

North Dakota Legislative Health Care Task Force

Subcommittee on Quality

August 1, 2024

Recap from Meeting 1 of Quality Subcommittee

- Discussed definitions of “quality”
- Reviewed different quality measures being used today by payers across different lines of business
- Discussed potential for voluntary and/or mandatory alignment of quality measurement across payers
 - Some interest shown in aligning quality measures for value-based payment arrangements
- Discussed potential for tracking across aligned measures, and whether the state should set any statewide goals for quality improvement
 - No current statewide quality committee; some specified quality focus (e.g., perinatal collaborative)
 - Agreement on importance of understanding performance across key measures and having a “state of health care” but concern over resources needed relative to a statewide dashboard

Today's Agenda/Goals

Discuss

Potential ways to regularly gather information on state of health care in ND

Discuss

Potential alignment of measures for VBP

Revisit

Definition of quality

Consider

Potential recommendations for full Task Force and aligning recommendations across subcommittees

MEASURING HEALTH CARE QUALITY

Potential Options for Collecting Quality Measures at Statewide Level

Option	Description	Notes	State Example
Status Quo	Payers collect data on measures individually and use for own monitoring purposes; provide results to Legislature or ND State Agencies upon request		
Voluntary Measure Set and Public Reporting	Payers voluntarily agree to provide agreed upon set of quality measure results annually to State; State publishes report analyzing data and identifying trends	This could also be made mandatory through a Legislative requirement (still won't incorporate all insurers)	WA (mandatory) Washington State Common Measure Set 2024
Statewide Quality Committee	State convenes a statewide Quality Collaborative of payers, providers and other stakeholders to meet regularly to consider quality performance across state	This Committee could identify measure set identified above; or could start small with publicly reporting on data collected across payers	WA (multi-payer collaborative) Multi-Payer Collaborative Memorandum of Understanding 2024 (wa.gov)
Collect and Report on Quality Data Statewide	Payers and/or providers agree to provide information to state entity to support the production of statewide measurement results regardless of payer	This option requires a data collection system collects data across providers and/or payers to allow for statewide reporting to be produced	MN Health Care Quality Measures - MN Dept. of Health (state.mn.us) MN Reports: Minnesota Health Care Markets Chartbook: Section 9 Statewide Quality Reporting and Measurement System ; HEALTH CARE QUALITY REPORT (mncmsecure.org)

Discussion

- What is your ideal approach to looking at quality at a statewide level in North Dakota?
 - Is there interest in a statewide quality collaborative for North Dakota?
 - Is there interest in public reporting of quality measures through a scorecard that shares results across standard measures by market (as reported by payer)?
 - Is there interest in collecting data to provide information on quality performance?
 - Would there be interest in doing this if state also was collecting information for purpose of looking at cost data?
 - What other ideas do you have for measuring quality?

ALIGNED VBP MEASURES

Examples of Aligned Measure Sets for VBP Arrangements

- **MA: Quality Measure Alignment Taskforce**
 - Established in 2017, the Taskforce is focused on developing a voluntary set of aligned measures for advanced VBP models.
 - The group identified criteria to select measures, and updates on an annual basis
 - There is a core set of measures that must be included in all global payments, and a menu of select measures that can be added (<https://www.mass.gov/doc/eohhs-qmat-2025-aligned-measure-set/download>)
- **WA Multi-Payer Collaborative**
 - Convened by the Washington Health Authority, a voluntary group of payers initially came together to support a primary care transformation initiative; the group has morphed to include a focus on aligned quality measures for VBP models and to support improvement initiatives
 - Payers signed MOUs in July 2024 ([Multi-Payer Collaborative Memorandum of Understanding 2024 \(wa.gov\)](#))

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

Sample VBP Measures in Essentia 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

Discussion

- Is there interest in a voluntary aligned measure set for VBP?
 - What do you think about the approach of a core set and an additional menu of optional measures to be included in the VBP?
 - Given examples from BCBSND and Essentia of measures used in VBP, what specific measures would be ideal to include in a core set? Menu set?
 - Should the decision around an aligned VBP measure set come from a quality collaborative (if that exists) or should it be another body?

CIRCLING BACK TO 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.

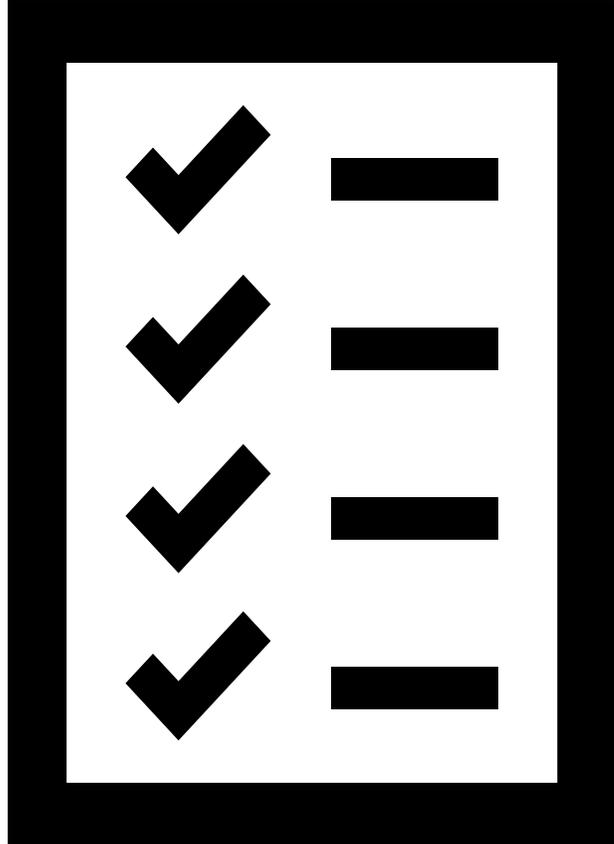
Discussion

- During our last meeting, our discussion focused on how quality definitions can differ depending on context.
- Given where we are as a group today, how would you define quality for purposes of statewide measurement and/or an aligned VBP measure set?



NEXT STEPS AND RECOMMENDATIONS

Next Steps



- Finalize recommendations to full Task Force for meeting on September 4th – this may include:
 - Approach to ongoing statewide review of quality outcomes
 - Voluntary aligned VBP measure set
 - Agreed upon definition of quality
 - Other ideas?

APPENDIX: QUALITY MEASURE SETS

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

Quality Measures: Sanford Health Plan

■ Quality Measures

- Diabetes Care
 - Blood Sugar Controlled, Diabetic Eye Exam, Blood Pressure Control, Kidney Health Evaluation for Patients with Diabetes
- Immunizations
- Controlling Blood Pressure
- Follow-Up Care for Children Prescribed ADHD/ADD Medication
- Metabolic Monitoring for Children and Adolescents on Antipsychotics
- Cancer Screenings
- Annual Wellness Visits

■ Measures in VBP Contracts

- Breast Cancer Screening
- Cervical Cancer Screening
- Colorectal Cancer Screening
- Depression Screening and Follow-up Plan
- Diabetes Care

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**

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/>