85%)	Progress (Dec-Feb)
ASP	82%	100%	98%	✔	
COR	100%	89%	100%	✔	
PVSP	90%	85%	74%	-	
SATF	65%	76%	100%	✔	

Percentage of patients seen by PCP within five calendar days of return from Community ED or Hospital					
Institution	DEC 09	JAN 2010	FEB 2010	Goal Met February (>85%)	Progress (Dec-Feb)
ASP	-	-	74%	-	
COR	-	-	92%	✔	
PVSP	-	-	66%	-	
SATF	-	-	62%	-	

Medical Program Management Report
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BENCHMARKED PERFORMANCE INDICATORS



Percentage of Non-Formulary Usage					
Institution	DEC 09	JAN 2010	FEB 2010	Goal Met February (<5%)	Progress (Dec-Feb)
ASP	3%	3%	2%	✓	
COR	7%	6%	5%	✓	
PVSP	7%	6%	6%	-	
SATF	3%	3%	3%	✓	

Drug Purchases \$ PMPM reduced by 10%					
Institution	DEC 09	JAN 2010	FEB 2010	Goal Met February (-10%)	Progress (Dec-Feb)
ASP	19%	-10%	2%	-	
COR	38%	27%	22%	-	
PVSP	36%	22%	15%	-	
SATF	21%	-3%	15%	-	

Rx PMPM # reduced by 10%					
Institution	DEC 09	JAN 2010	FEB 2010	Goal Met February (-10%)	Progress (Dec-Feb)
ASP	12%	-6%	-6%	-	
COR	26%	21%	12%	-	
PVSP	27%	9%	8%	-	
SATF	37%	20%	7%	-	

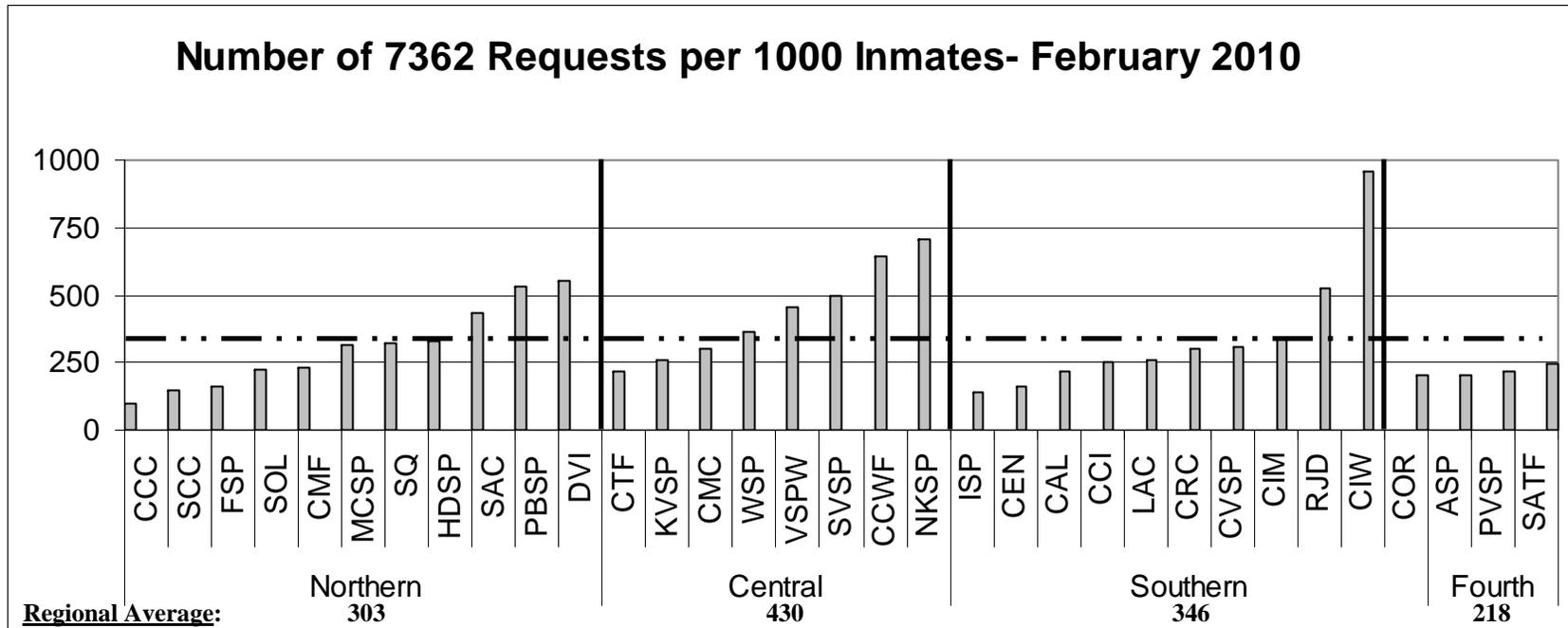
RFS Rate per 1,000 Inmates					
Institution	DEC 09	JAN 2010	FEB 2010	Goal Met February (100)	Progress (Dec-Feb)
ASP	90	63	87	✓	
COR	128	48	135	-	
PVSP	87	52	137	-	
SATF	64	63	65	✓	

