



# MAC 2024 Quality Update

Managed Care Quality Update

# Introduction

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# Overview

- DIH Vision
- Collaboration with Contractors
- Managed Care Quality Strategy
- MCE Quality Work
  - ACO Quality Incentive Pool
  - 2% Withholds
  - Quality-Based Auto Assignment
  - ACO Collective Performance Improvement Project (PIP)
- Hospital Quality Project
- Quality Measures
  - National Core Set
  - Quality Measure Tracking
  - Updates on HEDIS and CAHPS measures

# Division of Integrated Healthcare Vision

- Promote the health of Utahns through innovative, cost-effective strategies.
- Address health equity and health outcomes through a focus on member experience and improved access and use of preventative services; facilitate whole-person care through integrated models that address physical, behavioral, and oral health; and where appropriate, transition fee for service payments to value based reimbursement methodologies.

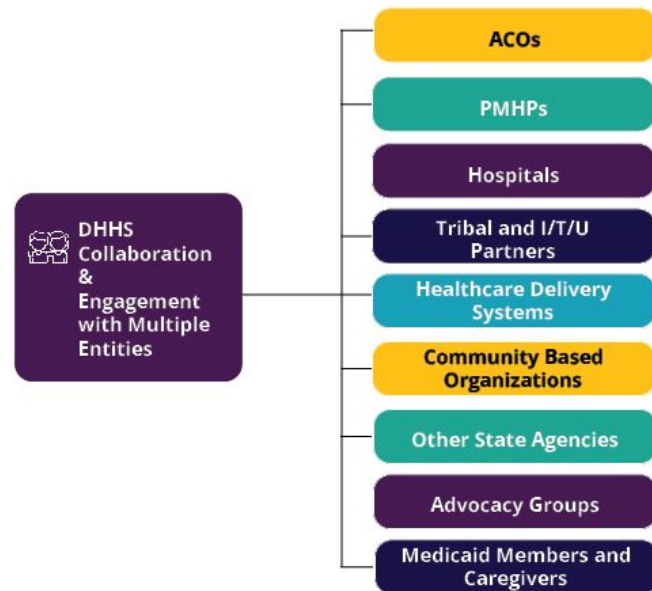
# Collaboration with Contractors

- **Managed Care Quality Contractor**
  - Short and long term strategic planning on quality and reimbursement innovation
- **Population Health Management System**
  - Management of CMS Core Measures Set reporting
  - Development of dashboards and reports to help identify opportunities to improve quality care and access to care gaps.



# Managed Care Quality Strategy

- The Utah Managed Care Quality Strategy is a 3-year strategic plan to advance quality in health care delivery and services for Medicaid and CHIP members
  - The strategy document is a comprehensive, data-driven, and stakeholder-informed approach
  - Prioritizes health equity, whole-person care, and innovative initiatives to create a more equitable and effective healthcare system.
- Main topics contained in the Quality Strategy are:
  - Stakeholder Engagement
  - Data and Reporting
  - Compliance and Oversight
- Public comment opens 01/03/24
- Public comment closes 02/03/24
- [MANAGED CARE QUALITY STRATEGY](#)



# ACO Quality Incentive Pool

- DHHS established a quality incentive pool for the SFY 2024 ACO contracts to incentivize and reward quality including in member experience and preventative care:
- Quality incentive funds were available for the ACOs to earn based on specific performance benchmarks or improvement targets for specific measures which included:
  - 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 Withholds

- In SFY 2025, DHHS added a quality based withhold of capitations to the ACO contracts to be paid based on performance on the Well-Child and Childhood Immunizations HEDIS measures utilized for the quality incentive pool
- DHHS is planning to include a similar 2% withhold for the UMIC (Utah Medicaid Integrated Care) plans for SFY 2026 and with an added focus on behavioral health measures which are still under discussion.



# ACO Quality-Based Auto Assignment

- DHHS is developing a new quality-based auto assignment methodology for new Medicaid members that are auto assigned to an ACO plan.
  - Proposed implementation date: 2026
- DHHS is exploring a mix of quality indicators to include in the methodology such as:
  - HEDIS, CAHPS, CMS Core Set measures, etc.
  - Existing quality performance measures collected by the plans
  - Other measures indicative of quality

# Hospital Quality Project

- The Hospital quality project was enacted to tie a portion of state hospital directed payments to performance on specific quality measures.
- State directed payments are intended to support increased quality of and access to Medicaid services for Medicaid members.
- The program includes penalties of up to 3% of a hospital's SFY directed payments based on their quality measure performance.
- Measure Performance Evaluation
  - Medicaid is finalizing the evaluation methodology for the quality measures for hospitals receiving state directed payments in SFY 2025.

