NATIONAL QUALITY FORUM

Medicaid Innovation Accelerator Project 2016-2017

Technical Expert Panel In-Person Meeting
Improving Care for Medicaid Beneficiaries with Complex Care Needs and High Costs Breakout Session

April 18-19, 2017

Improving Care for Medicaid Beneficiaries with Complex Care Needs and High Costs Breakout Session
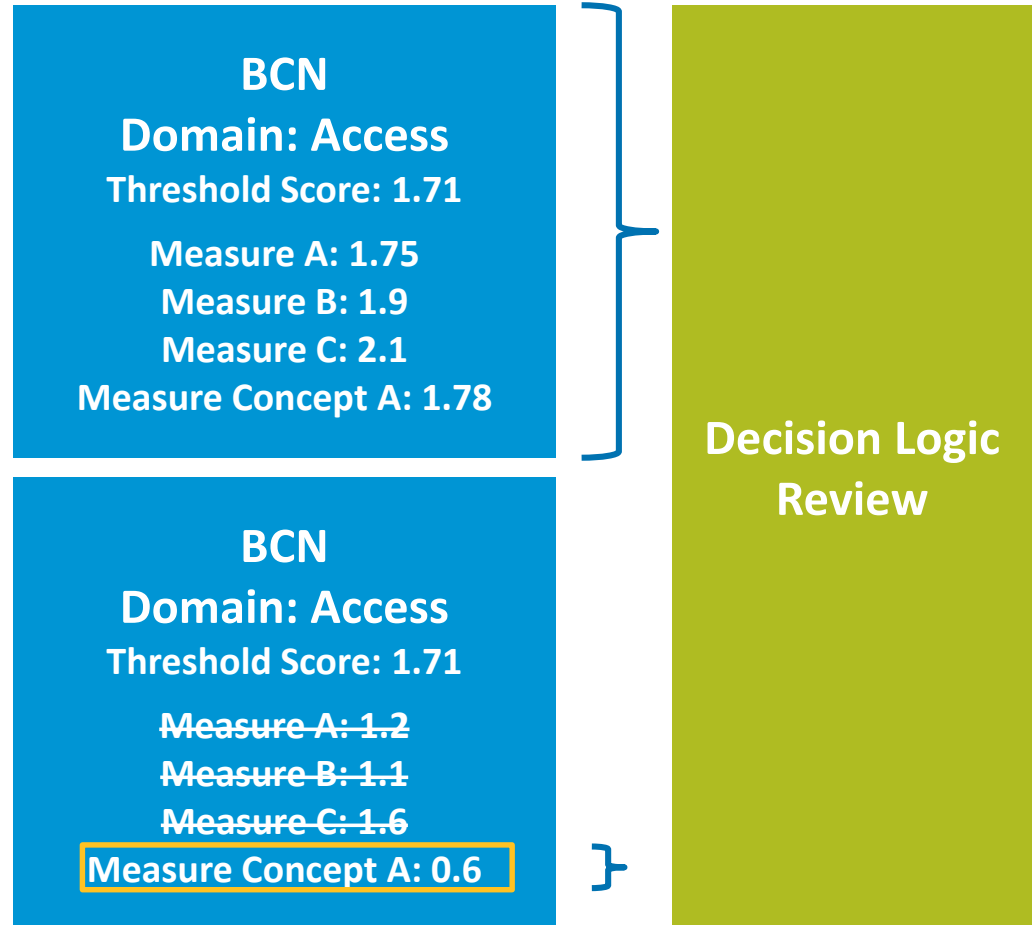
Teleconference and Streaming Information

- Teleconference: Dial (877) 224-4655; Conference Code 115 727 4771

- Streaming Day 1:
- http://nqf.commpartners.com/se/Rd/Mt.aspx?577838

- Streaming Day 2:
- http://nqf.commpartners.com/se/Rd/Mt.aspx?824195

BCN Breakout Session

- Goals of breakout session:

