

**AHCCCS Targeted Investments Program**

# **Peds B Quality Improvement Collaborative**

**William Riley, PhD  
George Runger, PhD**

**Session #2  
March 25<sup>th</sup>, 2020**

# Disclosures

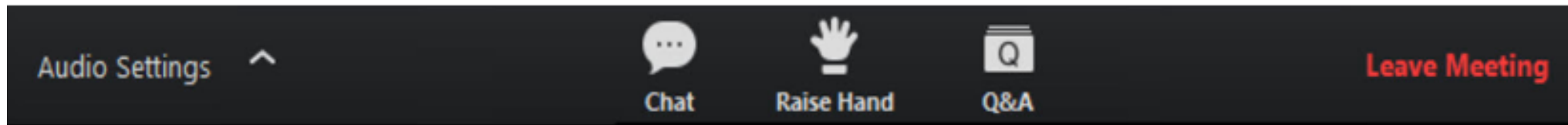
There are no disclosures for this presentation

# Attendance

- To track attendance, please ensure clinical and administrative representative log-in separately by computer via the link provided in the invite

# QIC Participation

- All participants will be automatically muted when joining the Zoom webinar
- All questions should be directed to the Q&A box
- If a participant would like to speak or we are requesting verbal participation, select “raise hand” to be unmuted
- Will have polling questions within the presentation



# Agenda

| TIME                | TOPIC  | PRESENTER     |
|---------------------|--|---------------|
| 11:30 AM – 11:35 AM | Virtual QIC Participation  | Kailey Love   |
| 11:35 AM – 12:20 PM | Review FY 2019 Performance <ul style="list-style-type: none"><li>• Peer Learning</li><li>• Failure Modes</li></ul> | William Riley |
| 12:20 PM – 12:30 PM | Explanation of Attribution Methodologies & Target Setting Process  | George Runger |
| 12:30 PM – 12:55 PM | Q&A Session  | QIC Team      |
| 12:55 PM – 1:00 PM  | Next Steps <ul style="list-style-type: none"><li>• Post Event Survey</li></ul>                                     | Kailey Love   |

# ASU QIC Team



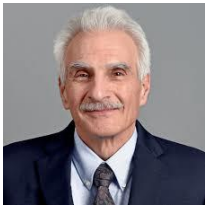
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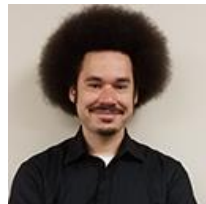
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Medical Director  
Mercy Care



Neil Robbins, PhD  
Data Scientist Specialist  
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# Peds B QIC Organizations

## Peds B QIC Organizations











|                                    |                                 |  |
|------------------------------------|---------------------------------|--|
| DOC MARTINS INC                    | PINAL HISPANIC COUNCIL          | WEST YAVAPAI GUIDANCE CLINIC INC               |
| WEE CARE FAMILY CLINIC             | AL SHAAFI MEDICAL PC            | LA FRONTERA CENTER INC                         |
| AINSWORTH CONSULTING GROUP LLC     | JOSE FRANCISCO CARRAZCO MD      | EBONY HOUSE INC                                |
| SKYLINE PEDIATRICS PROFESSIONA     | CLINICA HISPANA OF WEST VALLEY  | SOUTHWEST BEHAVIORAL HEALTH SERVICES INC       |
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| SOUTHWEST NETWORK INC              | PLEASANT PEDIATRICS PLC         | ALBERT S CALLIE MD PC dba CALLIE PEDIATRIC, PC |
| HEALING HEARTS PEDIATRIC PLC       | ARBOR MEDICAL PARTNER LLC       | MICHAEL B BAYLESS & ASSOC                      |
| PENDLETON PEDIATRICS PC            | ASSURANCE HEALTH AND WELLNESS   | HORIZON HEALTH & WELLNESS INC                  |
| BETHESDA PEDIATRICS OF QUEEN CREEK | SJHMC PHYSICIAN SERVICES        | INTERMOUNTAIN CENTERS FOR HUMAN DEVELOPMENT    |
| INTERMOUNTAIN HEALTH CENTER        | SUMMIT HEALTHCARE ASSOCIATION   | EASTER SEALS BLAKE FOUNDATION                  |

# Learning Objectives





1. Use trend analysis to evaluate milestone performance.
2. Identify causes for performance.
3. Explain target setting for milestone performance.
4. Apply attribution methodologies.



