

Primary Care Program Advisory Committee

Supplemental Meeting: Data Compendium Review and Discussion

August 24, 2023

Agenda

| Topic | Timing |
|---|---------------|
| Opening Remarks and Welcome | 5 Minutes |
| Measures of Access & Member Experience | 20 Minutes |
| Prevalence of Chronic Conditions | 10 Minutes |
| Q&A Discussion | 25 Minutes |

Goals for Today

- Revisit the data compendium and review outstanding data topics prioritized by members for review
- Give members an opportunity to ask questions and discuss observations that could inform primary care program design

Data Compendium Review

Today, we will review a selection of outstanding data topics previously prioritized by members for review.

| Data Requests | Data Available? | Where to Find | Priority Order (from pre-meeting poll) |
|--|-----------------|--|---|
| Measures of Access: By Different Geographical Areas in the State | Yes | (4) Measures of Primary Care Access (PDF) | 2 |
| Member Experience Metrics | Yes | (3) Member Experience Metrics (PDF) | 4 |
| Prevalence of Chronic Conditions | Yes | (5) Utilization, Cost, and Prevalence (PDF) | 5 |
| Pediatric Data: Quality and Outcomes | Yes | (2) Data Compendium (Excel) | 5 |
| Pediatric Data: Cost and Utilization | Yes | (2) Data Compendium (Excel) | 6 |
| Measures of Access: By Practice Setting | Yes | (4) Measures of Primary Care Access (PDF) | 6 |
| Prevalence of Health-Related Social Needs (HSRN) | Yes | (1) PCPAC Meeting 4 Deck | <i>Reviewed at Meeting 4</i> |
| Unattributed Member Data | Yes | (2) Data Compendium (Excel) | <i>Reviewed at Meeting 5</i> |
| Utilization and Cost by Population | Yes | (5) Utilization, Cost, and Prevalence (PDF) | <i>Reviewed at Meeting 5</i> |
| Measures of Access: By Subpopulations (DD, noncitizens) | No | | |
| Measures of Access: By Member Preferences for Providers | No | | |

Measures of Access: Primary Care Network Adequacy

Key Takeaways:

- 100% of HUSKY members are within 15 miles of a HUSKY Health PCP or Pediatrician

Methodology Notes:

- GeoAccess reports assess the distance to any HUSKY Health provider, regardless of the provider's panel status (open or closed)

| <u>EX E Gap and Network Adequacy Analysis # 10 - Draft</u> | | | | | | | | | | July 28, 2023 | | |
|--|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|---------------|--------------|--------------|
| HUSKY GEO ACCESS by LOB | HUSKY A 1:15 | HUSKY A 1:20 | HUSKY A 1:25 | HUSKY B 1:15 | HUSKY B 1:20 | HUSKY B 1:25 | HUSKY C 1:15 | HUSKY C 1:20 | HUSKY C 1:25 | HUSKY D 1:15 | HUSKY D 1:20 | HUSKY D 1:25 |
| PCPs (Adult) | 100% | | | | | | 100% | | | 100% | | |
| Pediatricians (Child) | 100% | | | 100% | | | 100% | | | 100% | | |

Measures of Access: Primary Care Network Adequacy

Key Takeaways:

- Currently, 7% of HUSKY members are within 15 miles of a HUSKY Health PCP or Pediatrician with a closed or limited panel

Methodology Notes:

- This table considers provider panel status (open vs. closed or limited)
- This data has been updated; the most recent data is shown below (as of July 28th)

| <u>EX E Gap and Network Adequacy Analysis # 10 - Draft</u> | | | | | July 28, 2023 |
|--|------------------|---|--|--|---|
| Program Name | Total Membership | Number of attributed and unattributed members included with access to a PCP/Pedi with an open panel | Number of attributed members excluded with access to a PCP/Pedi with a closed or limited panel | Percentage of membership included with access to a PCP/Pedi with an open panel | Percentage of membership excluded with access to a PCP/Pedi with a closed panel |
| HUSKY A | 561,944 | 513,228 | 48,716 | 91.33% | 8.67% |
| HUSKY B | 12,786 | 10,775 | 2,011 | 84.27% | 15.73% |
| HUSKY C | 77,044 | 71,606 | 5,438 | 92.94% | 7.06% |
| HUSKY D | 370,065 | 350,907 | 19,158 | 94.82% | 5.18% |

Member Experience Measures Related to Access: Summary

Key Takeaways:

- CAHPS measures provide important insight into the member experience of accessing care

Note that these measures are not PCP-specific

| MEASURE | SUMMARY RATE | | CHANGE | National Vendor Client Sample | | | PERCENTILE RANK | BoB SRS | | | |
|---------|--------------|------|--------|-------------------------------|----|----|-----------------|---------|-----|--|--|
| | 2021 | 2022 | | PERCENTILE DISTRIBUTION | | | | | | | |
| | | | | 0 | 20 | 40 | 60 | 80 | 100 | | |

2022 Medicaid Adult – HUSKY A/C/D (277 completed surveys; 16.0% response rate)

| | | | | | | | | | | |
|--|-------|-------|-----|--|--|--|--|--|------------------|-------|
| Getting Needed Care <small>% Usually or Always</small> | 82.1% | 83.3% | 1.2 | | | | | | 52 nd | 82.3% |
| Getting Care Quickly <small>% Usually or Always</small> | 82.5% | 83.2% | 0.7 | | | | | | 66 th | 80.9% |

2022 Medicaid Child – HUSKY A/C/D (379 completed surveys; 17.8% response rate)

| | | | | | | | | | | |
|--|-------|-------|------|--|--|--|--|--|------------------|-------|
| Getting Needed Care <small>% Usually or Always</small> | 84.0% | 82.5% | -1.5 | | | | | | 37 th | 84.4% |
| Getting Care Quickly <small>% Usually or Always</small> | 89.9% | 84.3% | -5.6 | | | | | | 30 th | 86.7% |

2022 Medicaid Child – HUSKY B (347 completed surveys; 16.5% response rate)

| | | | | | | | | | | |
|--|-------|-------|------|--|--|--|--|--|------------------|-------|
| Getting Needed Care <small>% Usually or Always</small> | 86.7% | 80.4% | -6.3 | | | | | | 24 th | 84.4% |
| Getting Care Quickly <small>% Usually or Always</small> | 91.1% | 86.3% | -4.8 | | | | | | 44 th | 86.7% |

