

Total Care General Population/Integrated Primary Care (TCGP/IPC) Task Force Sub-team Meeting #3

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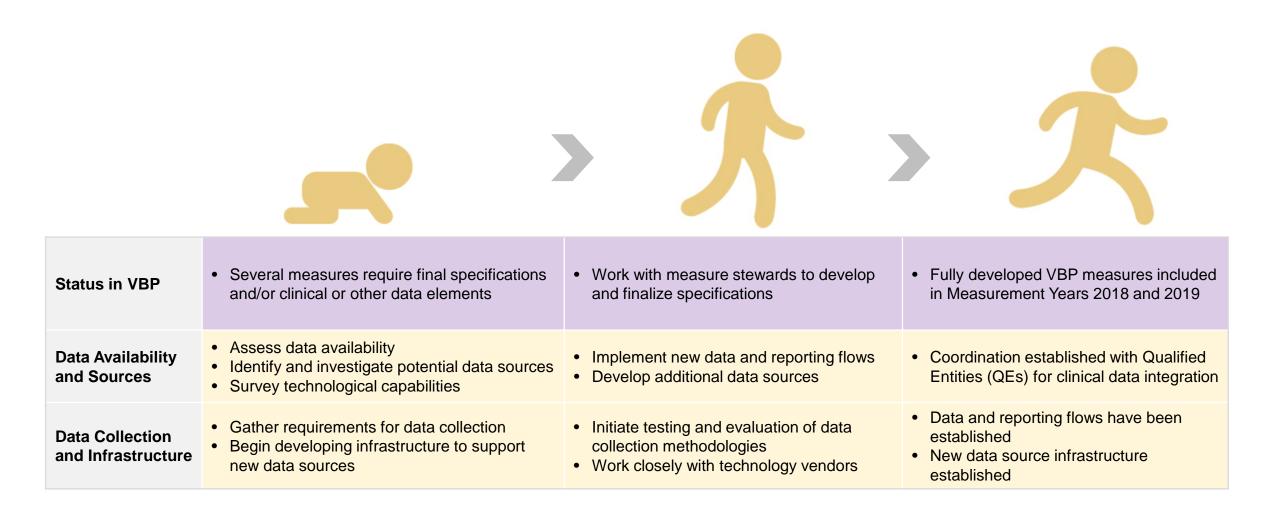
August 21, 2017

Agenda

- High-level Strategy Review
- Claims-based Measures
- "Crawl" Strategy Proposal for Non-claims Based Measures
- Non-claims Based TCGP/IPC Category 1 Measures in QARR
- Public Comment Period Reminder for Draft TCGP/IPC Measures
- Open Forum



VBP Measure Set Development: Crawl, Walk, Run!





Note: Timelines will vary. The intent is to make substantive contributions within each phase to help realize NYS VBP Roadmap goals.

Claims-based Category 1 Measures*: Interim Measure Collection Strategy

- Leverages the Advanced Primary Care Scorecard Data Collection request o Initial request made to plans on May 24, 2017
 - Aligns closely with QARR and TCGP/ IPC Quality Measure Sets
 - o Provide a modified version of NCQA's Patient Level Detail (PLD)
 - Adding provider/practice that the member was attributed to using your own plan's attribution methodology
 - o DOH to aggregate across plans for full VBP Contractor and Arrangement view
- State would require provider attribution file by VBP Arrangement

*Claims-based TCGP/IPC Category 1 measures listed in appendix (last slide)



Proposed Strategy for Non-claims based Measures as Part of the "Crawl" Step

- Based on the recent feedback from the Managed Care Organizations, a proposed interim solution for MY 2017 is to report non-claims based TCGP/IPC Category 1 measures that are in QARR using the Administrative specifications.
- Recommendation to include Category 1 non-claims based measures not currently part of QARR into QARR over a multi-year phase-in starting in 2018
 - To align with vendor process
 - To facilitate auditability



