



CONNECTICUT  
*Office of Health Strategy*

# SIM Quality Council

*February 19, 2020*

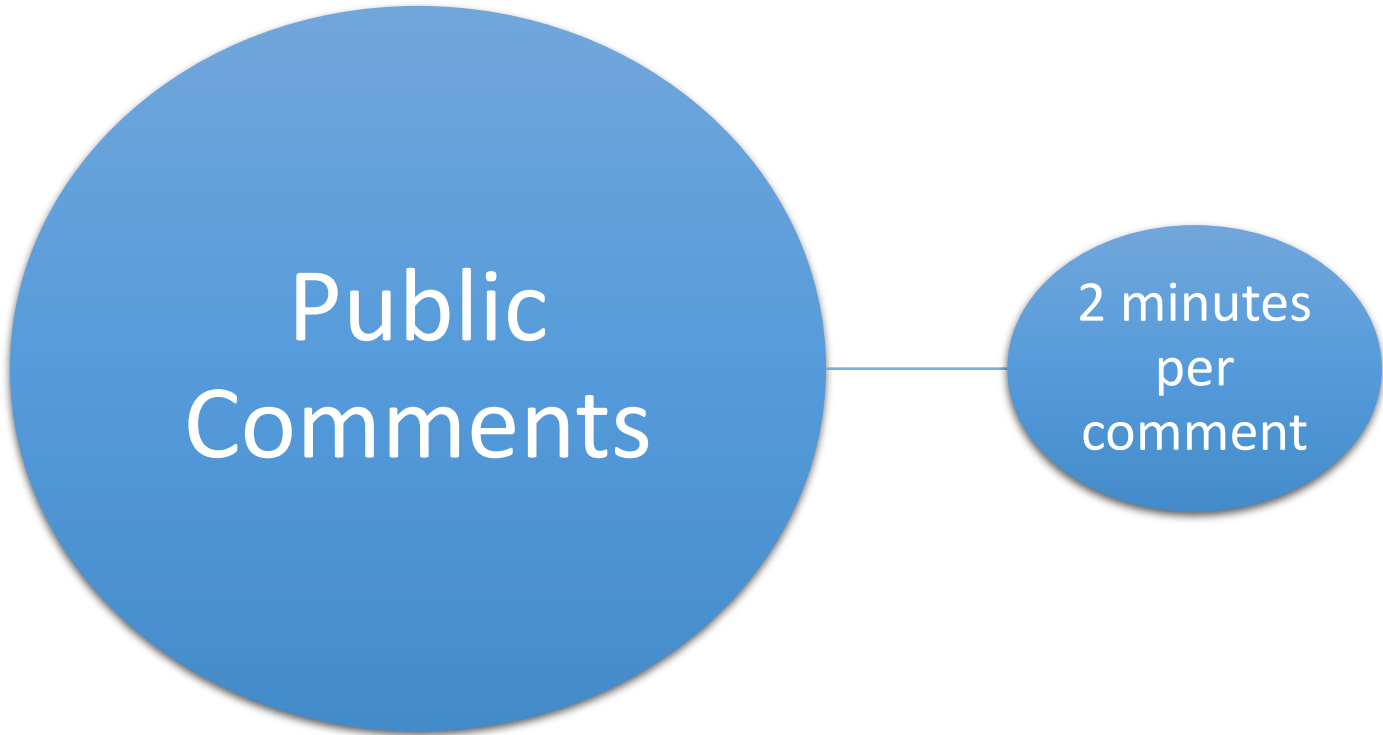
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"Good news.  
Your cholesterol has stayed the same,  
but the research findings have changed."

