

# Integrated Primary Care (IPC)

Value Based Payment Quality Measure Set Measurement Year 2020

January 30, 2020

NYS Medicaid Value Based Payment



#### INTRODUCTION

The Measurement Year (MY) 2020 Integrated Primary Care (IPC) Quality Measure Set was created in collaboration with the Primary Care (Physical Health), Maternity Care, Behavioral Health/HARP, and Children's Health Clinical Advisory Groups (CAGs), as well as the New York State (NYS) Value Based Payment (VBP) Workgroup. The goal of this measure set is to align with measures sets put forth in the Advanced Primary Care initiative by the Integrated Care Workgroup, the Delivery System Reform Incentive Payment (DSRIP) Program, the Quality Assurance Reporting Requirements (QARR), and the Merit-based Incentive Payment System (MIPS), where applicable. The Measure Set is designed to encourage providers to meet high standards of patient-centered clinical care and coordination across multiple care settings through preventive care, sick care, and priority chronic condition episodes.

Historically, the VBP Quality Measure Sets for IPC and TCGP (Total Care for General Population) have been the same. Based on recommendations from the Maternity Care and Physical Health CAGs to add maternity-specific measures to the TCGP Quality Measure Set to better reflect the inclusion of maternity care in TCGP arrangements, for MY2019 they were separated into distinct measure sets.

#### MEASURE SELECTION AND FEASIBILITY

During the spring and summer of 2019, the Physical Health, Maternity Care, HIV/AIDS, Behavioral Health/HARP, and Children's Health CAGs reconvened and made recommendations to the State on quality measures, data collection, data reporting, and support required for providers to be successful in a VBP environment.

Beginning in June of 2017, the State initiated regular meetings of the VBP Measure Support Task Force. The goal of the Task Force is to make recommendations to the State to support and inform during the Annual Measure Review Cycle. Members of the Task Force include professionals from various Managed Care Organizations (MCOs), VBP Pilot Contractors, Clinical Subject Matter Experts, and State Agencies, along with other professionals who have experience in quality measurement and health information technology. The Task Force provides feedback to the Department of Health (DOH) on quality measure feasibility, reporting, and calculation.

Upon receiving the CAG recommendations and Task Force feedback, the State defined a final list of measures for inclusion for MY2020. For MY 2020, 3 measures have been removed, 2 measures have been added, and 1 measure changed categories; culminating in a total of 49 Category 1 and 2 IPC Quality Measures.



#### 2020 VBP IPC Quality Measure Set

#### **MEASURE CLASSIFICATION**

Each measure has been designated by the State as Category 1, 2, or 3 with associated recommendations for implementation and testing for future use in VBP Arrangements. The measures on the following pages are classified by category based on an assessment of reliability, validity, and feasibility, and according to suggested method of use (either Pay for Reporting (P4R) or Pay for Performance (P4P)).

#### Category 1

Category 1 quality measures as identified by the



CAGs and accepted and deemed reportable by the State are to be reported by VBP Contractors to the MCOs. These measures are also intended to be used to determine the amount of shared savings for which VBP contractors are eligible.<sup>1</sup> At least one Category 1 P4P measure must be included in a VBP contract.

The State classified each Category 1 measure as either P4P or P4R:

- **P4P** measures are intended to be used in the determination of shared savings amounts for which VBP Contractors are eligible. In other words, these are the measures on which payments in VBP contracts may be based. Measures can be included in both the determination of the target budget and in the calculation of shared savings for VBP Contractors.
- P4R measures are intended to be used by the Managed Care Organizations (MCOs) to incentivize VBP Contractors for reporting data to monitor quality of care delivered to members under a VBP contract. Incentives for reporting should be based on timeliness, accuracy, and completeness of data. Measures can be reclassified from P4R to P4P or vice versa through annual CAG and State review or as determined by the MCO and VBP Contractor.

Not all Category 1 measures will be reportable for the measurement year, as reporting on some of these measures will be phased in over the next few years. Please refer to the *Value Based Payment Reporting Requirements Technical Specifications Manual* (MY2020) for details as to which measures must be reported for the measurement year. This manual will be updated annually each fall, in line with the release of the final VBP measure sets for the subsequent year.

