

Quality Council

September 15, 2022



Call to Order

Roll Call

Agenda

<u>Time</u>	<u>Topic</u>
4:00 p.m.	Call to Order
4:05 p.m.	Public Comment
4:15 p.m.	Approval of June 16, 2022 Meeting Minutes — Vote
4:20 p.m.	2022 Annual Review of Quality Benchmark Specification Changes
5:00 p.m.	Updates on Strategies to Improve Quality Benchmark Performance
6:00 p.m.	Adjourn

Public Comment

Approval of June 16, 2022 Meeting Minutes—Vote

2022 Annual Review of Quality Benchmark Measure Specification Changes

Quality Benchmarks

- As a reminder...
 - In 2020, Governor Lamont signed Executive Order No. 5 directing OHS to develop annual Quality Benchmarks for CY 2022-2025. In 2022, Public Act 22-118 codified Executive Order No. 5's into law and created new Quality Benchmark reporting requirements.
 - In 2021, OHS selected seven Quality Benchmark measures and Benchmark values for phased implementation, per the Quality Council's recommendation (*measures included on the following slide, benchmark values included in the Appendix*).
 - In 2021, the Quality Council considered and agreed with OHS' approach for annually reviewing changes to the Quality Benchmark measure specifications.

Quality Benchmark Measures

Phase 1: Beginning for 2022

- Asthma Medication Ratio
- Controlling High Blood Pressure
- Hemoglobin A1c (HbA1c) Control for Patients with Diabetes: HbA1c Poor Control

Phase 2: Beginning for 2024

- Child and Adolescent Well-Care Visits
- Follow-up After Hospitalization for Mental Illness (7-day)
- Follow-up After ED Visit for Mental Illness (7-day)
- Obesity Equity Measure

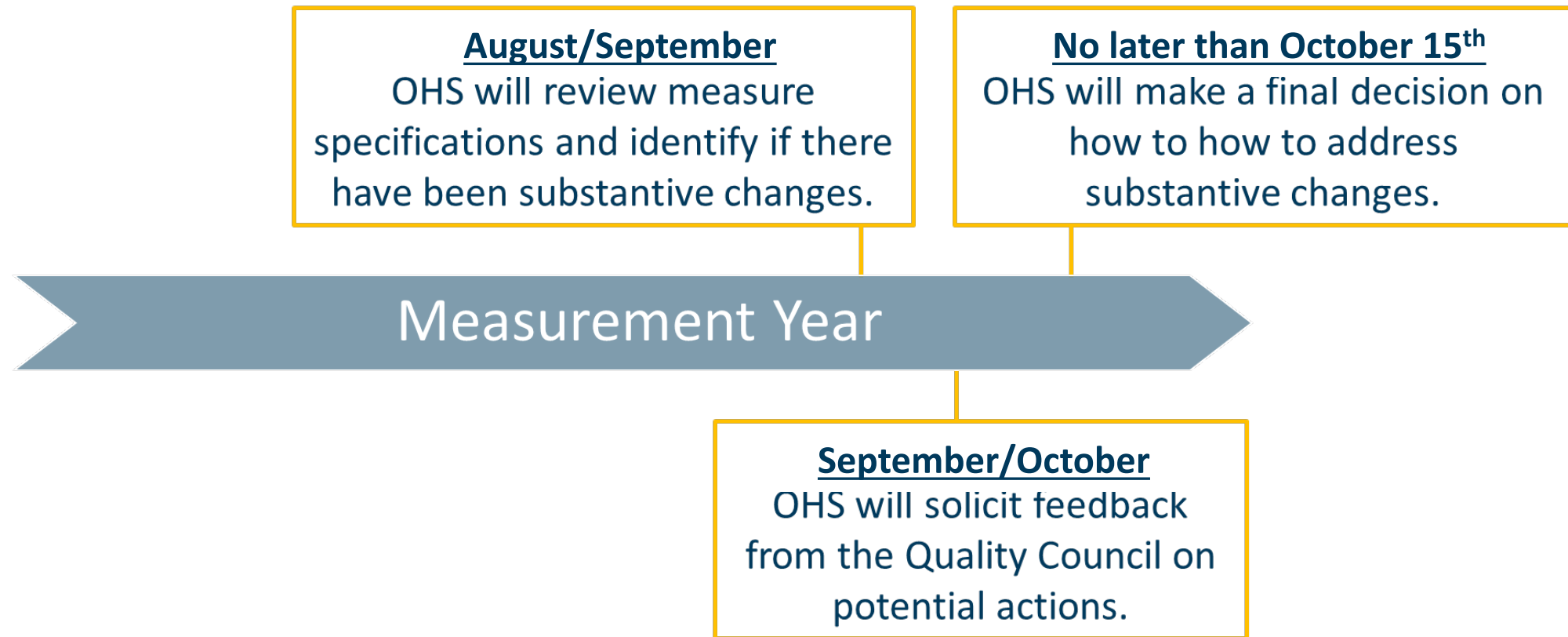
Process for Reviewing Changes to Quality Benchmark Measure Specifications