Member Experience Measures Related to Access

Sample Size Details

2022 Medicaid Adult – HUSKY A/C/D (277 completed surveys; 16.0% response rate)

| | 2022 Valid n | 2020 | 2021 | 2022 | 2022 SPH BoB | 2021 QC |
|---|-----------------|--------------|--------------|--------------|--------------|--------------|
| Getting Needed Care (% Usually or Always) | 167 | 83.3% | 82.1% | 83.3% | 82.3% | 83.6% |
| Q9. Getting care, tests, or treatment | 193 | 85.6% | 85.8% | 85.0% | 85.0% | 85.5% |
| Q20. Getting specialist appointment | 141 | 81.1% | 78.3% | 81.6% | 79.6% | 81.8% |
| Getting Care Quickly (% Usually or Always) | 131 | 85.5% | 82.5% | 83.2% | 80.9% | 81.8% |
| Q4. Getting urgent care | 86 [^] | 89.0% | 85.1% | 88.4% | 81.7% | 83.1% |
| Q6. Getting routine care | 177 | 82.0% | 80.0% | 78.0% | 80.0% | 79.9% |

2022 Medicaid Child – HUSKY A/C/D (379 completed surveys; 17.8% response rate)

| | 2022 Valid n | 2020 | 2021 | 2022 | 2022 GP SPH BoB | 2021 GP QC |
|---|-----------------|--------------|--------------|--------------|-----------------|--------------|
| Getting Needed Care (% Usually or Always) | 171 | 86.5% | 84.0% | 82.5% | 84.4% | 85.7% |
| Q10. Getting care, tests, or treatment | 248 | 92.3% | 89.3% | 89.1% | 89.2% | 90.3% |
| Q41. Getting specialist appointment | 95 [^] | 80.6% | 78.7% | 75.8% | 79.5% | 81.9% |
| Getting Care Quickly (% Usually or Always) | 166 | 88.6% | 89.9% | 84.3% | 86.7% | 86.9% |
| Q4. Getting urgent care | 78 [^] | 88.9% | 94.8% | 87.2% | 90.5% | 91.0% |
| Q6. Getting routine care | 254 | 88.3% | 85.0% | 81.5% ‡ | 82.9% | 83.0% |

2022 Medicaid Child – HUSKY B (347 completed surveys; 16.5% response rate)

| | 2022 Valid n | 2020 | 2021 | 2022 | 2022 GP SPH BoB | 2021 GP QC |
|---|-----------------|--------------|--------------|----------------|-----------------|----------------|
| Getting Needed Care (% Usually or Always) | 152 | 89.6% | 86.7% | 80.4% ‡ | 84.4% | 85.7% ▼ |
| Q10. Getting care, tests, or treatment | 225 | 94.2% | 94.4% | 85.8% ↓‡ | 89.2% | 90.3% |
| Q41. Getting specialist appointment | 80 [^] | 84.9% | 79.0% | 75.0% | 79.5% | 81.9% |
| Getting Care Quickly (% Usually or Always) | 145 | 91.0% | 91.1% | 86.3% | 86.7% | 86.9% |
| Q4. Getting urgent care | 80 [^] | 91.7% | 97.0% | 92.5% | 90.5% | 91.0% |
| Q6. Getting routine care | 211 | 90.3% | 85.3% | 80.1% ‡ | 82.9% | 83.0% |

Significance Testing: Current score is significantly higher/lower than the 2021 score (↑/↓), the 2020 score (‡/‡) or benchmark score (▲/▼).

[^]Denominator less than 100. NCQA will assign an NA to this measure.

Reading this Report: Detailed Measure Reporting

Drilling Down Into Composites And Ratings This section is designed to give your plan a detailed report on the performance of each Star Rating measure as well as a few other key metrics. The measure analysis section contains:

Rating & Composite level information including...

- Percentile ranking and benchmark performance
- Historic scores
- Market performance

Attribute level information for composites including...

- Gate questions
- Percentile ranking and benchmark performance
- Summary rate score trending

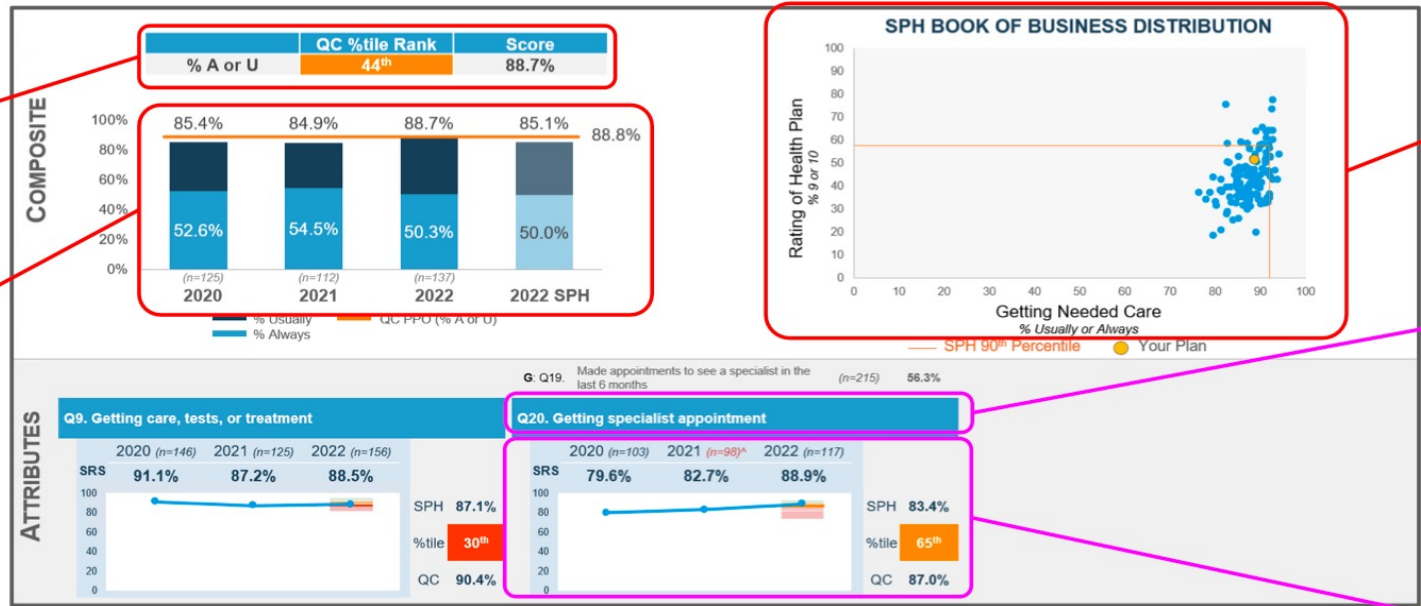
| Percentile Bands | |
|-------------------------------------|--|
| ≥90 th | |
| 67 th – 89 th | |
| 33 rd – 66 th | |
| 10 th – 32 nd | |
| <10 th | |

All scores displayed in this section are summary rate scores (notated with 'SRS').

More info.

