



Medicaid Care Management
2015 Quality Update
September 10, 2015

Medicaid Care Management Quality Program

- New quality program for DHHS
 - DHHS Staff
 - Quality Strategy
 - Data sets and measures (from DHHS, EQRO, MCOs)
 - Administrative and encounter data
 - Clinical data (for example, HEDIS)
 - Survey data (for example, CAHPS)
 - External Quality Review
 - MQIS

HEDIS Overview

- The Healthcare Effectiveness Data Information Set (HEDIS) is the most widely used health care quality measurement tool in the United States.
- HEDIS data offers opportunities to evaluate the whole person with measures available in the following categories of:
 - Prevention & Wellness
 - Acute & Chronic Care
 - Behavioral Health & Substance Abuse Disorder.
- 2015 results represent a baseline of 2014 data for the NH Medicaid Care Management program.
- New Hampshire Health Protection Plan (NHHPP) excluded unless otherwise noted.

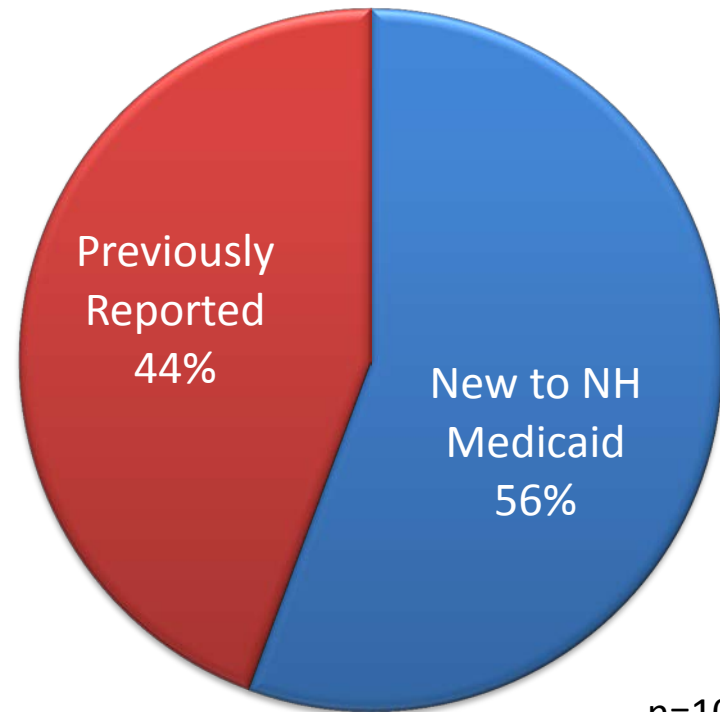
CAHPS Overview

- Consumer Assessment of Healthcare Providers and Systems (CAHPS) surveys ask consumers and patients to report on and evaluate their experiences with health care.
- Focuses on aspects of quality that consumers are best qualified to assess, such as the communication skills of providers and ease of access to health care services.
- DHHS performed a CAPHS survey just after the first 6 months of the MCM program to serve as a baseline

Expanding DHHS MCM Quality Assurance and Improvement

- The MCM Quality Assurance and Improvement program collects over 400 measures, reports, and plans from the Managed Care Organizations.
- NH MCM has significantly increased DHHS capacity to review health data for the NH Medicaid population.
 - 100+ HEDIS measures and submeasures collected.
 - 49 HEDIS measures included in this report.

**NH Medicaid Managed Care
HEDIS Measure Reported for CY 2014**



n=101

Overview for Today

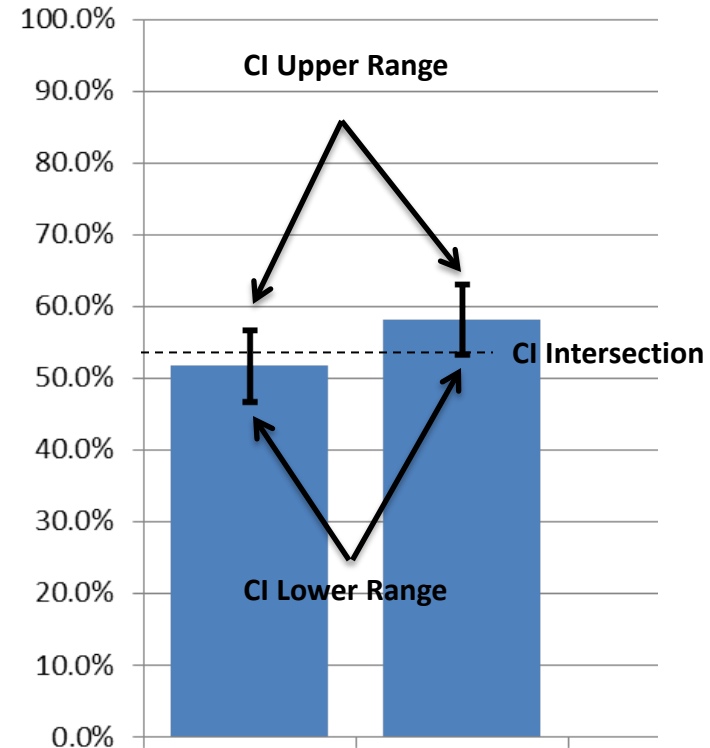
- This quality review to date includes data in the categories:
 - Preventive Care
 - Acute and Chronic Care
 - Behavioral Care
 - Consumer Experience of Care
 - Care Management Program and Operations
- Comparison data is used to provide context and includes:
 - New England and National comparison data for Medicaid Managed Care Plans
 - Pre-MCM NH Fee-For Service
 - MCM contract standards
 - 2014 MCM baseline data
- **Much of the 2014 data in this report, represents a baseline for the NH Medicaid Care Management program.**

Rating the Measures

- Results are noted as:
 - “**STRONG**” if the confidence intervals of the MCM rate exceeds the New England Medicaid managed care, pre-managed care, or MCM contract standard.
 - “**OPPORTUNITY FOR IMPROVEMENT**” if the confidence intervals of the MCM rate falls below New England Medicaid managed care, pre-managed care, or MCM contract standards.
 - “**AVERAGE**” if the confidence intervals of the MCM rate are not statistically or clinically different than New England Medicaid managed care, pre-managed care, or MCM contract standards.
 - Note:
 - Measures can be multiple categories.
 - For some measures a low number is “STRONG” and for some measures a high number is an “OPPORTUNITY FOR IMPROVEMENT”. These measures are individually noted.

Overview: *Confidence Intervals*

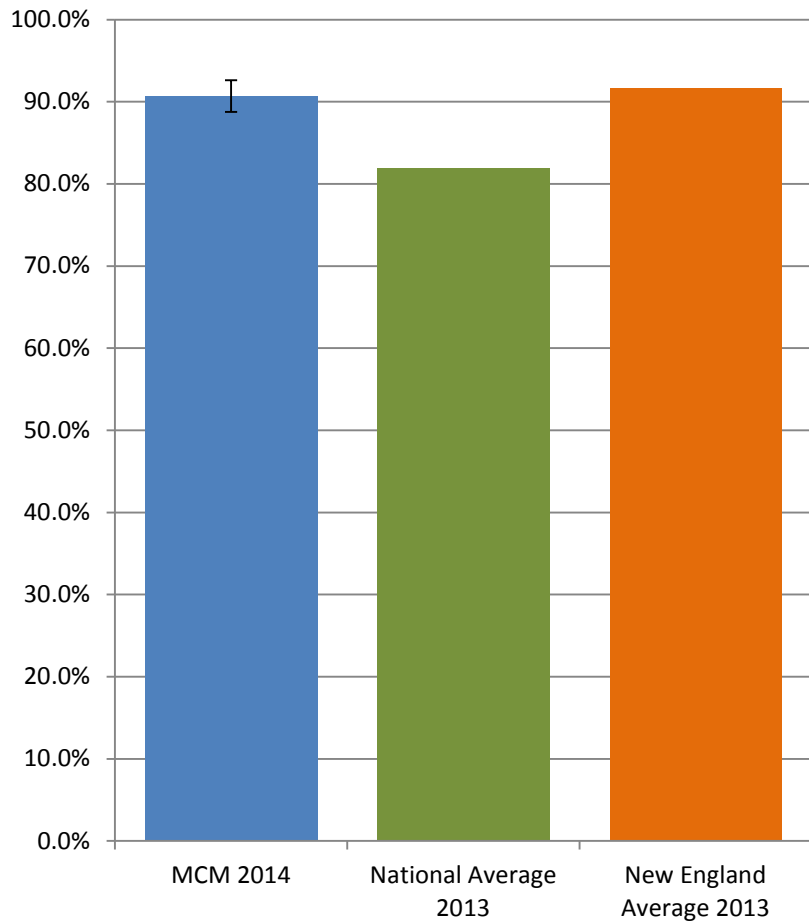
- The lines shown on the chart are called confidence intervals (CI).
- CIs show an upper and lower range of rates.
- DHHS is 95% confident that the rates in this report are between the upper and lower range of the CIs.
- If the CIs of two rates intersect at any point, the difference between the two rates is not statistically significant at the 95% CI.



PREVENTIVE CARE:

Strong and Average Results

Prenatal and Postpartum Care (PPC): *Timeliness of Prenatal Care*



MCM 2014 N = 856

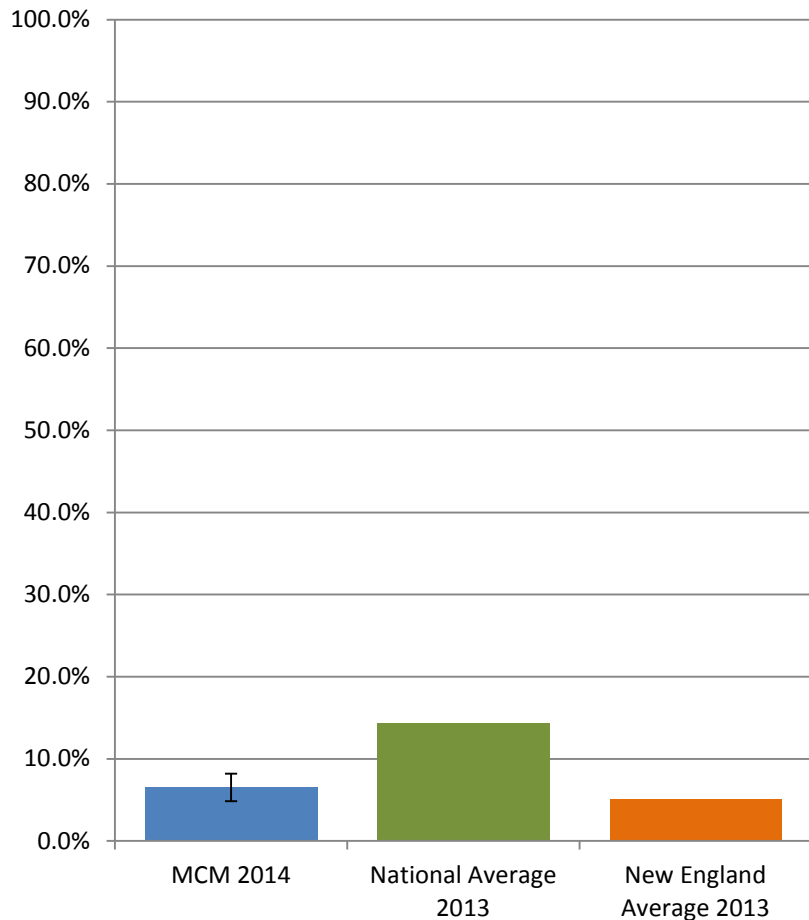
Measure Description:

- Percent of females gave birth and received at least 1 prenatal care visit in the first trimester of pregnancy or within 42 days of enrollment in the organization.
- NHHPP included.

NH MCM Impact:

- Results are **AVERAGE** compared to New England Medicaid managed care rates.

Frequency of Ongoing Prenatal Care (FPC): <21 Percent



MCM 2014 N = 856

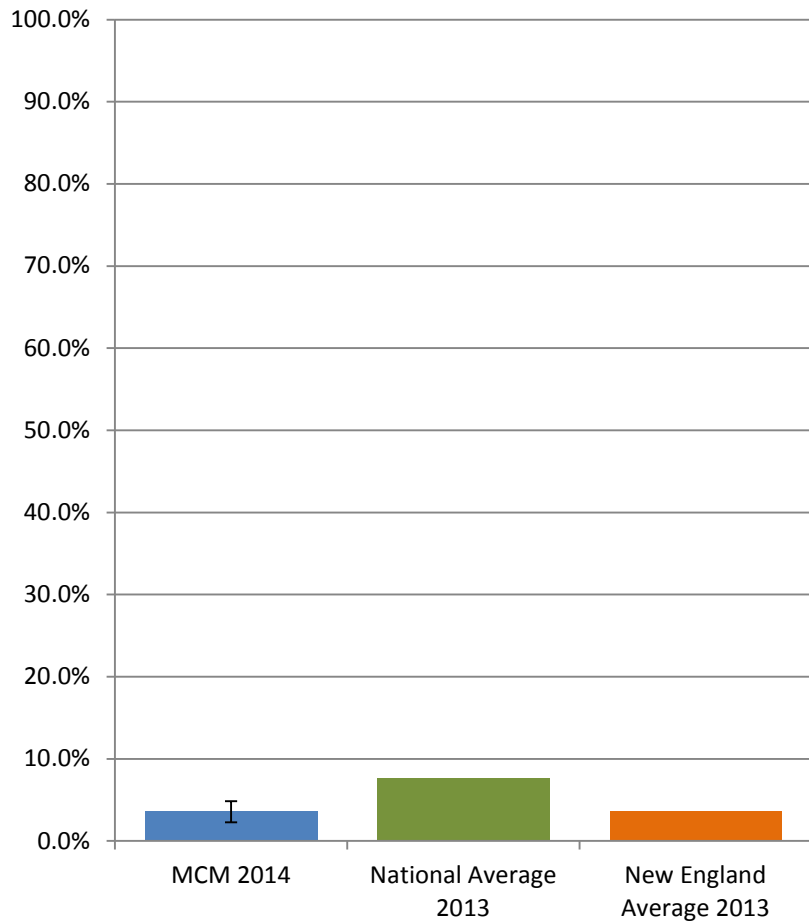
Measure Description

- Percent of pregnant women who attended <21% of prenatal visits during pregnancy.
- NHHPP included.
- Lower percent is better.

NH MCM Impact:

- Results are **AVERAGE** compared to New England Medicaid managed care rates.

Frequency of Ongoing Prenatal Care (FPC): 21-40 Percent



MCM 2014 N = 856

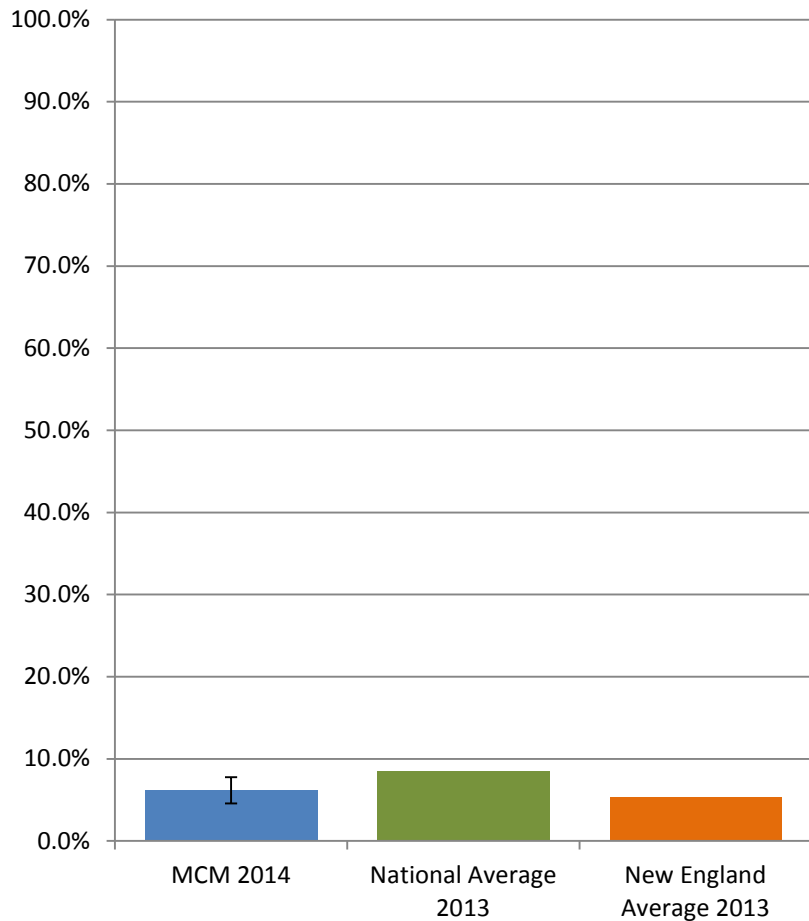
Measure Description

- Percent of pregnant women who attended 21-40% of prenatal visits during pregnancy.
- NHHPP included.
- Lower percent is better.

NH MCM Impact:

- Results are **AVERAGE** compared to New England Medicaid managed care rates.

Frequency of Ongoing Prenatal Care (FPC): 41-60 Percent



MCM 2014 N = 856

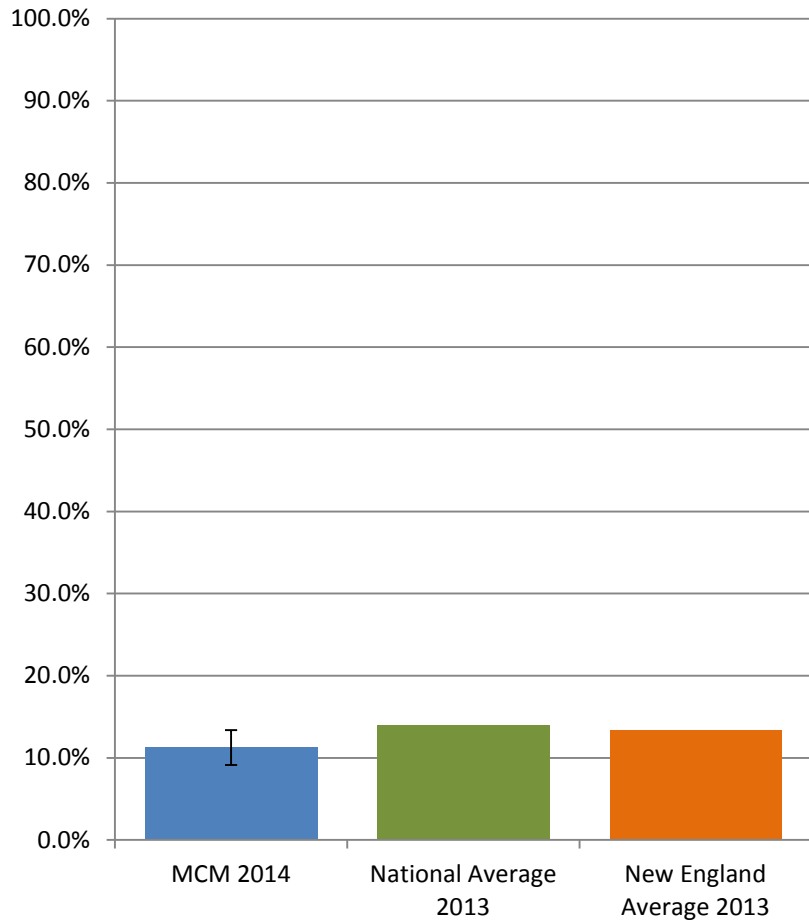
Measure Description

- Percent of pregnant women who attended 41-60% of prenatal visits during pregnancy.
- NHHPP included.
- Lower percent is better.

NH MCM Impact:

- Results are **AVERAGE** compared to New England Medicaid managed care rates.

Frequency of Ongoing Prenatal Care (FPC): *61-80 Percent*



MCM 2014 N = 856

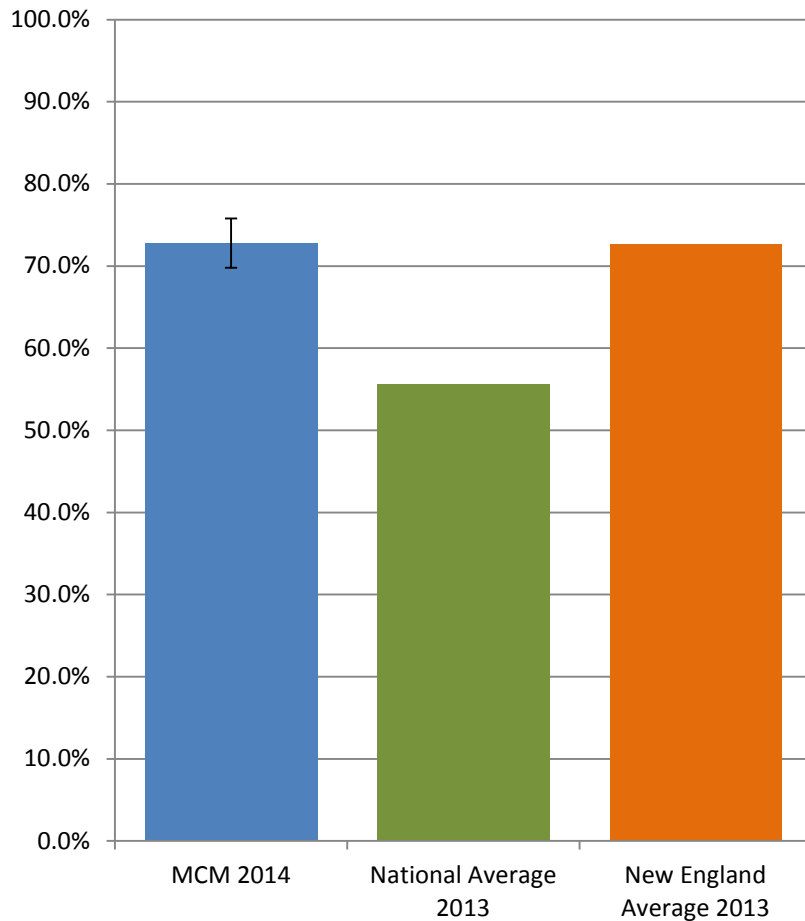
Measure Description

- Percent of pregnant women who attended 61-80% of prenatal visits during pregnancy.
- NHHPP included.
- Lower percent is better.

NH MCM Impact:

- Results are **AVERAGE** compared to New England Medicaid managed care rates.

Frequency of Ongoing Prenatal Care (FPC): *81+ Percent*



MCM 2014 N = 856

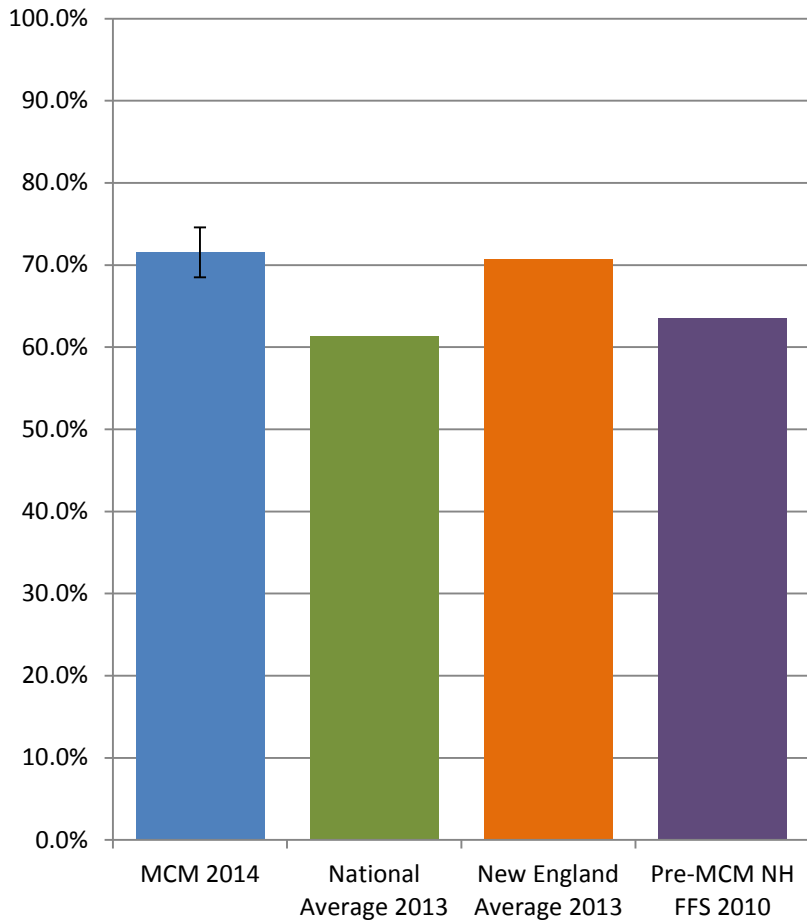
Measure Description:

- Percent of pregnant women who attended >81% of prenatal visits during pregnancy.
- NHHPP included.

NH MCM Impact:

- Results are **AVERAGE** compared to New England Medicaid managed care rates.

Prenatal and Postpartum Care (PPC): *Postpartum Care*



MCM 2014 N = 856

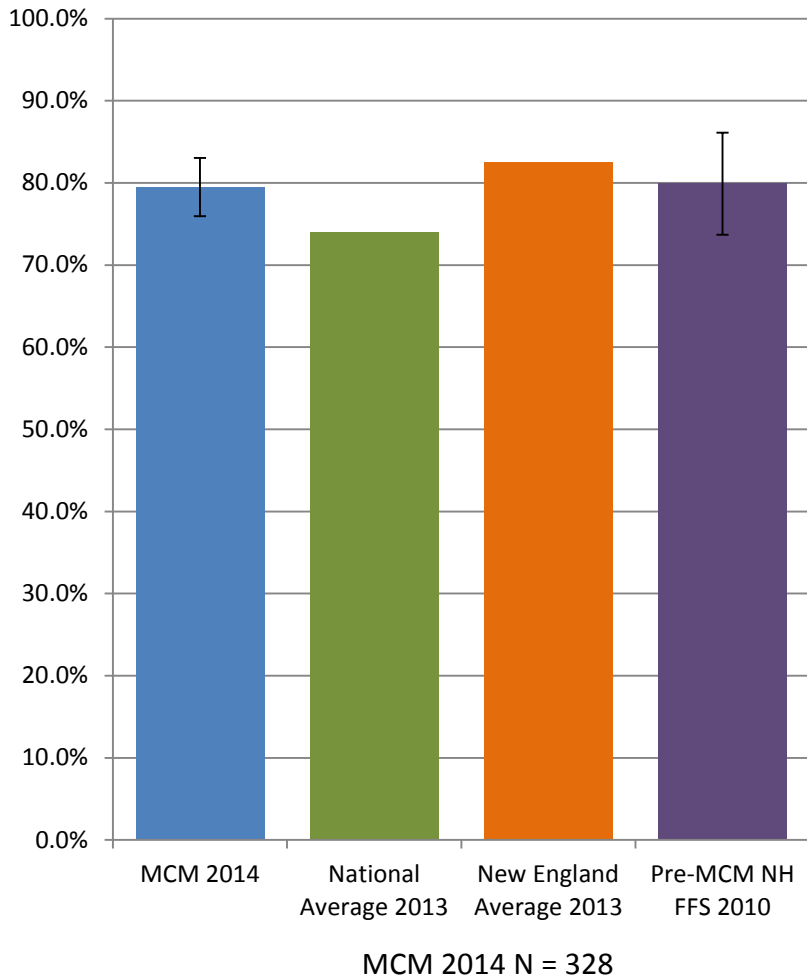
Measure Description

- Percent of female members who had a baby and received a postpartum care visit between 21–56 days after delivery.
- NHHPP included.

NH MCM Impact:

- Results are **STRONG** compared to pre-managed care rates.
- Results are **AVERAGE** compared to New England Medicaid managed care rates.

Childhood Immunization Status (CIS): *Combination #2*



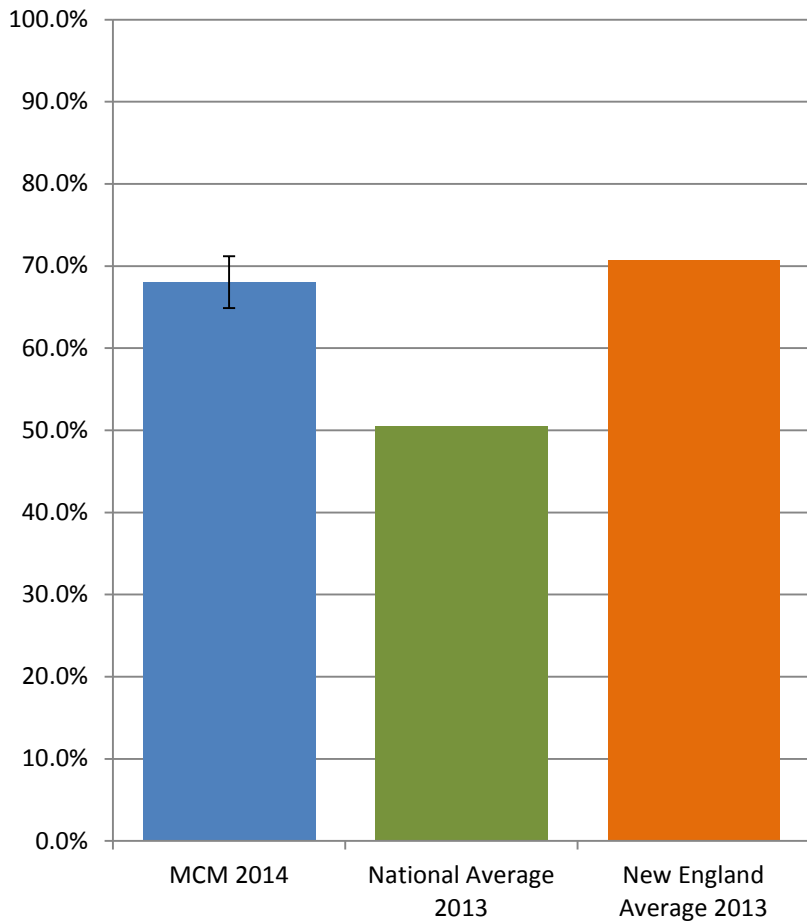
Measure Description:

- Percent of 2 years old who received diphtheria, tetanus, and pertussis, polio, measles, mumps, and rubella, haemophilus influenza B, hepatitis B, and varicella vaccines on or before 2 years old.
- Immunizations required for NH children in child care

NH MCM Impact:

- Results are **AVERAGE** compared to New England Medicaid managed care.
- Results are **AVERAGE** compared to pre-managed care rates.