- **Step 1:** OHS and the Quality Council review measure specification changes.
- **Step 2:** OHS, with feedback from the Quality Council, determines whether there have been any substantive changes to measure specifications.
 - For NCQA measures: A substantive change is when there are one or more specification changes that would cause a “break in trending.”
 - For the Obesity Equity Measure: A substantive change is one that does not allow performance to be compared to prior years.

Process for Reviewing Changes to Quality Benchmark Measure Specifications

- **Step 3:** If the measure specification changes are considered substantive, OHS solicits Quality Council feedback on the following options:
 1. Remove the Quality Benchmark measure for the affected and future measurement years and discuss including an alternate measure instead.
 2. Reset the Quality Benchmark value for the affected and future measurement years (using the same methodology in place to develop the initial values).
 3. Maintain the original Quality Benchmark measure and value and re-evaluate after the next measurement period.

Timeline for Reviewing Changes to Quality Benchmark Measure Specifications



Review of Changes to the Quality Benchmark Measure Specifications

- On the following slides, we will review the Quality Benchmark Measures and present the following information:
 - 1. Measure description**
 - 2. Summary of specification changes** for measurement year (MY) 2023
 - 3. Degree of change**, categorized as a:
 - *Substantive change*
 - *Minor change*
 - *No change*

Review of Changes to the Quality Benchmark Measure Specifications (Cont'd)

- Three measures had only one minor specification change:

Measure Name	Measure Description	Summary of Specification Change for MY 2023
Child and Adolescent Well-Care Visits <i>(Phase 2 Measure)</i>	Percentage of members 3–21 years of age who had at least one comprehensive well-care visit with a PCP or an OB/GYN practitioner during the measurement year.	<u>Added a required exclusion for members who died during the measurement year.</u>
Follow-Up After Emergency Department Visit for Mental Illness, 7-Day (FUM) <i>(Phase 2 Measure)</i>	Percentage of emergency department (ED) visits for members 6 years of age and older with a principal diagnosis of mental illness or intentional self-harm, who had a follow-up visit for mental illness within 7-days of ED visit.	<u>Added a required exclusion for members who died during the measurement year.</u>
Follow-Up After Hospitalization for Mental Illness, 7-Day (FUH) <i>(Phase 2 Measure)</i>	Percentage of discharges for members 6 years of age and older who were hospitalized for treatment of selected mental health disorders and who had an OP visit, an intensive OP encounter, or partial hospitalization with a mental health practitioner and who received follow-up within 7 days of discharge.	<u>Added a required exclusion for members who died during the measurement year.</u>

Asthma Medication Ratio (*Phase 1 Measure*)

Measure Description Percentage of patients 5–64 years of age who were identified as having persistent asthma and had a ratio of controller medications to total asthma medications of 0.50 or greater during the measurement year.

[Summary of Measure Specification](#)

[Changes for MY 2023](#)

- Added race and ethnicity stratification.
- Added a required exclusion for members who died during the measurement year.
- Removed “Dyphylline Guaifenesin Medications Lists” from the Asthma Controller Medications table.

Degree of Change Minor changes

Controlling High Blood Pressure (*Phase 1 Measure*)

Measure Description Percentage of patients 18 to 85 years of age who had a diagnosis of hypertension (HTN) and whose blood pressure (BP) was adequately controlled (<140/90) during the measurement year.

[Summary of Measure Specification](#)

[Changes for MY 2023](#)

- Added a required exclusion for members who died during the measurement year.
- Revised the optional exclusions to be required exclusions (members receiving palliative care, members with end-stage renal disease, pregnant members).
- Updated the number of occurrences required for the frailty cross-cutting exclusion.