Your plan's performance ranking along with **Summary Rate Score** are displayed at the top for quick reference.

Your plan's current year **Summary Rate Score** and base size along with previous two years, SPH BoB and Quality Compass national data are displayed.



Your plan's **Summary Rate Score** is plotted against the SPH Book of Business to provide a visual representation of market performance. The orange line represents the SPH 90th percentile.

Gate questions (indicated by "G:") for attributes are displayed above attributes – scores displayed are % Yes

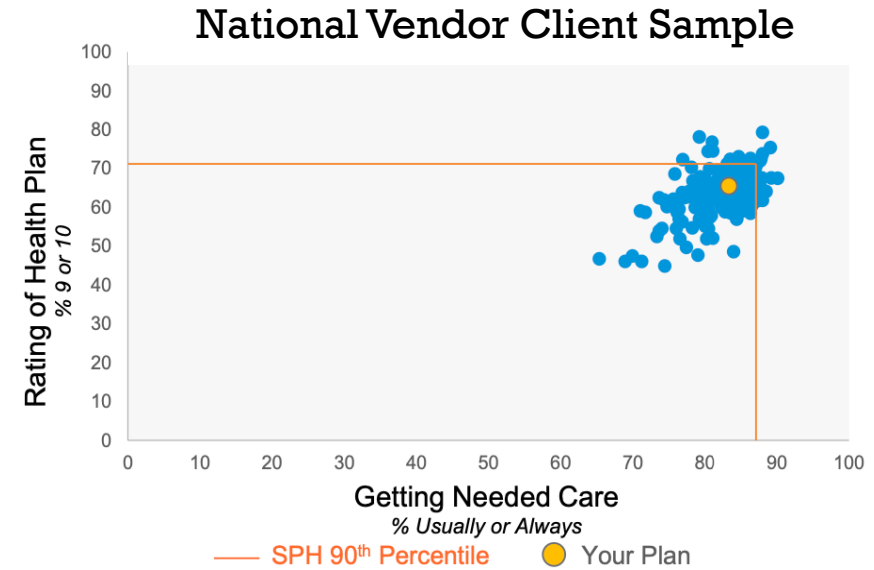
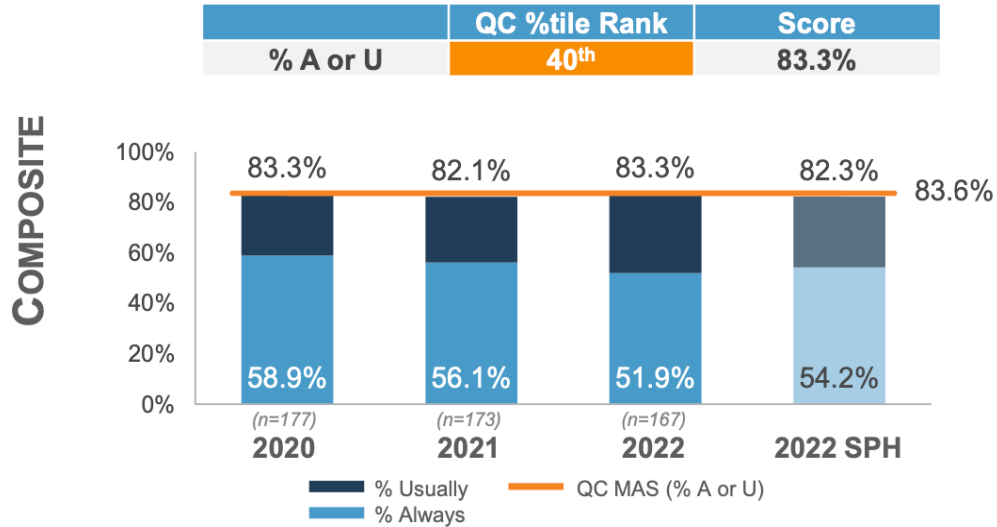
For composites – all corresponding attributes that roll-up into the composite score are displayed:

- Historic bases and **Summary Rate Scores** along with significant changes in trend notated
- Benchmark comparisons along with significant differences notated
- Percentile ranking against **Quality Compass**
- Graphic representation of trend and 2021 **Quality Compass** percentile bands

Member Experience Measures Related to Access

HUSKY Health program (A/C/D)

GETTING NEEDED CARE MEDICAID ADULT



Significance Testing: Current score is significantly higher/lower than the 2021 score (↑/↓), the 2020 score (⚡/⚡) or benchmark score (▲/▼).

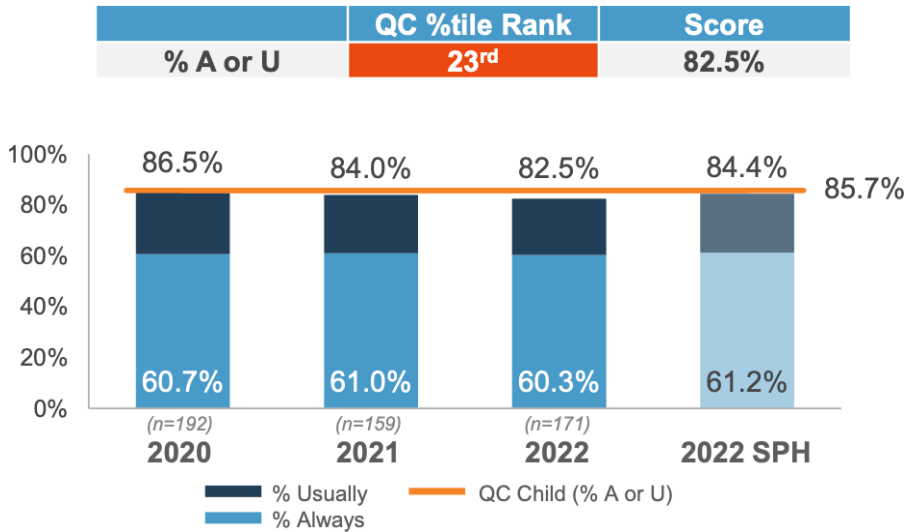
^ADenominator less than 100. NCQA will assign an NA to this measure.

