



CONNECTICUT
Office of Health Strategy

Healthcare Innovation Steering Committee

October 10, 2019

Meeting Agenda

- | | |
|--------------------------------|--------|
| 1. Introductions/Call to Order | 5 min |
| 2. Public Comment | 5 min |
| 3. Approval of the Minutes | 5 min |
| 4. VBID/APM/QMA Progress | 25 min |
| 5. Healthscore CT | 30 min |
| 6. Post-SIM Planning | 20 min |
| 7. Adjourn | |

Introductions/Call to Order

Public Comment

2 minutes per comment

Approval of the Minutes

VBID/APM/QMA

VBID/APM/QMA

- Value Based Insurance Design
- Alternative Payment Model
- Quality Measure Alignment

Healthscore CT

Players

- UConn Health, OHS, and the SIM Quality Council worked together to publish first online health care quality scorecard assessing CT's Advanced Networks and FQHCs
- SIM Quality Council
 - Provides oversight and guidance to scorecard objectives and approach
 - Developed core and reporting measure sets for use in the assessment of primary care, specialty and hospital provider performance and the overall evaluation of the Connecticut healthcare system
 - Is responsible for establishing a plan for consumer education and access to scorecard data.

Scorecard in the Press



OHS: New Website Allows Consumers to Compare Healthcare Quality Ratings and Cost

Shopping for Healthcare Made Easier with Healthscore CT

(HARTFORD, CT) – The Connecticut Office of Health Strategy (OHS), joined by Lieutenant Governor Susan Bysiewicz, announced today that it has launched [Healthscore CT](#), an online tool to help consumers, businesses, and healthcare providers compare the cost and quality of medical care at Connecticut hospitals and provider networks. The website has interactive tables and graphs that allow consumers to search, sort, and filter by entity, quality measure, health topic, and rating.

OHS Executive Director Vicki Veltri said, “Healthscore CT brings transparency to two priorities in healthcare—quality and cost. As healthcare changes, quality is becoming even more important. Healthcare isn’t just about tests, it’s about what makes people better and more productive in their lives; what improves outcomes; what reduces health disparities; and what makes our communities healthier. We are all healthcare consumers at one point or another in our lives. Healthscore CT gives people the resources to make better healthcare decisions and gives providers an opportunity to improve the cost and quality of the care they deliver.”

Scorecard in the Press



HBJ HARTFORD BUSINESS f in | Login

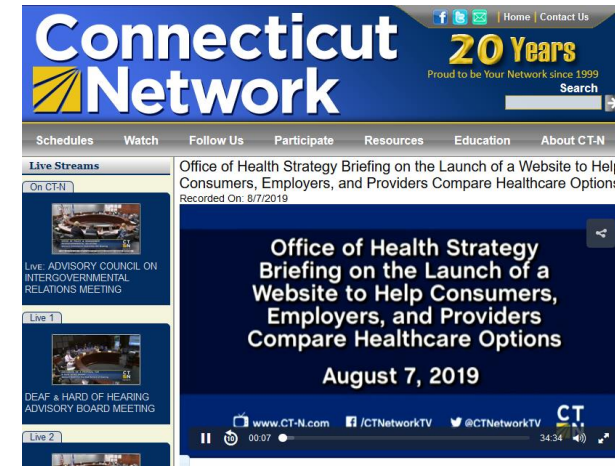
NEWS EDITIONS LISTS VIEWPOINTS HBJ EVENTS BUSINESS CALENDAR CUSTOM CONTENT

August 7, 2019

OHS launches healthcare quality website

By Matt Pilon

The state Office of Health Strategy on Wednesday launched a new web tool that helps consumers and others assess the quality of hospitals and provider networks in Connecticut.



