

MCAC 2023 Quality Update

Managed Care Quality Update

Introduction

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Overview

- ACO Quality Incentive Pool
- Hospital Quality Project
- Quality Solicitations
- ACO Collective Performance Improvement Project (PIP)
- Integrated Health Care
- Quality Measures and Why They Are Important
- Quality Measure Tracking
- Updates on HEDIS and CAHPS measures
- Questions/Comments & Contact

Quality Incentive Pool

- DHHS established a quality incentive pool for the SFY 2024 ACO contracts to support the following initiatives:
 - Increased consumer engagement
 - Emphasis on preventative care
 - Focus on quality
- Quality incentive funds are available for the ACOs to earn based on specific performance benchmarks or improvement targets for specific measures
- Measures include:
 - Member engagement (member engagement panels, member contact and reducing member barriers to access)
 - HEDIS measures (Well-Child visits and Childhood Immunizations)
 - Health Plan Accreditation
 - Data Timeliness and Accuracy

Quality Solicitations

- Managed Care Quality Contractor
 - Short and long term strategic planning on quality and reimbursement innovation
 - RFP is open for bid and closes 01/19/2024
- Population Health Management System
 - Management of CMS Core Measures Set reporting
 - RFP is open for bid and closes 12/26/2023



Hospital Quality Project

- In response to S.B. 126 Hospital Assessment Amendments (2023),
 Medicaid is developing a set of quality measures for hospitals receiving state directed payments.
- State directed payments are intended to support increased quality of and access to Medicaid services for Medicaid members.
- Hospitals will begin to submit quality measure performance data to
 Utah Medicaid in SFY 2025
- The program includes penalties for hospitals that fail to meet quality measure performance standards



ACO Collective Performance Improvement Project (PIP)

- Topic: Well Child Visits in the First 30
 Months of Life (HEDIS W30)
 - Baseline Measurement Period:
 01/01/2022 12/31/2022
 - Remeasurement #1:
 01/01/2023 12/31/2023
 - Remeasurement #2:01/01/2024 12/31/2024
- Created Well Child Visit Tracking Card
 - https://dhhs.utah.gov/up2date/educational-resources/ under Posters and Flyers

Well child visit record card



Your baby needs 11 well child checks by the time they turn 3 years old. This will help keep your child's immunizations up-to-date, make sure your child meets important milestones, and complete developmental screenings. Wellness checkups are FREE with Medicaid, CHIP, and most insurance plans.

Child's name:	 _
Date of birth:	1007
Doctor's name:	
Doctor's phone number:	

Checkups by age

Date:	
1 month old	
Date:	
2 months old	
Date:	
4 months old	
Date:	
6 months old	
Date:	

up2date.utah.go

1	upzdate.utan.gov
12 months old Date:	
15 months old Date:	
18 months old Date:	
2 years old (24 mon Date:	
2 ¹ / ₂ years old (30 m Date:	



Not sure if your child is up-to-date on their immunizations?

Call your doctor or download the free Docket app by scanning the QR code with your phone's camera

Integrated Healthcare

Benefits of integrated healthcare:

- Improved health outcomes for individuals with physical and behavioral health conditions
- Reduced fragmentation and lack of care coordination between physical and behavioral health care
- Reduced healthcare utilization (visits, admissions, length of stay) while reducing healthcare costs for members, providers, and payers
- Improved treatment adherence and reduction in perceived stigma associated with seeking behavioral health care
- Improved patient experience with enhanced care coordination

In Utah:

- Historically, Utah Medicaid has provided physical and behavioral health services separately through Accountable Care Organizations (ACOs) and Prepaid Mental Health Plans (PMHP)
- In January 2020, Utah established the Utah Medicaid Integrated Care (UMIC) plans that combined physical and behavioral health services.
- UMIC plans currently operate in 5 counties for Adult Expansion members: Davis, Salt Lake, Utah, Washington, and Weber

What are the quality measures used and why are they important?