Member Experience Measures Related to Access

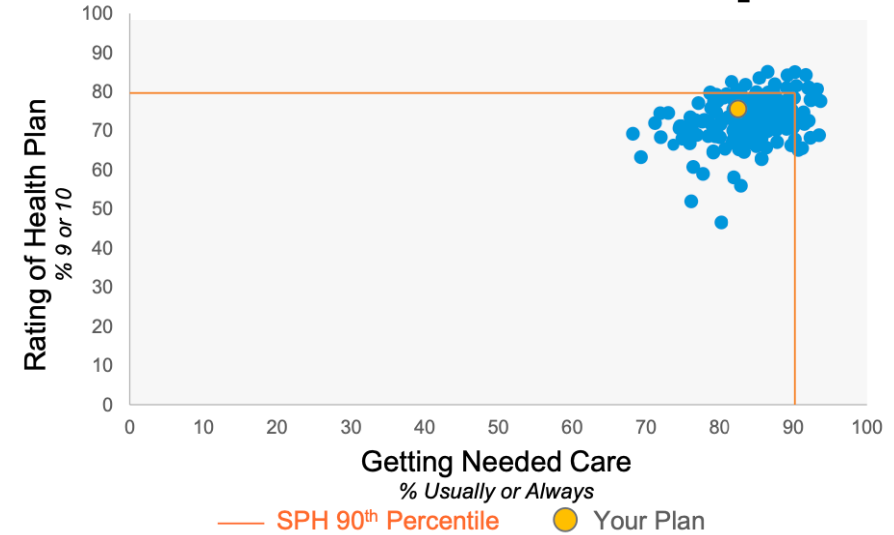
HUSKY Health program (A/C/D)

GETTING NEEDED CARE MEDICAID CHILD: GENERAL POPULATION

COMPOSITE



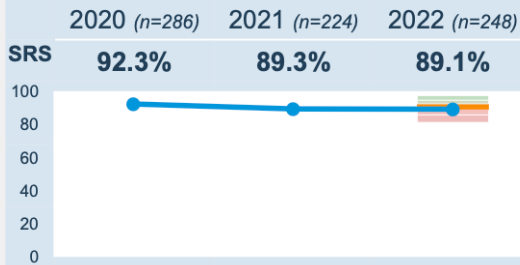
National Vendor Client Sample



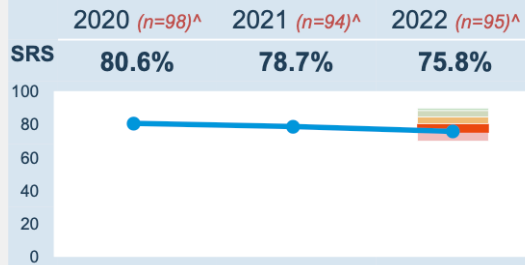
ATTRIBUTES

G: Q40. Made appointments to see a specialist in the last 6 months (n=377) 25.2%

Q10. Getting care, tests, or treatment



Q41. Getting specialist appointment



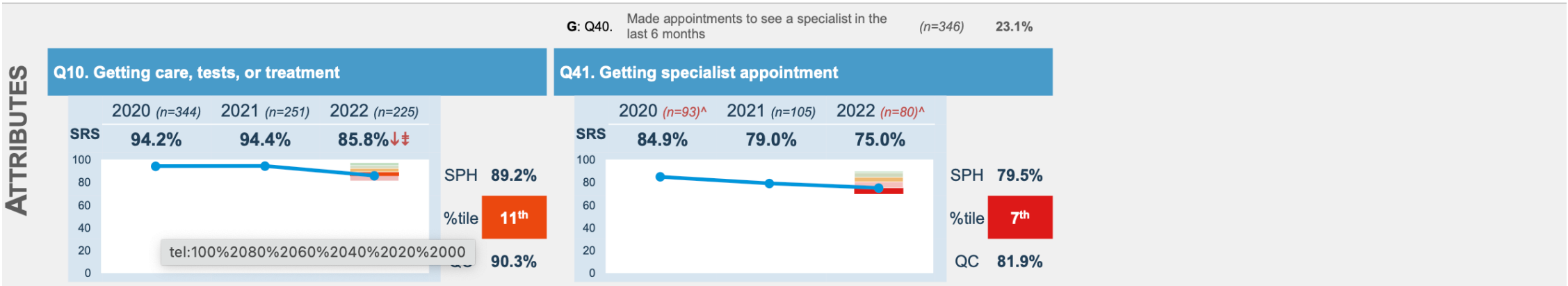
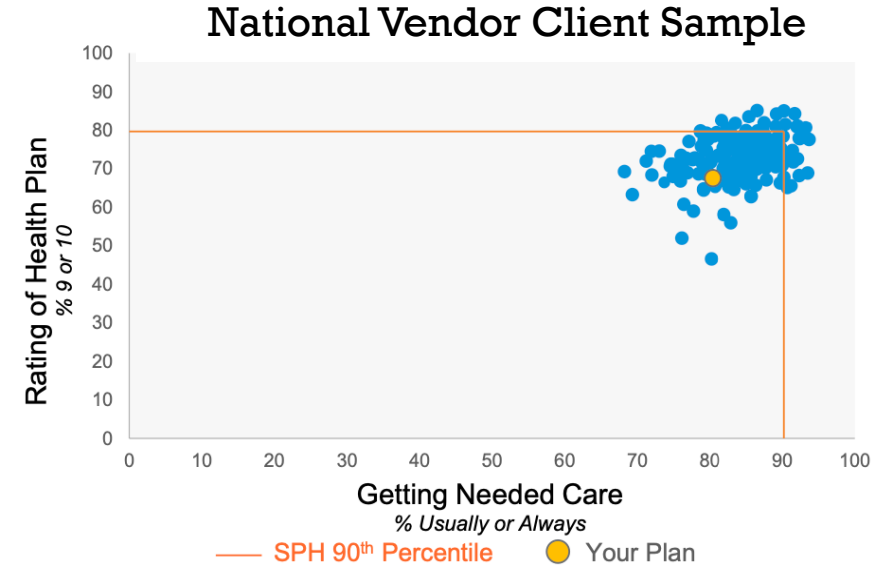
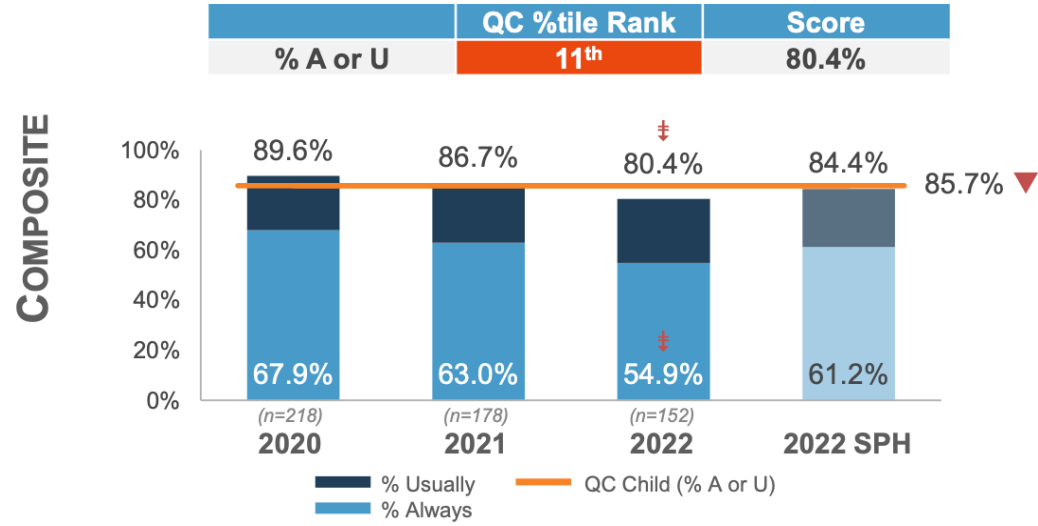
Significance Testing: Current score is significantly higher/lower than the 2021 score (↑/↓), the 2020 score (‡/‡) or benchmark score (▲/▼).