Connecticut Network 20 Years Proud to be Your Network since 1999

Office of Health Strategy Briefing on the Launch of a Website to Help Consumers, Employers, and Providers Compare Healthcare Options

Recorded On: 8/7/2019

Office of Health Strategy Briefing on the Launch of a Website to Help Consumers, Employers, and Providers Compare Healthcare Options

August 7, 2019

USA TODAY

Connecticut

Hartford: Consumers, businesses and health care providers in the state will be able to compare the cost and quality of medical care at hospitals and provider networks online. The Connecticut Office of Health Strategy has launched HealthscoreCT.com, which includes a quality scorecard and a cost estimator that is scheduled to be released at the end of September. OHS Executive Director Vicki Veltri says the website, which includes interactive tables and graphs, "gives people the resources to make better health care decisions" and gives providers an opportunity to improve on the cost and quality of the care they give patients. Once fully implemented, the free service will help consumers determine if the high cost charged by a particular network means good quality.

KHN Morning Briefing

Summaries of health policy coverage from major news organizations

The Associated Press: Site Allows Consumers To Compare Health Care Cost, Quality

Consumers, businesses and health care providers will be able to compare the cost and quality of medical care at Connecticut hospitals and provider networks online. The Connecticut Office of Health Strategy has launched HealthscoreCT.com, which includes a quality scorecard and a cost estimator that is scheduled to be released at the end of September. (8/11)

Clinical Care Measures

Clinical Care Measures	NQF Number	Payer Category		
		Commercial	Medicaid	Medicare
Breast cancer screening	2372	•	•	•
DM: HbA1c Testing	0057	•	•	•
Cervical cancer screening	0032	•	•	
Anti-Depressant Medication Management	0105	•	•	•
Initiation and Engagement of Alcohol and Other Drug Dependence Treatment	0004	•	•	•
Medication management for people w/ asthma	1799	•	•	
Avoidance of antibiotic treatment in adults with acute bronchitis	0058	•	•	
Follow up after hospitalization for mental illness, 7 & 30 days	0576	•	•	•
Immunizations for Adolescents	1407	•	•	
Follow-up care for children prescribed ADHD medication	0108	•	•	
Non-recommended Cervical Cancer Screening in Adolescent Female	0443	•	•	
DM: medical attention for nephropathy	0055	•	•	•
DM: Eye exam	0062	•	•	•
Plan all-cause readmission	1768	•	•	•
Chlamydia screening in women	0033	•	•	
Adolescent well-care visits	NCQA AWC	•	•	
Annual monitoring for persistent medications (roll-up)	2371	•	•	•
Use of imaging studies for low back pain	0052	•	•	
Adult major depressive disorder: Coord. of care of patients with specific co-morbid conditions	PQRS 325			•
Long acting reversible contraceptive	2904	•	•	
Behavioral Health Screening (Pediatric)	Custom Medicaid			•
Metabolic Monitoring for Children and Adolescents on Antipsychotics	Custom Medicaid			•
Well-child visits in the third, fourth, fifth and sixth years of life	1516			•

Measures and Data Sources

2. Care Experience - Consumer Assessment of Healthcare Providers and Systems surveys (CAHPS)
 - Surveys of patients receiving healthcare from primary care provider in past 6 months
 - 4 domains:
 - Courteous and helpful staff
 - Getting timely care and service
 - How well providers communicate
 - Overall provider or group rating
 - Administered annually as part of SIM evaluation

Data Limitations

- CT APCD
 - Some measures not feasible or modified because of data restrictions/limitations
 - Only claims based measures and components
 - Dates of service masked
 - Date of birth masked (age in years only)
 - Long run out period for date masking
 - First scorecard will use FY 2017 as measurement year (10/1/16-9/30/17)
- CAHPS
 - Sample sizes by organization and low response rates eliminates ratings for 6 organizations