## Year 4 Measures-Pediatric Primary Care

| Chosen Performance Measure  | Measure Description   | Measure Weighting | Measure Targets | Measure Sets  |
|---|---|-------------------|-----------------|---|
| Well child visits in third, fourth, fifth and sixth years of life | Percentage of children ages 3 to 6 who had one or more well-child visits with a primary care practitioner (PCP) during the measurement year.  | TBD               | TBD             |     |
| Adolescent well-care visits                                       | Percentage of adolescents ages 12 to 21 who had at least one comprehensive well-care visit with a primary care practitioner (PCP) or an obstetric/gynecologic (OB/GYN) practitioner during the measurement year.  | TBD               | TBD             |      |
| Well-child visits in the first 15 months of life                  | <p>Percentage of children who turned 15 months old during the measurement year and who had the following number of well-child visits with a primary care practitioner (PCP) during their first 15 months of life:</p> <ul style="list-style-type: none"> <li>--No well-child visits</li> <li>--One well-child visit</li> <li>--Two well-child visits</li> <li>--Three well-child visits</li> <li>--Four well-child visits</li> <li>--Five well-child visits</li> <li>--Six or more well-child visits</li> </ul> | TBD               | TBD             |      |

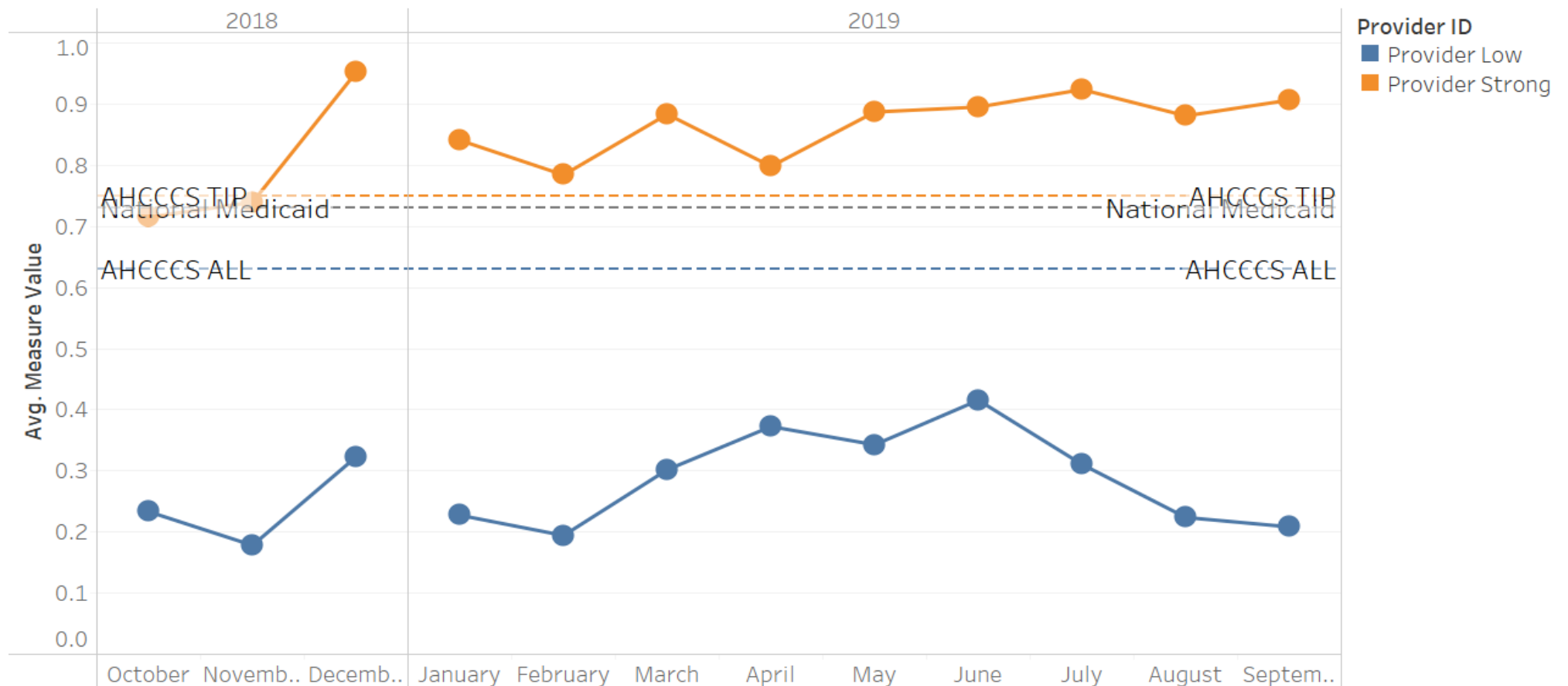
### Measure Sets Key (Hyperlinked)

| CMS Core Set<br><a href="#">Peds</a>  | <a href="#">CMS<br/>ScoreCard</a>   | <a href="#">Statewide<br/>(STCs)</a>  | <a href="#">NCQA<br/>HEDIS™</a>   |
|---|---|---|---|
|  |  |  | 9  |

# PCP Well-Child Visits Ages 3-6 2019 Trends (FY Oct –Sept)

- National Medicaid (2017) = 0.73
- AHCCCS All (2019) = 0.63
- AHCCCS TIP (2019) = 0.75

Patient(s) 3 - 6 years of age that had one well-child visit with a PCP in the last 12 reported months.



