Initial Core Set of Health Care Quality Measures for Medicaid Eligible Adults

SNAPSHOT: HEDIS & CAHPS

Background

- Section 2701 of the ACA has made funds available for grant making purposes
- Rhode Island is pursuing this grant opportunity
- The goal of grant is three-fold:
  - Test & evaluate methods for collection & reporting of the voluntary Initial Core Set for Medicaid eligible adults
  - Develop staff capacity to report data, analyze, and use the data for improving access & quality
  - Conduct at minimum 2 Medicaid QI projects related to Initial Core Set

Quality Domains

- Prevention & Health Promotion-12 measures
- Management of Acute conditions – 3 measures
- Management of Chronic Conditions – 6 measures
- Family Experiences of Care – 2 measures
- Care Coordination – 1 measure
- Availability – 2 measures

Rhode Island Medicaid's Capability to Report on These Measures Today

- 12 HEDIS®
- 1 CAHPS® measure
- 4 Prevention Quality Indicators (PQIs)

Initial Core Set of Quality Measures for Medicaid Eligible Adults Crosswalk of NCQA HEDIS Measures			
Prevention & Health Promotion: 12 Measures			
	Commercial	**Medicaid**	**Medicare**
Flu Shot for Adults Ages 50-64 (Collected as part of CAHPS Survey)	√		
Adult BMI Assessment	√	√	√
Breast Cancer Screening	√	√	√
Cervical Cancer Screening	√	√	
Medical Assistance with Smoking & Tobacco Use Cessation (Collected as part of CAHPS Survey)	√	√	√
Screening for Clinical Depression & Follow Up			
Plan All Cause Readmission	√		√
Prevention Quality Indicator 01: Diabetes, Short-term Complications Admission Rate			
Prevention Quality Indicator 05: Chronic Obstructive Pulmonary Admission Rate Admission Rate			
Prevention Quality Indicator 08: Congestive Heart Failure Admission Rate			
Prevention Quality Indicator 15: Adult Asthma Admission Rate			
Chlamydia Screening in Women Age 21-24	√	√	
Management of Acute Conditions			
Follow-Up After Hospitalization for Mental Illness	√	√	√
PC-01: Elective Delivery			
PC-03: Antenatal Steroids			
Management of Chronic Conditions			
Annual HIV/AIDS medical visit			
Controlling High Blood Pressure	√	√	√
Comprehensive Diabetes Care: LDL-C Screening	√	√	√
Comprehensive Diabetes Care: Hemoglobin a1c Testing	√	√	√
Antidepressant Medication Management	√	√	√
Adherence to Antipsychotics for individuals wit Schizophrenia			
Annual Monitoring for Patients on Persistent Medications	√	√	√
Family Experiences of Care			
CAHPS Health Plan Survey v4.0 Adult	√	√	
Care Coordination			
Care Transition-Transition Record Transmitted to Health Care Professional			
Availability			
Initiation and Engagement of Alcohol and Other Drug Dependence Treatment	√	√	√
Prenatal & Postpartum Care: Postpartum Care Rate	√	√	

The Problem?

- Inadequate person-centered care coordination
- Lack of focus on primary and preventive care
- Long Term Services and Supports/Behavioral Health coordinated separately
- Fragmentation of benefits coverage leads to confusion and inefficiencies
- Cost shifting (Hospital and Nursing Facility)

Potential Improvement Targets

- Based on feedback to date:
  - Live longer at home
  - Member Satisfaction with the care received
  - Utilization Patterns
  - Changes in number of people who report feeling depressed or anxious
  - Ability to perform ADL’s
  - Member participation in wellness initiatives
  - Member engagement (with care coordination, peer navigator etc..)

Quality Domains & Measures

- Prioritized Top 5 Domains
- Identified a list of potential measures within each domain
- Identified areas of opportunity
- Next Steps: Draft Final Recommendations for Consensus Review

Save the Date

- Final Stakeholder Quality, Monitoring, and Continuous Improvement Workgroup Meeting

  Scheduled for August 20, 2012, 3:00-5:00 PM, Warwick Library