Weight Assessment, Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC): *Counseling for Physical Activity*



MCM 2014 N = 840

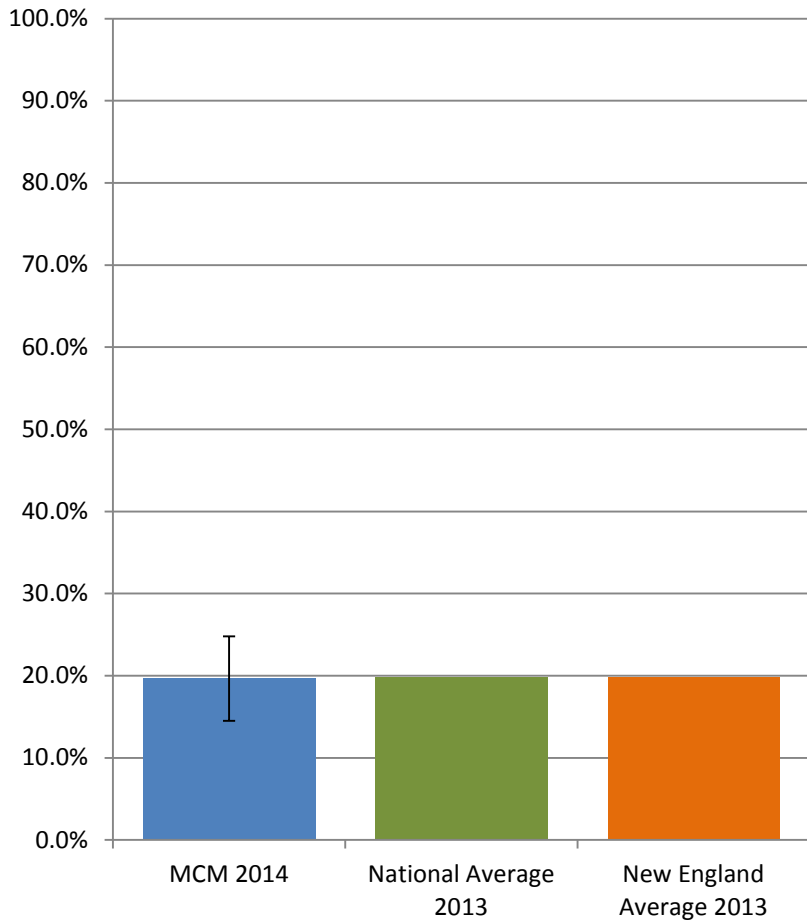
Measure Description:

- Percent of 3-17 years old who had an outpatient provider visit with a PCP and who had documentation of counseling for physical activity.

NH MCM Impact:

- Results are **AVERAGE** compared to New England Medicaid managed care rates.

Human Papillomavirus Vaccine for Female Adolescents (HPV)



MCM 2014 N = 229

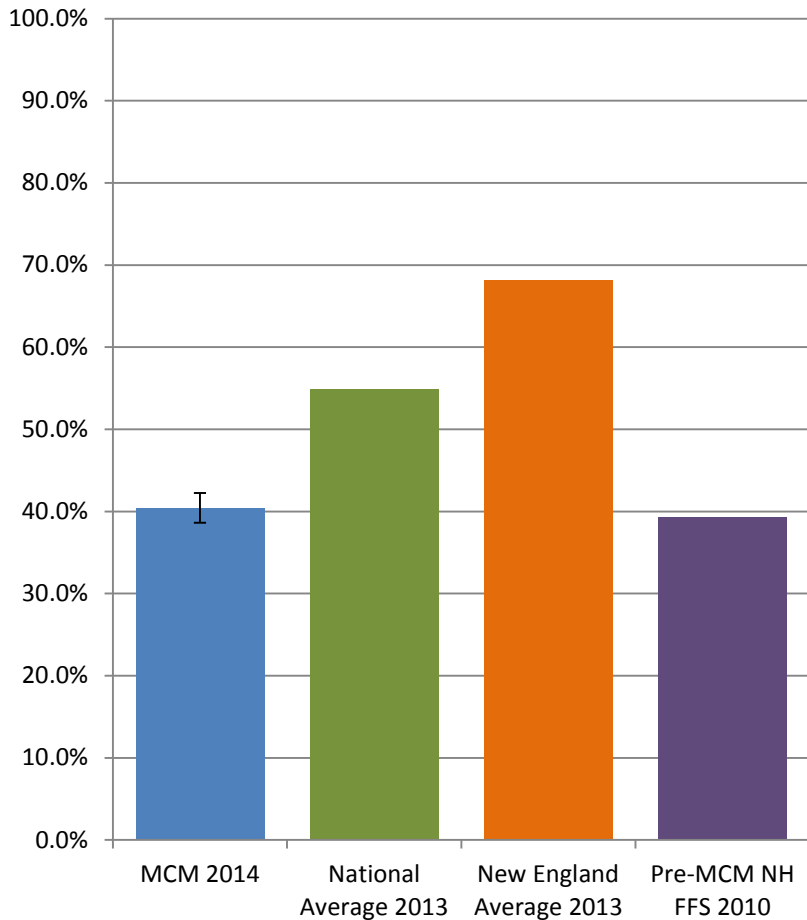
Measure Description:

- Percent of females 13 years old who had 3 doses of HPV vaccine between 9-13 years old.

NH MCM Impact:

- Results are **AVERAGE** compared to New England Medicaid managed care rates.

Chlamydia Screening in Women (CHL): *Total*



MCM 2014 N = 2,823

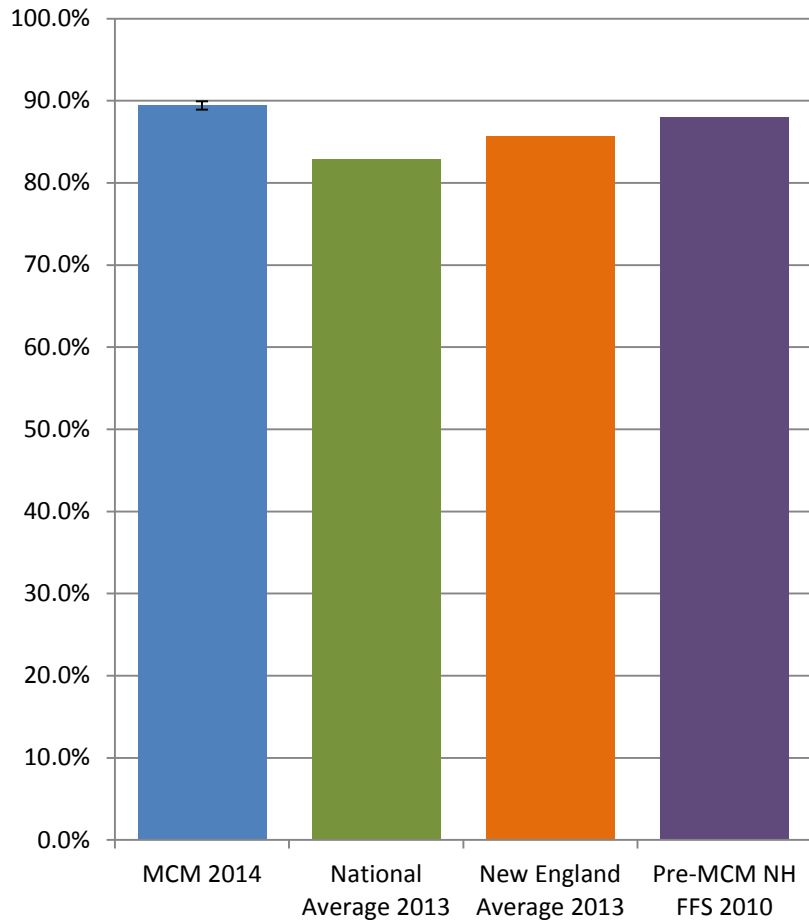
Measure Description:

- Percent of sexually active females 16-24 years old who had at least 1 chlamydia test during the past year.

NH MCM Impact:

- Results are **AVERAGE** compared to pre-managed care rates.
- Results show an **OPPORTUNITY FOR IMPROVEMENT** compared to New England Medicaid managed care rates.
- Performance improvement project topic for one MCO.

Adults' Access to Preventive/Ambulatory Health Services (AAP): *Total*



MCM 2014 N = 13,394

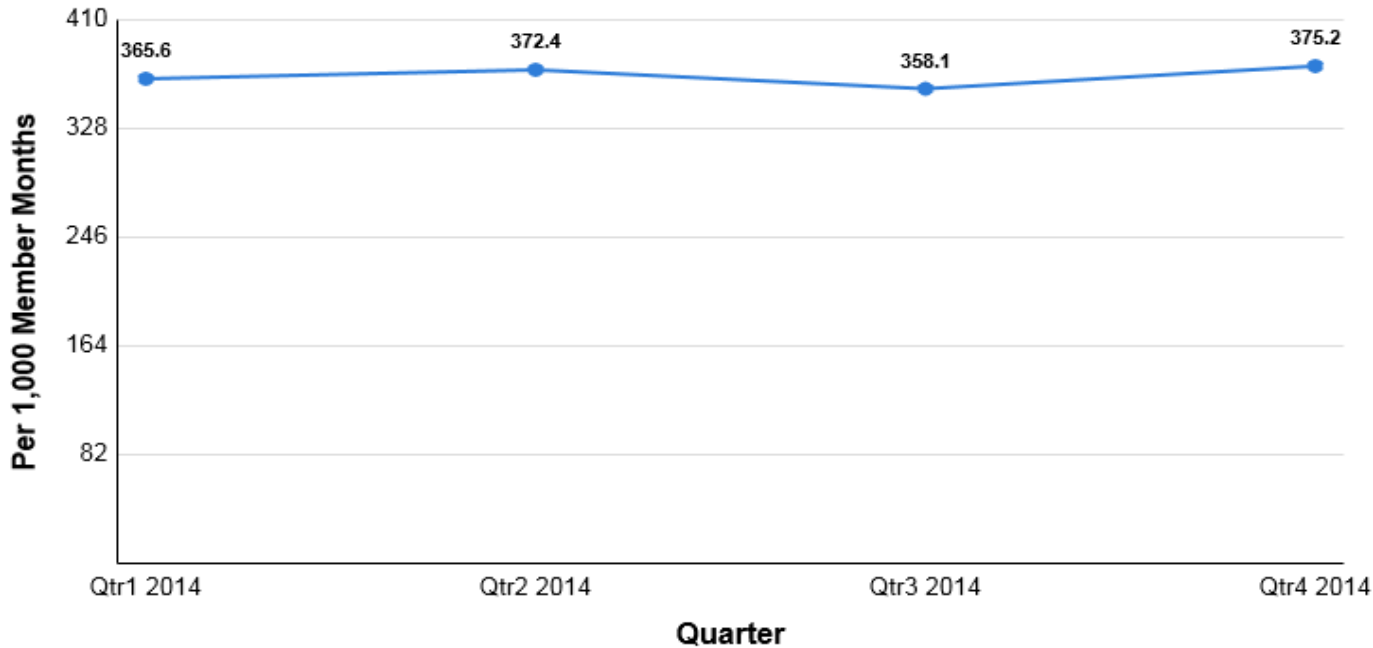
Measure Description:

- Percent of adults 20 years old and older who had an outpatient or preventive care visit in the past year.

NH MCM Impact:

- Results are **STRONG** compared to pre-managed care rates.
- Results are **STRONG** compared to New England Medicaid managed care rates.

Ambulatory Care: *Physician, ARNP, and Clinic Visits*



Measure Description:

- The number of provider office visits reported as member months.

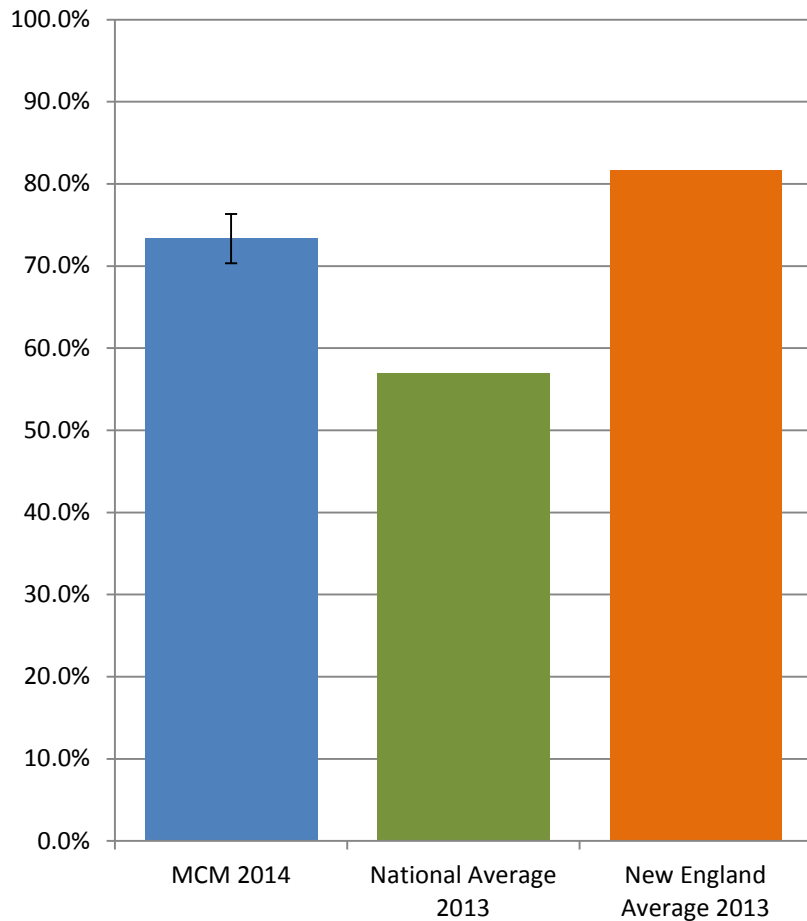
NH MCM Impact:

- Results are **AVERAGE** compared to pre-managed care rate of 365.5 member months in 2012.
- Results show **OPPORTUNITY FOR IMPROVEMENT** compared to New England Medicaid managed care rate of 401.7 member months in 2013.

PREVENTIVE CARE:

Opportunities for Improvement

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC): *BMI Percentile*



MCM 2014 N = 840

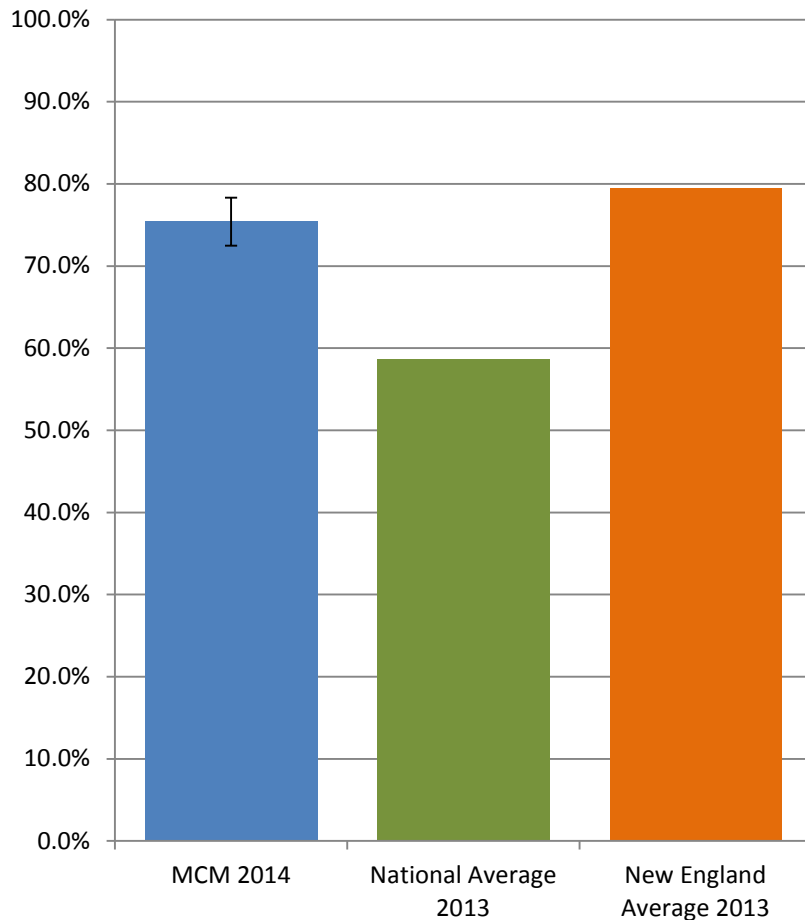
Measure Description:

- Percent 3-17 years old who had an outpatient provider visit with a primary care provider and who had documentation in the medical record of body mass index (BMI).

NH MCM Impact:

- Results show an **OPPORTUNITY FOR IMPROVEMENT** compared to New England Medicaid managed care rates.
- Performance improvement project topic for one MCO.

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC): *Counseling for Nutrition*



MCM 2014 N = 840

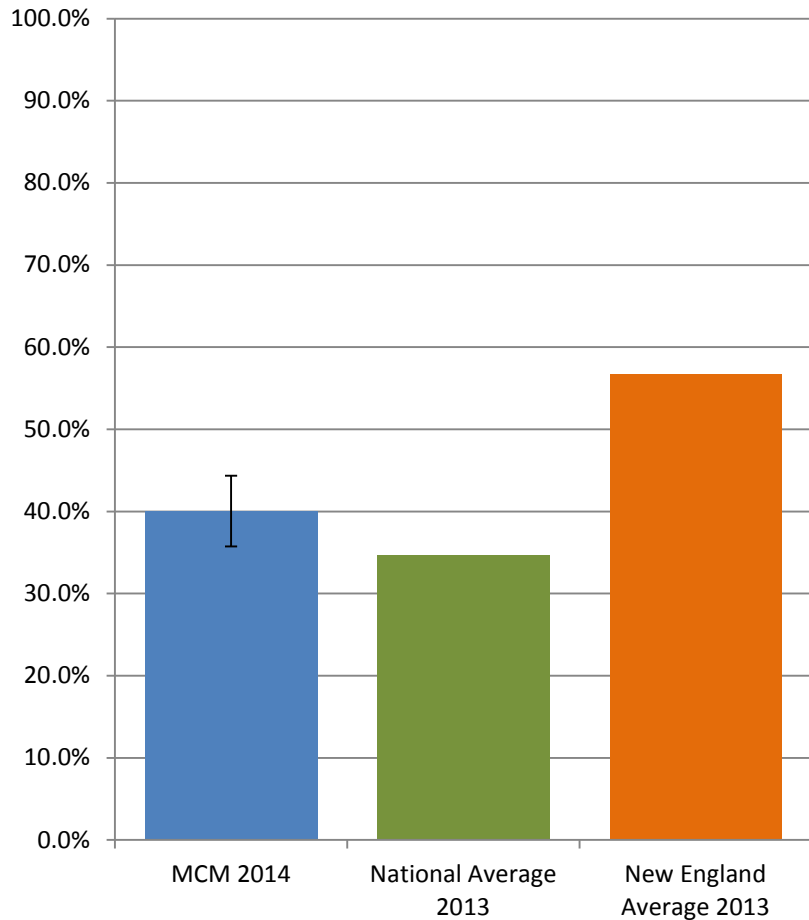
Measure Description:

- Percent of children and adolescents 3-17 years old who had an outpatient visit with a primary care provider and who had documentation of counseling for nutrition.

NH MCM Impact:

- Results show an **OPPORTUNITY FOR IMPROVEMENT** compared to New England Medicaid managed care rates.

Childhood Immunization Status (CIS): *Combination #10*



MCM 2014 N = 497

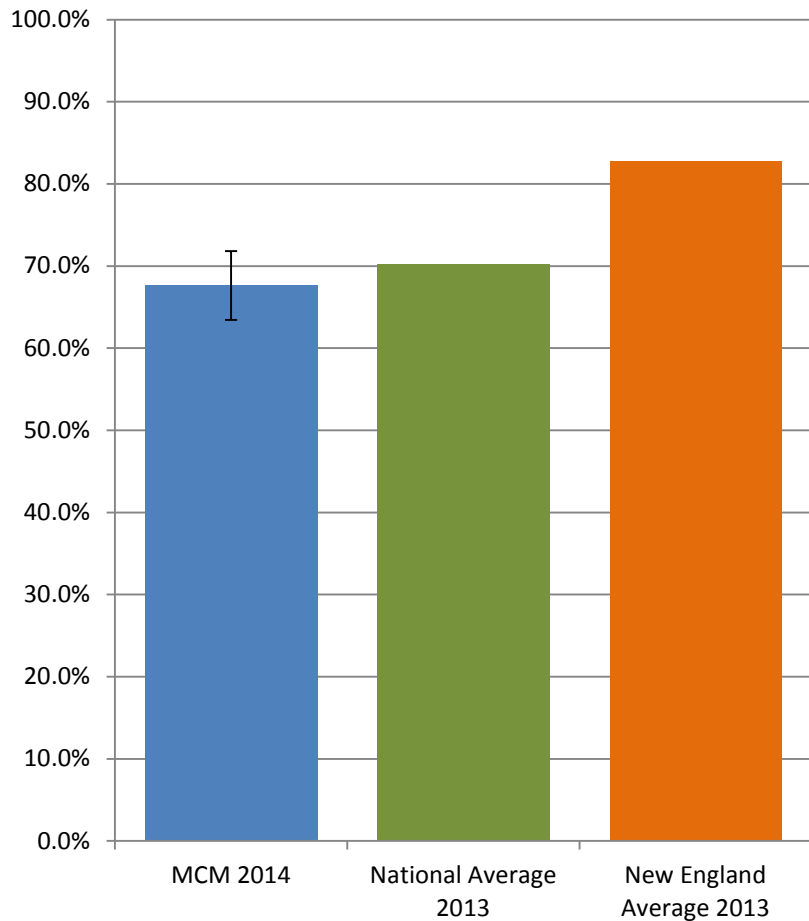
Measure Description:

- Percent of members 2 years old who received diphtheria, tetanus, pertussis; polio; measles, mumps, rubella; haemophilus influenza B; hepatitis B; varicella; hepatitis A, pneumococcus; rotavirus; and influenza vaccines on or before 2 years old.
- Immunizations recommended by CDC.

NH MCM Impact:

- Results show an **OPPORTUNITY FOR IMPROVEMENT** compared to New England Medicaid managed care rates.

Immunizations for Adolescents (IMA): *Combination #1*



MCM 2014 N = 221

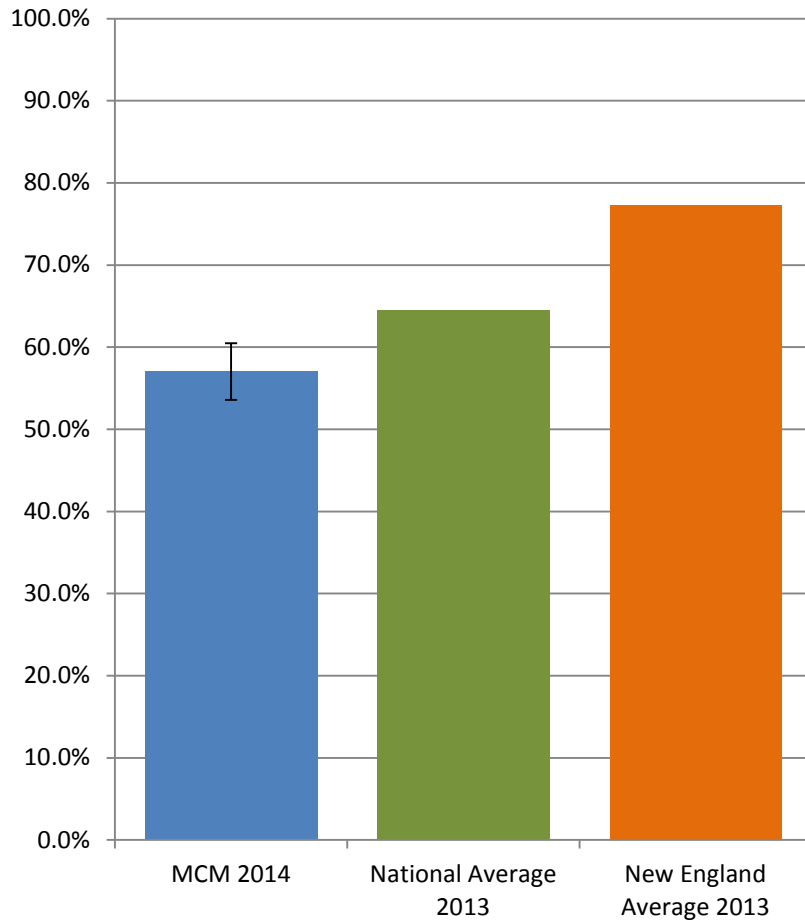
Measure Description:

- Percent of 13 years old who received meningococcal, tetanus, diphtheria toxoids and pertussis vaccine before 13 years old.

NH MCM Impact:

- Results show an **OPPORTUNITY FOR IMPROVEMENT** compared to New England Medicaid managed care rates.

Cervical Cancer Screening (CCS)



MCM 2014 N = 795

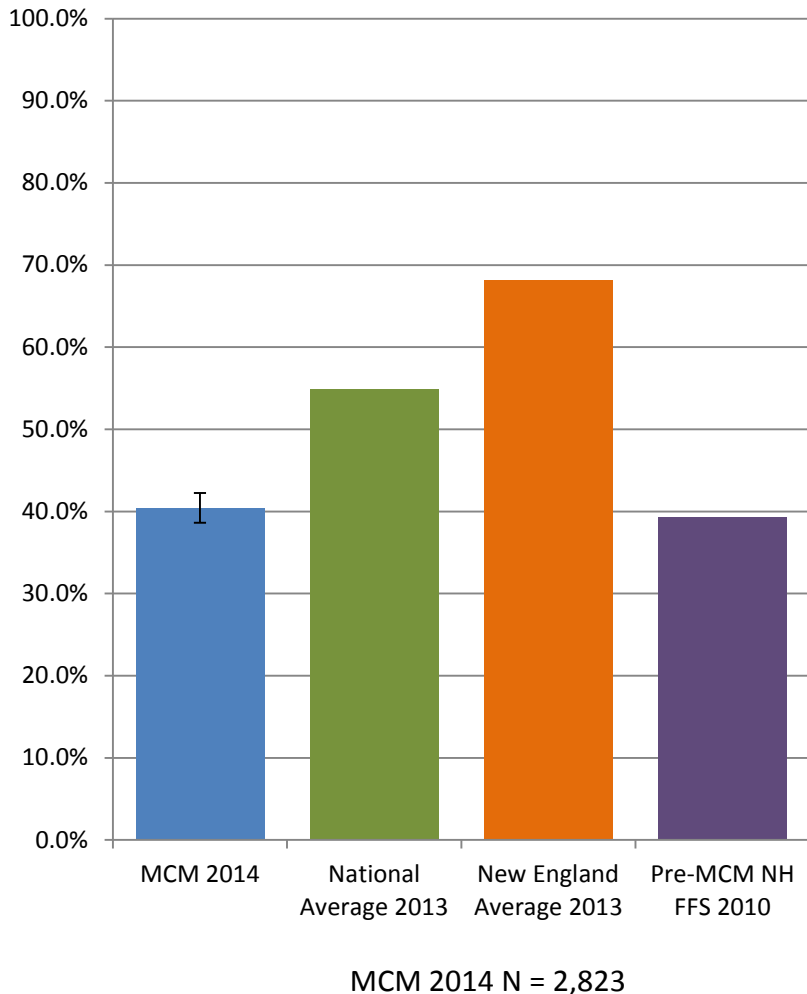
Measure Description:

- Percent of women 24-64 years old who were screened for cervical cancer.

NH MCM Impact:

- Results show an **OPPORTUNITY FOR IMPROVEMENT** compared to New England Medicaid managed care rates.

Chlamydia Screening in Women (CHL): *Total*



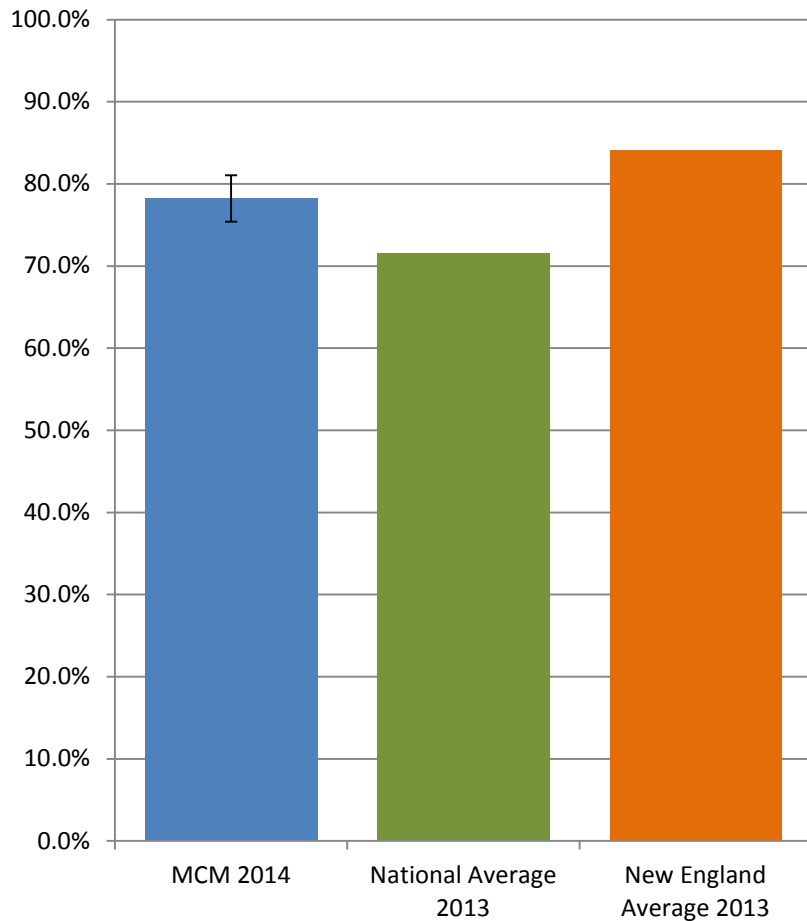
Measure Description:

- Percent of sexually active females 16-24 years old who had at least 1 chlamydia test during the past year.