## **Dr. LOW**

### **Failure Modes Analysis**








#### **Peds PCP: Well-child Visits Ages 3-6 (FY 2019)**

1. From your experience, please select the most likely reason for the low performance by Dr. Low's clinic
  - a. Appointment cancelled and not rescheduled
  - b. No appointment made for the annual visit by parents/guardians
  - c. Dr. Low examined the patient, but it was not coded
  - d. No clinic outreach process to contact parent/guardians for visit
  - e. The assignment of the patient was not known by Dr. Low's clinic
  - f. Other: Please select and specify in Q&A box

# Performance Management Questions





- Process Stability
  - What type of variation is present?
    - Common Cause or Special Cause
- Process Capability
  - Performance of stable process
- Process Acceptability
  - Is milestone target met?

## Year 4 Measures- Pediatric Behavioral Health

| Chosen Performance Measure  | Measure Description   | Measure Weighting | Measure Targets | Measure Sets  |
|---|---|-------------------|-----------------|---|
| Pediatric follow-up after hospitalization for mental illness ages 6-17 (30 - Day) | Percentage of discharges for children ages 6 to 17 who were hospitalized for treatment of selected mental illness or intentional self-harm diagnoses and who had a follow-up visit with a mental health practitioner.<br><br>--Percentage of discharges for which the child received follow-up within 30 days after discharge | TBD               | TBD             |    |
| Pediatric follow-up after hospitalization for mental illness ages 6-17 (7 - Day)  | Percentage of discharges for children ages 6 to 17 who were hospitalized for treatment of selected mental illness or intentional self-harm diagnoses and who had a follow-up visit with a mental health practitioner.<br><br>--Percentage of discharges for which the child received follow-up within 7 days after discharge  | TBD               | TBD             |    |
| Metabolic monitoring for children and adolescents on antipsychotics               | Assesses the percentage of children and adolescents with ongoing antipsychotic medication use who had metabolic testing during the year.  | TBD               | TBD             |    |



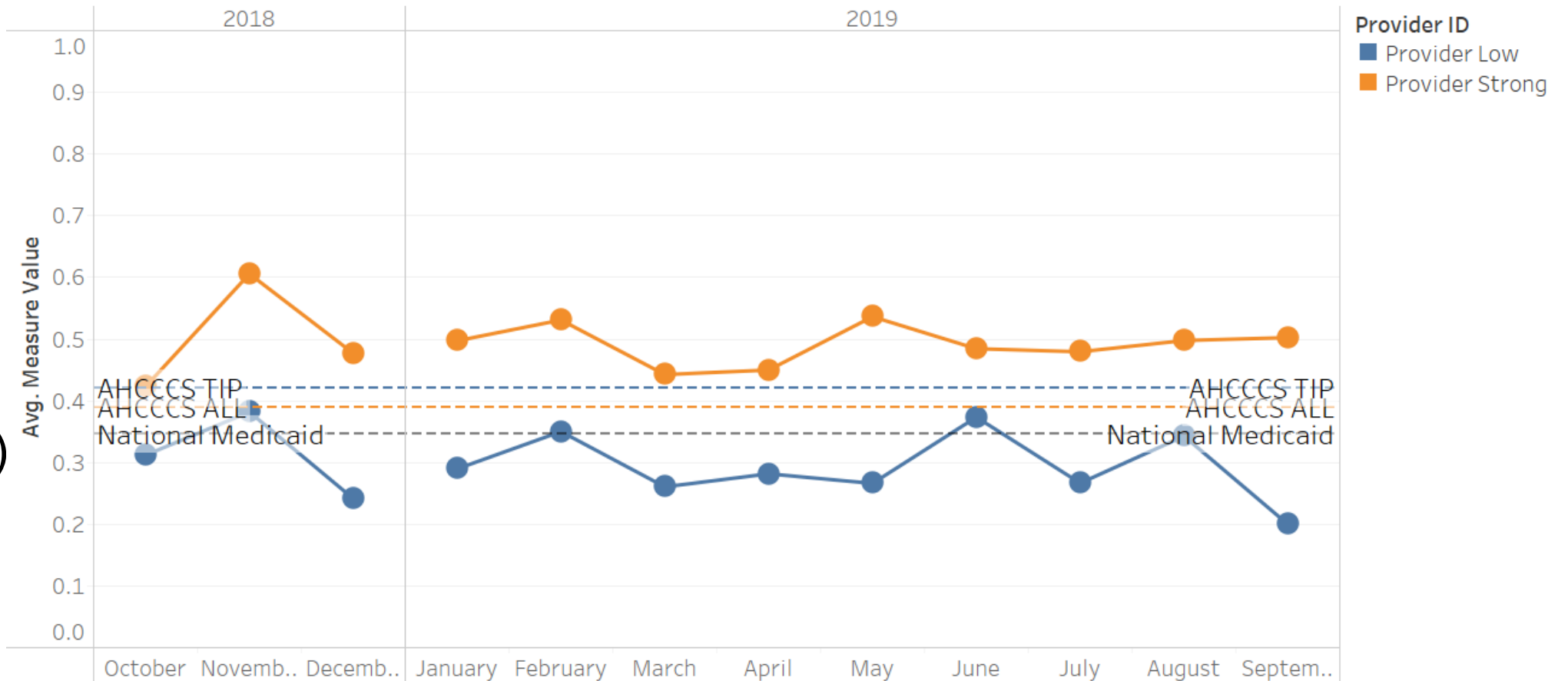
### Measure Sets Key (Hyperlinked)

