
Transformation and Quality Strategy (TQS)

2022 global feedback and 2023 updates

October 6, 2022



Agenda

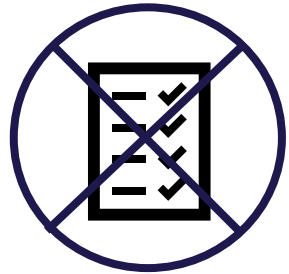
- TQS background
- 2022 feedback
 - Score summary
 - Strengths
 - Opportunities
 - Deep dive on component prior year assessment vs. project context
- 2023 updates
 - Component-specific updates
 - Cross-component updates
- Technical assistance

TQS foundational principles

The TQS addresses three key principles:

1. Meet relevant CFR, OAR, 1115 waiver and CCO contractual requirements
2. Pushes health transformation through alignment with quality and innovation
3. Combine aspects of transformation and quality improvement requirements to decrease administrative burden

Why do the work



Efficiency

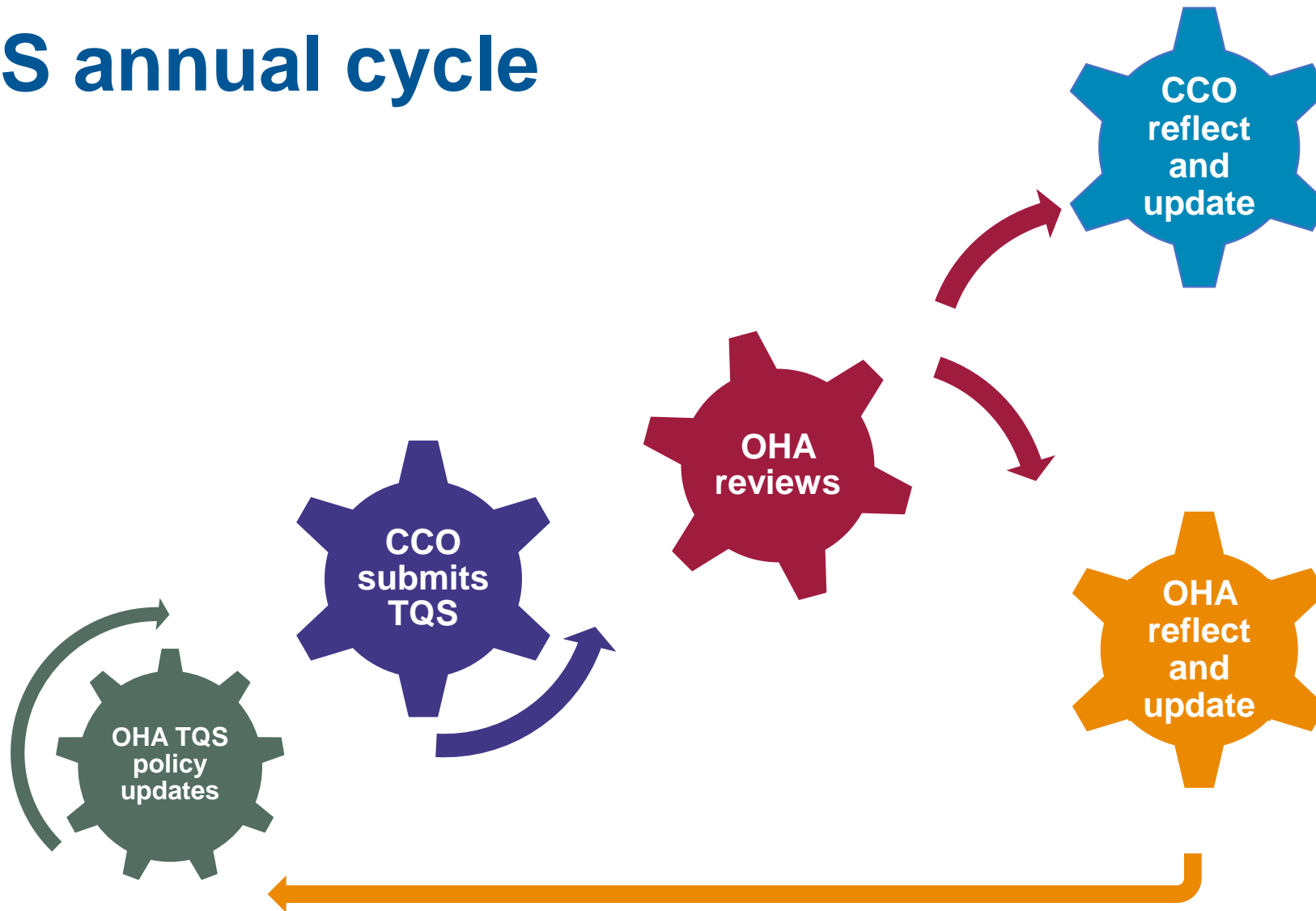
is doing things right;

Effectiveness

is doing the *right* things.

