

Apple Health (Medicaid) performance measures analysis:

Service coordination organization performance measures & Apple Health managed care preventive services and vaccinations

Substitute Senate Bill 5147, Section 3(2); Chapter 209; Laws of 2015; RCW 70.320.050

Engrossed Substitute Senate Bill 5187; Section 211(18); Chapter 475; Laws of 2023

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Legislative summary

Two legislative bills direct the Health Care Authority (HCA) to submit information to the Washington State Legislature on performance measure reporting. This includes::

- Senate Bill (SB) 5187 (2023), which directs HCA to submit a report no later than September 15, 2024. The report will:
 - Delineate the number of individuals in Apple Health (Medicaid) managed care, by carrier, age, gender, and eligibility category, receiving preventive services and vaccinations;
 - Include baseline and benchmark information from the previous two fiscal years; and
 - Be inclusive of, but not limited to, services recommended under the United States Preventive Services task force, advisory committee on immunization practices, early and periodic screening, diagnosis, and treatment (EPSDT) guidelines, and other relevant preventive and vaccination Medicaid guidelines and requirements.
- SB 5147 (2015) directs the Department of Social and Health Services (DSHS) and HCA to submit an annual report by December 1 each year on the incorporation of performance measures developed under Chapter 70.320 RCW into Service Coordination Organization (SCO) contracts and progress toward achieving identified outcomes. This legislation directed the agencies to include:
 - The number of Apple Health (Medicaid) clients enrolled over the previous year;
 - The number of enrollees receiving a baseline health assessment over the previous year;
 - An analysis of trends in health improvement for Apple Health clients in accordance with the measure sets established under RCW 41.05.690 and RCW 70.320; and
 - Recommendations for improving the health of Apple Health enrollees.
 - While SCO measures (previously referred to as the 1519 measures) were initially addressed in 2016 contracts, they continue to be addressed in contract year over year with the DSHS-contracted Area Agencies on Aging (AAA) and HCA-contracted managed care organizations (MCO).

The above legislative requirements align closely with the federal Medicaid requirements to report Apple Health managed care performance through the state's contracted External Quality Review Organization (EQRO). HCA combined these efforts into this report so information is available in one location.

Background

HCA's federally required EQRO, Comagine Health, publishes an annual report that provides audited data and objective analysis regarding Washington's Apple Health managed care program. This report is called the External Quality Review (EQR) Comparative and Regional Analysis Report. It includes MCO-specific performance and comparison to state performance and national benchmarks.

- The [2023 EQR Comparative and Regional Analysis Report is available on the HCA website](#). This report provides data and analysis across a variety of performance measures trending performance over the past three measure years (2020, 2021, and 2022). Comparisons to National Committee for Quality Assurance (NCQA) national benchmarks are included for applicable Healthcare Effectiveness Data and Information Set (HEDIS) measures. The most current published HEDIS data is in the 2023 report reflecting Measurement Year (MY) 2022. MCO enrollment information regarding age, race, gender, and other demographic information during the measure year are

available in the report. The metrics selected for the managed care withhold for the value-based purchasing initiative are analyzed in this report ([see page 47](#)).

The EQR report addresses reporting elements required by the SCO and preventive services legislative directives above, including the number of individuals in Apple Health managed care by carrier, age, gender, and eligibility category as well as preventive services and vaccination utilization and SCO performance measures. Additional mandated elements for SCO reporting are addressed below.

Preventive health services and vaccination utilization is available in the [2023 EQR Comparative and Regional Analysis Report](#) and include:

- Childhood immunization status
- Well-child visits
- Prenatal and postpartum care
- Breast cancer screening
- Cervical cancer screening
- Chlamydia screening
- Lead screening in children
- Asthma medication ratio
- Comprehensive diabetes care
- Antidepressant medication management
- Substance use disorder
- Mental health treatment services rate

SCO measures are addressed in multiple ways:

