

Metrics Technical Advisory Workgroup

February 25, 2016

PLEASE DO NOT PUT YOUR PHONE ON HOLD
– IT IS BETTER IF YOU DROP OFF THE CALL
AND REJOIN IF NEEDED

Today's Agenda

- Updates
- Transformation Center TA on metrics
- Food Insecurity Screening: revisited
- Health Equity Index development update

Updates

Year Three CQM Analysis Guide

- New guidance document from OHSU designed to help CCOs review and improve Year Three data submissions prior to submission to OHA.
 - Online at www.oregon.gov/oha/analytics/Pages/CCO-Baseline-Data.aspx
- Technical assistance from David Dorr's team at OHSU available for any CCOs seeking help with their Year Three data submission.
 - Contact us for additional information / TA request form at metrics.questions@state.or.us

2016 Timeline

- New document with key dates for CY 2016 (through June 2017) now available online at www.oregon.gov/oha/analytics/Pages/CCO-Baseline-Data.aspx
- Intent to have 2017 measures and benchmarks selected and published by Oct 1st, 2016.

Metrics & Scoring Committee: February 26th

The Committee will meet on Friday from 9 – noon.

Agenda items include:

- Continued discussion about the incentive metric program and structure under the new waiver
- Presentation from Lillian Shirley (Public Health Director) on public health modernization and state health improvement plan.

All materials online at

www.oregon.gov/oha/analytics/Pages/Metrics-Scoring-Committee.aspx

Hospital Transformation Performance Program (HTPP) Update

The Committee will also meet Friday from 1 – 2 pm.

Agenda items include:

- Year Three (2016) update from CMS
- Opioid measure development

All materials online at

www.oregon.gov/oha/analytics/Pages/Hospital-Performance-Metrics.aspx

Note the Hospital Committee is currently accepting applications for new members (through March 8th).

Colorectal Cancer Roundtable

Wednesday, April 20th from 9 am – 3 pm at
Multnomah Athletic Club in Portland

Hosted by American Cancer Society, for individuals who are interested in health care quality improvement and are in a position to influence system change to increase colorectal cancer screening rates.

To register: <https://www.eventbrite.com/e/oregon-colorectal-cancer-roundtable-tickets-21828871743>

Transformation Center Incentive Measure Technical Assistance Overview for TAG

February 25, 2016

Anona Gund
Adrienne Mullock



TRANSFORMATION CENTER
Health Policy & Analytics Division

CCO Incentive Metrics

Technical Assistance Overview

- Focus on the developing technical assistance for the following incentive metrics:
 - Childhood immunization rates: Q1 2016
 - Tobacco [smoking] cessation: Q1 2016
 - Colorectal cancer screening, with focus on reducing health disparities: Q1 2016
 - Adolescent well visits: Q1 2016
 - Health assessments for children in DHS custody: later 2016
- Majority of CCOs identified immunizations and smoking as high priorities for technical assistance.

Needs Assessment Forums

- In early February, the Transformation Center hosted (6) needs assessment calls on the following incentive measures:
 - Immunization (2)
 - Tobacco (2)
 - Adolescent Well Visit (2)
- Invitations went to CCO stakeholders that the TC interviewed in December, innovator agents, and any CCO medical directors and quality improvement coordinators who did not participate in the interviews.
- Specific technical assistance offered to CCOs will depend on the needs identified in these calls, a short voting activity in February's QHOC and available resources.

Needs Assessment Forums

- Facilitated a round-robin discussion and group brainstorm for participants to share:
 1. Biggest challenges;
 2. Most helpful assistance in overcoming those challenges;
 3. What's currently working and what strategies being used; and
 4. Recommended resources or consultants.
- Participation included:
 - Childhood immunization rates: 13 CCOs participated
 - Smoking cessation: 13 CCOs participated
 - Adolescent well visit: 11 CCOs participated

