

Washington State Health Care Authority

Paying for Value Webinar Series: Measuring & Rewarding Quality

Cade Walker, Laura Pennington, and Eddy Rauser
Health Care Authority

July 11, 2016

Connect online

- 2 options for audio: Select “Use Mic & Speakers” or “Use Telephone”
- Please use the online question pane to submit questions during the webinar
- We will answer questions at the end of the presentation
- The slides are available for download in the handout section of your screen and will be on the Healthier Washington website after the webinar.

Sound Check

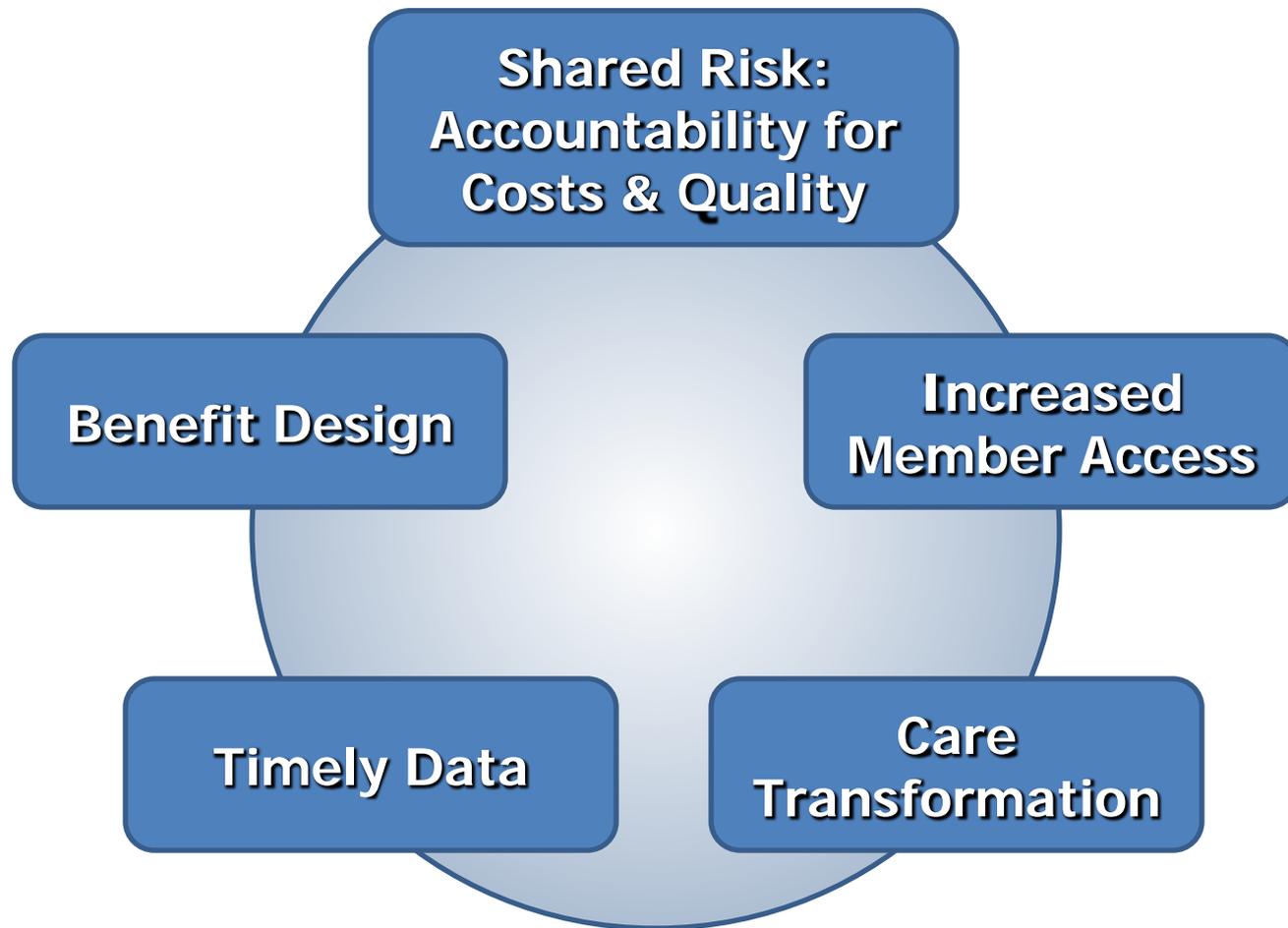
If you cannot hear us now, check to see if:

- Your speakers/headphones are turned off or plugged in
- Your PC is muted or the sound settings are correct
- Your GotoWebinar sound settings are correct
- Go to www.GoToWebinar.com for support **OR** join us via telephone. Locate the dial-in number in your email, click the + in Audio then select Use Telephone.