Degree of Change Minor changes

Hemoglobin A1c Control for Patients with Diabetes: HbA1c Poor Control (*Phase 1 Measure*)

Measure Description Percentage of patients 18-75 years of age with diabetes who had hemoglobin A1c > 9.0% during the measurement period.

[Summary of Measure Specification Changes for MY 2023](#)

- Updated exclusions by adding a required exclusion for members who died during the measurement year, and updating the number of occurrences required for the frailty cross-cutting exclusion.
- Added a direct reference code for palliative care.

Degree of Change Minor changes

Obesity Equity Measure *(Phase 2 Measure)*

Measure Description A ratio of statewide obesity rates for the Black, non-Hispanic population and the White, non-Hispanic population (using data from BRFSS).

[Summary of Survey Changes for 2022 BRFSS Questionnaire](#) Compared to the 2021 CT BRFSS survey, the 2022 CT BRFSS survey includes two additional confirmation questions on the respondent's weight and height, which are then used to calculate BMI/obesity by race (e.g., “Just to double-check, you indicated [S8Q18] pounds as your weight. IS THIS CORRECT?”).

Degree of Change Minor changes

Updates on Strategies to Improve Quality Benchmark Performance

Updates on Strategies to Improve Performance on Quality Benchmarks

- As a reminder...
 - Earlier this year, the Quality Council discussed strategies OHS and the Quality Council should prioritize to improve performance on the Quality Benchmarks.
 - OHS and Bailit Health created an implementation plan for the strategies, with feedback from the Quality Council, taking into consideration OHS' time and resource constraints.
 - The implementation plan has the strategies grouped into two categories:
 1. Strategies to prioritize implementing (*6 strategies, to be discussed today*)
 2. Strategies to work towards implementing after priority strategies are complete or when additional funding becomes available (*3 strategies, included in the Appendix*)

Updates on Strategies to Improve Performance on Quality Benchmarks (Cont'd)

Strategy #1: Create a true set of “core measures”, including the Quality Benchmark Measures as Core Measures.

Activities/Updates

- The Quality Council will annually update measures in the Core Measure Set
 - **Update:** OHS has finalized and notified insurers and providers about the 2023 Aligned Measure Set, including the seven new Core Measures, two of which are Quality Benchmark Measures (see next slide for Aligned Measure Set Measures).
- OHS will annually conduct a measure use survey to determine fidelity to the Core Measure Set.
- OHS will annually share fidelity scores with insurers and then report fidelity scores to the Quality Council and Healthcare Benchmark Initiative Steering Committee.

2023 Aligned Measure Set

1. Asthma Medication Ratio
2. Behavioral Health Screening*
3. Breast Cancer Screening
4. Cervical Cancer Screening
- 5. Child and Adolescent Well-Care Visits**
6. Chlamydia Screening in Women
7. Colorectal Cancer Screening
8. Concurrent Use of Opioid and Benzodiazepines
- 9. Controlling High Blood Pressure**
10. Developmental Screening in the First Three Years of Life
11. Eye Exam for Patients with Diabetes
- 12. Follow-Up After Emergency Department Visit for Mental Illness (7-Day)**
13. Follow-Up After for Children Prescribed ADHD Medication
14. Follow-Up After Hospitalization for Mental Illness (7-Day)
- 15. Health Equity Measure**
- 16. Hemoglobin A1c Control for Patients with Diabetes: HbA1c Poor Control (>9%)**
17. Immunizations for Adolescents (Combo 2)
18. Kidney Health Evaluation for Patients with Diabetes
19. Metabolic Monitoring for Children and Adolescents
20. PCMH CAHPS Survey
- 21. Plan All-Cause Readmission**
- 22. Prenatal and Postpartum Care**
23. Screening for Depression and Follow-Up
24. Social Determinants of Health Screening
25. Substance Use Assessment in Primary Care
26. Transitions of Care
27. Use of Pharmacotherapy for Opioid Use Disorder
28. Well-Child Visits in the First 30 Months of Life

*Medicaid-only measure

Core Measures are in bold

Updates on Strategies to Improve Performance on Quality Benchmarks (Cont'd)

Strategy #2: Have the Office of the State Comptroller (OSC) adopt the Quality Benchmarks in its contracts.