  - *Develop recommendations for strengthening states' Medicaid delivery system reform efforts through identification of measures related to the BCN program area*
    - » Review measures by measure score
    - » Analyze measures for consideration using a decision logic to recommend a comprehensive measure set to the Coordinating Committee
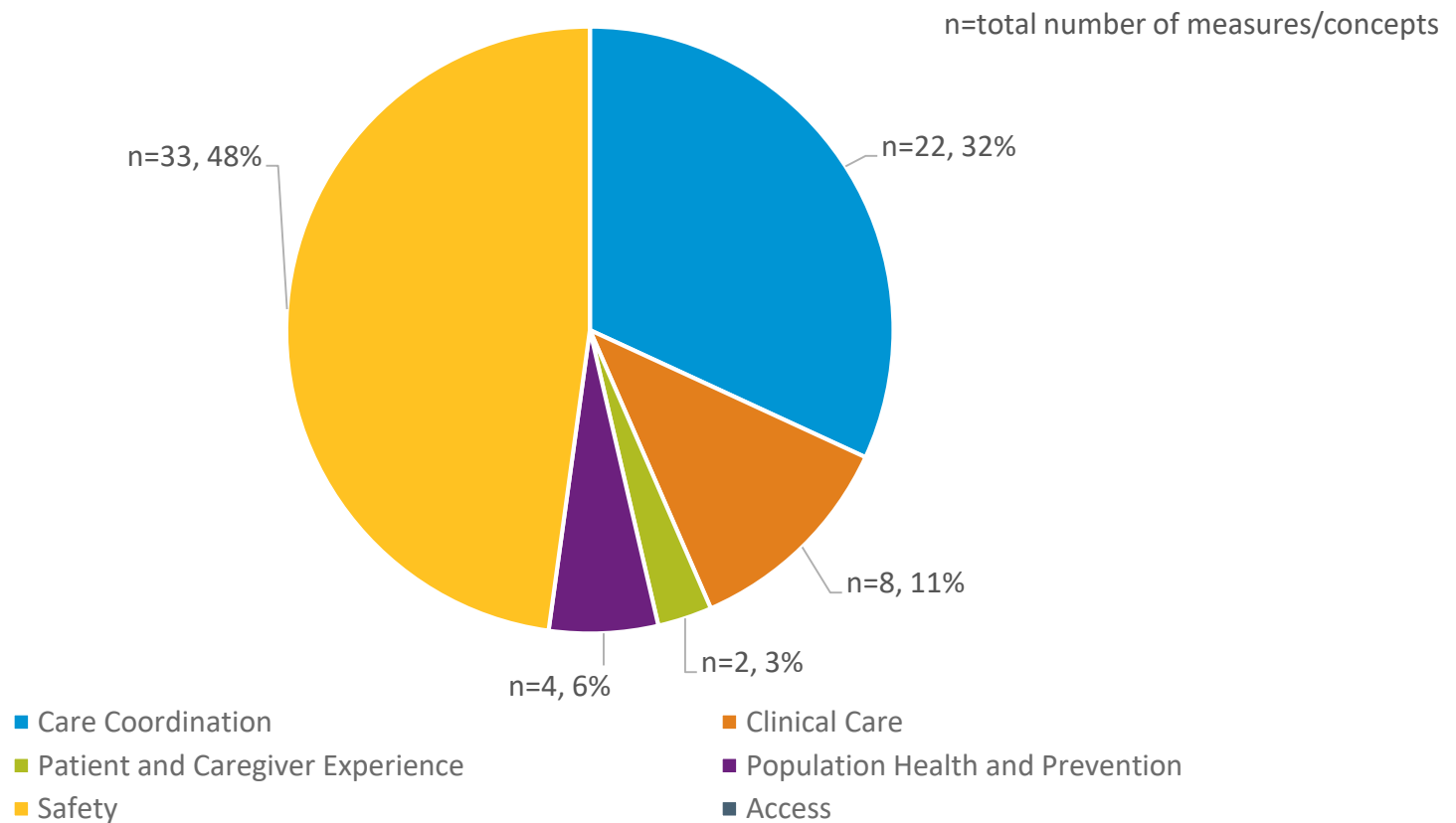
TEP Decision Process

- ✓ **Measures/Concepts that meet or exceed the threshold score (total program area-specific mean) automatically continue to the decision logic review**

