

Oregon Metrics & Scoring Committee

Minutes

September 16, 2016

9:00 am – 12:00 pm

ITEM

Welcome and consent agenda

Committee members present: Will Brake, Ken House, Anna Jimenez, Daniel Porter (by phone), Thomas Potter, Brian Sandoval, Juanita Santana, Eli Schwarz, Karen Volmar (by phone).

OHA staff: Sarah Bartelmann, Jon Collins, Sara Kleinschmit, Rita Moore, Pam Naylor.

Minutes

The Committee approved the August 19th meeting minutes with three corrections: (1) the Committee has not yet committed to a specific number of metrics that may be implemented using the proposed equity methodology; (2) the minutes should reflect concern that the Committee needs to do something regarding equity measurement earlier than 2018; and (3) the Committee will review feedback from CCOs before further discussions or decisions on the equity measures.

Vice-Chair Elections

Will Brake and Eli Schwarz had previously expressed their interest in serving as the vice-chair; Eli Schwarz withdrew his candidacy. The Committee confirmed Will Brake will serve as the vice-chair.

Updates

Health Plan Quality Metrics Committee

Nominations for this new Committee, established by SB 440 (2015) are now open. This Committee is charged with selecting an aligned menu of measures for CCOs, health plans offered by PEBB and OEBB, and health plans sold on the insurance exchange. The Metrics & Scoring Committee will become a subcommittee of the Health Plan Quality Metrics Committee. Discussion included communication between the two measure selecting bodies, as well as coordination with the Oregon Health Policy Board and SB 231 / CPC+ work.

Public Health Advisory Board (PHAB): Accountability Metrics Subcommittee

The Accountability Metrics Subcommittee is continuing to review existing measure sets to determine what may be applicable to state and local public health. The full Public Health Advisory Board is also discussing health equity and there may be connections between PHAB and Committee measure intent.

Behavioral Health Collaborative

The Collaborative has developed a framework for how the behavioral health system in Oregon could be organized, focused on multiple entry points into the system can also serve as points of care, as well as financing. The Collaborative will be splitting into six workgroups to work through proposals over the next month, including an interest in data and metrics / accountability for the behavioral health system similar to what exists for physical health. This work will wrap up in December.

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Hospital Performance Metrics Advisory Committee

Subject to CMS approval, the fourth year of the Hospital Transformation Performance Program (HTPP) will begin October 2016. The Hospital Metrics Technical Advisory Group continues development of a measure of safe opioid prescribing in the emergency department, and the Hospital Metrics Committee will be recommending year four benchmarks at their next meeting on September 21st.

Comprehensive Primary Care Plus (CPC+)

CMS hosted a recent CPC+ summit that a number of Oregon plans participated in. All but three CCOs will participate in CPC+ and this work is bringing a number of new organizations together, including commercial health plans, as the system moves from competitive to collaborative. The Committee requested standing updates on CPC+ as well as additional information on how CPC+ may impact Metrics & Scoring work.

Other updates

Staff have requested CCO input on current proposal for measuring equity; feedback will be compiled and shared with the Committee later this fall. Staff are bringing the patient-centered primary care home measure weighting issue to the Technical Advisory Group in September and will follow up with the Committee.

Effective Contraceptive Use (revisited)

Helen Bellanca presented on the Effective Contraceptive Use (ECU) measure intent, messaging, and context to provide the Committee with more clarity following concerns that were raised at the August meeting about the measure being coercive. Slides are available in the meeting materials: <http://www.oregon.gov/oha/analytics/MetricsDocs/September-16-2016%20Presentation.pdf>

Committee discussion included:

- Why the ECU metric was focused on tier 1 and 2 contraceptive use rather than pregnancy intention screening;
- Why education or counseling was not included in the metric;
- Tradeoffs between using claims and clinical data for measurement;
- Whether the measure should be introduced as being about women's reproductive health rather than contraceptive use and other ways to frame the work with providers and clients (suggested framing: "helping women meet their own goals for reproductive health"); and
- The need for training for providers, including addressing diversity.

