

# PCMH Quality Improvement: Processes, Outcomes, and Strategies

December 7, 2022





# Learning Objectives

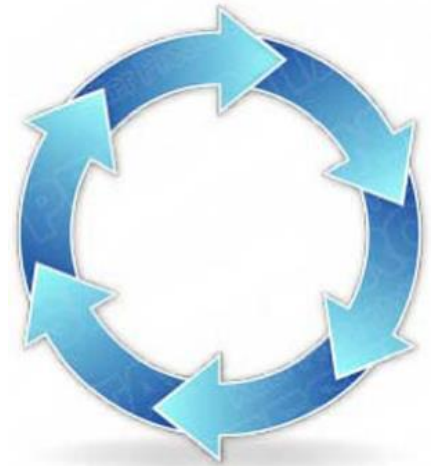
- Describe Person-Centered Medical Home (PCMH) program practice Quality Improvement (QI) activity
- Review practice measure results related to practice engagement with the Clinical Practice Transformation (CPT) team
- Understand the basics of the QI process
- Discuss the Plan-Do-Study-Act (PDSA) QI model
- Outline the National Committee for Quality Assurance (NCQA) PCMH QI criteria



# QI Process Review

# QI Process

- Evaluate performance on measures based on data/reports
- Identify opportunities for improvement
- Stratify data by race and ethnicity
  - Assess for health equity disparities & improvement opportunities
- Choose and define QI projects
  - Assess workflows for efficiency
  - Determine measurable goals
  - Establish timeline for implementation and achievement of goals
- Assess for goal achievement at least quarterly
- Sustain improvement



***The QI process is cyclical and continuous***

# QI Goals

- **Realistic:** Relevant to your practice and your patient population
  - Implement daily huddles with staff to review patients that are scheduled to be seen that day
- **Specific & Achievable:** Determine appropriate timeframe to achieve the goal
  - Can we increase our annual well-visits for eligible patients in the next six months?
    - Choose one preventive service
    - Will implementing morning huddles and scheduling visits when patients are at the practice lead to desired result?
- **Measurable & Timely:** Include specific data that can be measured
  - Increase annual well-visits by 5% in the next six months



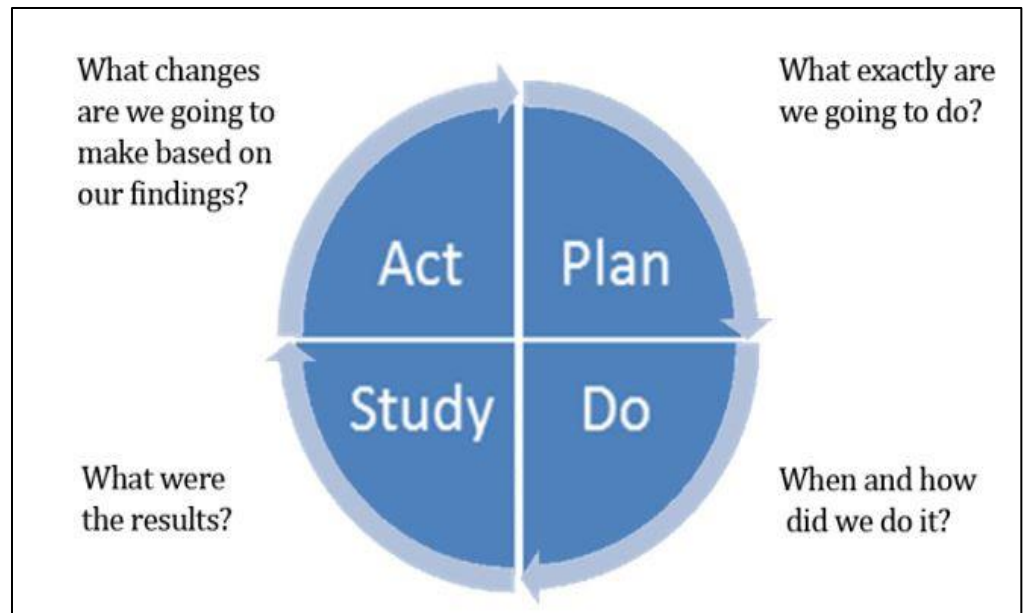
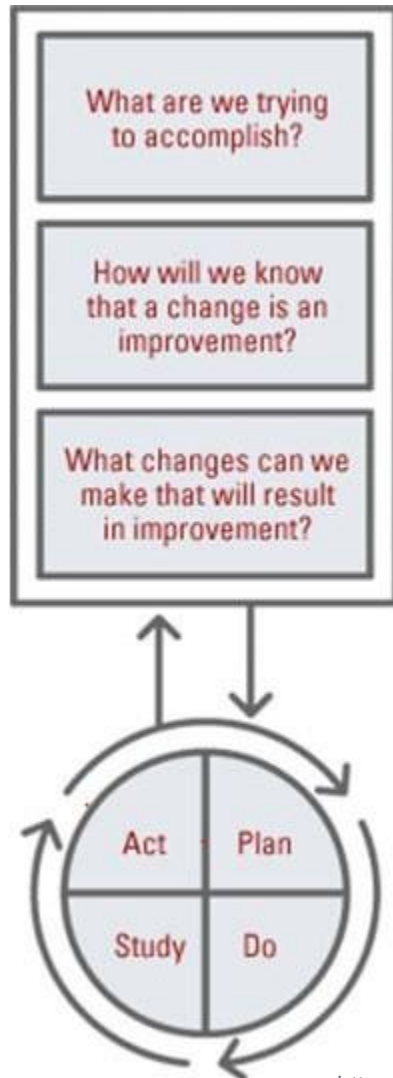
# Best Practice QI Model

## Plan-Do-Study-Act (PDSA) Cycle:

- Develop a **plan** to test a change after identifying areas of potential improvement through data analysis
  - Map out the chosen improvement and define the goal
- **Implement** a change to achieve the desired outcomes
- **Analyze** the results and compare them to your predictions
- **Act** on the results by determining what modifications, if any, might be needed for the next cycle



# PDSA Cycle Models



# NCQA PCMH Performance Measurement & QI

- QI 01 Clinical Quality Measures: Practice monitors at least five clinical quality measures across four categories:
  - Immunizations
  - Other preventive care (not including immunizations)
  - Chronic/acute care clinical measure
  - Behavioral health
- QI 02 Resource Stewardship Measures: Practice measures at least two measures of resource stewardship (at least one measure of each type):
  - Measures related to care coordination
  - Measures affecting healthcare costs



# NCQA PCMH Performance Measurement & QI (cont.)

- QI 04 Patient Experience Measures: Practice monitors patient experience through quantitative and qualitative data across the following categories:
  - Access
  - Communication
  - Coordination
  - Whole-person care, self-management support, and comprehensiveness





# QI Outcomes

# PCMH Practice QI Activity

- A total of 1,428 measures were discussed with primary care practices for QI engagement from January through June of 2022
- CPTS team engaged PCMH practices for 496 of those measures for QI (34.7% of the total measures)
- Of 190 practices that were contacted, 72 engaged with CPTS staff to work on measures to improve outcomes (37.9%)



# MY 2022 CPTS Team QI Activity\*

|  | Total        | FQHC         | PCMH & Glide Path | Non-PCMH    |
|--|--------------|--------------|-------------------|-------------|
| Practices w/ QI Opportunities          | 285          | 16           | 92                | 177         |
| Contacted Practices                    | 190          | 14           | 83                | 93          |
| Engaged Practices                      | 72           | 8            | 56                | 8           |
| Engagement Rate of Contacted Practices | <b>37.9%</b> | <b>57.1%</b> | <b>67.4%</b>      | <b>8.6%</b> |

*\*The activity cited in the table is from January 1, 2022 to June 30, 2022.*

# PCMH Team QI Activity

- Practices focus on selected measures
- CPTS team contacted engaged practices (quarterly at a minimum) to discuss health measures and where there was an opportunity to engage in the QI process
- Team activity includes:
  - Education about the measure
  - Tips and information on billing and coding
  - Discussion of the PDSA cycle
  - Review of practice data and portal reports
  - Planning interventions
  - Support with implementation



# Pediatric Quality Measures MY 2022

- **Asthma Emergency Room** – The percentage of members 2-20 years of age diagnosed with asthma during the measurement year with one or more asthma-related emergency room (ER) visits
- **Behavioral Health Screening (Ages 1-18)** – The percentage of members 1-18 years of age who received an annual behavioral health screen within the 12 months prior to their birthday
- **Child and Adolescent Well-Care Visits (WCV) (HEDIS® MY 2022)\*** – The 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
- **Developmental Screening in the First Three Years of Life (DEV-CH)** – The percentage of members screened for risk of developmental, behavioral, and social delays using a standardized screening tool in the 12 months preceding their first, second, or third birthday
- **Immunizations for Adolescents (IMA) (HEDIS® MY 2022)\* - HPV** – The percentage of adolescents 13 years of age who have completed the human papillomavirus (HPV) vaccine series by their 13<sup>th</sup> birthday

# Asthma Emergency Room

## CPTS Engaged VS. Non-Engaged Group Comparison by QI Measure

► Select QI Measure for the detail

AED220

► Selected Measure: **Asthma Patients with One or More Asthma-Related Emergency Room Visits (Ages 2-20)** -- Percentage of members 2-20 years of age diagnosed with asthma during the measurement year with one or more asthma-related emergency room (ER) visits.