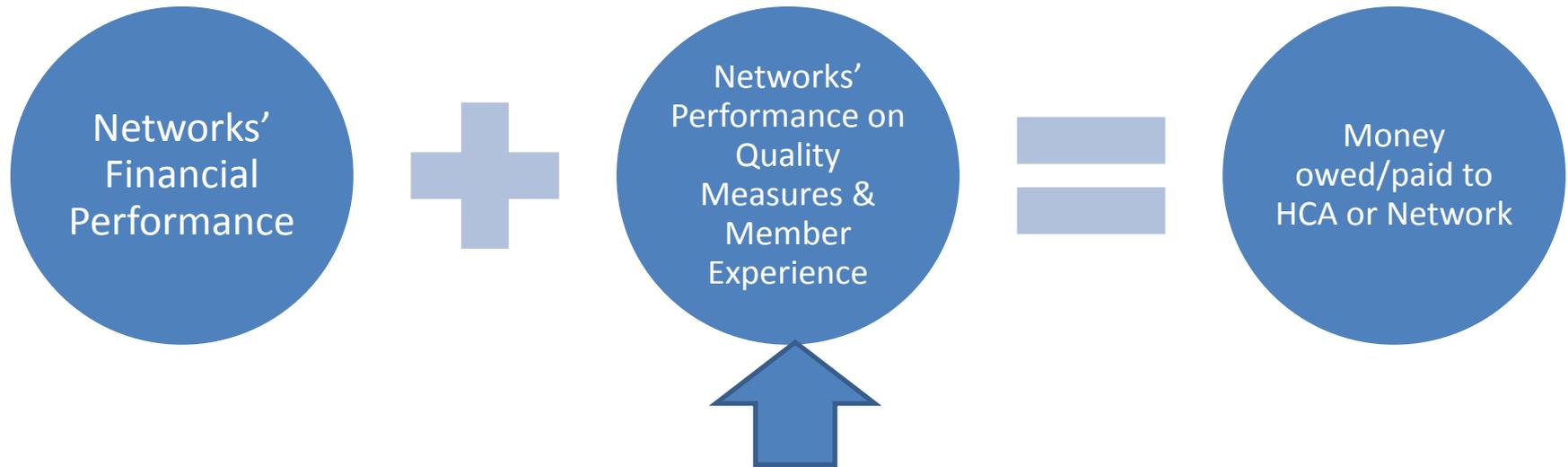
Webinar Objectives

- Present the quality measures and their measurement under the UMP Plus program
- Describe the Quality Improvement Model – how financial incentives are tied to quality

UMP Plus Foundational Elements



Shared Risk: Integrated Financial and Quality Improvement Model



There are limits on the amount of shared savings the networks can receive or are responsible for, as well as how much their performance can reduce the deficit

Quality Improvement Model (QIM): Overview

- Measures performance by each network on selected clinical and patient experience measures
- Overall quality score is an integrated measure across all performance metrics; it is impacted positively by improvement and negatively by deterioration on any given metric
- Developed by HCA actuaries, implementation and process managed by HCA Chief Medical Officer (CMO)
- 4 Components:
 - 19 quality measures
 - Weights
 - Mean score
 - Target score

Quality Measures

- 19 quality measures from Washington Statewide Common Measure Set
 - 5 categories - Chronic conditions, behavioral health management, member experience, preventive screenings and immunizations, obstetrical care
 - Clinical/claims (14), CG-CAHPS scores (4)
- Member Satisfaction with Provider Communication
- Member Satisfaction with Office Staff
- Member Satisfaction with Timely Care
- Member Satisfaction with Overall Provider Rating
- Diabetes Patients with A1C<9.0%
- Diabetes Patients with BP<140/90
- Diabetes Patients with Eye Exam
- HTN Patients with BP<140/90
- CAD Statin Prescribed
- CAD Statin Adherence
- Depression Medication Management (2 rates)
- Adult BMI Measurement
- Breast Cancer Screening
- Cervical Cancer Screening
- Chlamydia Screening
- Colorectal Cancer Screening
- Childhood Immunizations
- NTSV C-Section