- ✓ **Only Measures/Concepts with scores that fall below the mean that TEP members choose to retain in advance of the meeting will move on to the decision logic review**

- ✓ **Note: TEP members may only select up to 3 measures to retain**

BCN
Domain: Access
Threshold Score: 1.71

Measure A: 1.75
Measure B: 1.9
Measure C: 2.1
Measure Concept A: 1.78

BCN
Domain: Access
Threshold Score: 1.71

~~Measure A: 1.2~~
~~Measure B: 1.1~~
~~Measure C: 1.6~~
Measure Concept A: 0.6

Decision Logic Review

Improving Care for Medicaid Beneficiaries with Complex Care Needs and High Costs – Measure Landscape

Measures and Measure Concepts, by Domain

n=total number of measures/concepts

- ■ Care Coordination
- ■ Patient and Caregiver Experience
- ■ Safety
- ■ Clinical Care
- ■ Population Health and Prevention
- ■ Access

Improving Care for Medicaid Beneficiaries with Complex Care Needs and High Costs – Measure Landscape

	Total	Measure	Measure Concepts
Total	69	50	19
Mean	**1.71**	2.06	0.80
Maximum score	2.7	2.7	1.75
Minimum score	0.6	1.5	0.6
>= Threshold Score	38	37	1

*Note: Total mean (1.71) is used to denote cut-off for measure/concepts to be analyzed by decision logic.

BCN Overall Measure Score Mean

- BCN Measure Overall Measure Score Mean: 1.71

- Measures/Concepts with scores at or above program area mean and measures/concepts retained:
  - *Access: 0*
  - *Care Coordination: 13*
  - *Clinical Care: 6*
  - *Patient and caregiver experience: 1*
  - *Population health and prevention: 2*
  - *Safety: 21*
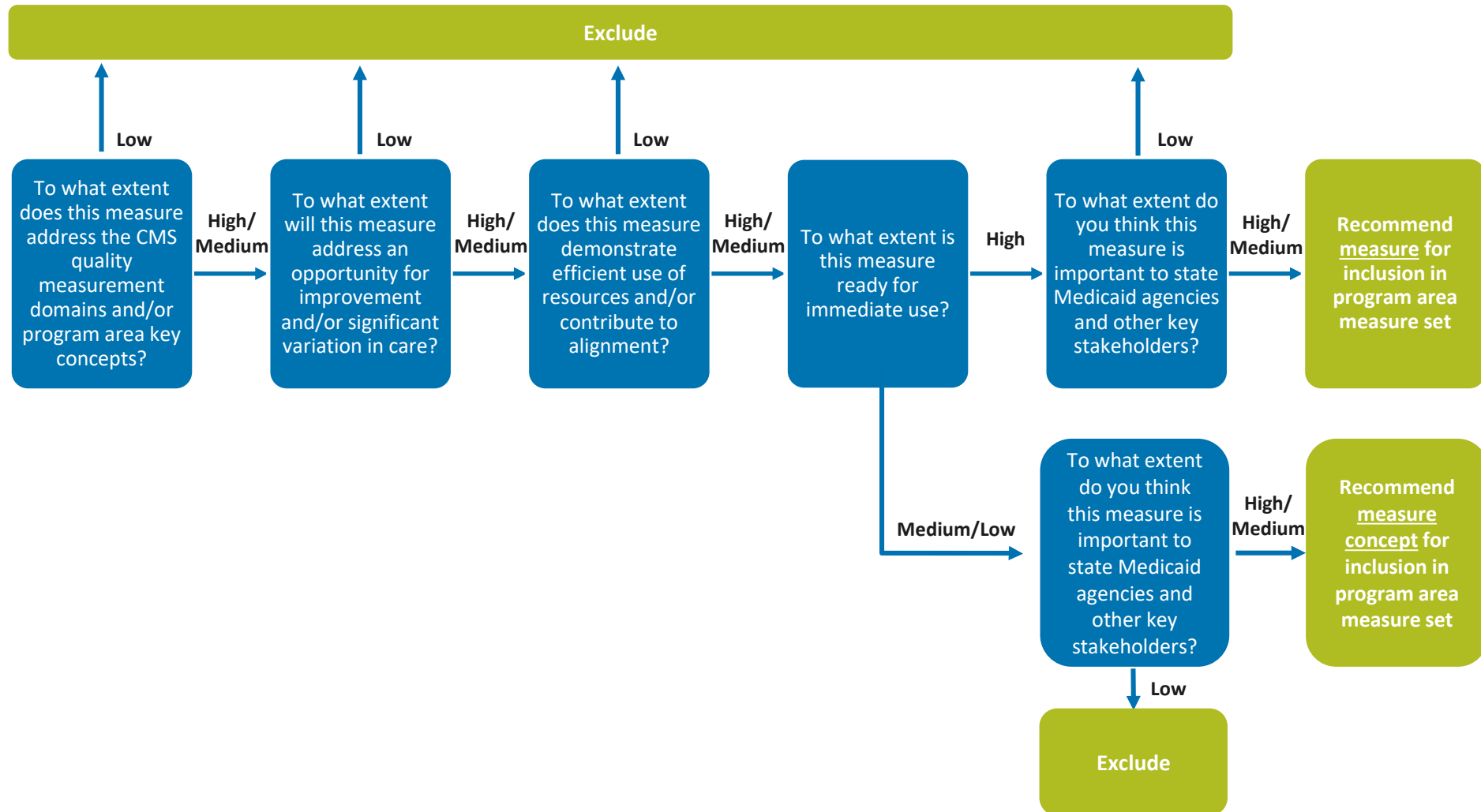 - ***Total: 43***