► Count of Practices

|  |     |
|--|-----|
| Total Assigned Practices (need intervention on QI) | 46  |
| Contacted Practices                                | 35  |
| Engaged Practices                                  | 15  |
| Engagement Rate of Contacted Practices             | 43% |

► Count of Practice by Practice Setting

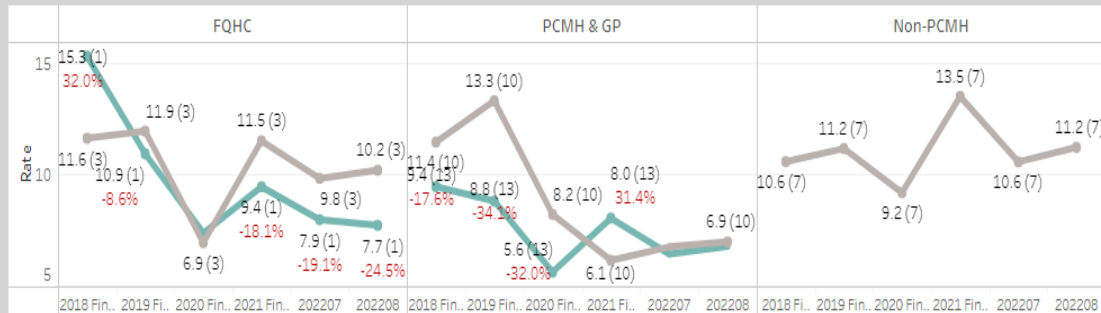
|  | FQHC | PCMH & GP | Non-PCMH |
|--|------|-----------|----------|
| Total Assigned Practices (need intervention on QI) | 6    | 27        | 13       |
| Contacted Practices                                | 4    | 24        | 7        |
| Engaged Practices                                  | 1    | 14        | 0        |
| Engagement Rate of Contacted Practices             | 25%  | 58%       | 0%       |

► Engaged Vs. Non-engaged Practices

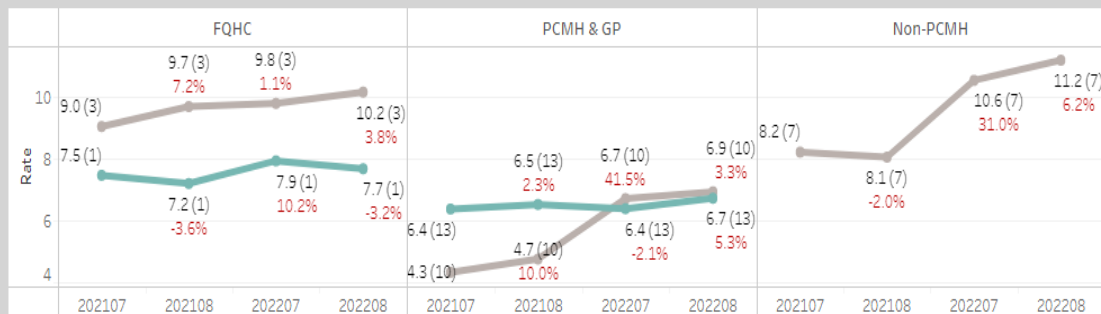
|                       | Grand Total | FQHC | PCMH & GP | Non-PCMH |
|-----------------------|-------------|------|-----------|----------|
| Engaged Practices     | 15          | 1    | 14        | 0        |
| Non-Engaged Practices | 20          | 3    | 10        | 7        |

Engaged  
Non-Engaged

► Annual Rate Trend by Engaged vs. Non-engaged groups (Red % indicates % difference from Non-Engaged within MY)



► YoY Rate Comparison by Engaged Vs. Non-engaged Groups (Red % indicates YoY % difference within each group)



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# Behavioral Health Screening (Ages 1-18)

## CPTS Engaged VS. Non-Engaged Group Comparison by QI Measure

► Select QI Measure for the detail

► Selected Measure: **Behavioral Health Screening (Ages 1-18)** -- The percentage of members 1-18 years of age who received an annual behavioral health screen within the 12 months prior to their birthday.

► Count of Practices

|  |     |
|--|-----|
| Total Assigned Practices (need intervention on QI) | 80  |
| Contacted Practices                                | 64  |
| Engaged Practices                                  | 30  |
| Engagement Rate of Contacted Practices             | 47% |

► Count of Practice by Practice Setting

|  | FQHC | PCMH & GP | Non-PCMH |
|--|------|-----------|----------|
| Total Assigned Practices (need intervention on QI) | 5    | 40        | 35       |
| Contacted Practices                                | 5    | 38        | 21       |
| Engaged Practices                                  | 2    | 25        | 3        |
| Engagement Rate of Contacted Practices             | 40%  | 66%       | 14%      |

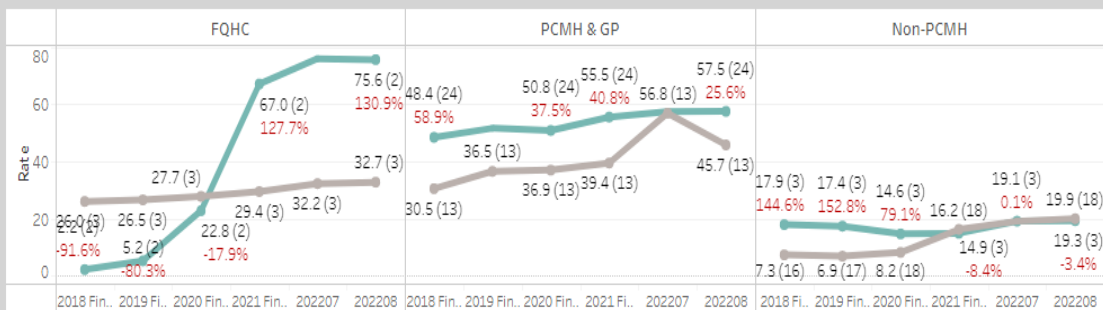
The Healthcare Effectiveness Data and Information Set (HEDIS®) is a registered trademark of NCOA.

► Engaged Vs. Non-engaged Practices

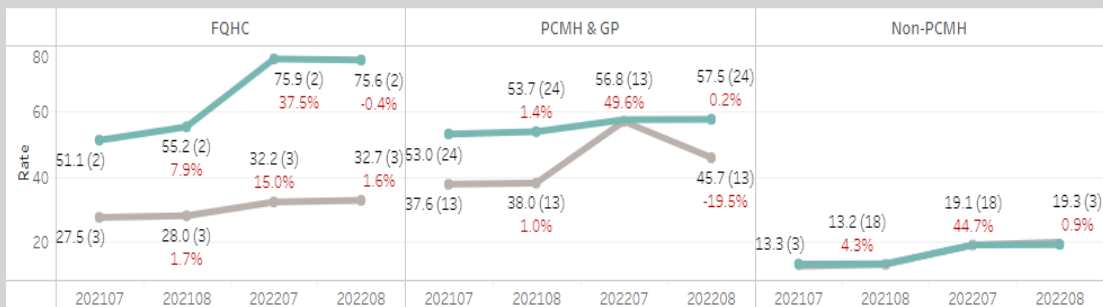
|                       | Grand Total | FQHC | PCMH & GP | Non-PCMH |
|-----------------------|-------------|------|-----------|----------|
| Engaged Practices     | 30          | 2    | 25        | 3        |
| Non-Engaged Practices | 34          | 3    | 13        | 18       |

Engaged  
Non-Engaged

► Annual Rate Trend by Engaged vs. Non-engaged groups (Red % indicates % difference from Non-Engaged within MY)



► YoY Rate Comparison by Engaged Vs. Non-engaged Groups (Red % indicates YoY % difference within each group)





# Child and Adolescent Well-Care Visits (WCV) (HEDIS® MY 2022)\*

MY 2022 rates are Unaudited HUSKY Health MY 2022 HEDIS® Rates

## CPTS Engaged VS. Non-Engaged Group Comparison by QI Measure

Select QI Measure for the detail

WCV Total

**Selected Measure: Child and Adolescent Well-Care Visits Total (HEDIS® MY2021 & MY2022)** -- The percentage of member 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.