<sup>&</sup>lt;sup>1</sup> New York State Department of Health, Medicaid Redesign Team, A Path Toward Value Based Payment: Annual Update, *September 2019*. (Link)



#### Categories 2 and 3

Category 2 measures have been accepted by the State based on agreement of clinical importance, validity, and reliability, but flagged as presenting concerns regarding implementation feasibility. These measures will be further investigated in the VBP Pilots. The State required that VBP Pilots select and report a minimum of one Category 2 measure per VBP Arrangement for MY 2019 (or have a State and Plan approved alternative). VBP Pilot participants will be expected to share meaningful feedback on the feasibility of Category 2 measures when the CAGs reconvene. VBP Pilot participants will be expected to share meaningful feedback on the feasibility of Category 2 measures determined to share meaningful feedback on the feasibility of Category 2 measures when the CAGs reconvene. The State has discussed measure testing approaches, data collection, and reporting requirements with VBP Pilots as a part of the Measure Support Task Force.

Measures designated as Category 3 were identified as unfeasible at this time or as presenting additional concerns including accuracy or reliability when applied to the attributed member population for an arrangement, therefore Category 3 measures are not included in the measure set.

#### MY2020 IPC QUALITY MEASURE SET

The measures and State-determined classifications provided on the following pages are recommendations for MY 2020. Note that measure classification is a State recommendation and implementation is to be determined between the MCO and VBP Contractor.

Measure sets and classifications are considered dynamic and will be reviewed annually. Updates will include measure additions, deletions, recategorizations, and/or reclassifications from P4R to P4P, based on experience with measure implementation in the prior year. During 2020, the CAGs and the VBP Workgroup will re-evaluate measures and provide recommendations for MY 2021. Please see <u>Appendix A</u> for a full list of these changes.

Note: Additional changes have been made to the names for some of the measures presented below to ensure alignment with the naming conventions used by the official measure steward. There have not been any changes to the measure specifications associated with these name changes



#### **CATEGORY 1**

The table below displays the Category 1 MY 2020 IPC Quality Measure Set, arranged alphabetically, and includes measure title, measure steward, the National Quality Forum (NQF) number and/or other measure identifier (where applicable), and State-recommended classification for measure use. The measure set is redlined to highlight changes made between MY 2019 and MY 2020. Additions are made in red text while deletions are made in red text with a strikethrough.

IPC Measures	Measure Steward	Measure Identifier	Classification
Adherence to Mood Stabilizers for Individuals with Bipolar I Disorder	Centers for Medicare & Medicaid Services (CMS)	NQF 1880	P4P
Adolescent Preventive Care Measures	NYS	-	P4R
Adolescent Well-Care Visits	National Committee for Quality Assurance (NCQA)	-	P4R
Annual Dental Visit	NCQA	NQF 1388	P4R
Antidepressant Medication Management - Effective Acute Phase Treatment & Effective Continuation Phase Treatment	NCQA	NQF 0105	P4P
Asthma Admission Rate - PDI #14	AHRQ	NQF 0728	P4P
Asthma Medication Ratio	NCQA	NQF 1800	P4P
Breast Cancer Screening	NCQA	NQF 2372	P4P
Cervical Cancer Screening	NCQA	NQF 0032	P4P



IPC Measures	Measure Steward	Measure Identifier	Classification
Childhood Immunization Status – Combination 3	NCQA	NQF 0038	P4P
Chlamydia Screening in Women	NCQA	NQF 0033	P4P
Colorectal Cancer Screening	NCQA	NQF 0034	P4P
Comprehensive Diabetes Care: Eye Exam (retinal) Performed	NCQA	NQF 0055	P4P
Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%)	NCQA	NQF 0059	P4P
Comprehensive Diabetes Care: Medical Attention for Nephropathy	NCQA	NQF 0062	P4P
Controlling High Blood Pressure	NCQA	NQF 0018	P4P
Depression Remission or Response for Adolescents and Adults	NCQA		P4P
Diabetes Screening for People with Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications	NCQA	NQF 1932	P4P
Follow-Up Care for Children Prescribed ADHD Medication	NCQA	NQF 0108	P4R
Immunizations for Adolescents – Combination 2	NCQA	NQF 1407	P4P



IPC Measures	Measure Steward	Measure Identifier	Classification
Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment	NCQA	NQF 0004	P4P
Initiation of Pharmacotherapy upon New Episode of Opioid Dependence	NYS	-	P4P
Medication Management for People with Asthma	NCQA	NQF 1799	P4P
Potentially Avoidable Complications in Routine Sick Care or Chronic Care	Altarum Institute	-	P4R
Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan	CMS	NQF 0421	P4R
Preventive Care and Screening: Influenza Immunization	American Medical Association Physician Consortium for Performance Improvement (AMA PCPI)	NQF 0041	P4R
Preventive Care and Screening: Screening for Clinical Depression and Follow-Up Plan	CMS	NQF 0418	P4R
Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	AMA PCPI	NQF 0028	P4R
Statin Therapy for Patients with Cardiovascular Disease	NCQA	-	P4R
Use of Pharmacotherapy for Alcohol Abuse or Dependence	NYS	-	P4R
Use of Spirometry Testing in the Assessment and Diagnosis of COPD	NCQA	NQF 0577	P4R



