NEW YORK STATE | **Department of Health** | Medicaid Redesign Team

VBP Quality Measurement General Task Force
December 19, 2017

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Agenda
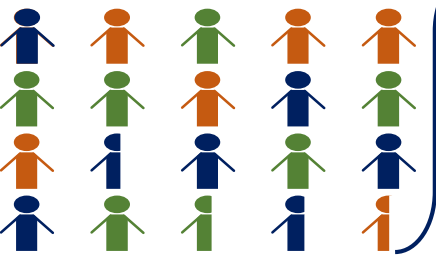
Section	Time		Presenter
Introduction	10:00	5 minutes	Dr. Doug Fish
Project Level Set	10:05	10 minutes	Dr. Lindsay Cogan
Quality Measurement Testing Overview	10:15	30 minutes	Isaac Lutz
Questions and Group Discussion	10:45	40 minutes	Group
Wrap-Up	11:25	5 minutes	Dr. Doug Fish

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Level Set

- VBP Pilot Participants are already required to report most VBP Category 1 measures for the first VBP pilot year

- Pilot Participants were also required to report <u>two</u> Category 2 measures for their VBP arrangement for year 2

- Instead of reporting two Category 2 measures, participants will be asked to report **Controlling High Blood Pressure** (which is a Category 1 measure) for their arrangement

  - In turn, Pilot Participants will be asked to report only <u>one Category 2 Measure of their choice</u>
  - Category 2 measure work will be done outside of the testing project

- Testing participants can work with third parties (e.g., QEs or data aggregators) to help collect clinical data and calculate measures

- Results of the testing may be shared with external organizations, like NCQA and CMS, to drive measure alignment and development

Level Set: Background

- VBP is leveraging the APC Scorecard method to require health plans to modify the Patient Level Detail (PLD) files submitted for HEDIS/QARR to include provider attribution fields to calculate measure results at the VBP Contractor level across all arrangements.

Quality Measure	MCO HEDIS/QARR Measure Result	Measure Breakout by Member via PLD	Measure Score by VBP Pilot Arrangement	Measure Score by VBP Contractor and Arrangement
Cervical Cancer Screening (CCS)	MCO #1 765/1199		HARP 218/322	66/98
				90/123
				62/101
	MCO #2 832/1171		TCGP 218/322	283/387
				244/320
				223/276
			IPC 218/322	210/350
				243/410
				176/305

Legend:

- Included in Numerator
- Denominator Only
- VBP Contractor #1
- VBP Contractor #2
- VBP Contractor #3

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Level Set: Problems and Challenges

- **What is the problem that needs to be solved?**
  - Several Category 1 Quality Measures for VBP are not reportable by Managed Care Organizations (MCOs) at the VBP Contractor Level

    - **Controlling High Blood Pressure (HEDIS: CBP)**
    - Diabetes Foot Exam
    - Screening for Clinical Depression and Follow-up

    - Tobacco Use: Screening and Cessation Intervention
    - Influenza Immunization
    - BMI Screening and Follow-up Plan

- **Challenges:**
  - MCOs do not report all Category 1 VBP Measures for HEDIS/QARR and may not have the capacity to report new VBP measures without additional support

  - Controlling High Blood Pressure (CBP) is a hybrid only measure and relies on medical record review (MRR) to calculate the measure results based on a sample from the eligible population

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VBP Pilot Quality Measure Testing

Goals:
- VBP pilot participants will design, implement, and test their ability to collect clinical data and generate clinical quality measures for the non-reportable VBP Category 1 Controlling High Blood Pressure (CBP)

Objectives:
- Create valid measure results for non-reportable VBP quality measures at the VBP contractor level
- Create baseline scores for non-reportable VBP quality measures to benchmark future quality measure improvements
- Enable more frequent measure reporting between VBP Contractors and MCOs
- Improve the quality of the data for those data elements needed to generate quality measures

Impact:
- Prepares VBP participants to work together on improving data quality through the calculation of quality measurement at the VBP contractor level

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Eligible Population Parameters

Initial Population →

Denominator Criteria: HEDIS Specification and Value Sets		Discussion points
Ages	18-85 years of December 31	• **Proposed Recommendation:** *Testing participants will use the HEDIS specification to determine the eligible population to help calculate the denominator*
Continuous Enrollment	Measure year (MY) with no more than one gap in continuous enrollment of up to 45 days	• Are there other recommendations for determining the initial population other than using the HEDIS specification?
Event/diagnosis	One outpatient visit during first six months of MY ——— with Diagnosis (Dx) of Hypertension (HTN)	• If so, how can participants share the relevant data needed to identify the initial population to calculate the denominator?
Exclusions	• Members in hospice care • Members with end-stage renal disease (ESRD) or kidney transplant • Members who are pregnant • Members who had nonacute inpatient admission during measure year	• Does the Dx of HTN need additional confirmation, as is required for HEDIS?