NH MCM Impact:

- Results are **AVERAGE** compared to pre-managed care rates.
- Results show an **OPPORTUNITY FOR IMPROVEMENT** compared to New England Medicaid managed care rates.
- Performance improvement project topic for one MCO.

Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life (W34)



MCM 2014 N = 816

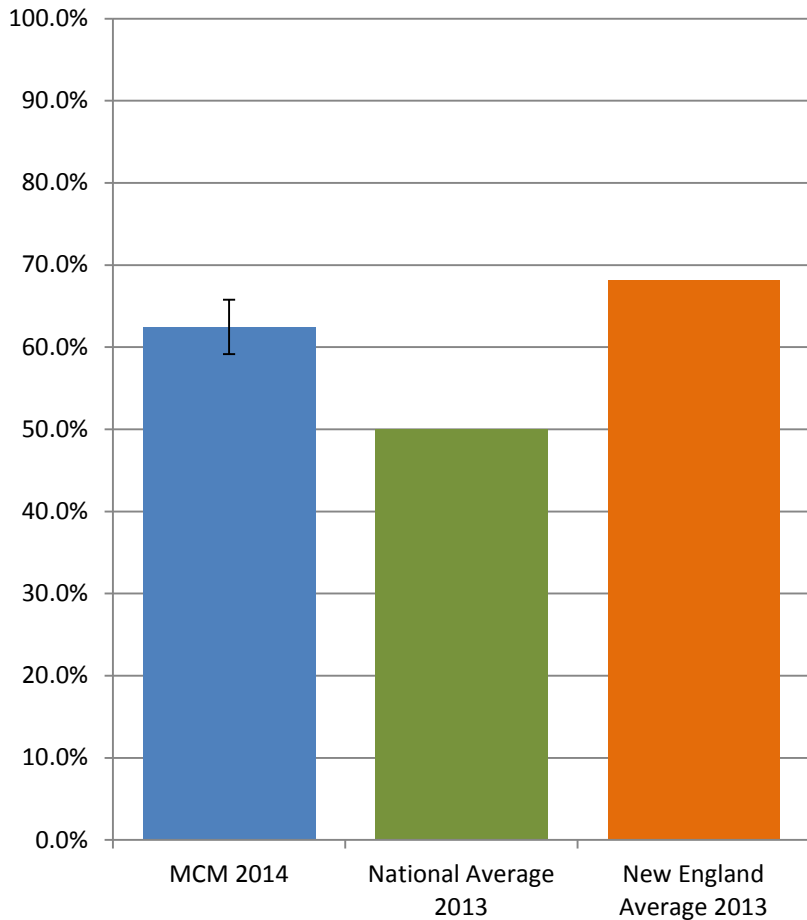
Measure Description:

- Percent of 3-6 years old who had at least 1 well-child visit in the past year.

NH MCM Impact:

- Results show an **OPPORTUNITY FOR IMPROVEMENT** compared to New England Medicaid managed care rates.
- Performance improvement project topic for both MCOs.

Adolescent Well-Care Visits (AWC)



MCM 2014 N = 816

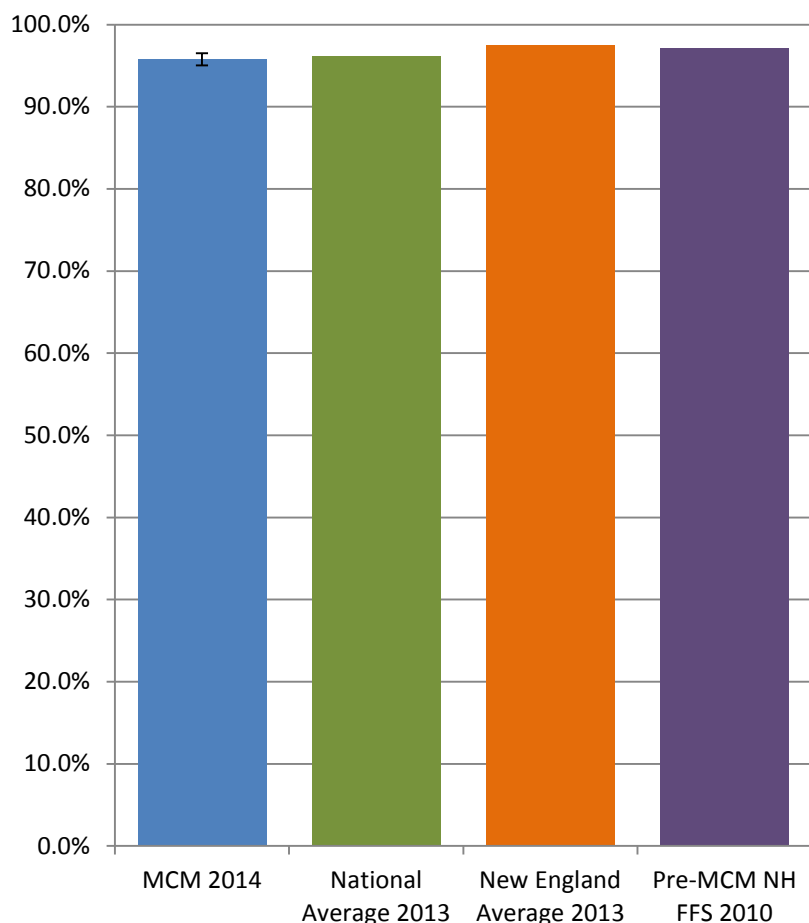
Measure Description:

- Percent of adolescents 12-21 years old who had at least 1 comprehensive well-care visit with a primary care provider or OB/GYN within the past year.

NH MCM Impact:

- Results show an **OPPORTUNITY FOR IMPROVEMENT** compared to New England Medicaid managed care rates.

Children and Adolescents' Access to Primary Care Practitioners (CAP): *12-24 Months*



MCM 2014 N = 2,862

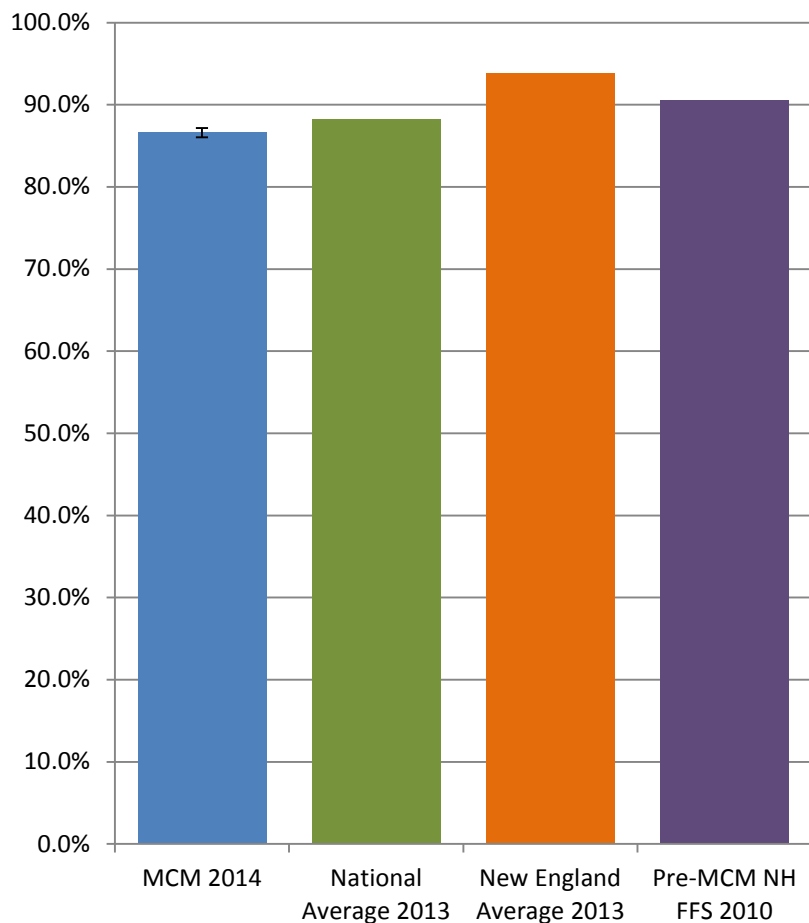
Measure Description:

- Percent of children 12-24 months old who had a visit with a primary care provider in the past year.

NH MCM Impact:

- Results show an **OPPORTUNITY FOR IMPROVEMENT** compared to New England Medicaid managed care rates.
- Results show an **OPPORTUNITY FOR IMPROVEMENT** compared to pre-managed care rates.

Children and Adolescents' Access to Primary Care Practitioners (CAP): 25 Months - 6 Years



MCM 2014 N = 14,059

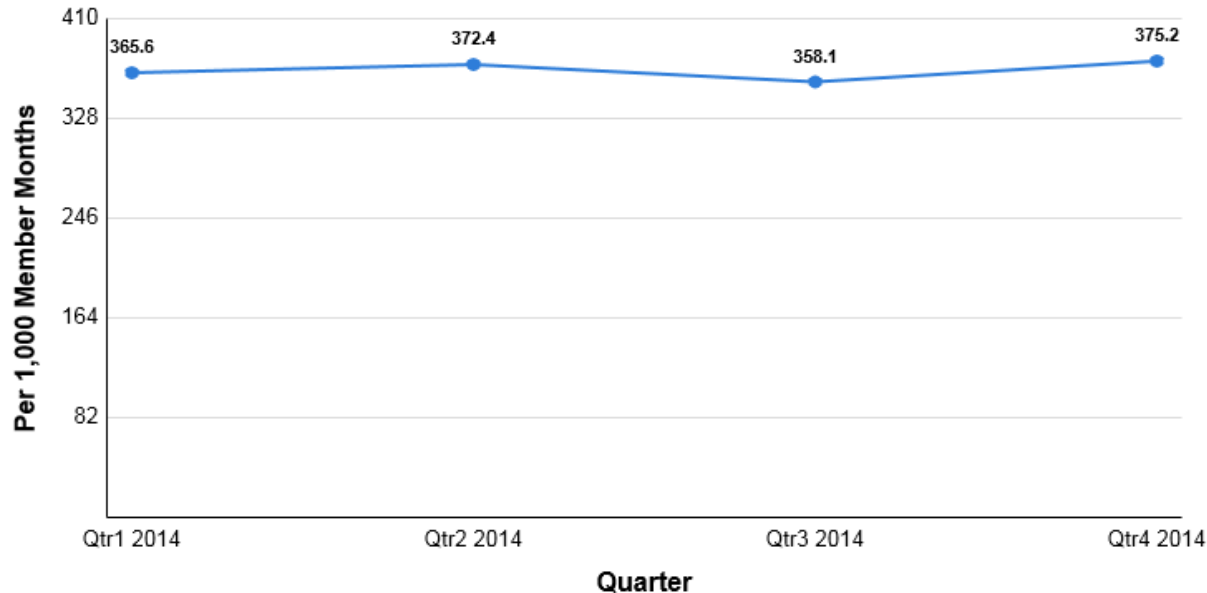
Measure Description:

- Percent of children 25 months – 6 years old who had a visit with a primary care provider in the past year.

NH MCM Impact:

- Results show an **OPPORTUNITY FOR IMPROVEMENT** compared to New England Medicaid managed care rates.
- Results show an **OPPORTUNITY FOR IMPROVEMENT** compared to pre-managed care rates.

Ambulatory Care: *Physician, ARNP, and Clinic Visits*



Measure Description:

- The number of provider office visits reported as member months.

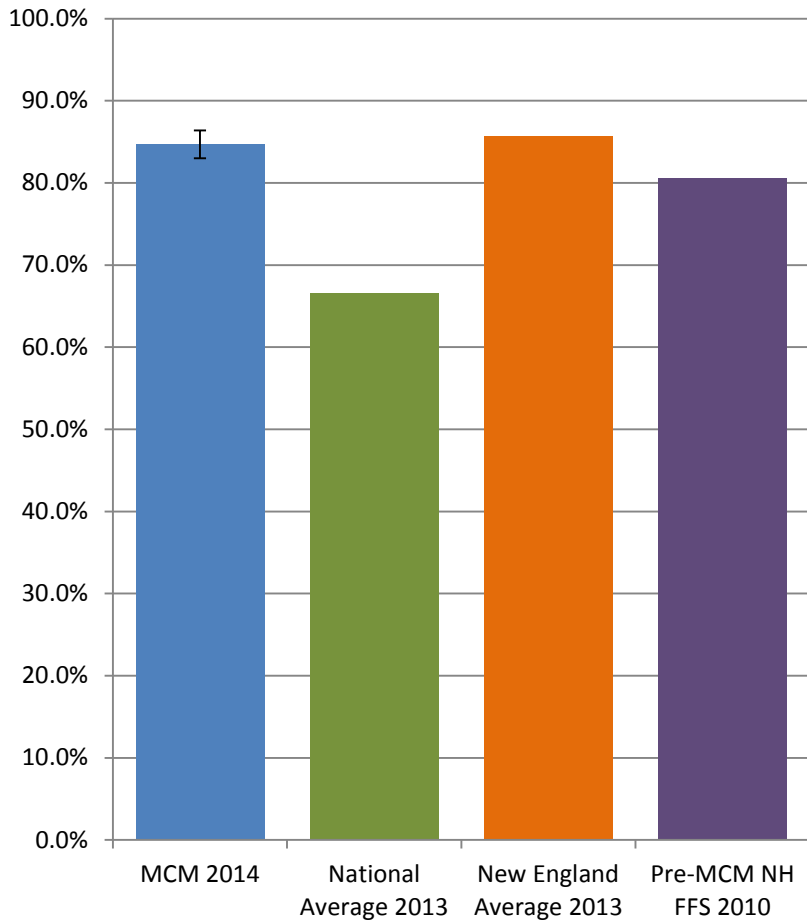
NH MCM Impact:

- Results are **AVERAGE** compared to pre-managed care rate of 365.5 member months in 2012.
- Results show an **OPPORTUNITY FOR IMPROVEMENT** compared to New England Medicaid managed care rate of 401.7 member months in 2013.

ACUTE AND CHRONIC CARE:

Strong and Average Results

Appropriate Testing for Children with Pharyngitis (CWP)



MCM 2014 N = 1,756

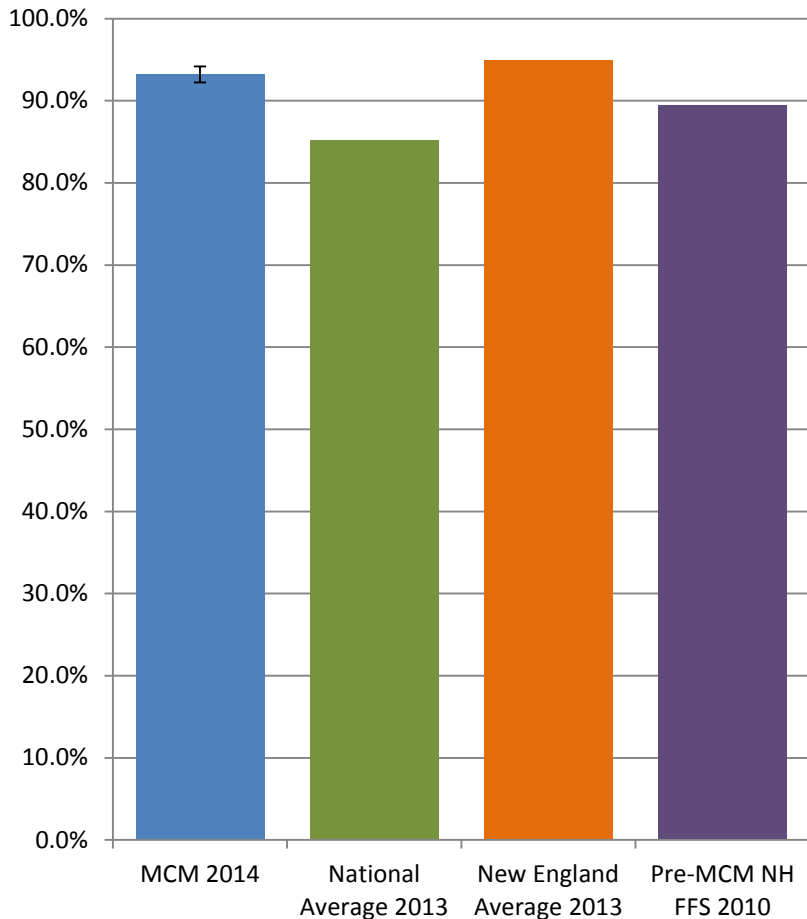
Measure Description:

- Percent of children 2-18 years old who were diagnosed with pharyngitis, were given an antibiotic, and received a group A streptococcus (strep) test.

NH MCM Impact:

- Results are **STRONG** compared to pre-managed care rates.
- Results are **AVERAGE** compared to New England Medicaid managed care rates.

Appropriate Treatment for Children With URI (URI)



MCM 2014 N = 2,561

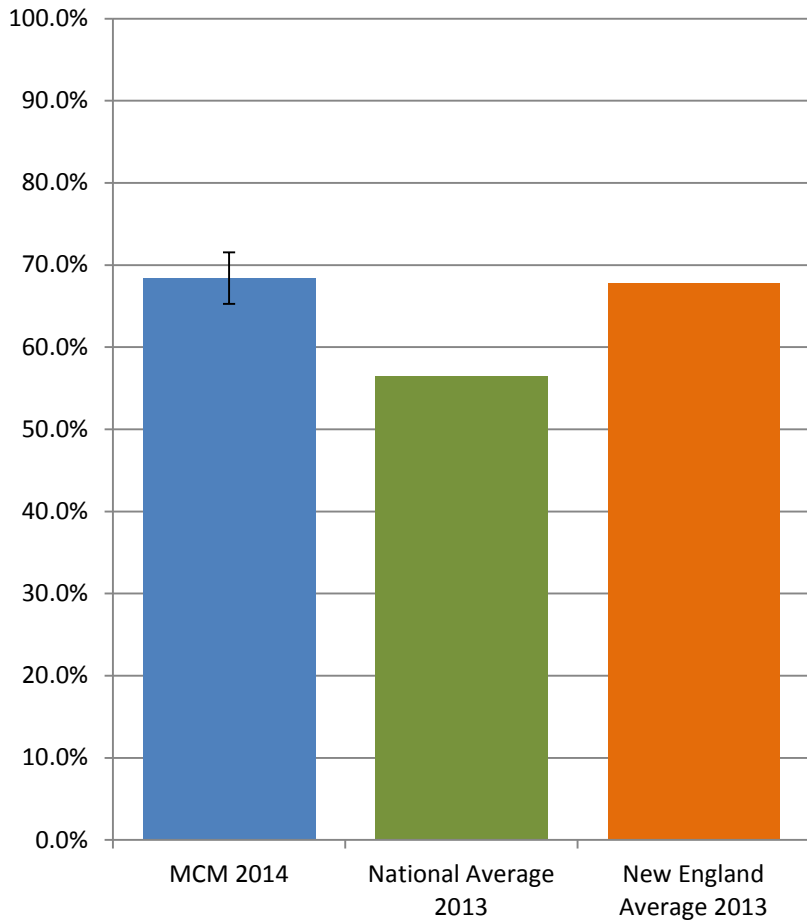
Measure Description:

- Percent of children 3 months-18 years old who were diagnosed with an upper respiratory infection (URI) and were *not* prescribed an antibiotic.

NH MCM Impact:

- Results are **STRONG** compared to pre-managed care rates.
- Results show an **OPPORTUNITY FOR IMPROVEMENT** compared to New England Medicaid managed care rates.

Controlling High Blood Pressure (CBP)



MCM 2014 N = 844

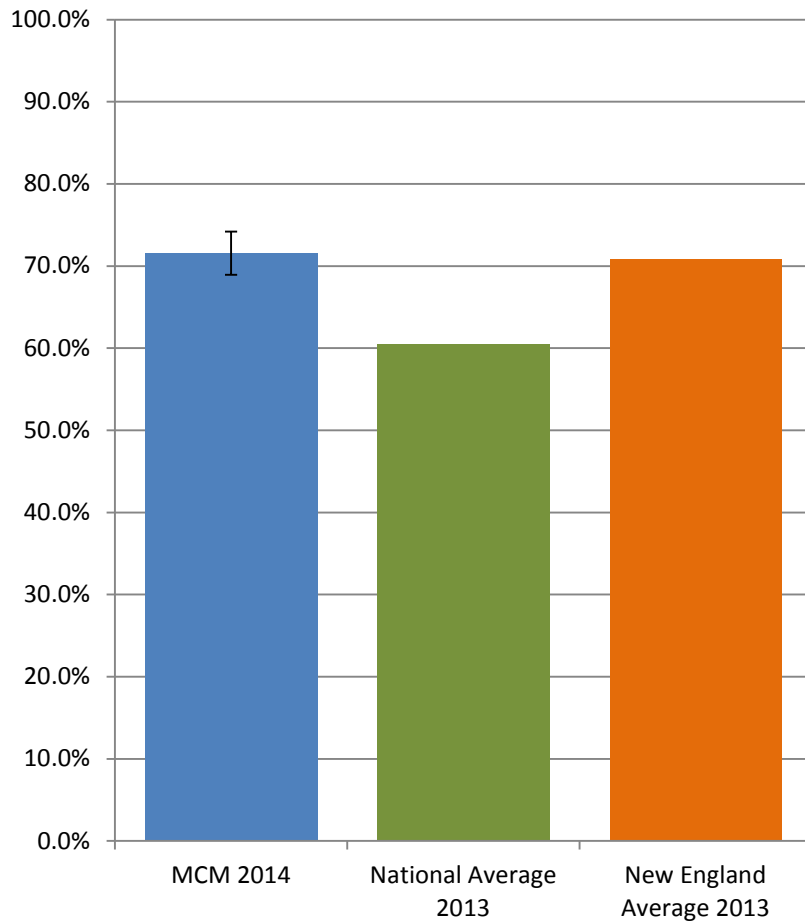
Measure Description:

- Percent of adults 18–85 years old with high blood pressure (hypertension) whose blood pressure was adequately controlled.

NH MCM Impact:

- Results are **AVERAGE** compared to New England Medicaid managed care rates.

Comprehensive Diabetes Care(CDC): *Blood Pressure Control (<140/90 mm Hg)*



MCM 2014 N = 1,131

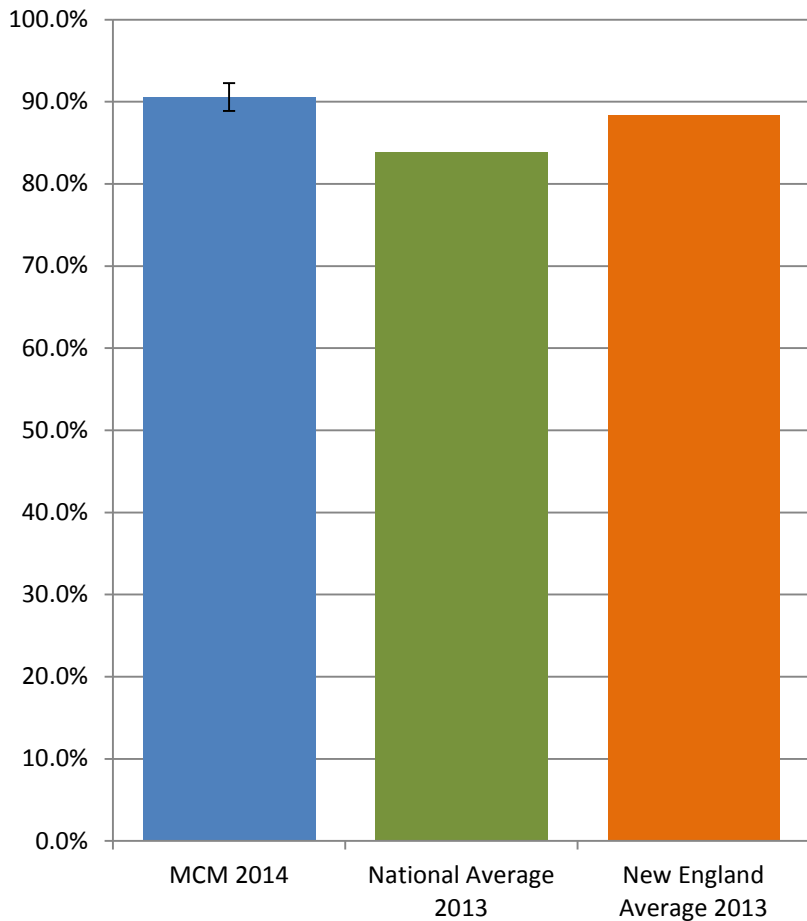
Measure Description

- The percent of adults 18-75 years old who have diabetes and had a blood pressure < 140/90 mm Hg in the past year.

NH MCM Impact:

- Results are **AVERAGE** compared to New England Medicaid managed care rates.

Comprehensive Diabetes Care (CDC): Hemoglobin A1c (HbA1c) Testing



Well Sense MCM 2014 N = 1,131

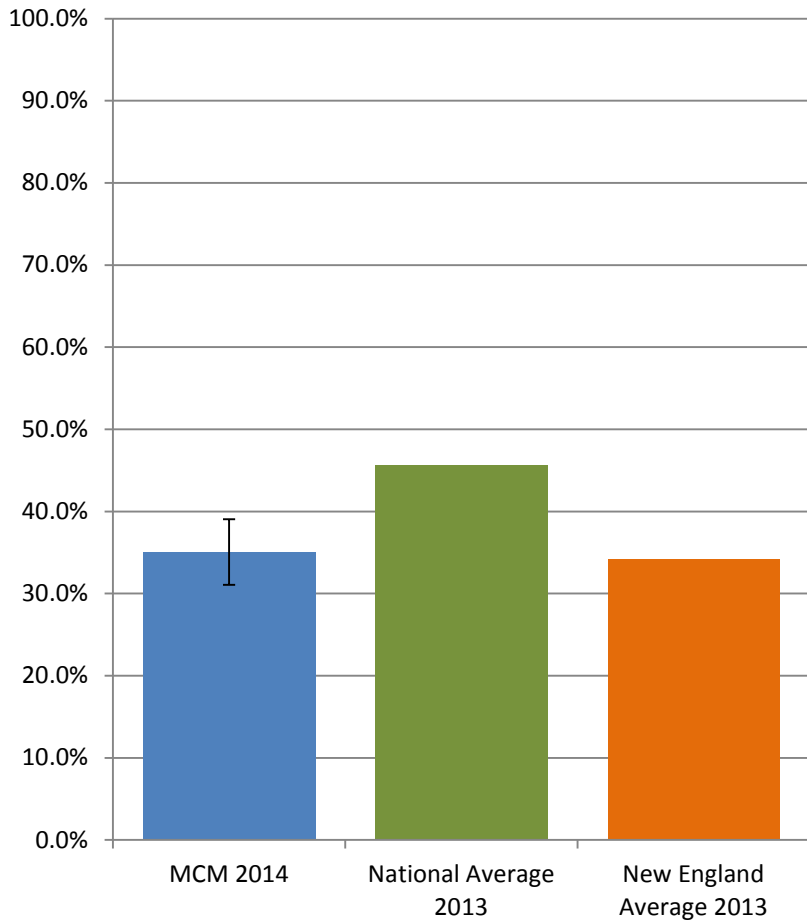
Measure Description:

- Percent of adults 18-75 years old who have diabetes and had a HbA1c test within the past year.

NH MCM Impact:

- Results are **STRONG** compared to New England Medicaid managed care rates.
- Performance improvement project topic for one MCO.

Comprehensive Diabetes Care (CDC): *HbA1c Poor Control (>9.0%)*



MCM 2014 N = 1,131

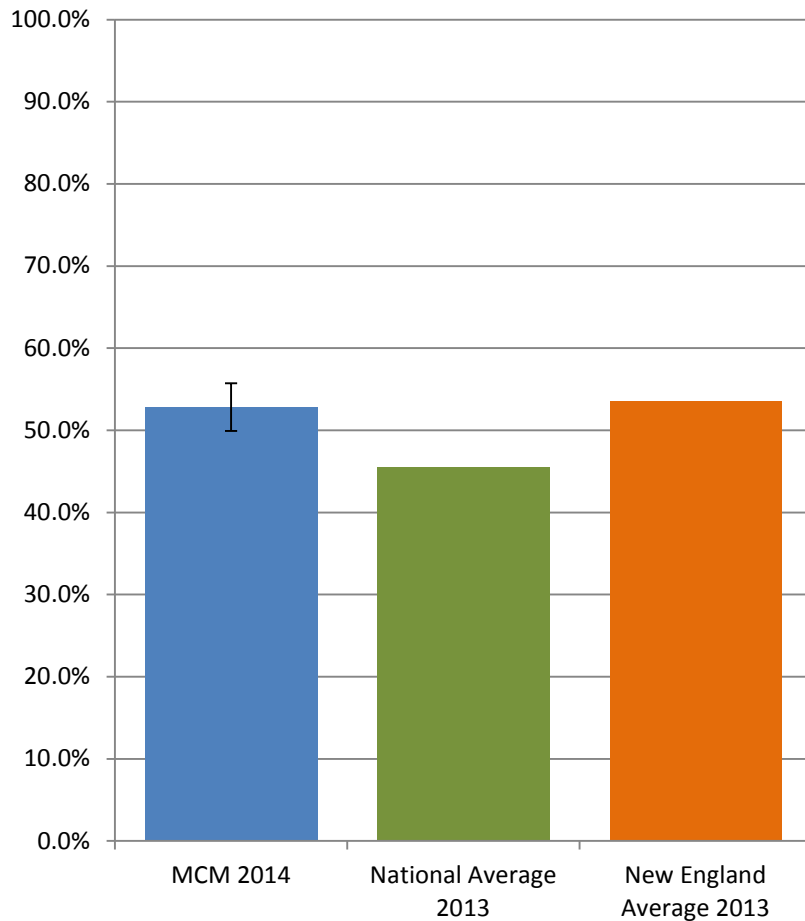
Measure Description:

- Percent of adults 18-75 years old who have diabetes and had a HbA1c >9% within the past year.
- Lower rate is better.

