



**Department  
of Health**

Medicaid  
Redesign Team

# Total Care General Population/ Integrated Primary Care (TCGP/ IPC) Task Force Sub-team Meeting #4

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# Agenda

- Opening Remarks and Roll Call
- Changes to the 2017 VBP Quality Measure Sets for 2018
- Quality Measure Reporting Guidance for Measurement Year (MY) 2017
- Next Steps
- Appendix

# Opening Remarks and Roll Call

# Changes to the 2017 VBP Quality Measure Sets for 2018

# Children's Health CAG: Recommended Measures for Inclusion in the TCGP/IPC Measure Set

- The Children's Health CAG met between October 2016 and July 2017. During deliberations the committee discussed including care for the general pediatric population within the TCGP Arrangement.
- As a result, additional quality measures have been recommended for consideration to ensure that providers are striving to improve and achieve high performance for children under the TCGP VBP Arrangement.
  - Stakeholder Recommendation: **Add eight Category 1 measures and six Category 2 measures to the TCGP/ IPC VBP Quality Measure Set**

# TCGP/ IPC Arrangement Measure Set for 2018

- At the October 2017 VBP Workgroup meeting the committee approved 52 Category 1 and 2 quality measures (including both P4P and P4R Category 1 measures) for the 2018 TCGP/ IPC Quality Measure Set.
- The following recommended changes to the TCGP/ IPC VBP Quality Measure Set for 2018 are based on the feedback received by the DOH from the Clinical Advisory Groups, Measure Feasibility Task Force and Sub-teams, and from other stakeholder groups.
  - Stakeholder Recommendations:

Measure Disposition	Rationale for Change	Count
Change from Cat 1 to Cat 2	Measure demoted because timeframe for measurement is too narrow	1
Change from Cat 2 to Cat 1 P4R	Measure promoted because timeframe for measurement is sufficiently broad	1
Add to Cat 1	Recommended by Children's Health CAG	8
Add to Cat 2	Recommended by Children's Health CAG	6
Remove from Measure Set	Measure specification change	2
Unchanged between MY 2017 and MY 2018		36

- No additional recommended changes from VBP Workgroup on 10/2.

# Summary of Measure Set Changes from 2017 to 2018

## TCGP/ IPC

Measure Name	Measure Steward	NQF Measure Identifier	MY17 Classification	MY18 Classification	Rationale for Change
Adolescent immunization rate, including rate for HPV	NCQA	1407	-	Cat 1 P4P	Recommended by Children's Health CAG
Frequency of well-child visits during the first 15 months of life	NCQA	1392	-	Cat 1 P4P	Recommended by Children's Health CAG
Frequency of well-child visits, ages 3 to 6	NCQA	1516	-	Cat 1 P4P	Recommended by Children's Health CAG
PDI #14 asthma admission rate, ages 2 through 17 years	AHRQ		-	Cat 1 P4P	Recommended by Children's Health CAG
Adolescent well-care visit rate	NCQA		-	Cat 1 P4R	Recommended by Children's Health CAG
Assessment and counseling of adolescents on sexual activity, tobacco use, alcohol and drug use, depression (four-part measure)	NYS		-	Cat 1 P4R	Recommended by Children's Health CAG
Children ages 2-20 having annual dental visit	NYS		-	Cat 1 P4R	Recommended by Children's Health CAG
Follow-up care for children prescribed Rx for ADHD	NCQA	108	-	Cat 1 P4R	Recommended by Children's Health CAG
Use of Alcohol Abuse or Dependence Pharmacotherapy*	OASAS	Not endorsed	Cat 2	Cat 1 P4R	Measure promoted because timeframe for measurement is sufficiently broad

\* Measure name updated

**Acronyms:** NCQA: National Committee for Quality Assurance, AHRQ: Agency for Healthcare Research and Quality, OASAS: Office of Alcoholism and Substance Abuse Services

