

Healthcare Effectiveness Data and Information Set (HEDIS®)

MY2023 / RY2024 Summary of Performance

Measuring quality of care and services provided to our members!

Partnership Healthplan HEDIS Team October 30th, 2024









Thank you all for joining our HEDIS Office Hours!

You have been muted upon entry. If you have questions, please utilize the chat box within your Webex screen.

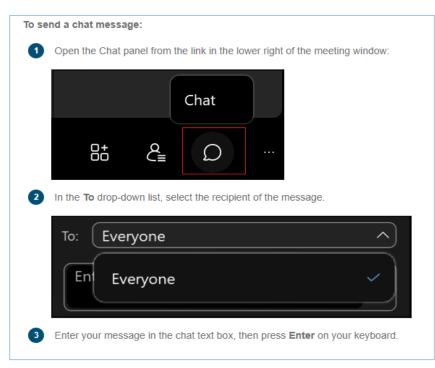
We will be recording today's HEDIS Office Hours session.





Welcome

• How to utilize the chat feature







- Annual HEDIS Projects Overview of MY2023
- The National Committee for Quality Assurance (NCQA) Health Plan Accreditation (HPA) Star Rating Results
- Department Of Health Care Service (DHCS) Managed Care Accountability Set (MCAS) Results





HEDIS Office Hours Schedule

Title	Date	Topics					
Introduction to HEDIS	07/17/2024	 HEDIS Overview Reporting Populations County Level Oversample Administrative, Hybrid and ECDS Measures 	 Data Collection vs Medical Record Collection HEDIS Timeline 				
HEDIS Office Hours	07/31/202 4	Have a HEDIS question? Join us for an open	forum Q&A.				
Provider Medical Record Collection Overview	08/14/202 4	 Why do we collect records? How do we access and collect records? Who collects the records? 					
HEDIS Office Hours	08/28/202 4	Have a HEDIS question? Join us for an open	forum Q&A.				
MY2023 Annual Summary of Performance	10/30/2024	HPA (Health Plan Accreditation)	 Managed Care Accountability Set (MCAS) 				
Hybrid Measure Overview	11/13/2024	 Overview of Hybrid measures HPA (Advent Advisory) vs MCAS (HSAG) 	 BPD**, CBP, CCS, CIS, EED**, HBD, IMA, LSC+, PPC, WCC-BMI** 				

** HPA Only





Annual HEDIS Project

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Why is HEDIS Important?

- <u>People</u>: Real people behind the data, which reflects their personal healthcare outcomes.
- <u>Finances</u>: Starting in MY2024, approximately \$17M will be at risk based on HEDIS/CAHPS Performance
 - DHCS will increase significantly in subsequent years.
- <u>Reputation</u>: A key factor in our publicly reported NCQA Health Plan Rating. Measure performance assessed by DHCS as below average results in publicly disclosed sanctions.





MY2023 vs. MY2024 Reporting Populations

<u>MY2023</u>

Managed Care Accountability Set (MCAS) Reporting				
Northwest	Humboldt, Del Norte			
Northeast	Lassen, Modoc, Siskiyou, Trinity, Shasta			
Southwest	Sonoma, Marin, Mendocino, Lake			
Southeast	Solano, Yolo, Napa			
NCQA Health Plan Accreditation (HPA) Reporting				
Plan-Wide	All 14 Legacy Partnership Counties			





<u>MY2024</u>

Managed Care Accountability Set (MCAS) Reporting					
Plan-Wide All 24 Counties – Legacy + Expansion Counties					
NCQA Health Plan Accreditation (HPA) Reporting					
Plan-Wide All 24 counties – Legacy + Expansion Counties					





Measure Sets: NCQA HPA vs DHCS MCAS

- DHCS MCAS has greater emphasis on Childhood and Adolescent Preventive Care measures. Other (smaller) domains include:
 - Cancer Prevention
 - **Reproductive Health**
 - Chronic Disease
 - Behavioral Health
- In contrast, NCQA HPA includes additional measures focused on:
 - Adult Immunizations
 - Respiratory Treatment
 - Diabetes
 - Heart Disease
 - **Behavioral Health**

DHCS Managed Care Accountability 10 Set (MCAS) – Accountable 42 18

NCQA Health Plan Accreditation (HPA) -

DHCS

Managed Care Accountability Set (MCAS) – **Reporting Only** 24

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NCQA HPA MY2023 Performance



NCQA Health Plan Accreditation (HPA) – Health Plan Rating Methodology

The overall Health Plan Rating (HPR) is assessed on a 0-5 point scale in half points.

Lower Performance Higher Performa					mance			
≤1.0	1.5	2.0	2.5	3.0	3.5	4.0	4.5	5.0

The HPR is the weighted average of a plan's HEDIS and CAHPS measure ratings plus bonus points for plans with current Accreditation status.

