

Project Overview

In 2014, the Center for Medicare and Medicaid Innovation awarded Connecticut a four-year, \$45 million State Innovation Model (SIM) Test Grant. Connecticut's SIM is working to improve Connecticut's healthcare system for the majority of residents by establishing a whole-person-centered healthcare system that improves community health and eliminates health inequities; ensures superior access, quality and care experiences; empowers individuals to actively participate in their health and healthcare; and improves affordability by reducing healthcare costs.

One aim of Connecticut's SIM is to increase transparency related to healthcare cost and quality by disseminating information through a public healthcare quality scorecard (hereafter "CT Scorecard"). The CT Scorecard will:

- Allow providers access to information on their performance relative to peers to drive quality improvement through transparency
- Provide CT policy makers with information to assess CT healthcare performance
- Provide consumers access to healthcare quality information

The CT Scorecard will provide an annual performance assessment of Advanced Networks (ANs) and Federally Qualified Health Centers (FQHCs) (see Appendix A for a list of rated entities) in Connecticut using a set of measures identified by the SIM Quality Council. This information will be displayed on a web-based platform accessible to a broad set of stakeholders including patients, providers, and policymakers.

Approach to design and implementation

UConn Health SIM Evaluation Team is developing the scorecard methods and web platform in close communication with multiple partners, including the SIM Quality Council, the CT Office of Health Strategy, the Healthcare Innovation Steering Committee, Yale University, and other provider and consumer groups. The methods for attribution, measure calculation and scoring will be released for public comment and review. Additionally, to ensure the accuracy of the scorecard results, the AN and FQHC leadership will be invited to verify details about their organization and to preview their scorecard results prior to publication.

Measures

The CT Scorecard measures were recommended by the SIM Quality Council and encompass a wide range of health care quality domains such as prevention, chronic disease management and behavioral health management. The Scorecard will consist of measures from the "Multi-Payer Quality Measure Set for Improving Connecticut's Healthcare Quality" created by the CT SIM Quality Council and approved by the Healthcare Innovation Steering Committee.¹ Specifically, all "core measures" and "reporting measures" that are feasible given the data sources currently available will be assessed. The

¹ <http://www.healthreform.ct.gov/ohri/cwp/view.asp?a=2765&q=336272>

measures for the initial scorecard are listed in Appendix B. Also listed are the NQF or measure steward specification number as well as any modifications that have been required.

In subsequent years, some measures may be updated or replaced by the Quality Council. Other measures may be added if new data becomes available. Nevertheless, the goal is to maintain a fairly consistent set of measures for tracking performance of Advanced Networks and FQHCs over time.

Content

To facilitate user understanding of the results and ratings presented on the CT Scorecard, supplemental text, notes and links to external content will be provided. The CT Scorecard will include the measure results for each entity and compare the results to a benchmark. Supporting text will provide instructions on how to use the site and present a detailed discussion of methodology, including an overview of data sources, measure and score definitions, attribution methods, risk adjustment and scoring methods. Supplemental documents with more detailed technical information on methods will also be available.

Functionality

The CT Scorecard will be housed on a web-based platform accessible to a broad set of stakeholders including patients, providers, and policymakers. The Scorecard will present the annual performance results for ANs and FQHCs via interactive tables and graphs. The Scorecard will also have capabilities for searching, sorting and filtering by entity, measure, health topic, and rating. Advanced views with additional features such as annual change in measure performance, multiple benchmarks, comparison functions, or additional filters will be available.

Data acquisition and storage

The CT Scorecard will obtain data annually from two sources: health insurance claims reported to the All Payer Claims Database (APCD) and administered by the Office of Health Strategy and Consumer Assessment of Healthcare Providers and Systems (CAHPS) surveys administered by contractors for Yale University (commercial beneficiaries) and the CT Department of Social Services (Medicaid beneficiaries).

All data utilized for the scorecard will be kept on a secure HIPAA compliant, encrypted server. Only UConn Health SIM Evaluation Team members with authorization will have access to the data.