IPC Measures	Measure Steward	Measure Identifier	Classification
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents	NCQA	NQF 0024	P4R
Well-Child Visits in the First 15 Months of Life	NCQA	NQF 1392	P4P
Well-Child Visits in the Third, Fourth, Fifth, and Sixth Year of Life	NCQA	NQF 1516	P4P



### Category 2

The table below displays the Category 2 MY 2020 IPC Quality Measure Set and includes measure title, measure steward, and the NQF number and/or other measure identifier (where applicable). All Category 2 measures are classified as P4R in MY 2020. The measure set is redlined to highlight changes made between MY 2018 and MY 2020. Additions and changes are made in red text while deletions, replaced, reclassified, or recategorized are made with a strikethrough.

IPC Measures	Measure Steward	Measure Identifier
Asthma Action Plan	American Academy of Allergy, Asthma & Immunology (AAAAI)	-
Asthma: Assessment of Asthma Control – Ambulatory Care Setting	ΑΑΑΑΙ	-
Asthma: Spirometry Evaluation	ΑΑΑΑΙ	-
Continuing Engagement in Treatment (CET) Alcohol and other Drug Dependence	NYS	-
Continuity of Care from Inpatient Detox to Lower Level of Care	NYS	-
Continuity of Care from Inpatient Rehabilitation for Alcohol and Other Drug Abuse or Dependence Treatment to Lower Level of Care	NYS	-
Depression Remission or Response for Adolescents and Adults*	TBD	-
Developmental Screening in the First Three Years of Life	Oregon Health & Science University	NQF 1448
Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence	NCQA	-
Follow-Up After Emergency Department Visit for Mental Illness	NCQA	NQF 2605
Follow-Up After High-Intensity Care for Substance Use Disorder	NCQA	



IPC Measures	Measure Steward	Measure Identifier
Home Management Plan of Care (HMPC) Document Given to Patient/Caregiver	The Joint Commission (TJC)	NQF 0338
Initiation of Pharmacotherapy upon New Episode of Alcohol Abuse or Dependence	NYS	-
Maternal Depression Screening	NCQA	NQF 1401
Pharmacotherapy for Opioid Use Disorder	NCQA	NQF 3175
Screening for Reduced Visual Acuity and Referral in Children	CMS	NQF 2721
Topical Fluoride for Children at Elevated Caries Risk, Dental Services	American Dental Association (ADA)	NQF 2528
Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics	NCQA	NQF 2801
<del>Use of Opioid Dependence</del> <del>Pharmacotherapy</del>	NYS	-



2020 VBP IPC Quality Measure Set

## **Appendix A**



The tables below identify the changes to the Category 1 and Category 2 measures for the MY 2020 IPC Quality Measure Set.

#### Category 1 Measure Changes from 2018 to 2020

Measure Name	Change	Rationale for Change
Depression Remission or Response for Adolescents and Adults	Measure moved to Category 1 from Category 2	Align with VBP Roadmap changes
Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents	Classification change from P4P to P4R	Recommendation of CAG and Task Force

#### Category 2 Measure Changes from 2018 to 2020

Measure Name	Change	Rationale for Change
Continuity of Care from Inpatient Detox to Lower Level of Care	Removed	Replaced with NCQA measure
Continuity of Care from Inpatient Rehabilitation for Alcohol and Other Drug Abuse or Dependence Treatment to Lower Level of Care	Removed	Replaced with NCQA measure
Depression Remission or Response for Adolescents and Adults	Measure moved from Category 2 to Category 1	Align with VBP Roadmap changes
Follow-Up After High-Intensity Care for Substance Use Disorder	Added	Replaced previous measure
Initiation of Pharmacotherapy upon New Episode of Alcohol Abuse or Dependence	Removed	Replaced with NCQA measure
Pharmacotherapy for Opioid Use Disorder	Added	Replaced previous measure
Use of Opioid Dependence Pharmacotherapy	Removed	Replaced by measure from NCQA