- 1. Patient Experience: CAHPS measure performance in the selected survey
- 2. Rates for Clinical Measures: HEDIS measures, grouped in sub-categories
 1) Prevention and Equity and 2) Treatment
- **3. NCQA Health Plan Accreditation:** 0.5 bonus points are added to the calculated overall score before rounding to the nearest half point





Final HPR for MY2023

- The final HPR rating for MY2023 is **3.5 Stars**.
- This final HPR reflects our decision to submit Adult CAHPS vs. Child CAHPS.

HPR Section	MY2022 – Final, Used Child CAHPS	MY2023 – Used Adult CAHPS
Patient Experience (CAHPS)	2.0	1.5
Prevention and Equity (HEDIS domain)	3.5	3.5
Treatment (HEDIS domain)	3.5	3.5
Bonus for Accreditation	0.5	0.5
Overall HPR	3.5	3.5





DHCS MCAS



DHCS MCAS: Accountable Measures MY2023

Domain	Measure	Domain	Measure		
-	Well Child Visits: 0-15 Months	Cancer	Breast Cancer Screening		
	Well Child Visits: 15-30 Months	Prevention	Cervical Cancer Screening		
	Child & Adolescent Well Care Visits		Chlamydia Screening		
Pediatric	Childhood Immunizations	Reproductive Health	Timeliness of Prenatal Care		
	Immunizations for Adolescents		Postpartum Care		
	Lead Screening in Children	Chronie	Hemoglobin A1c Poor Control (>9%)		
	Topical Fluoride for Children (New)	Chronic Disease	Controlling High BP		
	Developmental Screening in 0-3yrs (New)	2100000	Asthma Med Ratio (Re-instated)		
		Behavioral	F-Up after ED Visit for Substance Use		
		Health	F-Up after ED Visit for Mental Illness		

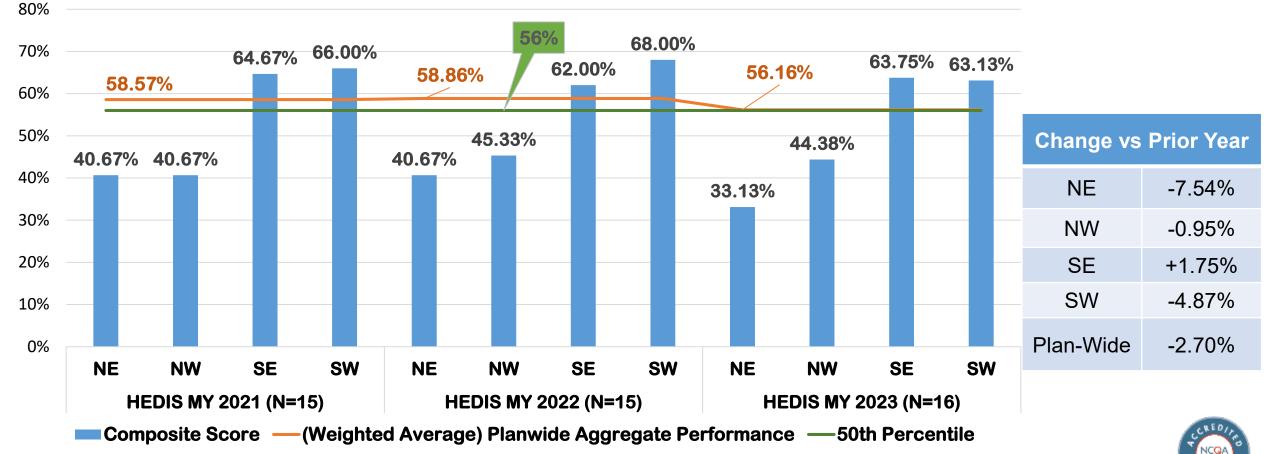
- 18 measures in MY2023 vs 15 measures in MY2022
 - All 15 measures from MY2022 continue in MY2023
 - 1 measure re-instated
 - 2 new measures are CMS Core Measures, with no national benchmarks available for scoring





DHCS MCAS Composite Scoring & Year-over-Year Trends

Partnership calculates its plan-wide aggregate score across all four DHCS MCAS reporting regions by factoring in eligible populations by region, given membership is significantly greater in the Southern region reporting populations than Northern.





DHCS MCAS Trend Analysis: By Measure Domain

Quality Compass Benchmarks	Reproductive Health (12 measures scored)	Chronic Disease (12 measures scored)	Cancer Prevention (8 measures scored)		
Met 75th or greater	42%	25%	13%		
Met 50th (MPL) to 75th	33%	50%	50%		
Met 25th to 50th (MPL)	17%	8%	13%		
Met less than 25th	8%	17%	25%		

- **Reproductive Health**: Prenatal and Postpartum Care measures are strong plan-wide performers
 - **Opportunities**: Addressing low Chlamydia Screening rates in more rural regions
- Chronic Disease: Controlling High Blood Pressure and Diabetes Hemoglobin A1c Control measures represent strong plan-wide performance since 2018
 - Opportunities:
 - Protecting Diabetes Care given recent declines in NE and SW regions
 - Partnering with providers to re-invest in Asthma Care focused improvement activities in rural regions
- **Cancer Prevention**: Breast Cancer and Cervical Cancer Screening measures significantly stronger in southern vs northern regions, largely reflecting provider access and member engagement constraints