# 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
- Outcomes:
  - Positive plan feedback on distribution streams
  - W30 rates trending upward
  - Full evaluation of the PIP topic, expected in 2025
  - Intentions to engage in another collective PIP

## 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: \_\_\_\_\_

Doctor's name: \_\_\_\_\_

Doctor's phone number: \_\_\_\_\_

### Checkups by age

[up2date.utah.gov](https://up2date.utah.gov)

1<sup>st</sup> week after they are born (3 to 5 days old)

Date: \_\_\_\_\_

1 month old

Date: \_\_\_\_\_

2 months old

Date: \_\_\_\_\_

4 months old

Date: \_\_\_\_\_

6 months old

Date: \_\_\_\_\_

9 months old

Date: \_\_\_\_\_

12 months old

Date: \_\_\_\_\_

15 months old

Date: \_\_\_\_\_

18 months old

Date: \_\_\_\_\_

2 years old (24 months)

Date: \_\_\_\_\_

2<sup>1/2</sup> years old (30 months)

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

# National Quality Standards - Medicaid/CHIP Core Set

## Core Set of Adult Health Care Quality Measures for Medicaid and CHIP

- An Adult set and Child set
- Health care domains assessed:
  - Primary Care Access and Preventive Care
  - Maternal and Perinatal Health
  - Care of Acute and Chronic Conditions
  - Behavioral Health Care
  - Experience of Care (CAHPS®)
  - Dental and Oral Health Services (*Child set only*)
  - Long-Term Services and Supports (*Adult set only*)

# National Quality Standards - Future Reporting

Upcoming CMS measurement standardization initiatives aim to improve the ability to make apples-to-apples comparisons between states and ACOs:

- Mandatory Core Set Reporting Requirements (2024)
- Medicaid Quality Rating System (MACQRS) - Proposed Rule, 2023
- Beginning in FY 2024, states will be required to report on all measures in the Child Core Set and behavioral health measures in the Adult Core Set (Mandatory Core Set Reporting Requirements).

# 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 use the surveys to identify strengths and weaknesses in service delivery
- Provides consumers info to help select a health plan



## Managed Healthcare Quality Measures

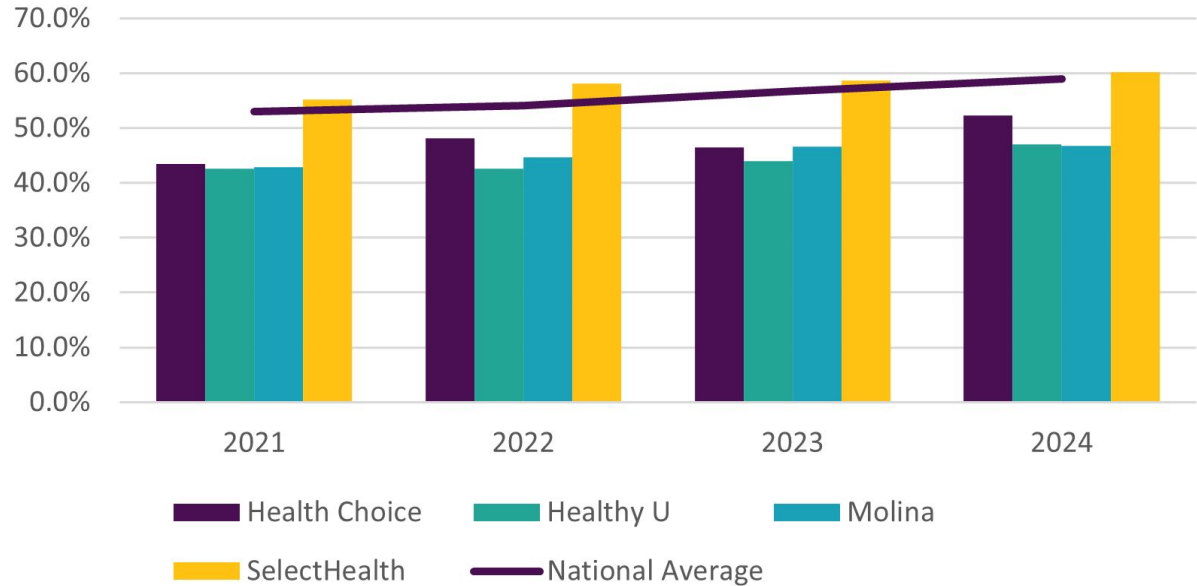
- Utah health plans are required to submit HEDIS data and CAHPS survey results to promote informed consumer choice in plan selection and measure quality of care provided to enrollees (R482-12 and R428-13).
- <https://stats.health.utah.gov/about-the-data/health-plan-quality/>