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Numerator Compliance Parameters
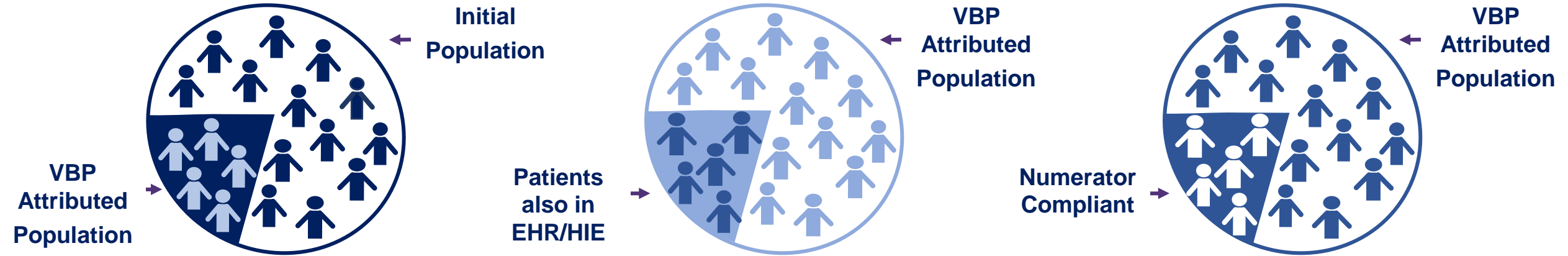
VBP Contractor Attribution	Identify Attributed Population in EHR/HIE	Numerator Compliance
• Members attributed to the VBP Contractor will need to be filtered from the total eligible population • Participants should leverage their existing attribution method established for VBP • As new attribution issues arise, participants will collaborate to implement mutually amenable solutions for accurate measurement at the VBP contractor level	• Measure Testing participants will need to identify attributed members in their EHRs or through the HIE (or other electronic clinical data repositories) • Participants will also need to develop solutions to find clinical data for patients with no EHR or HIE clinical data • Missing data could potentially be used in gap in care reporting	• Electronic clinical data should be used to identify numerator compliance for the entire population • MRR or samples should not be used to find numerator compliance • Participants will address poor data quality that impacts overall measure performance

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Testing Objectives

- **Objective 1:** *Create measure results for non-reportable VBP quality measures at the VBP contractor level*
  - Testing participants will calculate quality measures results (i.e. numerators/denominators) for CBP to assess the performance of VBP Contractors by VBP arrangement.

  - Measure validity will need to be defined and further refined by the State and testing participants.

- **How does this objective accomplish the overall vision and goals for quality measurement?**
  - While there are other required Category 1 measures in VBP that are non-reportable, CBP is a high priority measure used across other programs, like DSRIP, HEDIS/QARR, and the Merit-based Incentive Payment Systems (MIPS)

  - Testing and calculating measure results for CBP will facilitate mutually beneficial solutions that can be leveraged for other quality measures or other programs

  - As VBP moves from pilots to full-scale adoption, measure testing will better prepare participants for the responsibility of reporting quality measures by VBP arrangements and contractors

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Testing Objectives

- **Objective 2:** *Create baseline scores for non-reportable VBP quality measures to benchmark future quality measure improvements*
  - Measure testing will establish benchmarks by which to gauge future measure results for VBP Contractors and arrangements

  - Benchmarks could also include quantifying/qualifying the data elements needed for quality measurement and setting improvement goals or methods to improving the quality of data elements

- **How does this objective accomplish the overall vision and goals for quality measurement?**
  - Baselining measure scores and data elements needed for measurement will allow stakeholders to better quantify the current state of data quality and its utility for quality measurement

  - Allows stakeholders to target specific areas or resources needed to improve overall quality

  - Gives stakeholders access to relevant data points needed to enter into VBP arrangements where quality measurement performance is tied more directly to payment

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Testing Objective

- **Objective 3:** *Enable more frequent measure reporting between VBP Contractors and MCOs for Category 1 Measures*
  - Testing participants should report quality measure results to help VBP stakeholders assess and monitor VBP Contractor performance on feasible but frequent basis (other than annually)

  - Measure results and data should be shared in standardized, re-usable formats that can be shared for gaps in care reports or for multiple other kinds of use cases

- **How does this objective accomplish the overall vision and goals for quality measurement?**
  - The interoperable exchange of clinical data should provide stakeholders more timely access to actionable data needed to address gaps in care or improve performance even for outcome-based measures like CBP

  - More frequent measure reporting may also help stakeholders address data quality issues when reported measure results don't match expected outcomes or match internal monitoring systems or reports

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Testing Objectives

- **Objective 4:** *Improve the quality of the data for those data elements needed to generate quality measures*
  - Testing participants should assess the current state of data quality and improve data quality where there are deficiencies

  - Measure testing should address various domains of quality, including:
    - Structured data
    - Data completeness of each data element
    - Use of, and fidelity to, structured fields and codes
    - Data reusability for other quality measures or use cases where clinical data is aggregated

- **How does this objective accomplish the overall vision and goals for quality measurement?**
  - Data quality is inherent to an organization's ability to accurately collect, aggregate, and calculate quality measures

  - The measure testing will enable stakeholders who contribute data or calculate measures to work together on a focused use case for improving data quality

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Milestones Roadmap

Phase	Participant Activities	Deliverables
Measure Testing Planning and Design	• Develop individual testing scopes and charters • Assess current capabilities and data sources for CBP • Design processes, data sharing agreements, and other technical solutions needed to exchange clinical data • Finalize measure specifications and data sets	• **Individual Testing Project Plans** • **Testing Current State: Snapshot**
Measure Testing Implementation	• Execute solutions and processes • Share interim findings, challenges, best practices • Report on other testing activities	• **Monthly Milestone Reporting**
Measure Testing Evaluation	• Internal evaluations between participants • External evaluations by third party • Recommendations for scaling solutions statewide	• **Evaluation Report** • **VBP Measure Results for CBP**

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Questions?