- MCO performance is available in Appendices A and F of the [2023 EQR Comparative and Regional Analysis Report](#) and include:
 - Percent homeless
 - Follow up after hospitalization for mental illness
 - Follow up after emergency department visit for mental illness
- Initial health screens are required to screen new MCO enrollees, and the average rates for the 2023 calendar year were:
 - Community Health Plan of Washington: 46.37 percent
 - Coordinated Care: 46.38 percent
 - Molina Healthcare of Washington: 26.44 percent
 - UnitedHealthcare of Washington: 46.33 percent
 - Wellpoint of Washington (previously known as Amerigroup of Washington): 44.12 percent
- The full AAA and adult MCO enrollee behavioral health data for this report are available in DSHS' Research and Data Analysis website: [Cross-System Outcome Measures for Adults Enrolled in Medicaid report](#). AAA-specific SCO measures are calculated and reported for both the state and regional service areas.

Result highlights

MCO enrollment during this time consisted of over 2 million Washingtonians enrolled in Apple Health (Medicaid) managed care and represented approximately 1 out of every 4 Washingtonians served in Apple Health during 2022.

As a result of the continued public health emergency due to COVID-19, approximately 1 out of every 4 Washingtonians was enrolled in Apple Health during 2022. The reporting period within this digest includes data from the slow return to normal health care delivery after the peak COVID-19 epidemic, but before the federal and state public health emergencies ended.

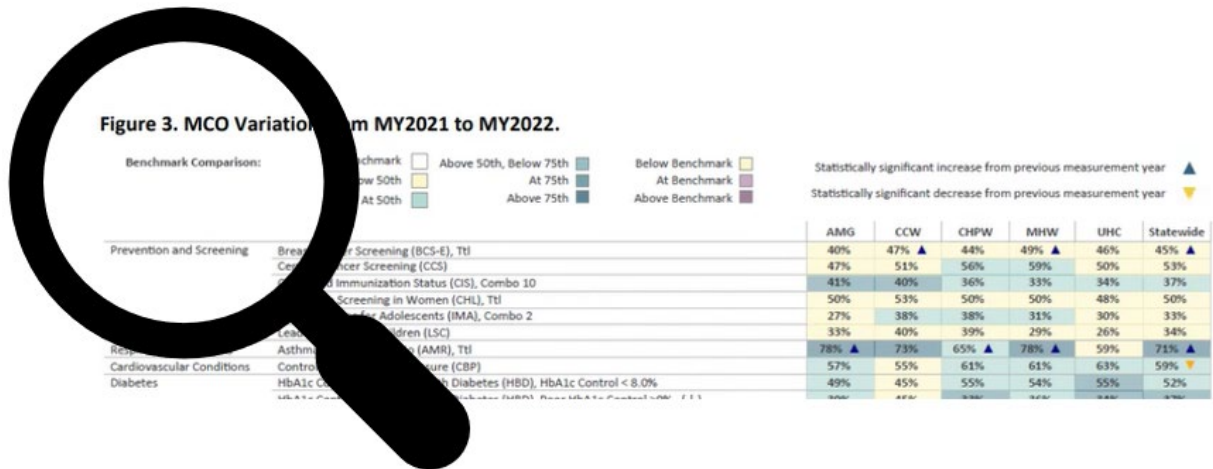
The [2023 EQR Comparative and Regional Analysis Report](#) provides context about the impact to the delivery system, identifying two major impacts being the COVID-19 pandemic and an increase in Apple Health enrollment. COVID-19 severely stressed the health care delivery system in multiple ways:

...delivery systems [were impacted] due to workflow changes required to protect the workforce and patients, re-ordering of clinical priorities and unstable delivery system revenue. The stress on the member population through anxiety, isolation and job loss increased the burden on mental health and substance use conditions. In addition, there was a significant influx of new Medicaid members, for which additional time and effort is usually required. Depending on prior insurance or lack of insurance, these new members may have a greater burden of unmet care needs than established members. Due to COVID-19 and the increase in managed care enrollment, year-over-year comparison should be viewed with caution.

