

Commonwealth of Massachusetts

Executive Office of Health and
Human Services



EOHHS QUALITY MEASURE ALIGNMENT TASKFORCE

Meeting #32
January 22, 2020



Agenda



- 1. Welcome**
- 2. Revisit selection criteria, inclusive of those used for non-endorsed measures**
- 3. Continue the annual review of the Aligned Measure Set**
- 4. Next steps**



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Revisit Measure Selection Criteria



- On 12/9 the Taskforce continued discussion of measure selection criteria and the process for considering non-endorsed measures and nearly finalized these criteria.
- At the time, Taskforce staff committed to drafting one set of selection criteria for endorsed and non-endorsed measures for Taskforce review.
- Prior to today's meeting, you received a single set of measure selection criteria, derived from the previous two Taskforce documents.
- **Are there any recommended changes to the proposed measure selection criteria?**



Agenda



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3. Continue the annual review of the Aligned Measure Set
4. Next steps



Annual Review Process



- As a reminder, here are the steps for our annual review:

Step	Status
1. Background (review selection criteria and state priorities)	✓
2. Solicit Taskforce member proposals for additions, subtractions and replacements for 2021	✓
3. Review the 2020 Aligned Measure Set	In progress
4. Initial review of new measures/topics	In progress
5. Revisit refined list of new measures/topic for inclusion (and consider potential placement in Core or Menu)	Not started
6. Consider Developmental measures	Not started
7. Finalize recommended changes to the Aligned Measure Set	Not started

- Note: previously we had Steps 3 and 4 reversed. Based on feedback from a Taskforce member, we have swapped the order so that the Taskforce will review the 2020 Aligned Measure Set in advance of further considering new measures.



Continue the Annual Review of the Aligned Measure Set



- Today, we will continue the annual review of the Aligned Measure Set. Specifically we will:
 - Continue review of the 2020 Aligned Measure Set
 - Revisit new measures/topics
 - Discuss Taskforce member proposals for additions, subtractions and replacements for 2021
- As a reminder, the Secretariat identified six state health priorities that we should keep in mind as we do our work:
 1. Substance use disorders
 2. Mental health, including pediatric mental health
 3. Chronic disease, with a focus on cancer, heart disease, and diabetes
 4. Housing stability/homelessness
 5. Community tenure
 6. Health equity



Annual Review Process



Continue Review of the 2020 Aligned Measure Set

- Review Core, Menu, and Monitoring measures



Review of the 2020 Aligned Measure Set



- On 12/9 the Taskforce began review of the 2020 Aligned Measure Set. The Taskforce considered: 1) measure use in global budget-based risk contracts, 2) substantive changes to the measures, and 3) performance.
 - Data sources for each of these analyses can be found in the December presentation.
- The Taskforce completed initial review of the Core measures, except for placement of **IET** in the 2021 Aligned Measure Set.
- Following the meeting, one Taskforce member recommended specifying what part of the **CG-CAHPS** survey is being used as the measure.
- Also following the meeting, Taskforce staff also identified the need to revisit **Depression Screening and Follow-up (CMS)** to confirm which version of its specifications are recommended for the Core Set.



2021 Core Set Decisions



- As a reminder, Taskforce has decided to retain the following 2020 Core Set measures for 2021:
 1. Controlling High Blood Pressure
 2. Comprehensive Diabetes Care: Hemoglobin A1c Poor Control (>9.0%)
 3. CG-CAHPS (MHQP version)
- In addition, Taskforce has decided to drop four of the 2020 Core Set depression measure options and retain one for 2021:
 - Depression Screening and Follow-Up (CMS ~~or~~ NCQA)
 - ~~Depression Response—Progress Towards Remission (MNCM)~~
 - ~~Depression Remission (MNCM)~~
 - ~~Depression Remission or Response (HEDIS)~~
- Let's now discuss 2021 placement of Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET), the fifth 2020 Core Set optional behavioral health measure.



2021 Core Set Decisions



- On 12/9 some participants recommended moving Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (either the Initiation or Engagement Phase) to Menu status, while others recommended retaining it in the Core Set.
- Does the Taskforce recommend IET be a Core or Menu measure for 2021?

Measure	Contract Use 2020	Substantive Change	2018 Performance	
			Comm.	MH
IET - Initiation	4 payers		34.4	47.5
IET- Engagement	4 payers		12.8	18.9

Key:

<25th	25th - 50th	50th - 75th	75th - 90th	≥90th
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CG-CAHPS Survey



- The MHQP version of the CG-CAHPS survey is currently part of the Core Set.
- However, the Taskforce has not specified which composite(s) is being used in the Core Set.
- One Taskforce member has recommended discussing which specific component of the survey is being used as a measure in the Core Set.
- **Does the Taskforce wish to specify which CG-CAHPS composite(s) or question (s) must be used in the Core Set?**
 - Composites include: Getting Timely Appointments, Care and Information; How Well Providers Communicate; Providers' Use of Information to Coordinate Patient Care, Helpful, Courteous, and Respectful Office Staff; Patient's Rating of Provider?
 - There are also two overall rating questions.