[^]Denominator less than 100. NCQA will assign an NA to this measure.

Member Experience Measures Related to Access

HUSKY Health program (HUSKY B)

GETTING NEEDED CARE MEDICAID CHILD: GENERAL POPULATION



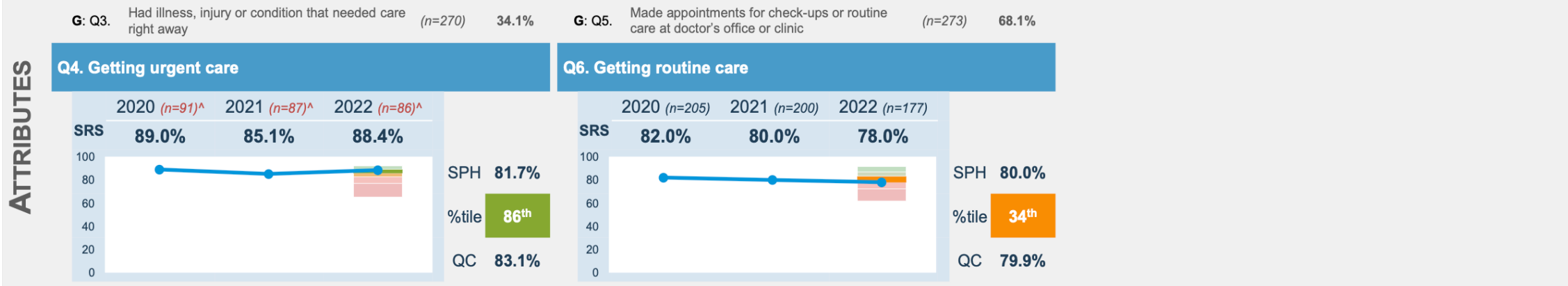
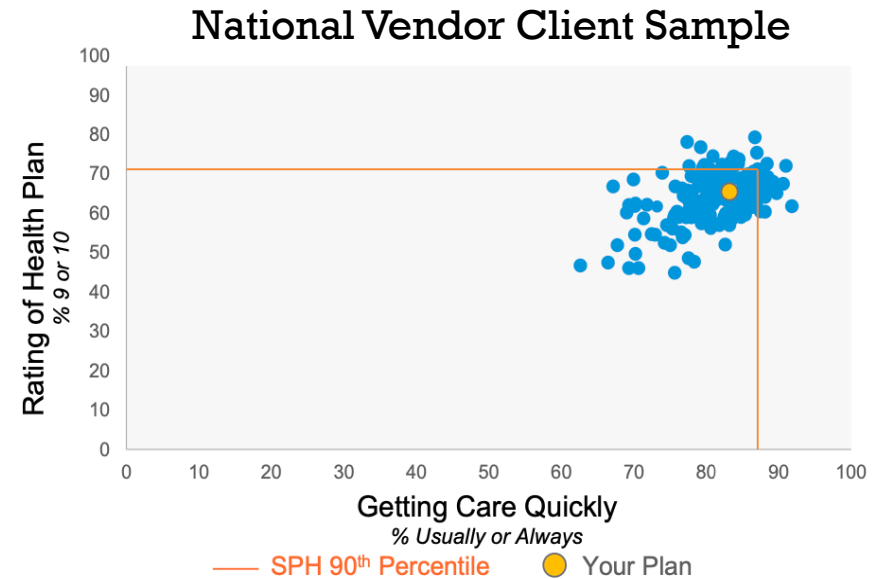
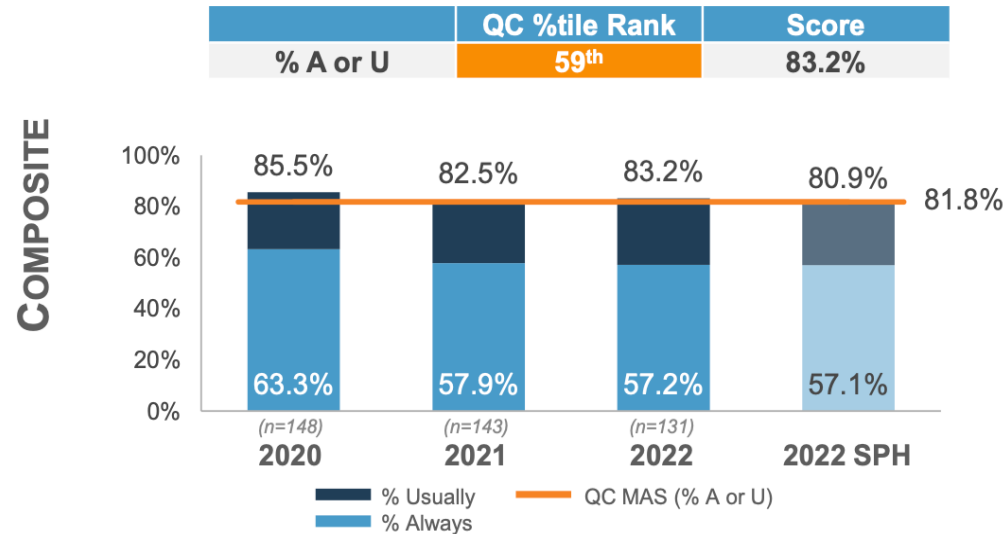
Significance Testing: Current score is significantly higher/lower than the 2021 score (↑/↓), the 2020 score (‡/‡) or benchmark score (▲/▼).

[^]Denominator less than 100. NCQA will assign an NA to this measure.