Bed Days per 1,000 Inmates per Year					
Institution	DEC 09	JAN 2010	FEB 2010	Goal Met February (600)	Progress (Dec-Feb)
ASP	753	525	519	✓	
COR	515	576	1305	-	
PVSP	1711	1573	1795	-	
SATF	823	970	455	✓	

Medical Program Management Report
 Statewide Summary- Reporting Period: February 2010
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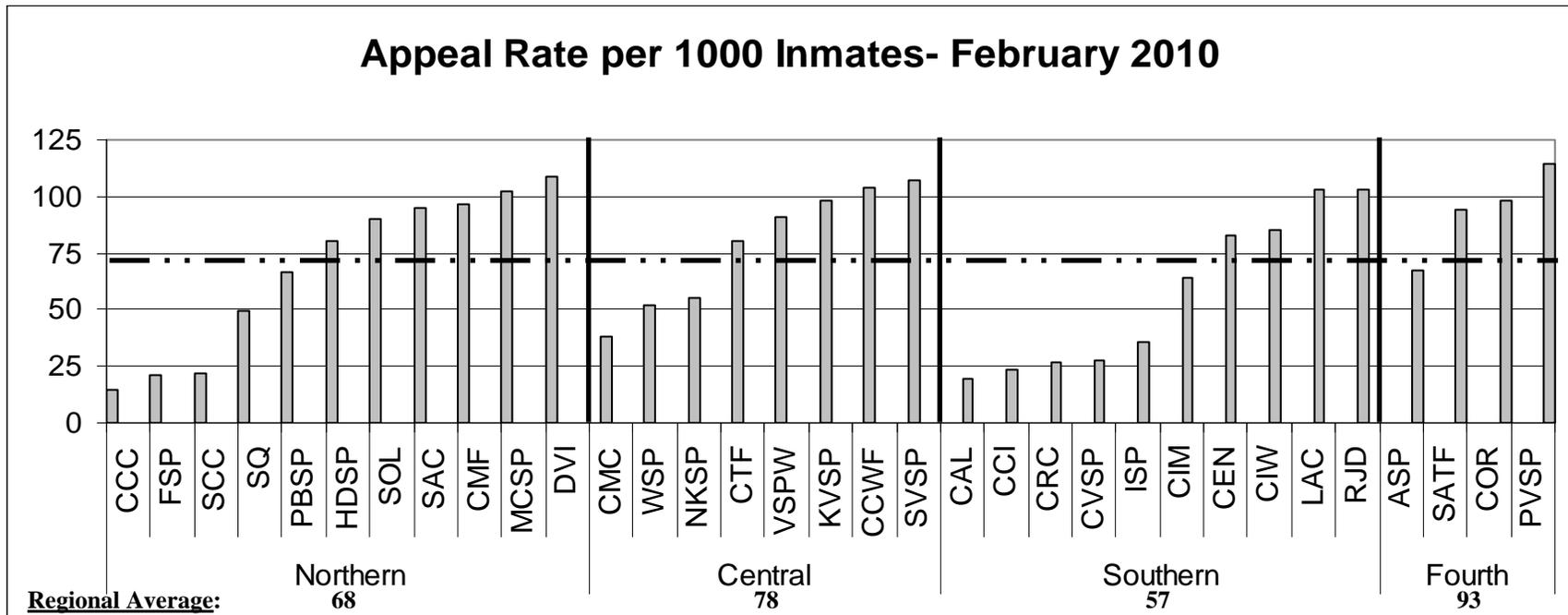