# Meeting Agenda

Item	Allotted Time
Introductions/Call to Order	5 min
Public Comment	5 min
Meeting Summary Approval	5 min
Public Scorecard	30 min
Executive Order	20 min
Next steps and Adjournment	5 min



# Meeting Summary

# Purpose of Today's Meeting

# Public Scorecard

CONNECTICUT  
HEALTHCARE  
INNOVATION PLAN



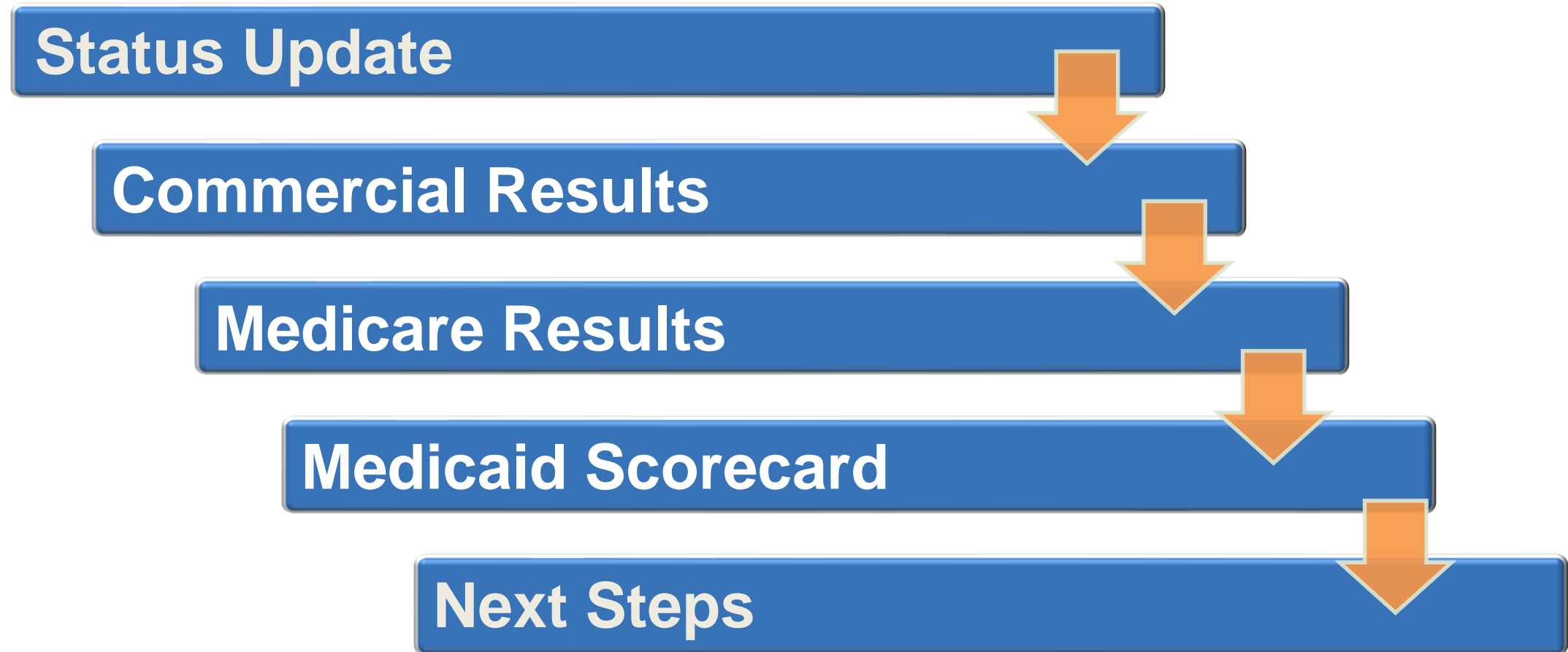
# Quality Council

February 19, 2020



# Agenda: Online Healthcare Scorecard

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Status Update

# Status Update (1 of 2)

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- Commercial Scorecard
  - Results for second commercial scorecard are published
  - Readmissions measure ready for review
- Medicare Scorecard
  - 2016 results ready for review
    - Four measures because of pharmacy data delay