MCO performance is detailed in the [2023 EQR Comparative and Regional Analysis Report](#) covering multiple domains of care, including:

- Behavioral health
- Appropriateness/overuse of care
- Access/availability of care
- Utilization
- Prevention and screening
- Chronic conditions

The following summarizes measures that improved and declined over this period. [See Figure 3](#) of the 2023 EQR Comparative and Regional Analysis Report, note performance change year over year and comparison to benchmarks (see triangles indicating significant improvement or decline and color-coding indicating benchmark achievement).



The [2023 EQR Comparative and Regional Analysis Report](#) covers some key statewide improvements (see page 6), including.

- Statistically significant improvement for the last three years for:
 - Asthma medication ratio (AMR)
 - Antidepressant medication management (AMM) – acute and continuation measures
- Statistically significant improvement for one year for:
 - Breast cancer screening (BCS-E)
 - Pharmacotherapy for opioid use disorder (POD): 16-64 Years
 - Follow up after hospitalization for mental illness (FUH), for all indicators other than the 6-17 age band
 - Child and adolescent well-care visits (WCV), 3-11 years
 - Well child visits in the first 30 months of life (W30), 0-15 months measures

As described in the recommendations below, continuing to prioritize core health metrics and leveraging quality incentives have shown successful to improved quality outcomes for Apple Health clients.

Some key **declining** measures statewide include (see page 6):

- Statistically significant improvement for the last two years for:
 - Substance use disorder treatment rate (SUD), 12-64 years measure
- Statistically significant improvement for the last three years for:
 - Adults’ access to preventive/ambulatory health services (AAP), total measure

As described in the recommendations below, dedicated focus on the areas of care with declining performance is key to changing outcomes for Apple Health clients.

In addition, below are the findings for the measures selected in the value-based purchasing withhold (see pages 47-50):

- The antidepressant medication management (AMM) measure has improved substantially on a statewide basis.

- The child and adolescent well-care visit (WCV), 3-11 years measure has improved significantly in the last two years.
- The prenatal and postpartum care (PPC) measures have not shown consistent improvement.
- The substance use disorder treatment rate (SUD) measure has decreased by a statistically significant amount over the last two years.
- The asthma medication ratio (AMR) measure has shown substantial improvement.
- There have been no changes in the performance of the follow-up care for children prescribed ADHD medication (ADD), initiation phase measure.
- The mental health treatment rate (MH-B), 6-64 years decreased by a statistically significant amount between MY2021 and MY2022.

Further behavioral health performance reporting will be provided in HCA's Behavioral Health Outcomes Legislative Report.

The SCO or 1519 measures required of AAAs are available in the DSHS' [Cross-System Outcome Measures for Adults Enrolled in Medicaid report](#). Key AAA measure findings include:

- Access to preventative services and Home and Community Based Services (HCBS) and nursing facility balance measures remained stable
- Slight improvement in both the substance use disorder (SUD) treatment and mental health treatment rates
- State-wide rates have increased resulting in less desirable outcomes in 30-day hospital readmission rates
- The homeless measures, both narrow and broad, continued to improve
- Employment rose to 2.8 percent from 2.0 percent the previous year

Most AAA measures remained relatively stable with slight improvements in employment, homelessness, and behavioral health treatment measures.

Recommendations

The Centers for Medicare & Medicaid Services (CMS) mandates each state contract with an EQRO to produce a report to support an independent and objective reflection from an external quality certified entity on the status of Apple Health managed care quality, access, and timeliness of services. This report is another EQRO report, called the [2023 EQR Annual Technical Report](#), and is publicly available and provided annually to CMS.

HCA is required to respond to the recommendations in the following year's EQR Annual Technical Report. To support achievement of the recommendations, HCA requires each MCO to review and respond to the EQR recommendations annually within their quality assessment and performance improvement program evaluations.

Recommendations from HCA's contracted EQRO in 2023 address these major topics:

- Maintain focus on clinically meaningful areas
- Continue to leverage value based payment incentives
- Focus on access, preventive care and utilization
- Continue to prioritize health

Further details regarding these findings and recommendations, including those addressing preventive care and the SCO measures, are available in the 2023 EQR Comparative and Regional Analysis Report ([see page 19](#)).

HCA included responses to EQRO recommendations in the [2023 EQR Annual Technical Report](#).