



Utilization Review Board Committee Charter

Foundation

Sandia National Lab's Employee Health Services (EHS) provides a range of ambulatory health care services. Acute care is provided in the Sandia Medical Clinic (SMC) where a broad spectrum of illnesses and injuries requiring urgent and immediate care are treated. The Health Management Clinic (HMC) is an onsite specialty care clinic designed to provide an exceptional level of care to mitigate and manage the care of chronic conditions that directly impact Sandia's healthcare dollars. These targeted conditions include diabetes and pre-diabetes, elevated lipids, hypertension, depression and anxiety, tobacco cessation, and weight loss.

To best support the ambulatory care clinics, EHS has an onsite Pharmacy program to reconcile patient medications, perform utilization review of high cost prescriptions, and to provide educational support on site. Additionally, EHS has on-site radiology services, and an on-site laboratory collection site partnering with an off-site diagnostic reference lab.

EHS has a comprehensive on-site Physical Therapy clinic, staffed with certified Physical Therapists that perform rehabilitative physical therapy for the workforce, allowing employees to return to work faster. PT staff also perform ergonomic evaluations and job placement functionality testing to ensure a safe work environment for members of the workforce.

In addition to these core services, EHS offers many other ancillary services such as individual and group fitness programs, mindfulness and stress management programs, nutritional classes and counselling, an Employee Assistance Program, Behavioral Health services, EMS services to support members of the workforce with emergent medical needs occurring in the field, and an International Travel Clinic supporting the medical needs of those employees that travel for business purposes.

Coordination of Care with Offsite Primary Care Providers

EHS is a patient-centered connected care facility, and as such an area of focus is maintaining the continuum of care with community based Primary Care Providers. Ensuring that utilization of on-site services is appropriate in the types and quantities of tests performed and ordered (lab, x-ray, imaging services), as well as medications dispensed and ordered, on-site pharmacy formulary and practices related to refilling medications, prevention of unnecessary testing, and ensuring practices remain within scope is a focus we continuously monitor.

Committee Responsibilities

The Utilization Review Board (URB) Committee shall meet no less than four times a year, on a quarterly schedule. Meetings agendas will be comprised of topics that focus on utilization trends, risk assessments, and risk reduction efforts. Committee members will review trends and outcomes based on the use of clinical risk management criteria and tools as a means to reduce and prevent medical errors, ensure patient safety, eliminate waste and unnecessary services, while ensure timely delivery of medically appropriate care. We endeavor to demonstrate that the EHS programs operate within a safe, efficient, and cost-effective manner the meets of our patients, providers, and Sandia leadership; while remaining good stewards of the tax payers' dollars.

In support of the quarterly URB committee meetings, reports and processes are reviewed at the weekly EHS Quality Meeting, that serves in conjunction with the URB to identify and review quality initiatives affecting the operations of EHS. The Quality team is comprised of the SOMD/Physicians in both NM and CA, the Management Team (including the Risk Manager) in both NM and CA, the EHS Pharmacist, and the EHS Privacy Officer. Monthly utilization review metrics and quarterly reports are reviewed at each meeting.

The quarterly URB Committee members include:

Name	Role	Contact Information
Renee Holland	Director-Committee Chair	Phone: 505-284-4843 Email: rlholla@sandia.gov
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Bridget Priddy	Privacy Officer and Medical Records-Committee Member	Phone: 505-844-7899 Email: bpriddy@sandia.gov
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Jacqueline Stiff, MD	Medical Director, VP Health Care Strategies, UHC	
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Quarterly Meeting Schedule:

Quarter 1- January

Quarter 2-April

Quarter 3-July

Quarter 4- November

Charter Approved:

Chair

Date

Appendix A-Utilization Review Score Card Metrics

Measure	Rating	Trend	Description
Onsite Annual Formulary Review	RYGB	N/A	Review cost/medication, utilization rates, and appropriateness of use, onsite dispensing
Onsite Pharmacy Costs	Goal 5% reduction	Current monthly review against baseline	Measures cost efficiencies of onsite pharmacy administration of meds, dispensing
Onsite quality appropriateness Review-5% of provider charts	RGYB	Baseline score compared to current score	Analysis of medications will be rotated base on prior review and need. Per NMBOP, 5% of provider charts will be reviewed with a goal of overall appropriate prescribing score.
Pharmacist/Provider Refill Prescribing Habits for chronic (long term) meds/monthly	% of goal	Current monthly compared to baseline measures	Onsite provider prescribing rates for long term med management. Metric will evaluate current scope for acute treatment versus long term/chronic care (PCP like) med management.
Antibiotic Stewardship Quality appropriateness	RYGB	Current monthly compared to baseline measures	5% provider chart review with a goal of compliance in appropriate prescribing.
SMC schedule fill rates	Visits: average/day by the day of week, average monthly fill, no show rate	Current monthly visits against baseline	Evaluates resource availability for scheduling, maximize staffing and operational resources
Acute Care Visit Rate- SMC unique patients that have >2 visits per diagnosis	# of patients, % of visit rate	Compare current against baseline data	Acute care is not intended for long-term PCP related scope of care.
Acute care CDC rate	% SMC visits seen <15 minutes, # visits occupational med related, EMS transports, Injury/Illness reported	Current compared to baseline	This metric will compare Sandia rates to CDC benchmark as a reference point.

Number of new HMC patients, current active treatment patients, ready to graduate, graduates	# count per month, % of HMC population graph	Current compared to baseline	This metric evaluates the progress towards achieving a graduation/community provider transition of care model in support of the HMC clinic scope of care.
SMC most frequent illness related reason for visit	Quarterly review for seasonal trends	Current compared to baseline	Ability to track the top conditions in comparison to scope of practice guidelines.
PCP Compliance Rate	Monthly Review — Target per NCQA PCCC is 85%	Current compared to target	This metric will show PCP connected care rates and NCQA targeted rates required for PCCC recognition.
Referral Rates: Offsite Tests, Specialty, PCP	Cycle Time Trends by provider and service	Current compared to baseline	This metric will track provider habits for review.
Acute Care Benchmark CDC Rate Number of Services Ordered by Physician/Mid-Level per 100 persons	-Rx or Immunization -Lab Tests & Other Tests (Biopsy, ECG, Spirometry, PFT) -Health Education Services -Imaging Onsite -Non-Medication Treatment (Durable Goods, Physical Therapy, Wound Care, procedures, BH Referral) -Offsite Referral (Imaging, Specialist or PCP)	Comparison to CDC Benchmark	This metric will evaluate Sandia rates comparable to CDE benchmark as a reference point. Goals will be established after metric trends are evaluated.