# Status Update (2 of 2)

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- Medicaid scorecard
  - Data were received in mid-December (1/1/2016-12/31/2018)
    - Includes real dates of service and month/year of birth
    - Medical claim drop off in last quarter of 2018
  - UConn Health team has been reviewing and processing data and coding measures
  - Measures will be calculated for calendar and not fiscal years 2017 and 2018

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# Commercial Results

# Commercial Results

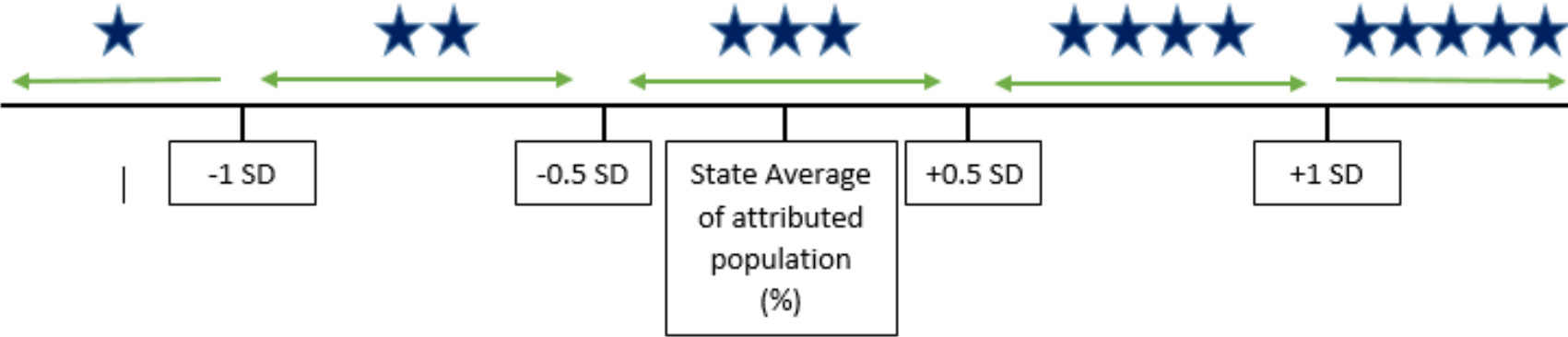
Organization (Advanced Networks)	All Cause Readmissions
A	4
B	5
C	4
D	3
E	3
F	3
G	4
H	2
I	4
J	5
K	5
L	1
M	1
N	2
O	4
P	5
Q	3
R	3

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# Medicare Results

# Medicare Ratings: Scoring Methods (1 of 6)

- Medicare and Medicaid scorecards rate both advanced networks and FQHCs
  - Decision Point: Rate ANs and FQHCs together or separately?
    - Rating reminder:
      - Standard deviation calculated based on the distribution of the rates
      - Entities given star rating based on how statistically different they are from state avg