7362 Request: Patient Volume & Population-Adjusted Data



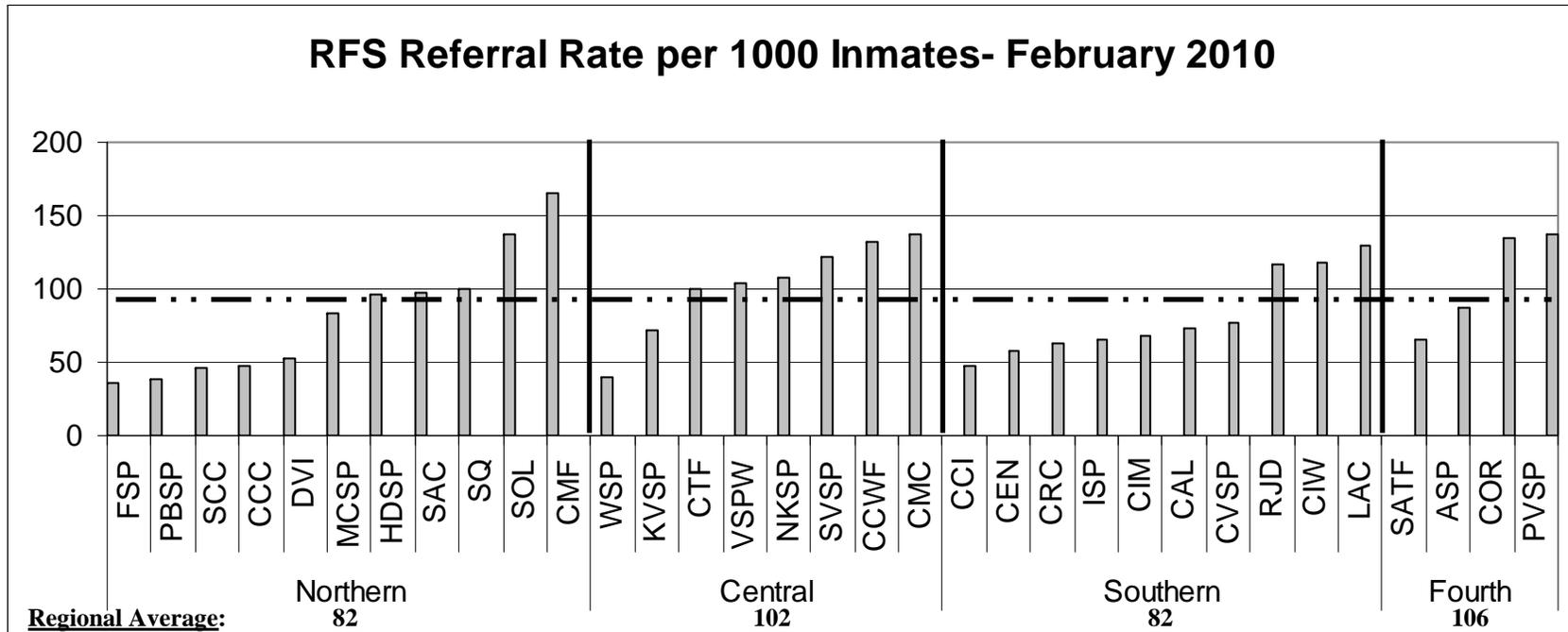
	DEC 09	JAN 2010	FEB 2010
Statewide Average Absolute Volume	1640	1482	1470
Institution with Highest Absolute Volume	NKSP (4456)	NKSP (3570)	NKSP (3862)
Institution with Lowest Absolute Volume	CCC (582)	CCC (423)	CCC (523)
Statewide Average per 1,000 Inmates	377	326	337
Institutions with highest volume per 1,000 Inmates (≥ 200% SA)	NKSP (836) CIW (1052)	CIW (963) NKSP (669)	NKSP (709) CIW (957)
Institutions with lowest volume per 1,000 Inmates (≤ 25% SA)	-	-	-

Appeals: Patient Volume & Population-Adjusted Data



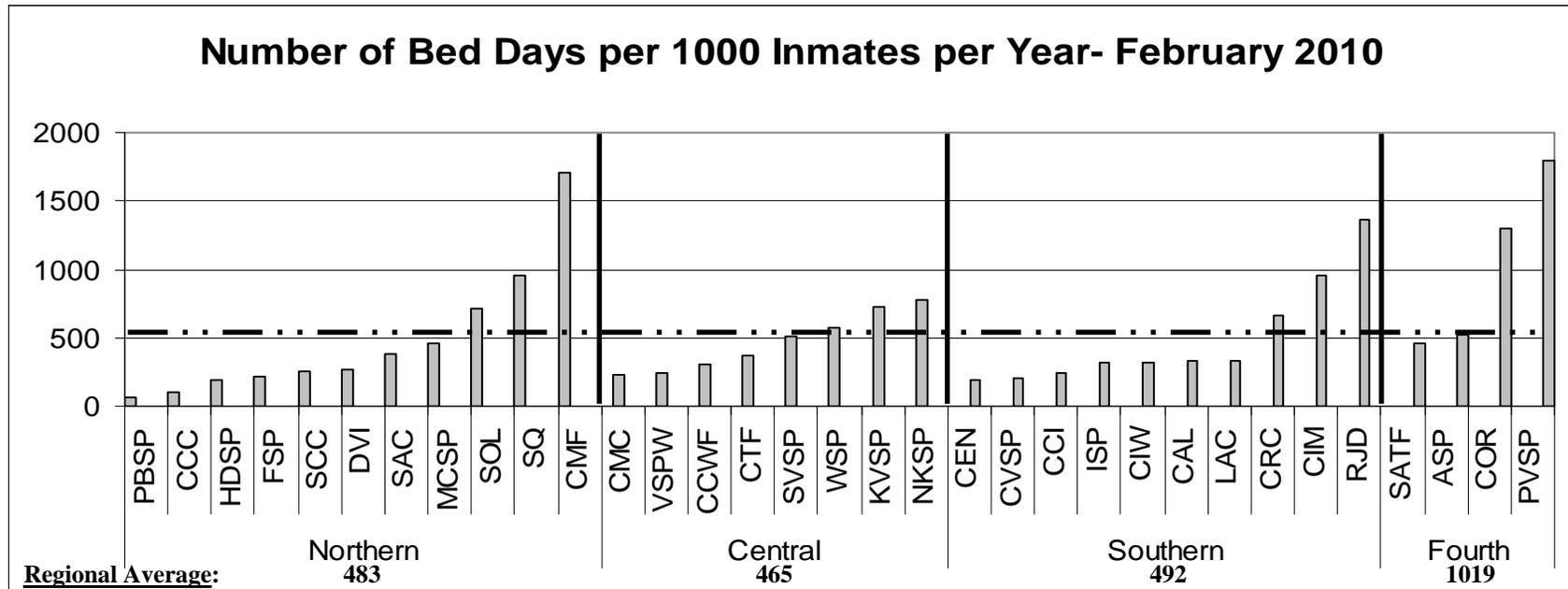
	DEC 09	JAN 2010	FEB 2010
Statewide Average Absolute Volume	340	327	317
Institution with Highest Absolute Volume	PVSP (696)	LAC (576)	SATF (634)
Institution with Lowest Absolute Volume	FSP (69)	CAL (83)	FSP (80)
Statewide Average per 1,000 Inmates	74	72	70
Institutions with highest volume per 1,000 Inmates (≥ 200% SA)	-	-	-
Institutions with lowest volume per 1,000 Inmates (≤ 25% SA)	CMC (15) FSP (18)	CCC (18)	CCC (15)

