# MassHealth 2021 Managed Care Plan Quality Performance

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*Background*

In accordance with CFR 438.340, MassHealth annually reports performance on a slate of quality measures identified in its managed care plan (MCP) contracts. Measures were selected for public reporting based on MassHealth experience in reporting the measure, availability of standardized specifications and national benchmarks, as well as alignment with MassHealth and CMS priorities. Most of the measures selected are reported by more than one MassHealth program, with nine measures being reported by three or more MassHealth programs. Measure rates reflect performance in calendar year 2020, with data collection occurring in calendar year 2021.

*Data Collection*

MassHealth receives plan-level HEDIS data from each of its managed care plans. Plan-level rates are presented in tables for each MassHealth managed care program which operated in 2020. These include Managed Care Organizations (MCO), Senior Care Organizations (SCO), One Care, and the Primary Care Clinician (PCC) Plan. In addition to plan-level rates, the tables also present a MassHealth Weighted Mean (MHWM), which is a weighted average and reflects an overall performance rate for all the plans reporting data for that measure. MHWM rates are compared to national benchmarks, with arrows representing relative performance (for example, ↑ signifies that MHWM performance exceeds a benchmark).

Data are compared to national benchmarks.

* MCO, One Care, and PCC Plan weighted mean rates are compared to the national Medicaid 90th and 75th percentiles. (MCO and PCC Plan rates are grouped in a weighted mean.) The 90th percentile represents a level of performance that was met or exceeded by the top 10% of Medicaid plans that submitted HEDIS MY 2020 data to NCQA. MassHealth uses the Medicaid 90th percentile as the primary benchmark against which plan performance is compared. The Medicaid 75th percentile is used to reflect a minimum standard of performance. This percentile represents a level of performance met or exceeded by the top 25% of Medicaid plans that submitted HEDIS 2021 data to NCQA.
* SCO plan weighted mean rates are compared to both the national Medicaid and the national Medicare 90th and 75th percentiles (where available).

Benchmarks were sourced from the NCQA’s 2021 Medicaid Quality Compass and the 2021 Medicare Quality Compass.

Table 1 - MassHealth Public Reporting Measures Slate (By Program)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Measure Name** | **Steward** | **NQF #** | **MCO** | **PCCP** | **SCO** | **One Care** | **BH PIHP** |
| **Care for Older Adults - Advance Care Plan (COA)** | NCQA | 0326 |  |  | x |  |  |
| **Antidepressant Medication Management (AMM)** | NCQA | 0105 |  |  | x | x | x |
| **Asthma Medication Ratio (AMR)** | NCQA | 1800 | x | x |  |  |  |
| **Breast Cancer Screening (BCS)** | NQCA | 2372 |  |  |  | x |  |
| **Childhood Immunization Status (CIS)** | NCQA |  0038 |  |  |  |  |  |
| **Colorectal Cancer Screening (COL)** | NCQA | 0034 |  |  | x | x |  |
| **Comprehensive Diabetes Care: Poor Control (CDC) – Poor A1c Control** | NCQA | 0059 | X | X |  | x |  |
| **Controlling High Blood Pressure (CBP)** | NCQA | 0018 | X | X | x | x |  |
| **Diabetes Screening for People with Schizophrenia or Bipolar Disorder who are using Antipsychotic Medications (SSD)** | NCQA | 1932 |  |  |  |  | x |
| **Follow-up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (FUA)** | NCQA | 3489 | x | x |  | x | x |
| **Follow-up After Emergency Department Visit for Mental Illness (FUM)** | NCQA | 3488 | X | X |  | X | X |
| **Follow-Up After Hospitalization for Mental Illness (FUH)** | NCQA | 0576 | x | x | x | x | X |
| **Follow-up Care for Children Prescribed ADHD Medication (ADD)** | NCQA | 0108 |  |  |  |  | x |
| **Immunization for Adolescents (IMA) – Combination 2** |  | 1407 |  |  |  |  |  |
| **Initiation and Engagement of Alcohol, Opioid, or Other Drug Abuse or Dependence Treatment (IET)** | NCQA | 0004 | x | x |  | x | x |
| **Transitions of Care (TRC) – Medication Reconciliation Post Discharge**  | NCQA | N/A |  |  | x | x |  |
| **Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM)** | NCQA | 2800 | x | x |  |  | x |
| **Osteoporosis Management in Women Who Had a Fracture (OMW)** | NCQA | 0053 |  |  | x |  |  |
| **Persistence of Beta Blocker Treatment After Heart Attack (PBH)** | NCQA | 0071 |  |  | x |  |  |
| **Pharmacotherapy Management of COPD Exacerbation (PCE)** | NCQA | 0549 |  |  | x |  |  |
| **Plan All-Cause Readmission (PCR)** | NCQA | 1768 | X | X | x | x |  |
| **Potentially Harmful Drug Disease Interactions in the Elderly (DDE)** | NCQA | 2993 |  |  | x |  |  |
| **Timeliness of Prenatal Care (PPC)** | NCQA | 1517 |  |  |  |  |  |
| **Use of High-Risk Medications in the Elderly (DAE)** | NCQA | 0022 |  |  | x |  |  |
| **Use of Spirometry Testing in the Assessment and Diagnosis of COPD (SPR)** | NCQA | 0577 |  |  | x | x |  |