| CMS Core Set <a href="#">Peds</a>   | <a href="#">CMS ScoreCard</a>   | <a href="#">Statewide (STCs)</a>  | <a href="#">NCQA HEDIS</a>   |
|---|---|---|--|
|  |  |  | 15  |

# BH Metabolic Screening 2019 Trends (FY Oct –Sept)

- National Medicaid (2017) = 0.35
- AHCCCS All (2019) = 0.39
- AHCCCS TIP (2019) = 0.42

Patient(s) 1 - 17 years of age who had two or more antipsychotic medications and had metabolic monitoring during the 12 month report period.



**Dr. STRONG**

## **Failure Modes Analysis**

### **Peds BH: Well-child Visits Ages 3-6 (FY 2019)**

4. What is the most likely reason for the low performance by Dr. Low's clinic?

Please insert your response in the Q&A box (located at the bottom of the screen in the middle)

# Performance Measurement

- A number of measures and methods to evaluate health care performance, e.g.,
  - NCQA HEDIS (Healthcare Effectiveness Data and Information Set), CMS Core Set, Joint Commission, AHCCCS state
- Administrative data measures are (more) easily handled
- Not all measure sets the same
  - But all TIP measures are a subset of the HEDIS set



# Performance Measurement

- Measures often calculated as a **numerator/denominator**
  - *Example: Patient(s) 3 - 6 years of age that had one well-child visit with a PCP in the last 12 reported months.*
  - Each child 3-6 enters denominator and a child enters numerator only if care is received and documented in claim
- But many **details** in measure calculations
  - Rules for continuous enrollment, Provider type and specialty, Dates of services, Retroactive enrollment, Period of performance, Claims lag, etc.,
  - ...and Measure details change periodically
- HEDIS measures computed with NCQA certified software

# TIP Measures

- Typically computed over a year period of performance (or longer)

- *Patient(s) 3 - 6 years of age that had one well-child visit with a PCP in the last 12 reported months.*