Quality Measures, Con't

- 19 Measures selected by HCA CMO
 - Substantial impact on mortality, morbidity & health of population
 - Informed by other WA ACO efforts, to send one signal to providers and delivery systems
- Measures, targets, and weights updated by CMO annually, by September 30

QIM Components

Each of the 19 measures is based on a scale of 0 to 100 percent and is assigned a:

- **Weight** - the degree of influence the measure has on the overall QIS score
 - Set by HCA CMO, informed by clinical literature and clinical expertise
- **Mean score** – the average percentage for each measure
 - Informed by the Washington Health Alliance's Community Checkup, the National Committee on Quality Assurance targets, and other national data sources
- **Target score** – the performance that the network should achieve on each measure
 - Most measure targets are at 90th percentile of national HMO benchmark
 - Also informed by national benchmarks and the data sources cited above
- **Measurement Values** –
 - Performance Year – 1 and Measurement year

QIM – How it works

- Each measure has a Improvement score (IS) and a Quality Score (QS). The Sum of the IS and the QS is the Measures Quality Improvement Score (QIS). The improvement on each IS and QS are measured for each year of the contract.
- The composite QIS score is generated based on the sum of the products weight and score for the 19 quality measures.
- The overall QIS score drives the share of savings and deficit payments or reduction of deficit between the HCA and the ACP.
 - QIS determines either the savings share or the deficit share based on the ACP's performance.

Example: BMI Measurement*

- Two parts Quality and Improvement for the BMI measure
- Record the BMI on a patients visit
 - BMI standard Mean (75%) and Target (95%) 95th Percentile
- ACP prior year (50%) and performance year (85%)
- Quality and Improvement score results
 - Quality score (57.8%) and Improvement (48.8%)
 - Combine measure Results (106.6%) @ 5% = (5.3%) to QIS
- Sum product of all measures and weights
 - The composite Quality Improvement Score (QIS) = (82.6%)
- Savings / Deficit Multiplier, effect on Quality Improvement Score, Max down side mitigation and up side savings.
 - At QIS 82.6% the saving share is 41% conversely the deficit share is 79%.
- The ACP keeps 41% of the profit or mitigates 21% of the loss.

* Hypothetical scenario; actual mean, target and weights are proprietary.

QIM – Public Version

Quality Measure	Quality Measure Description	Weight	Target	Mean
NQF 0059	1-Diabetes patients with A1C>9.0%			
NQF 0061	Diabetes patients with BP<140/90			
NQF 0055	Diabetes patients with eye exam			
NQF 0018	HTN patients with BP<140/90			
American College of Cardiology/AHA guidelines	CAD Statin prescribed			
NQF 0541	CAD Statin adherence			
NQF 0105	Depression Medication Management (12 Weeks)			
NQF 0105	Depression Medication Management (6 Months)			
NQF 0005	Member satisfaction with Timely Care (always)			
NQF 0005	Member satisfaction with Provider Communication (always)			
NQF 0005	Member satisfaction with Office Staff (always)			
NQF 0005	Member satisfaction with Overall Provider Rating (9/10)			
HEDIS/NCQA	Adult BMI Measurement			
NQF 0038	Immunization (child - Combo 10)			
NQF 0032	Cervical Cancer Screening			
NQF 0033	Chlamydia Screening			
NQF 2372	Breast Cancer Screening			
NQF 0034	Colorectal Cancer Screening			
NQF 0471	1-NTSV C-Section			

Steps for Purchasers

- Ask your health plan how they measure quality and member experience, and how they reward providers providing high quality care
- Ask to see provider performance on measures in the Washington Statewide common measure set
- Ask your health plan to adopt this or a similar approach

Resources for Stakeholders

- Technical Assistance
 - One on one meetings, shared learnings
- Washington State Common Measure Set
www.hca.wa.gov/hw/Pages/performance_measures.aspx
- Quality Improvement Model (Exhibit 5),
UMP Plus Contracts
http://www.hca.wa.gov/hw/Pages/acp_multipurchaser.aspx

Q & A



Thank You! See you at the next Webinar!

Next Webinar: Care Transformation

August 8th; noon-1pm

Presented by Dan Lessler, MD, CMO & Barbara Lantz,
Special Assistant for Clinical Quality

Register here:

<https://attendee.gotowebinar.com/register/2698464691901106179>

For more information, please contact:

Rachel Quinn

Health Care Authority

Rachel.quinn@hca.wa.gov