– Peter Drucker

TQS annual cycle



2022 score summary

2022 by the numbers

Total TQS projects submitted = 189

- Average per CCO = 12 (range 8–16)

Percent of projects continued from prior year = 54%

Average score out of 144 possible = 120 (83.5%)

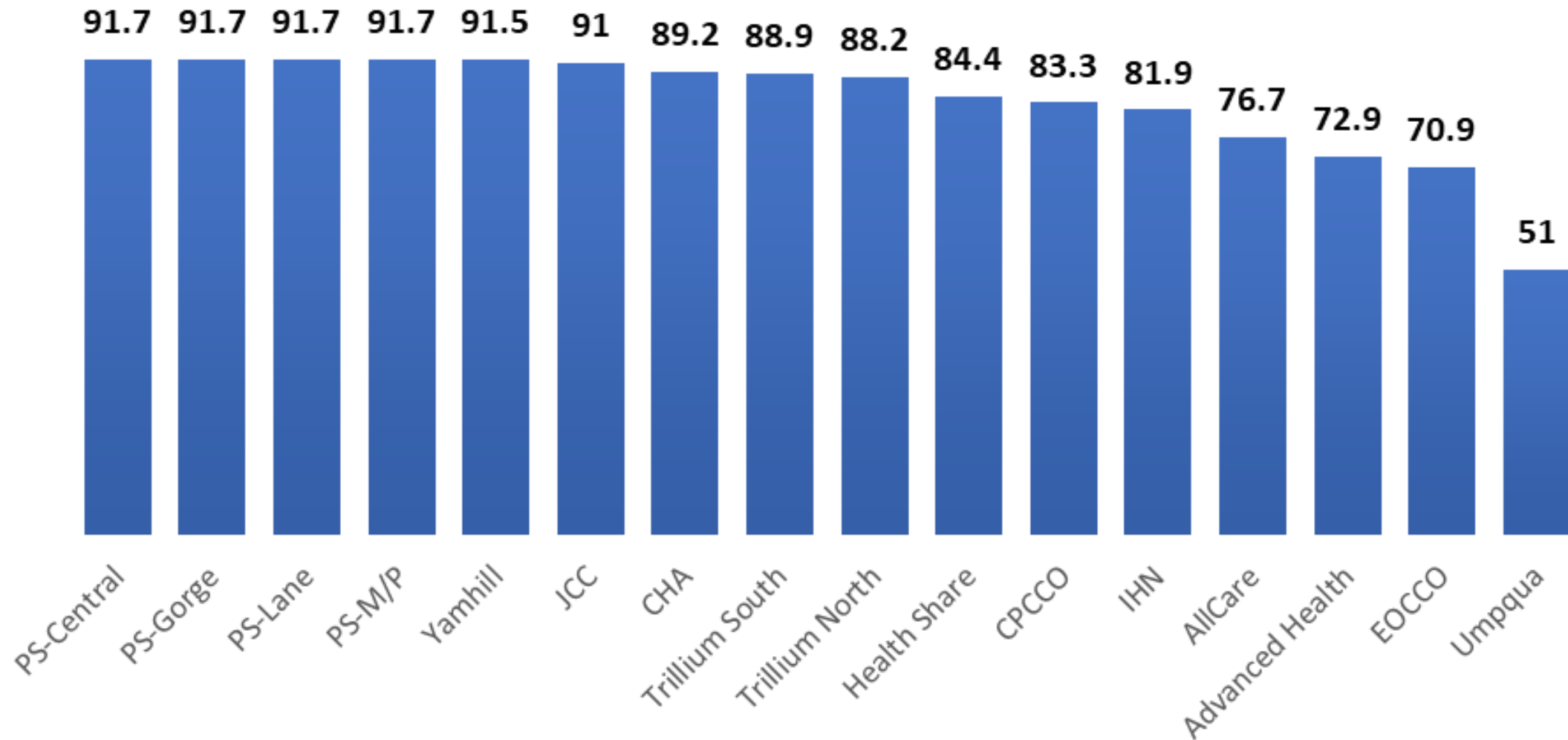
- Average increase of 5.9 percentage points

Average scores by component

BHI	8.56
Grievances and Appeals	8.34
PCPCH Tiers	8.31
Health Equity: Data	8.28
PCPCH Enrollment	8.25
SPMI	8.06
Access: Cultural Considerations	7.91
Access: Quality and Adequacy	7.83
Health Equity: Cultural Responsiveness	7.72
OHI	7.63
SDOH-E	7.58
Utilization Review	7.40
CLAS Standards	7.27
Access: Timely	7.25
SHCN FBDE	5.00
SHCN Non-duals	4.91

**Includes sum of scores for relevance (component-specific), detail and feasibility using a Likert scale: 1 – very limited, 2 – somewhat, 3 – fully met*

Total scores by CCO (%)



2022 strengths

Project strengths

128 of 256 project components scored 9s (full score for relevance, detail and feasibility)

- Reminder: Multiple components can be assigned to each project.