Count of Practices

|  |     |
|--|-----|
| Total Assigned Practices (need intervention on QI) | 79  |
| Contacted Practices                                | 65  |
| Engaged Practices                                  | 21  |
| Engagement Rate of Contacted Practices             | 32% |

Count of Practice by Practice Setting

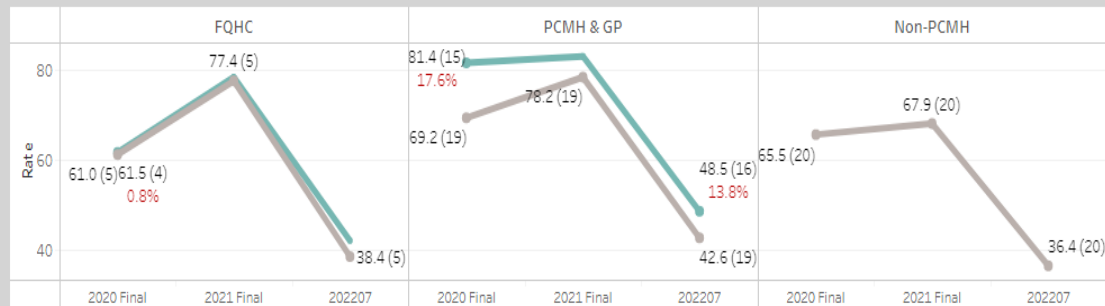
|  | FQHC | PCMH & GP | Non-PCMH |
|--|------|-----------|----------|
| Total Assigned Practices (need intervention on QI) | 10   | 37        | 32       |
| Contacted Practices                                | 9    | 36        | 20       |
| Engaged Practices                                  | 4    | 17        | 0        |
| Engagement Rate of Contacted Practices             | 44%  | 47%       | 0%       |

Engaged Vs. Non-engaged Practices

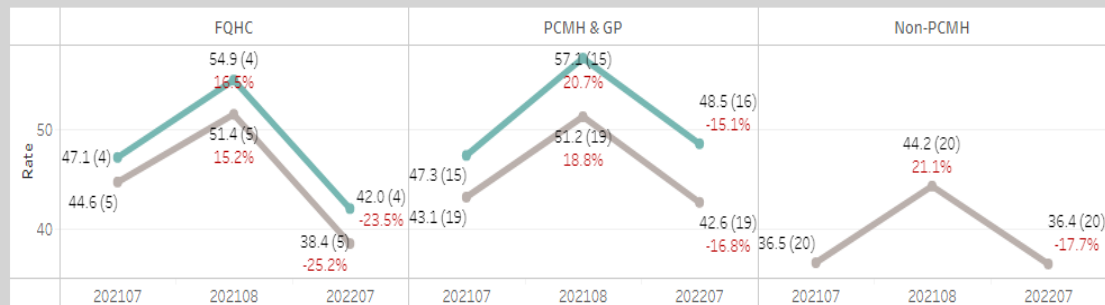
|                       | Grand Total | FQHC | PCMH & GP | Non-PCMH |
|-----------------------|-------------|------|-----------|----------|
| Engaged Practices     | 21          | 4    | 17        | 0        |
| Non-Engaged Practices | 44          | 5    | 19        | 20       |

Engaged  
Non-Engaged

Annual Rate Trend by Engaged vs. Non-engaged groups (Red % indicates % difference from Non-Engaged within MY)



YoY Rate Comparison by Engaged Vs. Non-engaged Groups (Red % indicates YoY % difference within each group)



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# Developmental Screening in the First Three Years of Life (DEV-CH)

## CPTS Engaged VS. Non-Engaged Group Comparison by QI Measure

► Select QI Measure for the detail

► Selected Measure: **Developmental Screening in the First Three Years of Life** -- The percentage of members screened for risk of developmental, behavioral, and social delays using a standardized screening tool in the 12 months preceding their first, second, or third birthday.

### ► Count of Practices

|  |     |
|--|-----|
| Total Assigned Practices (need intervention on QI) | 55  |
| Contacted Practices                                | 44  |
| Engaged Practices                                  | 17  |
| Engagement Rate of Contacted Practices             | 39% |

### ► Count of Practice by Practice Setting

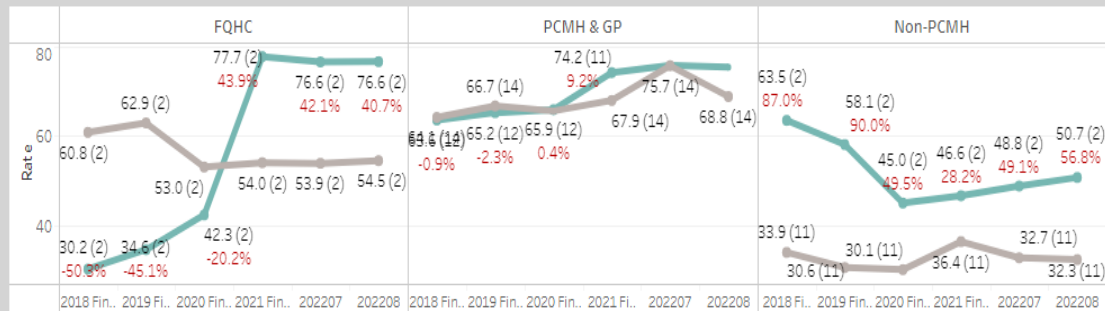
|  | FQHC | PCMH & GP | Non-PCMH |
|--|------|-----------|----------|
| Total Assigned Practices (need intervention on QI) | 6    | 30        | 19       |
| Contacted Practices                                | 4    | 27        | 13       |
| Engaged Practices                                  | 2    | 13        | 2        |
| Engagement Rate of Contacted Practices             | 50%  | 48%       | 15%      |

### ► Engaged Vs. Non-engaged Practices

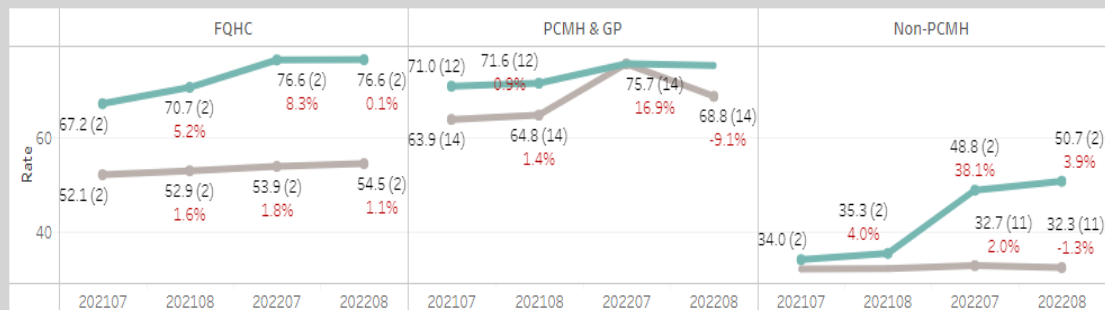
|                       | Grand Total | FQHC | PCMH & GP | Non-PCMH |
|-----------------------|-------------|------|-----------|----------|
| Engaged Practices     | 17          | 2    | 13        | 2        |
| Non-Engaged Practices | 27          | 2    | 14        | 11       |

Engaged  
Non-Engaged

### ► Annual Rate Trend by Engaged vs. Non-engaged groups (Red % indicates % difference from Non-Engaged within MY)



### ► YoY Rate Comparison by Engaged Vs. Non-engaged Groups (Red % indicates YoY % difference within each group)



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# Immunizations for Adolescents (IMA) (HEDIS® MY 2022)\* - HPV

MY 2022 rates are Unaudited HUSKY Health MY 2022 HEDIS® Rates

## CPTS Engaged VS. Non-Engaged Group Comparison by QI Measure

▶ Select QI Measure for the detail

IMA HPV

▶ Selected Measure: **Immunizations for Adolescents - HPV (HEDIS® MY2021 & MY2022)** -- The percentage of members 13 years of age who completed the human papillomavirus (HPV) vaccine series by their 13th birthday.