Guidance Documents

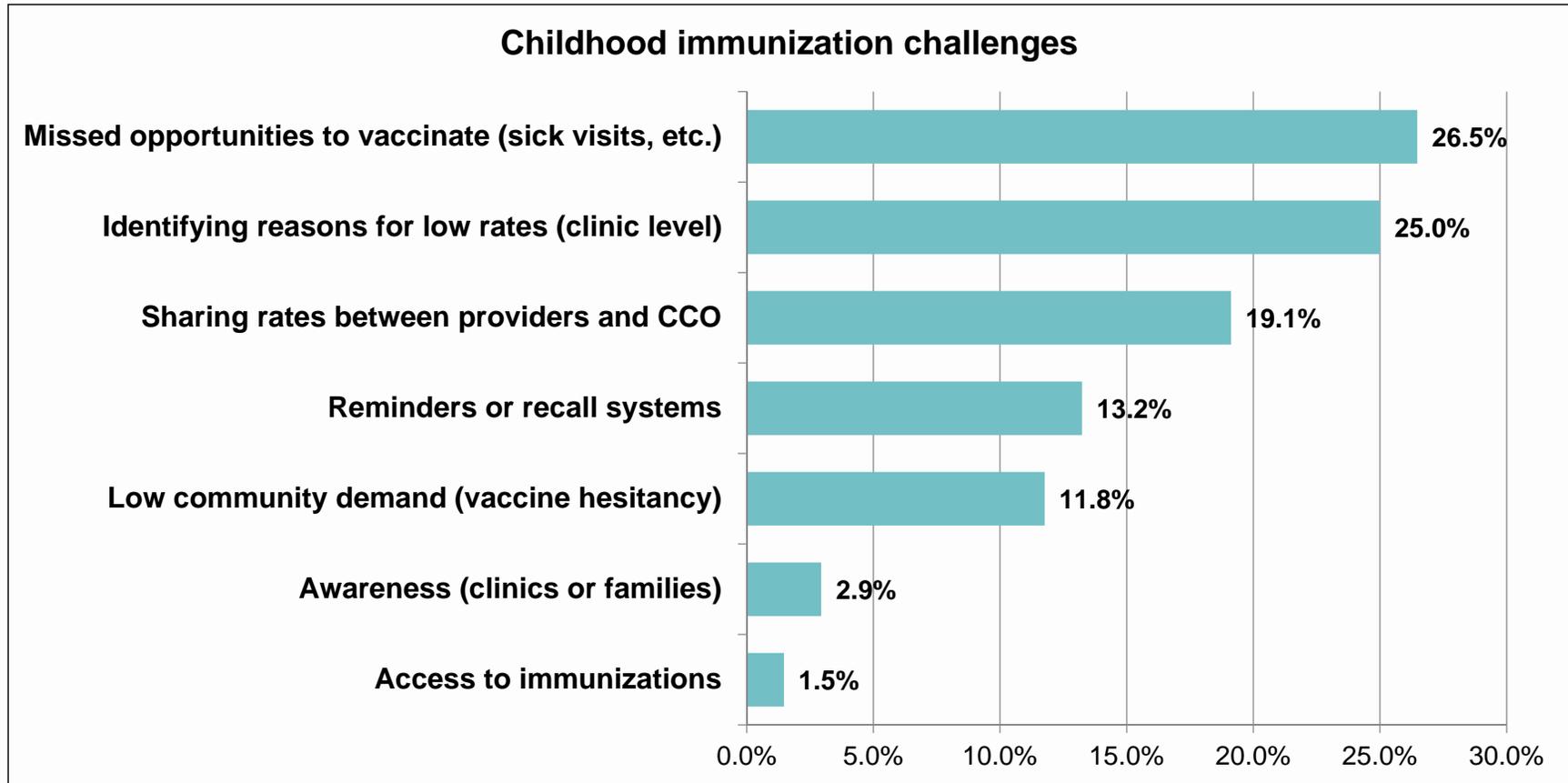
- Strategies identified in the OHA guidance documents for these metrics were used as a framework for these conversations
 - [Childhood Immunizations Resource Guide](#)
 - [Strategies for Reducing Tobacco Use](#)
 - [Adolescent Well-Care Visits Guidance Document](#)

Childhood Immunizations: Challenges

- Unclear how to track and use data to identify reasons for low immunization rates.
- Lack of ALERT training and tools for CCOs to help clinics:
 1. Access clinic-level reports in ALERT (benchmark or assessment reports);
 2. Use clinic-level ALERT reports to identify why immunization rates are low and plan interventions.
- Lack of methods for sharing immunization rates between providers and CCOs.
- Immunizations not provided at sick visits or other non-WCC visits.
- Not enough awareness about immunizations in clinics and for families.
- Lack of reminder or recall systems at CCO or provider level.
- Misalignment with childhood immunization metric for FQHCs.