NH MCM Impact:

- Results are **AVERAGE** compared to New England Medicaid managed care rates.

Comprehensive Diabetes Care (CDC): *HbA1c Control (<8.0%)*



MCM 2014 N = 1,131

Measure Description:

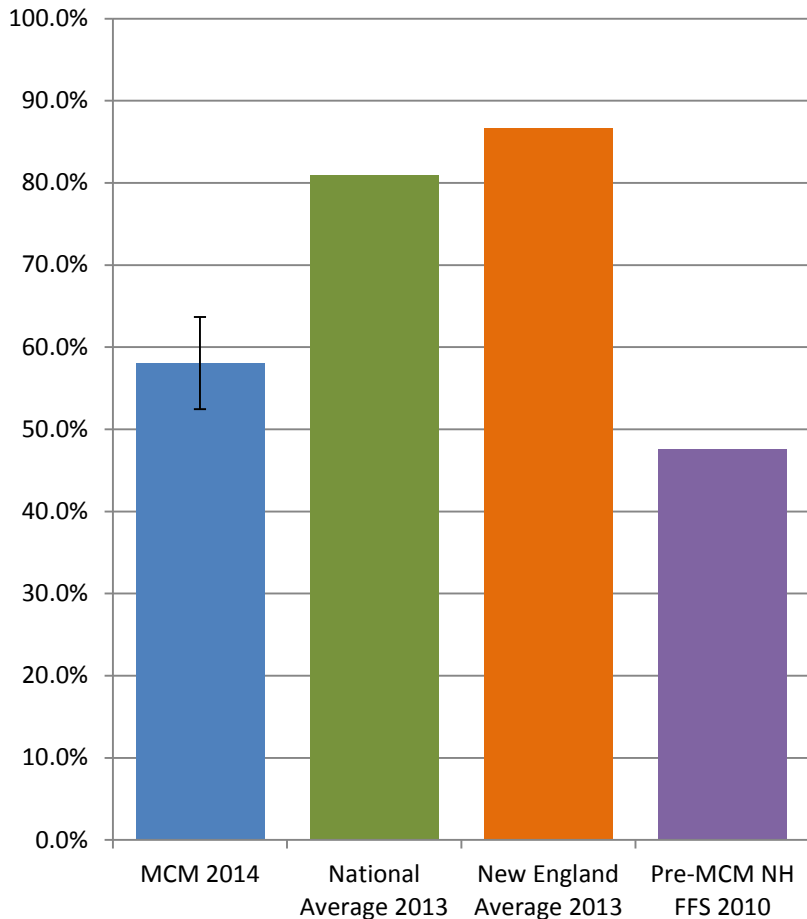
- Percent of adults 18-75 years old who have diabetes and had a HbA1c <8% within the past year.

NH MCM Impact:

- Results are **AVERAGE** compared to New England Medicaid managed care rates.

Pharmacotherapy Management of COPD Exacerbation (PCE)

Bronchodilator



MCM 2014 N = 298

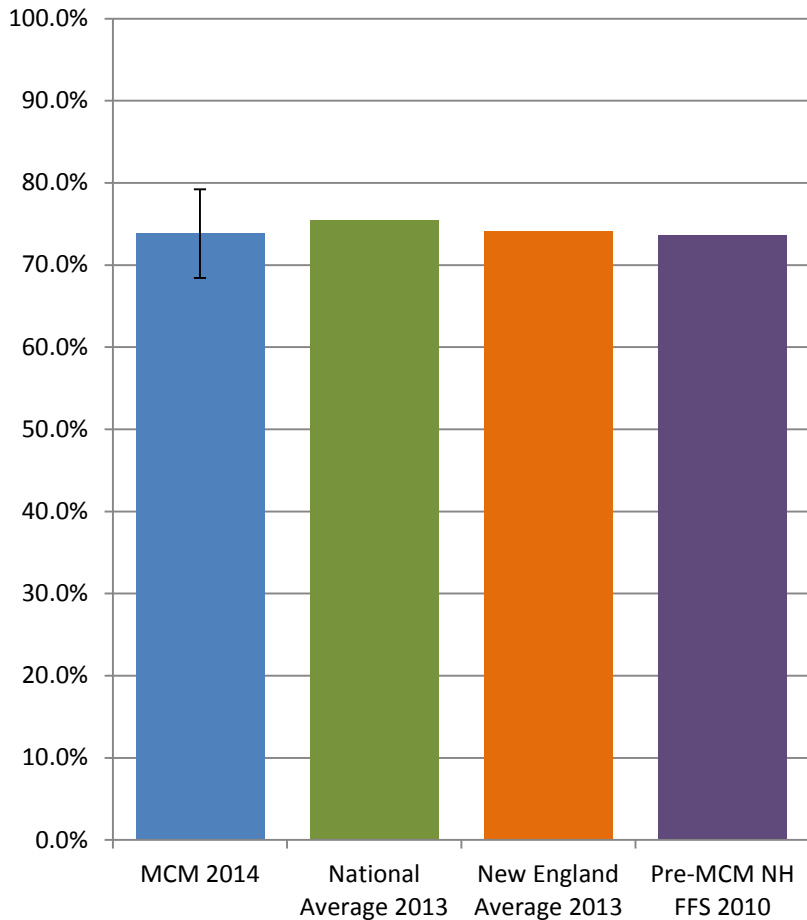
Measure Description:

- Percent of COPD exacerbations for adults 40+ years old who had a hospital admission or emergency department visit and filled a prescription for bronchodilator(s) within 30 days.
- NHHPP included.

NH MCM Impact:

- Results are **STRONG** compared to pre-managed care rates.
- Results show an **OPPORTUNITY FOR IMPROVEMENT** compared to National Quality Compass Medicaid managed care rates.

Use of Imaging Studies for Low Back Pain (LBP)



MCM 2014 N = 256

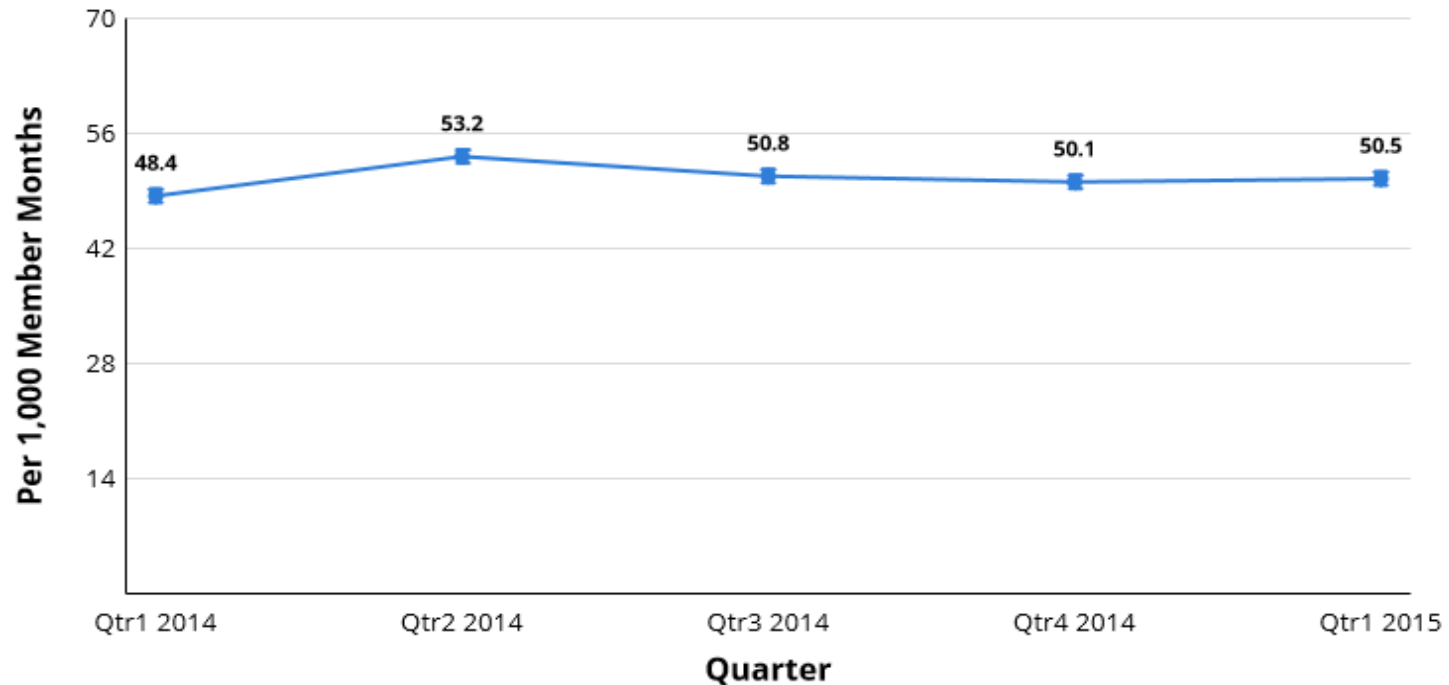
Measure Description

- The percent of adults 18-50 years old diagnosed with low back pain who did *not* receive an imaging study within 28 days of diagnosis.
- NHHPP included.

NH MCM Impact:

- Results are **AVERAGE** compared to New England Medicaid managed care rates.
- Results are **AVERAGE** compared to pre-managed care rates.

Ambulatory Care: *Emergency Department Visits*



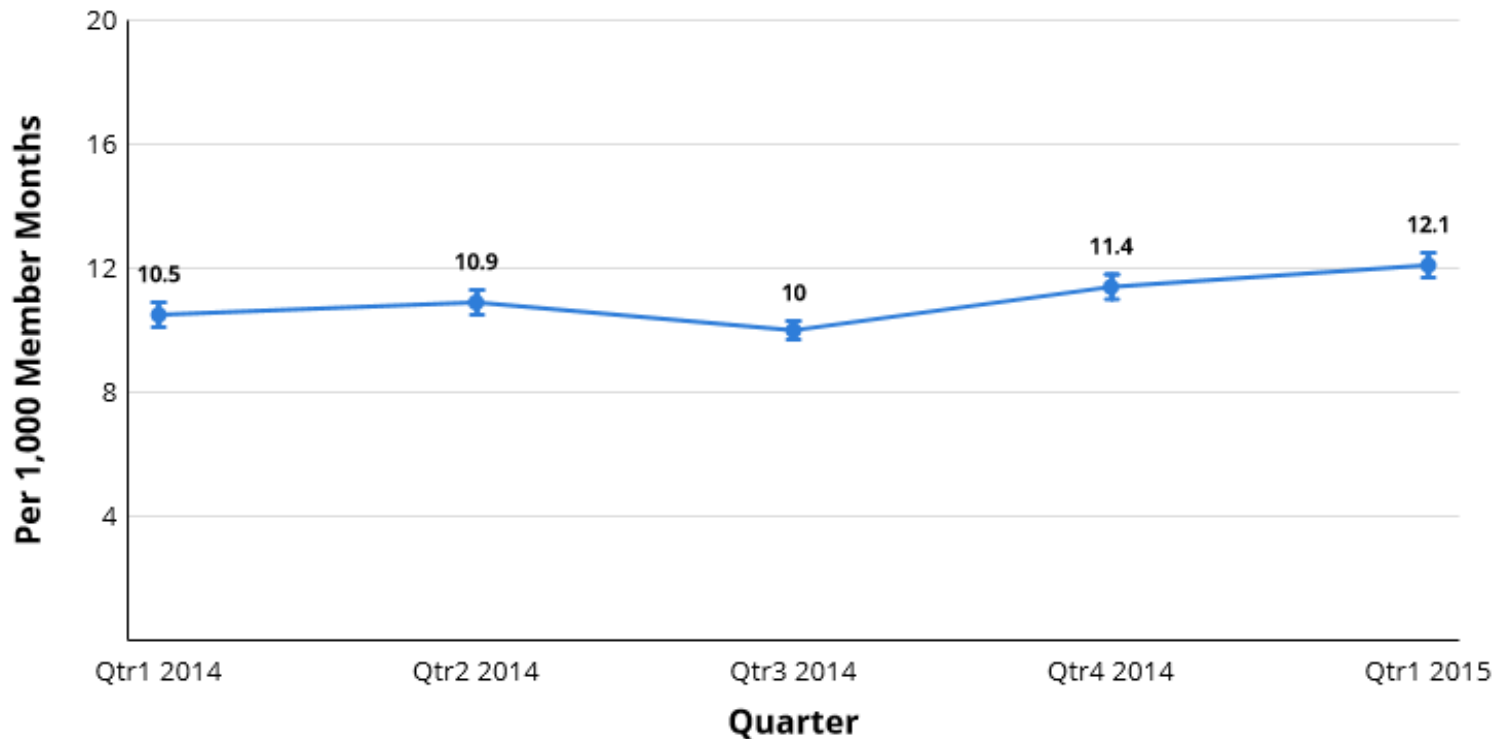
Measure Description:

- The number of emergency department visits reported as member months.

NH MCM Impact:

- Results **STRONG** compared to New England Medicaid managed care in 2013 of 59 visits/member months.
- Results **STRONG** compared to pre-managed care rates in 2012 of 64.2 visits/member months.

Ambulatory Care: *Emergency Department Visits Potentially Treatable by Primary Care*



Measure Description:

- Emergency department visits for reasons that might have been managed in a doctor's office (for example, colds, rashes).

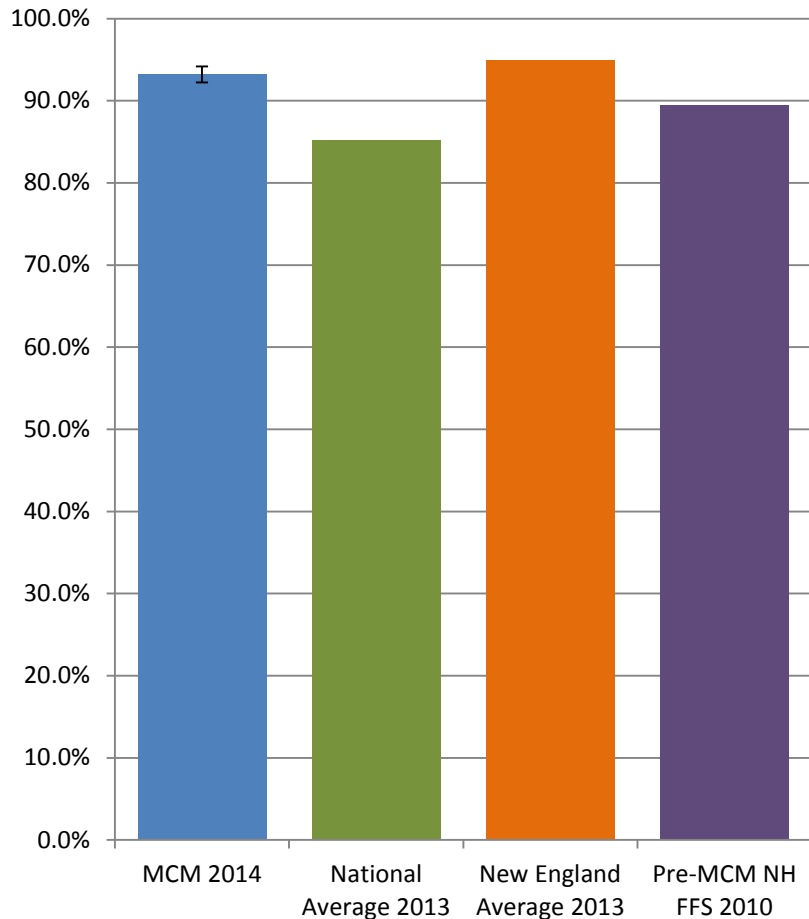
NH MCM Impact:

- Results are **STRONG** compared to pre-managed care rate in 2012 of 16 visits/member months.

ACUTE AND CHRONIC CARE:

Opportunities for Improvement

Appropriate Treatment for Children With URI (URI)



MCM 2014 N = 2,561

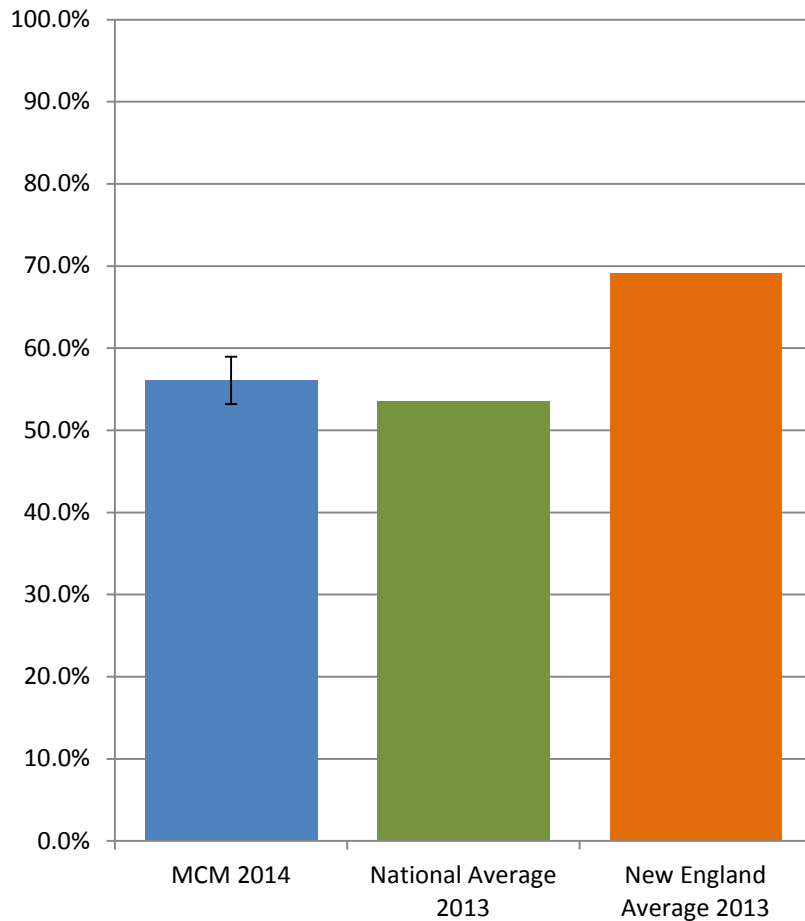
Measure Description:

- Percent of children 3 months-18 years old who were diagnosed with an upper respiratory infection (URI) and were *not* prescribed an antibiotic.

NH MCM Impact:

- Results are **STRONG** compared to pre-managed care rates.
- Results show an **OPPORTUNITY FOR IMPROVEMENT** compared to New England Medicaid managed care rates.

Comprehensive Diabetes Care (CDC): *Eye Exam (Retinal) Performed*



MCM 2014 N = 1,131

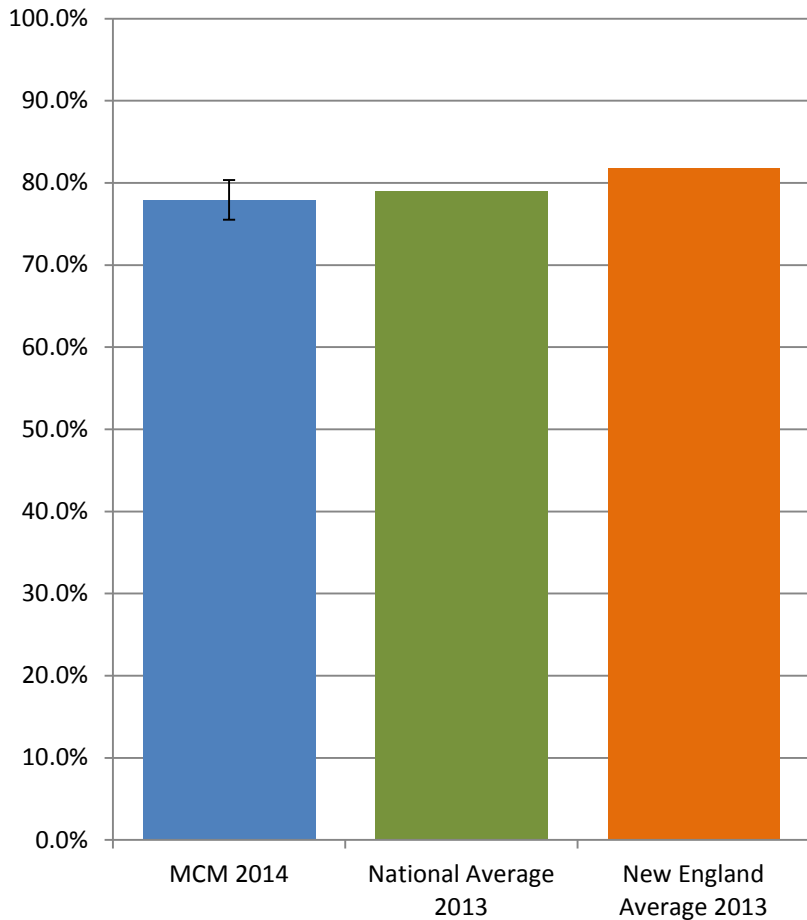
Measure Description:

- Percent of adults 18-75 years old who have diabetes and had an eye exam for diabetic retinal disease in the past year.

NH MCM Impact:

- Results show an **OPPORTUNITY FOR IMPROVEMENT** compared to New England Medicaid managed care rates.
- Performance improvement project topic for one MCO.

Comprehensive Diabetes Care (CDC): *Medical Attention for Nephropathy*



MCM 2014 N = 1,131

Measure Description

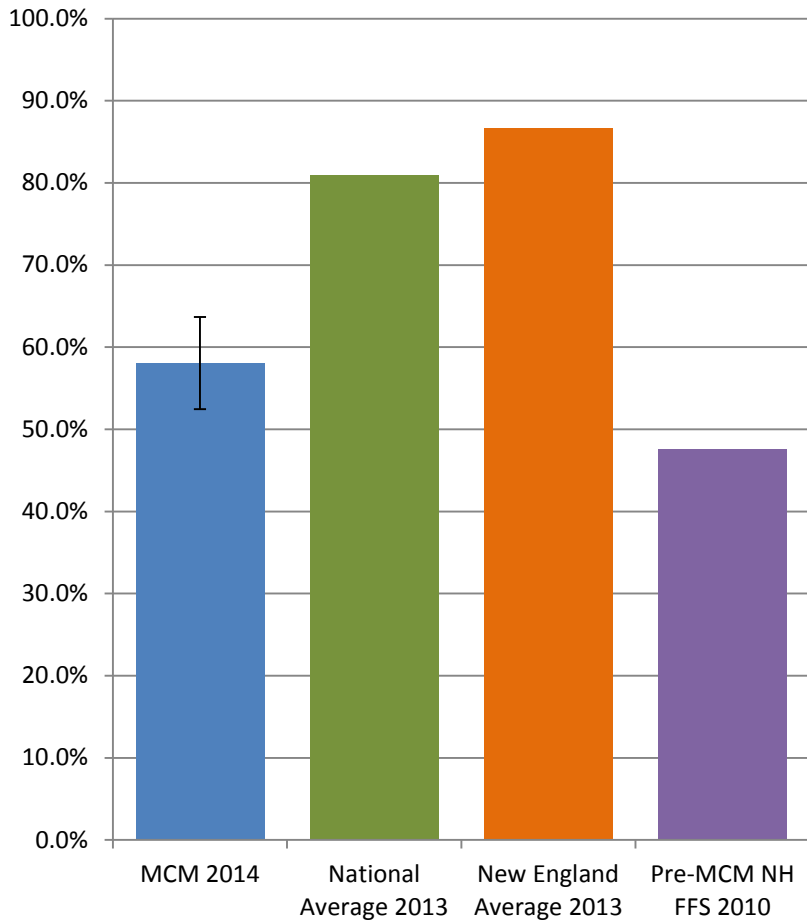
- Percent of adults 18-75 years old who have diabetes and received medical attention for kidney disease in the past year.

NH MCM Impact:

- Results show an **OPPORTUNITY FOR IMPROVEMENT** compared to New England Medicaid managed care rates.

Pharmacotherapy Management of COPD Exacerbation (PCE)

Bronchodilator



MCM 2014 N = 298

Measure Description:

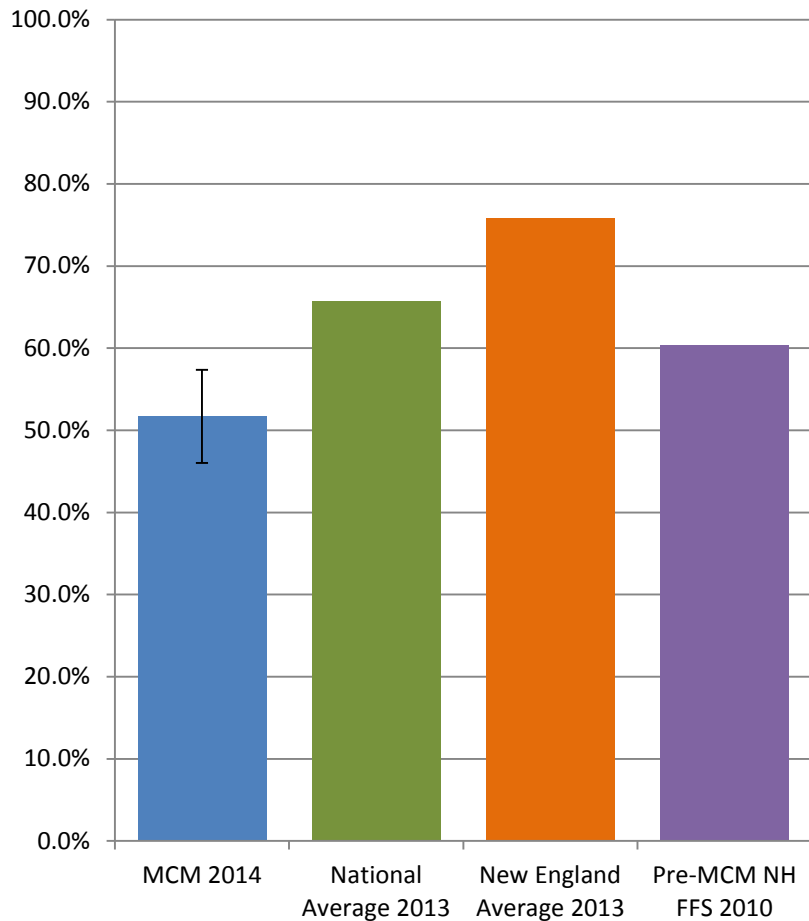
- Percent of COPD exacerbations for adults 40+ years old who had a hospital admission or emergency department visit and filled a prescription for bronchodilator(s) within 30 days.
- NHHPP included.

NH MCM Impact:

- Results are **STRONG** compared to pre-managed care rates.
- Results show an **OPPORTUNITY FOR IMPROVEMENT** compared to National Quality Compass Medicaid managed care rates.

Pharmacotherapy Management of COPD Exacerbation (PCE)

Systemic Corticosteroid



MCM 2014 N = 298

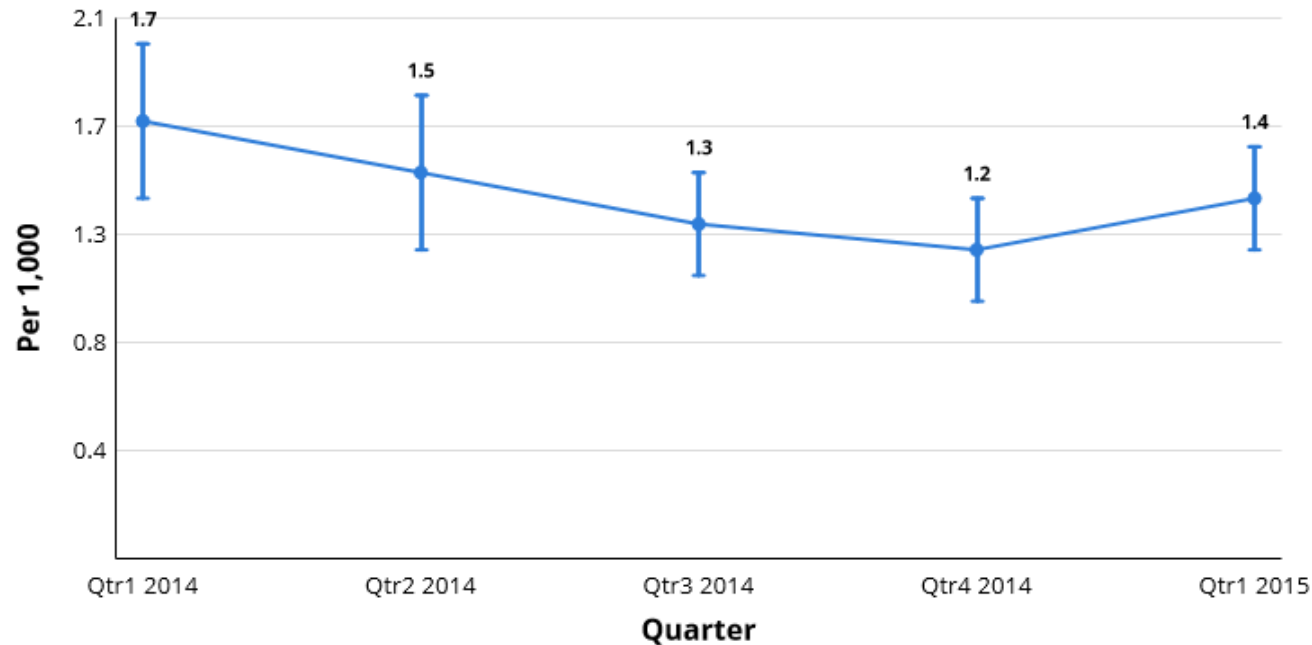
Measure Description:

- Percent of COPD exacerbations for adults ≥ 40 years old who had a hospital admission or emergency department visit and filled a prescription for steroids within 14 days.
- NHHPP included.

NH MCM Impact:

- Results show an **OPPORTUNITY FOR IMPROVEMENT** compared to pre-managed care rates.
- Results show an **OPPORTUNITY FOR IMPROVEMENT** compared to National Quality Compass Medicaid managed care rates.