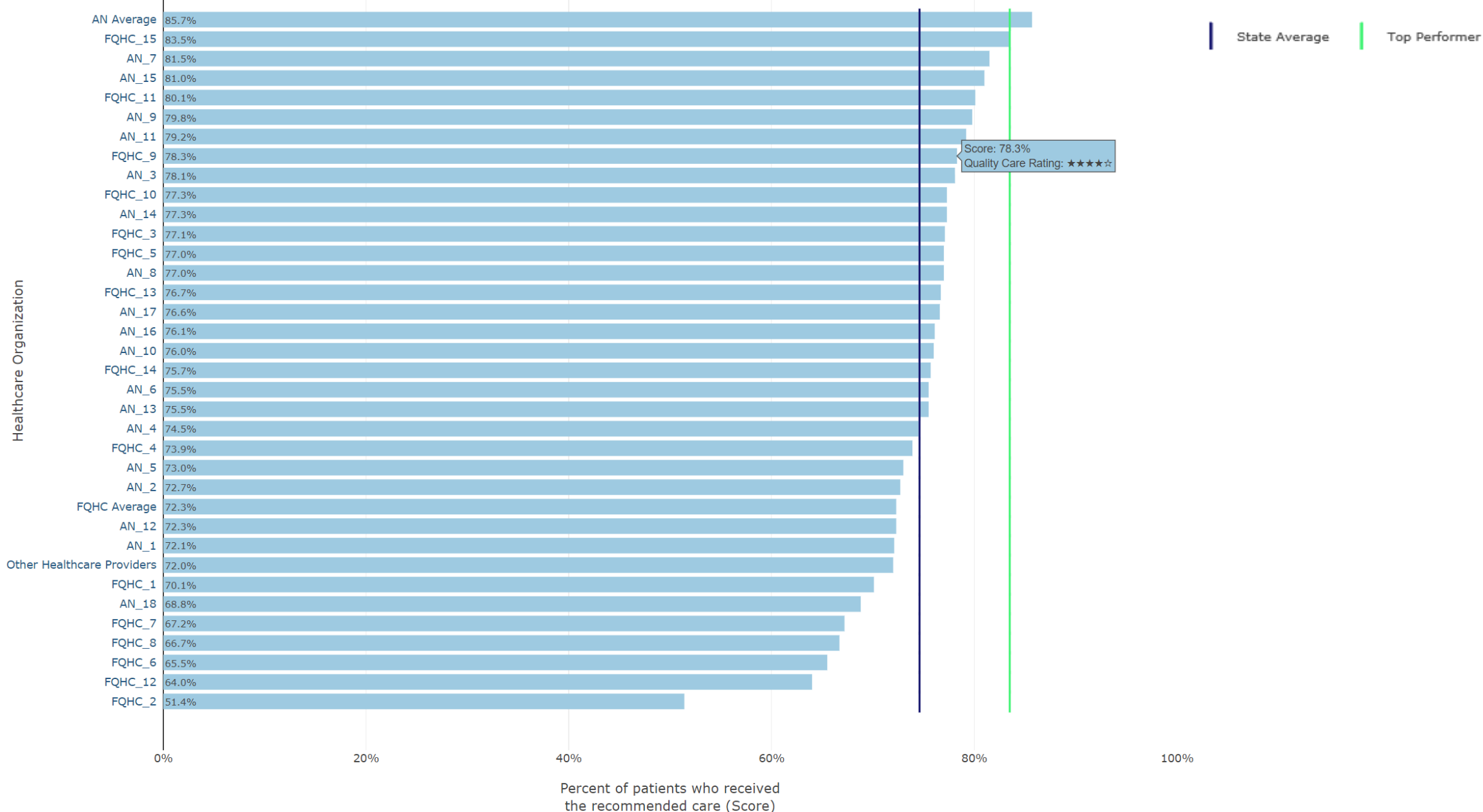




## Medicare Ratings: Scoring Methods (2 of 6)

- Both methods use state average as reference
- Difference: Standard deviation which may impact star ratings
  - Rating together: standard deviation is calculated using distribution of all rates (ANs and FQHCs)
  - Rating separately: standard deviation is calculated using distribution of ANs for AN ratings and of FQHCs for FQHC ratings.

# Medicare Ratings: Scoring Methods (3 of 6)



# Medicare Ratings: Advanced Networks (5 of 6)

Organization	Breast Cancer Screening		
	SD All	SD AN only	Difference
AN_1	3	2	↓
AN_2	3	2	↓
AN_3	4	5	↑
AN_4	3	3	
AN_5	3	3	
AN_6	3	3	
AN_7	5	5	
AN_8	3	4	↑
AN_9	4	5	↑
AN_10	3	3	
AN_11	4	5	↑
AN_12	3	2	↓
AN_13	3	3	
AN_14	3	4	↑
AN_15	5	5	
AN_16	3	3	
AN_17	3	4	↑
AN_18	2	1	↓