Table 2 – MCO and PCC Plan Performance Measures, 2021 (Measurement Period: Calendar Year 2020)

| **Measure Code** | **Measure Name** | **BMCHP** | **THP** | **PCCP** | **MH Weighted Mean/Median**  | **Nat'l Medicaid 75th Percentile\*** | **Nat'l Medicaid 90th Percentile\*** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **AMR**  | **Asthma Medication Ratio** | 50.8% | 57.3% | 57.3% | 56.5%(MHWM) | ↓ | ↓ |
| **APM** | **Metabolic Monitoring for Children and Adolescents on Antipsychotics** | 16.3% | 30.7% | 35.9% | 33.4% (MHWM) | ↓ | ↓ |
| **BH CP Engagement** | **Behavioral Health Community Partner Engagement** | 3.4% | 4.7% | N/A | 4.1%(MHWM) | N/A | N/A |
| **CBP** | **Controlling High Blood Pressure** | 25.9% | 52.1% | 61.6% | 52.1% (Median) | ↓ | ↓ |
| **CDC** | **Comprehensive Diabetes Care: A1c Poor Control (lower is better)** | 67.8% | 39.1% | 47.0% | 47.0% (Median) | ↓ | ↓ |
| **CIS** | **Childhood Immunization Status (Combination 10)** | 22.0% | 55.1% | 47.7% | 47.7% (Median) | ↑ | ↓ |
| **CT** | **Community Tenure** | TBD | TBD | TBD | N/A | N/A | N/A |
| **FUA** | **Follow-up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (7 day)** | 24.4% | 25.3% | 25.2% | 24.9%(MHWM) | ↑ | ↑ |
| **FUM** | **Follow-up After Emergency Department Visit for Mental Illness (7 day)** | 70.4% | 74.9% | 83.2% | 77.3% (MHWM) | ↑ | ↑ |
| **FUH** | **Follow-up After Hospitalization for Mental Illness (7 day)** | 46.2% | 43.8% | 51.1% | 47.2% (MHWM) | ↓ | ↓ |
| **IET - Initiation** | **Initiation of Alcohol and Other Drug Abuse or Dependence Treatment** | 56.3% | 52.8% | 47.9% | 52.1% (MHWM) | ↑ | ↓ |
| **IET - Engagement** | **Engagement of Alcohol and Other Drug Abuse or Dependence Treatment** | 21.7% | 21.6% | 17.0% | 20.0% (MHWM) | ↑ | ↓ |
| **IMA** | **Immunization for Adolescents (Combination 2)** | 21.8% | 42.0% | 34.8% | 34.8% (Median) | ↓ | ↓ |
| **LTSS CP Engagement** | **LTSS Community Partner Engagement** | 3.8% | 5.2% | N/A | 4.5% (MHWM) | N/A | N/A |
| **PCR - Observed Readmission Rate** | **Plan All-Cause Readmissions (Observed Readmission Rate)** | 5.3%  | 11.2%  | 12.5% | 9.7% (MHWM) | N/A | N/A |
| **PPC** | **Timeliness of Prenatal Care** | 64.0% | 86.0% | 88.1% | 86.0% (Median) | ↓ | ↓ |
| **ED SMI** | **ED visits for members 18-65 identified with a diagnosis of serious mental illness, substance addiction, or co-occurring conditions (Observed to Expected Ratio)** | 1.26 | 1.18 | N/A | 1.22 (MHWM) | N/A | N/A |

 \* ↑ = Weighted Mean/Median Performance Better Than Benchmark ↓ = Weighted Mean/Median Performance Worse Than Benchmark

MCO plans are compared to the national Medicaid 75th and 90th percentile benchmarks in the table above, where benchmark data are available. Weighted means are presented for administrative (claims only) measures, while median rates are shown for hybrid measures (claims and medical record review).