Childhood Immunizations: QHOC Polling

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Childhood Immunizations: TA Needs

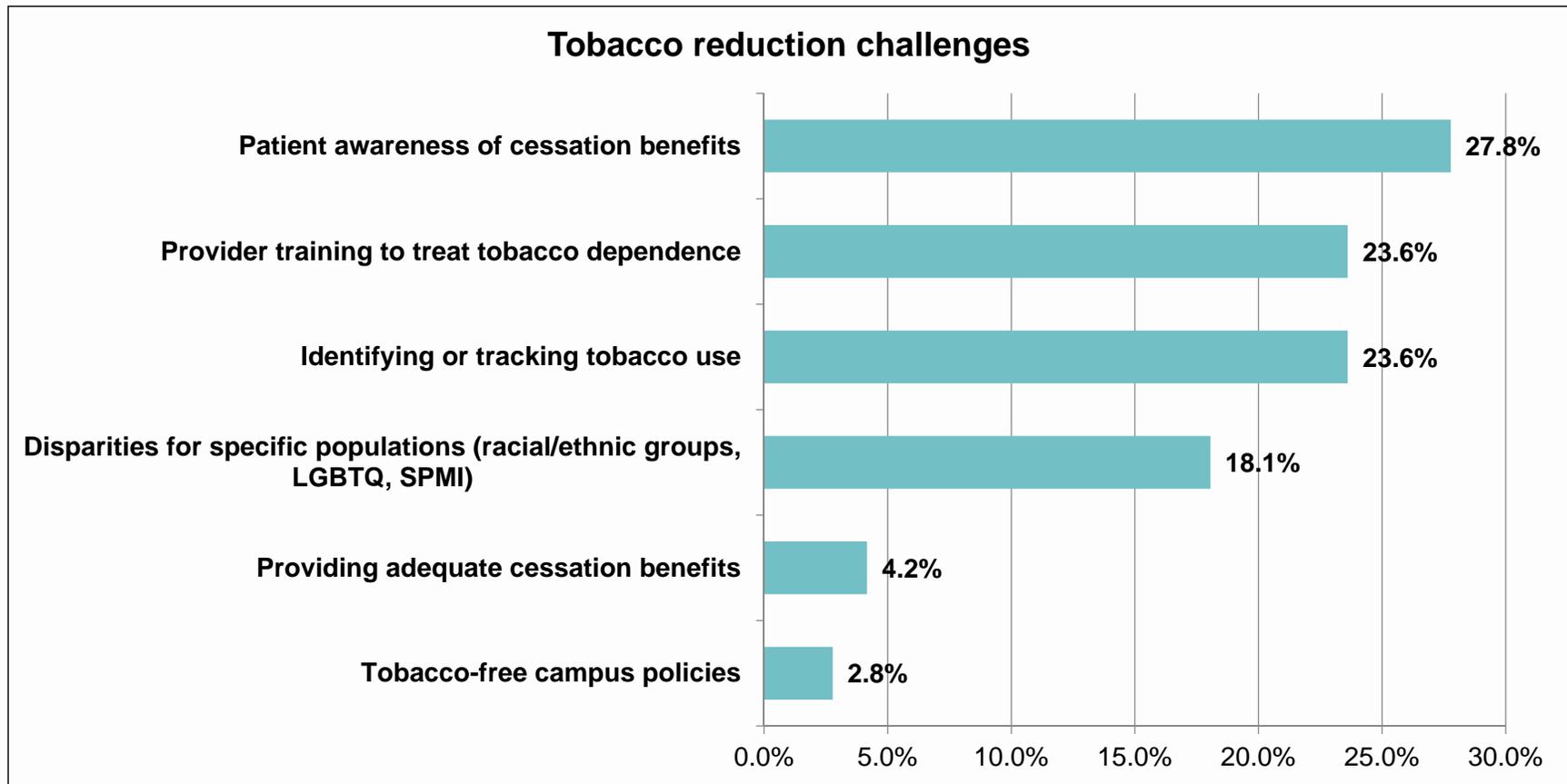
- Tutorials for CCOs about how to interpret quarterly immunization data from analytics.
- Education for clinics on using ALERT and running reports to:
 1. Identify reasons for low immunization rates;
 2. Plan interventions to address reasons for low immunization rates.
- Community roundtables with local clinics, public health, CCO and the state to discuss local data, challenges and best practices.
- Best practices for catching up patients who are behind.
- Best practices on engaging and communicating with members based on other CCOs' experiences.
- Conference calls among CCOs to discuss best practices as the year progresses.