Decision Logic
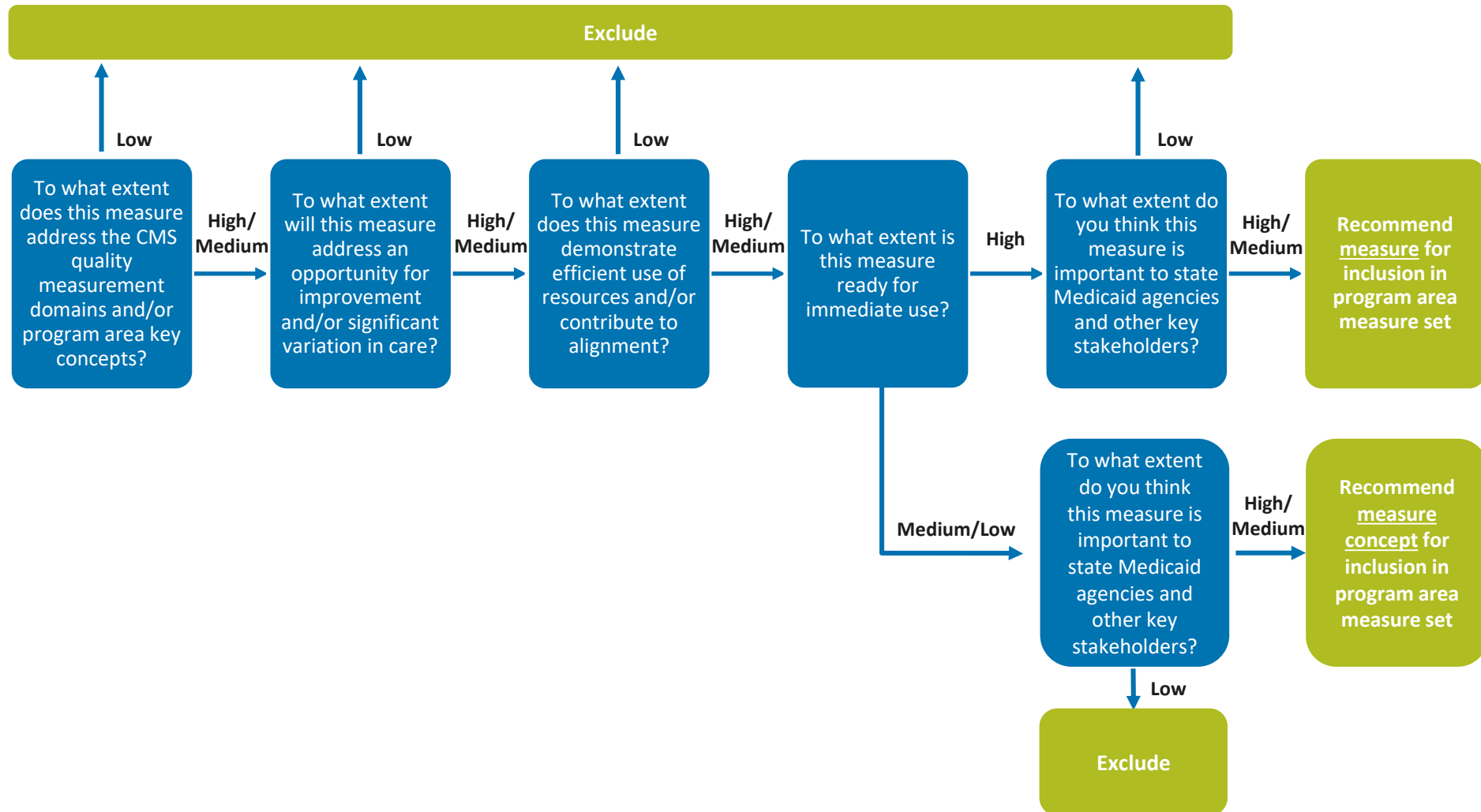
Review of TEP Voting

- TEP members will utilize a hand vote
  - *State panelists will not vote*

- A vote requires 60% agreement to move forward
  - *Each decision to support or not support will be accompanied by one or more statements of rationale as to how and why each decision was reached.*

- TEPs will review potential measures/measure concepts by CMS quality measurement domain

- The measure sets will be recommended to the Coordinating Committee for consideration

CMS Quality Measurement Domains

Decision Logic

Exclude

Low	Low	Low		Low	

To what extent does this measure address the CMS quality measurement domains and/or program area key concepts?

High/Medium →

To what extent will this measure address an opportunity for improvement and/or significant variation in care?

High/Medium →

To what extent does this measure demonstrate efficient use of resources and/or contribute to alignment?

High/Medium →

To what extent is this measure ready for immediate use?

High →

To what extent do you think this measure is important to state Medicaid agencies and other key stakeholders?

High/Medium →

Recommend <u>measure</u> for inclusion in program area measure set

Medium/Low →

To what extent do you think this measure is important to state Medicaid agencies and other key stakeholders?

High/Medium →

Recommend <u>measure concept</u> for inclusion in program area measure set

Low ↓

Exclude

Measures/Concepts for Consideration

- To what extent does this measure address critical quality objectives of the CMS quality measurement domains and/or identified program area key concepts?
    - *High: Measure addresses a CMS quality measurement domain(s) and program area key concepts*
    - *Medium: Measure addresses CMS quality measurement domains but does not address program area key concepts*
    - *Low: Measure does not clearly address CMS quality measurement domains or program area key concepts*

- TEP Vote

Measures/Concepts for Consideration

- To what extent will this measure address an opportunity for improvement and/or significant variation in care evidenced by quality challenges (e.g. readmissions, access to care) for each program area?
  - *High: Addresses multiple quality challenges and opportunities for improvement within a program area*
  - *Medium: Measure has the potential to address variation in care and quality challenges*
  - *Low: Measure does not address quality challenges or opportunities for improvement within a program area*

- TEP Vote

Measures/Concepts for Consideration

- To what extent does this measure demonstrate efficient use of measurement resources (data collection processes, performance improvement activities, etc.) and/or contribute to alignment of measures across programs, health plans, and/or states? The measure is not duplicative of existing measures within the measure set, captures a broad population (encompasses population of different ages, multiple conditions, etc.).