Appendix A: Rated Organizations

Federally Qualified Health Centers

Charter Oak Health Center, Inc.

Community Health & Wellness Center of Greater Torrington

Community Health Center, Inc.

Community Health Services, Inc

Connecticut Institute For Communities, Inc.

Cornell Scott Hill Health Corporation

Fair Haven Community Health Clinic, Inc.

Family Centers Inc.

First Choice Health Centers, Inc.

Generations Family Health Center, Inc.

Norwalk Community Health Center, Inc.

Optimus Health Care, Inc.

Southwest Community Health Center

Staywell Health Care, Inc.

United Community And Family Services, Inc.

Wheeler Clinic, Inc. The

Advanced Networks

Community Medical Group

Day Kimball Group

HHC-Integrated Care Partners

Medical Professional Services

Northeast Medical Group

ProHealth Physicians

Prospect Medical

Stamford Health Medical Group

Starling Physicians

West Med Group

Griffin Health (Life Health Services, LLC)

Middlesex Hospital (Life Health Services, LLC)

ST. Vincent Health Partners (part of WCHN ACO)

Western Connecticut Health Network

Yale Medicine

Soundview Medical Associates

Appendix B: Scorecard Measures

#	Measure	NQF#	Modifications
Core Set:			
1	PCMH-CAHPS Measure	0005	Patient appointments fall within 6 months not 12 months of the survey
2	Plan all-cause readmission	1768	
3	Annual monitoring for persistent medications (roll-up)	2371	
4	Breast cancer screening	2372	
5	Cervical cancer screening	0032	Omit EMR based portion of measure
6	Chlamydia screening in women	0033	
8	Immunizations for Adolescents	1407	Cannot exclude those with previous anaphylactic reaction; Can examine vaccination history only from ages 11-13.
12	Well-child visits in the first 15 months of life	1392	Omit EMR based portion of measure. Will utilize separate APCD data extract with only eligible individuals.
13	Adolescent well-care visits	NCQA Measure	Omit EMR based portion of measure
17	Behavioral health screening (pediatric, Medicaid only, custom measure)	Custom Medicaid- See "Exhibit E"	Publication will be delayed until Medicaid data is available through the APCD.
18	Medication management for people w/ asthma	1799	
20	DM: HbA1c Testing	0057	Omit EMR based portion of measure
21	DM: Eye exam	0055	
22	DM: medical attention for nephropathy	0062	Omit EMR based portion of measure
24	Use of imaging studies for low back pain	0052	
25	Avoidance of antibiotic treatment in adults with acute bronchitis	0058	
26	Appr. treatment for children with upper respiratory infection	0069	Will utilize separate APCD data extract with only eligible individuals.
27	Follow-up care for children prescribed ADHD medication	0108	
28	Metabolic Monitoring for Children and Adolescents on Antipsychotics (pediatric, Medicaid only, custom measure)	2800	Publication will be delayed until Medicaid data is available through the APCD.
Reporting Set:			
2	Non-recommended Cervical Cancer Screening in Adolescent Female	HEDIS 0443	
3	Well-child visits in the third, fourth, fifth and sixth years of life (Medicaid only)	1516	Omit EMR based portion of measure; Publication will be delayed until Medicaid data is available through the APCD.

#	Measure	NQF#	Modifications
4	Oral Evaluation, Dental Services (Medicaid only)	2517	Publication will be delayed until Medicaid dental claims are available through the APCD.
5	Long Acting Reversible Contraception	2904	Cannot exclude women who are infecund for non-contraceptive reasons; Use any birth in place of live birth in past 2 months
7	Adult major depressive disorder (MDD): Coordination of care of patients with specific co-morbid conditions	PQRS 325	
8	Anti-Depressant Medication Management	0105	
9	Initiation and Engagement of Alcohol and Other Drug Dependence Treatment	0004	
10	Follow up after hospitalization for mental illness, 7 & 30 days	0576	

* Age will be calculated using the date of birth in the eligibility file. All the dates used are subject to masking (random, symmetric increment).