

Metrics Technical Advisory Workgroup

August 27, 2015

Agenda Overview

- Updates
 - Dashboards
 - ICD 10 crosswalk
 - Metrics & Scoring Committee
- SBIRT e-specifications
- Tobacco Prevalence (bundle) measure cont.
- Health Equity Composite measure update

Dashboards

- July Refresh
 - Released on August 14th, same rolling 12 months as July dashboard with updates:
 - ECU baseline, improvement target and rolling 12 months.
 - Dental sealant improvement target
 - DHS custody baseline and improvement target
- August Dashboard
 - New rolling 12 months (April 2014 – March 2015).

ICD-10 Crosswalk

- OHA has published a preliminary ICD-9 / 10 crosswalk for CCO incentive measures.
- Online at:
<http://www.oregon.gov/oha/analytics/CCODData/OHA%20ICD-9%20to%20ICD-10%20crosswalk.xlsx>
- OHA will publish final ICD 10 codes in late Oct / early Nov for use in 2015 and 2016 specifications.

Metrics & Scoring Committee

- Next meeting: Friday, September 18th from 9 – noon.
- Agenda:
 - Select 2016 benchmarks
 - Determine 2016 challenge pool measure(s)

SBIRT: Review of Measure Concept for EHR-Based Reporting

CCO Metrics TAG

For Today...

- History & Measure Intent
- Feedback from SBIRT workgroup
- Measure Review
- Timeline
- Next Steps

Objective: receive Metrics TAG feedback on measure concept and implementation plan

History & Measure Intent

- Effort to create specifications to enable EHR-based reporting
- Prior discussions included SBIRT Workgroup and Metrics TAG
- Consideration of federally developed draft eCQMs for substance abuse
- Measure concept shared with SBIRT Workgroup at last meeting

Feedback from SBIRT Workgroup

- Measure concept accurately represents prior discussions
- Additional conversation needed to:
 - ✓ Identify reportable data elements for brief intervention and referrals
 - ✓ Determine plan for “roll-out” of EHR-based measure specifications

Measure Definition

Percentage of patients (ages 12+) that had a brief screening and the appropriate follow-up services (including full screening, brief intervention, and/or referral to treatment), based on the results of the brief screening indicating unhealthy alcohol and/or drug use (including prescription drugs) within the measurement year.

Denominator

- Patients in the population that also meet the inclusion criteria:
- Age
 - Aged 12 years to <18 years by Dec 31st of measurement year.
 - Aged 18 years and older
- Qualifying outpatient service during the measurement year
 - Office or other outpatient visit
 - Home visit
 - Preventive medicine visit
- Active Medicaid coverage as of the date of the qualifying outpatient service

Discussion

- What is the logic that your CCO is using to determine eligibility for the Clinical Quality Measures?
 - Active Medicaid coverage as of the last date of the reporting period
 - Active Medicaid coverage on the date of the qualifying encounter
 - Other?
- Have CCOs completed analysis to see how each eligibility scenario affects the denominator?
- Are there CCOs that would be willing to complete this analysis?

Numerators

1. Brief screening for alcohol and drug misuse.
2. Full screening for alcohol and/or drug misuse (based on brief screening)
3. Brief intervention for alcohol and/or drug misuse (based on full screening)
4. Referral to treatment for alcohol and/or drug misuse (based on full screening)

Measure would provide discrete counts for all items.

Numerator 1: Brief Screening

Patients in the denominator that received a brief screening for unhealthy alcohol and drug use.

Documentation of a brief screening includes:

Adult	Adolescent
<ul style="list-style-type: none"> • Annual Questionnaire • AUDIT-C 	<ul style="list-style-type: none"> • CRAFFT

Numerator 2: Full Screening

Patients in Numerator 1 that received full screening for unhealthy alcohol and/or drug use based on the results of the brief screening.

Documentation	Adult	Adolescent
	<ul style="list-style-type: none"> • AUDIT • DAST • ASSIST • CAGE • 5Ps • TWEAK • T-ACE 	<ul style="list-style-type: none"> • CRAFFT • GAIN-SS • MAST

Numerator 3: Brief Intervention

Patients in Numerator 2 that received a brief intervention for unhealthy alcohol and/or drug use based on the results of the full screening.