RFS Referrals: Patient Volume & Population-Adjusted Data



	DEC 09	JAN 2010	FEB 2010
Statewide Average Absolute Volume	410	378	408
Institution with Highest Absolute Volume	CMC (986)	CMC (825)	CMC (889)
Institution with Lowest Absolute Volume	PBSP (115)	FSP (160)	PBSP (127)
Statewide Average per 1,000 Inmates	88	80	89
Institutions with highest volume per 1,000 Inmates (≥ 200% SA)	-	CMF (197)	-
Institutions with lowest volume per 1,000 Inmates (≤ 25% SA)	-	-	-

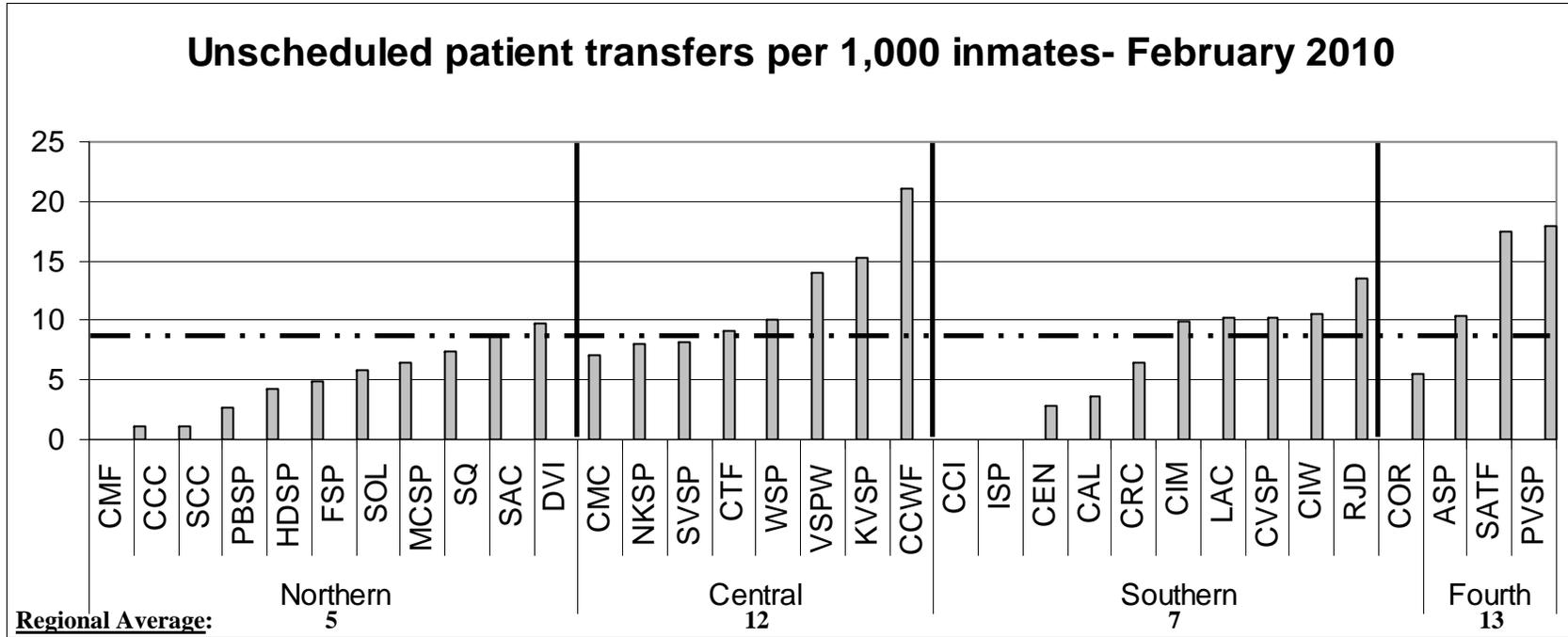
Bed Days: Patient Volume & Population-Adjusted Data