▶ Count of Practices

|  |     |
|--|-----|
| Total Assigned Practices (need intervention on QI) | 51  |
| Contacted Practices                                | 44  |
| Engaged Practices                                  | 22  |
| Engagement Rate of Contacted Practices             | 50% |

▶ Count of Practice by Practice Setting

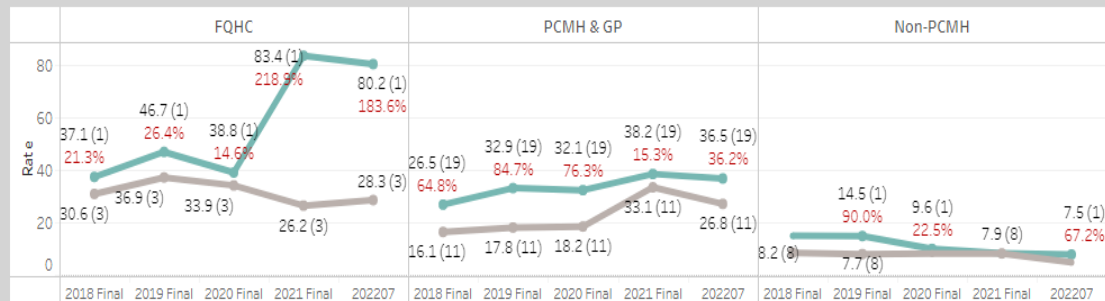
|  | FQHC | PCMH & GP | Non-PCMH |
|--|------|-----------|----------|
| Total Assigned Practices (need intervention on QI) | 4    | 35        | 12       |
| Contacted Practices                                | 4    | 31        | 9        |
| Engaged Practices                                  | 1    | 20        | 1        |
| Engagement Rate of Contacted Practices             | 25%  | 65%       | 11%      |

▶ Engaged Vs. Non-engaged Practices

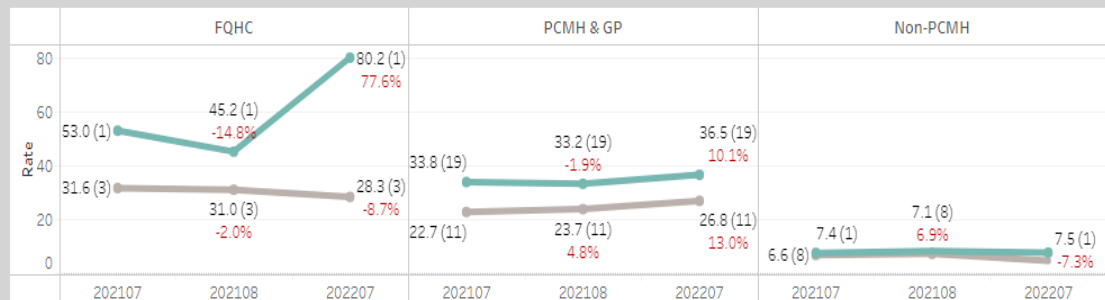
|                       | Grand Total | FQHC | PCMH & GP | Non-PCMH |
|-----------------------|-------------|------|-----------|----------|
| Engaged Practices     | 22          | 1    | 20        | 1        |
| Non-Engaged Practices | 22          | 3    | 11        | 8        |

Engaged  
Non-Engaged

▶ Annual Rate Trend by Engaged vs. Non-engaged groups (Red % indicates % difference from Non-Engaged within MY)



▶ YoY Rate Comparison by Engaged Vs. Non-engaged Groups (Red % indicates YoY % difference within each group)



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# Adult Quality Measures MY 2022

- **Breast Cancer Screening (BCS) (HEDIS® MY 2022)\*** - The percentage of women 50-74 years of age who had a mammogram to screen for breast cancer.  
**Note:** Eligible population is women 52-74 years of age as of December 31<sup>st</sup> of the measurement year.
- **Chlamydia Screening in Women (CHL) (HEDIS® MY 2022)\*** - The percentage of women 16-24 years of age who were identified as sexually active and who had at least one test for chlamydia during the measurement year.
- **Use of Imaging Studies for Low Back Pain (LBP) (HEDIS® MY 2022)\*** - The percentage of members 18-50 years of age with a primary diagnosis of low back pain who did not have an imaging study (plain X-ray, MRI, CT scan) within 28 days of the diagnosis.
- **Post-Admission Follow-up Within Seven Days of an Inpatient Discharge** - The percentage of inpatient medical or behavioral health admissions for members 21-75 years of age with a claim for post-admission follow-up with a physician, PA, or APRN within seven days of the inpatient discharge. Medical admissions are defined as all admissions that are not maternity or surgery-related.

\*The Healthcare Effectiveness Data and Information Set (HEDIS®) is a registered trademark of NCQA.

# Breast Cancer Screening (BCS) (HEDIS® MY 2022)\*

MY 2022 rates are Unaudited HUSKY Health MY 2022 HEDIS® Rates

## CPTS Engaged VS. Non-Engaged Group Comparison by QI Measure

► Select QI Measure for the detail

BCS

► Selected Measure: **Breast Cancer Screening (HEDIS® MY2021 & MY2022)** -- The percentage of women 50-74 years of age who had a mammogram to screen for breast cancer. Note: Eligible population is women 52-74 years of age as of December 31 of the measurement year.

► Count of Practices

|  |     |
|--|-----|
| Total Assigned Practices (need intervention on QI) | 43  |
| Contacted Practices                                | 36  |
| Engaged Practices                                  | 13  |
| Engagement Rate of Contacted Practices             | 36% |

► Count of Practice by Practice Setting

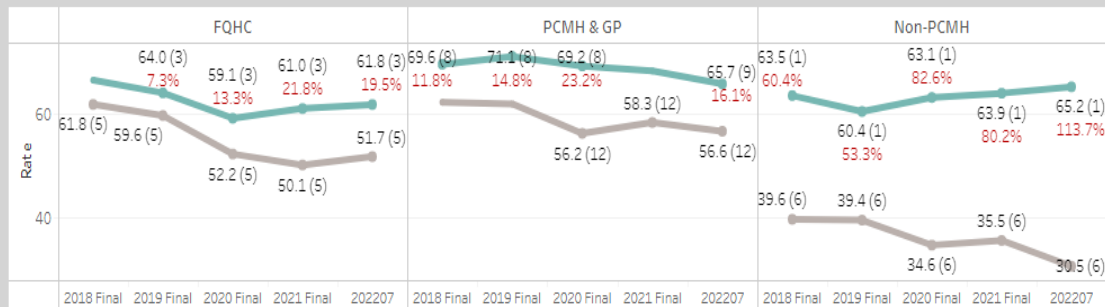
|  | FQHC | PCMH & GP | Non-PCMH |
|--|------|-----------|----------|
| Total Assigned Practices (need intervention on QI) | 9    | 22        | 12       |
| Contacted Practices                                | 8    | 21        | 7        |
| Engaged Practices                                  | 3    | 9         | 1        |
| Engagement Rate of Contacted Practices             | 38%  | 43%       | 14%      |

► Engaged Vs. Non-engaged Practices

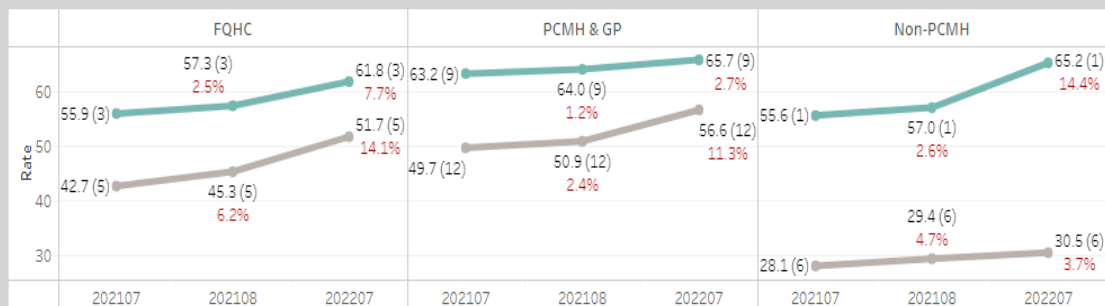
|                       | Grand Total | FQHC | PCMH & GP | Non-PCMH |
|-----------------------|-------------|------|-----------|----------|
| Engaged Practices     | 13          | 3    | 9         | 1        |
| Non-Engaged Practices | 23          | 5    | 12        | 6        |

