
Transformation and Quality Strategy (TQS)

2021 global feedback & 2022 updates

October 4, 2021

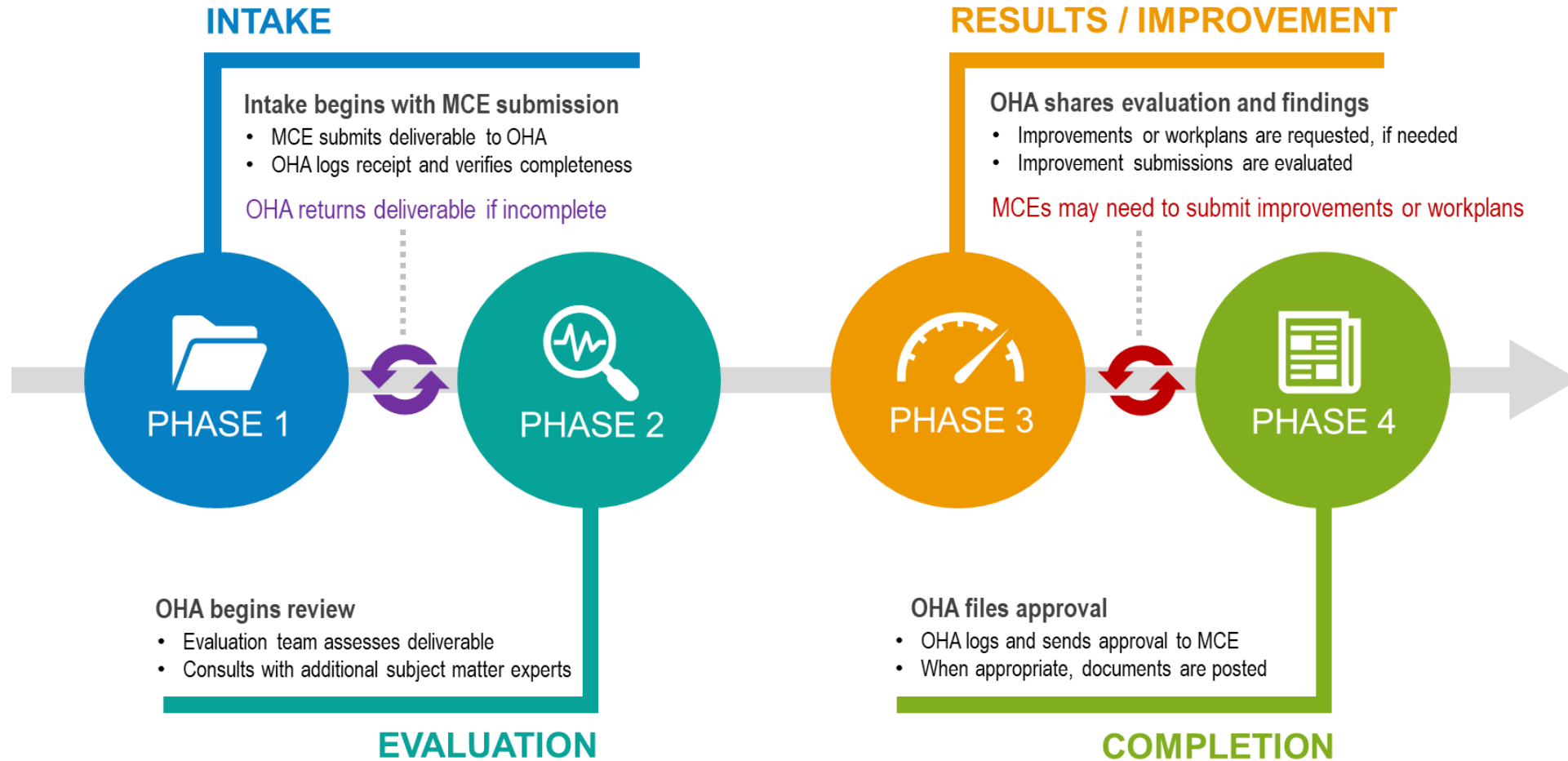


Agenda

- CCO deliverable evaluation
- TQS background – where we've been, where we're going
- 2021 score summary
- 2021 strengths
- 2021 opportunities
- What's coming in 2022
- Technical assistance