Strongest components by score

- Behavioral health integration
- Grievances and appeals
- PCPCH: tier advancement
- Health equity: data
- PCPCH: member enrollment



Strengths: Themes

- Average CCO score increased 5.9 percentage points
- Fewer CCOs had components that earned zero or minimum scores
- Projects becoming more robust – moving past collecting baseline, developing reports, etc. and into improvement/transformation work
- About half of CCOs used TQS for MEPP reporting

In the reviewers' words

I truly enjoyed reading the details of this project. It is evident that the CCO is in tune with their member population and surrounding clinics.

This approach could be valuable to share with other CCOs.

I have a clear idea of where [the CCO] is heading and why.

I am thrilled to see that community partners are using Unite Us to refer community members to dental and other care.

We have received feedback from the PCPCHs that they feel very supported by the [CCO staff] for this project.

2022 opportunities

Opportunities



Weakest components by score (same as last year):

- Special Health Care Needs (SCHN) – for both full-benefit dual eligible and non-FBDE Medicaid populations
- Access: Timely

5 of 16 CCOs had at least one component that scored 0 or 1s across the scoring criteria.

Opportunities: component specific

- Health equity – Push more on transformation and quality improvement (staff training with attached process measures not enough)
- SPMI – Prioritize value and measuring outcomes. CCOs are measuring what it's easier to measure, but less transformational (less risk) – OHA wants to see outcomes. It's okay to take risks.

Opportunities: themes

- Ensure project meets all component-specific requirements for every component attached to the project.
- Update targets and benchmarks for current year; if they're unchanged, explain why.
- Ensure continuing projects have addressed prior year feedback.
- Improve use of race, ethnicity, language and disability (REALD) data for all projects that use member-level data
- Component prior year assessment – lack of broad component-level data and narrative; too focused on project instead of component.

**Deep dive: Component prior year
assessment vs. project context**

What's the difference between TQS Section C and D?

Component prior year assessment = NOT project-specific

- Overview and brief evaluation of your CCO's work in each of the assigned component areas over the last year.

Project context = project-specific

- New projects: Describes why the project was chosen with clear rationale.
- Continuing projects: Describes progress to date

Component prior year assessment

- An overview and brief evaluation of your CCO's work in each of the assigned component areas over the last year. **This should address the broader component area** (for example, social determinants of health and equity) and be **not specific to any one TQS project**.
- **Existing gaps** in the component area, which will set up the rationale for choosing a new or continuing a specific project that's described in section D (project context).
- Includes **CCO-specific or region-specific data** addressing the component
- Use **REALD** (race, ethnicity, language and disability) and SOGI (sexual orientation and gender identity) data.

Project context

- **If new project, describe why your CCO has chosen this project.** The project should move the component area's health system transformation forward and/or serve as a building block to your CCO's organizational and quality efforts for the component area. Describe how this project addresses unique characteristics, identified needs and service gaps.
- **If continued project, describe progress to date** as demonstrated by trend data and whether last year's targets and benchmarks were met (if not, why not), including lessons learned. Explain any changes to project focus.
- **Include CCO-specific or region-specific data.** Provide enough detail to demonstrate that the project is a data-informed intervention, and it will achieve the stated goals and produce the desired outcome.
- **Include REALD and SOGI data.**

Component-specific updates

2023 TQS components

Project needs to meet the requirements for each component assigned to it.

1	Behavioral Health Integration	8	PCPCH: Tier Advancement
2	CLAS Standards	9	Serious and Persistent Mental Illness (SPMI)
3	Grievance and Appeal System	10	Social Determinants of Health & Equity (SDOH-E)
4	Health Equity: Data	11	Special Health Care Needs (SHCN): Full Benefit Dual Eligible Population
5	Health Equity: Cultural Responsiveness	12	SHCN: Non-duals Medicaid Population
6	Oral Health Integration	13	Utilization Review
7	Patient-Centered Primary Care Home (PCPCH): Member Enrollment		

Access components removed from prior year.

Access

- All three access components have been removed from the TQS.
- OHA will continue to review and monitor access through DSN deliverables, which will be expanded around access monitoring and network adequacy.
- OHA will solicit each CCO's current access monitoring plan early in 2023. OHA will release more specific guidance ahead of that request.