# Quality Measure Tracking

- HEDIS and CAHPS quality measures are tracked by the Office of Managed Healthcare for Adult Medicaid, Child Medicaid, CHIP, UMIC plans, and PMHPs
  - Reporting year 2024 is for 2023 calendar year data
- Data collection and analysis of Utah's HEDIS and CAHPS data is currently a collaborative effort between the Office of Health Care Statistics (OHCS), and the Office of Managed Healthcare.
  - Annual HEDIS data and audit reports are submitted by plans to OHCS
  - OHCS manages the collection of CAHPS surveys through the state's preferred vendor
  - OHCS posts the health plan HEDIS and CAHPS data at <https://stats.health.utah.gov/about-the-data/health-plan-quality/>

# Child ACO HEDIS Measures

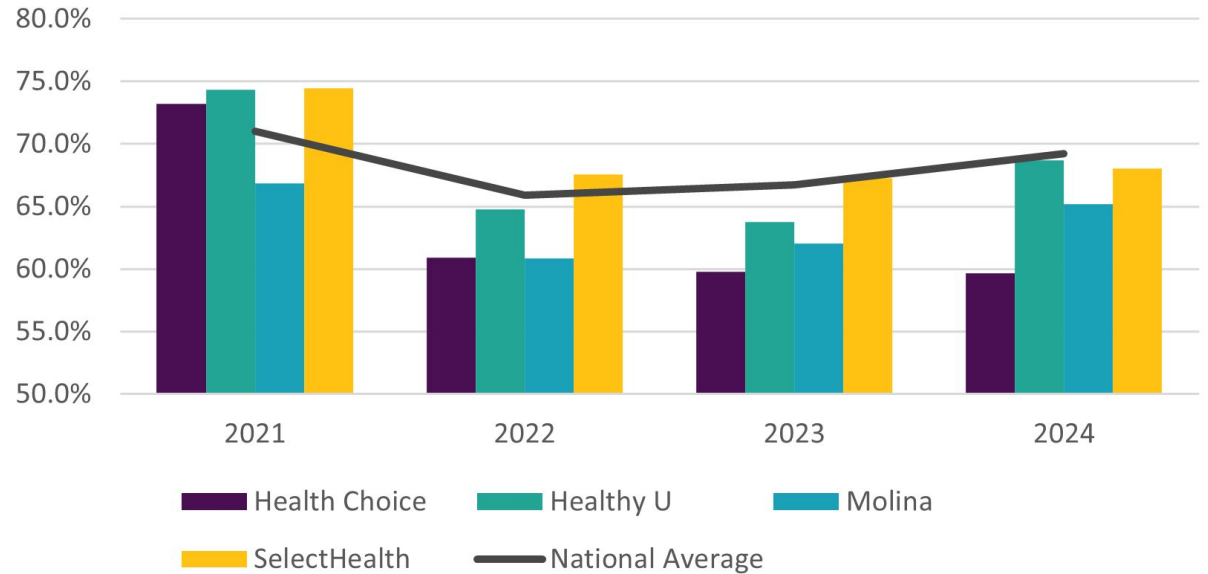
## Well-Child Visits first 15 months (W30) Child Medicaid