CCO DELIVERABLE EVALUATION

Process overview



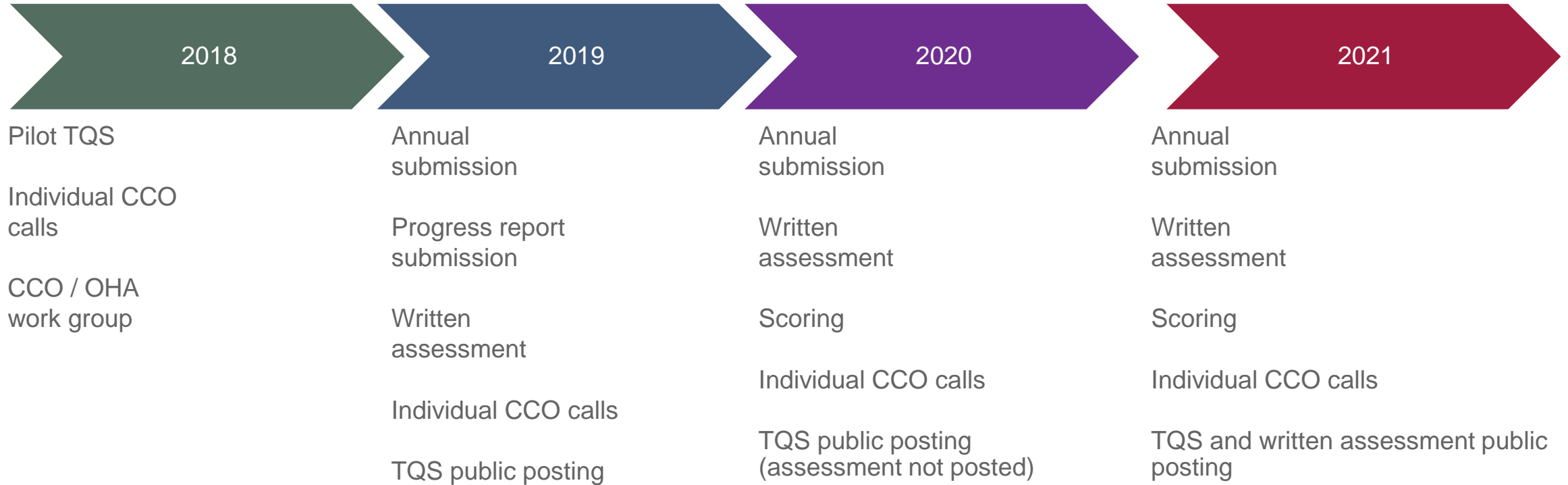
TRANSFORMATION AND QUALITY STRATEGY

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. Decrease administrative burden
 - ✓ Supports OHA's use of information to monitor CCOs' progress to benchmarks.
 - ✓ Incorporates narrative style and specific/measurement methods.
 - ✓ Combines two annual deliverables from prior years 2012-2017.

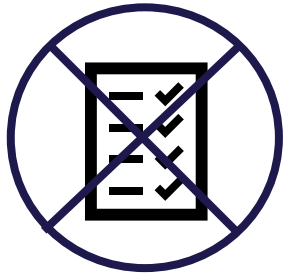
Where we've been...



Where we are...



Why do the work



Efficiency

is doing things right;

Effectiveness

is doing the *right* things.

– Peter Drucker

2021 SCORE SUMMARY

2021 by the numbers

Number of total TQS projects submitted = 163

Average # of projects per CCO = 10.2 (range 7–14)