	DEC 09	JAN 2010	FEB 2010
Statewide Average Absolute Volume	250	225	211
Institution with Highest Absolute Volume	PVSP (694)	PVSP (638)	PVSP (724)*
Institution with Lowest Absolute Volume	PBSP (3)	PBSP (13)	PBSP (17)*
Statewide Average per 1,000 Inmates	631	590	546
Institutions with highest volume per 1,000 Inmates (≥ 200% SA)	PVSP (1711) CMF (1441)	CMF (1877) PVSP (1573) RJD (1242)	CMF (1710) RJD (1368) COR (1305) PVSP (1795)
Institutions with lowest volume per 1,000 Inmates (≤ 25% SA)	PBSP (11) CMC (114) CCC (133)	PBSP (46) CCC (146)	PBSP (61) CCC (99)

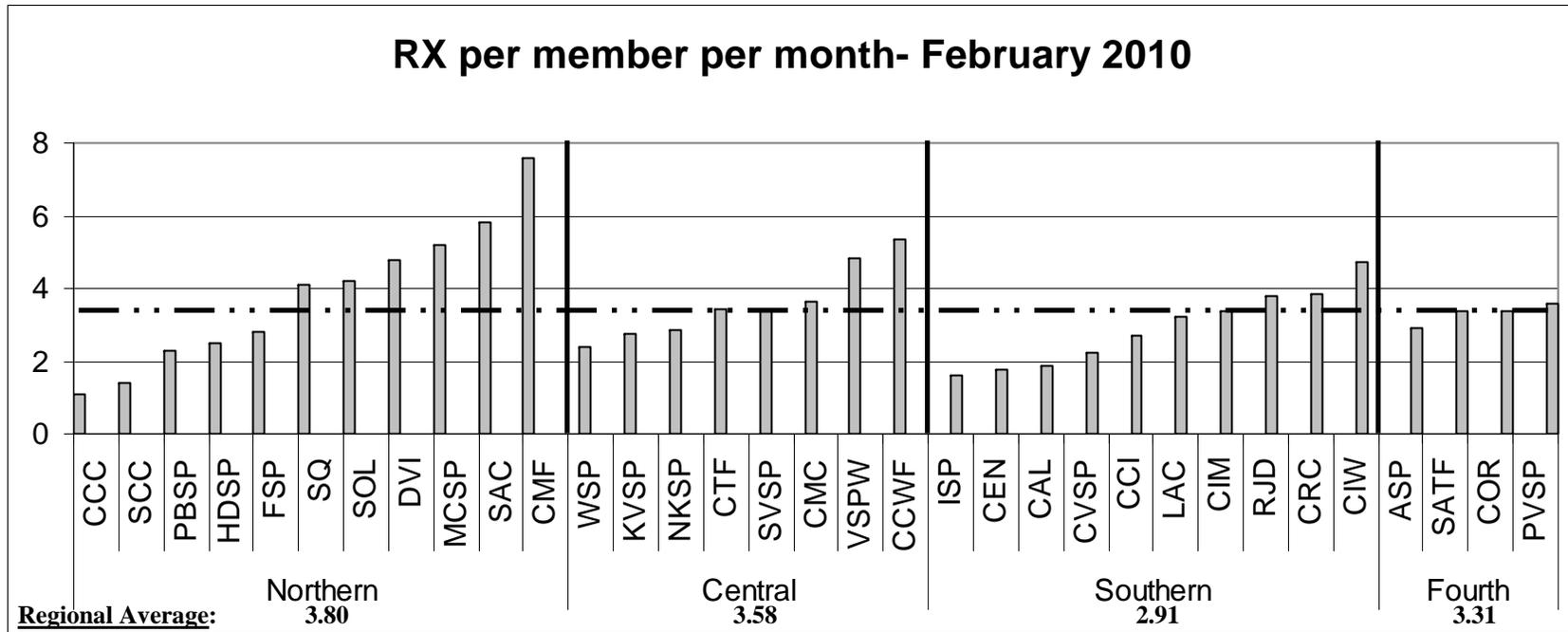
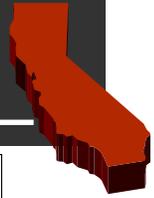
*Actual Number of bed days. Population-adjusted measure is per year.