- Computed with year-ending at a month

- 12 month rolling average

Aug 1, 2019.....July 31, 2020



Sept 1, 2019.....Aug 31, 2020

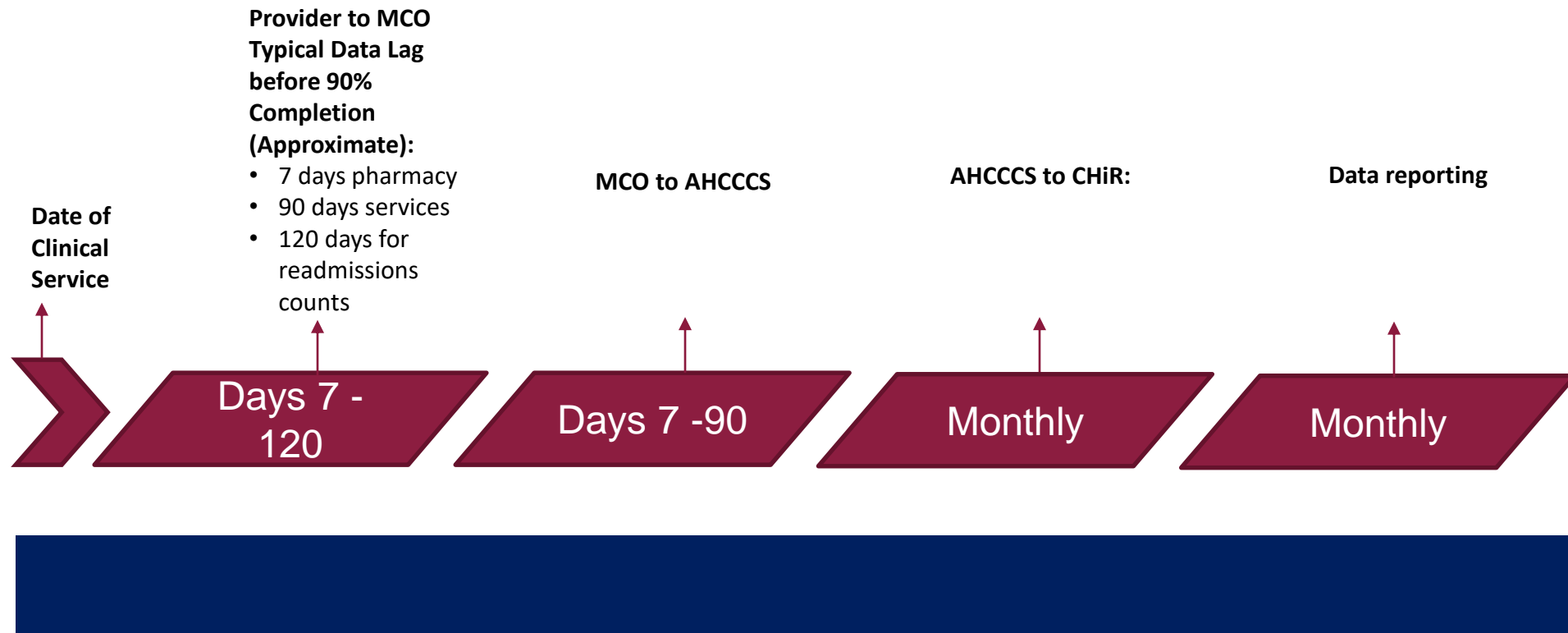


Oct 1, 2019.....Sept 30, 2020



TIP Year 4

# Example Timeline from Clinical Service to Your Performance Report



# HEDIS Resources

- Care 1st
  - General resource page: <https://www.care1staz.com/az/providers/qualitymanagment.asp>
    - At-a-glance guides for Key Pediatric Measures, Key Behavioral Measures (17 and younger), and Key Behavioral Measures (18 and older) provide CPT and ICD-10 codes for all of the TIP measures.
- Mercy Care Plan
  - General resource page: <https://www.mercycareaz.org/providers/advantage-forproviders/hedis>
    - *2019 HEDIS Billing Guide and Tips* contains codes for all TIP measures except metabolic monitoring of adolescents, and initiation of alcohol/drug dependence treatment.
  - The following two guides from 2017 (not listed on resource page above) contain codes for all the TIP measures:
    - HEDIS tips for PCPs: <https://www.mercycareaz.org/assets/pdf/acc-providers/ref-materials/HEDIS-Tips-for-PCPs%20MC%20UA.pdf>
    - Tips for BH measures: <https://www.mercycareaz.org/assets/pdf/acc-providers/ref-materials/HEDIS-Tips-for-Behavioral-Health-Measures%20MC%20UA.pdf>
- United Healthcare
  - Reference guide for adult health: <https://www.uhcprovider.com/content/dam/provider/docs/public/reports/path/PATH-Reference-Guide-for-Adult-Health.pdf>
  - Reference guide for pediatric health: <https://www.uhcprovider.com/content/dam/provider/docs/public/reports/path/PATH-Reference-Guide-for-Pediatric-Health.pdf>
- NCQA <https://www.ncqa.org/hedis/>