  - *High: Measure demonstrates efficient use of measurement resources, addresses broad populations, is not duplicative of existing measures and contributes to alignment across states/programs and health plans*

  - *Medium: Measure is not duplicative of other measures and does address some areas of alignment but does not encompass broad populations*

  - *Low: No evidence that the measure demonstrates/addresses any of the above criteria (e.g., does not demonstrate efficient use of measurement resources, address a broad population, nor contribute to alignment. There are other measures similar to this one already in use*

- TEP Vote

Measures/Concepts for Consideration

- To what extent is this measure ready for immediate use?
  - *High: Already in use in the Medicaid populations*
  - *Medium: Measure has a specified numerator and denominator and has reported testing*
  - *Low: Measure has a numerator and denominator but there is no evidence of testing*

- TEP Vote

Measures/Concepts for Consideration

- To what extent do you think this measure is important to state Medicaid agencies and other key stakeholders (consumers/families, Medicaid managed care organizations, and providers)?
  - *High: Important to state Medicaid agencies and consumers/families*
  - *Medium: Important to two stakeholders including state Medicaid agencies*
  - *Low: Important to one stakeholder*

- TEP Vote

Opportunity for Public Comment

CMS Quality Measurement Domain: Care Coordination

Care Coordination Domain: Measures/Concepts Analyzed Using Decision logic

- There are **13** measures/concepts in the BCN care coordination domain that that will be analyzed using the decision logic
    - *NQF 0576 Follow-Up After Hospitalization for Mental Illness (FUH)*
    - *Follow-Up After Emergency Department Visit for Alcohol and Other Drug Dependence (FUA)*
    - *NQF 0646 Reconciled Medication List Received by Discharged Patients (Discharges from an Inpatient Facility to Home/Self Care or Any Other Site of Care)*
    - *NQF 0004 Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET)*
    - *NQF 0228 3-Item Care Transition Measure (CTM-3)*
    - *NQF 0649 Transition Record with Specified Elements Received by Discharged Patients (Emergency Department Discharges to Ambulatory Care [Home/Self Care] or Home Health Care)*

Care Coordination Domain: Measures/Concepts Analyzed Using Decision logic (cont.)

- *NQF 0648 Timely Transmission of Transition Record (Discharges from an Inpatient Facility to Home/Self Care or Any Other Site of Care)*
- *Follow-up After All-cause Emergency Department Visit**
- *NQF 1937 Follow-Up After Hospitalization for Schizophrenia (7- and 30-day)*
- *NQF 2858 Discharge to Community*
- *NQF 0647 Transition Record with Specified Elements Received by Discharged Patients (Discharges from an Inpatient Facility to Home/Self Care or Any Other Site of Care)*
- *NQF 2631 Percent of Long-Term Care Hospital (LTCH) Patients With an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function*
- *NQF 2605 Follow-up after Discharge from the Emergency Department for Mental Health or Alcohol or Other Drug Dependence*

*Measure that fell below the cutoff score but was retained by at least one TEP member

Opportunity for Public Comment

CMS Quality Measurement Domain: Clinical Care

Clinical Care Domain: Measures/Concepts Analyzed Using Decision logic

- There are 6 measures/concepts in the BCN clinical care domain that that will be analyzed using the decision logic
  - *NQF 0419 Documentation of Current Medications in the Medical Record*
  - *NQF 0105 Antidepressant Medication Management (AMM)*
  - *NQF 0097 Medication Reconciliation Post-Discharge*
  - *NQF 2371 Annual Monitoring for Patients on Persistent Medications (MPM)*
  - *NQF 2456 Medication Reconciliation: Number of Unintentional Medication Discrepancies per Patient**
  - *Mental health utilization: number and percentage of members receiving the following mental health services during the measurement year: any service, inpatient, intensive outpatient or partial hospitalization, and outpatient or ED*

*Measure that fell below the cutoff score but was retained by at least one TEP member

Opportunity for Public Comment

CMS Quality Measurement Domain: Patient and Caregiver Experience

Patient and Caregiver Experience Domain: Measures/Concepts Analyzed Using Decision logic

- There is 1 measure/concept in the BCN patient and caregiver experience domain that that will be analyzed using the decision logic
  - *NQF 2483 Gains in Patient Activation (PAM) Scores at 12 Months**

*Measure that fell below the cutoff score but was retained by at least one TEP member

Opportunity for Public Comment

CMS Quality Measurement Domain: Population Health and Prevention

Population Health and Prevention Domain: Measures/Concepts Analyzed Using Decision logic