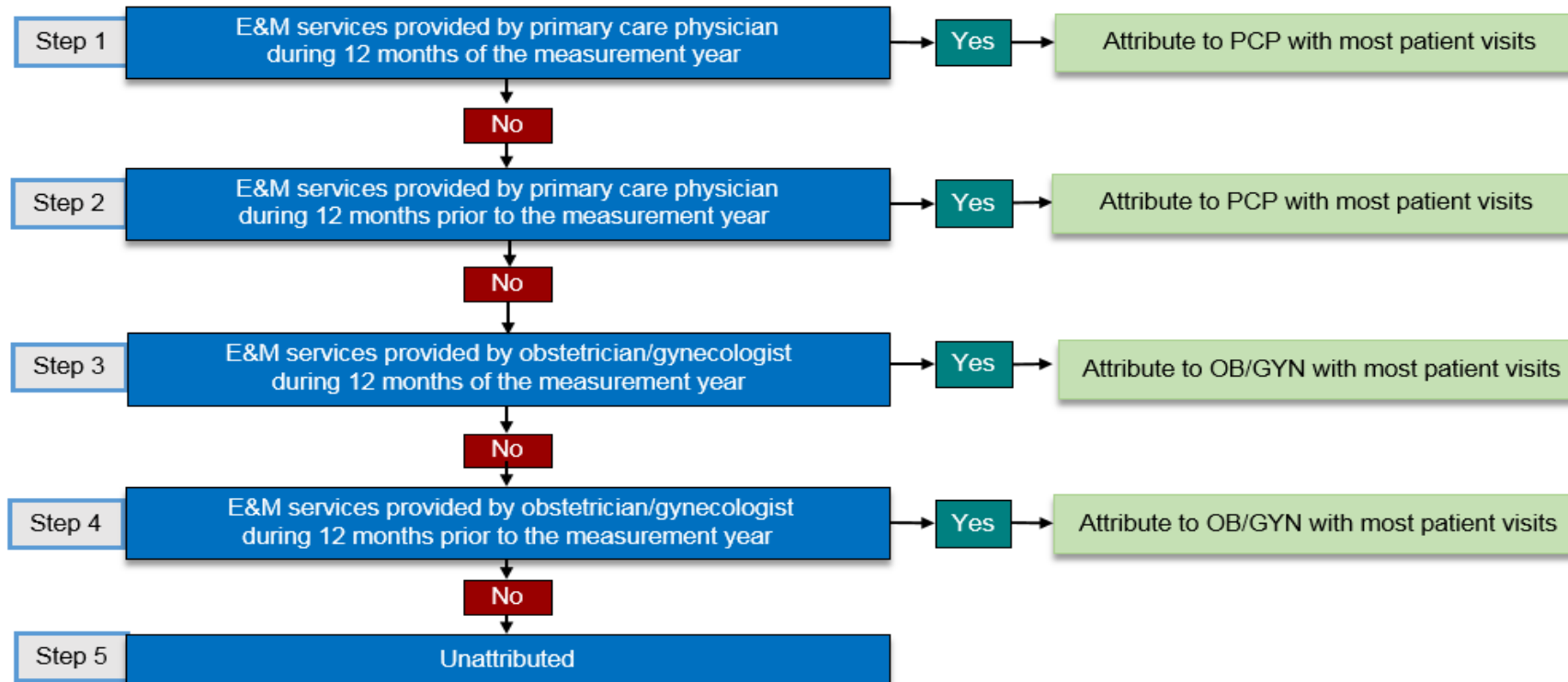
Attribution (1 of 3)

- Methodology based on 3M/Treo approach
 - **Step one:** Attribute patient claims to eligible providers based on preponderance of Evaluation & Management (E&M) visits in a set time period
 - Eligible providers: MDs, APRNs, and PAs with specialties of family medicine, internal medicine, general practice, pediatrics, geriatrics or obstetrics/gynecology
 - **Step two:** Link providers to organizations using provider lists

Attribution (2 of 3)