Engaged  
Non-Engaged

► Annual Rate Trend by Engaged vs. Non-engaged groups (Red % indicates % difference from Non-Engaged within MY)



► YoY Rate Comparison by Engaged Vs. Non-engaged Groups (Red % indicates YoY % difference within each group)



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# Chlamydia Screening in Women (CHL) (HEDIS® MY 2022)\*

MY 2022 rates are Unaudited HUSKY Health MY 2022 HEDIS® Rates

## CPTS Engaged VS. Non-Engaged Group Comparison by QI Measure

► Select QI Measure for the detail

CHL

► Selected Measure: **Chlamydia Screening in Women (HEDIS® MY2021 & MY2022)**

-- The percentage of women 16-24 years of age who were identified as sexually active and who had at least one test for chlamydia during the measurement year.

► Count of Practices

|  |     |
|--|-----|
| Total Assigned Practices (need intervention on QI) | 55  |
| Contacted Practices                                | 46  |
| Engaged Practices                                  | 21  |
| Engagement Rate of Contacted Practices             | 46% |

► Count of Practice by Practice Setting

|  | FQHC | PCMH & GP | Non-PCMH |
|--|------|-----------|----------|
| Total Assigned Practices (need intervention on QI) | 2    | 40        | 13       |
| Contacted Practices                                | 2    | 38        | 6        |
| Engaged Practices                                  | 0    | 21        | 0        |
| Engagement Rate of Contacted Practices             | 0%   | 55%       | 0%       |

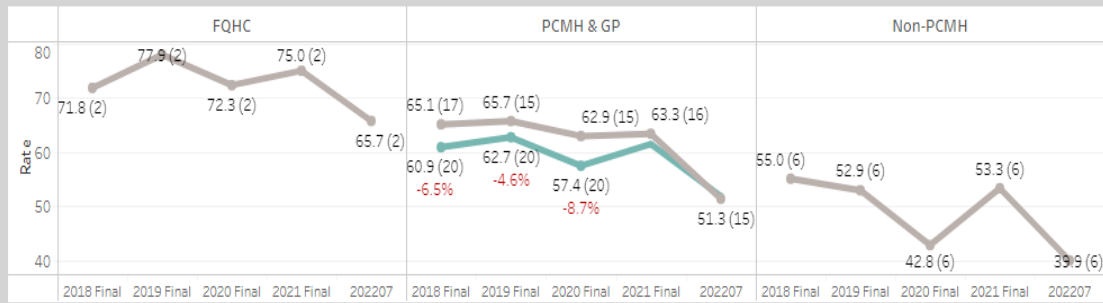
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► Engaged Vs. Non-engaged Practices

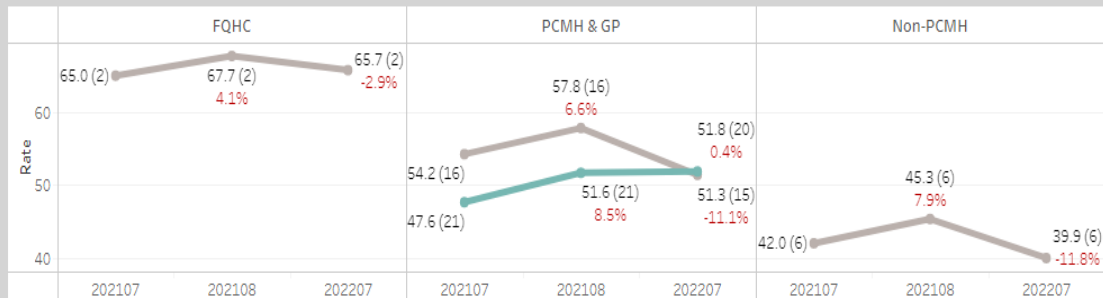
|                       | Grand Total | FQHC | PCMH & GP | Non-PCMH |
|-----------------------|-------------|------|-----------|----------|
| Engaged Practices     | 21          | 0    | 21        | 0        |
| Non-Engaged Practices | 25          | 2    | 17        | 6        |

Engaged  
Non-Engaged

► Annual Rate Trend by Engaged vs. Non-engaged groups (Red % indicates % difference from Non-Engaged within MY)



► YoY Rate Comparison by Engaged Vs. Non-engaged Groups (Red % indicates YoY % difference within each group)



# Use of Imaging Studies for Low Back Pain (LBP) (HEDIS® MY 2022)\*

MY 2022 rates are Unaudited HUSKY Health MY 2022 HEDIS® Rates

## CPTS Engaged VS. Non-Engaged Group Comparison by QI Measure

▶ Select QI Measure for the detail

LBP

▶ Selected Measure: **Use of Imaging Studies for Low Back Pain (HEDIS® MY2021 & MY2022)**

↔ The percentage of members 18-50 years of age with a primary diagnosis of low back pain who did not have an imaging study (plain X-ray, MRI, CT scan) within 28 days of the diagnosis.

▶ Count of Practices

|  |     |
|--|-----|
| Total Assigned Practices (need intervention on QI) | 26  |
| Contacted Practices                                | 22  |
| Engaged Practices                                  | 6   |
| Engagement Rate of Contacted Practices             | 27% |

▶ Count of Practice by Practice Setting

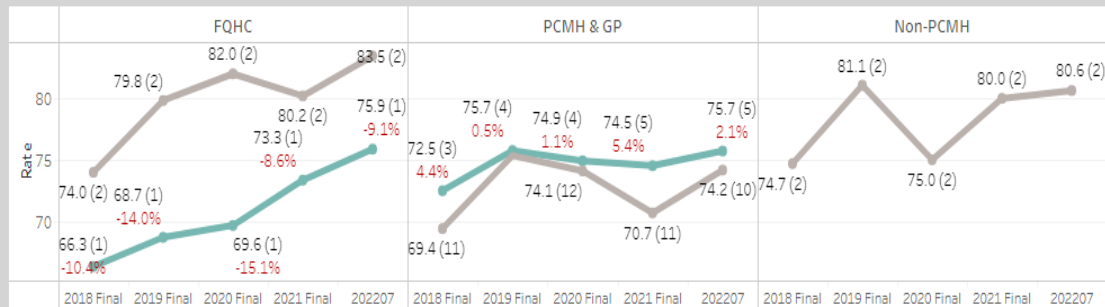
|  | FQHC | PCMH & GP | Non-PCMH |
|--|------|-----------|----------|
| Total Assigned Practices (need intervention on QI) | 3    | 19        | 4        |
| Contacted Practices                                | 3    | 17        | 2        |
| Engaged Practices                                  | 1    | 5         | 0        |
| Engagement Rate of Contacted Practices             | 33%  | 29%       | 0%       |

▶ Engaged Vs. Non-engaged Practices

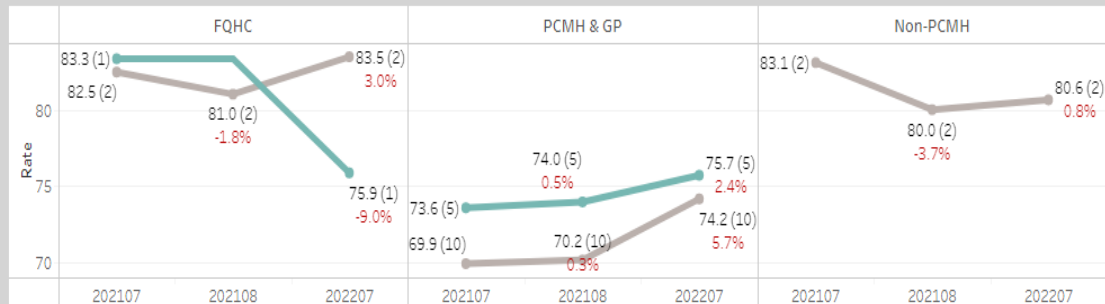
|                       | Grand Total | FQHC | PCMH & GP | Non-PCMH |
|-----------------------|-------------|------|-----------|----------|
| Engaged Practices     | 6           | 1    | 5         | 0        |
| Non-Engaged Practices | 16          | 2    | 12        | 2        |

Engaged  
Non-Engaged

▶ Annual Rate Trend by Engaged vs. Non-engaged groups (Red % indicates % difference from Non-Engaged within MY)



▶ YoY Rate Comparison by Engaged Vs. Non-engaged Groups (Red % indicates YoY % difference within each group)



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# Post-Admission Follow-up Within Seven Days of an Inpatient Discharge

## CPTS Engaged VS. Non-Engaged Group Comparison by QI Measure

► Select QI Measure for the detail

PAFU\_Comb

► Selected Measure: **Post-Admission Follow-up Within Seven Days of an Inpatient Discharge - Physical Health and Behavioral Health** → Percentage of inpatient medical or behavioral health admissions for members 21-75 years of age with a claim for post-admission follow-up with a physician, PA, or APRN within seven days of the inpatient discharge. Medical admissions are defined as all admissions that are not maternity or surgery related.