* The MassHealth Weighted Mean (MHWM) rates for FUA and FUM were above the national Medicaid 90th percentile benchmark.
* The median rate for CIS (Combination 10) and the MHWM rates for IET (both initiation and engagement sub measures) were below the 90th percentile, but above the 75th percentile.
* The MHWM/median rates for AMR, APM, CBP, FUH, IMA (Combination 2), and PPC (timeliness submeasure) were below the 75th percentile.
* The median rate for CDC poor control cohort was higher than both the 90th and 75th percentile, meaning that plan performance failed to meet those benchmarks (because a lower rate signifies better performance).

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Measure Code** | **Measure Name** | **BMCHP** | **CCA** | **FH** | **SWH** | **THP** | **UHC** | **MH Weighted Mean** | **Nat'l Medicare 75th Percentile\*** | **Nat’l Medicare 90th Percentile\*** | **Nat'l Medicaid 75th Percentile\*** | **Nat'l Medicaid 90th Percentile\*** |
| **AMM -****Acute** | **Antidepressant Medication Management - Effective Acute Phase**  | 87.2% | 78.2% | 78.4% | 83.4% | 71.7% | 78.1% | 78.9% | ↓ | ↓ | ↑ | ↑ |
| **AMM -Cont** | **Antidepressant Medication Management - Effective Continuation Phase**  | 76.9% | 64.6% | 64.5% | 74.1% | 54.6% | 62.0% | 65.1% | ↓ | ↓ | ↑ | ↑ |
| **COA** | **Care for Older Adults (Advance Care Plan)**  | 35.8% | 70.4% | 70.6% | 97.4% | 98.0% | 65.1% | 77.0% | N/A | N/A | N/A | N/A |
| **COL** | **Colorectal Cancer Screening**  | 69.4% | 75.7% | 61.7% | 74.2% | 63.9% | 86.1% | 76.2% | ↓ | ↓ | N/A | N/A |
| **CBP** | **Controlling High Blood Pressure**  | 57.9% | 59.4% | 57.7% | 53.7% | 54.0% | 70.3% | 61.2% | ↓ | ↓ | ↓ | ↓ |
| **FUH** | **Follow-up After Hospitalization for Mental Illness (7 days)**  | NA  | 45.5% | 25.5% | 40.0 % | 37.8% | 36.4% | 37.3% | ↑ | ↓ | ↑ | ↓ |
| **TRC**  | **Transitions of Care: Medication Reconciliation Post-Discharge** | 72.9% | 49.6% | 86.1% | 43.6% | 43.1% | 57.2% | 54.4% | ↓ |  ↓ | N/A | N/A |
| **OMW** | **Osteoporosis Management in Women Who Had a Fracture**  | N/A2 | 16.3% | 43.8% | N/A2 | N/A2 | 22.6% | 26.3% | ↓ | ↓ | N/A | N/A |
| **PBH** | **Persistence of Beta-Blocker Treatment After Heart Attack**  | N/A2 | N/A2 | N/A2 | N/A2 | N/A2 | N/A2 | 90.9% | ↓ | ↓ | ↑ | ↑ |
| **PCE - Cort** | **Pharmacotherapy Management of COPD Exacerbation - Systemic Corticosteroid**  | N/A2 | 73.8% | 78.2% | 73.9% | 77.4% | 70.9% | 74.5% | ↓ | ↓ | ↓ | ↓ |
| **PCE - Bronch** | **Pharmacotherapy Management of COPD Exacerbation - Bronchodilator**  | N/A2 | 91.4% | 94.3% | 86.8% | 91.5% | 90.1% | 90.8% | ↑ | ↔ | ↑ | ↑ |
| **DDE** | **Potentially Harmful Drug Disease Interactions in the Elderly (Total) 1** | 30.7% | 31.1% | 35.7% | 31.2% | 32.5% | 32.9% | 32.4% | ↓ | ↓ | N/A | N/A |
| **DAE – 2+** | **Use of High-Risk Medications in the Elderly – 2+ High Risk Medications 1**  | 13.4% | 17.3% | 20.1% | 15.7% | 13.0% | 17.5% | 16.8% | N/A | N/A | N/A | N/A |
| **DAE – 2+ Diag** | **Use of High-Risk Medications in the Elderly – 2+ High Risk Medications with Appropriate Diagnosis1**  | 5.5% | 8.2% | 7.0% | 4.9% | 6.6% | 6.8% | 6.6% | N/A | N/A | N/A | N/A |
| **SPR** | **Use of Spirometry Testing in the Assessment and Diagnosis of COPD**  | N/A2 | 19.9% | 22.5% | 24.7% | 25.3% | 26.6% | 23.9% | ↓ | ↓ | ↓ | ↓ |
| **PCR**  | **Plan All-Cause Readmission (observed to expected ratio) 1** | 1.07 | 1.01 | 1.18 | 1.09 | 1.25 | 1.25 | 1.15 | ↓ | ↓ | N/A | N/A |

Table 3 - SCO Performance Measures, 2021 (Measurement Period: Calendar Year 2020)

Table Legend:

1 A lower score represents better performance.

2 Individual plan rates not included because denominator (number of members eligible for measure) < 30, but plan denominator and numerator included in weighted mean calculation.