2017 Challenge Pool

Last month, the Committee considered modifying the current set of challenge pool measures to remove the Diabetes HbA1c and/or Assessments for Children in DHS Custody measure and replace with the Effective Contraceptive Use (ECU) measure. The Committee did not reach a decision in August and picked up their conversation in September. Discussion included:

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- Whether the challenge pool is limited to four measures (no), and whether it would be diluted by adding a fifth measure (maybe);
- Whether removing HbA1c as a challenge pool measure would downplay its importance, given diabetes is still a major health concern with known disparities; and
- Whether providers would have sufficient time to focus on ECU if it is added as a challenge pool measure, or whether making ECU a challenge pool measure would focus provider attention.

The Committee considered several options for the 2017 challenge pool, but ultimately agreed to replace the HbA1c measure with the Effective Contraceptive Use measure. The Committee also requested OHA staff follow-up with the Transformation Center regarding training or technical assistance or education opportunities for providers.

Public Testimony

Alison Martin, a member of the Child & Family Wellbeing Measures Workgroup, spoke in support of shared care plans for children and youth with special health care needs (CYSHN), and the inclusion of actionable, shared care plans for CYSHN as a component of the proposed kindergarten readiness metric. Alison also shared the NQF measure for shared care plans that could be collected through the CAHPS survey to provide the data for the metric.

Introduction to Kindergarten Readiness

Tim Rusk and Helen Bellanca, co-chairs of the Child & Family Wellbeing Measures Workgroup, presented on the importance of kindergarten readiness, and the workgroup processes and conversations about a recommended bundled measure. Slides are available online at:

<http://www.oregon.gov/oha/analytics/MetricsDocs/September-16-2016%20Presentation.pdf>

Committee discussion included:

- Whether there are any emerging multi-factorial or multi-sectoral measures from other states that we could draw from or whether this work is unprecedented;
- How have existing collaborations between preschools and community clinics been able to share data to date and are there any available examples to inform this work; and
- How can public health be engaged in this conversation, especially given modernization.

The Committee suggested chartering a workgroup to build on the Child & Family Wellbeing work to come together to continue developing the kindergarten readiness bundled measure. OHA staff will discuss internally and bring forward a proposal for a new workgroup for the Committee's discussion in October. Staff will also schedule a presentation from the Early Learning Division's Measuring Success Committee for October to learn more about ongoing metric work for Hubs.

Introduction to Medication Therapy Management Measures

Nicole O'Kane and Woody Eisenberg presented on Medication Therapy Management (MTM) services and proposed a potential incentive measure based on a Medicare measure:

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comprehensive medication review (CMR) completion rate. Slides, citations, and written testimony are posted online: <http://www.oregon.gov/oha/analytics/Pages/Metrics-Scoring-Committee.aspx>

The Committee requested articles from the citation list; staff will provide.

Committee discussion included:

- How would eligibility be defined, and whether a CCO measure would be more accurate than the Medicare measure as it would be claims-based;
- Whether a CMR measure is too process-focused, leading to a 'check the box' approach with pharmacists and CCOs, and whether outcome measures such as decreased utilization for members who have received MTM services may be a better fit;
- Whether there might be any workforce issues in rolling out this measure; Oregon pharmacy associations would likely confirm that pharmacists are ready to take this on and that documentation and reimbursement are greater issues than available workforce;
- Which providers of MTM are most effective: clinic or pharmacy or telephonic?

Committee members will send any additional questions to Sarah for ongoing discussion at the October meeting; staff will work with Nicole, Woody and other experts to draft specifications.

Next Meeting: October 21, 2016

Agenda items will include presentations on potential obesity measures, Early Learning measures, and additional discussion on kindergarten readiness and medication therapy management metrics.