Tobacco Cessation: Challenges

- Accurately capturing and reporting data from various EHRs within CCOs' provider network.
- Identifying all of the relevant community stakeholders (e.g. public health, behavioral health, community based organizations) for community based interventions.

Tobacco Cessation: QHOC Polling

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Tobacco Cessation: TA Needs

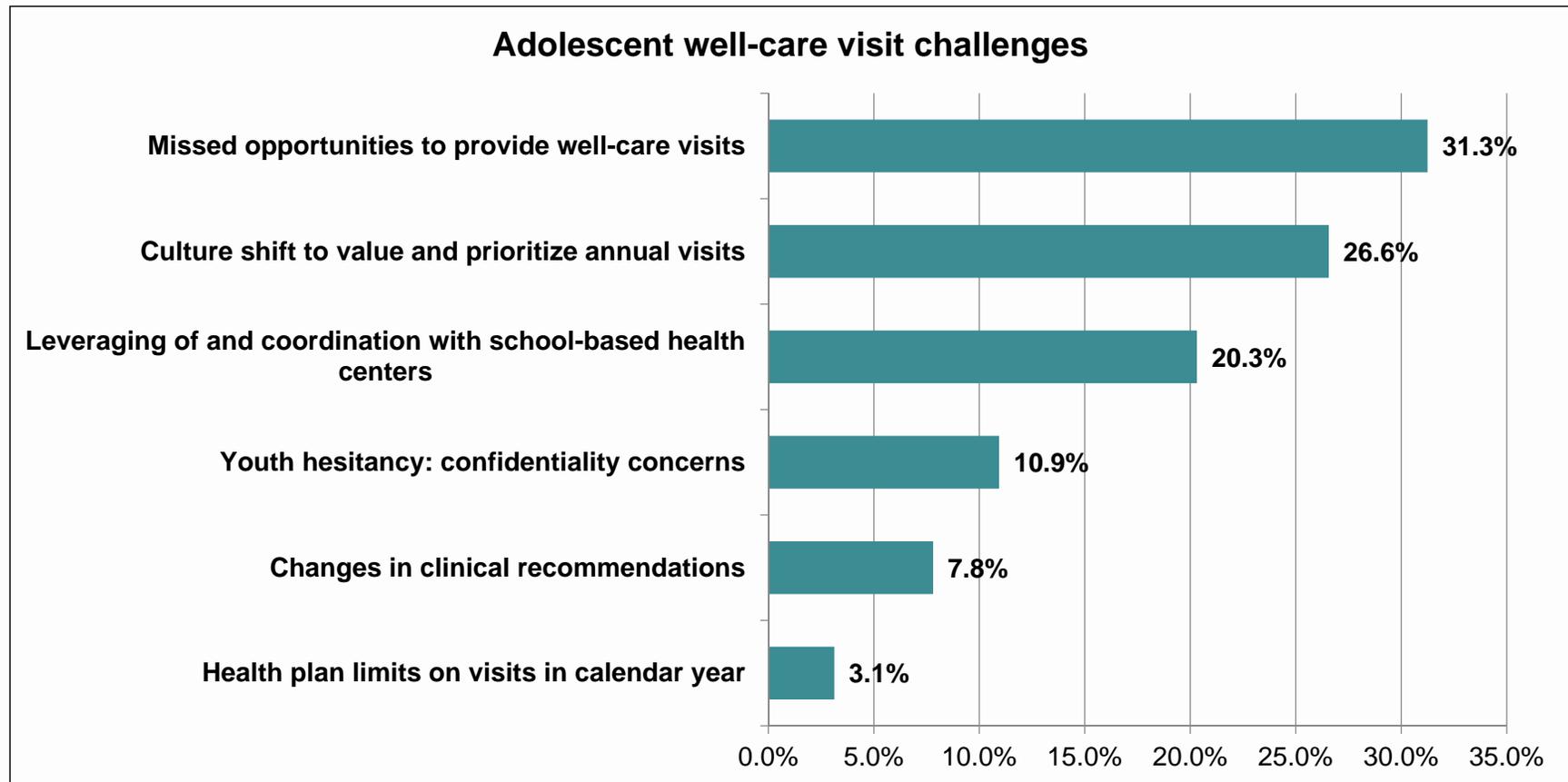
- Provider training:
 1. Metric specifications and how providers' efforts affect the CCO metric;
 2. Identifying and/or tracking patients who use tobacco;
 3. Cessation counseling strategies to treat tobacco dependence.
- Support CCOs efforts to pull data from various EHRs and share data extraction best practices across CCOs.
- Share the provider survey about cessation benefits and consider follow-up survey for deeper dive.
- How to coordinating communications between providers and CCOs when both are connecting with members about smoking cessation.
- Facilitate CCOs coming together to talk about strategies that are working once further along.