Unscheduled Patient Transfers: Patient Volume & Population-Adjusted Data



	DEC 09	JAN 2010	FEB 2010
Statewide Average Absolute Volume	44	43	44
Institution with Highest Absolute Volume	CCC (133)	SATF (117)	SATF (117)
Institution with Lowest Absolute Volume	PBSP (5) CVSP (5)	SCC (8)	CCC (7)
Statewide Average per 1,000 Inmates	9	9	8
Institutions with highest volume per 1,000 Inmates (≥ 200% SA)	DVI (25) CCC (24)	CCWF (24) DVI (20)	CCWF (21) PVSP (18)
Institutions with lowest volume per 1,000 Inmates (≤ 25% SA)	PBSP (1) CVSP (1) CCI (2)	SCC (1) CCI (2)	CCC (1) SCC (1)

Prescriptions: Patient Volume & Population-Adjusted Data



	DEC 09	JAN 2010	FEB 2010
Statewide Average Absolute Volume	18,860	16,187	15,484
Institution with Highest Absolute Volume	SOL (34,647)	SOL (29,425)	CMC (24,200)
Institution with Lowest Absolute Volume	CCC (6,611)	CCC (5,498)	CCC (5,836)
Statewide Average per 1,000 Inmates	4.21	3.45	3.42
Institutions with highest volume per 1,000 Inmates (≥ 200% SA)	SVSP (8.4)	-	CMF (7.6)
Institutions with lowest volume per 1,000 Inmates (≤ 25% SA)	-	-	-

Northern Region Medical Program Dashboard
Priority Access Measures

			Dec '09	Jan	Feb	Mar	Apr	May
CCC	Seen by RN (w/ symptoms)	1 day	51	67	45			
	Seen by PCP (routine)	14 days	0	100	100			
	CCP evaluated by PCP	180 days	58	75	68			
	RFS evaluated (high priority)	14 days	100	100	100			
	PCP follow-up (return from higher LoC)	5 days	X	X				
	% of Monthly Performance Measures Met			25	50	40		
CMF	Seen by RN (w/ symptoms)	1 day		98	99			
	Seen by PCP (routine)	14 days			95			
	CCP evaluated by PCP	180 days		100	100			
	RFS evaluated (high priority)	14 days	100	100	100			
	PCP follow-up (return from higher LoC)	5 days	X	X				
	% of Monthly Performance Measures Met			25	75	80		
DVI	Seen by RN (w/ symptoms)	1 day	78	71	72			
	Seen by PCP (routine)	14 days	85	95	100			
	CCP evaluated by PCP	180 days	100	100	100			
	RFS evaluated (high priority)	14 days	100	100	100			
	PCP follow-up (return from higher LoC)	5 days	X	X				
	% of Monthly Performance Measures Met			75	75	60		
FSP	Seen by RN (w/ symptoms)	1 day	100	87	89			
	Seen by PCP (routine)	14 days	75	93	93			
	CCP evaluated by PCP	180 days	100	95	96			
	RFS evaluated (high priority)	14 days	100	100	100			
	PCP follow-up (return from higher LoC)	5 days	X	X	100			
	% of Monthly Performance Measures Met			75	100	100		
HDSP	Seen by RN (w/ symptoms)	1 day	80	36	32			
	Seen by PCP (routine)	14 days	100	22	22			
	CCP evaluated by PCP	180 days	100	78	79			
	RFS evaluated (high priority)	14 days	60	100	100			
	PCP follow-up (return from higher LoC)	5 days	X	X	21			
	% of Monthly Performance Measures Met			50	25	20		
MCSP	Seen by RN (w/ symptoms)	1 day	95	95	97			
	Seen by PCP (routine)	14 days	57	76	87			
	CCP evaluated by PCP	180 days	100	100	100			
	RFS evaluated (high priority)	14 days	100	100	81			
	PCP follow-up (return from higher LoC)	5 days	X	X	96			
	% of Monthly Performance Measures Met			75	75	80		
PBSP	Seen by RN (w/ symptoms)	1 day	73	67	100			
	Seen by PCP (routine)	14 days	31					
	CCP evaluated by PCP	180 days	62	67	69			
	RFS evaluated (high priority)	14 days	100	100	100			
	PCP follow-up (return from higher LoC)	5 days	X	X	11			
	% of Monthly Performance Measures Met			25	25	40		
SAC	Seen by RN (w/ symptoms)	1 day	***	100	90			
	Seen by PCP (routine)	14 days	67	80				
	CCP evaluated by PCP	180 days	100	100	***			
	RFS evaluated (high priority)	14 days	100	100	100			
	PCP follow-up (return from higher LoC)	5 days	X	X	43			
	% of Monthly Performance Measures Met			50	75	40		
SCC	Seen by RN (w/ symptoms)	1 day	100	100	100			
	Seen by PCP (routine)	14 days	100	99	94			
	CCP evaluated by PCP	180 days	100	99	97			
	RFS evaluated (high priority)	14 days	100	100	100			
	PCP follow-up (return from higher LoC)	5 days	X	X	100			
	% of Monthly Performance Measures Met			100	100	100		
SOL	Seen by RN (w/ symptoms)	1 day	66		55			
	Seen by PCP (routine)	14 days						
	CCP evaluated by PCP	180 days	100		95			
	RFS evaluated (high priority)	14 days	100	100	100			
	PCP follow-up (return from higher LoC)	5 days	X	X	93			
	% of Monthly Performance Measures Met			50	25	60		
SQ	Seen by RN (w/ symptoms)	1 day	76	87	90			
	Seen by PCP (routine)	14 days						
	CCP evaluated by PCP	180 days	84	85	84			
	RFS evaluated (high priority)	14 days	100	100	98			
	PCP follow-up (return from higher LoC)	5 days	X	X	86			
	% of Monthly Performance Measures Met			25	75	60		
Region-% of Performance Measures Met			52	64	62			

