# Oregon Health Authority Metrics and Key Performance Measures

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# **CCO Performance OHA Accountability & CCO Incentives**

### **State Performance Measures**

- Annual assessment of statewide performance on 33 measures.
- Financial penalties to the state if quality goals are not achieved.

#### **CCO Incentive Measures**

- Annual assessment of CCO performance on 17 measures.
- Quality pool paid to CCOs for performance.
- Compare current performance against prior baseline year and national benchmarks.





### **CCO Performance**

### **Quality Pool: Metrics and Scoring Committee**

- 2012 Senate Bill 1580 establishes committee
- Nine members serve an initial two-year term and can serve up to four years total. Must include:
  - 3 members at large;
  - 3 members with expertise in health outcome measures
  - 3 representatives of CCOs
- Committee uses public process to identify objective outcome and quality measures and benchmarks



### **Oregon Health Authority Quality & Accountability**

### **OHA Key Performance Measures (KPMs)**

- Annual legislative report
- Measure both Medicaid and overall state populations



#### **CCO Incentive Measures**

- Annual assessment of CCO performance on 17 measures.
- Quality pool paid to CCOs for performance.
- Compare 2014 performance to 2013 and 2011 baseline.



#### **Core Performance Measures**

- Included in Oregon's 1115 demonstration waiver some focus on population health
- There are no financial incentives or penalties associated with them



#### **State Performance Measures**

- Annual assessment of statewide performance on 33 measures.
- Financial penalties to the state if quality goals are not achieved.



### **2015 Quality Pool Distribution**

To earn their full quality pool payment, CCOs had to:

- ✓ Meet the benchmark or improvement target on at least 12 of the 17 measures (including EHR adoption); and
- ✓ Have at least 60 percent of their members enrolled in a patient-centered primary care home (PCPCH).

Money left over from quality pool went to the challenge pool. To earn challenge pool payments, CCOs had to:

✓ Meet the benchmark or improvement target on the four challenge pool measures: depression screening, diabetes HbA1c control, SBIRT, and PCPCH enrollment.



# **Key Performance Measures and Metrics Summary**

OHA has 31 KPMs that are tracked yearly.

Include metrics for both Medicaid and entire state populations

CCOs are measured on 57 different metrics including 17 incentive measures that are tied for funding.

14 metrics are tied to OHA KPM's

OHA provides quarterly CCO metrics report, include metrics in quarterly legislative report, annual State Health Improvement Plan report, annual KPM report to Legislature.

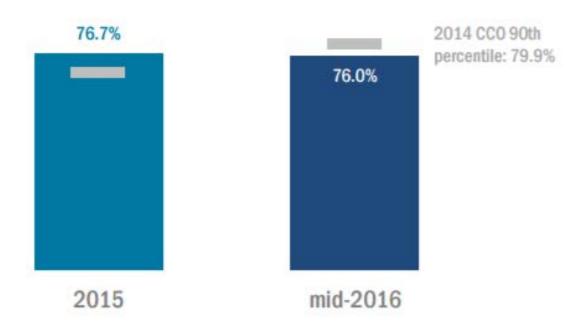


# KPM: Follow-Up After Hospitalization for Mental Illness (\$)

### Follow-up after hospitalization for mental illness, statewide.

Data source: Administrative (billing) claims

2015 results have been recalculated according to updated measure specifications and differ from previouslypublished reports; these results are not directly comparable to earlier reports.