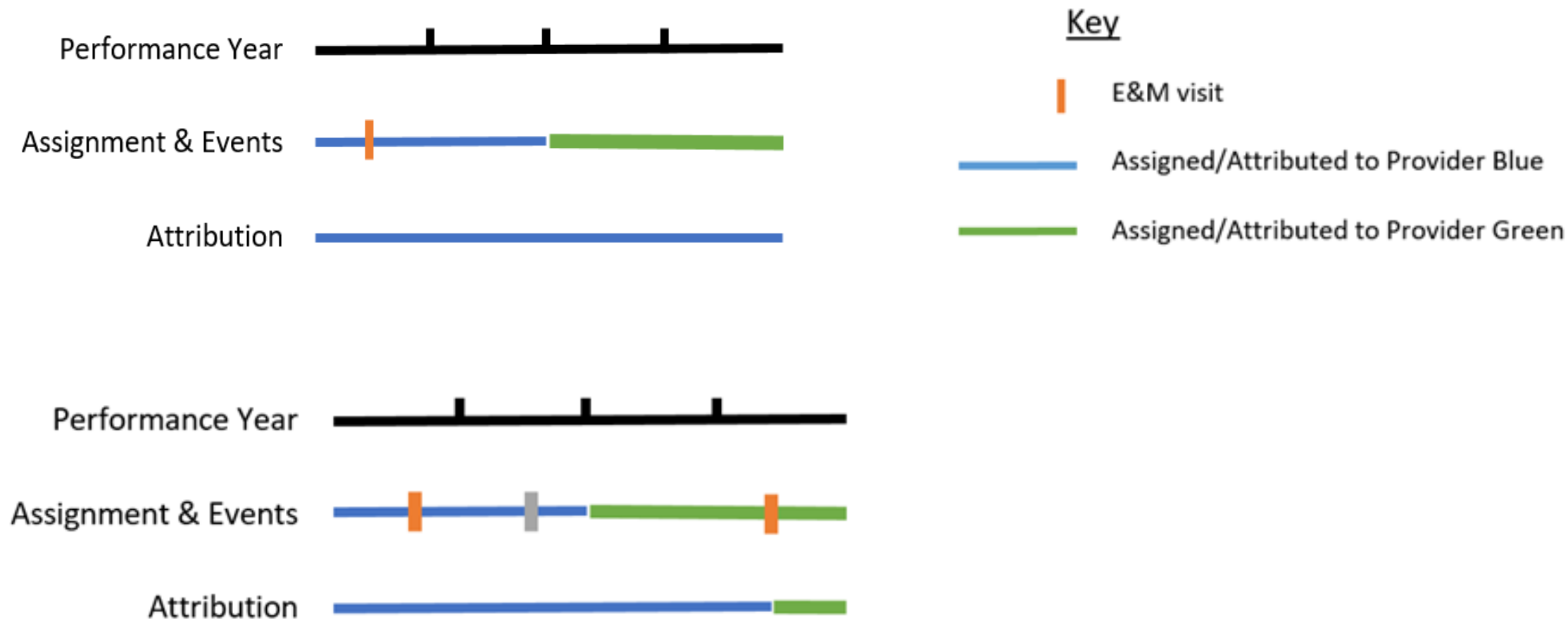
# Assignment and Attribution

- **Assignment** by health plans link members to PCPs within 30 days of enrollment
  - Facilitate, coordinate care of member
  - Performance measures often based on provider “responsible” for member care
  - But members might obtain services elsewhere, or not seek services within the performance period
- **Attribution** is used to account for the provider most closely associated with the member’s care
  - TIP performance based on member (or episode) attribution

# PCP Attribution Methodology

1. Did Member have a physical examination or assessment by one of the PCP specialties **and** PCP assigned via enrollment?
  - If Yes, Member is attributed to assigned PCP.
2. Did Member have a physical examination or assessment by **any physician** with one of the PCP specialties? Non-physician specialties (e.g., physician assistant) do not qualify.
  - If Yes, Member is attributed to PCP seen. If more than one physical examination or assessment, use most recent.
3. Did Member have an ambulatory or nursing facility visit or professional supervision service by one of the PCP specialties **and** PCP assigned via enrollment?
  - If Yes, Patient is attributed to assigned PCP.
4. Did Member have any ambulatory visits, nursing facility visits, or professional supervision services by one of the PCP specialties?
  - If Yes, Member is attributed to PCP seen for the largest number of visits (any combination of these visit types). The most recent visit breaks ties.
5. Did Member have a prenatal, postpartum, or antepartum visit, or routine obstetrical care service performed by one of the PCP specialties **and** PCP assigned via enrollment?
  - If Yes, Member is attributed to assigned PCP.
6. Did Member have any prenatal, postpartum, or antepartum visit, or routine obstetrical care service by one of the PCP specialties?
  - If Yes, Member is attributed to PCP seen for the largest number of these visit types. The most recent visit breaks any ties.
7. Member is attributed to PCP assigned **via** enrollment. The PCP can be any specialty.

# Attribution Examples



# PCP TIP Performance

- TIP performance is calculated at the **provider group (TIN)** level
  - *Patient(s) that had five well-child visits with a PCP during the first 15 months of life.*
  - If well child examinations performed by Nurse Practitioner Jones in visits 1-5 and Dr. Smith in visit 6, child is in numerator
- Attribute **members** to the provider group
  - All measures for member associated with provider group



# PCP Performance

- TIP performance calculated from numerators, denominators, and attribution in September, 2020
  - Monthly QIC performance calculated similarly from numerators, denominators, and attribution for year ending in month
  - Observe and improve based on trends over times

# Behavioral Health (BH) Performance

- *Example: Patient(s) 1 - 17 years of age who had two or more antipsychotic medications and had metabolic monitoring during the 12 month report period.*
- Social Worker (or Psychologist) manages the active episode of care (ex: schizophrenia)
- Without prescription privileges, a Psychiatric RN or Psychiatrist prescribes the antipsychotic
- Prescriber might only see the patients once ever 6 months while the SW/Psychologist sees them on weekly or bi-weekly