# Medicare Ratings: FQHCs (6 of 6)

Organization	Breast Cancer Screening		
	SD All	SD FQHC only	Difference
FQHC_1	2	2	
FQHC_2	1	1	
FQHC_3	3	3	
FQHC_4	3	3	
FQHC_5	3	3	
FQHC_6	1	1	
FQHC_7	1	2	↑
FQHC_8	1	1	
FQHC_9	4	3	↓
FQHC_10	3	3	
FQHC_11	4	4	
FQHC_12	1	1	
FQHC_13	3	3	
FQHC_14	3	3	
FQHC_15	5	5	

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# Medicaid Scorecard

# Medicaid Measures (1 of 3)

- Most measures produced for commercial scorecard are expected to be included, plus some additional measures
  - Able to add well child visit measures
    - Well-child visits in the third, fourth, fifth and sixth year of life
    - Well-child visits in the first 15 months of life
      - 2017 will require limiting to children turning 15 months in April 2017 or later
  - Discussion: Will this introduce bias in entity ratings?
  - New Medicaid only measures
    - Behavioral health screening (pediatric)
    - Metabolic monitoring for children and adolescents on antipsychotics

## Medicaid Measures (2 of 3)

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- Unable to add Adult major depressive disorder: coordination of care of patients with specific co-morbid conditions
  - Necessary procedure codes not found
  
- Unable to produce
  - Look back periods exceed data timeframe
    - Cervical cancer screening
    - Immunizations for adolescents
    - Follow-up for children on medication for ADHD