Adolescent Well Visit: Challenges

- Creating a culture shift among health plans, providers, parents and youth to value and prioritize annual well care visits for adolescents AND Ensuring that care is youth-centered, developmentally appropriate, and culturally competent.
- Missed opportunities to provide well care visits when adolescents present for care.
- Youth hesitancy to access care because of confidentiality concerns.
- Optimizing clinic workflows and panel management techniques.
- Ensuring school based health centers are fully leveraged, and care is coordinated between school-based health centers and community providers.

Adolescent Well Visit: QHOC Polling

N=24



Adolescent Well Visit: TA Needs

- Strategies for engaging older youth
- Information direct from adolescents
- Provider training on how to work with adolescents
- Promotion materials for parents
- Work flow support for clinic teams
- Information targeted to teens, parents, clinicians
- Teen-vetted materials about confidentiality
- Lessons learned from adolescent clinics
- Out-of-the-box funding ideas for clinics to extend hour/host fun events
- Ideas on what's working for other CCOs
- How to capture data from outreach projects like public health or school-based health centers
- How to put together an event like Yamhill's swag night

Possible TA

- Promotion materials targeted to parents, teens (with teen-tested messages), clinicians
- Eye to Eye training
- Facilitate local public health/CCO partnerships
- Host webinar or share OPIP webinars

Strategies identified on the two calls are in line with what PH is prioritizing with their MCH Title V Block Grants.

- **Missed opportunity:** reaching 18-21 year olds. PH is seeking an understanding of where OHP clients of that age are getting services. (University health centers?)

Colorectal Cancer Screening with Focus on Reducing Racial and Ethnic Health Disparities

The Transformation Center will also be providing technical assistance for the colorectal cancer screening incentive metric, which will involve a different process. If you would like to participate, please notify us through the same email address: metrics.questions@state.or.us.

The Transformation Center is collaborating with the Oregon Rural Practice-based Research Network (ORPRN) and the OHA Public Health Division to assist CCOs and practices in improving colorectal cancer screening rates and reducing racial and ethnic disparities related to colorectal cancer screening rates.

Incentive Metric Webinar for CCOs

- Transformation Center and Health Analytics are hosting a one-hour, office hours type incentive metrics webinar for CCOs to discuss:
 - Childhood immunization rates
 - Smoking cessation
 - Adolescent well care visits
 - Colorectal cancer screening
 - Effective contraceptive use
 - Dental sealants
- Webinar goals are to answer CCO questions about:
 1. Technical specifications for the metrics; and
 2. Quality improvement strategies for the metrics
- Wednesday, March 9 from 2 – 3 pm:
<https://attendee.gotowebinar.com/register/5262363078876282372>

Questions?

- If you have any questions, please send them to: metrics.questions@state.or.us

Food Insecurity Screening: Revisited

Recap

- July – Oct 2015 TAG conversations about a potential metric, including presentations from various programs already in place, surveying CCOs on data elements for the metric, and reviewing specifications.
- In October, several key questions were identified that need to be answered before metric development can move forward re: measure intent, scope, and accountability.