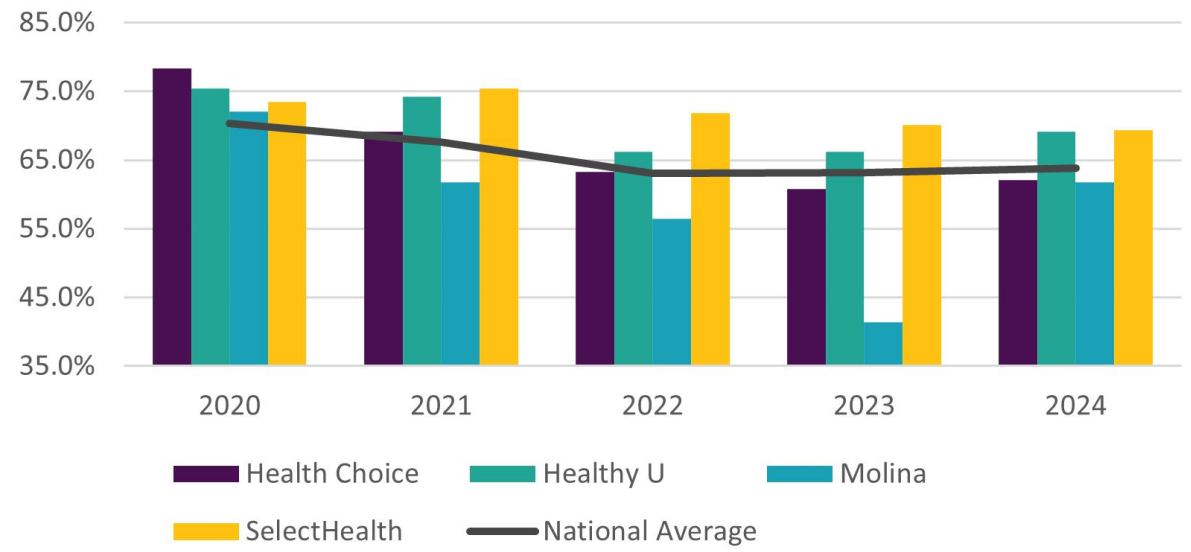
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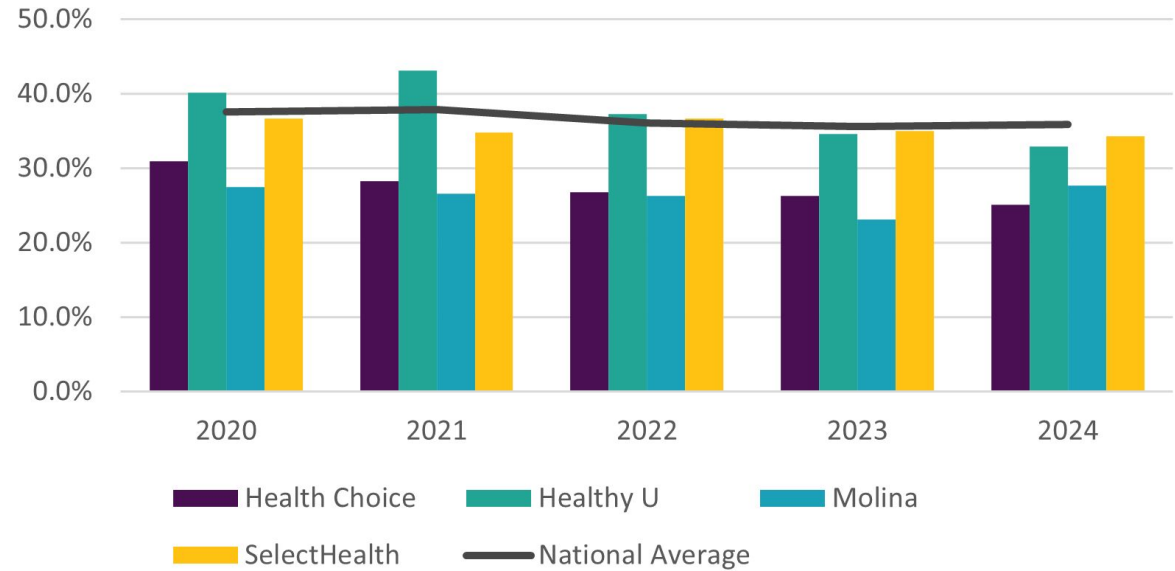
# Child ACO HEDIS Measures

## Childhood Immunization: Combo #3 (CIS) Child Medicaid



# Child ACO HEDIS Measures

## Immunizations for Adolescents (IMA) - Combo #2 Child Medicaid



Questions/comments?



# Contact Info

## Medicaid Quality Team

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