# Summary of Measure Set Changes from 2017 to 2018 (cont.)

## TCGP/ IPC

Measure Name	Measure Steward	NQF Measure Identifier	MY17 Classification	MY18 Classification	Rationale for Change
Developmental screening using standardized tool, first 36 months of life	Oregon Health & Science University	1448	-	Cat 2	Recommended by Children's Health CAG
Follow-up after ED visit for alcohol and other drug dependence, ages 13 and older	NCQA		-	Cat 2	Recommended by Children's Health CAG
Follow-up after ED visit for mental illness, ages 6 and older	NCQA		-	Cat 2	Recommended by Children's Health CAG
Initiation of Pharmacotherapy upon New Episode of Alcohol Abuse or Dependence*	OASAS	Not endorsed	Cat 1 P4R	Cat 2	Measure demoted because timeframe for measurement is too narrow
Maternal depression screen done during child's first 6 months of life	NCQA		-	Cat 2	Recommended by Children's Health CAG
Screening for Reduced Visual Acuity and Referral in Children (NQF 2721—approved for trial use)	CMS	2721	-	Cat 2	Recommended by Children's Health CAG
Use of first-line psychosocial care for children and adolescents on antipsychotics	NCQA	2801	-	Cat 2	Recommended by Children's Health CAG
Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis	NCQA	58	Cat 2	Remove from Measure Set	Measure specification change
Use of Imaging Studies for Low Back Pain	NCQA	52	Cat 2	Remove from Measure Set	Measure specification change

\* Measure name updated

**Acronyms:** NCQA: National Committee for Quality Assurance, OASAS: Office of Alcoholism and Substance Abuse Services, CMS: Centers for Medicare and Medicaid Services



# Quality Measure Reporting Guidance for MY 2017

# Measure Reporting Guidance

## Timing of VBP Measure List vs. VBP Reporting Guidance

	VBP Measure List Released	VBP Reporting Guidance Released	VBP Data Collected
MY 2017	Spring 2017	Fall 2017	Summer 2018
MY 2018	Fall 2017	Fall 2018	Summer 2019
MY 2019	Fall 2018	Fall 2019	Summer 2020

# MY 2017 Measure Reporting Guidance

- Category 1 Measures: VBP Pilots will be required to report all Category 1 measure data that the DOH has defined as reportable for MY 2017.
  - This will be a subset of the complete Category 1 measure set.
  - VBP Contractors: This will require no additional effort to satisfy reporting requirements.
  - MCOs: The Office of Quality and Patient Safety (OQPS) will be requesting attribution files from plans per VBP Arrangement to satisfy reporting requirements.
- Category 2 Measures: Plans and Providers **will not be required** to report any Category 2 measure data for MY 2017. Only **one** Category 2 measure will be required to be reported in MY 2018.
  - For Plans and Providers: OQPS will be working closely with Pilots to create the infrastructure to address the implementation of measures with additional feasibility challenges beginning in January 2018.
- Details on MY 2017 Reporting Guidance to be provided by the end of October 2017.
- **Reporting Guidance may change from initial VBP Reporting Measure Guidance**

# MY 2017 VBP Pilots Quality Measure Reporting Guidance

## Category 1: Required to Report for MY 2017

Measure Name	Steward/ Program	MY17 Classification
Antidepressant Medication Management – Effective Acute Phase Treatment & Effective Continuation Phase Treatment	QARR	P4P
Breast Cancer Screening	QARR	P4P
Cervical Cancer Screening	QARR	P4P
Childhood Immunization Status	QARR	P4P
Chlamydia Screening for Women	QARR	P4P
Colorectal Cancer Screening	QARR	P4P
Comprehensive Diabetes Care: All Three Tests (HbA1c, dilated eye exam, and medical attention for nephropathy)	QARR	P4P
Comprehensive Diabetes Care: Eye Exam (retinal) Performed	QARR	P4P
Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Control (<8.0%)	QARR	P4R
Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%)	QARR	P4P
Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) testing [performed]	QARR	P4P
Comprehensive Diabetes Care: Medical Attention for Nephropathy	QARR	P4P
Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications	QARR	P4P
Initiation and Engagement of Alcohol and other Drug Dependence Treatment (IET)	QARR	P4P
Initiation of Pharmacotherapy upon New Episode of Opioid Dependence	OASAS	P4P
Medication Management for People With Asthma (ages 5 – 64) – 50 % and 75% of Treatment Days Covered	QARR	P4P
Statin Therapy for Patients with Cardiovascular Disease	QARR	P4R
Statin Therapy for Patients with Diabetes	QARR	P4R
Use of spirometry testing in the assessment and diagnosis of COPD	QARR	P4R
Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents	QARR	P4P

# MY 2017 VBP Pilots Quality Measure Reporting Guidance

Category 1: **NOT** Required to Report for MY 2017

Measure Name	Steward/ Program	MY17 Classification
Adherence to Mood Stabilizers for Individuals with Bipolar I Disorder	CMS	P4P
Comprehensive Diabetes Care: Foot Exam	NCQA	P4R
Controlling High Blood Pressure	QARR	P4P
Initiation of Pharmacotherapy upon New Episode of Alcohol Abuse or Dependence*	OASAS	P4R
Potentially Avoidable Complications in routine sick care or chronic care	Altarum	P4R
Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow – Up Plan	APC	P4R
Preventive Care and Screening: Influenza Immunization	APC	P4R
Preventive Care and Screening: Screening for Clinical Depression and Follow–Up Plan	APC	P4R
Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	APC	P4R