Key Questions

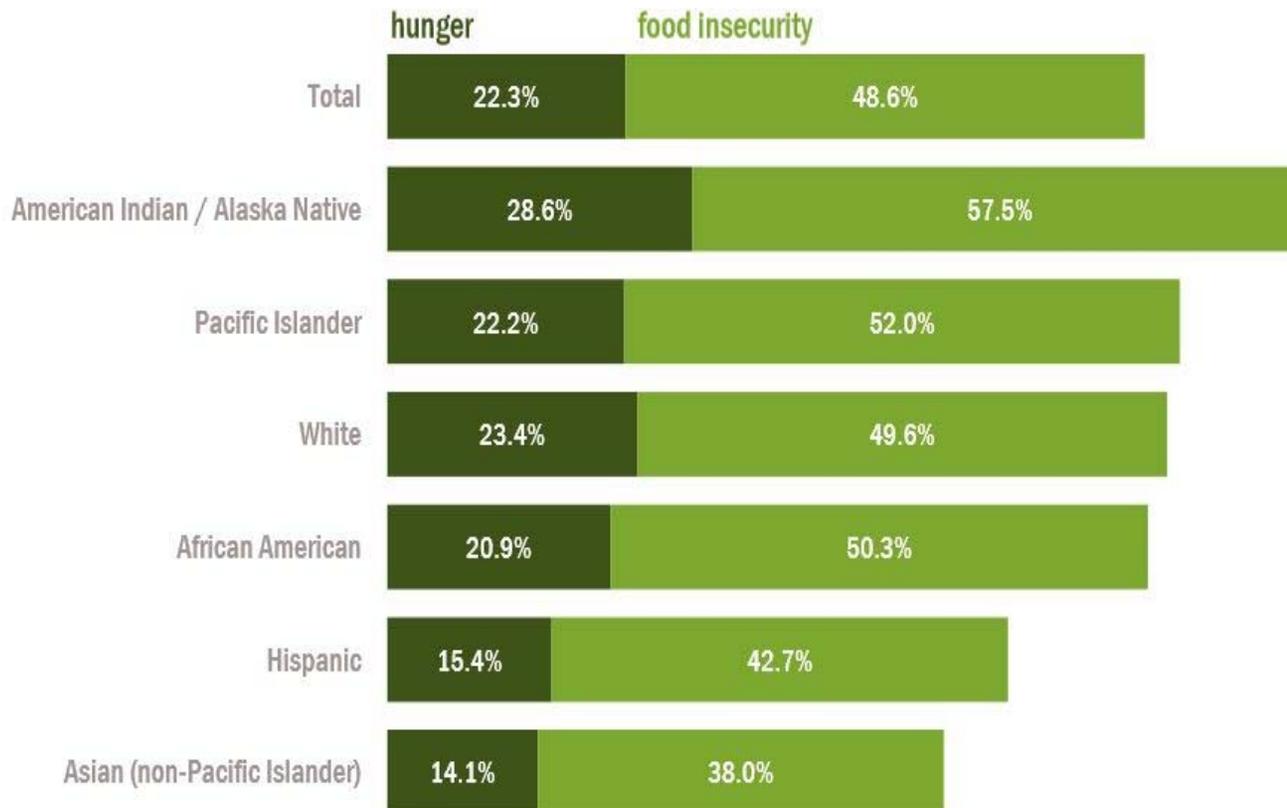
- What is the right level of accountability for health plans, hospitals, providers, and community organizations?
- What is the right scope for the measure?
- Should the measure be population based, or encounter based?
- What is the best way to collect the data?
- Is 12 months a realistic timeframe to reduce food insecurity across a region?

Twice as many adult Medicaid members reported **food insecurity** and **hunger** than all Oregon adults.