► Count of Practices

|  |     |
|--|-----|
| Total Assigned Practices (need intervention on QI) | 34  |
| Contacted Practices                                | 27  |
| Engaged Practices                                  | 9   |
| Engagement Rate of Contacted Practices             | 33% |

► Count of Practice by Practice Setting

|  | FQHC | PCMH & GP | Non-PCMH |
|--|------|-----------|----------|
| Total Assigned Practices (need intervention on QI) | 8    | 17        | 9        |
| Contacted Practices                                | 8    | 14        | 5        |
| Engaged Practices                                  | 3    | 6         | 0        |
| Engagement Rate of Contacted Practices             | 38%  | 43%       | 0%       |

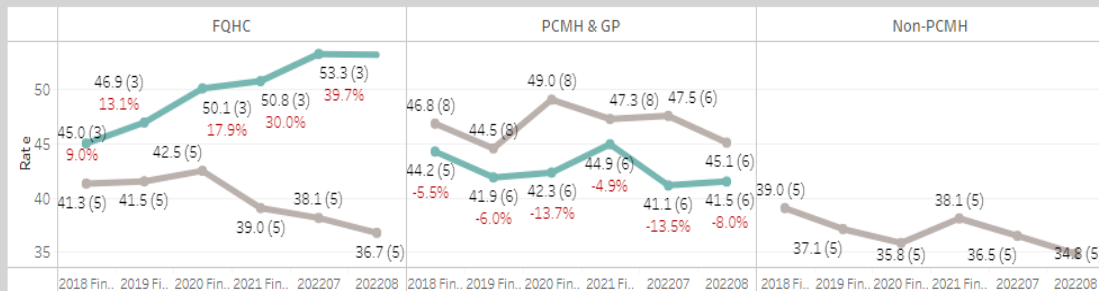
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► Engaged Vs. Non-engaged Practices

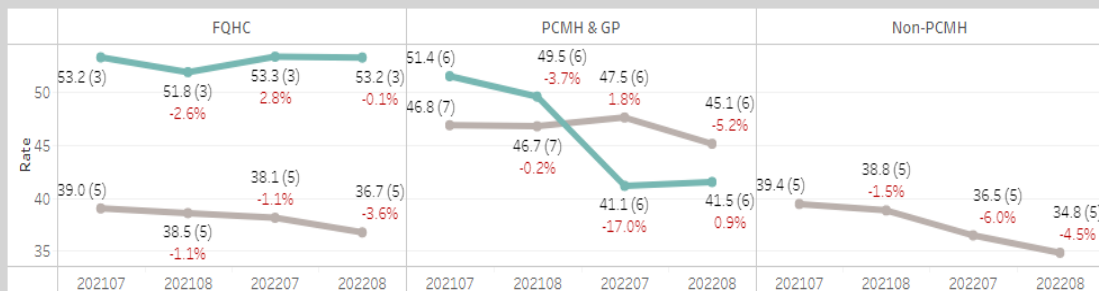
|                       | Grand Total | FQHC | PCMH & GP | Non-PCMH |
|-----------------------|-------------|------|-----------|----------|
| Engaged Practices     | 9           | 3    | 6         | 0        |
| Non-Engaged Practices | 18          | 5    | 8         | 5        |

Engaged  
Non-Engaged

► Annual Rate Trend by Engaged vs. Non-engaged groups (Red % indicates % difference from Non-Engaged within MY)



► YoY Rate Comparison by Engaged Vs. Non-engaged Groups (Red % indicates YoY % difference within each group)





# Comprehensive Diabetes Care – Eye Exam (CDC) (HEDIS® MY 2022)\*

MY 2022 rates are Unaudited HUSKY Health MY 2022 HEDIS® Rates

## CPTS Engaged VS. Non-Engaged Group Comparison by QI Measure

▶ Select QI Measure for the detail

CDC1 Eye Exam

▶ Selected Measure: **Comprehensive Diabetes Care - Eye Exam (Retinal)**

**Performed (HEDIS® MY2021 & MY2022)** -- The percentage of members 18-75 years of age with diabetes (type 1 and type 2) who had an eye screening or monitoring for diabetic retinal disease. This includes diabetics who had one of the following: a retinal or dilated eye exam by an eye care professional (optometrist or ophthalmologist) in the measurement year, or a negative retinal or dilated eye exam (negative for

▶ Count of Practices

|  |     |
|--|-----|
| Total Assigned Practices (need intervention on QI) | 39  |
| Contacted Practices                                | 31  |
| Engaged Practices                                  | 9   |
| Engagement Rate of Contacted Practices             | 29% |

▶ Count of Practice by Practice Setting

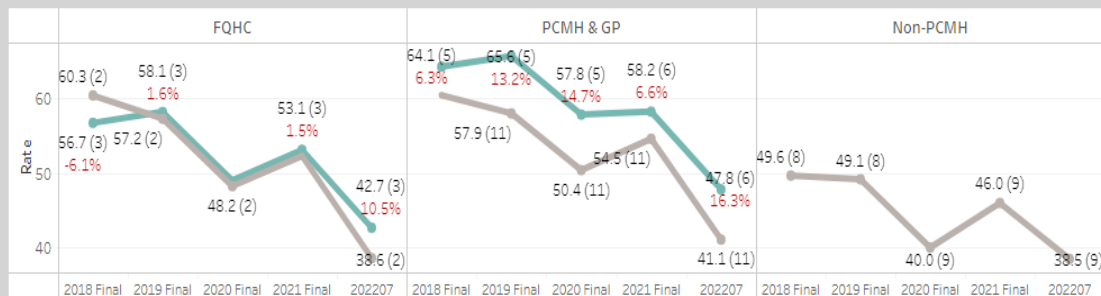
|  | FQHC | PCMH & GP | Non-PCMH |
|--|------|-----------|----------|
| Total Assigned Practices (need intervention on QI) | 6    | 19        | 14       |
| Contacted Practices                                | 5    | 17        | 9        |
| Engaged Practices                                  | 3    | 6         | 0        |
| Engagement Rate of Contacted Practices             | 60%  | 35%       | 0%       |

▶ Engaged Vs. Non-engaged Practices

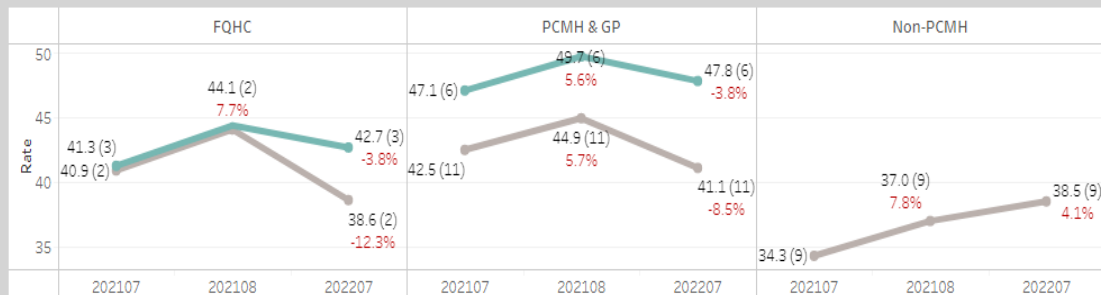
|                       | Grand Total | FQHC | PCMH & GP | Non-PCMH |
|-----------------------|-------------|------|-----------|----------|
| Engaged Practices     | 9           | 3    | 6         | 0        |
| Non-Engaged Practices | 22          | 2    | 11        | 9        |

Engaged  
Non-Engaged

▶ Annual Rate Trend by Engaged vs. Non-engaged groups (Red % indicates % difference from Non-Engaged within MY)



▶ YoY Rate Comparison by Engaged Vs. Non-engaged Groups (Red % indicates YoY % difference within each group)



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# Ambulatory Care - ED Visits per 1,000 MM (HEDIS® MY 2022)\*

MY 2022 rates are Unaudited HUSKY Health MY 2022 HEDIS® Rates

## CPTS Engaged VS. Non-Engaged Group Comparison by QI Measure

▶ Select QI Measure for the detail

AMB Emergency Department Visits

▶ Selected Measure: **Ambulatory Care - ED Visits per 1000 MM (HEDIS® MY2021 & MY2022)** -- The rate of ED visits per 1000 member months among all HEDIS® age groups. Does not include mental health or chemical dependency services.