# Medicaid Measures (3 of 3)

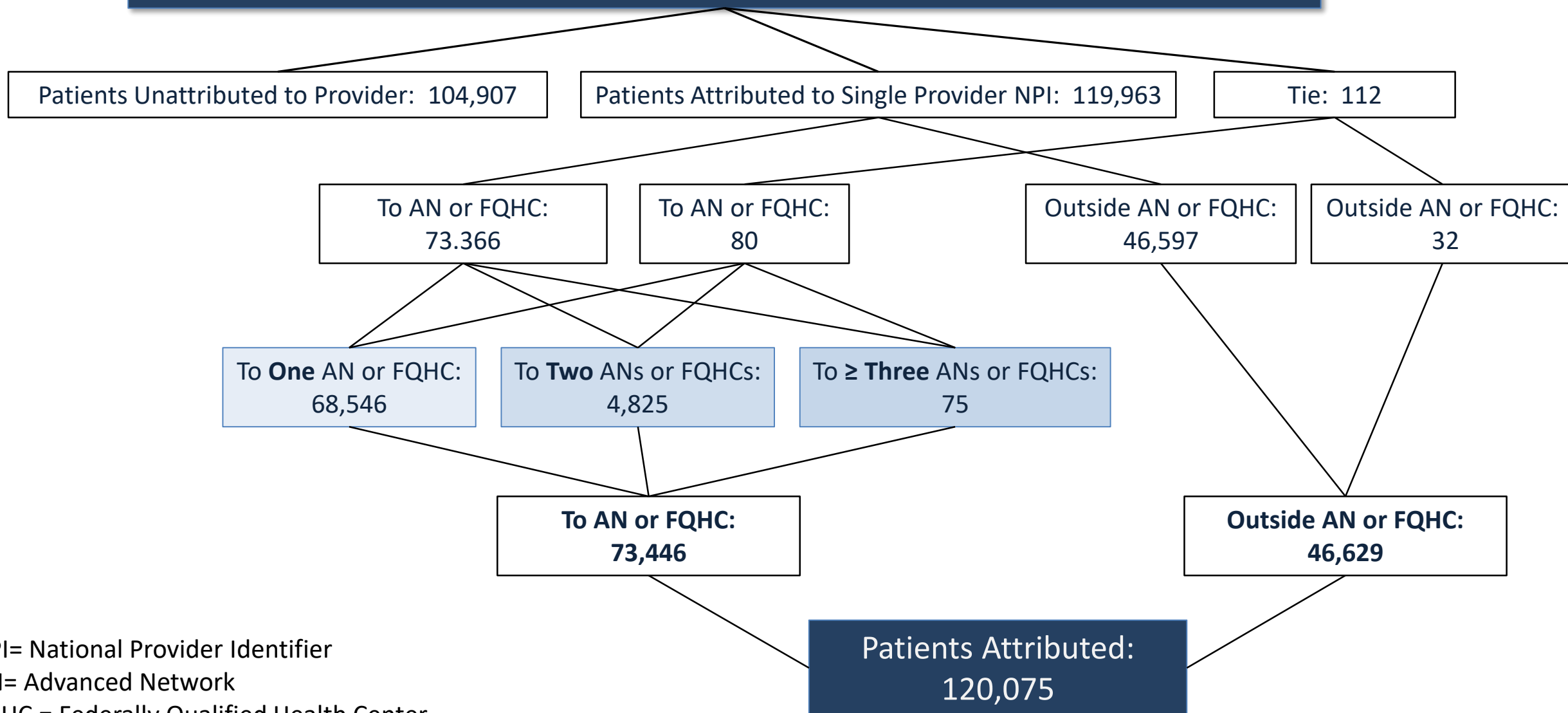
Measure	Status
Access to long acting reversible contraception	Not started
Annual testing for patients on ACE inhibitors, ARBs, digoxin and diuretics	Not started
Antidepressant medication at 12 weeks and 6 months	Validation
Appropriate use of x-ray, MRI and CT scan for low back pain	Coding
Appropriate use of antibiotics: Adults with bronchitis	Not started
Asthma medication maintenance $\geq$ 50% of treatment period and $\geq$ 75% of treatment period	Not started
Behavioral Health Screening for children	Specifications requested
Breast cancer screening*	Not started
Chlamydia screening for women	Coding
Diabetes: Blood sugar testing*	Not started
Diabetes: Eye exam*	Not started
Diabetes: Screening/treatment for kidney damage*	Not started
Follow up after hospitalization for mental illness at 7 and 30 days	Validation
Hospital readmissions	Not started
Initiation and engagement of treatment for alcohol and other drug dependence	Not started
Metabolic Monitoring for Children and Adolescents on Antipsychotics	Specifications requested
Non-recommended cervical cancer screening of adolescents	Not started
Well-care visits: Adolescents	Not started
Well-care visits: Children aged 3-6	Coding
Well-care visits: First 15 months of life	Not started
Patient experience: Provider communication	Coding
Patient experience: Timely care	Coding
Patient experience: Office staff	Coding
Patient experience: Overall provider rating	Coding

\*Data allows for calculation of 2018 results only



# Medicaid Attribution (1 of 5)

Patients with Outpatient Evaluation and Management Visit: 224,982



NPI= National Provider Identifier  
AN= Advanced Network  
FQHC = Federally Qualified Health Center

# Medicaid Attribution: Advanced Network Providers (2 of 5)

Organization	MD PCP	Nurse Prac.	Cert. Nurse Specialist	Phys. Asst.	Ob/Gyn	Total
Alliance/Waterbury	102	0	0	0	18	120
Community Medical Grp	247	44	2	27	8	328
Day Kimball Healthcare	38	8	0	2	4	52
Eastern CT Health Net.	74	0	0	25	18	117
Griffin Health	20	5	0	2	2	29
Integrated Care Partners/HHC	257	102	3	90	38	490
Middlesex Hospital	49	12	0	5	0	66
Northeast Med Grp	168	44	0	14	0	226
ProHealth Physicians	216	100	0	64	0	380
Saint Francis	141	36	0	4	38	219
Saint Mary	58	7	0	10	18	93
Soundview Med. Assoc.	12	2	0	1	0	15
Stamford Health	52	0	0	0	10	62
Starling Physicians	47	23	0	4	10	84
St Vincent	30	7	0	3	0	40
Western CT Health Net.	134	0	0	0	0	134
Westmed Med. Group	49	4	0	2	9	64
Yale Medicine	110	25	0	13	27	175