Benchmarks:

<75% Poor
75-84% Fair
≥ 85% Good

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*Blank cells colored
RED denote NO
DATA was Submitted

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Central Region Medical Program Dashboard
Priority Access Measures

			Dec '09	Jan	Feb	Mar	Apr	May
CCWF	Seen by RN (w/ symptoms)	1 day	100	100	99			
	Seen by PCP (routine)	14 days			76			
	CCP evaluated by PCP	180 days	100	100	100			
	RFS evaluated (high priority)	14 days	99	100	100			
	PCP follow-up (return from higher LoC)	5 days	X	X	68			
	% of Monthly Performance Measures Met			75	75	60		
CMC	Seen by RN (w/ symptoms)	1 day	98	99	91			
	Seen by PCP (routine)	14 days		50	38			
	CCP evaluated by PCP	180 days		25	75			
	RFS evaluated (high priority)	14 days	100	99	100			
	PCP follow-up (return from higher LoC)	5 days	X	X	93			
	% of Monthly Performance Measures Met			50	50	60		
CTF	Seen by RN (w/ symptoms)	1 day	93	97	94			
	Seen by PCP (routine)	14 days	79	42	49			
	CCP evaluated by PCP	180 days						
	RFS evaluated (high priority)	14 days	100	100	100			
	PCP follow-up (return from higher LoC)	5 days	X	X	100			
	% of Monthly Performance Measures Met			50	50	60		
KVSP	Seen by RN (w/ symptoms)	1 day	42	30	37			
	Seen by PCP (routine)	14 days	27	37	43			
	CCP evaluated by PCP	180 days	***	***	***			
	RFS evaluated (high priority)	14 days	90	96	83			
	PCP follow-up (return from higher LoC)	5 days	X	X	82			
	% of Monthly Performance Measures Met			25	25	0		
NKSP	Seen by RN (w/ symptoms)	1 day	70	100	100			
	Seen by PCP (routine)	14 days	100	100	100			
	CCP evaluated by PCP	180 days	98	98	96			
	RFS evaluated (high priority)	14 days	91	98	97			
	PCP follow-up (return from higher LoC)	5 days	X	X	***			
	% of Monthly Performance Measures Met			75	100	80		
SVSP	Seen by RN (w/ symptoms)	1 day	87	86	95			
	Seen by PCP (routine)	14 days	87	87	73			
	CCP evaluated by PCP	180 days	90	80	89			
	RFS evaluated (high priority)	14 days	100	100	74			
	PCP follow-up (return from higher LoC)	5 days	X	X	55			
	% of Monthly Performance Measures Met			100	75	40		
VSPW	Seen by RN (w/ symptoms)	1 day	88	89	87			
	Seen by PCP (routine)	14 days	81	95	84			
	CCP evaluated by PCP	180 days	85	100	100			
	RFS evaluated (high priority)	14 days	100	100	100			
	PCP follow-up (return from higher LoC)	5 days	X	X	91			
	% of Monthly Performance Measures Met			75	100	80		
WSP	Seen by RN (w/ symptoms)	1 day	79	62	50			
	Seen by PCP (routine)	14 days	36	5	9			
	CCP evaluated by PCP	180 days	70	68	74			
	RFS evaluated (high priority)	14 days	99	99	99			
	PCP follow-up (return from higher LoC)	5 days	X	X	86			
	% of Monthly Performance Measures Met			25	25	40		
Region-% of Performance Measures Met			59	63	53			

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**Southern Region Medical Program Dashboard
Priority Access Measures**