Activities/Updates

- OHS will meet with OSC annually to discuss alignment with Quality Benchmarks, including sharing measure specifications and how to obtain benchmark data.

Updates on Strategies to Improve Performance on Quality Benchmarks (Cont'd)

Strategy #3: Public reporting of Advanced Network and payer performance on the Quality Benchmarks annually with Cost Growth Benchmark performance.

Activities/Updates

- ❑ OHS will annually prepare data submission instructions and reporting template
 - ***Update:** OHS is in the process of finalizing the submission instructions and reporting template for CY 2021 baseline performance data on the three Phase 1 measures, to be released in advance of a technical implementation webinar (timeline for the data request is included on the following slides).*
- ❑ Payers will annually report on Quality Benchmark performance at the payer and Advanced Network level
- ❑ OHS will annually validate, analyze, and report on Advanced Network and payer performance to the Quality Council

Updates on Strategies to Improve Performance on Quality Benchmarks (Cont'd)

Strategy #3: Public reporting of Advanced Network and payer performance on the Quality Benchmarks annually with Cost Growth Benchmark performance.



Updates on Strategies to Improve Performance on Quality Benchmarks (Cont'd)

Strategy #4: Public recognition of providers and payers that are performing well and/or demonstrating improvement on the Quality Benchmarks

Activities/Updates

- OHS will determine appropriate public recognition of providers and payers performing well and/or demonstrating improvement
- OHS will annually determine which payers and providers are performing well/demonstrating improvement

Updates on Strategies to Improve Performance on Quality Benchmarks (Cont'd)

Strategy #5: Partner with other agencies on a PR and education campaign

Activities/Updates

- ❑ OHS will create communication materials about the Quality Benchmarks and partner with agencies to coordinate dissemination.
 - ❑ OHS will host a webinar with subject matter experts on each Quality Benchmark measure
 - **Update:** OHS plans to host a subject matter expert to speak on a Phase 1 Quality Benchmark measure during the October 20th Quality Council meeting.
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Updates on Strategies to Improve Performance on Quality Benchmarks (Cont'd)

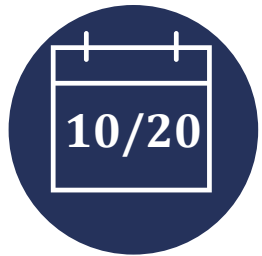
Strategy #6: Create a toolkit to give to provider organizations

Activities/Updates

- OHS will conduct research into external resources and best practices for each Quality Benchmark measure
 - **Update:** *Bailit Health has conducted research on best practices for the Phase 1 Quality Benchmark measures and is in the process of seeking clinician feedback on identified best practices.*
 - OHS will develop a toolkit with resources and best practices for each Quality Benchmark measure
 - OHS will develop and implement a dissemination strategy for the toolkit.
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Wrap-up & Next Steps

Meeting Wrap-Up & Next Steps



- OHS plans to host a subject matter expert to speak on a Phase 1 Quality Benchmark measure during the October 20th Quality Council meeting.

Appendix

Commercial Market Benchmark Values: Phase 1 Measures

Quality Benchmark Measure	2022 Value / Baseline Rate	2023 Value	2024 Value	2025 Value and Source	Percentage Point Improvement
Asthma Medication Ratio (Ages 5-18)	79%	81%	83%	86% <i>Between the national commercial 50th and 75th percentiles</i>	Overall: 7% Annual: 2%
Asthma Medication Ratio (Ages 19-64)	78%	80%	82%	85% <i>National commercial 90th percentile</i>	Overall: 7% Annual: 2%
Controlling High Blood Pressure	61%	63%	65%	68% <i>Between the New England commercial 50th and 75th percentiles</i>	Overall: 7% Annual: 2%
HbA1c Control for Patients with Diabetes: HbA1c >9%*	27%	26%	25%	23% <i>Between the national commercial 75th and 90th percentiles</i>	Overall: 4% Annual: 1%

The annual change in Benchmark values may not be even due to rounding.

*A lower rate indicates higher performance.