Member Experience Measures Related to Access

HUSKY Health program (A/C/D)

GETTING CARE QUICKLY MEDICAID ADULT



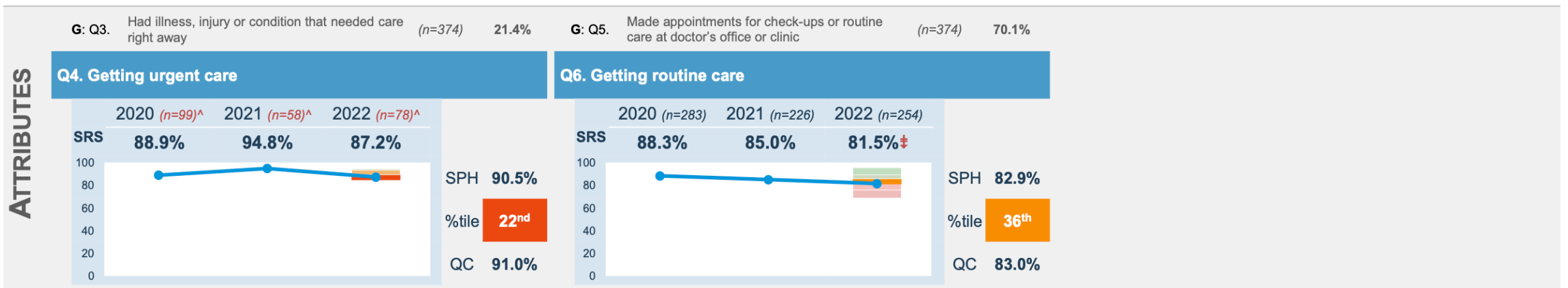
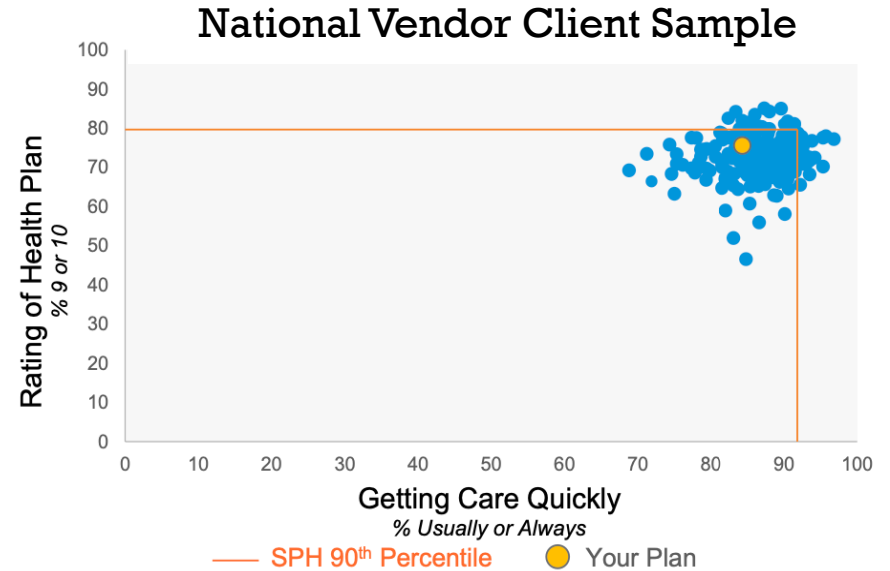
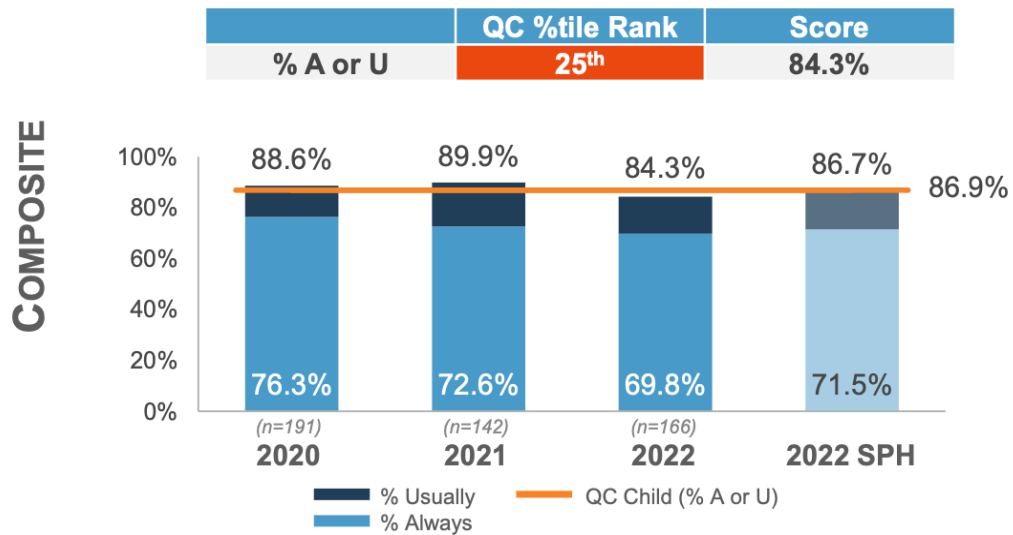
Significance Testing: Current score is significantly higher/lower than the 2021 score (↑/↓), the 2020 score (⚡/⚡) or benchmark score (▲/▼).

[^]Denominator less than 100. NCQA will assign an NA to this measure.

Member Experience Measures Related to Access

HUSKY Health program (A/C/D)

GETTING CARE QUICKLY MEDICAID CHILD: GENERAL POPULATION



Significance Testing: Current score is significantly higher/lower than the 2021 score (↑/↓), the 2020 score (‡/‡) or benchmark score (▲/▼).

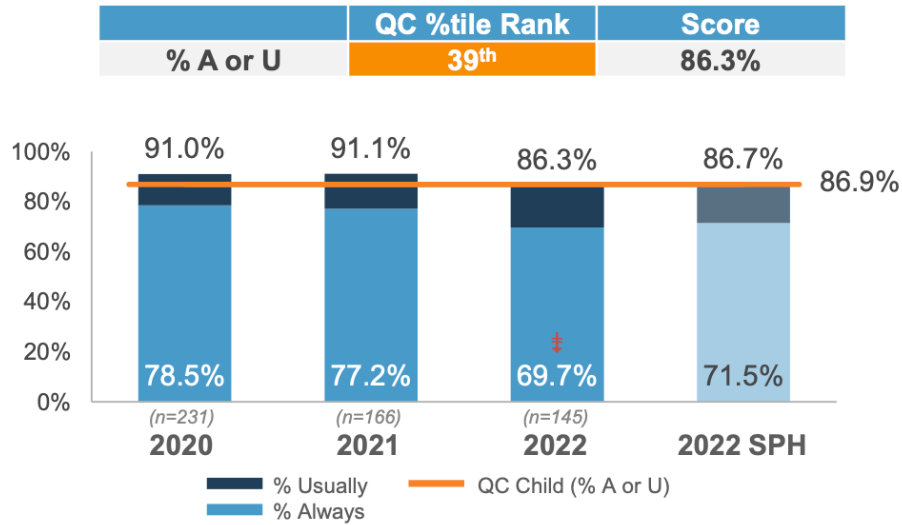
[^]Denominator less than 100. NCQA will assign an NA to this measure.