Utilization review/MEPP

- All CCOs are now required to report on Medicaid Efficiency and Performance Program (MEPP) through the TQS.
- All requirements for both TQS and MEPP are in the TQS guidance document (utilization review component).
- Non-MEPP utilization review projects may be continued in TQS or closed out in Section 2.
- See new example strategy that includes MEPP.
- TA webinar October 13

PCPCH: Member enrollment

Projects for this component not required for CCOs with at least 85% of members enrolled in PCPCHs

- As reported for 2021
- If not required to submit, CCO automatically earns full score for this component

Other component-specific updates

- **SHCN: Full benefit dual eligible** – Added requirement for collaboration with Medicare Advantage plan
- **SHCN** (both components) – Clarified guidance and requirements
- **CLAS** – Expanded scoring criteria for describing how the project is transformative, measures quality improvement, and advances quality care
- **Health equity: cultural responsiveness** – New criterion: Clearly identify goals that are inclusive and equitable. Added guidance to move projects from basic infrastructure to quality and transformation.
- **Behavioral health integration** – New example strategy for metabolic screening for patients with serious mental illness on psychotropic medications

Cross-component updates

Compliance updates

- Submission not accepted if:
 - not current year template
 - not project for every component
 - targets/benchmarks not updated for current year
- Requiring feedback call for all CCOs (June/July after receive written assessment)
- If a CCO scores 70% or less of points possible, require quality assurance check-in

Section 3: quality program attachment updates

Please attach the following documentation about your organization's quality program:

- 1) Quality Assurance and Performance Improvement (QAPI) Workplan
- 2) QAPI Impact Analysis
 - This narrative analysis should summarize QAPI work in the prior year, including successes, issues and barriers identified, and explain how your organization will use QAPI to minimize barriers and resolve issues in the year to come.

Changes better align with QAPI requirements.

Equity updates

- REALD and SOGI required for all projects; at minimum a plan for how CCO will use REALD and SOGI in project
 - Updated example strategies posted by November 15
 - TA webinar November 29
- SMARTIE encouraged (TA webinar December 2; registration coming soon)
- Define the population; consider prioritized populations (see next slide)

New FAQ: Who are considered priority populations?

- Members eligible for intensive care coordination (see list in OAR 410-141-3870)
- Populations prioritized in *Healthier Together Oregon: 2020–2024 State Health Improvement Plan*: Black, Indigenous, people of color, and American Indian/Alaska Native people, people with low incomes, people who identify as LGBTQ+, people with disabilities, and people living in rural areas
- Communities experiencing health disparities (as identified in the CCO's community health assessment)

2023 TQS – announcements

- Guidance documents were September 30.
- Updated example strategies will be posted by November 15 (same projects, with addition of REALD)
- 2022 submissions are posted to TQS website, along with scores and written assessments.

2022 TQS technical assistance

Guidance documents: www.oregon.gov/oha/HPA/dsi-tc/Pages/Transformation-Quality-Strategy-Tech-Assist.aspx

Webinar series (October–December)

- ✓ Webinars include general and component-specific lessons learned, changes for the coming year and time for CCOs to ask OHA SMEs questions.
- ✓ Focus: Utilization review/MEPP; SPMI; SHCN; REALD data; SMARTIE goals

Office hours (November–March)

- ✓ Allows CCOs to ask questions as they develop and finalize their TQS submissions.
- ✓ Offered monthly (first Thursdays).

Feedback on sample project (February)

- ✓ Each CCO may submit one project for feedback prior to final submission (due Feb. 15).

Written and oral feedback for each CCO (early summer)

- ✓ Feedback on strengths and weaknesses in documentation or structure of CCO health transformation and quality work.
- ✓ Written assessment with scores; required 60-minute call with OHA.

Resources

OHA TQS leads:

- ✓ Lisa Bui: Lisa.T.Bui@dhsoha.state.or.us
- ✓ Anona Gund: Anona.E.Gund@dhsoha.state.or.us
- ✓ Carrie Williamson: Carrie.Williamson2@dhsoha.state.or.us
- ✓ Tiffany Reagan: Tiffany.T.Reagan@dhsoha.state.or.us

All TQS resources, including the templates, guidance document, and technical assistance schedule are available on the **Transformation Center website**: www.oregon.gov/oha/HPA/dsi-tc/Pages/Transformation-Quality-Strategy-Tech-Assist.aspx

The templates and guidance document are also cross-posted on the **CCO Contract Forms page**: www.oregon.gov/oha/HSD/OHP/Pages/CCO-Contract-Forms.aspx



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Thank You

The logo for the Oregon Health Authority. It features the word "Oregon" in a smaller, orange, serif font positioned above the word "Health". "Health" is written in a large, blue, serif font. Below "Health", the word "Authority" is written in a smaller, orange, serif font. The entire logo is centered within a light blue, rounded rectangular background.

Oregon
Health
Authority