# Measure Reporting Guidance for 2018: Attribution Files

- In order to create aggregated quality results *by VBP contractor*, the State will be requesting that Plans submit a modified version of NCQA's Patient Level Detail (PLD) file and/ or a separate Patient Attribution file\* along with provider and practice information.
  - Submission of the Advanced Primary Care (APC) Scorecard file\* will fulfill the PLD reporting requirement.
- The table below outlines the requirements for each arrangement:

VBP Arrangement	Required Attribution File(s)
TCGP/ IPC	APC Scorecard file
Maternity	Patient Attribution file
HARP	APC Scorecard file, Patient Attribution file
HIV/AIDS	APC Scorecard file, Patient Attribution file
MLTC	Patient Attribution file

\* The State will be publishing further guidance regarding these file formats later in October.

# Advanced Primary Care Scorecard Data File Use in VBP

- Leverages the Advanced Primary Care Scorecard Data Collection request:
  - Provide a modified version of NCQA's Patient Level Detail (PLD)
  - Add provider/ practice that the member was attributed to using the Plan's attribution methodology
- DOH will aggregate information across plans for full VBP Contractor and Arrangement view.
- Two options for reporting:
  - a) Should DOH add new columns to existing layout, or
  - b) Create separate VBP reporting file?

# Reporting Guidance: Patient Attribution File

## Attribution Methodology:

- **Maternity:** Include the provider/practice that was attributed to the member using your own plan's attribution methodology for all members included in the 2018 QARR Live Birth File.
- **HARP:** Include the provider/practice that was attributed to the member using your own plan's attribution methodology for all members included in the 2018 NCQA PLD File and NYS PLD file.
- **HIV/AIDS:** Include the provider/practice that was attributed to the member using your own plan's attribution methodology for all members included in the 2018 NCQA PLD File and NYS PLD file.



# Reporting Guidance: Provider Information

- The State intends to limit the reporting burdens for providers when submitting supplemental files for VBP. Therefore, the State is requesting the following:

## Required fields:

- Practice Tax ID#
- Physician NPI

## Optional Fields:

- PCMH Site ID#
- Practice Site ID#

# Next Steps

# Next Steps

- 2018 Quality Measure Guidance and Reporting:
  - 10/27/17 – VBP Workgroup Meeting
  - 10/31/17 – 2018 Official Reporting Requirements Released
- Upcoming Measure Feasibility Task Force Meetings:
  - November Sub-team Meetings – TBD, last two weeks in the month
  - 12/7/17 – Measure Feasibility General Task Force Meeting #4

# Thank you!

*Please send questions and feedback to:*

[vbp@health.ny.gov](mailto:vbp@health.ny.gov)

# Appendix

# TCGP/ IPC VBP Quality Measure Set (1/4)

## Category 1

Measure Name	Measure Steward	NQF Measure Identifier	Classification	Rationale for Change
Adherence to Mood Stabilizers for Individuals with Bipolar I Disorder	CMS	1880	Cat 1 P4P	
<b>Adolescent immunization rate, including rate for HPV</b>	<b>NCQA</b>	<b>1407</b>	<b>Cat 1 P4P</b>	<b>Recommended by Children's Health CAG</b>
<b>Adolescent well-care visit rate</b>	<b>NCQA</b>		<b>Cat 1 P4R</b>	<b>Recommended by Children's Health CAG</b>
Antidepressant Medication Management - Effective Acute Phase Treatment & Effective Continuation Phase Treatment	NCQA	105	Cat 1 P4P	
<b>Assessment and counseling of adolescents on sexual activity, tobacco use, alcohol and drug use, depression (four-part measure)</b>	<b>NYS</b>		<b>Cat 1 P4R</b>	<b>Recommended by Children's Health CAG</b>
Breast Cancer Screening	NCQA	2372	Cat 1 P4P	
Cervical Cancer Screening	NCQA	32	Cat 1 P4P	
Childhood Immunization Status	NCQA	38	Cat 1 P4P	
<b>Children ages 2-20 having annual dental visit</b>	<b>NYS</b>		<b>Cat 1 P4R</b>	<b>Recommended by Children's Health CAG</b>
Chlamydia Screening for Women	NCQA	33	Cat 1 P4P	
Colorectal Cancer Screening	NCQA	34	Cat 1 P4P	