# Behavioral Health (BH) Performance

- *Example: Patient(s) 6 - 17 years of age hospitalized for mental illness or intentional self-harm that had a follow-up encounter with a mental health practitioner within 30 days after discharge.*
- Not guaranteed to be in an active episode preceding the hospitalization, thus not necessary have an established BH provider

# BH Attribution (Draft)

- **Draft Awaiting Final Approval**
- Attribution is at the episode level to **all** BH providers in episode
- BH attribution is at the episode/measure level to possibly more than one entity
  - *Example: Patient(s) 1 - 17 years of age who had two or more antipsychotic medications and had metabolic monitoring during the 12 month report period.*
  - Social Worker (or Psychologist), Psychiatric RN or Psychiatrist who prescribes the antipsychotic

# BH Attribution (Draft)

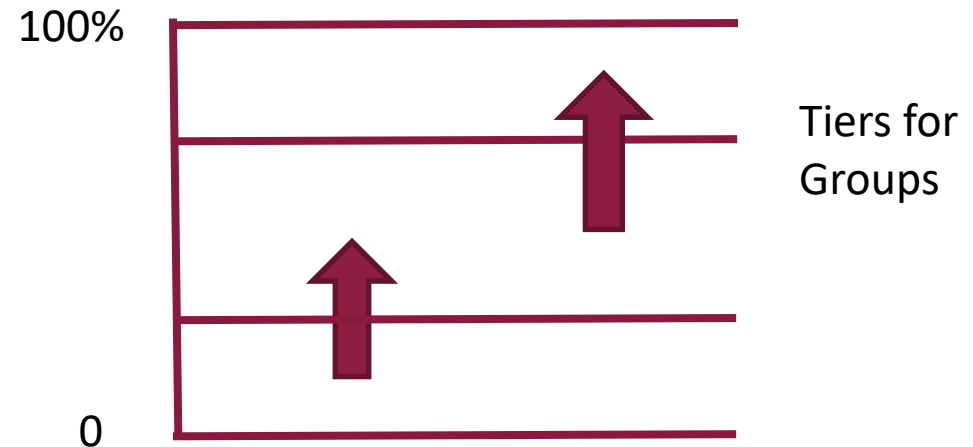
- **Draft Awaiting Final Approval**
- Attribution is at the episode level to **all** BH providers in episode
  - *Example: Patient(s) 6 - 17 years of age hospitalized for mental illness or intentional self-harm that had a follow-up encounter with a mental health practitioner within 30 days after discharge.*
  - Attribute to providers for which there is a follow up within the required window (alternative is at any point in the report period)
  - Attribute to BH providers in a window of **N days prior** to the hospitalization

# Target Setting Process

- Objectives
  - Foster cooperation among participants
  - Incentivize everyone to succeed
- For state level measures, general recommendations at <https://www.medicaid.gov/state-resource-center/>
- Improvement goals versus external (or absolute) goals compare
  - Percentage improvement from baseline, previous performance
  - External targets from similar reporting entities, e.g., AHCCCS or national Medicaid performance, or over time
    - E.g., a vaccination coverage rate among children greater than 80%
  - Goals to encourage performance improvement

# Performance Measurement Targets

- Blend methods with a Tier System
  - Typically 3-5 tiers
- Performance of Group to improve from tier in baseline to higher tier in period of performance to meet incentive (top tier to maintain)
- Tier boundaries set from AHCCCS baseline performance period in aggregate
  - Absolute boundaries between tiers



# **Q&A**

- Please insert any questions in the Q&A box



# Next Steps

- Next Steps
  - Post-Event Survey: 2 Parts
    - General Feedback Questions
    - Continuing Education Evaluation
  - Continuing Education will be awarded post 2020 QIC session (November 2020)
- Questions or concerns?
  - Please contact ASU QIC team at [TIPQIC@asu.edu](mailto:TIPQIC@asu.edu) if questions or concerns regarding performance data

# Post-Event Survey



Support English ▾

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# Thank you!

[TIPQIC@asu.edu](mailto:TIPQIC@asu.edu)

# PCP Provider Types/Specialties:

## General Practice – Physician, Allied & Clinic Types

| Provider Type |  | Provider Specialty |                       |
|---------------|--|--------------------|-----------------------|
| Code          | Description                              | Code               | Description           |
| 08            | MD-Physician                             | 050                | Family Practice       |
| 31            | DO-Physician Osteopath                   |                    |                       |
| 08            | MD-Physician                             | 055                | General Practice      |
| 31            | DO-Physician Osteopath                   |                    |                       |
| 08            | MD-Physician                             | PCP                | Primary Care Provider |
| 31            | DO-Physician Osteopath                   |                    |                       |
| 08            | MD-Physician                             | 060                | Internal Medicine     |
| 31            | DO-Physician Osteopath                   |                    |                       |
| 18            | Physicians Assistant                     | 000                | Any/None              |
| 19            | Registered Nurse Practitioner            |                    |                       |
| IC            | Integrated Clinics                       |                    |                       |
| C2            | Federally Qualified Health Center (FQHC) |                    |                       |
| 29            | Community/Rural Health Center            |                    |                       |