Ambulatory Care: *Inpatient Hospital Utilization for Ambulatory Care Sensitive Conditions for Adult Medicaid Members*



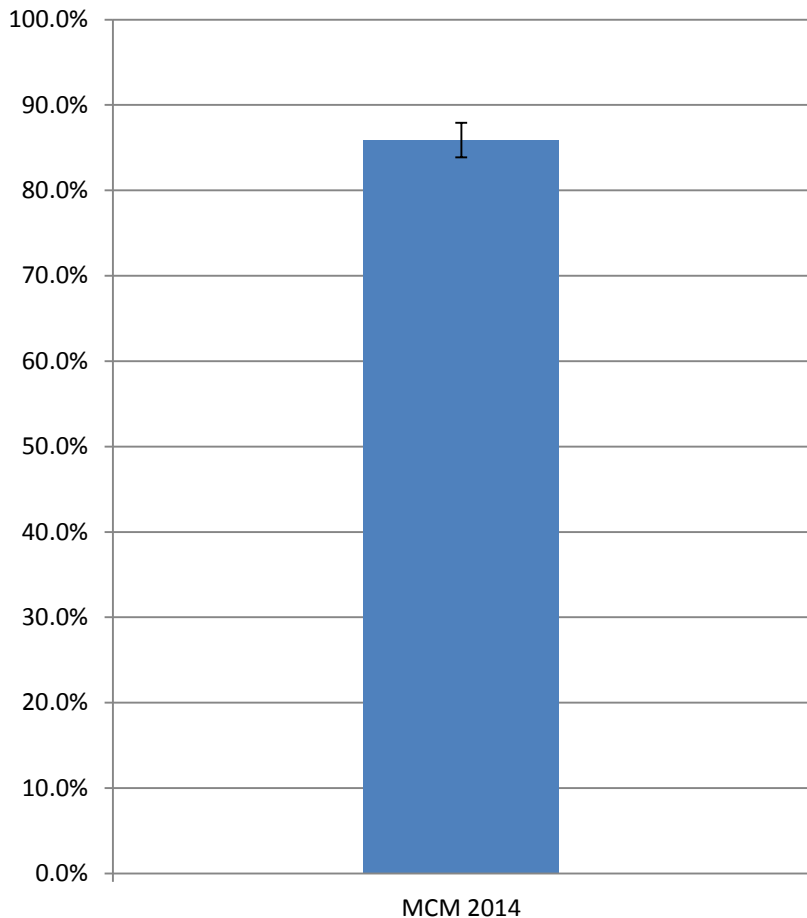
Measure Description:

- Potentially avoidable admissions with good primary care.
- Conditions included asthma, dehydration, bacterial pneumonia, urinary tract infection, and gastroenteritis.

NH MCM Impact:

- Results show an **OPPORTUNITY FOR IMPROVEMENT** compared to pre-managed care rates of 0.5 hospitalizations per 1,000 in 2012.

Annual Monitoring for Patients on Persistent Medications (MPM): *ACE Inhibitors or ARBs*



MCM 2014 N = 1,120

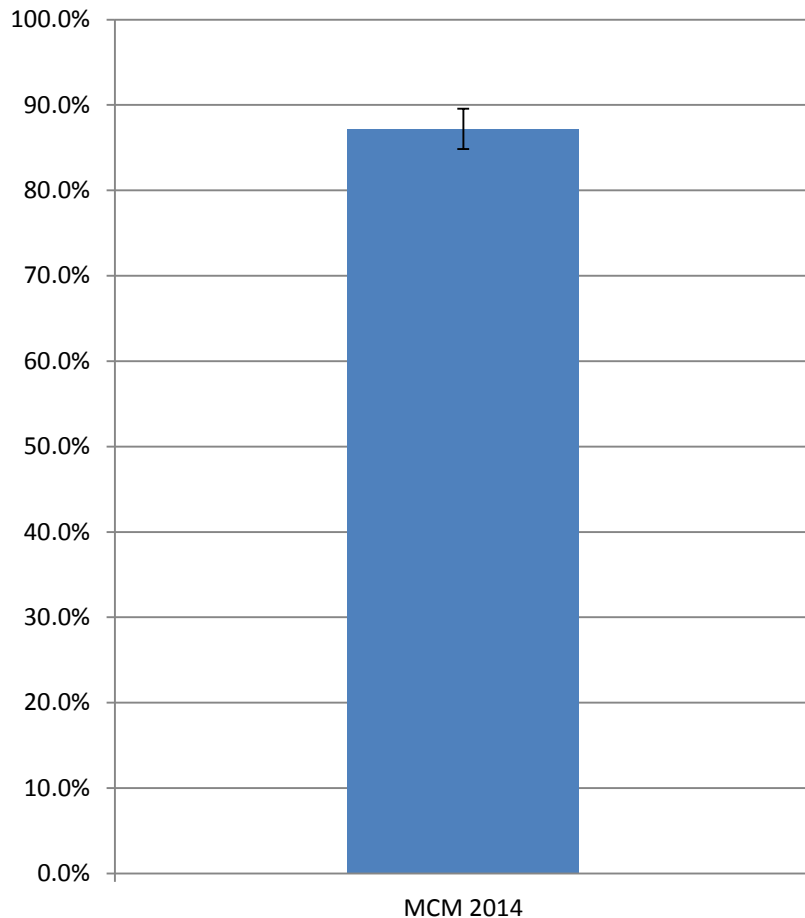
Measure Description

- The percent of adults ≥ 18 years old who took at least 180 treatment days of an angiotensin converting enzyme (ACE) inhibitors or angiotensin receptor blocker (ARB) medication and had at least one lab test that included a potassium and a creatinine test in the past year.

NH MCM Impact:

- Comparison data will be available October 2015.

Annual Monitoring for Patients on Persistent Medications (MPM): *Diuretics*



MCM 2014 N = 773

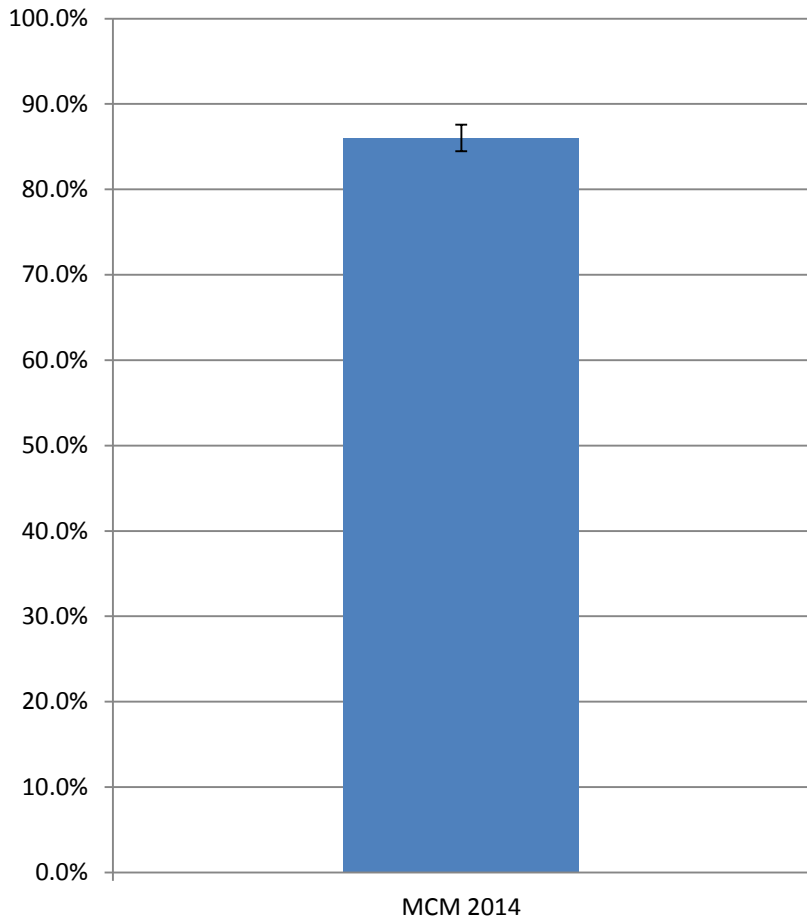
Measure Description

- The percent of adults ≥ 18 years old who took at least 180 treatment days of diuretic medication and had at least one lab test that included a potassium and creatinine in the past year.

NH MCM Impact:

- Comparison data will be available October 2015.

Annual Monitoring for Patients on Persistent Medications (MPM): *Total*



MCM 2014 N = 1,917

Measure Description

- The percent of adults ≥ 18 years old who took at least 180 treatment days for each medication taken (an angiotensin converting enzyme (ACE) inhibitors or angiotensin receptor blocker (ARB), digoxin, or diuretic, and had at least one lab test that included a potassium and creatinine test and if on digoxin, a digoxin test, in the past year.

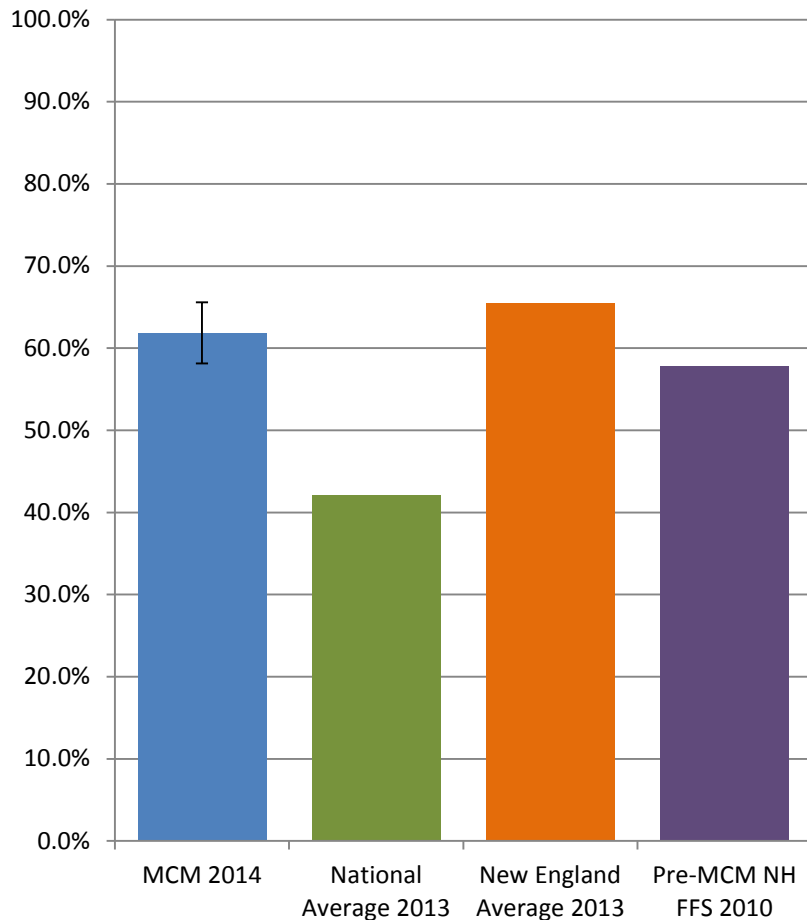
NH MCM Impact:

- Comparison data will be available October 2015.

BEHAVIORAL HEALTH CARE:

Strong and Average Results

Follow-Up After Hospitalization for Mental Illness (FUH): 7-Day Follow-Up (HEDIS Measure)



MCM 2014 N = 658

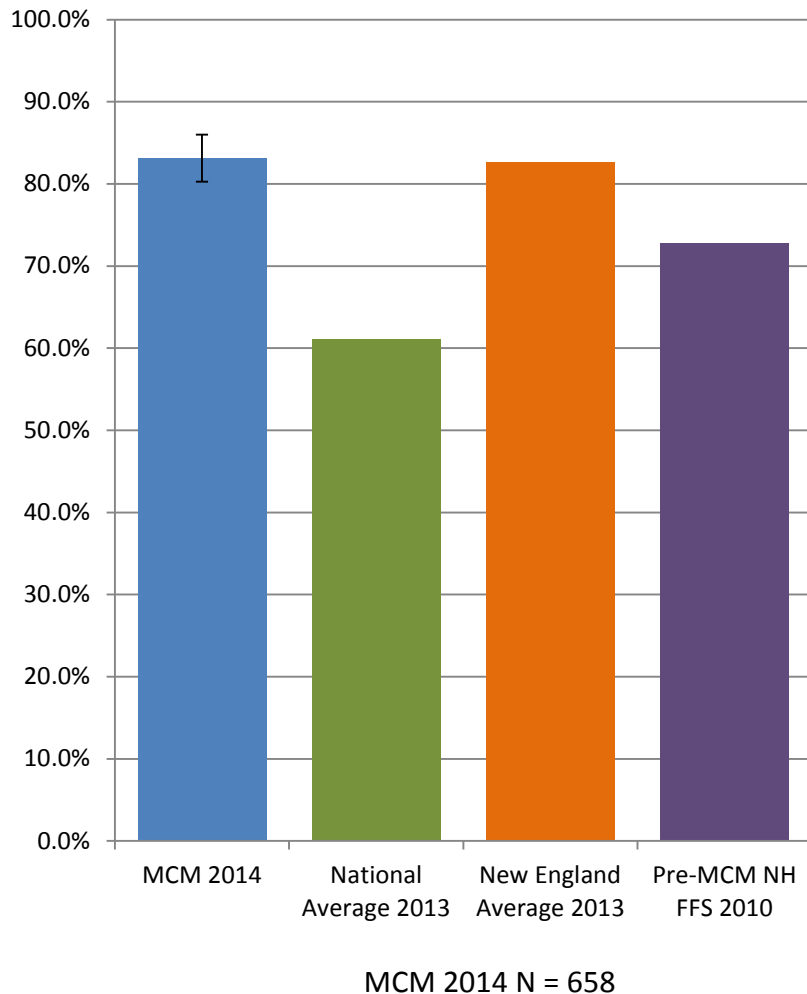
Measure Description:

- Percent of children (≥ 6 years old) and adults who had a follow-up visit with a mental health practitioner within 7 days of discharge after hospitalization for mental illness.
- NH Hospital adults 21-64 years old are excluded.
- NHHPP included.

NH MCM Impact:

- Results are **STRONG** compared to pre-managed care rates.
- Results are **AVERAGE** compared to New England Medicaid managed care rates.

Follow-Up After Hospitalization for Mental Illness (FUH): 30-Day Follow-Up



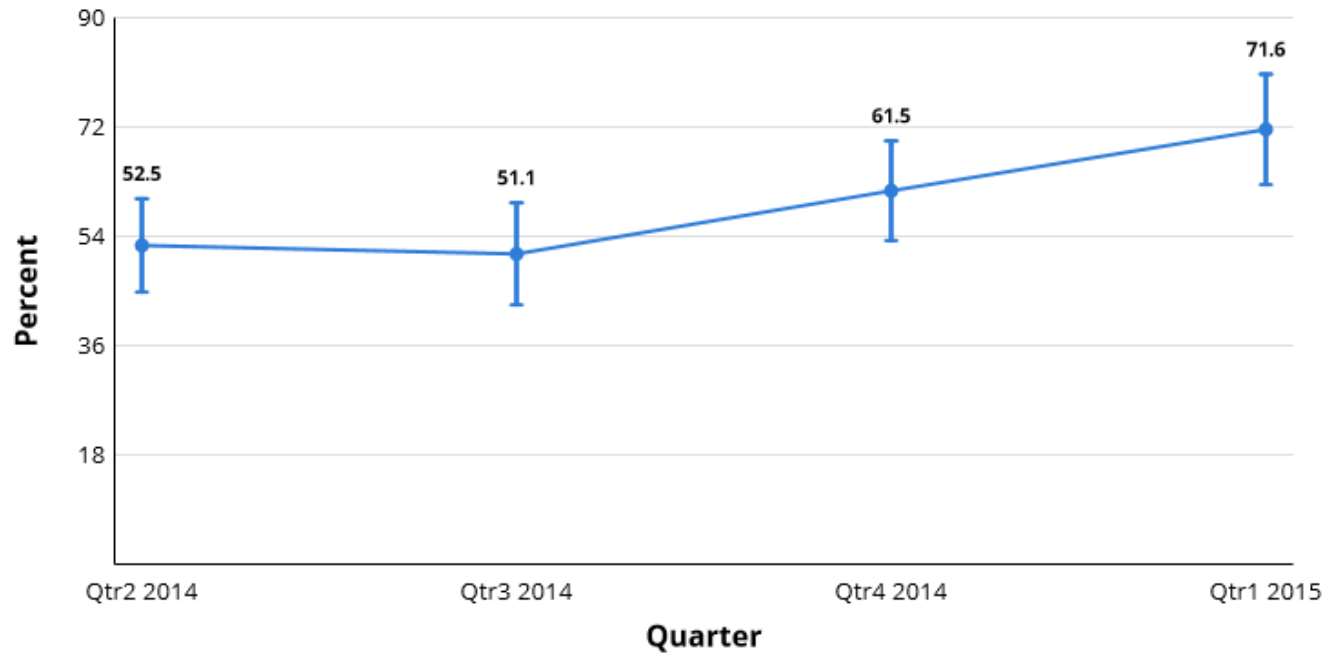
Measure Description:

- Percent of children (≥ 6 years old) and adults who had a follow-up visit with a mental health practitioner within 30 days of discharge after hospitalization for mental illness.
- NH Hospital adults 21-64 years old are excluded.
- NHHPP included.

NH MCM Impact:

- Results are **STRONG** compared to pre-managed care rates.
- Results are **AVERAGE** compared to New England Medicaid managed care rates.

New Hampshire Hospital Discharges: *Follow-up Appointment 7 Calendar Days After NHH Discharge*



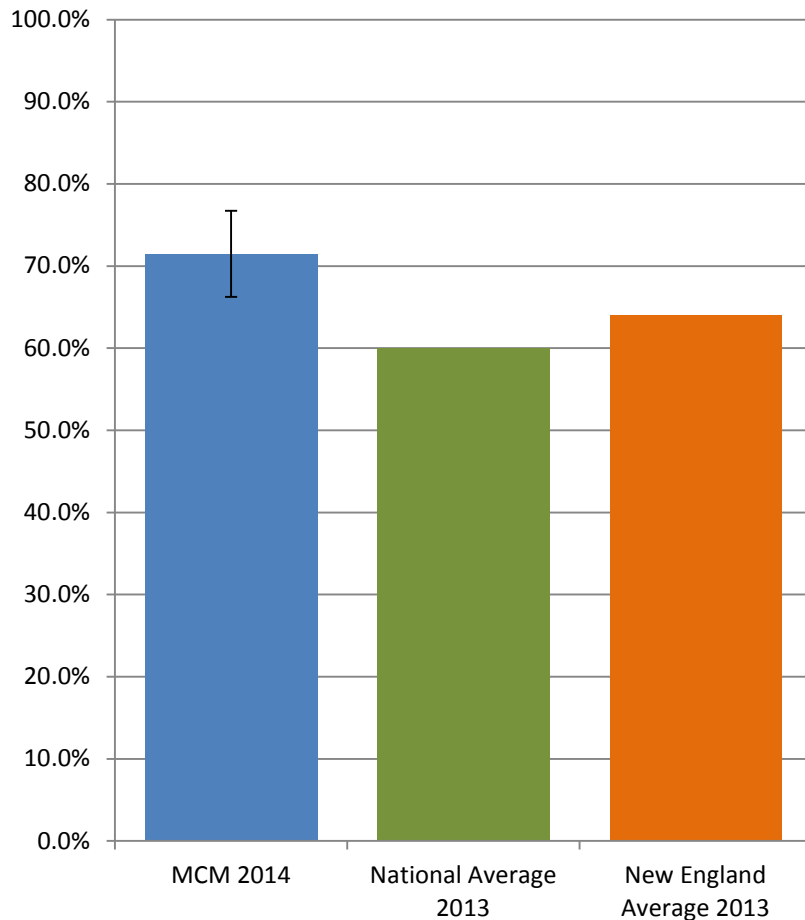
Measure Description:

- The number of adult members who were discharged from New Hampshire Hospital and followed-up with a provider within 7 days of discharge.

NH MCM Impact:

- Results are **STRONG** based on the trend.

Adherence to Antipsychotic Medications for Individuals With Schizophrenia (SAA)



MCM 2014 N = 284

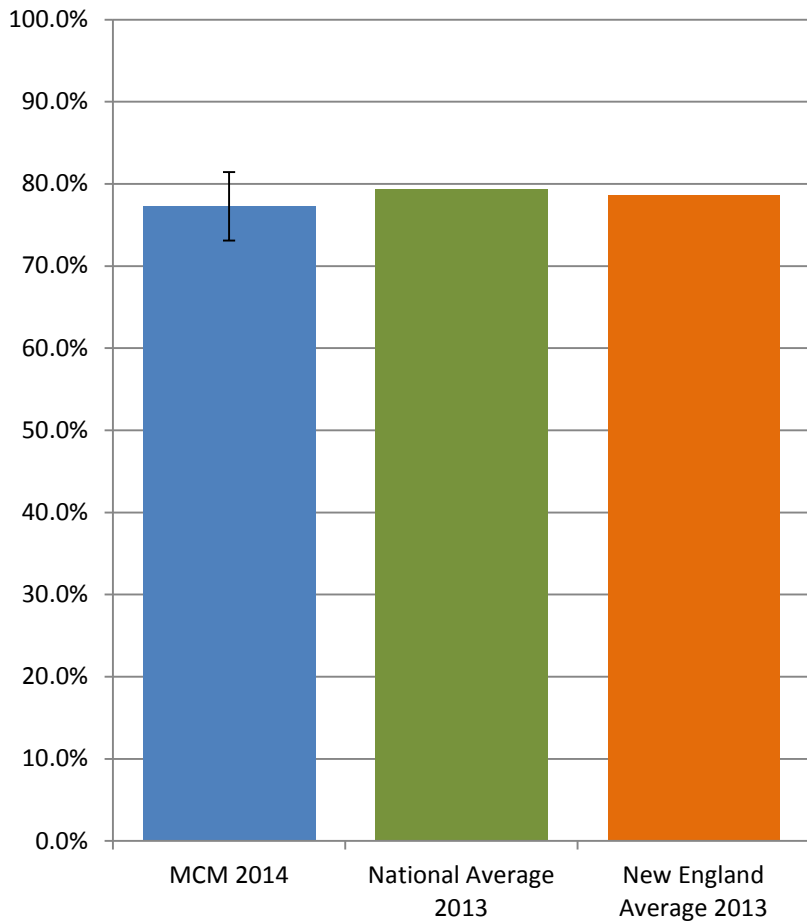
Measure Description:

- Percent of adults 19–64 years old with schizophrenia or bipolar disorders who are given antipsychotic medication and took them for at least 80% of their treatment period.

NH MCM Impact:

- Results are **STRONG** compared to New England Medicaid managed care rates.

Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medication (SSD)



MCM 2014 N = 387

Measure Description:

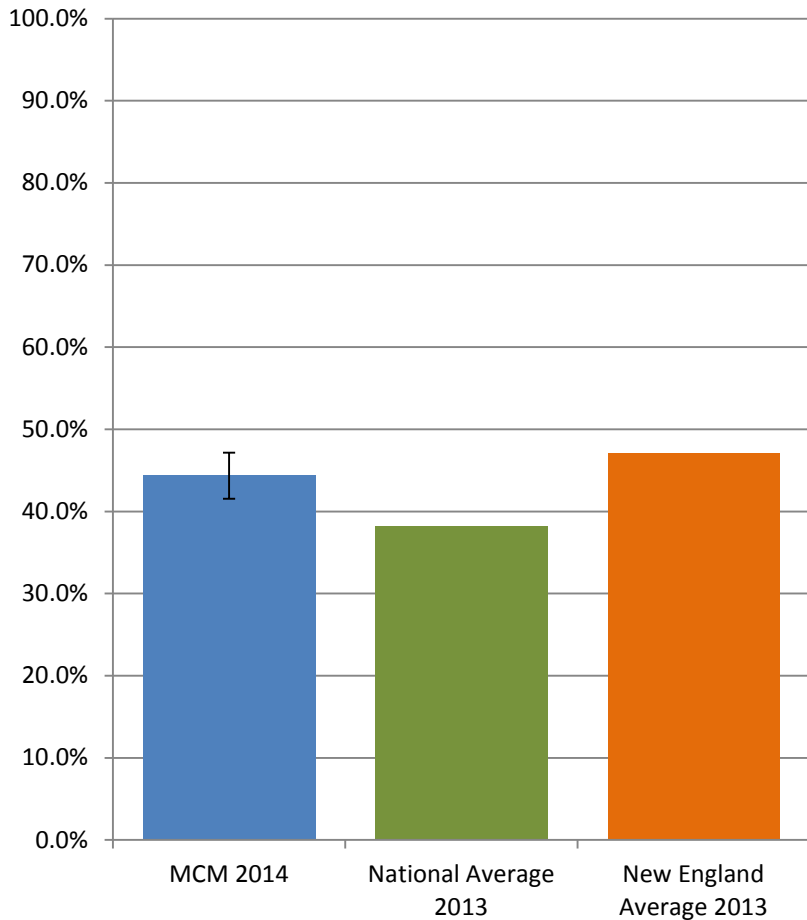
- Percent of adults 18–64 years old with schizophrenia or bipolar disorders who are taking antipsychotic medication and received a diabetes screening test during the past year.

NH MCM Impact:

- Results are **AVERAGE** compared to New England Medicaid managed care rates.

Initiation and Engagement of AOD Dependence Treatment (IET):

Initiation of AOD Treatment - Total



MCM 2014 N = 1,211

Measure Description

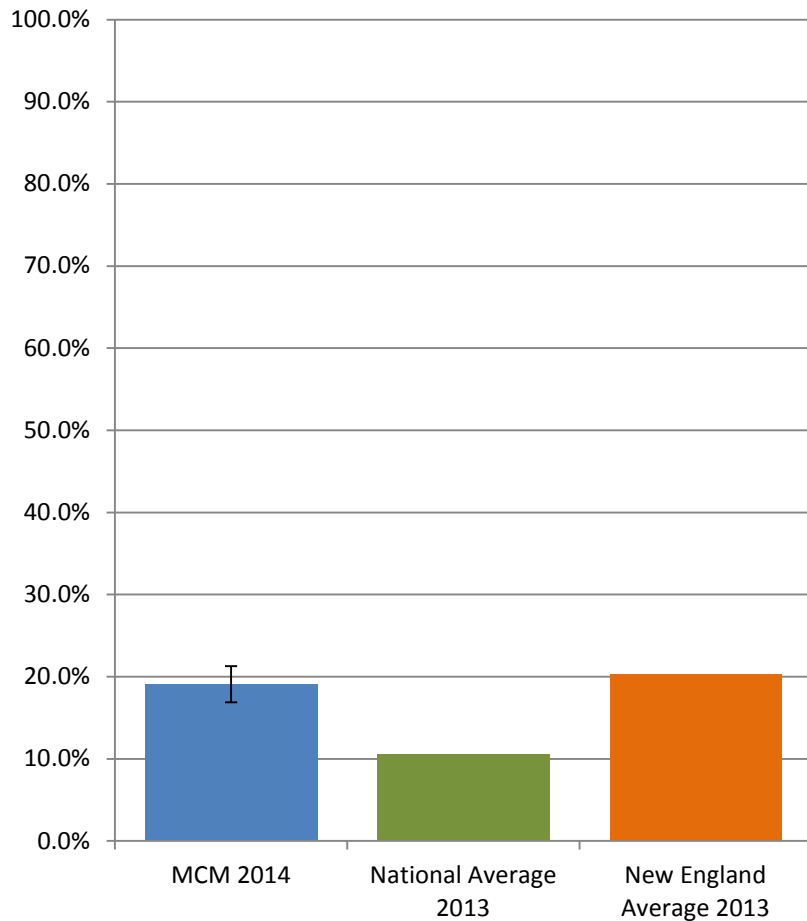
- Percent of members ≥ 13 years old who had a new episode of alcohol or other drug (AOD) dependence and started treatment within 14 days of the diagnosis.
- NHHPP included.

NH MCM Impact:

- Results are **AVERAGE** compared to New England Medicaid managed care rates.

Initiation and Engagement of AOD Dependence Treatment (IET):

Engagement of AOD Treatment - Total



Well Sense MCM 2014 N = 1,192

Measure Description

- Percent of member ≥ 13 years old who had a new episode of alcohol or other drug (AOD) dependence and started treatment within 14 days of the diagnosis and had at least 2 additional services within 30 days of the initiation visit.
- NHHPP included.

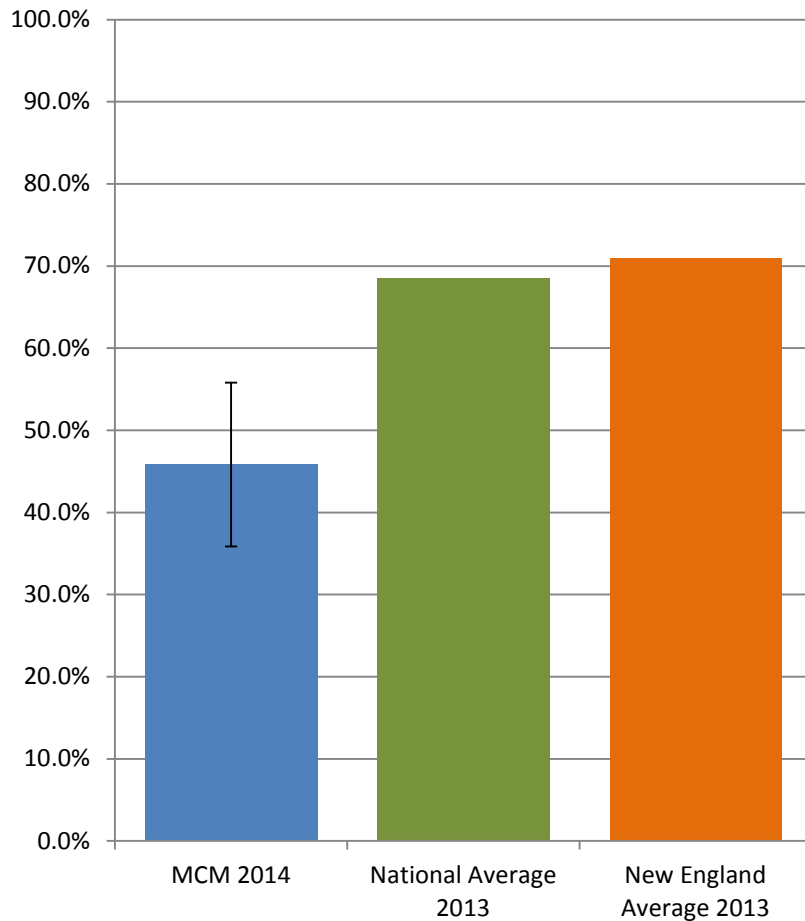
NH MCM Impact:

- Results are **AVERAGE** compared to New England Medicaid managed care rates.

