

Oregon Metrics and Scoring Committee

Minutes

November 25, 2013

1:00 – 3:0 p.m.

Phone meeting

| Item |
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| <p>Welcome</p> <p>Committee members present: Maggie Bennington-Davis, Gloria Coronado, Robert Dannenhoffer, RJ Gillespie, Bob Joondeph, David Labby, Jeff Luck, Jeanine Rodriguez</p> <p>Not attending: Phil Greenhill</p> <p>OHA Staff: Tina Edlund, Lori Coyner, Sarah Bartelmann, Ari Ettinger, Tracy Hulett</p> <p>Consultants: Michael Bailit, Bailit Health Purchasing</p> |
| <p>Consent Agenda</p> <p>The Committee approved the October 11, 2013 meeting minutes.</p> <p>The Committee reviewed and approved the proposed 2014 meeting schedule and agenda topics. OHA staff will schedule the 2014 meetings.</p> |
| <p>Updates</p> <p><i>CMS Approval</i> - CMS has approved Oregon's proposal to pay for reporting in 2013 for the three clinical measures: depression screening, diabetes control, and hypertension control.</p> <ul style="list-style-type: none">• A guidance document for CCOs has been posted online here: http://www.oregon.gov/oha/CCODData/Technology%20Plan%20Guidance.pdf• Revised quality pool methodology has been posted online here: http://www.oregon.gov/oha/CCODData/ReferenceInstructions.pdf <p>OHA will be hosting two webinars in December to review the guidance document and revised quality pool methodology. Staff will send the webinar invitations to the Committee.</p> <p><i>Dental Metrics Workgroup</i> - The workgroup had their final meeting in early November. Dr. Eli Schwarz will present the workgroup's recommendation to the Committee on December 13, 2013.</p> <p><i>SBIRT Workgroup</i> - At the November Quality Health Outcomes Committee (QHOC) meeting, CCOs and OHA agreed to convene a new working group to establish a community standard on practice workflows and coding standards for SBIRT. OHA will also be hosting an SBIRT billing / coding webinar in December.</p> |

2013 Progress Report Data – OHA has been providing CCOs with monthly process reports on the claims-based incentive measures to help with data validation and quality improvement efforts. The last report was provided on November 7th and the next report will be released December 10th.

DHS Custody – OHA is continuing to provide CCOs with weekly notification files of children entering custody; however, there are many questions about the data. Staff will be meeting with the technical advisory workgroup and making a training available to CCOs on the available data. OHA will also develop an FAQ related to this incentive measure.

Changes for Measurement Year #2

In October, the Committee asked OHA to collect feedback from CCOs and other stakeholders on potential changes to the measures for CY 2014.

OHA surveyed the TAG, CCO CEOs, QHOC, and other stakeholders, and also provided staff recommendations on proposed changes to the incentive measures and specifications for 2014. Survey results and staff recommendations are available in the meeting materials online:

<http://www.oregon.gov/oha/MetricsMeetingMaterials/November%2025,%202013%20Materials.pdf>

The Committee agreed to not drastically change the incentive measures for 2014, and will consider more comprehensive changes for the third measurement year (CY 2015). The Committee agreed to adopt the following measures and existing specifications for 2014:

- Adolescent well care visits
- Alcohol and drug misuse (SBIRT)
- Ambulatory care: emergency department and outpatient utilization (note: only emergency department utilization will be tied to the quality pool)
- CAHPS: access to care composite
- CAHPS: satisfaction with care composite
- Developmental screening
- Follow up care for children prescribed ADHD medications (note: only the initiation rate will be tied to the quality pool)
- Follow up after hospitalization for mental illness
- Electronic Health Record (EHR) adoption
- Early Elective Delivery
- Mental and physical health assessments for children in DHS custody (Note: will measure full calendar year in 2014, add 30 day look back period)
- Patient-Centered Primary Care Home (PCPCH) enrollment
- Depression screening, diabetes control, and hypertension control will continue to follow Meaningful Use specifications; CCOs will submit an updated technology plan and expanded proof of concept data for 2014 .

All existing specifications are posted online:

<http://www.oregon.gov/oha/Pages/CCO-Baseline-Data.aspx>

The Committee agreed to move to HEDIS hybrid methodology for CY 2014 for the colorectal cancer screening and timeliness of prenatal care measures.

The Committee noted the following potential changes for CY 2015:

- Expand adolescent well care visits measure to address more than periodicity – explore ways to address services provided during adolescent well care visits.
- Expand SBIRT measure to include universal screening, referral to treatment; potentially include adolescents.
- Alternate patient experience measures (other than CAHPS composites)
- Identify alternate children’s mental health measures (to replace ADHD medication measure)
- Identify additional young child measures
- Lower depression screening and SBIRT to ages 12+
- Replace early elective delivery with alternate maternal health measure

Next Steps

OHA staff will:

- Provide the Committee with December webinar details.
- Distribute a summary of CCO technology plans in February 2014.
- Invite Dana Hargunani, OHA’s Child Health Director, to speak at the February 2014 Committee meeting on maternal and child health measurement.

Public Testimony

Dr Christine Seals with the Umpqua Health Alliance brought up concerns around the timeliness of prenatal care measure and global billing codes, and deviation from HEDIS specifications.

No other public testimony was provided.

Next Meeting

December 13th 1-4 pm
Wilsonville