Documentation that a brief intervention occurred must be captured in the EHR in a way that is reportable. Functionality may include, but is not limited to:

- Forms built in the EHR to document the brief intervention (e.g., topic, feedback, etc.)
- “Checkboxes” for documenting that a brief intervention was performed

A manual chart review for evidence of brief intervention does not meet the requirements.

Discussion

- Is the brief intervention currently being documented in the EHR?
 - If so, how?
 - If not, what are the barriers/challenges to documentation?

Numerator 4: Referral

Patients in Numerator 3 that received a referral to treatment for unhealthy alcohol and/or drug use based on the results of the full screening.

Documentation that a referral for alcohol and substance abuse treatment occurred. The referral must be captured in the EHR in a way that is reportable, appropriate provider types to report as Referral to Treatment will be identified in the final specifications.

Timeline

Reporting Pilot

Q4 of 2015: Finish draft specifications

Q1 of 2016: First “test” for reporting

Q2 of 2016: Second “test” for reporting

October 1st 2016: Final specifications are published

January 1st 2017: Implementation of EHR-based reporting option

Next Steps

- Are there groups/individuals interested in a limited “sub-workgroup” to assist OHA in completing draft SBIRT specifications?
 - 3-5 meetings over the next 3 months
 - Provide input on specifications details
 - Participants should have knowledge of SBIRT workflow and how data is currently captured in EHR
- Are there CCOs that would be interested in participating in a reporting pilot in Q1 and Q2 of 2016?

Please respond to Metrics.Questions@dhsosha.state.or.us.

Tobacco Prevalence (bundle)

- Cessation benefit survey
- Updated specifications
- Minimum qualities table
- Benchmark recommendation

Cessation Benefit Survey

- Draft survey for TAG review. Send feedback to metrics.questions@state.or.us by Sept 15th.
- Questions for TAG:
 - When should the survey be collected?
 - Should the survey be required in 2015 (baseline)?
 - Optional content?

Updated Specifications

- Revised draft since previous TAG meeting to incorporate feedback.
- Added clarification re:
 - Age
 - E-cigarettes and marijuana use
 - Cigarette smoking and tobacco use

Minimum Quantities Table

- Previous TAG discussion: need to document the quantities of cessation products required to meet minimum benefit.
- Draft table for TAG review: Send feedback to metrics.questions@state.or.us by Sept 15th.

Benchmark Recommendation

- Does the TAG want to make a recommendation to the Metrics & Scoring Committee re: benchmark and improvement target for the tobacco measure?

Benchmark / Improvement Target (previous TAG discussion)

- No national or other programs appear to have a benchmark that we could borrow.
- Improvement target only option (e.g., 1 percentage point from baseline) seems the most reasonable.
 - Do we have a comparable baseline? Is this only an option if CCOs submit data in 2015 to serve as baseline for 2016?

Alternate Proposal:

Rather than the minimum cessation benefit being a pass / fail and then comparing prevalence to benchmark or improvement target... weight each of the measure components for a total score. CCO must pass threshold score to meet the measure.

	2016		2017		2018	
For meeting minimum cessation benefit requirement	40%	60%	33%	66%	25%	75%
For reporting EHR-based prevalence data (meeting population thresholds, etc)	40%		33%*		25%	
For reducing prevalence (meet benchmark / target)	20%		33%		50%	

Health Equity Composite Measure

- Committee is interested in developing a health equity “meta-measure” for use with the challenge pool.
- OHA staff (Analytics, Equity & Inclusion, Program Design & Evaluation Services) and Center for Health Systems Effectiveness have begun collaborating on methodology and feasibility of a composite measure.
- Intent to bring proposal for TAG review this fall.
 - If any CCOs are interested in this topic and would potentially be interested in participating in additional meetings or reviewing ideas outside of TAG, please let us know at metrics.questions@state.or.us

Next Meeting:
September 24th
1-3 pm

Upcoming TAG Topics

- Committee update (2016 benchmarks)
- Food insecurity measure
- Health Equity measure
- Provider reporting roundtable
- Alternate access measures
- David Labby presentation