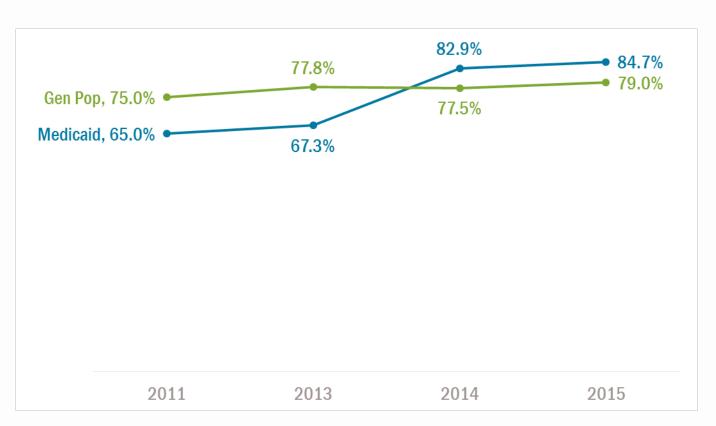


## **KPM: Prenatal Care** §





# Prenatal care in the first three months of pregnancy: General population and Medicaid



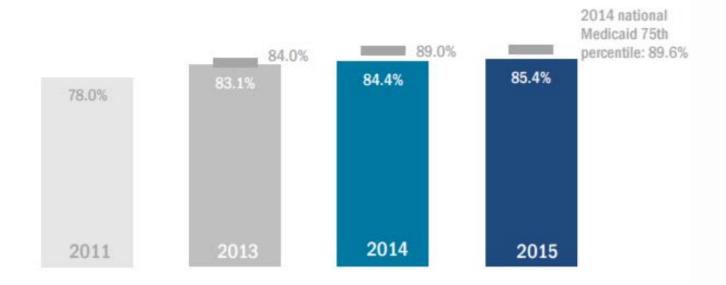
General population data from birth certificates; Medicaid data from administrative claims.



# KPM: Member Experience of Care (Medicaid)

### Statwide, satisfaction with care increased slightly in 2015.

Data source: Consumer Assessment of Healthcare Providers and Systems (CAHPS)



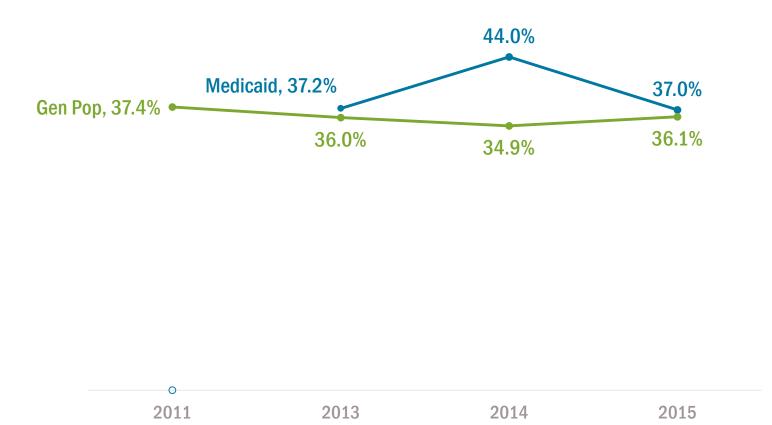
Satisfaction with care among children and adults, statewide.

Data source: Consumer Assessment of Healthcare Providers and Systems (CAHPS)



### **KPM: Flu Shots**

# Flu shots for adults ages 50-64: General population and Medicaid



**Data from Behavioral Risk Factor Surveillance System** 



## **KPM:** Rate of Obesity



### **Obesity: General population and Medicaid**



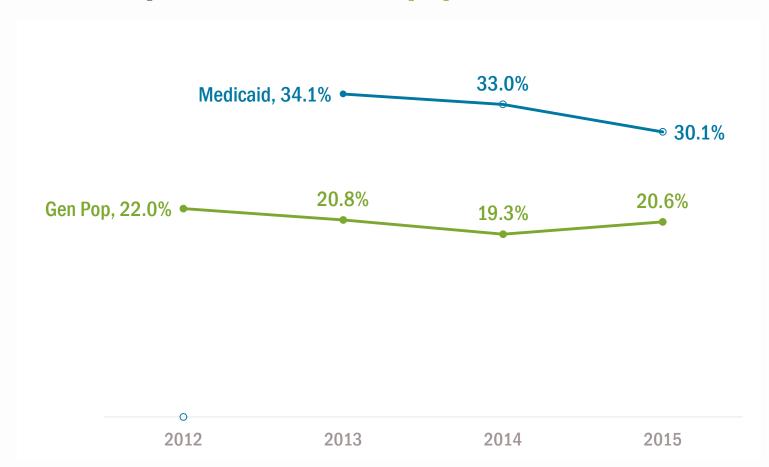
**Data from Behavioral Risk Factor Surveillance System** 