- **Step One:** Attribute patients to provider

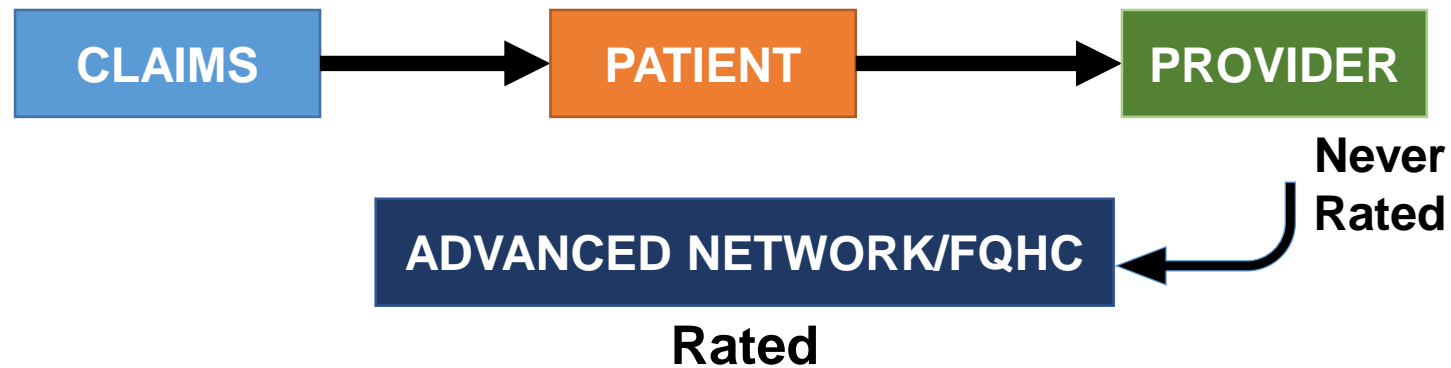
Patient Attribution Flow Chart



Note: Tie breakers (in order): the provider with the most non-E&M services is selected, followed by the provider with the most dates of service, then the most recent date of service.

Attribution (3 of 3)

- **Step Two:** Attribute to a healthcare organization
 - Providers are tied to a healthcare organization using lists compiled by UConn Health
 - Organizations were given the opportunity to revise lists (15 of 18 confirmed/revised)
 - National provider identifiers (NPIs) key to matching patient claims to providers



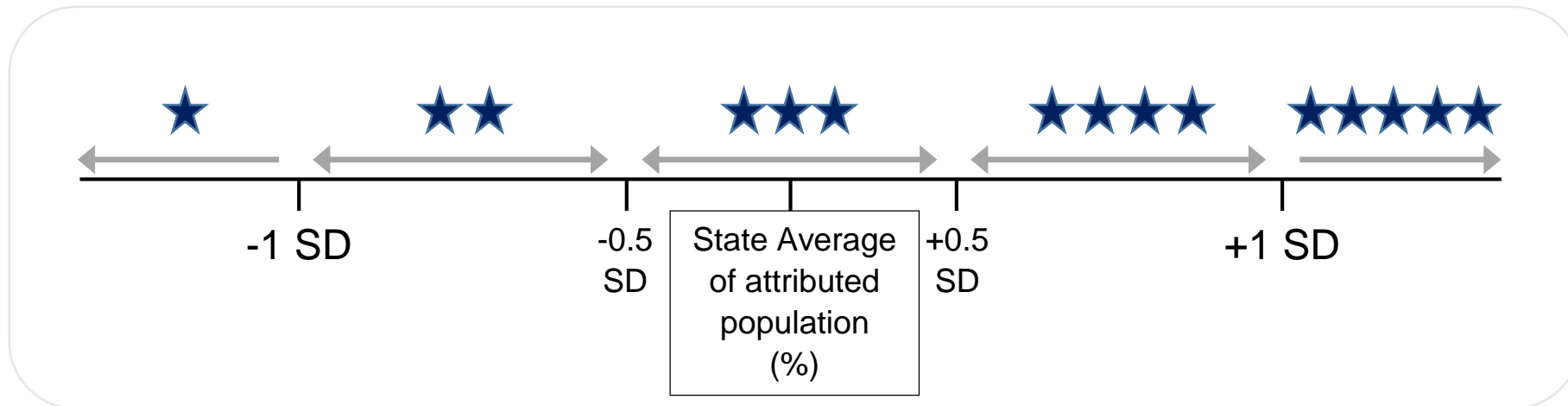
Performance Ratings and Benchmarks

- Two aspects to performance assessment:
 1. Rates calculated to permit direct comparisons across organizations
 - Example: Optimal diabetes care - % of diabetic patients receiving HbA1c test in past year
 - Organization 1: 86%
 - Organization 2: 73%
 2. Rates translated into “star ratings” to show performance relative to benchmarks
 - Multiple benchmark options were considered
 - **QC Decision:** Compare each organization’s rate on a measure to the overall CT result for attributed patients
 - Advanced view: Compare organizations to AN average

How to Assign Star Ratings?