▶ Count of Practices

|  |     |
|--|-----|
| Total Assigned Practices (need intervention on QI) | 92  |
| Contacted Practices                                | 52  |
| Engaged Practices                                  | 19  |
| Engagement Rate of Contacted Practices             | 37% |

▶ Count of Practice by Practice Setting

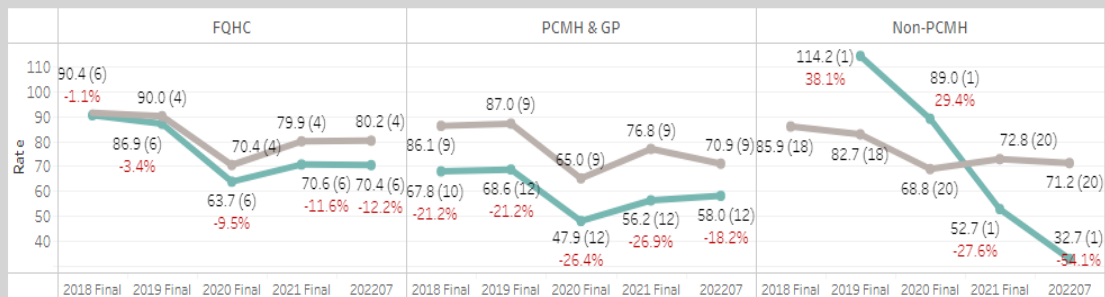
|  | FQHC | PCMH & GP | Non-PCMH |
|--|------|-----------|----------|
| Total Assigned Practices (need intervention on QI) | 12   | 23        | 57       |
| Contacted Practices                                | 10   | 21        | 21       |
| Engaged Practices                                  | 6    | 12        | 1        |
| Engagement Rate of Contacted Practices             | 60%  | 57%       | 5%       |

▶ Engaged Vs. Non-engaged Practices

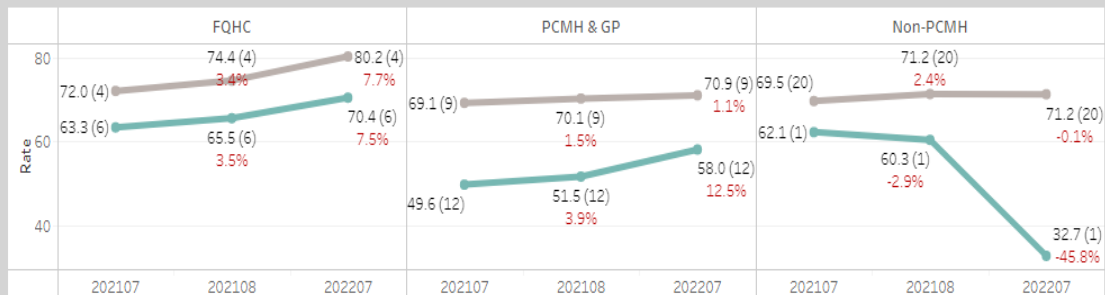
|                       | Grand Total | FQHC | PCMH & GP | Non-PCMH |
|-----------------------|-------------|------|-----------|----------|
| Engaged Practices     | 19          | 6    | 12        | 1        |
| Non-Engaged Practices | 33          | 4    | 9         | 20       |

Engaged  
Non-Engaged

▶ Annual Rate Trend by Engaged vs. Non-engaged groups (Red % indicates % difference from Non-Engaged within MY)



▶ YoY Rate Comparison by Engaged Vs. Non-engaged Groups (Red % indicates YoY % difference within each group)



# Cervical Cancer Screening (HEDIS® MY 2022)\*

MY 2022 rates are Unaudited HUSKY Health MY 2022 HEDIS® Rates

## CPTS Engaged VS. Non-Engaged Group Comparison by QI Measure

► Select QI Measure for the detail

CCS2

► Selected Measure: **Cervical Cancer Screening (HEDIS® MY2021 & MY2022)** -- The percentage of women 21-64 years of age who were screened for cervical cancer using either of the following criteria:

- 1) Women 21-64 years of age who had cervical cytology performed within the last 3 years.
- 2) Women 30-64 years of age who had cervical high-risk human papillomavirus (hrHPV) testing performed within the last 5 years.

► Count of Practices

|  |     |
|--|-----|
| Total Assigned Practices (need intervention on QI) | 64  |
| Contacted Practices                                | 46  |
| Engaged Practices                                  | 10  |
| Engagement Rate of Contacted Practices             | 22% |

► Count of Practice by Practice Setting

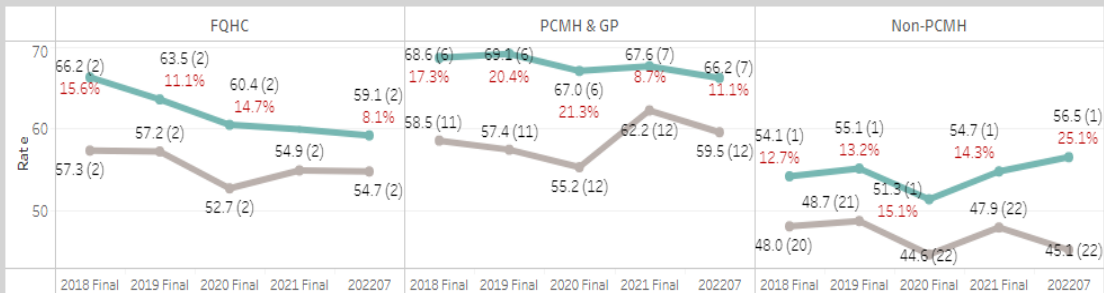
|  | FQHC | PCMH & GP | Non-PCMH |
|--|------|-----------|----------|
| Total Assigned Practices (need intervention on QI) | 4    | 19        | 41       |
| Contacted Practices                                | 4    | 19        | 23       |
| Engaged Practices                                  | 2    | 7         | 1        |
| Engagement Rate of Contacted Practices             | 50%  | 37%       | 4%       |

► Engaged Vs. Non-engaged Practices

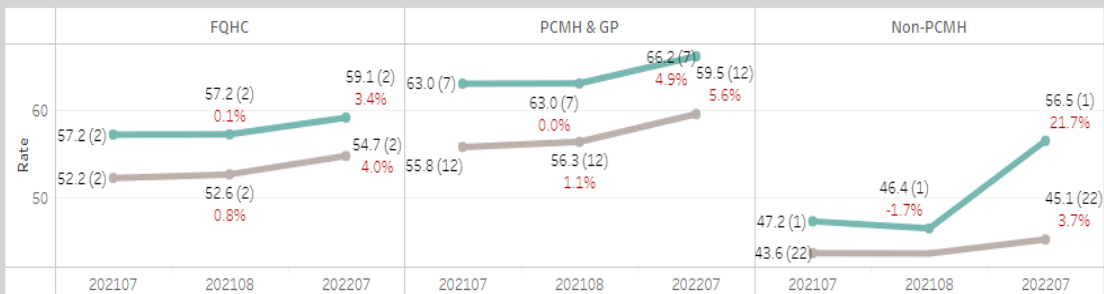
|                       | Grand Total | FQHC | PCMH & GP | Non-PCMH |
|-----------------------|-------------|------|-----------|----------|
| Engaged Practices     | 10          | 2    | 7         | 1        |
| Non-Engaged Practices | 36          | 2    | 12        | 22       |

Engaged  
Non-Engaged

► Annual Rate Trend by Engaged vs. Non-engaged groups (Red % indicates % difference from Non-Engaged within MY)



► YoY Rate Comparison by Engaged Vs. Non-engaged Groups (Red % indicates YoY % difference within each group)



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# Appropriate Testing for Pharyngitis (CWP) (HEDIS® MY 2022)\*

MY 2022 rates are Unaudited HUSKY Health MY 2022 HEDIS® Rates

## CPTS Engaged VS. Non-Engaged Group Comparison by QI Measure

► Select QI Measure for the detail

CWP

► Selected Measure: **Appropriate Testing for Pharyngitis (HEDIS® MY2021 & MY2022)** -- The percentage of episodes for members 3 years of age and older where the member was diagnosed with pharyngitis, dispensed an antibiotic and received a group A streptococcus (strep) test for the episode.