BEHAVIORAL HEALTH CARE:

Opportunities for Improvement

Diabetes Monitoring for People With Diabetes and Schizophrenia (SMD)



MCM 2014 N = 97

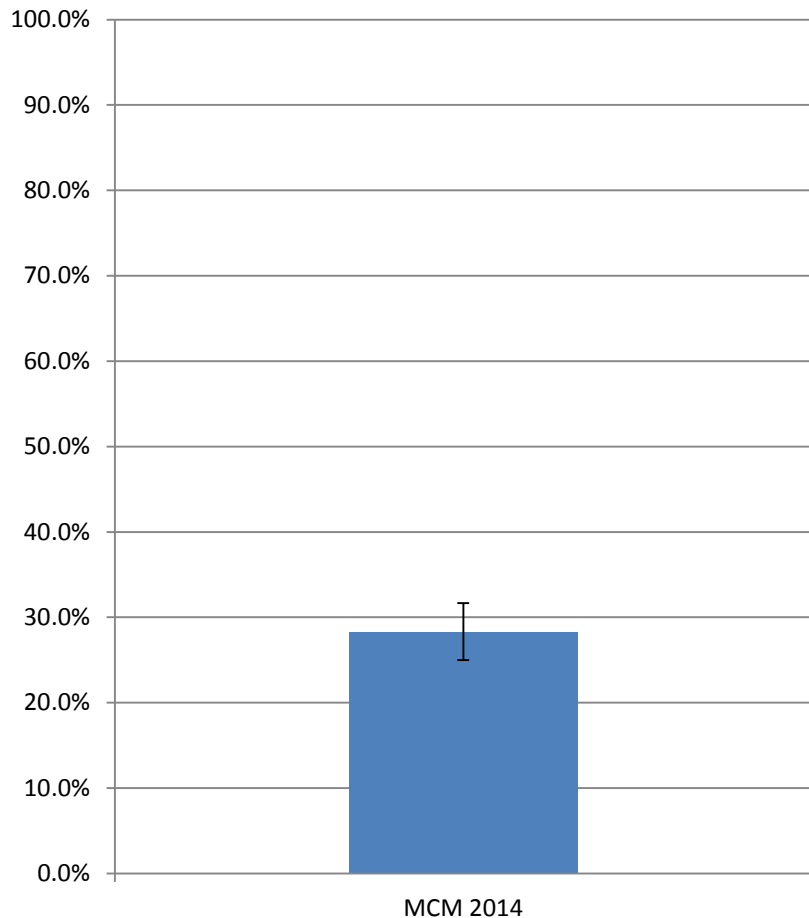
Measure Description:

- Percent of adults 18–64 years old with schizophrenia disorders who are taking antipsychotic medication and received both a LDL-C and HbA1c test during the past year.

NH MCM Impact:

- Results show an **OPPORTUNITY FOR IMPROVEMENT** compared to New England Medicaid managed care rates.
- Performance improvement project topic for one MCO.

Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM): *Total*



MCM 2014 N = 699

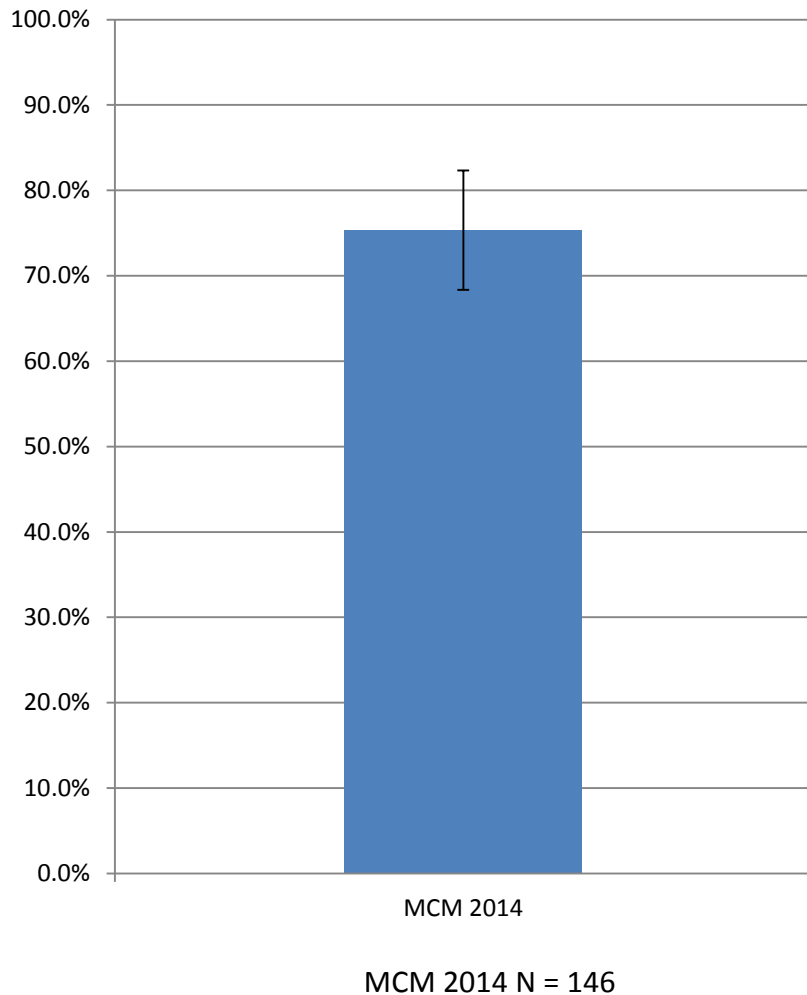
Measure Description:

- Percent of children 1-17 years old who taking ≥ 2 antipsychotic medications and had metabolic testing.

NH MCM Impact:

- Comparison data will be available October 2015.

Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP): *Total*



Measure Description

- Percent of children 1-17 years old who started on an antipsychotic medication and had documentation of receiving psychosocial care as the first-line treatment.

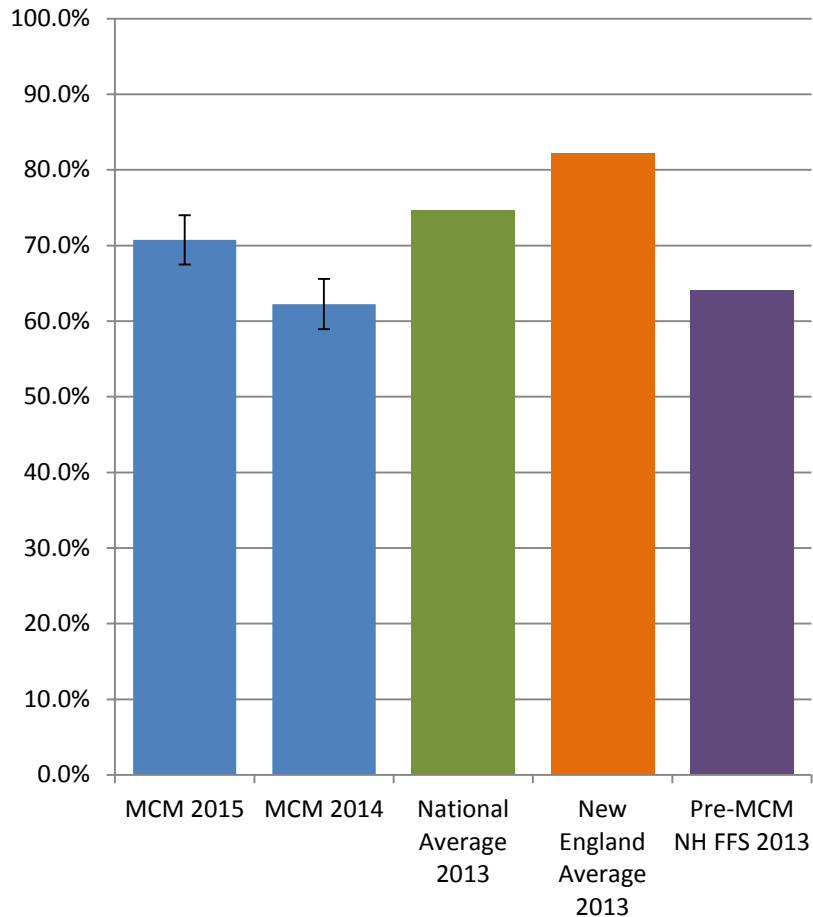
NH MCM Impact:

- Comparison data will be available October 2015.

CONSUMER ASSESSMENT OF HEALTH PROVIDERS AND SYSTEMS (CAHPS):

Strong and Average Results

Overall Rating of Health Plan 8, 9, or 10 on a scale of 1-10: *Adults*



MCM 2015 N = 754
MCM 2014 N = 1,376

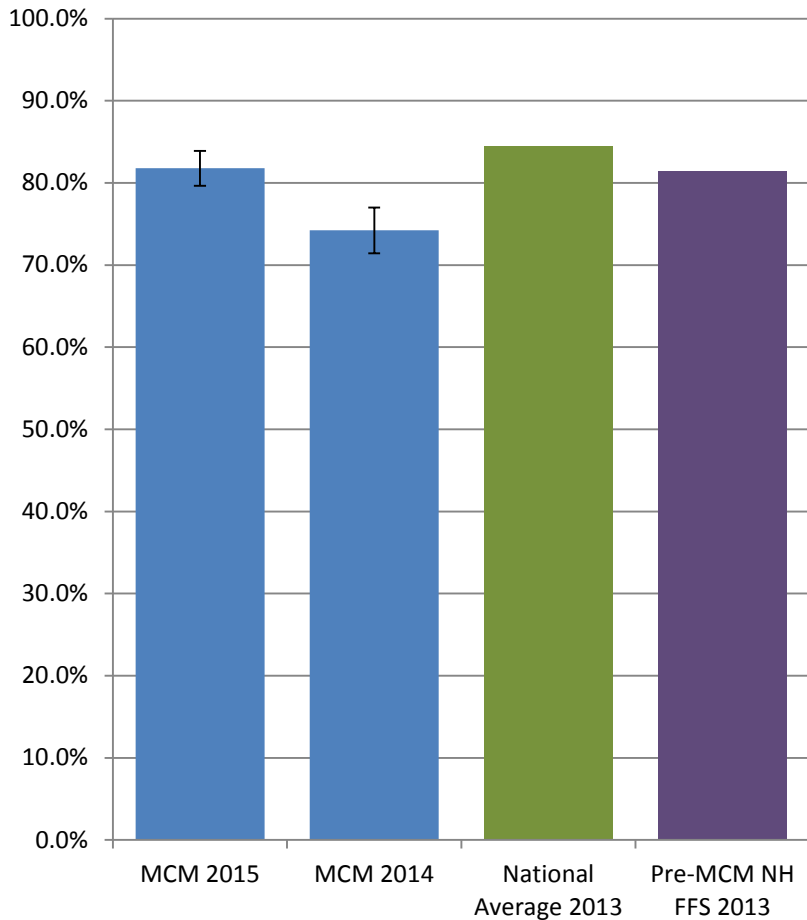
Measure Description:

- Percent of adults who rated their plan an 8, 9, or 10 on a scale of 1-10 where 1 is worst and 10 is best.

NH MCM Impact:

- Results are **STRONG** compared to pre-managed care rates.
- Results are **STRONG** compared to the 2014 baseline survey.
- Results show an **ROOM FOR IMPROVEMENT** compared to New England managed care.

Overall Rating of Health Plan 8, 9, or 10 on a scale of 1-10: *Children*



MCM 2015 N = 1,264

MCM 2014 N = 949

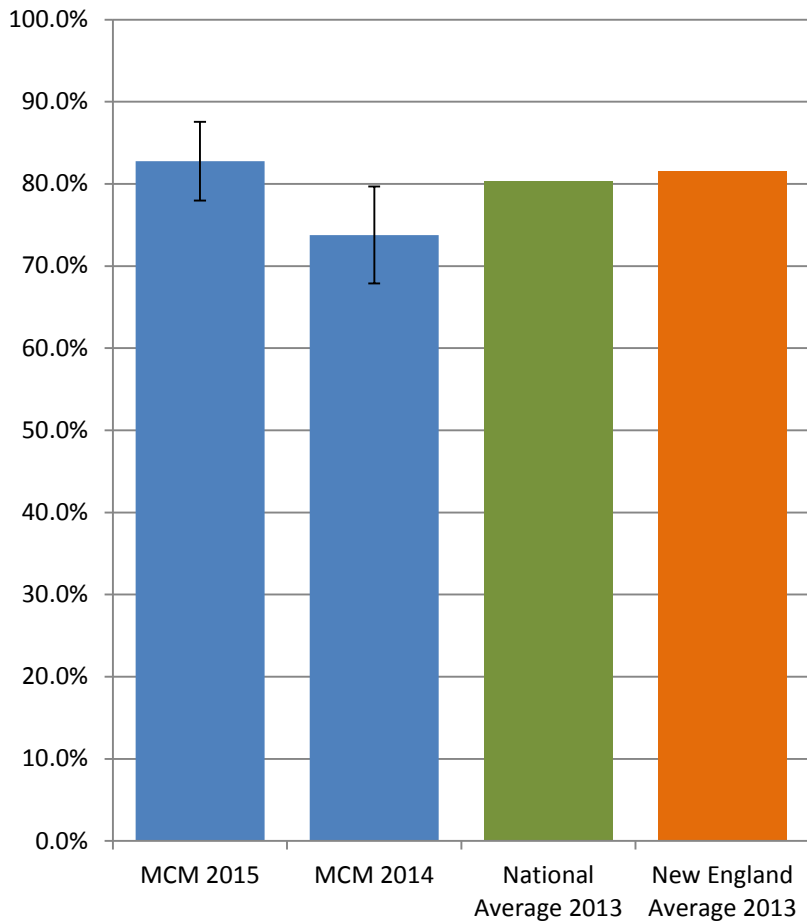
Measure Description:

- Percent of children whose caregivers rated their plan an 8, 9, or 10 on a scale of 1-10 where 1 is worst and 10 is best.

NH MCM Impact:

- Results are **STRONG** compared to the 2014 baseline survey.
- Results are **AVERAGE** compared to pre-managed care rates.

Customer Service Provided Information or Help (Usually or Always): *Adults*



MCM 2015 N = 237

MCM 2014 N = 279

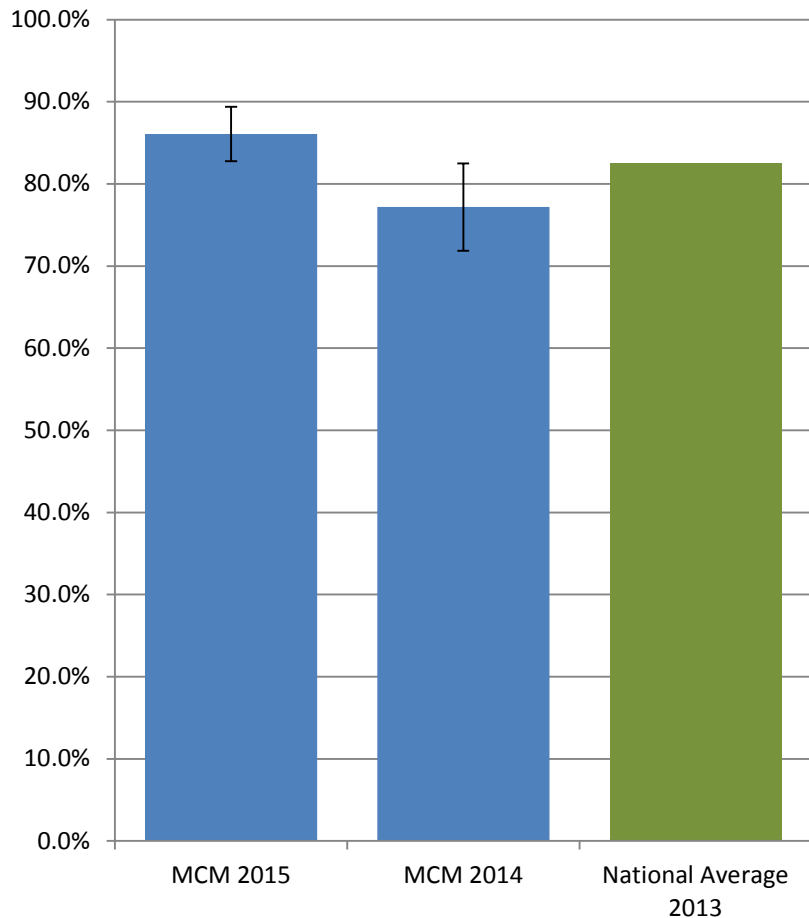
Measure Description:

- Percent of adults who reported usually or always receiving information or help from health plan customer service.

NH MCM Impact:

- Results are **AVERAGE** compared to New England Medicaid managed care rates.

Customer Service Provided Information or Help (Usually or Always): *Children*



MCM 2015 N = 422
MCM 2014 N = 240

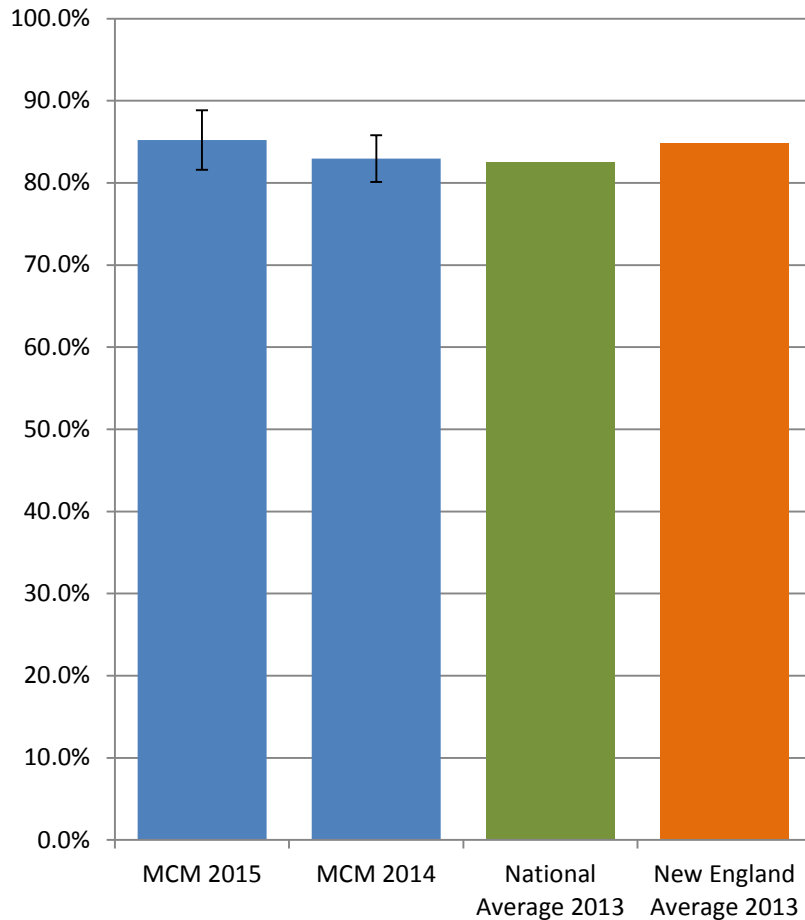
Measure Description:

- Percent of children whose caregiver reported usually or always receiving information or help from health plan customer service.

NH MCM Impact:

- Results are **AVERAGE** compared to the 2014 baseline survey.

Ease of Getting Care, Tests or Treatment (Usually or Always): *Adults*



MCM 2015 N = 599
MCM 2014 N = 1,106

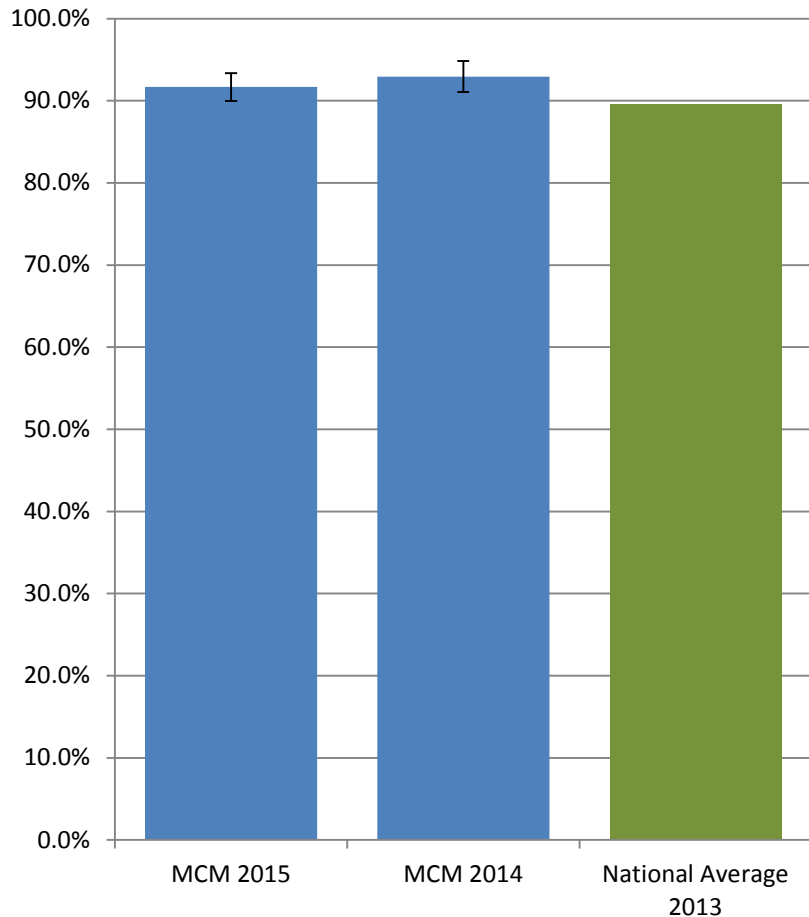
Measure Description:

- Percent of adults who reported usually or always getting needed care, tests or treatment.

NH MCM Impact:

- Results are **AVERAGE** compared to New England Medicaid managed care rates and the 2014 baseline survey.

Ease of Getting Care, Tests or Treatment (Usually or Always): *Children*



MCM 2015 N = 1,008
MCM 2014 N = 706

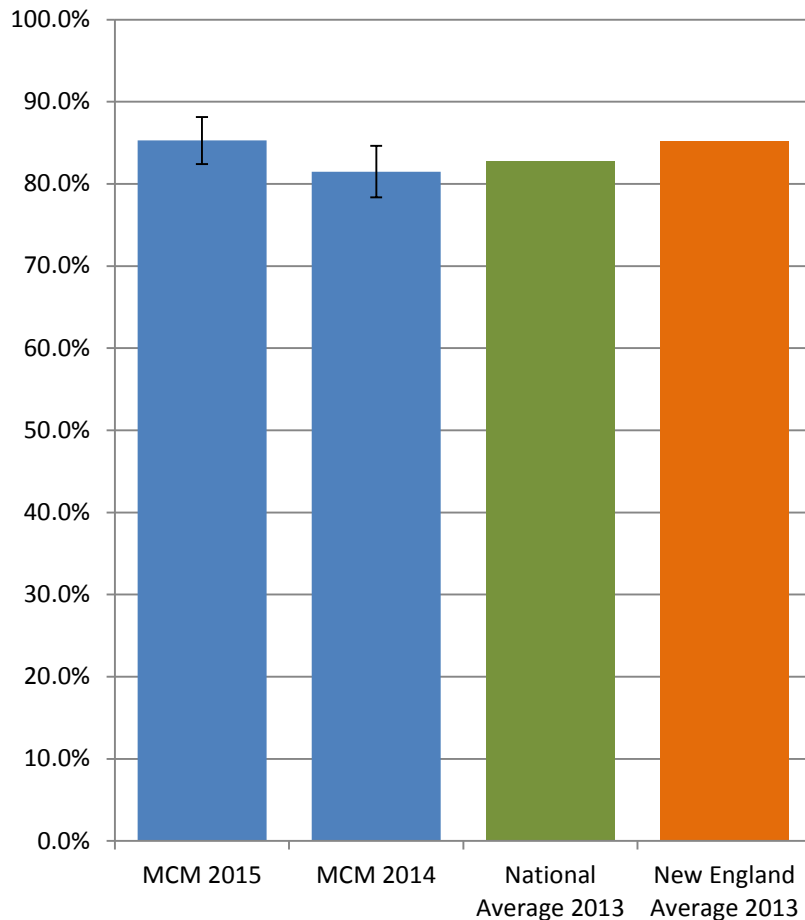
Measure Description:

- Percent of children whose caregiver reported usually or always getting needed care, tests or treatment.

NH MCM Impact:

- Results are **AVERAGE** compared to the 2014 baseline survey.

Got Routine or Check-up Appointment as Soon as Needed (Usually or Always): *Adults*



MCM 2015 N = 594
MCM 2014 N = 965

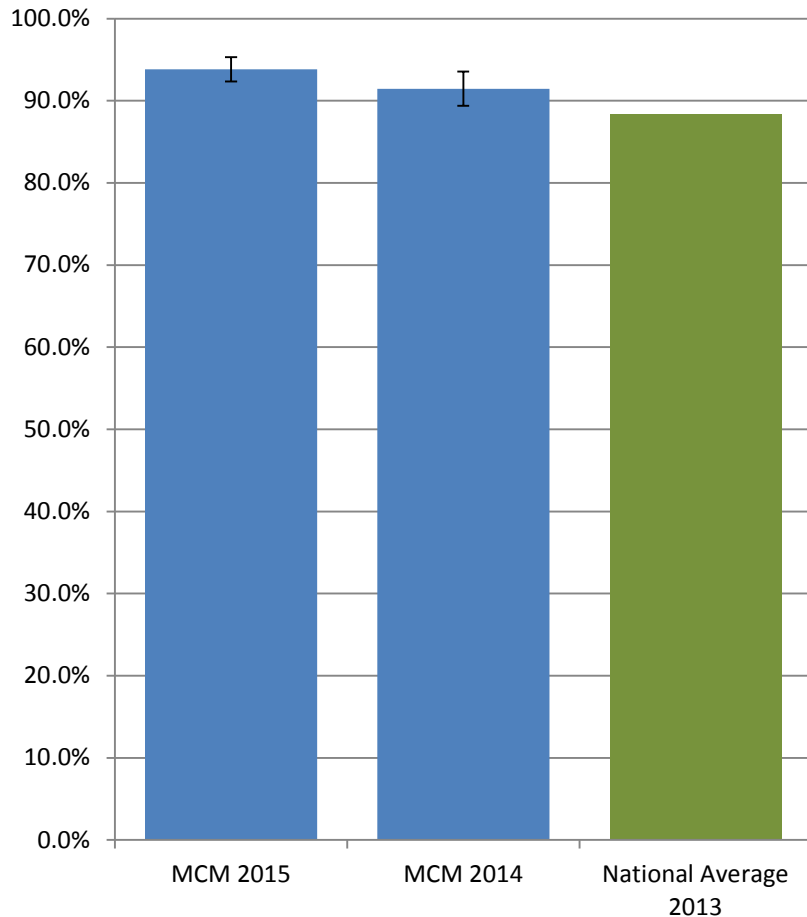
Measure Description:

- Percent of adults who reported usually or always getting routine or check-up appointments as soon as they were needed.

NH MCM Impact:

- Results are **AVERAGE** compared to New England Medicaid managed care rates.
- Results are **AVERAGE** compared to the 2014 baseline survey.

Got Routine or Check-up Appointment as Soon as Needed (Usually or Always): *Children*



MCM 2015 N = 1,021
MCM 2014 N = 692

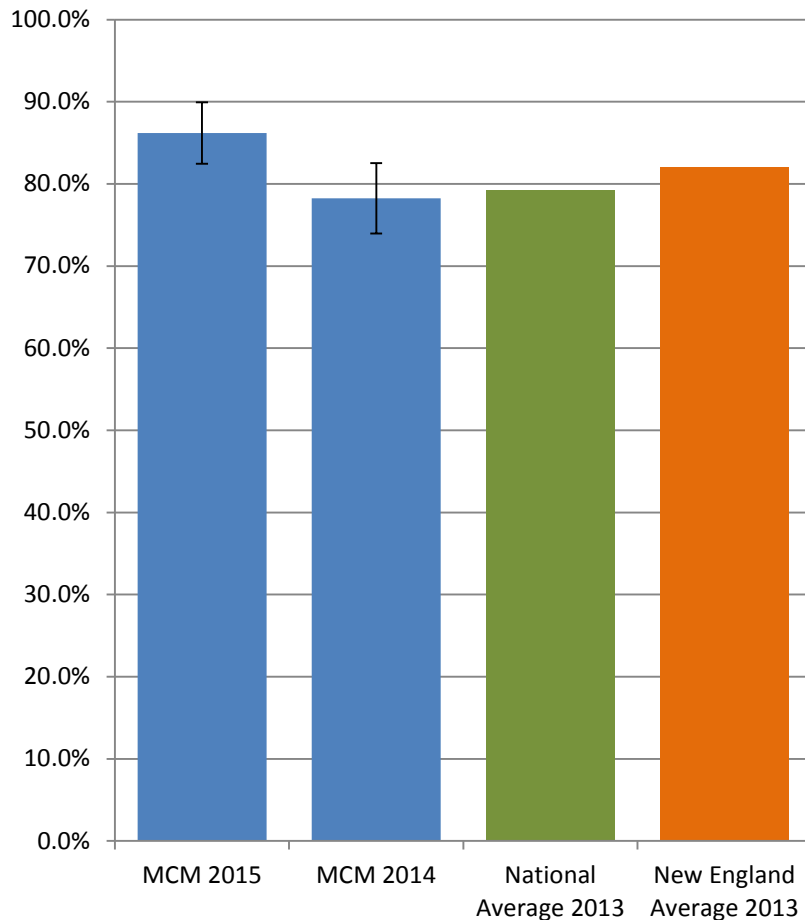
Measure Description:

- Percent of children whose caregiver reported usually or always getting routine or check-up appointments as soon as they were needed.