Non-claims Based TCGP/IPC Category 1 Measures in QARR

Non-claims Based QARR Measures	Admin Numerator	Admin Denominator	Admin Rate	Reported Rate
Cervical Cancer Screening	561,073	822,531	68	75
Childhood Immunization Status	61,462	88,676	69	74
Colorectal Cancer Screening				
Comprehensive Diabetes Care: All Three Tests				
Comprehensive Diabetes Care: Eye Exam (retinal) performed	95,556	185,798	51	64
Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Control (<8%)	52,019	185,798	28	56
Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%) Lower is better	122,354	185,798	66	33
Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) testing [performed]	166,241	185,798	89	91
Comprehensive Diabetes Care: Medical Attention for Nephropathy	169,760	185,798	91	92
Controlling High Blood Pressure	NA	NA	NA	NA
Weight Assessment and Counseling - BMI Percentile	350,673	1,166,427	30	77
Weight Assessment and Counseling - Counseling for Nutrition	279,149	1,166,427	24	80
Weight Assessment and Counseling - Counseling for Physical Activity	44,945	1,166,427	4	69



Public Comment: DRAFT TCGP/IPC Quality Measures (Category 1)

Control No.	. Proposed New Measure	Description	Arrangement Type(s)	Measure Classification	Catego ry
The percen	percentage of individuals who initiate pharmacotherapy with at least 1	TCGP/IPC	P4P	1	
1	1 Episode of Opioid Dependence prescription or visit for opioid treatment medication within 30 days fol	prescription or visit for opioid treatment medication within 30 days following	HARP	P4P	1
a	an index visit with a diagnosis of opioid abuse or dependence.	HIV/AIDS	P4P	1	
2 Initiation of Pharmacotherapy upon New Episode of Alcohol Abuse or Dependence	The percentage of individuals who initiate pharmacotherapy with at least 1 prescription for alcohol treatment medication within 30 days following an index visit with a diagnosis of alcohol abuse or dependence.	TCGP/IPC	P4R	1	
		HARP	P4R	1	
		HIV/AIDS	P4R	1	

The **Public Comment Period** is now open for these measures. Comments and questions specifically relating to the measures should be submitted in writing via the Public Comment Submission Form by September 11th to <u>vbp@health.ny.gov</u>. *Please see the MRT announcement email from August 11th.*

Note – MCOs are responsible for the IPC measures in HARP arrangements Additional comments can be submitted as part of the public comment period.



Open Forum

Are there any additional areas of concern that you have with respect to the new measures?

If you have additional questions, please contact the VBP mailbox: vbp@health.ny.gov



Meeting Schedule

• Upcoming meetings:

Please join us at the HIT Sub-team meeting this Thursday 4-5pm:
HIT Task Force Sub Team Meeting #3: 8/24 from 4:00 – 5:00
TCGP/IPC Task Force Sub Team Meeting #4: 9/26 from 9:00 – 10:00
TCGP/IPC Task Force Sub Team Meeting #5: 10/24 from 11:00 – 12:00

- Task Force General Meeting: 10/4 from 4:00 5:00
- Additional materials and meeting information will be sent out in the coming weeks.



Appendix: TCGP/IPC Category 1 Claims-based Measures

Claims Based Measures

QARR

Antidepressant Medication Management - Effective Acute Phase Treatment & Effective Continuation Phase Treatment Breast Cancer Screening

Breast Cancer Screening

Chlamydia Screening for Women

Diabetes Screening for People with Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications

Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET)

Medication Management for People With Asthma (ages 5 - 64) – 50 % and 75% of Treatment Days Covered

Statin Therapy for Patients with Cardiovascular Disease

Statin Therapy for Patients with Diabetes

Use of Spirometry Testing in the Assessment and Diagnosis of COPD

Non-QARR

Adherence to Mood Stabilizers for Individuals with Bipolar I Disorder

Initiation of Pharmacotherapy for Alcohol Dependence

Initiation of Pharmacotherapy for Opioid Use Disorder

Potentially Avoidable Complications in routine sick care or chronic care