Member Experience Measures Related to Access

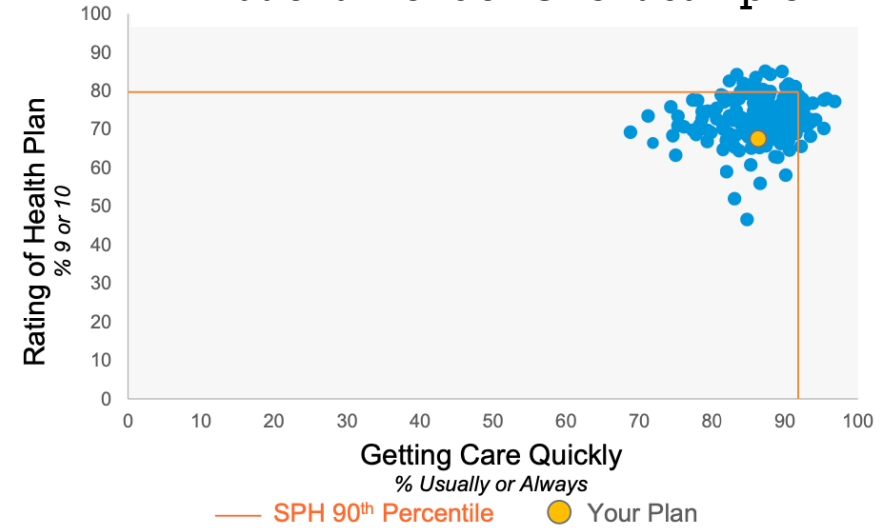
HUSKY Health program (HUSKY B)

GETTING CARE QUICKLY MEDICAID CHILD: GENERAL POPULATION

COMPOSITE



National Vendor Client Sample

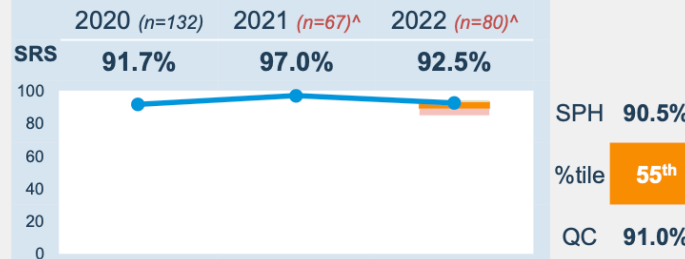


ATTRIBUTES

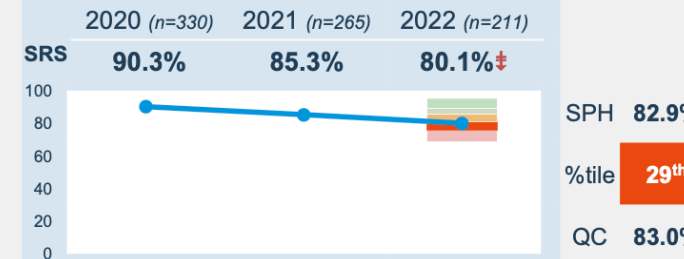
G: Q3. Had illness, injury or condition that needed care right away (n=341) 23.8%

G: Q5. Made appointments for check-ups or routine care at doctor's office or clinic (n=341) 65.1%

Q4. Getting urgent care



Q6. Getting routine care



Significance Testing: Current score is significantly higher/lower than the 2021 score (↑/↓), the 2020 score (‡/‡) or benchmark score (▲/▼).

[^]Denominator less than 100. NCQA will assign an NA to this measure.

Prevalence of Chronic Conditions

Population Comparison by Disease/Condition CY 2020 vs. CY 2021

Source: CHNCT Claims Data Warehouse

Claims Payment Run Out is 5 Months

| Condition | 2020* | | 2021** | | Difference Rate/1,000 Members | % Change Rate/1,000 Members |
|-------------------------------|----------------|--------------------|----------------|--------------------|-------------------------------|-----------------------------|
| | # Members | Rate/1,000 Members | # Members | Rate/1,000 Members | | |
| Asthma | 93,155 | 110.21 | 97,709 | 108.48 | (1.72) | -1.6% |
| Behavioral Health | 290,392 | 343.55 | 313,486 | 348.05 | 4.51 | 1.3% |
| Cancer - Breast - Female | 2,434 | 5.46 | 2,645 | 5.58 | 0.12 | 2.2% |
| Cancer - Colon | 948 | 1.12 | 1,094 | 1.21 | 0.09 | 8.3% |
| Cancer - Prostate | 756 | 1.89 | 831 | 1.95 | 0.06 | 2.9% |
| Cancer Other | 7,883 | 9.33 | 8,844 | 9.82 | 0.49 | 5.3% |
| Chronic Heart Failure (CHF) | 8,211 | 9.71 | 9,207 | 10.22 | 0.51 | 5.2% |
| COPD | 13,816 | 16.34 | 14,401 | 15.99 | (0.36) | -2.2% |
| Coronary Artery Disease (CAD) | 12,337 | 14.60 | 13,971 | 15.51 | 0.92 | 6.3% |
| Diabetes | 47,755 | 56.50 | 51,369 | 57.03 | 0.54 | 1.0% |
| HIV | 3,500 | 4.14 | 3,521 | 3.91 | (0.23) | -5.6% |
| Hypertension | 92,175 | 109.05 | 101,956 | 113.20 | 4.15 | 3.8% |
| Sickle Cell | 1,632 | 1.93 | 1,766 | 1.96 | 0.03 | 1.6% |
| Grand Total | 574,994 | | 620,800 | | | |

*CY 2020 Rates per 1000 are based on overall non-dual membership of 845,278, except for Breast Cancer which is based on overall non-dual female membership of 445,776 and prostate cancer which is based on overall non-dual male membership of 399,502.

**CY 2021 Rates per 1000 are based on overall non-dual membership of 900,682, except for Breast Cancer which is based on overall non-dual female membership of 473,991 and prostate cancer which is based on overall non-dual male membership of 426,691.

Top Three Chronic Conditions

1. Behavioral Health
2. Hypertension
3. Asthma

Other Trends

- Rates of HIV, COPD, and Asthma decreased from 2020 to 2021.
- Rates of all other conditions increased from 2020 to 2021.

Limitation

This is claims-based data; decreased utilization during 2020 and increased membership attributable to the PHE impacted the year-over-year trends observed 2020 to 2021.

Discussion

- Any questions or comments on data topics we have not reviewed?
- Any other key takeaways or observations you would like to share?