NH MCM Impact:

- Results are **AVERAGE** compared to the 2014 baseline survey.

Doctor Informed or Up-to-date about Care From Other Health Providers (Usually or Always): *Adults*



MCM 2015 N = 330
MCM 2014 N = 612

Measure Description:

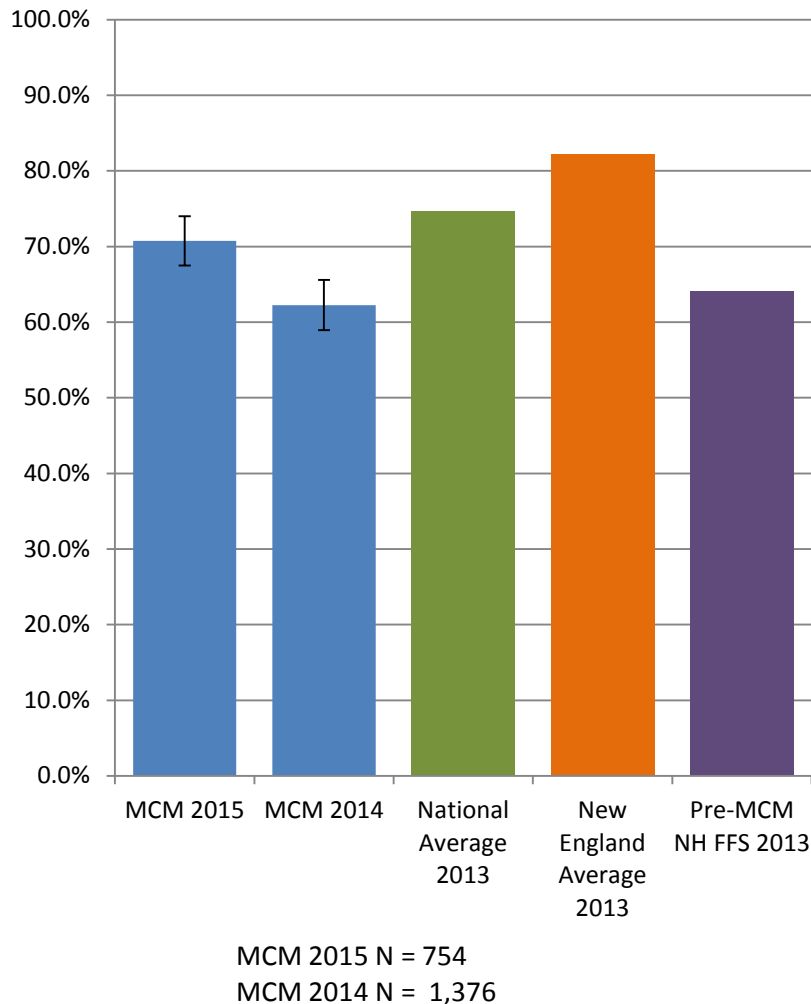
- Percent of adults who reported usually or always that their personal doctor was up-to-date about care provided from other doctors and health providers.

NH MCM Impact:

- Results are **STRONG** compared to New England Medicaid managed care rates.
- Results are **AVERAGE** compared to the 2014 baseline survey.

CONSUMER ASSESSMENT OF HEALTH PROVIDERS AND SYSTEMS (CAHPS): *Opportunities for Improvement*

Overall Rating of Health Plan 8, 9, or 10 on a scale of 1-10: *Adults*



Measure Description:

- Percent of adults who rated their plan an 8, 9, or 10 on a scale of 1-10 where 1 is worst and 10 is best.

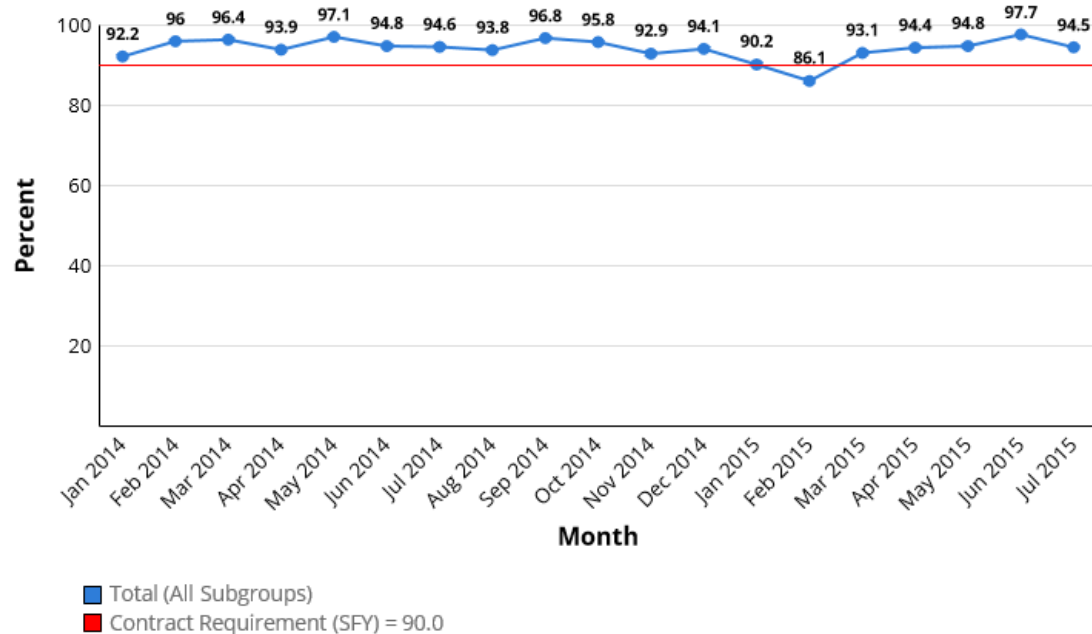
NH MCM Impact:

- Results are **STRONG** compared to the pre-managed care rates.
- Results are **STRONG** compared to the 2014 baseline survey.
- Results show an **ROOM FOR IMPROVEMENT** compared to New England managed care.

CARE MANAGEMENT PROGRAM OPERATIONS:

Strong and Average Results

Member Call Center: *Calls Answered in 30 seconds*



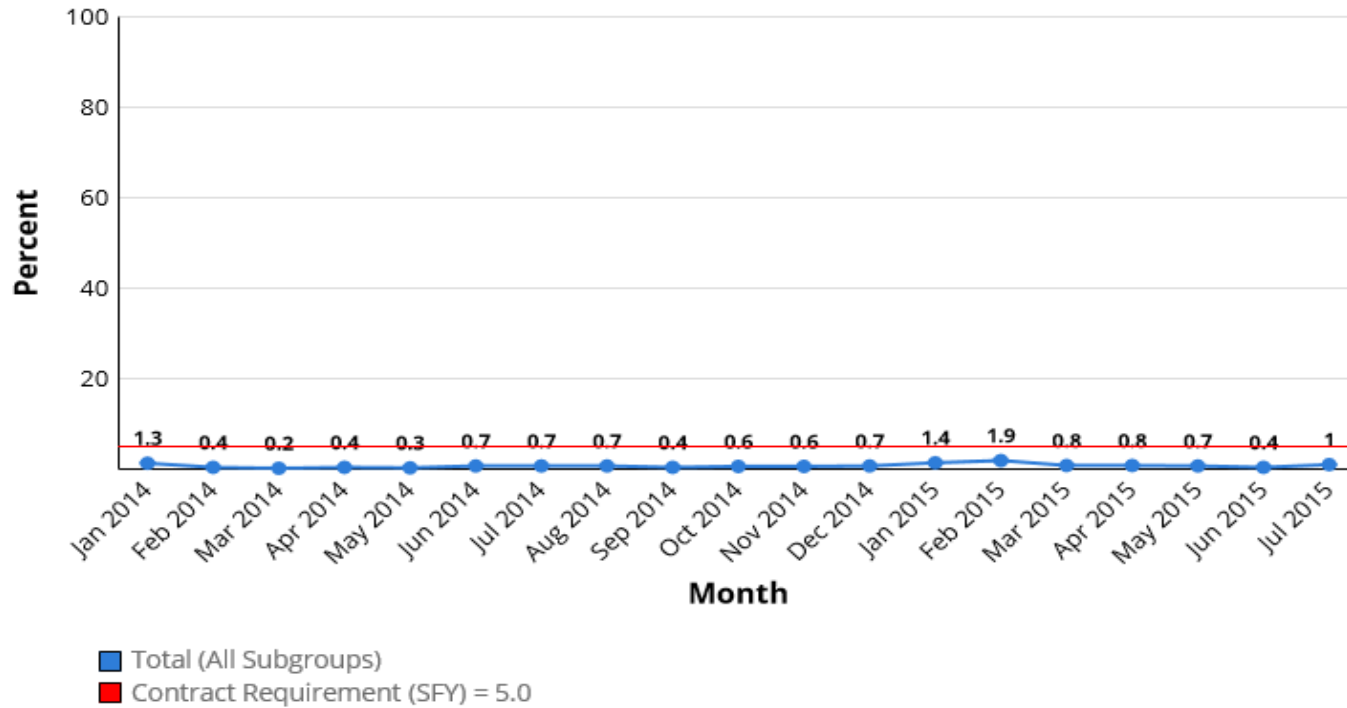
Measure Description:

- The number of calls from a member to their MCO that were answered within 30 seconds.

NH MCM Impact:

- Results are **STRONG** compared to New England Medicaid managed care percent of 84% in 2013.

Member Call Center: *Call Abandonment Rate*



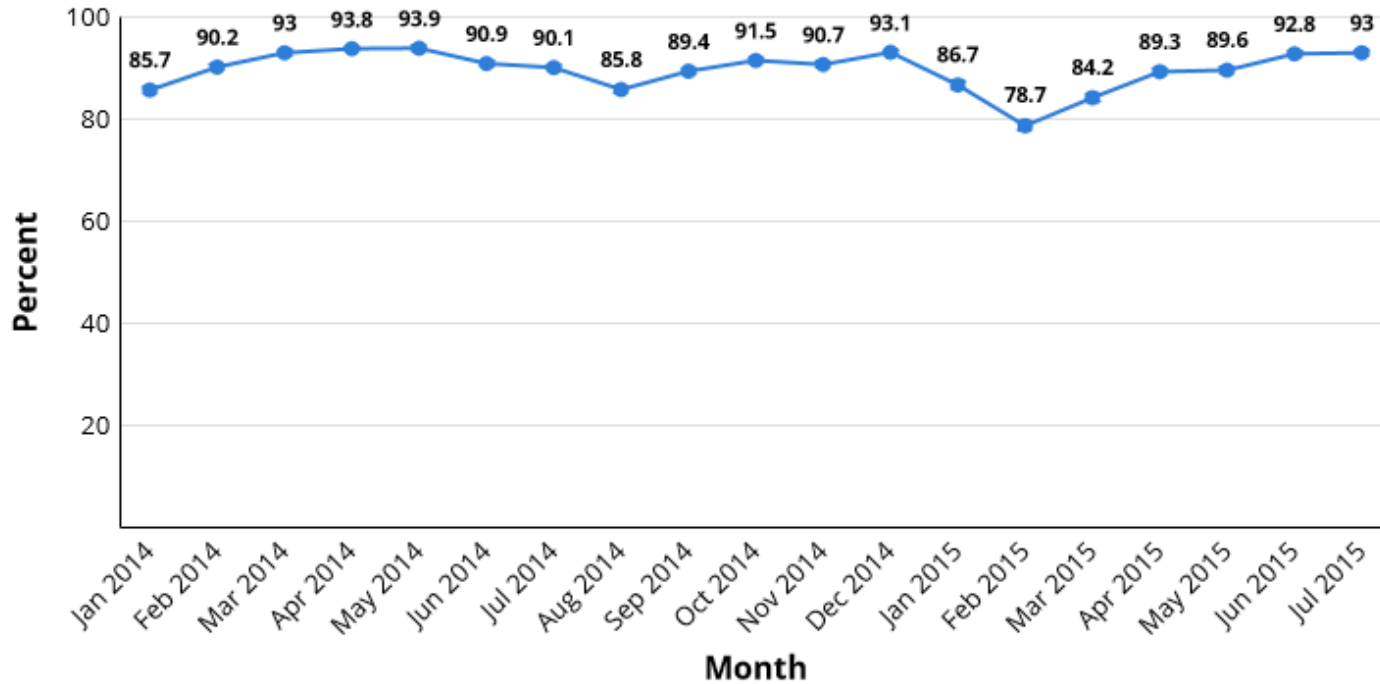
Measure Description:

- This measure describes the percent of member calls that are abandoned.

NH MCM Impact:

- Results are **STRONG** compared to MCM contract standard.

Provider Call Center: *Calls Answered in 30 Seconds*



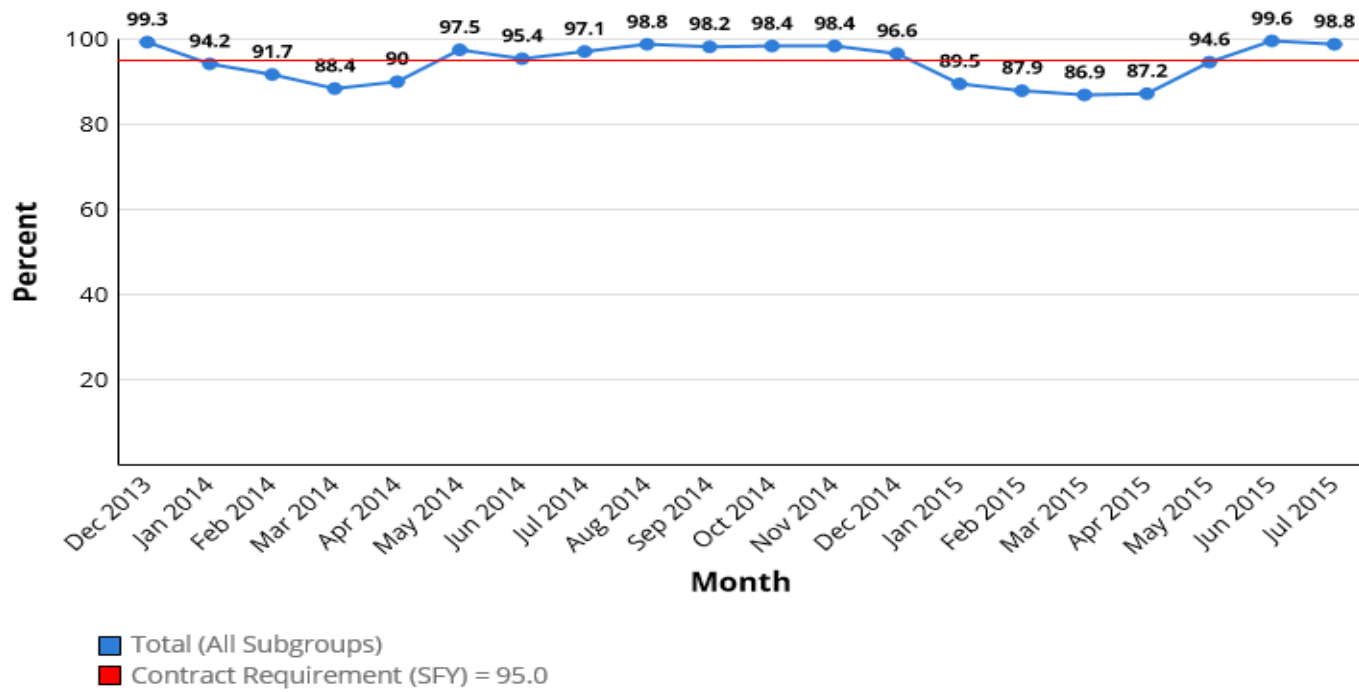
Measure Description:

- The number of calls from a provider to an MCO that were answered within 30 seconds.

NH MCM Impact:

- Results are **AVERAGE**.
- Drop in response time was corrected.

Claims Processing: *Pharmacy Claims Process in 1 Second*



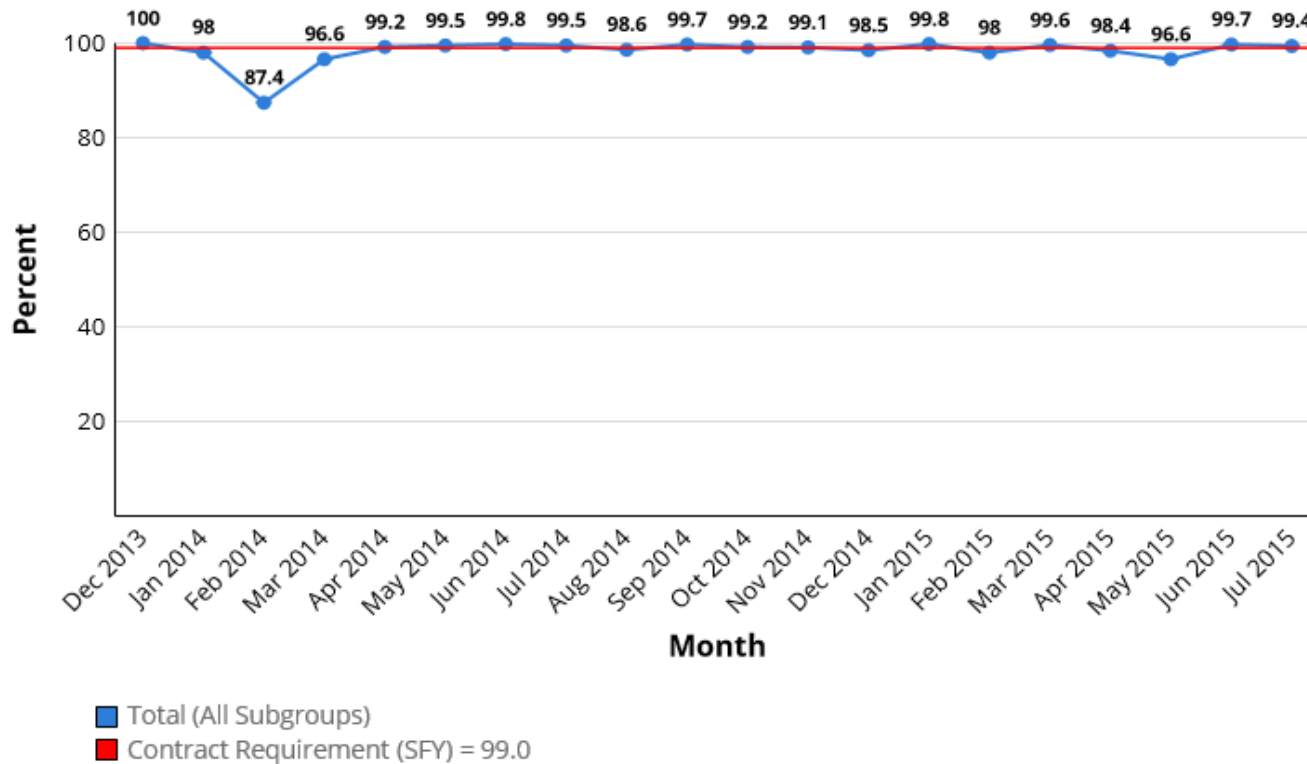
Measure Description:

- The percentage of pharmacy claims processed in 1 second.
- Beginning July 1, 2015 the average processing time for pharmacy claims is 3 seconds or less.

NH MCM Impact:

- Results are **AVERAGE** compared to MCM contract standard.

Claims Processing: *Claims Financial Accuracy*



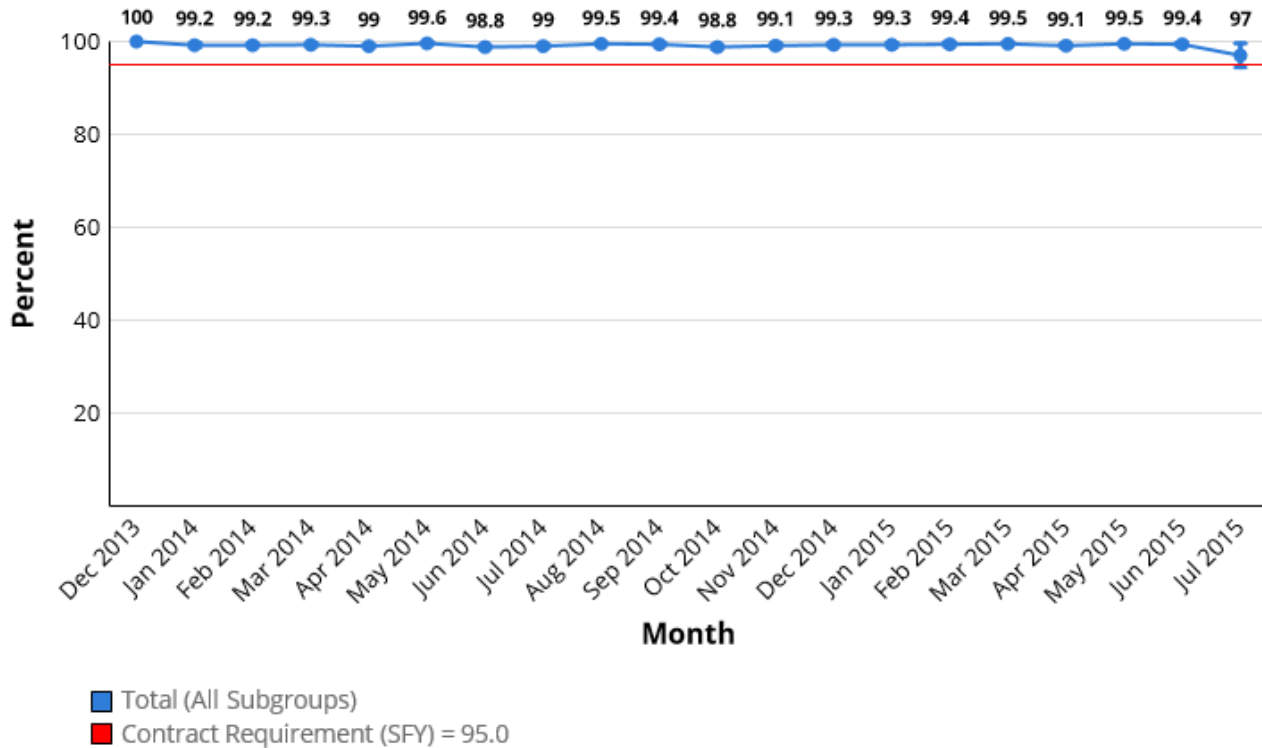
Measure Description:

- This measure describes the percent of dollars accurately paid to providers from a sample of claims.

NH MCM Impact:

- Results are **STRONG** compared to MCM contract standard.

Claims Processing: *Claims Processing Accuracy*



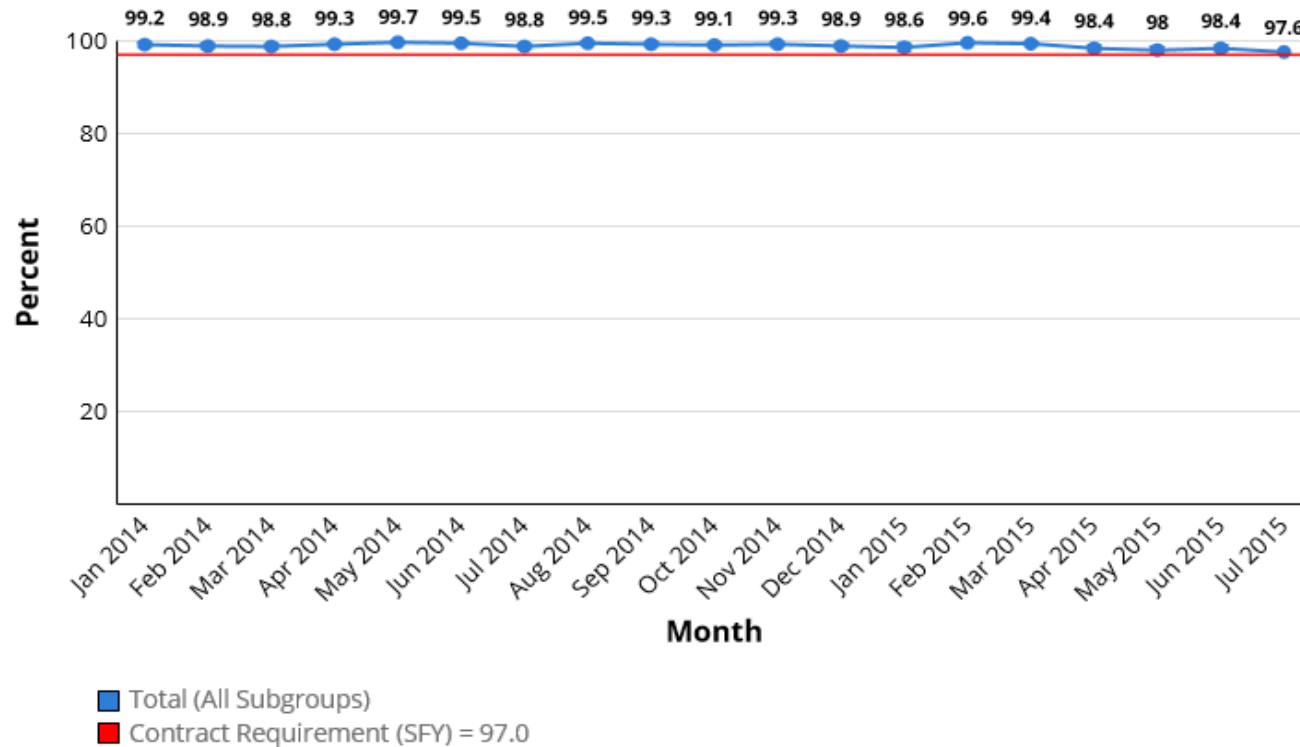
Measure Description:

- The number of claims correctly processed from a sample of claims.

NH MCM Impact:

- Results are **STRONG** compared to the MCM contract standards.

Claims Processing: *Claims Payment Accuracy*



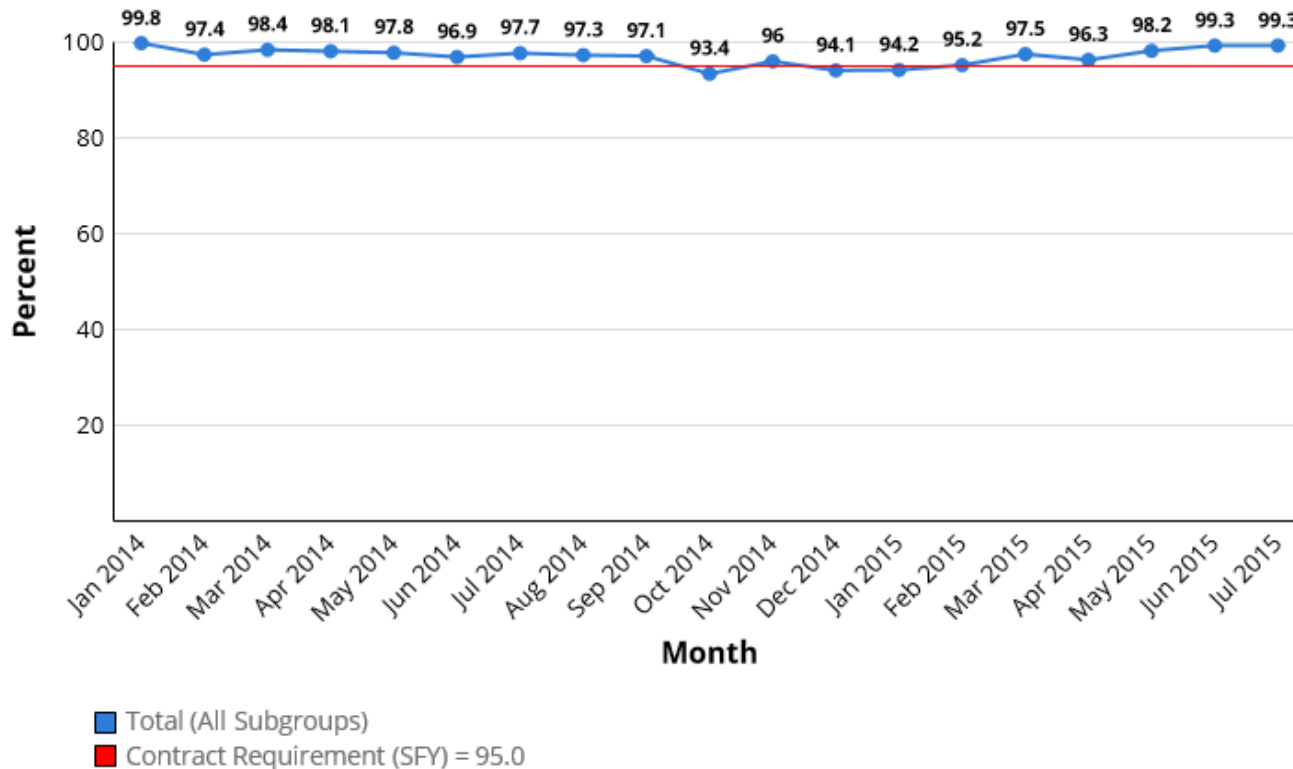
Measure Description:

- This measure describes the percent claims correctly paid or denied from a sample of claims.

NH MCM Impact:

- Results are **STRONG** compared to MCM contract standard.