- Different provider types/specialties can apply for other HEDIS measure
- Full list will be available on project website

# PCP Provider Types/Specialties:

## OB-GYN – Physician & Allied

| Provider Type |                               | Provider Specialty |                               |
|---------------|-------------------------------|--------------------|-------------------------------|
| Code          | Description                   | Code               | Description                   |
| 08            | MD-Physician                  | 089                | Obstetrician and Gynecologist |
| 31            | DO-Physician Osteopath        |                    |                               |
| 08            | MD-Physician                  | 091                | Obstetrician                  |
| 31            | DO-Physician Osteopath        |                    |                               |
| 08            | MD-Physician                  | 090                | Gynecologist                  |
| 31            | DO-Physician Osteopath        |                    |                               |
| 08            | MD-Physician                  | 958                | Gynecological Oncology        |
| 31            | DO-Physician Osteopath        |                    |                               |
| 08            | MD-Physician                  | 092                | Maternal and Fetal Medicine   |
| 31            | DO-Physician Osteopath        |                    |                               |
| 09            | Certified Nurse-Midwife       | 000                | Any/None                      |
| 19            | Registered Nurse Practitioner | 095                | Women's HC/OB-GYN NP          |

- Different provider types/specialties can apply for other HEDIS measure
- Full list will be available on project website

# PCP Provider Types/Specialties:

## Pediatric- and Adolescent-specific types

| Provider Type |                        | Provider Specialty |                                      |
|---------------|------------------------|--------------------|--------------------------------------|
| Code          | Description            | Code               | Description                          |
| 08            | MD-Physician           | 150                | Pediatrician                         |
| 31            | DO-Physician Osteopath |                    |                                      |
| 08            | MD-Physician           | 176                | Adolescent Medicine                  |
| 31            | DO-Physician Osteopath |                    |                                      |
| 08            | MD-Physician           | 880                | Pediatric - Behavioral/Developmental |
| 31            | DO-Physician Osteopath |                    |                                      |
| 08            | MD-Physician           | *                  | *                                    |
| 31            | DO-Physician Osteopath |                    |                                      |

\* Additional pediatric specialties are under review.

- Different provider types/specialties can apply for other HEDIS measure
- Full list will be available on project website

# Mental Health Practitioner Provider Types and Specialties:

## Physicians

| Provider Type |                        | Provider Specialty |                              |
|---------------|------------------------|--------------------|------------------------------|
| Code          | Description            | Code               | Description                  |
| 08            | MD-Physician           | 191                | Pediatric - Psychiatrist     |
| 31            | DO-Physician Osteopath |                    |                              |
| 08            | MD-Physician           | 192                | Psychiatrist                 |
| 31            | DO-Physician Osteopath |                    |                              |
| 08            | MD-Physician           | 189                | Psychosomatic Medicine       |
| 31            | DO-Physician Osteopath |                    |                              |
| 08            | MD-Physician           | 965                | Psychoanalysis               |
| 31            | DO-Physician Osteopath |                    |                              |
| 08            | MD-Physician           | 195                | Psychiatrist and Neurologist |
| 31            | DO-Physician Osteopath |                    |                              |

- Different provider types/specialties can apply for each HEDIS measure
  - Additional types/specialties are in progress for whether they qualify
- Full list will be available on project website

# Mental Health Practitioner Provider Types and Specialties:

## Allied & Clinics

| Provider Type |  | Provider Specialty |                                       |
|---------------|--|--------------------|---------------------------------------|
| Code          | Description  | Code               | Description                           |
| A4            | Licensed independent Substance Abuse Counselor (LISAC) | 000                | Any/None                              |
| 85            | Licensed Clinical Social Worker (LCSW)                 |                    |                                       |
| 11            | Psychologist   |                    |                                       |
| 86            | Licensed Marriage & Family Therapist (LMFT)            |                    |                                       |
| 87            | Licensed Professional Counselor (LPC)                  |                    |                                       |
| 88            | School Based Guidance Counselor                        |                    |                                       |
| 89            | School Based Certified School Psychologist             |                    |                                       |
| IC            | Integrated Clinics                                     |                    |                                       |
| C2            | Federally Qualified Health Center (FQHC)               |                    |                                       |
| 77            | BH Outpatient Clinic                                   |                    |                                       |
| 19            | Registered Nurse Practitioner                          | 098                | Psyc/Mental Health Nurse Practitioner |

- Different provider types/specialties can apply for each HEDIS measure
  - Additional types/specialties are in progress for whether they qualify
- Full list will be available on project website