Commercial Market Benchmark Values: Phase 2 Measures

Quality Benchmark Measure	2022 Value / Baseline Rate	2023 Value	2024 Value	2025 Value and Source	Percentage Point Improvement
Child and Adolescent Well-Care Visits	TBD	TBD	TBD	TBD	TBD
Follow-up After ED Visit for Mental Illness (7-Day)	60%	N/A	N/A	75% <i>Between the New England commercial 75th and 90th percentiles</i>	Overall: 15%
Follow-up After Hospitalization for Mental Illness (7-Day)	56%	N/A	N/A	63% <i>Between the New England commercial 75th and 90th percentiles</i>	Overall: 7%

The annual change in Benchmark values may not be even due to rounding.

Medicaid Market Benchmark Values: Phase 1 Measures

Quality Benchmark Measure	2022 Value / Baseline Rate	2023 Value	2024 Value	2025 Value and Source	Percentage Point Improvement
Asthma Medication Ratio (Ages 5-18)	66%	68%	70%	73% <i>Between the national Medicaid 50th and 75th percentiles</i>	Overall: 7% Annual: 2%
Asthma Medication Ratio (Ages 19-64)	63%	65%	67%	70% <i>Between the national Medicaid 75th and 90th percentiles</i>	Overall: 7% Annual: 2%
Controlling High Blood Pressure	61%	63%	65%	68% <i>National Medicaid 75th percentile</i>	Overall: 7% Annual: 2%
HbA1c Control for Patients with Diabetes: HbA1c >9%*	37%	36%	35%	33% <i>National Medicaid 75th percentile</i>	Overall: 4% Annual: 1%

The annual change in Benchmark values may not be even due to rounding.

*A lower rate indicates higher performance.

Medicaid Market Benchmark Values: Phase 2 Measures

Quality Benchmark Measure	2022 Value / Baseline Rate	2023 Value	2024 Value	2025 Value and Source	Percentage Point Improvement
Child and Adolescent Well-Care Visits	TBD	TBD	TBD	TBD	TBD
Follow-up After ED Visit for Mental Illness (7-Day)	50%	N/A	N/A	65% <i>National Medicaid 90th percentile</i>	Overall: 15%
Follow-up After Hospitalization for Mental Illness (7-Day)	48%	N/A	N/A	55% <i>New England Medicaid 90th percentile</i>	Overall: 7%

Medicare Advantage Market Benchmark Values

Quality Benchmark Measure	2022 Value / Baseline Rate	2023 Value	2024 Value	2025 Value and Source	Percentage Point Improvement
Controlling High Blood Pressure	73%	75%	77%	80% <i>National Medicare Advantage 75th percentile</i>	Overall: 7% Annual: 2%
HbA1c Control for Patients with Diabetes: HbA1c >9%*	20%	18%	16%	15% <i>National Medicare Advantage 75th percentile</i>	Overall: 5% Annual: 2%

The annual change in Benchmark values may not be even due to rounding.

*A lower rate indicates higher performance.

Statewide Benchmark Values

Quality Benchmark Measure	2022 Value / Baseline Rate	2023 Value	2024 Value	2025 Value and Source	Percentage Point Improvement
Obesity Equity Measure <i>the ratio of the White, non-Hispanic obesity rate and Black, non-Hispanic obesity rate</i>	1.65	N/A	N/A	1.33 <i>National ratio</i>	Overall: 0.32

Strategies to Improve Performance on Quality Benchmarks

Strategies to work towards implementing after priority strategies are complete or when additional funding becomes available

Strategy	Activities
1. Increase provider use of (and insurer support for) community health workers (CHWs) and/or health coaches focused on the Phase 1 Quality Benchmark topics and targeted in communities of greatest need	<ul style="list-style-type: none">• OHS will meet with payers and ask them to invest in this model• OHS will develop a toolkit for how to deploy the model• OHS will facilitate payer learning collaboratives on the topic
2. Optimize correct reporting of quality measures	<ul style="list-style-type: none">• OHS will partner with payers and providers to develop a resource document and training on how to improve documentation relative to the three Phase 1 measures

Strategies to Improve Performance on Quality Benchmarks

Strategies to work towards implementing after priority strategies are complete or when additional funding becomes available (cont'd)

Strategy	Activities
3. Expand existing evidence-based (clinical improvement) programs associated with the Benchmarks	<ul style="list-style-type: none">• OHS will research any CT evidence-based programming/policies focused on the Phase 1 measures• OHS will survey and/or interview leading provider organizations about programs/policies• OHS will meet with relevant agencies to discuss if/how they can be scaled