- **Decision:** Rate based on statistical differences using the standard deviation for each measure
 - ANs are placed in a rating category based on how statistically different they are from the state average for the attributed population

QC emphasized virtue of letting the data make rating decisions



Healthscore CT - Demonstration



[About Us](#) ▾ [Quality Scorecard](#) [Cost Estimator](#) [Researchers](#)

Welcome to Healthscore CT, your resource for healthcare quality and cost information.

Use Healthscore CT to compare hospitals, healthcare facilities, and other healthcare providers in Connecticut. You can sort information by quality, cost, and more — so you can make smart, informed choices for yourself and your family.



<https://healthscorect.com/>

Scorecard Milestones

Accountability Metric	Total Target	AY3 Measure	AY4 To Date	AY4 Anticipated
Number of measures publicly reported	40	0	15	25
Number of views to public scorecard	3,000	0	10k*	3,000
Number of organizations/entities that have self-attested to using data from scorecard	60	0	?	60
Number of public scorecard visitors	NA	0	2,300**	NA

*3 pages per session, 2 min on each page

**82% are new visitors

Scorecard Sustainability Efforts

OHS has dedicated state-funded staff to support the Quality Council in recommending quality measures and the production of the scorecard. Additionally, OHS leadership envisions expanding the role of the Quality Council to establish cost and quality benchmarks to be included in future iterations of the scorecard.

There is broad support from payers, healthcare organizations, and consumers for the scorecard and its associated activities. We do not anticipate continued access to CAHPS funding without payer support so this element of the scorecard may be retired

OHS is seeking funding to continue production of the scorecard, potentially through the legislature, we also are seeking to reduce costs by folding scorecard production into the CDAS

Post-SIM Strategy

Post-SIM Strategy

- Practice Transformation
- Payment Reform
- Quality Measure Alignment
- Consumer Engagement
- Other OHS Initiatives

<https://healthscorect.com/>

Adjourn

Appendix

Acronyms

ACO	Accountable Care Organization	HIE	Health Information Exchange
ACH	Accountable Communities for Health	HISC	Healthcare Innovation Steering Committee
AHCT	Access Health CT	HIT	Health Information Technology
AMH	Advanced Medical Home	ICM	Intensive Care Management
AN	Advanced Network	MAPOC	Medical Assistance Program Oversight
APCD	All-Payers Claims Database	PCMH+	Person Centered Medical Home +
ASO	Administrative Services Organization	MSSP	Medicare Shared Savings Program
AY	Award Year (AY1, AY2...)	NCQA	National Committee for Quality Assurance
BRFSS	Behavioral Risk Factor Surveillance System	NQF	National Quality Forum
CAB	Consumer Advisory Board	OSC	Office of the State Comptroller
CCIP	Clinical & Community Integration Program	OHS	Office of Health Strategy
CAB	Consumer Advisory Board	PCM	Primary Care Modernization
CDAS	Core Data Analytics Solution	PCMH	Patient Centered Medical Home
CDC	Center for Disease Control and prevention	PCP	Primary care provider
CHW	Community Health Worker	PSI	Prevention Service Initiative
CMMI	Center for Medicare & Medicaid Innovations	PTTF	Practice Transformation Task Force
CMS	Centers for Medicare and Medicaid Services	QC	Quality Council
DMHAS	Department of Mental Health and Addiction Services (CT)	RFP	Request for Proposals
DPH	Department of Public Health (CT)	SIM	State Innovation Model
DSS	Department of Social Services	SSP	Shared Savings Program
EHR	Electronic Health Record	TA	Technical Assistance
ECQM	Electronic Clinical Quality Measure	VBID	Value-based Insurance Design
FQHC	Federally Qualified Health Center	VBP	Value-based payment
HEC	Health Enhancement Community		