**Bold:** Indicates measures recommended by Children's Health CAG; **Red:** Indicates proposed change to measure  
 Acronyms: CMS: Centers for Medicare and Medicaid Services, NCQA: National Committee for Quality Assurance

# TCGP/ IPC VBP Quality Measure Set (2/4)

## Category 1

Measure Name	Measure Steward	NQF Measure Identifier	Classification	Rationale for Change
Comprehensive Diabetes Care: Eye Exam (retinal) Performed	NCQA	55	Cat 1 P4P	
Comprehensive Diabetes Care: Foot Exam	NCQA	56	Cat 1 P4R	
Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Control (<8.0%)	NCQA	575	Cat 1 P4R	
Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%)	NCQA	59	Cat 1 P4P	
Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) testing [performed]	NCQA	57	Cat 1 P4P	
Comprehensive Diabetes Care: Medical Attention for Nephropathy	NCQA	62	Cat 1 P4P	
Comprehensive Diabetes Screening: All Three Tests (HbA1c, dilated eye exam, and medical attention for nephropathy)	AHRQ	Composite Scoring Measure not endorsed, but includes 0055, 0062, and 0057	Cat 1 P4P	
Controlling High Blood Pressure	NCQA	18	Cat 1 P4P	
Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications	NCQA	1932	Cat 1 P4P	
<b>Follow-up care for children prescribed Rx for ADHD</b>	<b>NCQA</b>	<b>108</b>	<b>Cat 1 P4R</b>	<b>Recommended by Children's Health CAG</b>
<b>Frequency of well-child visits during the first 15 months of life</b>	<b>NCQA</b>	<b>1392</b>	<b>Cat 1 P4P</b>	<b>Recommended by Children's Health CAG</b>

**Bold:** Indicates measures recommended by Children's Health CAG; **Red:** Indicates proposed change to measure  
 Acronyms: NCQA: National Committee for Quality Assurance, AHRQ: Agency for Healthcare Research and Quality

# TCGP/ IPC VBP Quality Measure Set (3/4)

## Category 1

Measure Name	Measure Steward	NQF Measure Identifier	Classification	Rationale for Change
<b>Frequency of well-child visits, ages 3 to 6</b>	<b>NCQA</b>	<b>1516</b>	<b>Cat 1 P4P</b>	<b>Recommended by Children's Health CAG</b>
Initiation and Engagement of Alcohol and other Drug Dependence Treatment (IET)	NCQA	4	Cat 1 P4P	
<b>Initiation of Pharmacotherapy upon New Episode of Alcohol Abuse or Dependence*</b>	<b>OASAS</b>	<b>Not endorsed</b>	<b>Cat 1 P4R Cat 2</b>	<b>Measure demoted because timeframe for measurement is too narrow</b>
Initiation of Pharmacotherapy upon New Episode of Opioid Dependence*	OASAS	Not endorsed	Cat 1 P4P	
Medication Management for Patients with Asthma	NCQA	1799	Cat 1 P4P	
<b>PDI #14 asthma admission rate, ages 2 through 17 years</b>	<b>AHRQ</b>		<b>Cat 1 P4P</b>	<b>Recommended by Children's Health CAG</b>
Potentially Avoidable Complications (PAC) in Routine Sick Care or Chronic Care	Altarum	Not endorsed	Cat 1 P4R	
Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan	CMS	421	Cat 1 P4R	
Preventive Care and Screening: Influenza Immunization	AMA PCPI	41	Cat 1 P4R	
Preventive Care and Screening: Screening for Clinical Depression and Follow-Up Plan	CMS	418	Cat 1 P4R	
Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	AMA PCPI	28	Cat 1 P4R	

\* Measure name updated.

**Bold:** Indicates measures recommended by Children's Health CAG; **Red:** Indicates proposed change to measure

Acronyms: NCQA: National Committee for Quality Assurance, OASAS: Office of Alcoholism and Substance Abuse Services, AHRQ: Agency for Healthcare Research and Quality, CMS: Centers for Medicare and Medicaid Services, AMA: American Medical Association, PCPC: Physician Consortium for Performance Improvement



# TCGP/ IPC VBP Quality Measure Set (4/4)

## Category 1

Measure Name	Measure Steward	NQF Measure Identifier	Classification	Rationale for Change
Statin Therapy for Patients with Cardiovascular Disease	NCQA	Not endorsed	Cat 1 P4R	
Statin Therapy for Patients with Diabetes	NCQA	Not endorsed	Cat 1 P4R	
Use of Spirometry Testing in the Assessment and Diagnosis of COPD	NCQA	577	Cat 1 P4R	
Use of Alcohol Abuse or Dependence Pharmacotherapy*	OASAS	Not endorsed	<del>Cat 2</del> Cat 1 P4R	Measure promoted because timeframe for measurement is sufficiently broad
Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents	NCQA	24	Cat 1 P4P	

\* Measure name updated.