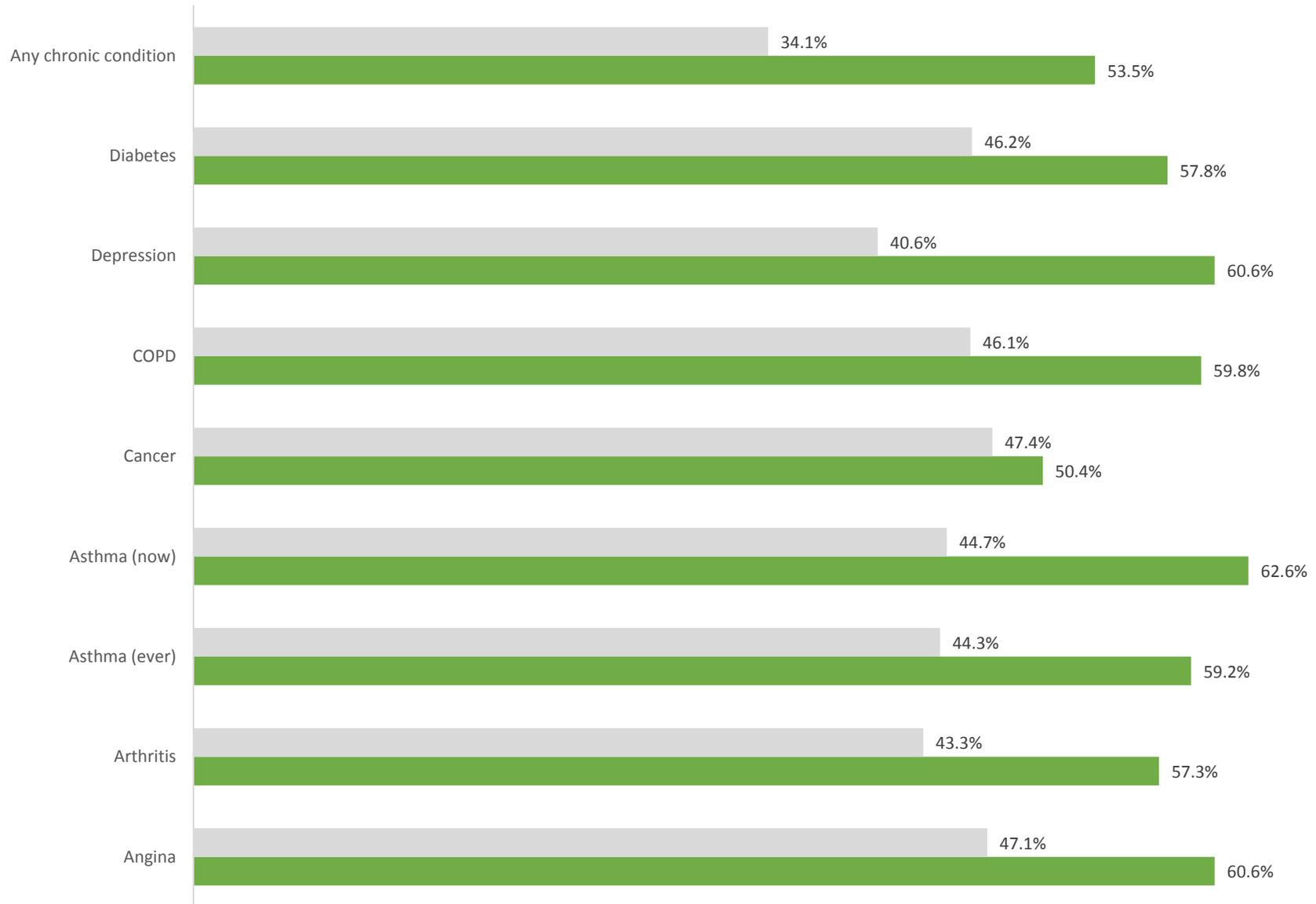


CCO level data available in the 2014 Medicaid BRFSS report, online at:
www.oregon.gov/oha/analytics/MBRFSS%20Docs/2014%20MBRFSS%20Report.pdf
(page 79)

More American Indian / Alaska Native Medicaid members and fewer Asian (non-Pacific Islander) and Hispanic members reported **hunger** and **food insecurity**.



Percentage of Medicaid adults **with** and **without** chronic conditions, who are food insecure, 2014 MBRFSS



Today

- Review draft white paper with key questions and measure options.
- Make decisions (if possible) to inform specification development and begin developing recommendation for Metrics & Scoring Committee.

Next Meeting

- March 24th, 1-3 pm
- Agenda:
 - School-based dental sealant program update
 - CCO Oregon dental metrics workgroup presentation