DHCS MCAS Trend Analysis: By Measure Domain (continued)

Quality Compass Benchmarks	Pediatric (24 measures scored)	Behavioral Health (8 measures scored)		
Met 75th or greater	13%	0%		
Met 50th (MPL) to 75th	17%	13%		
Met 25th to 50th (MPL)	33%	38%		
Met less than 25th	38%	50%		

- **Pediatric:** Performance driven by:
 - High rates of missing immunization doses & parental refusals in rural regions
 - Access constraints limit Well Child/Care Visits
 - Data Incompleteness in Well Child Visits due to gaps in newborn data
 - Data Incompleteness and Measure Limitations → new measures in oral health and developmental screening
 - Lead Screening in Children rates are *significantly improved* over prior year
 Opportunities: Continuing portfolio of improvement activities plus new solutions to expedite newborn enrollment and qualify supplemental data sources
- Behavioral Health: Low performance due to Incomplete Data and Measure Limitations.
 Opportunities:
 - Pursuing new data agreements with counties given drops in DHCS supplied data
 - Interventions with large PCPs underway, focused on timely referrals and follow-ups post ED visits





MY2023 and Next Steps

Eureka | Fairfield | Redding | Santa Rosa

CREDIN



MY2023 Results

	Regional Performance			National Medicaid Benchmarks				
Measure	Northeast	Northwest	Southeast	Southwest	25 th	50 th	75 th	90 th
CIS	8.03	18.98	44.53	37.47	24.57	30.90	37.64	45.26
СВР	61.34	63.14	64.29	64.75	55.47	61.31	67.27	72.22
IMA	20.19	31.87	51.82	47.93	29.44	34.31	40.88	48.80
PPC – Postpartum Care	81.36	82.19	87.50	93.71	73.97	78.10	82.00	84.59
PPC – Timeliness of Prenatal Care	85.30	79.00	88.75	93.71	79.63	84.23	88.33	91.07
WCV	41.64	48.03	47.79	49.45	42.99	48.07	55.08	61.15
W30 – 15-30 Months	56.09	65.44	65.20	67.47	62.07	66.76	71.35	77.78
W30 – First 15 Months	39.25	45.26	36.83	46.28	52.84	58.38	63.34	68.09

• Above HPL (high performance level – 90th percentile)

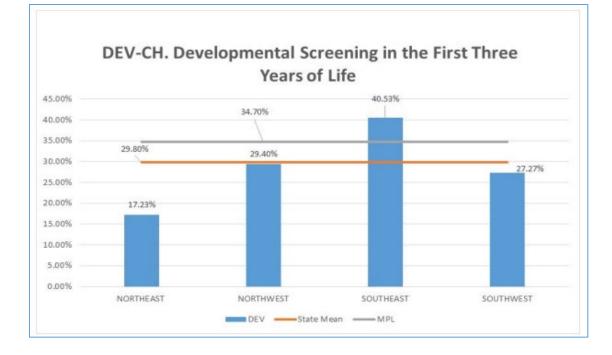
• Below MPL (minimum performance level – 50th percentile)

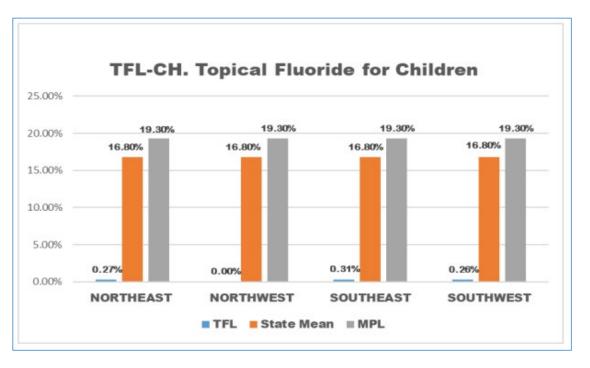




MY 2024 Focus Area

MY2023 Final Rates









Next Steps

- DHCS will release the Quality Factor Score results later this year. This will result in mandated performance improvement activities.
- Partnership will adapt Quality Measure Score Improvement strategies and tactics in 2024-2025, as noted in the solutions outlined throughout this presentation.
- Partnership will strengthen supplemental data sources to improve data completeness.
- Where a delegated arrangement once existed between Kaiser and Partnership in our Southern Region, the impact on DHCS accountable measure performance is being analyzed.





HEDIS MY2023 Annual Summary Reports

Refer to the more detailed DHCS MCAS and NCQA Health Plan Accreditation (HPA) MY2023 Annual Summary of Performance Reports as posted on Partnership's website under Providers \rightarrow Quality Improvement \rightarrow HEDIS

- Medi-Cal HEDIS MY2023 Performance (MCAS)
- Medi-Cal HEDIS MY2023 Performance (HPA)



https://www.partnershiphp.org/Providers/Quality/Pages/HEDISLandingPage.aspx







For additional questions: HEDISteam@partnershiphp.org