Depression Screening and Follow-up



- During the 10/16 Taskforce meeting, the Taskforce recommended retaining Depression Screening and Follow-up (CMS) in the Core, retaining Depression Remission or Response (NCQA) as a Developmental measure, and moving all the other Core options out of the set for 2021.
- However, the Taskforce was not specific as to which version of the measure it recommended including in the Core Set.
 - The CMS specifications are claims-based, identifying screening and follow-up through use of G codes.
 - MassHealth received approval from CMS to use a hybrid version of these specifications.
- **Does the Taskforce recommend use of the administrative and/or hybrid specifications in the Core Set?**



Menu Measures



- We'll now review the 2020 Menu Set.
- As a reminder, the Menu Set includes all other measures from which payers and ACOs may choose to supplement the Core Set measures in their contracts.
- When discussing past performance today, please consider if low performance may be due to a measure flaw or an operational issue(s), and/or if it may reflect suboptimal performance.
- **As we discuss each measure, please indicate if you recommend retaining the measure or removing the measure from the Menu Set.**



Menu Measures



Measure	Contract Use 2020	Substantive Change	2018 Performance	
			Comm.	MH
Asthma Medication Ratio	4 payers		75.5	58.7
Breast Cancer Screening	7 payers		83.1	68.5
Cervical Cancer Screening	7 payers	HEDIS 2020 Change*	84.2	70.8
Child and Adolescent Major Depressive Disorder: Suicide Risk Assessment – <i>as part of its annual review feedback, DMH expressed continued support for this measure</i>	0 payers			
Childhood Immunization Status (Combo 10)	3 payers		71.8	50.6

*Added primary screening with a high-risk human papillomavirus test as a screening option.

Key:				
<25th	25th - 50th	50th - 75th	75th - 90th	≥90th

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Menu Measures (cont'd)



Measure	Contract Use 2020	Substantive Change	2018 Performance	
			Comm.	MH
Chlamydia Screening - Ages 16-24	6 payers		74.2	72.1
Colorectal Cancer Screening	5 payers		79.0	N/A
Comprehensive Diabetes Care: Eye Exam	5 payers		73.1	68.0
Comprehensive Diabetes Care: Blood Pressure Control (<140/90 mm Hg)	6 payers		76.3	69.0 ¹
Continuity of Pharmacotherapy for Opioid Use Disorder	1 payer			

¹ One MCO did not perform a medical record review (resulting in a rate of 0%), likely pulling down the MassHealth rate by 3-4 percentage points.

Key:				
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Menu Measures (cont'd)



Measure	Contract Use 2020	Substantive Change	2018 Performance	
			Comm.	MH
Follow-up After Emergency Department Visit for Mental Health (7-Day)	1 payer		69.7	76.6
Follow-Up After Hospitalization for Mental Illness (FUH) (7-Day)	2 payers		58.6	49.0
Follow-Up After Hospitalization for Mental Illness (FUH) (30-Day)	0 payers		78.3	70.1
Immunizations for Adolescents (Combo 2)	5 payers		29.3	36.0
Influenza Immunization	1 payer			
Metabolic Monitoring for Children and Adolescents on Antipsychotics	1 payer	Add to Medicaid Core; HEDIS 2020 Change*	40.2	37.9
Use of Imaging Studies for Low Back Pain	4 payers		82.2	76.7

*Added blood glucose and cholesterol indicators and combined the 1-5 years and 6-11 years age strata.

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Monitoring Measures



- As a reminder, Monitoring measures are intended to be used for performance tracking to ensure performance does not decline.
 - If performance does decline, the Monitoring Set measures may be reconsidered by the Taskforce for inclusion in the Core and Menu Sets.
- The next slide displays performance over time on the Monitoring measures.
- **Please indicate if you think change in performance warrants reconsideration for inclusion in the Core or Menu Sets.**



Monitoring Measure Performance



Measure	Commercial			MassHealth		
	2016	2017	2018	2016	2017	2018
Adolescent Well-Care Visits	78.0	77.6	78.3	68.5	67.8	68.6
Comprehensive Diabetes Care - HbA1c Testing	94.6	94.5	94.6	90.9	90.7	90.3
Comprehensive Diabetes Care - Medical Attention for Nephropathy	92.5	93.2	91.8	90.3	90.5	92.3
Prenatal and Postpartum Care - Timeliness of Prenatal Care	93.9	93.6	95.4	87.8	86.5	86.3
Well-Child-Visits in the 3rd, 4th, 5th, and 6th Years of Life	93.1	92.6	93.1	81.6	81.9	81.1
Well-Child Visits in the first 15 months of life (6 or more visits)	93.8	94.5	93.9	86.9	83.3	81.6

Key:

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Monitoring Measure Performance – Incidence of Episiotomy



“Incidence of Episiotomy” had a range of performance. Of the MA hospitals reporting to Leapfrog:

2017/2018*	2018/2019
<ul style="list-style-type: none"> • 24 had a rate of <5% (Leapfrog’s target) (69%) • 10 had a rate of <10% (29%) • 1 had a rate of >10 (3%) 	<ul style="list-style-type: none"> • 24 had a rate of <5% (Leapfrog’s target) (65%) • 13 had a rate of <10% (35%)
2017 National Average: 7.8% **	2018 National Average: 6.9% ***

* Data are for the 12 months ending 12/31/17 if the hospital submitted the Survey prior to 9/1, or it is for the 12 months ending 6/30/18 if the hospital submitted the Survey after 9/1. Same with the 2018/2019 data.