**Bold:** Indicates measures recommended by Children's Health CAG; **Red:** Indicates proposed change to measure  
 Acronyms: NCQA: National Committee for Quality Assurance; OASAS: Office of Alcoholism and Substance Abuse Services

# TCGP/ IPC VBP Quality Measure Set (1/2)

## Category 2

Measure Name	Measure Steward	NQF Measure Identifier	Classification	Rationale for Change
Asthma: Assessment of Asthma Control – Ambulatory Care Setting	AAAAI	Not endorsed	Cat 2	
Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis	NCQA	58	<del>Cat 2</del> Remove from Measure Set	Measure specification change
Continuing Engagement in Treatment (CET) Alcohol and other Drug Dependence	OASAS	Not endorsed	Cat 2	
Continuity of Care from Inpatient Detox or Inpatient Care to Lower Level of Care*	OASAS	Not endorsed	Cat 2	
<b>Developmental screening using standardized tool, first 36 months of life</b>	<b>Oregon Health &amp; Science University</b>	<b>1448</b>	<b>Cat 2</b>	<b>Recommended by Children's Health CAG</b>
<b>Follow-up after ED visit for alcohol and other drug dependence, ages 13 and older</b>	<b>NCQA</b>		<b>Cat 2</b>	<b>Recommended by Children's Health CAG</b>
<b>Follow-up after ED visit for mental illness, ages 6 and older</b>	<b>NCQA</b>		<b>Cat 2</b>	<b>Recommended by Children's Health CAG</b>
Home Management Plan of Care (HMPC) Document Given to Patient/Caregiver (process)	TJC	338	Cat 2	
Initiation of Pharmacotherapy upon New Episode of Alcohol Abuse or Dependence*	OASAS	Not endorsed	<del>Cat 1-P4R</del> Cat 2	Measure demoted because timeframe for measurement is too narrow
Lung Function/Spirometry Evaluation (asthma)	AAAAI	Not endorsed	Cat 2	
<b>Maternal depression screen done during child's first 6 months of life</b>	<b>NCQA</b>		<b>Cat 2</b>	<b>Recommended by Children's Health CAG</b>

\* Measure name updated.

**Bold:** Indicates measures recommended by Children's Health CAG; **Red:** Indicates proposed change to measure

Acronyms: AAAAI: American Academy of Allergy, Asthma, and Immunology, NCQA: National Committee for Quality Assurance, OASAS: Office of Alcoholism and Substance Abuse Services, TJC: The Joint Commission

# TCGP/ IPC VBP Quality Measure Set (2/2)

## Category 2

Measure Name	Measure Steward	NQF Measure Identifier	Classification	Rationale for Change
Patient Self-Management and Action Plan (Asthma)	AAAAI	Not endorsed	Cat 2	
<b>Screening for Reduced Visual Acuity and Referral in Children (NQF 2721—approved for trial use)</b>	<b>CMS</b>	<b>2721</b>	<b>Cat 2</b>	<b>Recommended by Children's Health CAG</b>
Topical Fluoride for Children at Elevated Caries Risk, Dental Services	ADA	2528	Cat 2	
<b>Use of first-line psychosocial care for children and adolescents on antipsychotics</b>	<b>NCQA</b>	<b>2801</b>	<b>Cat 2</b>	<b>Recommended by Children's Health CAG</b>
Use of Imaging Studies for Low Back Pain	NCQA	52	<del>Cat 2</del> Remove from Measure Set	Measure specification change
Use of Alcohol Abuse or Dependence Pharmacotherapy	OASAS	Not endorsed	<del>Cat 2</del> Cat 1 P4R	Measure promoted because timeframe for measurement is sufficiently broad
Utilization of Opioid Dependence Pharmacotherapy	OASAS	Not endorsed	Cat 2	

**Bold:** Indicates measures recommended by Children's Health CAG; **Red:** Indicates proposed change to measure

Acronyms: AAAAI: American Academy of Allergy, Asthma, and Immunology, CMS: Centers for Medicare and Medicaid Services, ADA: American Dental Association, NCQA: National Committee for Quality Assurance, OASAS: Office of Alcoholism and Substance Abuse Services