# Medicaid Attribution: Advanced Network Patients (3 of 5)

Advanced Networks	Total Patients
Alliance/Waterbury	4,471
Community Medical Grp	8,701
Day Kimball Healthcare	1,790
Eastern CT Health Net.	3,112
Griffin Health	1,145
Integrated Care Partners/HHC	11,697
Middlesex Hospital	1,804
Northeast Med Grp	6,528
ProHealth Physicians	9,456
Saint Francis	5,454
Saint Mary	2,935
Soundview Med. Assoc.	869
Stamford Health	1,734
Starling Physicians	2,351
St Vincent	1,926
Western CT Health Net.	3,692
Westmed Med. Group	528
Yale Medicine	2,232

# Medicaid Attribution: Health Center Providers(4 of 5)

Organization	MD PCP	Nurse Prac.	Cert. Nurse Specialist	Phys. Asst.	Ob/Gyn	Total
Charter Oak Health Center	11	11	0	5	5	32
Community Health Center, Inc.	34	34	0	7	5	80
Community Health Services	6	13	0	2	2	23
Community Health and Wellness	5	2	0	0	0	7
Cornell Scott Hill Health Center	18	26	0	3	0	47
Fair Haven Community Health Center	19	4	0	1	2	27
First Choice Health Centers	6	5	0	5	0	16
Generations Family Health Center	9	16	0	0	0	25
Greater Danbury Com. Health Center	18	5	0	1	4	28
Intercommunity Health Care	4	9	0	0	0	13
Norwalk Community Health Center	10	5	0	0	2	17
Optimus Healthcare	33	22	0	4	5	64
Southwest Community Health Center	11	11	0	2	4	28
Staywell Health Center	14	9	0	1	1	25
United Community and Family Services	8	8	0	0	0	16
Wheeler Family Health and Wellness Center	2	4	0	0	0	6 <sup>28</sup>

# Medicaid Attribution: Health Center Patients (5 of 5)

Federally Qualified Health Centers	Total Patients
Charter Oak Health Center	580
Community Health Center, Inc.	1,286
Community Health Services	323
Community Health and Wellness	97
Cornell Scott Hill Health Center	839
Fair Haven Community Health Center	343
First Choice Health Centers	480
Generations Family Health Center	365
Greater Danbury Com. Health Center	341
Intercommunity Health Care	446
Norwalk Community Health Center	238
Optimus Healthcare	1,360
Southwest Community Health Center	542
Staywell Health Center	542
United Community and Family Services	156
Wheeler Family Health and Wellness Center	59

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Next Steps

# Next Steps

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- Publish commercial readmissions and first set of Medicare measures
- Continue work on Medicaid Measures
  - Discuss Medicaid data questions with DSS

# Executive Order



# Executive Order

- January 22<sup>nd</sup> Governor Lamont Issued [Executive Order 5](#)
- Directs OHS to:
  - Develop Annual Cost Growth Benchmarks
  - Set targets for increased primary care spending as a percentage of total healthcare spending to reach 10% by 2025
  - Develop Quality Benchmarks
  - Monitor ACOs and the adoption of alternative payment models

# Executive Order and The Quality Council

- Develop quality benchmarks across all public and private payers beginning in 2022, including clinical quality measures, over/under utilization measures, and patient safety measures;

6. To ensure the maintenance and improvement of health care quality, the Executive Director of OHS, with the input and assistance of the Commissioners of the Social Services, Public Health, and Insurance, shall use the existing OHS Quality Council to assist in the development of quality benchmarks across all public and private payers beginning in calendar year 2022. Such quality benchmarks may include clinical quality measures, under- and over-utilization measures, and patient safety measures.

Adjourn