 \* ↑ = Weighted Mean Performance Better Than Benchmark ↔ = Weighted Mean Performance Equal To Benchmark ↓ = Weighted Mean Performance Worse Than Benchmark

SCO plans are compared to both the national Medicare and Medicaid 90th and 75th percentile benchmarks in the table above, where benchmark data are available. In most cases, Medicare benchmarks are higher than Medicaid.

* The MassHealth Weighted Mean (MHWM) rate for PCE (bronchodilator) is above the Medicaid 90th percentile, and equal to the Medicare 90th percentile.
* The MHWM rates for AMM (Acute and Continuation) and PBH are above the Medicaid 90th percentile, but below the Medicare 75th.
* The MHWM rate for FUH was above the 75th percentile but below the 90th percentile of both Medicare and Medicaid.
* The MHWM rates for COL, TRC, OMW, DDE, and PCR did not meet the Medicare 75th percentile performance target (DDE and PCR are measures for which a lower score indicates better performance.) Medicaid benchmarks are not available for these measures.
* The MHWM rates for CBP, PCE (systemic corticosteroid), and SPR were below both the Medicare and Medicaid national 75th percentiles.

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Measure Code** | **Measure Name** | **CCA** | **THP** | **MH Weighted Mean** | **Nat'l Medicare 75th Percentile\*** | **Nat'l Medicare 90th Percentile\*** | **Nat'l Medicaid 75th Percentile\*** | **Nat'l Medicaid 90th Percentile\*** |
| **AMM -****Acute** | **Antidepressant Medication Management - Effective Acute Phase**  | 72.1% | 65.2% | 71.4% | ↓ | ↓ | ↑ | ↑ |
| **AMM -****Cont** | **Antidepressant Medication Management - Effective Continuation Phase**  | 59.1% | 52.3% | 58.5% | ↓ | ↓ | ↑ | ↑ |
| **BCS** | **Breast Cancer Screening** | 66.5% | 63.6% | 66.2% | ↓ | ↓ | ↑ | ↑ |
| **COL** | **Colorectal Cancer Screening**  | 72.5% | 55.9% | 70.6% | ↓ | ↓ | N/A | N/A |
| **CDC** | **Comprehensive Diabetes Care: A1c Poor Control 1** | 53.5% | 48.5% | 53.0% | ↓ | ↓ | ↓ | ↓ |
| **CBP** | **Controlling High Blood Pressure**  | 58.4% | 42.8% | 56.7% | ↓ | ↓ | ↓ | ↓ |
| **FUM** | **Follow-up After Emergency Department Visit for Mental Illness (7 days)** | 79.5% | 80.5% | 79.6% | ↑ | ↑ | ↑ | ↑ |
| **FUA** | **Follow-up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (7 days)** | 30.3% | 17.9% | 28.9% | ↑ | ↑ | ↑ | ↑ |
| **FUH** | **Follow-up After Hospitalization for Mental Illness (7 days)**  | 50.6% | 44.1% | 50.0% | ↑ | ↓ | ↑ | ↓ |
| **IET - Init** | **Initiation and Engagement of Alcohol, Opioid, or Other Drug Abuse or Dependence Treatment – Initiation Total**  | 40.6% | 41.0% | 40.6% | ↓ | ↓ | ↓ | ↓ |
| **IET - Eng** | **Initiation and Engagement of Alcohol, Opioid, or Other Drug Abuse or Dependence Treatment – Engagement Total**  | 11.5% | 10.4% | 11.4% | ↑ | ↑ | ↓ | ↓ |
| **TRC**  | **Transitions of Care: Medication Reconciliation Post-Discharge**  | 44.3% | 10.5% | 40.7% | ↓ | ↓ | N/A | N/A |
| **PBH** | **Persistence of Beta-Blocker Treatment After Heart Attack**  | 98.0% | NA | 98.1% | ↑ | ↑ | ↑ | ↑ |
| **SPR** | **Use of Spirometry Testing in the Assessment and Diagnosis of COPD** | 24.0% | 20.3% | 23.5% | ↓ | ↓ | ↓ | ↓ |
| **PCR** | **Plan All-Cause Readmission (observed to expected ratio) 1** | 1.00 | 1.36 | 1.04  | ↓ | ↓ | ↓ | ↓ |

Table 4 – One Care Performance Measures, 2021 (Measurement Period: Calendar Year 2020)

Table Legend:

1 A lower score represents better performance.

\* ↑ = Weighted Mean/Median Performance Better Than Benchmark ↓ = Weighted Mean/Median Performance Worse Than Benchmark

One Care plans are compared to both the national Medicare and Medicaid 75th and 90th percentile benchmarks in the table above, where benchmark data are available.