			Dec '09	Jan	Feb	Mar	Apr	May
CAL	Seen by RN (w/ symptoms)	1 day	100	100	100			
	Seen by PCP (routine)	14 days	90	97	70			
	CCP evaluated by PCP	180 days						
	RFS evaluated (high priority)	14 days	100	100	100			
	PCP follow-up (return from higher LoC)	5 days	X	X	93			
	% of Monthly Performance Measures Met			75	75	60		
CCI	Seen by RN (w/ symptoms)	1 day	99	93	92			
	Seen by PCP (routine)	14 days		100	94			
	CCP evaluated by PCP	180 days	100	100	100			
	RFS evaluated (high priority)	14 days	95	100	100			
	PCP follow-up (return from higher LoC)	5 days	X	X				
	% of Monthly Performance Measures Met			75	100	80		
CEN	Seen by RN (w/ symptoms)	1 day	***	100	84			
	Seen by PCP (routine)	14 days	4	6	7			
	CCP evaluated by PCP	180 days	***	***	91			
	RFS evaluated (high priority)	14 days	100	100	100			
	PCP follow-up (return from higher LoC)	5 days	X	X	31			
	% of Monthly Performance Measures Met			25	50	40		
CIM	Seen by RN (w/ symptoms)	1 day	87	89	98			
	Seen by PCP (routine)	14 days	100	100	100			
	CCP evaluated by PCP	180 days	100	100	100			
	RFS evaluated (high priority)	14 days	100	96	92			
	PCP follow-up (return from higher LoC)	5 days	X	X	100			
	% of Monthly Performance Measures Met			100	100	100		
CIW	Seen by RN (w/ symptoms)	1 day	79	91	81			
	Seen by PCP (routine)	14 days	84	91	92			
	CCP evaluated by PCP	180 days	100	100	100			
	RFS evaluated (high priority)	14 days	100	100	100			
	PCP follow-up (return from higher LoC)	5 days	X	X	96			
	% of Monthly Performance Measures Met			50	100	80		
CRC	Seen by RN (w/ symptoms)	1 day		53	87			
	Seen by PCP (routine)	14 days		100	100			
	CCP evaluated by PCP	180 days	94	94	98			
	RFS evaluated (high priority)	14 days	87	86	93			
	PCP follow-up (return from higher LoC)	5 days	X	X	89			
	% of Monthly Performance Measures Met			50	75	100		
CVSP	Seen by RN (w/ symptoms)	1 day	***	100	100			
	Seen by PCP (routine)	14 days	52	93	69			
	CCP evaluated by PCP	180 days						
	RFS evaluated (high priority)	14 days	100	100	100			
	PCP follow-up (return from higher LoC)	5 days	X	X	54			
	% of Monthly Performance Measures Met			25	75	40		
ISP	Seen by RN (w/ symptoms)	1 day	85	***	100			
	Seen by PCP (routine)	14 days	23	19	42			
	CCP evaluated by PCP	180 days						
	RFS evaluated (high priority)	14 days	100	100	100			
	PCP follow-up (return from higher LoC)	5 days	X	X				
	% of Monthly Performance Measures Met			50	25	40		
LAC	Seen by RN (w/ symptoms)	1 day	62	73	91			
	Seen by PCP (routine)	14 days	12	67	79			
	CCP evaluated by PCP	180 days	53	57	28			
	RFS evaluated (high priority)	14 days	100	100	100			
	PCP follow-up (return from higher LoC)	5 days	X	X	98			
	% of Monthly Performance Measures Met			25	25	60		
RJD	Seen by RN (w/ symptoms)	1 day	68	41	83			
	Seen by PCP (routine)	14 days	50	60	82			
	CCP evaluated by PCP	180 days	91	96	97			
	RFS evaluated (high priority)	14 days	100	95	95			
	PCP follow-up (return from higher LoC)	5 days	X	X	57			
	% of Monthly Performance Measures Met			50	50	40		
Region-% of Performance Measures Met			53	68	64			

Benchmarks:

<75% Poor
75-84% Fair
≥ 85% Good

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**Fourth Region Medical Program Dashboard
Priority Access Measures**

			Dec '09	Jan	Feb	Mar	Apr	May
ASP	Seen by RN (w/ symptoms)	1 day	40	77	56			
	Seen by PCP (routine)	14 days	38	46	48			
	CCP evaluated by PCP	180 days						
	RFS evaluated (high priority)	14 days	82	100	98			
	PCP follow-up (return from higher LoC)	5 days	X	X	74			
	% of Monthly Performance Measures Met			0	25	20		
COR	Seen by RN (w/ symptoms)	1 day	100	93	95			
	Seen by PCP (routine)	14 days	40	90	90			
	CCP evaluated by PCP	180 days	86	86	85			
	RFS evaluated (high priority)	14 days	100	89	100			
	PCP follow-up (return from higher LoC)	5 days	X	X	92			
	% of Monthly Performance Measures Met			75	100	100		
PVSP	Seen by RN (w/ symptoms)	1 day	38	45	64			
	Seen by PCP (routine)	14 days	90	45	35			
	CCP evaluated by PCP	180 days	88	86	92			
	RFS evaluated (high priority)	14 days	90	85	74			
	PCP follow-up (return from higher LoC)	5 days	X	X	66			
	% of Monthly Performance Measures Met			75	50	20		
SATF	Seen by RN (w/ symptoms)	1 day	90	90	90			
	Seen by PCP (routine)	14 days	50	50	50			
	CCP evaluated by PCP	180 days	79	70	70			
	RFS evaluated (high priority)	14 days	65	76	100			
	PCP follow-up (return from higher LoC)	5 days	X	X	62			
	% of Monthly Performance Measures Met			25	25	40		
Region-% of Performance Measures Met			44	50	45			

Benchmarks:

<75% **Poor**
 75-84% **Fair**
 ≥ 85% **Good**

<75% **RED**
 75-84% **YELLOW**
 ≥ 85% **GREEN**

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