► Count of Practices

|  |     |
|--|-----|
| Total Assigned Practices (need intervention on QI) | 39  |
| Contacted Practices                                | 27  |
| Engaged Practices                                  | 8   |
| Engagement Rate of Contacted Practices             | 30% |

► Count of Practice by Practice Setting

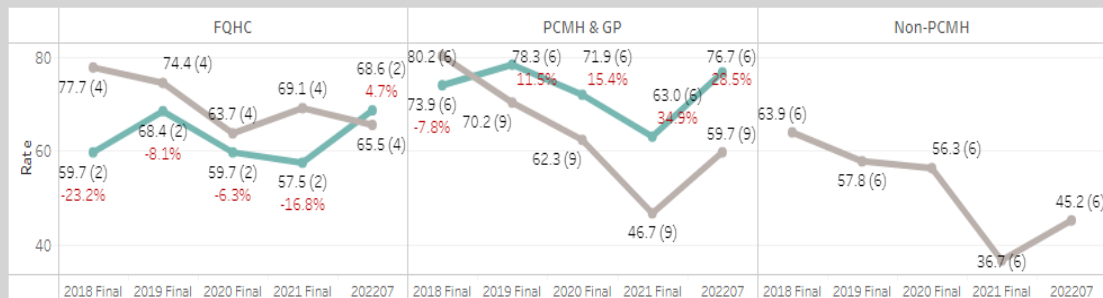
|  | FQHC | PCMH & GP | Non-PCMH |
|--|------|-----------|----------|
| Total Assigned Practices (need intervention on QI) | 8    | 18        | 13       |
| Contacted Practices                                | 6    | 15        | 6        |
| Engaged Practices                                  | 2    | 6         | 0        |
| Engagement Rate of Contacted Practices             | 33%  | 40%       | 0%       |

► Engaged Vs. Non-engaged Practices

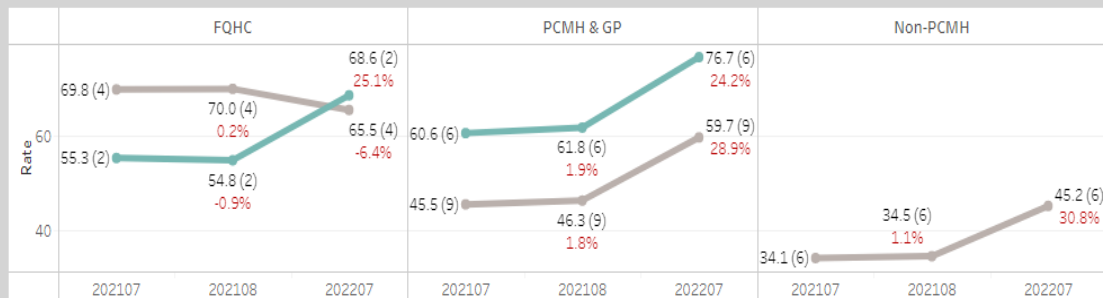
|                       | Grand Total | FQHC | PCMH & GP | Non-PCMH |
|-----------------------|-------------|------|-----------|----------|
| Engaged Practices     | 8           | 2    | 6         | 0        |
| Non-Engaged Practices | 19          | 4    | 9         | 6        |

Engaged  
Non-Engaged

► Annual Rate Trend by Engaged vs. Non-engaged groups (Red % indicates % difference from Non-Engaged within MY)



► YoY Rate Comparison by Engaged Vs. Non-engaged Groups (Red % indicates YoY % difference within each group)



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# Readmissions within 30 Days – Physical Health and Behavioral Health

MY 2022 rates are Unaudited HUSKY Health MY 2022 HEDIS® Rates

## CPTS Engaged VS. Non-Engaged Group Comparison by QI Measure

Select QI Measure for the detail

Readm\_PHBH

Selected Measure: **Readmissions within 30 Days - Physical Health and Behavioral Health**

– The percentage of physical health and behavioral health hospital readmissions within 30 days of discharge for members 0-64 years of age.

Count of Practices

|  |     |
|--|-----|
| Total Assigned Practices (need intervention on QI) | 47  |
| Contacted Practices                                | 30  |
| Engaged Practices                                  | 9   |
| Engagement Rate of Contacted Practices             | 30% |

Count of Practice by Practice Setting

|  | FQHC | PCMH & GP | Non-PCMH |
|--|------|-----------|----------|
| Total Assigned Practices (need intervention on QI) | 9    | 16        | 22       |
| Contacted Practices                                | 6    | 12        | 12       |
| Engaged Practices                                  | 3    | 5         | 1        |
| Engagement Rate of Contacted Practices             | 50%  | 42%       | 8%       |

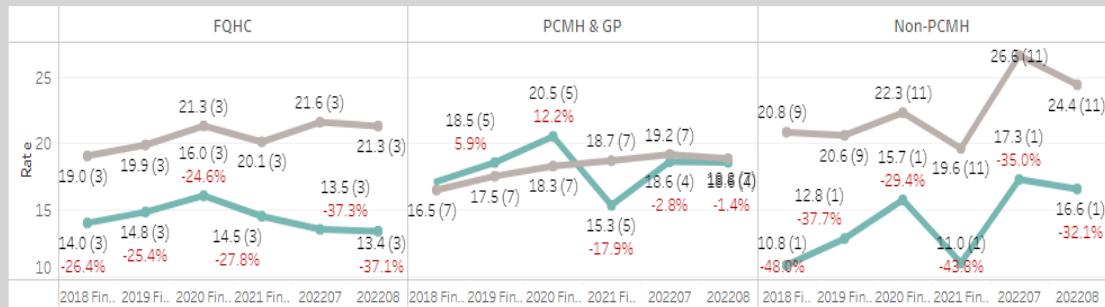
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Engaged Vs. Non-engaged Practices

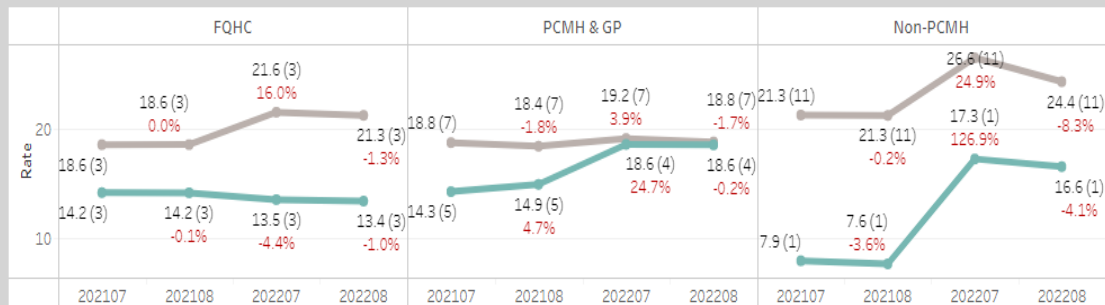
|                       | Grand Total | FQHC | PCMH & GP | Non-PCMH |
|-----------------------|-------------|------|-----------|----------|
| Engaged Practices     | 9           | 3    | 5         | 1        |
| Non-Engaged Practices | 21          | 3    | 7         | 11       |

Engaged  
Non-Engaged

Annual Rate Trend by Engaged vs. Non-engaged groups (Red % indicates % difference from Non-Engaged within MY)



YoY Rate Comparison by Engaged Vs. Non-engaged Groups (Red % indicates YoY % difference within each group)



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# Questions/Comments

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