Percent of projects continued from prior year = 77%

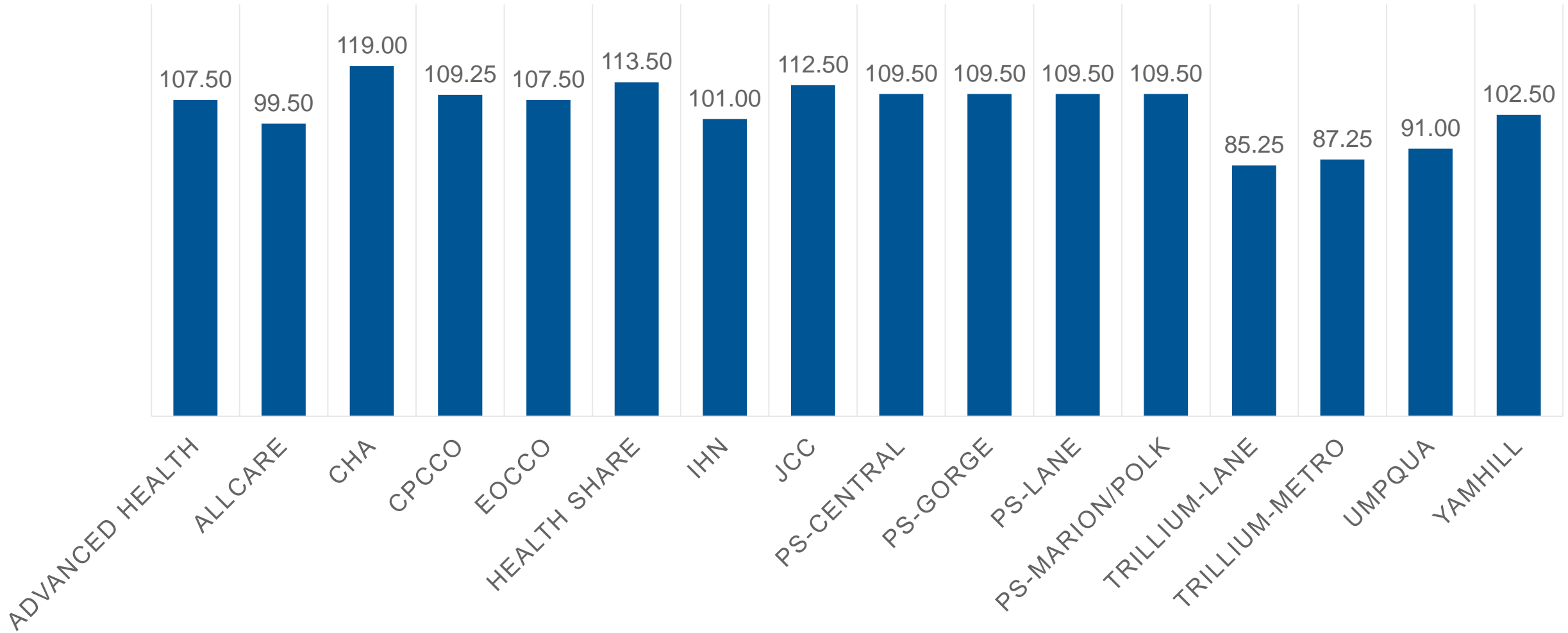
Average score out of 135 possible = 104.6

2021 components by numbers

TQS component	Average CCO score*
SDOH-E	8.18
CLAS Standards	8.16
Behavioral Health Integration	8.00
Grievances and Appeals	7.78
Health Equity: Cultural Responsiveness	7.75
Health Equity: Data	7.69
PCPCH Enrollment	7.56
Oral Health Integration	6.88
Access: Quality and Adequacy	6.69
PCPCH Tiers	6.63
Severe and Persistent Mental Illness	6.59
Access: Cultural Considerations	6.56
Access: Timely	6.28
Special Health Care Needs	5.20
Utilization Review	4.67

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

2021 scores by CCO



*Total score possible 135

2021 TQS STRENGTHS

Project strengths

99 of 314 components scored 9s (full score for relevance, detail and feasibility)

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

Strongest components by score

- SDOH-E
- CLAS standards
- Behavioral health integration



Strengths: Themes

- Rationale and project context
- Updates on delay/pause of project
- Population defined – community partners included

In the reviewers' words

This project exemplifies the importance of capturing meaningful baseline data to estimate any changes, for comparison purposes over time and to demonstrate progress toward quality access outcomes.

Expanded workforce by use of THW especially in rural areas

This is an exemplary project that provides detail on all of the important aspects of this intervention.

I would say this is a model response for CLAS standard #10.

Concept is critical to care for population and includes non-Medicaid populations, which is critical for contract objectives as well as system resource management.

Financial incentives for support services. This is critical if we want to see any measurable uptake/adoption of MAT.

This project, if successful in changing network provider behavior, should be held out as a model for OHA and all other CCOs. This work reflects quality and transformation.

2021 TQS OPPORTUNITIES

Project opportunities



Opportunity across CCOs exist in documenting and aligning work for health transformation and quality.

- 13 of 16 CCOs had project(s) that scored 1s across the scoring criteria.

Weakest components by score

- Access: Timely
- Special Health Care Needs (SCHN)
- Utilization

Opportunities: Common themes

- Component prior year assessment
- Monitoring activities
 - Monitoring activities for improvement (aka monitoring measure)
- Project does not align to component requirements
 - Project needs to meet the requirements for each component assigned to it.

