

North Dakota Legislative Health Care Task Force

Subcommittee on Quality

July 18, 2024

Background and Context

- In previous Task Force meetings, members discussed having subcommittees to dive deeper into specific issues identified as priorities
- Three topics emerged as priorities based on input from the Task Force:
 - **Quality** will define what is meant by quality as a state, catalogue quality measures used in the state, and consider ways to align quality
 - **Improving Access to Care** will identify initiatives to increase patient engagement in and use of preventive and primary care, and improve chronic disease management
 - **Understanding Health Care Costs** will identify what data would be helpful to allow for understanding of health care spending and trends, and develop a fact sheet on Medicaid Expansion financing
- Subcommittees will meet two to three times over the summer; the first two meetings for the Quality Subcommittee have been scheduled for the following:
 - Thursday, **July 18, 2024, 9:30am-11:00am**
 - Thursday, **August 1, 2024, 9:30am-11:00am**

Subcommittee Members

- Sara Stolt
- Michael Delfs
- Dr. Richard Vetter
- Callie Schimmelpfennig (Sanford Health, designee of Tiffany Lawrence)
- Dylan Wheeler and Misty Kanta (Sanford Health Plan)
- Ali Bergquist (BCBSND, designee of Stacie Heiden)
- Ty Hegland

Subcommittee Goals & Objectives

- Determine definition of “quality”
- Catalog different quality measures being used today by payers across different lines of business
- Consider whether North Dakota should have voluntary and/or mandatory alignment of quality measurement across payers
 - If yes, determine what may be included in an aligned set, including aligning quality measures for value-based payment arrangements
- Consider how the state can regularly track performance across aligned measures, and whether the state should set any statewide goals for quality improvement

DEFINITION OF QUALITY

Definitions of Quality

Source	Definition of Quality
Institute of Medicine AHRQ CMS National Academy of Medicine National Quality Forum (NQF)	The Institute of Medicine defines health care quality as "the degree to which health care services for individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge."
NCQA	Health care quality means getting the right care, in the right amount, at the right time.
Institute for Health Care Improvement (IHI)	Building on the ideas of quality movement pioneers, IHI proposes a strategic definition for health care quality : the endeavor of continuously, reliably, and sustainably meeting customer needs. This definition places quality at the center of the health care enterprise: quality is the organizational strategy, not merely a component of the strategy.
World Health Organization	Quality of care is the degree to which health services for individuals and populations increase the likelihood of desired health outcomes.... Quality health services should be: Effective – providing evidence-based healthcare services to those who need them; Safe – avoiding harm to people for whom the care is intended; and People-centered – providing care that responds to individual preferences, needs and values.

Discussion

- Do you believe it is important to have a specific definition of quality?
- What are implications of adopting the different definitions of quality?
- If yes, what is your preferred definition of quality?
 - Do any of the quality definitions included on slide above resonate with you?
 - Is there another definition you would like us to consider?



QUALITY MEASURE SETS

The Case for Advancing a Coordinated Quality Strategy

- Quality measurement is fragmented across private and public programs with few similar measures used to assess health care performance across all programs.
- Providers do not receive a unified message on quality measurement, diluting the impact of improvement initiatives and contributing to administrative burden that is both time consuming and costly.
- Most quality measures that are reported on are process measures. Most outcome measures are burdensome to report for providers and payers alike in the absence of a centralized method for data collection and abstraction.
- A coordinated quality strategy supports a focus on improvement of health care quality and health outcomes, inclusive of health equity, for all state residents and reduces administrative burden on provider and payer organizations.