* The MassHealth Weighted Mean (MHWM) rates for FUA, FUM, and PBH are above both the national Medicaid and Medicare 90th percentile benchmarks.
* The MHWM rates for AMM (both acute and continuation sub measures) and BCS were above the national Medicaid 90th percentile but below the Medicare 75th percentile benchmark.
* The MHWM rate for FUH is above both the Medicare and Medicaid 75th percentile.
* The MHWM rate for IET (engagement sub measure) is below the Medicaid 75th percentile, but above the Medicare 90th.
* The MHWM rates COL and TRC were below the Medicare 75th percentile benchmarks (no Medicaid benchmarks exist for these two measures).
* The MHWM rates for CDC – A1c Poor Control, CBP, IET (initiation sub measure), SPR, and PCR did not meet the Medicare or Medicaid 75th percentile performance targets (CDC – A1c Poor Control and PCR are measures for which a lower score indicates better performance.)

Table 5 – Massachusetts Behavioral Health Partnership (MBHP) Measures, 2021 (Measurement Period: Calendar Year 2020)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Measure Code** | **Measure Name** | **MBHP Rate**  | **Nat'l Medicaid 75th Percentile\*** | **Nat'l Medicaid 90th Percentile\*** |
| **ADD – Init** | **Follow-Up Care for Children Prescribed ADHD Medication – Initiation Phase** | 37.4% | ↓ | ↓ |
| **ADD – Cont** | **Follow-Up Care for Children Prescribed ADHD Medication – Continuation and Maintenance Phase** | 40.7% | ↓ | ↓ |
| **AMM - Acute** | **Antidepressant Medication Management - Effective Acute Phase**  | 60.7% | ↓ | ↓ |
| **AMM - Cont** | **Antidepressant Medication Management - Effective Continuation Phase**  | 50.4% | ↑ | ↓ |
| **APM** | **Metabolic Monitoring for Children and Adolescents on Antipsychotics** | 33.0% | ↓ | ↓ |
| **FUM – 7** | **Follow-Up After Emergency Department Visit for Mental Illness – Follow-up within 7 days** | 76.0% | ↑ | ↑ |
| **FUM – 30** | **Follow-Up After Emergency Department Visit for Mental Illness – Follow-up within 30 days** | 82.1% | ↑ | ↑ |
| **FUA – 7** | **Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence – Follow-up within 7 days** | 20.8% | ↑ | ↓ |
| **FUA – 30** | **Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence – Follow-up within 30 days** | 30.0% | ↑ | ↓ |
| **FUH – 7** | **Follow-Up After Hospitalization for Mental Illness – Follow-up within 7 days** | 48.3% | ↑ | ↓ |
| **FUH – 30** | **Follow-Up After Hospitalization for Mental Illness – Follow-up within 30 days** | 68.1% | ↑ | ↓ |
| **IET - Init** | **Initiation and Engagement of Alcohol, Opioid, or Other Drug Abuse or Dependence Treatment – Initiation Total**  | 45.3% | ↓ | ↓ |
| **IET - Eng** | **Initiation and Engagement of Alcohol, Opioid, or Other Drug Abuse or Dependence Treatment – Engagement Total**  | 17.4% | ↓ | ↓ |
| **SSD** | **Diabetes Screening for People with Schizophrenia or Bipolar Disorder who are using Antipsychotic Medications** | 73.4% | ↓ | ↓ |

 \* ↑ = MBHP Performance Better Than Benchmark ↓ = MBHP Performance Worse Than Benchmark

Massachusetts Behavioral Health Partnership (MBHP) measures are compared to the Medicaid 90th and 75th percentiles in the table above.

* The MassHealth Weighted Mean (MHWM) rates for FUM (7- and 30-day follow-up) are above the national Medicaid 90th percentile benchmark.
* The MHWM rates for AMM (effective continuation phase), FUA (7- and 30-day follow-up), and FUH (7- and 30-day follow-up) are above the Medicaid 75th percentile.
* The MHWM rates for ADD, AMM (effective acute phase), APM, IET (initiation and engagement sub measures), and SSD are below the Medicaid 75th percentile.