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

Component prior year analysis – Section C

- Assessment of prior calendar year for the component(s) assigned to the project.
- Includes CCO-specific or region-specific data addressing the component

Project context – Section D

- All projects: Includes CCO-specific or region-specific data addressing the component
- New projects: Describes why the project was chosen with clear rationale.
- Continuing projects: Describes progress to date

Walk through example :

Project #4

Using grievance and appeal data to remove barriers for members

WHAT'S COMING IN 2022

2022 updates

- **SHCN** – Split into two components: full benefit dual eligible and non-duals
- **Access: Timely** – Projects need to include travel time and distance AND timely appointments (separate access webinar Oct. 28)
- **Utilization review** – Guidance now includes how to address Medicaid Efficiency and Performance Program (MEPP) reporting requirements through the TQS.
- **BHI** – Clarified definition of integration and application/implementation
- **SDOH-E** – Clarified “community level” requirement (not individual access of care)
- Request to add table of contents to submission
- Template – Changed “monitoring activity for improvement” to “monitoring measure” and moved it into the data table.
- Changes to description of required QI committee documentation

2022 updates (cont.) – New FAQs

What's the difference between SDOH-E reporting in TQS compared to the SHARE Initiative spending plan?

- ✓ The TQS focuses on quality improvement and transformation work, whereas SHARE Initiative reporting focuses on accountability for spending. (more details in FAQ)

How many projects should we submit for each component?

- ✓ One project per component is required, but CCOs may submit additional projects. OHA recommends CCOs submit no more than two or three projects per component. Each component assigned will be reviewed and scored separately.

Can we rename a project if it's continued from the prior year?

- ✓ Yes. Please use the same project ID and indicate name change in project context.

May I submit duplicate projects for multiple CCOs?

- ✓ Please indicate whether/how the projects are differentiated. At a minimum, OHA expects the data to be region-specific.

Components (2022)

1	Access: Quality and Adequacy of Services	9	Oral Health Integration
2	Access: Cultural Considerations	10	Patient-Centered Primary Care Home (PCPCH): Member Enrollment
3	Access: Timely	11	PCPCH: Tier Advancement
4	Behavioral Health Integration	12	Serious and Persistent Mental Illness (SPMI)
5	CLAS Standards	13	Social Determinants of Health & Equity (SDOH-E)
6	Grievance and Appeal System	14	Special Health Care Needs (SHCN): Full Benefit Dual Eligible Population*
7	Health Equity: Data	15	Special Health Care Needs (SHCN): Non-duals Medicaid Population*
8	Health Equity: Cultural Responsiveness	16	Utilization Review

**New for 2022: SCHN is now two components*

Guidance for 2022 submission

COVID – how/what to report for projects stalled or changed

- ✓ Identify how the project is addressing challenges with changed activities, metrics, etc. For example, explain why progress stalled and what was done instead.
- ✓ Provide context and details on barriers for project implementation
- ✓ Determine if there are specific activities CCOs can undertake vs health system, community
- ✓ Utilizing large data sets of membership to identify gaps and health inequities.

Opportunities to move beyond compliance to transformation

Health equity: Data

- ✓ Heads up for next year: Processes that allow stratification of sexual orientation and gender identity data will be required starting in 2023 TQS submissions.

Review scoring criteria and guidance document for all components.

Review the FAQ with attention to new or updated questions.

2022 TQS – additional announcements

- Example strategies will be posted by November 1. All other guidance documents were posted October 1.
- 2021 submissions are posted to TQS website, along with scores and written assessments.
- Oct. 11 QPI session at QHOC will include open discussion and peer learning on TQS.
- The CCO TQS leads list will be emailed shortly, please review and update if needed.
- ✓ Up to three TQS primary points of contact for each CCO

2022 TQS technical assistance

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

Webinar series (October–November)

- ✓ **Purpose:** Provides technical assistance to CCOs for developing next year’s TQS submission.
- ✓ 5-part webinar series that covers general and component-specific lessons learned and changes for the coming year. Webinars include time for CCOs to ask OHA SMEs questions.

Office hours (November–March)

- ✓ **Purpose:** Allows CCO to ask questions as the CCO is developing and finalizing the TQS submission.
- ✓ Offered monthly until submission

Written and oral feedback for each CCO (early summer)

- ✓ **Purpose:** Provides CCOs feedback on strengths and weaknesses in documentation or structure of CCO health transformation and quality work.
- ✓ Written assessment with scores; optional 60-minute call with OHA.



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Resources

OHA TQS Leads:

- ✓ Lisa Bui: Lisa.T.Bui@dhsoha.state.or.us
- ✓ Anona Gund: Anona.E.Gund@dhsoha.state.or.us
- ✓ Veronica Guerra: Veronica.Guerra@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

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