AHCCCS Targeted Investments Program

Orientation to Provider Measure View Dashboard

Center for Health Information and Research (CHiR)

March 4, 2021





Targeted Investments



Introduction

- These slides will help orient you to the dashboard and help you make the most of the information it provides
- Need guidance on how to access your dashboard?
 - Please find the tutorial on <u>www.TIPQIC.org</u>
- Questions or concerns?
 - Please contact ASU QIC team at <u>TIPQIC@asu.edu</u> if questions or concerns regarding performance data

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95.00%		93.8%	95.3%	95.3%	95.5%	93.6%	95.3%		93.8%	5 115 70		95.0%
93	3.2%		93.7%	93.5%	93.8%		93.3%	93.6%		93.7%	94.0%	93.3% Year 5 Target: 92%
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90.00%	Year 41	arget: 90%										•



Provider ID Methodology Change: In Year 4, attribution was done at the level of billing provider ID. Members from non-TI sites that used a Ti-participating billing ID were included and this led to non-TI members being included in TI denominators during attribution. In Year 5, attribution is done at the level of billing and servicing provider ID. This adds more granularity to the data analysis and a greater ability to exclude members seen at non-TI sites. This change may impact attributed members (denominator) as well as measure compliance (numerator). The revised methodology was accounted for in setting the Year 5 targets. More information will be shared via email and posted to www.TIPQIC.org soon.

TIPQIC@asu.edu | www.TIPQIC.org

Assignment file used: PCP Attribution uses an assignment file mapped to Group ID. The 09/2019 assignment files used for report periods ending 08/2020 and earlier, and the 09/2020 assignment file for report period ending 09/2020 (i.e., TI Year 4 year-end performance). We plan to start using more recent assignment files.

Explore / TIPQIC - Provider Dashboard / Provider Dashboard / Provider Measure View 3/2								
Provider Measure View Provider Summary View	Easily toggle between	Download						
TIPQIC Dashboard	dashboards	TIP QIC Quality Improvement Collaborative						

Use the filters to see vour performance on each measure. Click Download to export this view as an image, PDF or PowerPoint file. Please contact us at TIPQIC@asu.edu with questions or comments.

Select	1. Provider		2. Area of Concentration		3. Measure	
Filters:	Provider Blue	•	PEDS BH	•	Follow-Up After Hospitalization for Mental Illness: 6-17 Years (30-day)	•

Performance on Measure (Each month is a 12-month report period)

Provider Blue vs. Providers in same Area of Concentration





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	93.2%		93.7%	93.5%	93.8%		93.3%	93.6%		93.7%	94.0%	93,3% Year 5 Target: 92%
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11-2019 12-2019 01-2020 02-2020 03-2020 04-2020 05-2020 06-2020 07-2020

85.00%

Provider ID Methodology Change

09-2020

10-2020 11-2020

08-2020

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Provider Me	asure View Provider Summary View		Select one of the measures. Only the measures associated with the selected Area of Concentration and that have a				
TIPQ	IC Dashboard		denominator greater than zero will be available in the				
Use the filters or comments.	to see vour performance on each measure. Click Do	wnload to export this view as an ima	dropdown menu. You can switch between measures here.				
Select	1. Provider	2. Area of Concentration	3. Measure				
Filters:	Provider Blue 🔻	PEDS BH 🔹	Follow-Up After Hospitalization for Mental Illness: 6-17 Years (30-day)				

Performance on Measure (Each month is a 12-month report period)

Provider Blue vs. Providers in same Area of Concentration







Due to claims lag, your Organization's performance for this report period (or any of the other report periods) may change when new encounters are received.

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Use the filters to see your performance on each measure. Click Download to export this view as an image, PDF or PowerPoint file. Please contact us at TIPQIC@asu.edu with questions or comments.





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Select	1. Provider	2. Area of Concentration		3. Measure		
Filters:	Provider Blue 🔻	PEDS BH	•	Follow-Up After Hospitalization for Mental Illness: 6-17 Years (30-day)	•	

Performance on Measure (Each month is a 12-month report period)

Provider Blue vs. Providers in same Area of Concentration



Next Steps

- For a review of the Attribution methods, please see the content posted on our website, <u>www.TIPQIC.org</u>.
- If the data on the dashboard are inconsistent with what your Organization expects, please follow these steps:
 - 1. Review the relevant attribution method (<u>PCP, BH, and Hospital Attribution</u> or <u>Justice</u> <u>Attribution</u>)
 - 2. Review the <u>HEDIS measure definition, qualifying billing codes, diagnosis codes,</u> <u>medications, etc.</u>
 - 3. Reach out to us at <u>TIPQIC@asu.edu</u>. We have a process for member-level comparison, which will help explain discrepancies and surface issues.

Thank you!

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Arizona State University



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