- There are 2 measures/concepts in the BCN population health and prevention domain that that will be analyzed using the decision logic
  - *NQF 1598 Total Resource Use Population-based PMPM Index*
  - *NQF 1604 Total Cost of Care Population-based PMPM Index*

Opportunity for Public Comment

CMS Quality Measurement Domain: Safety

Safety Domain: Measures/Concepts to be Analyzed Using Decision logic

- There are 21 measures/concepts in the BCN safety domain that that will be analyzed using the decision logic
  - *NQF 1789 Hospital-Wide All-Cause Unplanned Readmission Measure (HWR)*
  - *Psychiatric Inpatient Readmissions – Medicaid (PCR-P)**
  - *NQF 2380 Rehospitalization During the First 30 Days of Home Health*
  - *NQF 2505 Emergency Department Use without Hospital Readmission During the First 30 Days of Home Health*
  - *NQF 2510 Skilled Nursing Facility 30-Day All-Cause Readmission Measure (SNFRM)*
  - *NQF 2512 All-Cause Unplanned Readmission Measure for 30 Days Post Discharge from Long-Term Care Hospitals (LTCHs)*

*Measure that fell below the cutoff score but was retained by at least one TEP member

Safety Domain: Measures/Concepts to be Analyzed Using Decision logic (cont.)

- *NQF 0171 Acute Care Hospitalization During the First 60 Days of Home Health*

- *Medication reconciliation post-discharge: percentage of discharges from January 1 to December 1 of the measurement year for members 18 years of age and older for whom* medications were reconciled the date of discharge through 30 days after discharge (31 total days).*

- *NQF 0173 Emergency Department Use without Hospitalization During the First 60 Days of Home Health*

- *NQF 0709 Proportion of patients with a chronic condition that have a potentially avoidable complication during a calendar year.*

- *Prevention Quality Indicators #90 (PQI #90)**

- *NQF 1768 Plan All-Cause Readmissions (PCR)*

- *NQF 2879 Hybrid Hospital-Wide Readmission Measure with Claims and Electronic Health Record Data*

*Measure that fell below the cutoff score but was retained by at least one TEP member

Safety Domain: Measures/Concepts to be Analyzed Using Decision logic (cont.)

- *NQF 2502 All-Cause Unplanned Readmission Measure for 30 Days Post Discharge from Inpatient Rehabilitation Facilities (IRFs)*
- *NQF 2860 Thirty-day all-cause unplanned readmission following psychiatric hospitalization in an inpatient psychiatric facility (IPF)*
- *NQF 2888 Risk-Standardized Acute Admission Rates for Patients with Multiple Chronic Conditions*
- *All-cause emergency department utilization*
- *NQF 2375 PointRight ® Pro 30™*
- *NQF 2827 PointRight® Pro Long Stay(TM) Hospitalization Measure*
- *30-day All-Cause Hospital Readmission*
- *Potentially avoidable emergency department utilization*

Summary of the Day 1 (Breakout Session)

Adjourn for Day 1

Day 2 Agenda

- Continue Review Medicaid IAP Program Area Measures (Breakout Session)
- Reconvene in 9th Floor Conference Room for LUNCH
- Finalized Review Medicaid IAP Program Area Measures (Breakout Session)
- Reconvene in 9th Floor Conference Room to Review TEP
- Recommendations to Coordinating Committee
- Opportunity for Public Comment
- Next Steps
- Closing Remarks
- Adjourn

Summary of the Day 2 (Breakout Session)

Reconvene in 9th Floor Conference Room to Review TEP Recommendations to Coordinating Committee

9th Floor Conference Room Streaming and Teleconference Information

- *Streaming Audio Online*
    - *Direct your web browser to: http://nqf.commpartners.com/se/NQFLogin/*
    - *Under "Enter a Meeting" type in the meeting number: **103219** for Day 1 and **219880** for Day 2.*
    - *In the "Display Name" field, type in your first and last names and click "Enter Meeting."*

- *Teleconference*
    - *Dial (888) 802-7237 for Committee members or (877) 303-9138 for public participants.*