CMS Core Quality Measure Sets

- The Core Quality Measures Collaborative (CQMC) is a coalition of health care leaders across country that first came together in 2015.
- Idea of aligned measure set in to :
 - Promote measurement that is evidence based and generates valuable information for quality improvement
 - Supports consumer decision making
 - Supports value-based payment
 - Reduces variability in measure selection across payers
 - Decreases provider burden in collecting data for measures
- CMS leveraged this work to create two core measure sets for Medicaid & CHIP that states must use for measurement beginning in Fall 2024
 - Adult Core Measure Set ([2024 Core Set of Adult Health Care Quality Measures for Medicaid \(Adult Core Set\)](#))
 - Child Core Measure Set ([2024 Core Set of Children's Health Care Quality Measure for Medicaid and CHIP \(Child Core Set\)](#))

Quality Measure Sets: Medicaid (CMS Core Measure Sets)

Child and Adult Health Care Quality Measures | Medicaid

Source	Types of Measures Included	Line of Business
CMS Core Measure Sets	Child Core Set: preventive and primary care , including well-child visits, immunizations, and screenings, maternal and perinatal health , acute care , including antibiotic avoidance, asthma, ED utilization, BH measures including depression screening, ADHD medications, FUH, monitoring use of antipsychotics, oral health measures including dental visits, fluoride and sealants	Medicaid
	Adult Core Set: primary care , including cancer screenings, maternal and perinatal health , acute and chronic care , including asthma, antibiotic avoidance, high blood pressure, diabetes, COPD, plan all cause readmission, use of opioids, and HIV viral loads, BH measures, including, smoking cessation, SUD initiation and engagement in treatment, FUH and follow-up after ED usage for SUD or mental health, antipsychotic adherence, and diabetes screenings for individuals with mental health conditions, experience of care , and long term service and supports .	

Quality Measure Sets: BCBS ND

Source	Type of Measures Included	Line of Business
BCBS ND	Adult immunization status, monitoring opioid therapy, antidepressant medication management, upper respiratory infection treatment, asthma admission rates, cervical cancer screening, child and adolescent well visits, childhood and adolescent immunization, chlamydia screening, FUH for mental illness, initiation and engagement of SUD treatment, kidney health for patients with diabetes, prenatal and postpartum care, imaging for lower back, well child visits in first 30 months	Commercial/ Marketplace
	Adherence to Antipsychotics, antidepressant medication management, asthma in younger adults, asthma admission rates, cervical cancer screening, chlamydia screening, COPD, concurrent use of opioids, contraceptive care, diabetes care, FU from ED for MH/SU, heart failure admission rate, initiation and engagement of SUD treatment, screening for depression, opioid use	Medicaid Expansion
	Annual wellness visit, FU from ED, osteoporosis, statin therapy, transitions of care	Medicare Advantage
	Breast Cancer Screening, CAHPs/QHP survey, colorectal cancer screening, controlling high blood pressure, eye exams for patients with diabetes, plan all cause readmission	All Programs

VBP Measures Used by BCBSND

- Acute Hospital Utilization
- Adult Access to Preventative/
Ambulatory Services
- Annual Wellness Visit Completed
- Avoidance of Antibiotic Treatment
for Acute Bronchitis
- Breast Cancer Screening
- Cervical Cancer Screening
- Child and Adolescent Well-Care
Visits
- Colorectal Cancer Screening
- Controlling High Blood Pressure
- ED Utilization
- Follow Up After ED Visit for Mental
Illness
- Follow Up After ED Visit for SUD
- Follow Up After Hospitalization for
Mental Illness
- Hemoglobin A1C Control for Patients
with Diabetes
- Initiation and Engagement of SUD
Treatment
- Potentially Avoidable ER Care
- Prenatal and Post Partum Care
- Statin Therapy for Cardiovascular
Disease
- Statin Therapy for Diabetes
- Well-Child Visits in the First 30
Months of Life

Measures Reported by Essentia Health: Preventative Care

- **Cancer Screenings**
 - breast cancer
 - cervical cancer
 - colorectal
 - chlamydia
- **Immunizations**
 - childhood immunization status – combo 10,
 - immunization for adolescents – combo 2,
 - Influenza
- **Tobacco Use: screening and cessation intervention**
- **Falls Screening for future fall risk**
- **Potentially Preventable:**
 - Potentially Preventable Admissions
 - Potentially Preventable ER Visits
 - ER visits per thousand
 - Post discharge follow up visits
 - Plan All Cause Readmission
 - Risk-standardized Acute Admission rates for patients with chronic conditions
 - Prevention Quality Indications: Overall Composite (PQI90)
 - Ambulatory Sensitive Condition Acute Composite (AHRQ) (PQI91)