# **KPM:** Rate of Tobacco Use



### Use tobacco products: General population and Medicaid



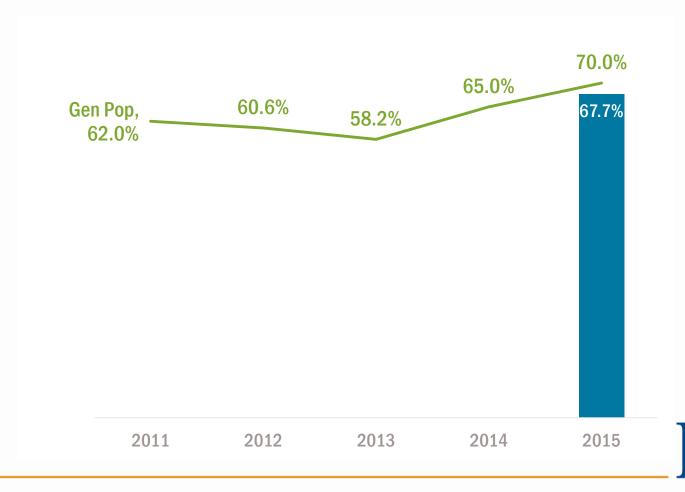
Data from Behavioral Risk Factor Surveillance System and Consumer Assessment of Healthcare Providers and Systems



### **KPM: Child Immunization Rates**



**Up-to-date childhood immunizations for children before their 2nd birthday: General population and Medicaid** 



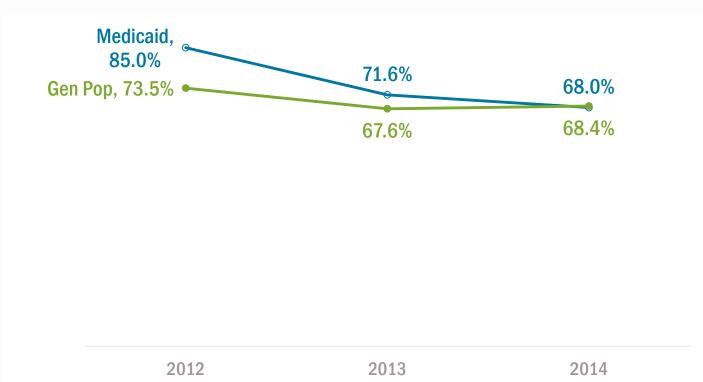


## **KPM: Effective Contraceptive Use**



## **Effective contraceptive use:**

### **General population and Medicaid**



Data from Behavioral Risk Factor Surveillance System. Note CCO incentive measure uses claims data, not survey.



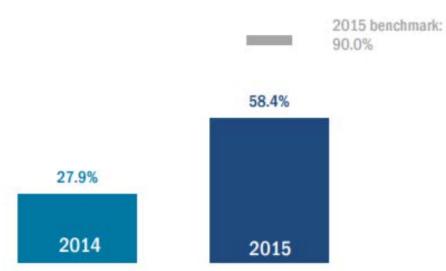
# KPM: Health Assessments for Children in DHS Custody (5)

Statewide, health assessments for children in DHS custody more than doubled between 2014 and 2015, but remain well below the benchmark.

Data source: Administrative (billing) claims + ORKids

Benchmark source: Metrics and Scoring Committee consensus

2014 results have been recalculated according to updated measure specifications and differ from previously published reports





## **Health Plan Quality Metrics Committee**

- Established by SB 440 in 2015
- Single body to align health outcome and quality measures for health care
  - Working collaboratively with Oregon Educators Benefit Board (OEBB), Public Employees Benefit Board (PEBB), OHA, Department of Consumer and Business Services (DCBS)
- Goal of January 2018 for final initial measures determined



# **Questions?**