HEDIS Measures

- Used by more than 90% of U.S. health plans
- Info used to improve care and services provided to enrollees
- Data collection & analysis led by Office of Health Care Statistics
- Comparisons between health plans

CAHPS Measures

- Performed by a 3rd party to measure perceptions of care
- Asks enrollee about experiences with health plan and services
- Health plans uses the surveys to identify strengths and weaknesses in service delivery
- Provides consumers info to help select a health plan

Managed Healthcare Quality Measures

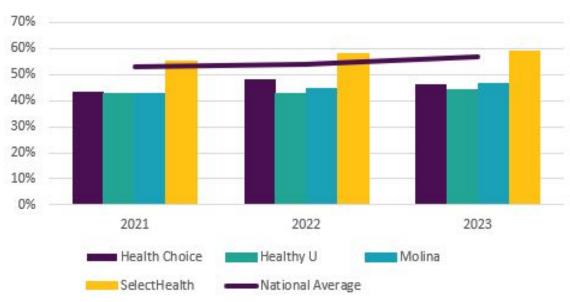
- Utah health plans required to submit HEDIS data and CAHPS survey results to promote informed consumer choice in plan selection and measure quality of care provided to enrollees (R482-12 and R428-13).
- https://stats.health.utah.g ov/about-the-data/healthplan-quality/

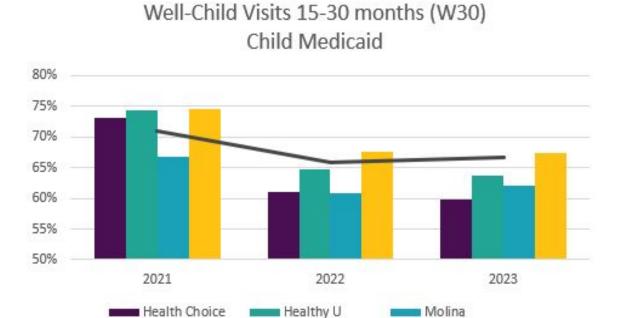


Quality Measure Tracking

- Reporting year 2023 is for 2022 calendar year data
- Data collection and analysis of Utah's HEDIS and CAHPS data is a collaborative effort led by the Office of Health Care Statistics.
- The HEDIS and CAHPS data may be viewed at
 https://stats.health.utah.gov/about-the-data/health-plan-quality/
- HEDIS and CAHPS quality measures are tracked by the Office of Managed Healthcare for Adult Medicaid, Child Medicaid, CHIP, UMIC plans, and PMHPs

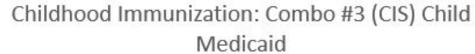


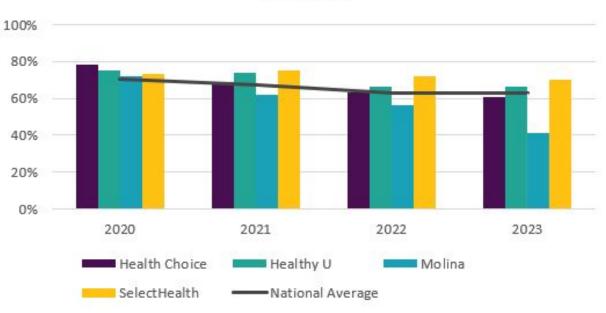




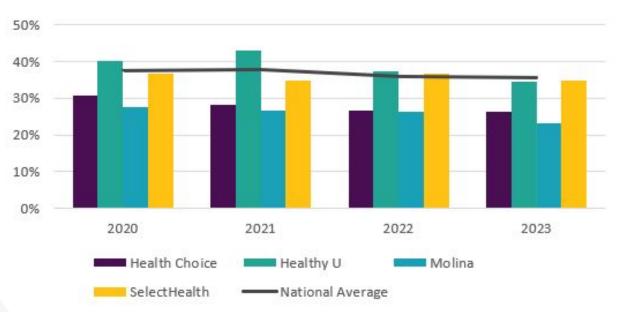
National Average

SelectHealth

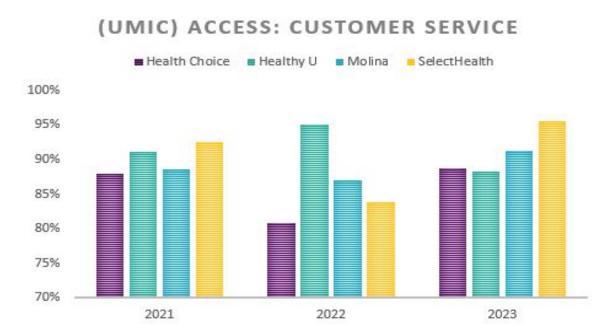








CAHPS Measures



- Surveys conducted by mail, telephone, and web (Mar-Jun 2023)
- Response rates varied between 15-20%
- To combat low response rates, sample sizes were increased in 2023

Questions/comments?



Contact Info

Medicaid Quality Team

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