** Source: Leapfrog (2018). Castlight on Maternity Care.

www.leapfroggroup.org/sites/default/files/Files/leapfrog_castlight_maternity_care_FINAL.pdf

*** Source: Leapfrog (2019). Castlight on Maternity Care.

<https://www.leapfroggroup.org/maternity-care-report-2019>



Most Recent Performance on Monitoring Set Measures (cont'd)



“Contraceptive Care – Postpartum” 2016 and 2017 rates are available for MassHealth. Performance modestly improved.

Measure	2016	2017	2018
<i>Age 15-20</i>			
3 Days Most/Moderate	9.0%	8.1%	7.8%
60 Days Most/Moderate	49.6%	50.7%	49.2%
3 Days LARC	6.8%	5.7%	5.2%
60 Days LARC	25.7%	24.5%	23.1%
<i>Age 21-44</i>			
3 Days Most/Moderate	11.1%	11.5%	12.0%
60 Days Most/Moderate	44.9%	46.5%	46.8%
3 Days LARC	2.4%	2.7%	2.6%
60 Days LARC	16.2%	16.9%	16.3%

“Contraceptive Care – Postpartum” measures the percentage of woman ages 15 through 44 who had a live birth that:

1. Were provided the most effective or moderately effective (“Most/Mod”) FDA-approved methods of contraception within 3 and 60 days of delivery
2. Were provided a long-acting reversible method of contraception (LARC) within three and 60 days of delivery.



Next Meeting



■ February 28th

- Continue annual review of the Aligned Measure Set



Appendix



- References slides follow.



Core Measure Performance



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Measure	Commercial			Medicaid		
	2016	2017	2018	2016	2017	2018
Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%)	21.1	20.8	22.3	32.3	35.0	31.6
Controlling High Blood Pressure	77.2	74.1	74.3	68.4	66.3	66.7
Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment- Initiation of AOD	33.3	64.5	34.4	43.0	44.3	47.5
Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment- Engagement of AOD	12.5	15.7	12.8	17.7	19.5	18.9

Key:				
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Note: Data are not provided for: CG-CAHPS, Depression Remission and Response, Depression Remission, Depression Response, Depression Screening and Follow-up.



Menu Measure Performance (1 of 2)



Measure	Commercial			MassHealth		
	2016	2017	2018	2016	2017	2018
Asthma Medication Ratio	76.6	76.1	75.5	52.0	57.8	58.7
Breast Cancer Screening	83.8	83.3	83.1	74.1	69.6	68.5
Cervical Cancer Screening	86.1	85.4	84.2	70.6	71.5	70.8
Childhood Immunization Status (Combo 10)	73.0	70.3	71.8	51.9	52.0	50.6
Chlamydia Screening - Ages 16-24	72.9	73.7	74.2	71.5	72.3	72.1
Colorectal Cancer Screening	76.6	77.2	79.0	NA - SCO only		
Comprehensive Diabetes Care: Blood Pressure Control (<140/90 mm Hg)	80.6	76.7	76.3	72.9	71.1	69.0 ¹
Comprehensive Diabetes Care: Eye Exam	74.7	74.6	73.1	63.4	66.1	68.0
Follow-up After Emergency Department Visit for Mental Illness (7-Day)	No data	70.9	69.7	No data	78.3	76.6

Key:

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¹One MCO did not do medical record review (resulting in a rate of 0%), likely pulling down the MassHealth rate by 3-4 percentage points.

Note: Data are not provided for: Child and Adolescent Major Depressive Disorder: Suicide Risk Assessment, Continuity of Pharmacotherapy for Opioid Use Disorder, Influenza Immunization

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Menu Measure Performance (2 of 2)



Measure	Commercial			MassHealth		
	2016	2017	2018	2016	2017	2018
Follow-Up After Hospitalization for Mental Illness (30-Day)	87.9	83.7	78.3	81.7	74.9	70.1
Follow-Up After Hospitalization for Mental Illness (7-Day)	74.6	65.8	58.6	65.8	53.6	49.0
Immunizations for Adolescents (Combo 2)	15.5	23.0	29.3	20.7	33.5	36.0
Metabolic Monitoring for Children and Adolescents on Antipsychotics	39.6	38.7	40.2	37.9	39.0	37.9
Use of Imaging Studies for Low Back Pain	81.7	82.2	82.2	77.4	76.8	76.7

Key:

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Note: Data are not provided for: Child and Adolescent Major Depressive Disorder: Suicide Risk Assessment, Continuity of Pharmacotherapy for Opioid Use Disorder, Influenza Immunization

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