Appendix: Additional Data Topics

- Pediatric Quality Outcomes Data
- Overall Quality Outcomes Data by Race/Ethnicity

Pediatric Quality Outcomes Data: By Race/Ethnicity

Measure Rate Comparison by Race/Ethnicity - MY 2021

| Measure Description | White/ Caucasian Non-Hispanic | Black/African American Non- Hispanic | Asian Non- Hispanic | Hispanic | Native American/ Pacific Islander Non- Hispanic | Multiple Races Non- Hispanic | Unknown Non-Hispanic |
|---|-------------------------------------|--|------------------------|----------|---|------------------------------------|-------------------------|
| Annual Fluoride Treatments (Ages 1 to 6) | 22.4% | 18.8% | 21.6% | 21.5% | 21.6% | 21.4% | 19.7% |
| Asthma Patients with One or More Asthma-Related Emergency Room Visits (Ages 2-20) ^{2,3} | 4.1% | 9.6% | 5.3% | 8.0% | 7.6% | 6.3% | 8.8% |
| Behavioral Health Screening (Ages 1-18) | 41.4% | 36.9% | 41.7% | 43.1% | 38.3% | 39.5% | 45.4% |
| Child and Adolescent Well-Care Visits Total (HEDIS [®] MY2021) ^{4,5} | 67.3% | 63.6% | 67.3% | 67.7% | 66.2% | 67.6% | 66.5% |
| Developmental Screening in the First Three Years of Life | 67.6% | 62.5% | 67.8% | 68.9% | 64.3% | 66.3% | 63.4% |
| Follow-Up Care for Children Prescribed ADHD Medication - Continuation and Maintenance (C&M) Phase (HEDIS [®] MY2021) | 51.3% | 58.3% | 100.0% | 52.0% | 66.7% | 56.3% | 53.7% |
| Follow-Up Care for Children Prescribed ADHD Medication - Initiation Phase (HEDIS [®] MY2021) | 45.1% | 42.1% | 33.3% | 43.9% | 60.0% | 41.5% | 42.7% |
| Immunizations for Adolescents - HPV (HEDIS [®] MY2021) ¹ | 25.3% | 26.5% | 35.5% | 40.4% | 32.8% | 29.0% | 33.4% |
| Lead Screening in Children (HEDIS [®] MY2021) ¹ | 82.8% | 76.2% | 82.7% | 79.8% | 79.3% | 80.7% | 76.0% |
| Metabolic Monitoring for Children and Adolescents on Antipsychotics (HEDIS [®] MY2021) | 30.0% | 38.4% | 34.8% | 37.1% | 30.0% | 32.1% | 34.9% |
| Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents - BMI Percentile Documentation (HEDIS [®] MY2021) ¹ | 27.5% | 28.5% | 29.1% | 27.0% | 27.4% | 28.2% | 29.5% |
| Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents - Counseling for Nutrition (HEDIS [®] MY2021) ¹ | 21.0% | 17.9% | 20.6% | 22.9% | 19.4% | 18.9% | 23.2% |
| Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents - Counseling for Physical Activity (HEDIS [®] MY2021) ¹ | 16.8% | 12.7% | 15.1% | 14.1% | 14.3% | 14.7% | 16.3% |
| Well-Child Visits in the First 30 Months of Life - Age 15-30 Months (HEDIS [®] MY2021) ^{4,5} | 86.2% | 80.9% | 89.2% | 85.5% | 72.4% | 87.4% | 80.0% |
| Well-Child Visits in the First 30 Months of Life - First 15 Months (HEDIS [®] MY2021) | 79.5% | 77.5% | 77.4% | 79.9% | 73.9% | 79.9% | 76.4% |

Pediatric Quality Outcomes Data: Race/Ethnicity Measure Gaps

| Measure Rate Comparison by Race/Ethnicity - MY 2021 | Rate Lowest/Worse (Excluding Unknown) | | | | | |
|---|---------------------------------------|----------|--------------------|------------------------------|---|-----------------------------|
| | Black/African American Non-Hispanic | Hispanic | Asian Non-Hispanic | White Caucasian Non-Hispanic | Native American/Pacific Islander Non-Hispanic | Multiple Races Non-Hispanic |
| Annual Fluoride Treatments (Ages 1 to 6) | Y | | | | | |
| Asthma Patients with One or More Asthma-Related Emergency Room Visits (Ages 2-20) ^{2,3} | Y | | | | | |
| Behavioral Health Screening (Ages 1-18) | Y | | | | | |
| Child and Adolescent Well-Care Visits Total (HEDIS [®] MY2021) ^{4,5} | Y | | | | | |
| Developmental Screening in the First Three Years of Life | Y | | | | | |
| Follow-Up Care for Children Prescribed ADHD Medication - Continuation and Maintenance (C&M) Phase (HEDIS [®] MY2021) | | | | Y | | |
| Follow-Up Care for Children Prescribed ADHD Medication - Initiation Phase (HEDIS [®] MY2021) | | | Y | | | |
| Immunizations for Adolescents - HPV (HEDIS [®] MY2021) ¹ | | | | Y | | |
| Lead Screening in Children (HEDIS [®] MY2021) ¹ | Y | | | | | |
| Metabolic Monitoring for Children and Adolescents on Antipsychotics (HEDIS [®] MY2021) | | | | | Y | |
| Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents - BMI Percentile Documentation (HEDIS [®] MY2021) ¹ | | Y | | | | |
| Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents - Counseling for Nutrition (HEDIS [®] MY2021) ¹ | Y | | | | | |
| Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents - Counseling for Physical Activity (HEDIS [®] MY2021) ¹ | Y | | | | | |
| Well-Child Visits in the First 30 Months of Life - Age 15-30 Months (HEDIS [®] MY2021) ^{4,5} | | | | | Y | |
| Well-Child Visits in the First 30 Months of Life - First 15 Months (HEDIS [®] MY2021) | | | | | Y | |
| Total # of Measures with Lowest/Worse Rate by Race/Ethnicity (out of 15) | 8 | 1 | 1 | 2 | 3 | 0 |

Quality Outcomes Data: Race/Ethnicity Measure Gaps

| Race/Ethnicity Measure Rate Gaps | # Measures with Better Rate | # Measures with Worse Rate |
|--|-----------------------------|----------------------------|
| Black/African American Non-Hispanic compared to White Caucasian Non-Hispanic | 18 | 22 |
| Hispanic Rate compared to White Caucasian Non-Hispanic | 26 | 14 |

| # Measures with Lowest/Worse rate by Race/Ethnicity (Excluding Unknown) | |
|---|----|
| Black/African American Non-Hispanic | 12 |
| Native American/Pacific Islander - Non-Hispanic | 11 |
| White/Caucasian Non-Hispanic | 9 |
| Asian Non-Hispanic | 5 |
| Hispanic | 2 |
| Multiple Races Non-Hispanic | 1 |