Measure Reported by Essentia Health: Wellness Care/Care Coordination

- **Children:**
 - Well Visits in First 15 Months
 - Well Visits 15-30 Months
 - Well Visits in Years 3-6
 - Adolescent Well Care Visits (12-21)
 - Topical Fluoride for Children
- **Maternal Health**
 - Timeliness of Prenatal Care
 - Post Partum Care
- **Annual Visits**
 - Annual Wellness Visit
 - Annual Dental Visit – Adult
 - Annual Dental Visit – Child
- **Effective Care Coordination**
 - Medication reconciliation post discharge
 - Follow up on ED visits
 - Completion rate for Comprehensive Medication Review

Measures Reported by Essential Health: Chronic Condition Management

- **Diabetes Care**
 - Comprehensive diabetes care
 - Optimal diabetes care
 - Diabetes eye exam (two different measures)
 - Hemoglobin A1C Control (two different measures)
 - Statin Use
- **Asthma Care**
 - Asthma Medication Ratio
 - Optimal Asthma Control – Adult
 - Optimal Asthma Control - Child
- **Controlling Blood Pressure**
- **Hypertension Medication Adherence**
- **Statin therapy**
- **Osteoporosis Management**
- **Rheumatoid Arthritis Management**

Sample VBP Measures in Essential Health Contracts

- Well Child Visits (First 15 months, 15-30 months)
- Child & Adolescent Well Care Visits
- Breast Cancer Screening
- Prenatal and Postpartum Care
- Screening for depression and documented follow up care
- ED Visits
- Plan All Cause Readmission
- Topical Fluoride for Children

A Handful of States Have Statewide Aligned Quality Measure Sets

- WA: State legislation mandating use of statewide performance measurement set; administered by non-profit quality organization, Washington Health Alliance
 - [Washington State Common Measure Set 2024](#)
- MN: Statewide Quality Reporting and Measurement System
 - [Quality Measures: 2024 Report Year - MN Dept. of Health \(state.mn.us\)](#)
- OR: Aligned Measure Set for State Purchasers
 - Includes 57 measures across 6 domains
- MA: Quality Measure Alignment Taskforce
 - [EOHHS Quality Measure Alignment Taskforce | Mass.gov](#)
 - [Microsoft Word - 2024 Aligned Measure Set 2023 6-22 \(mass.gov\)](#)
- RI, CT and ME also have aligned measures sets

Buying Value can help states identify and select health plan and provider performance measures for stratification and for use in incentive programs designed to reduce disparities for certain subpopulations.

- [Buying Value](#) is a suite of publicly available resources to help purchasers identify and utilize quality measures. It includes:
 - **The Buying Value Measure Selection Tool**, assists states in creating and maintaining aligned quality measure sets.
 - Includes over 700 measures, including up-to-date versions of 13 federal and national measure sets, a disparities-sensitive indicator and six state measures.
 - Allows states to score measures for inclusion in a measure set based on criteria identified by the state.
 - **The Buying Value Benchmark Repository**, is a database of non-standardized measures in use by state purchasers and associated performance data for benchmarking purposes.
 - Includes nearly 60 measures from seven measure sets focused on preventive care, social determinants of health and more.
- <http://www.buyingvalue.org/>

Discussion

- Is there interest in exploring idea of an aligned measure set? For what purpose?
 - Performance Dashboard Across Payers
 - Aligning measures to simplify for providers
 - Aligning measures within VBP arrangements to support movement on specific measures
- If we adopt a definition of quality, how does that impact the measure set? How broad should a measure set be?
- How much can this group decide regarding specific measures?
 - Who is missing that should be involved?