Claims Processing: *Professional and Facility Claims Processed in 30 Days*



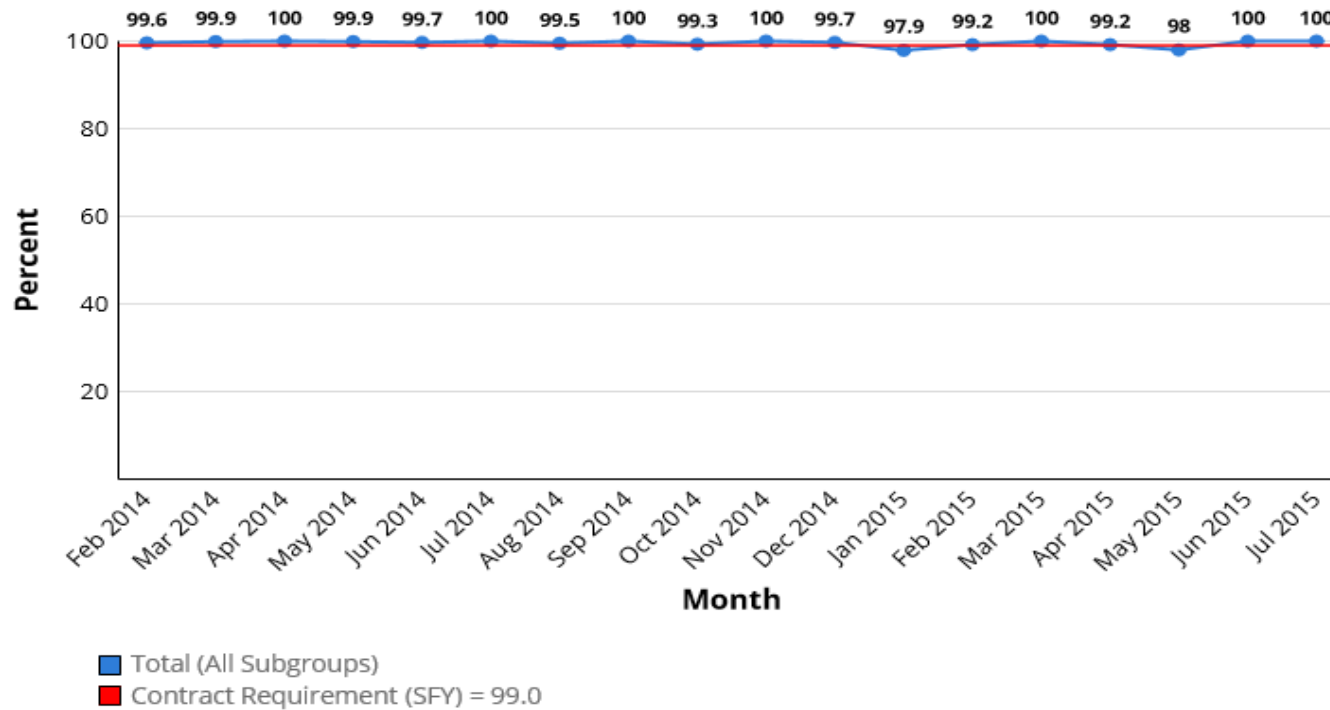
Measure Description:

- The number of claims paid or denied within 30 days.

NH MCM Impact:

- Results are **AVERAGE** compared to MCM contract standard.

Claims Processing: *Professional and Facility Claims Processed in 60 Days*



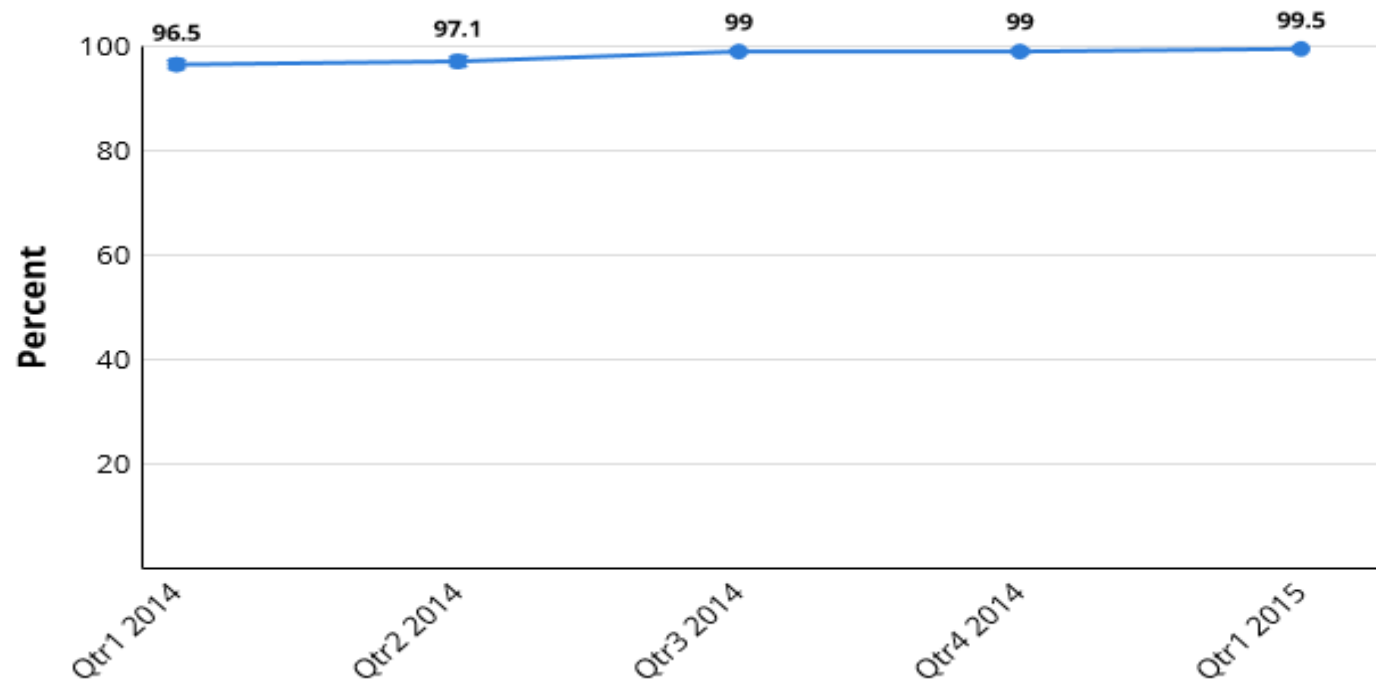
Measure Description:

- The number of claims paid or denied within 60 days.

NH MCM Impact:

- Results are **STRONG** compared to MCM contract standard.

Service Authorization Processing: *Urgent Medical Service Authorization Processing Rate in 3 Days*



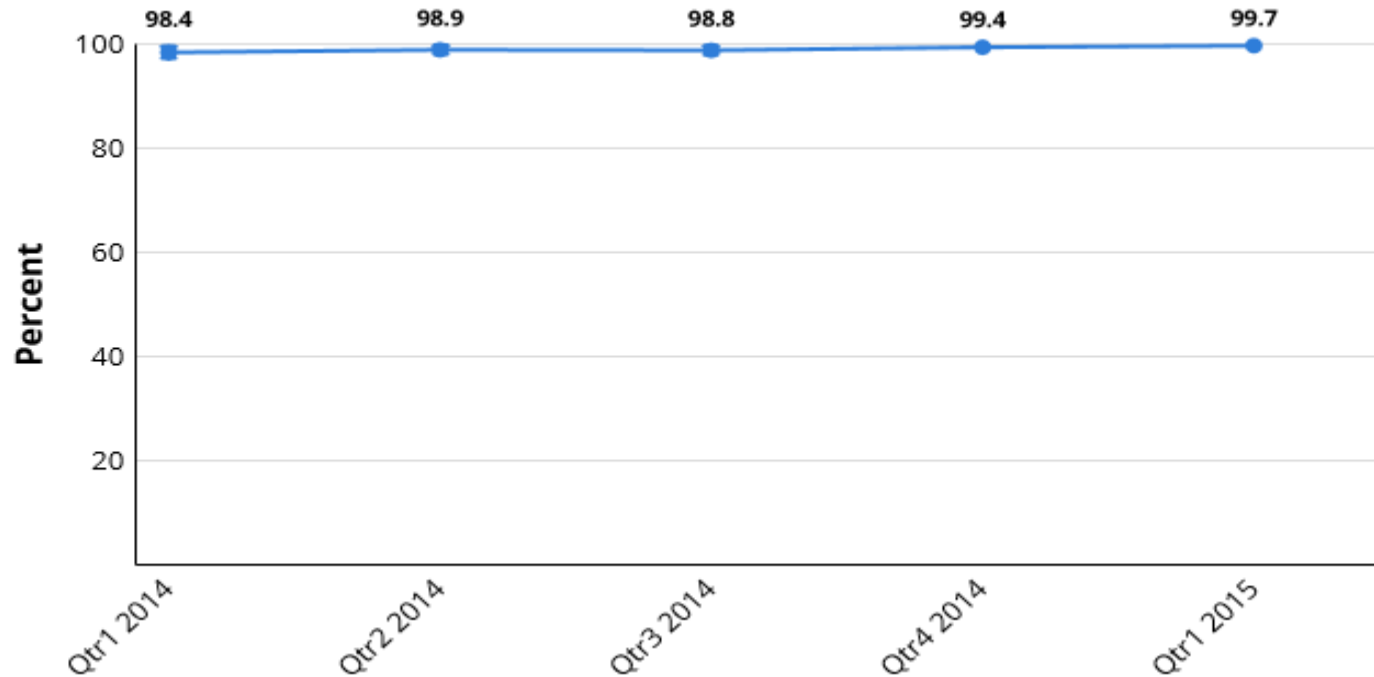
Measure Description:

- This measure describes the number of urgent authorizations processed within 3 calendar days.
- Contract standard is 98% processed within 3 days, beginning in July 1, 2015

NH MCM Impact:

- Results are **STRONG** compared to MCM contract standard.

Service Authorization Processing: *Continued/Extended Medical Service Authorization Processing Rate in 24 Hours*



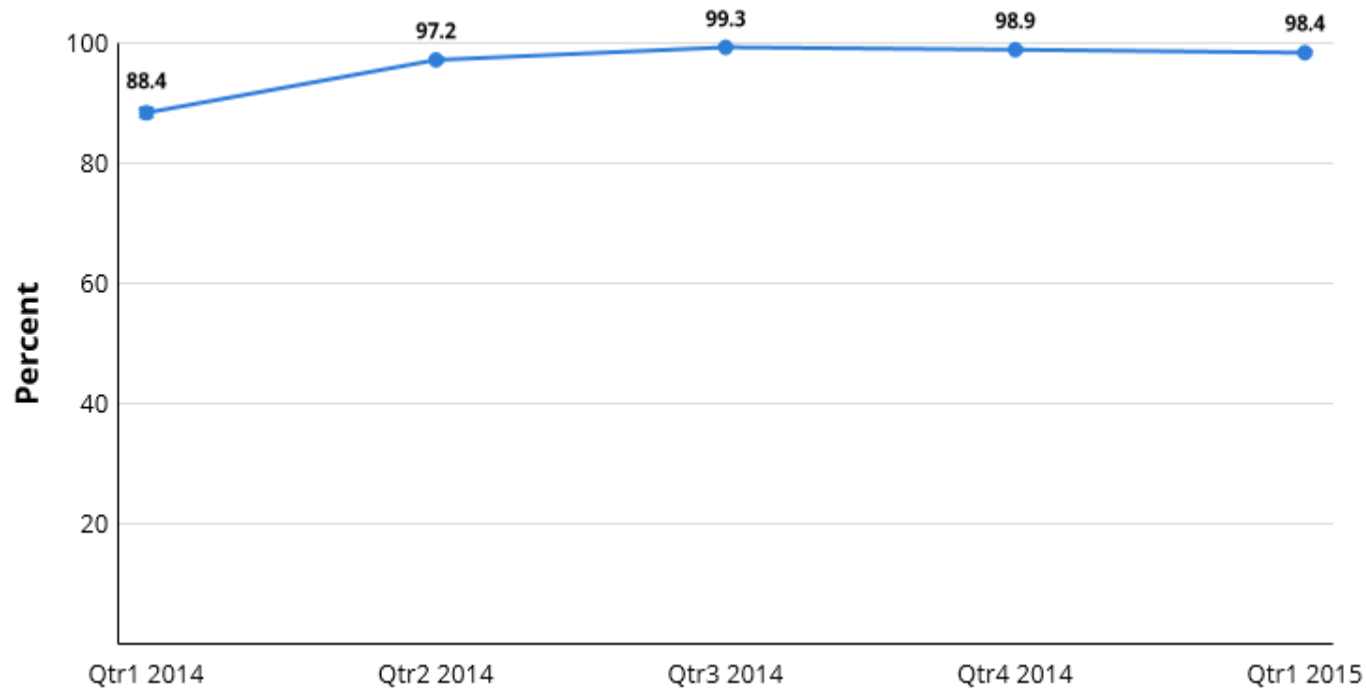
Measure Description:

- The number of urgent requests to extend ongoing treatment processed in 24 hours.
- Contract standard is 98% processed within 3 days, beginning in July 1, 2015.

NH MCM Impact:

- Results are **STRONG** compared to MCM contract standard.

Service Authorization Processing: *Pharmacy Service Authorizations Processing in 24 Hours*



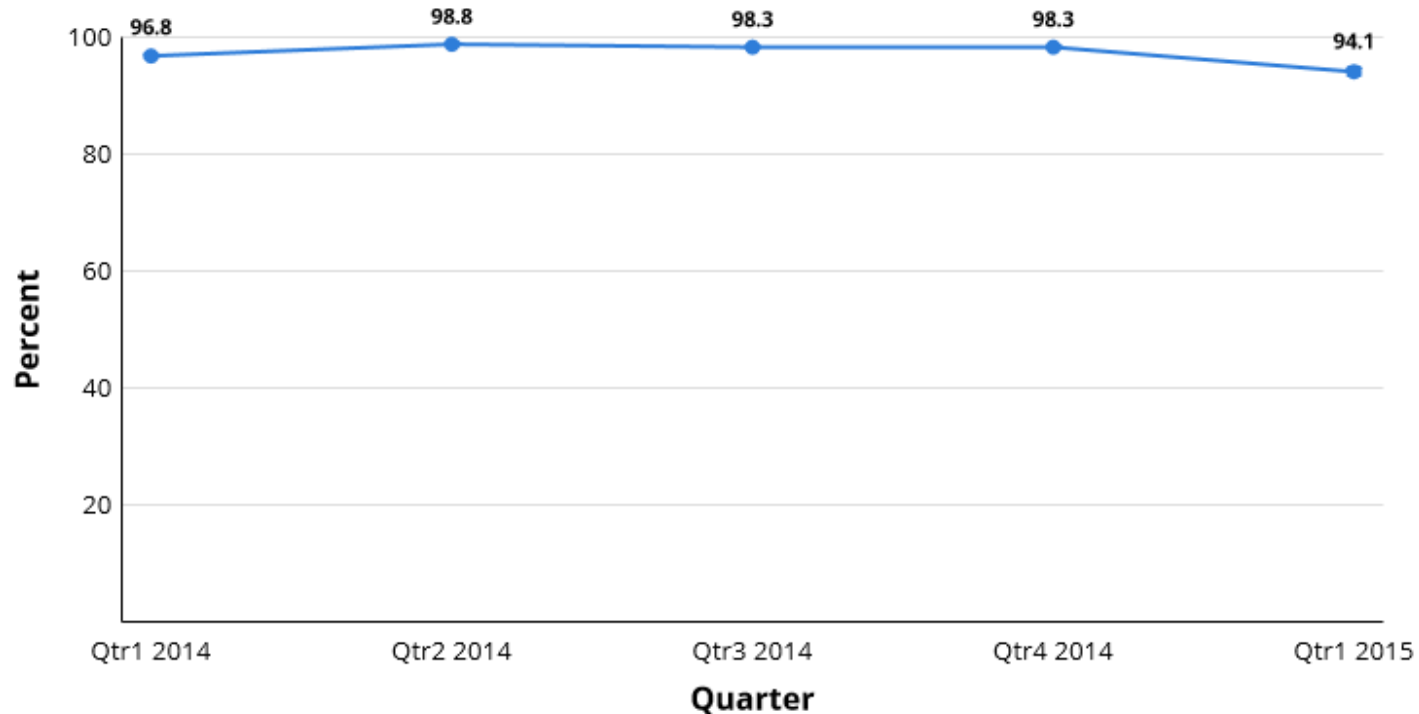
Measure Description:

- The measure describes the number of pharmacy service authorizations processed in 24 hours after the request.
- Social Security Act requires a 24 hour turn around.

NH MCM Impact:

- Results are **STRONG**.

Service Authorization Processing: *Routine Medical Service Authorization Processing Rate in 14 Days*



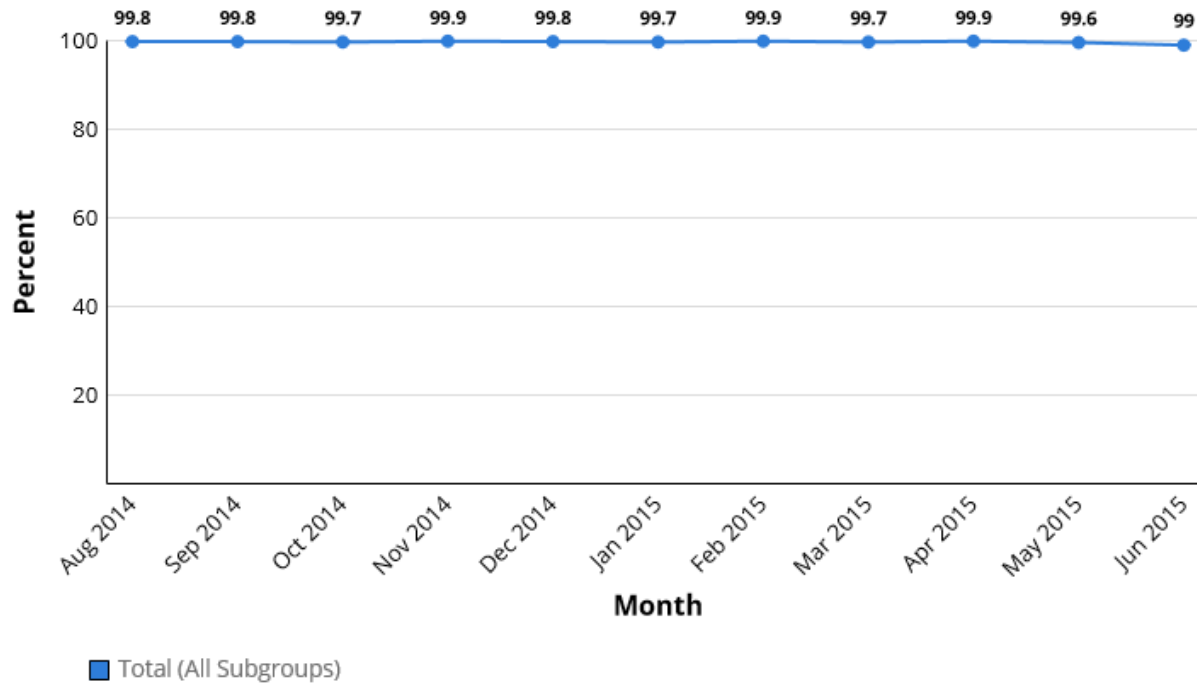
Measure Description:

- This measure describes the number of routine authorizations processed within 14 calendar days.
- Contract standard is 95% processed within 14 days, beginning in July 1, 2015

NH MCM Impact:

- Results are **STRONG** compared to MCM contract standard.

Non-Emergent Medical Transportation: *Non-Emergent Transportation Requests Approved*



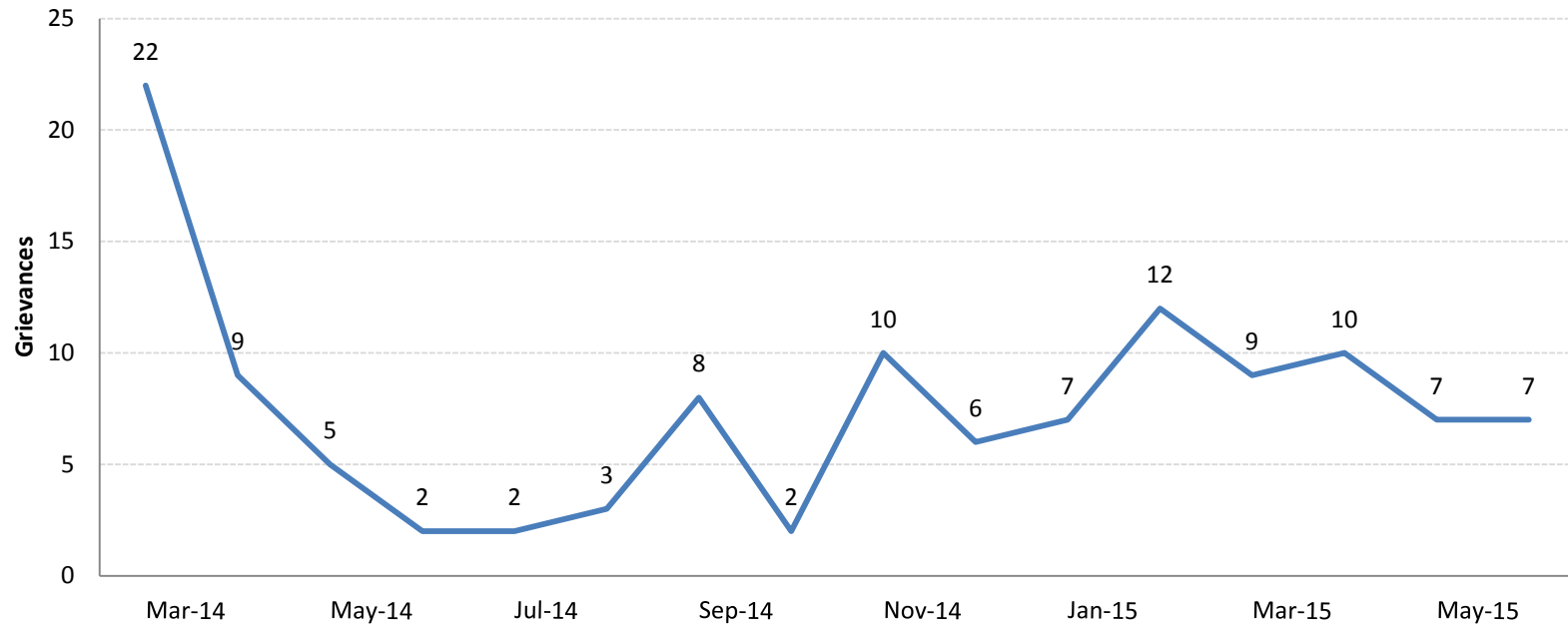
Measure Description:

- This measure describes the number of non-emergent requests for transportation that were approved.

NH MCM Impact:

- Results are **STRONG** as member requests for non-emergent medical transportation are being approved.

Grievance Counts



Measure Description:

- This measure describes the number of grievances that were filed with the MCOs each month.

NH MCM Impact:

- Results appear **STRONG** with a low number of grievances.

Appeals Counts

	2014 Q1	2014 Q2	2014 Q3	2014 Q4	2015 Q1	2015 Q2
All Services	275	463	360	295	302	380
Services						
Inpatient Admissions	15	7	11	19	11	11
Outpatient Hospital	4	6	2	20	4	26
Physician Services	26	15	40	24	37	22
Pharmacy	171	375	243	174	200	293
Other	19	29	30	30	24	12

Measure Description:

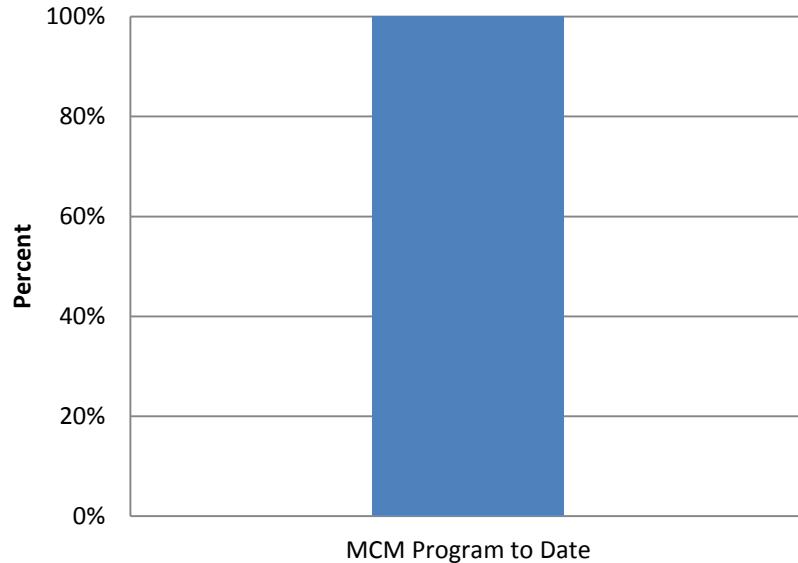
- Table indicates the number of appeals that are filed with the health plan by service category.

NH MCM Impact:

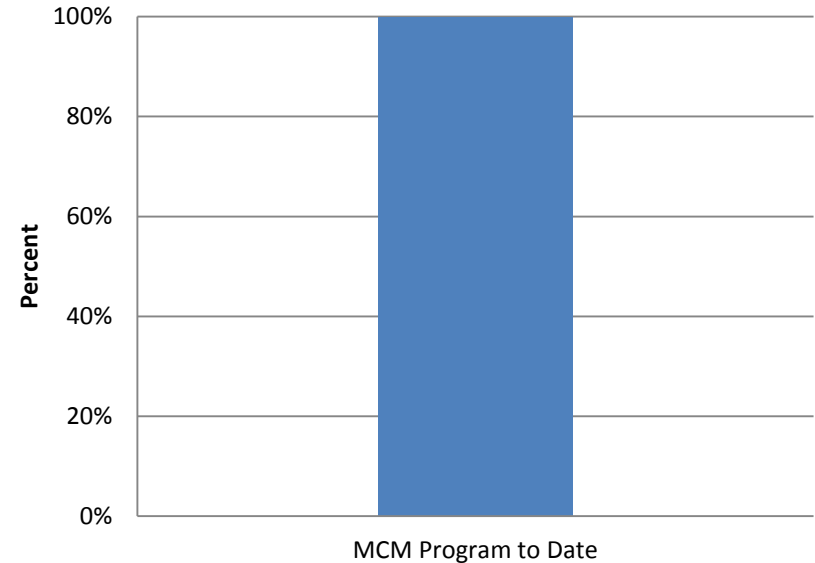
- Results are **STRONG** with a relatively low number of appeals compared to the number of service authorization requests and approvals.

Grievance and Appeals Processing Timeframes

Grievances processed within 45 days



Appeals processed within 30 days



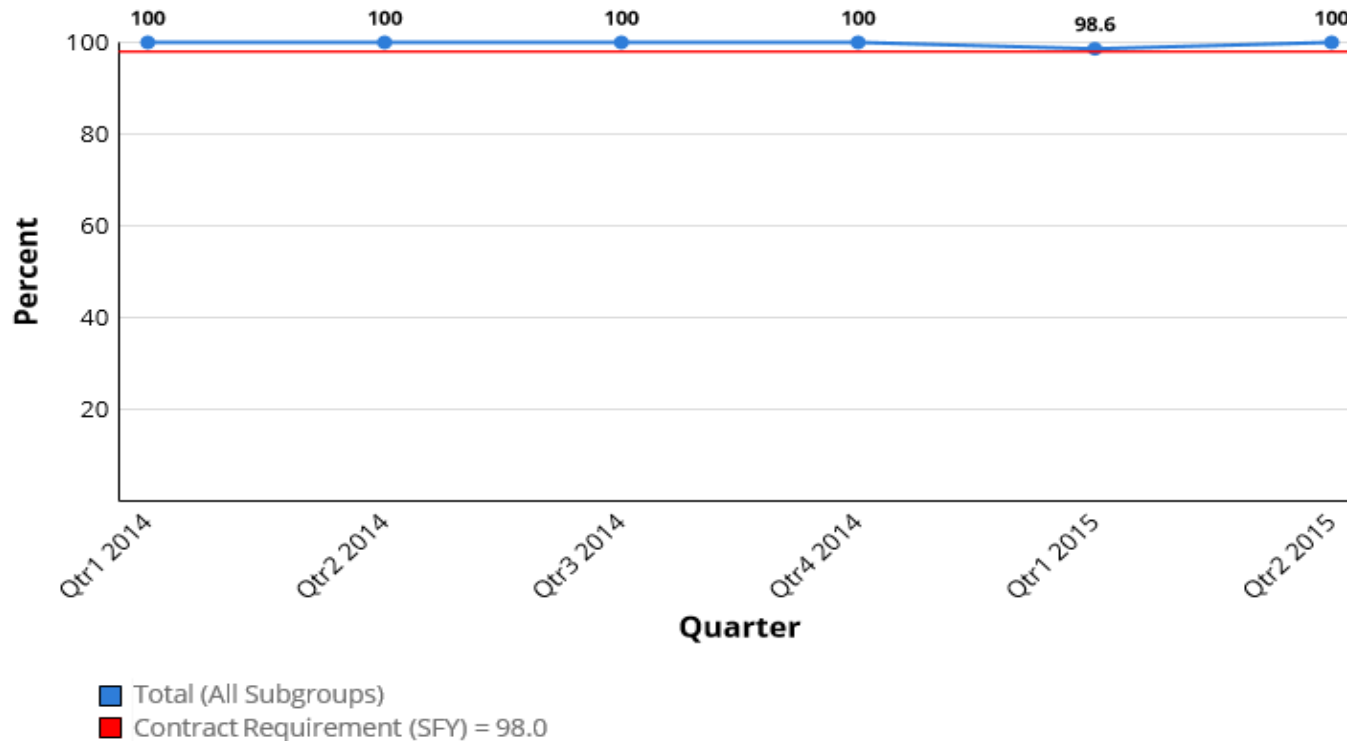
Measure Description:

- Percentage of grievances reviewed and resolved in 45 days.
- Percentage of appeals reviewed and resolved in 30 calendar days.

NH MCM Impact:

- Results are **STRONG**.

Grievance and Appeals: *Expedited Appeals Processing Timeframes*



Measure Description:

- The number of expedited appeals processed in 3 calendar days.

NH MCM Impact:

- Results are **STRONG** compared to MCM contract standard.

Provider Network Adequacy

	12/1/13 – 6/30/14	7/1/14 – 12/31/14
	Standard Met	Standard Met
Primary Care Providers – Time: 2 providers within 40 minutes Distance: 2 providers within 15 miles	X	X
Hospitals – Time: 1 hospital within 60 minutes Distance: 1 hospital within 45 miles	X	X
Pharmacies– Time: 1 pharmacy within 45 minutes Distance: 1 pharmacy within 15 miles	X	X
Mental Health Providers – Time: 1 provider within 45 minutes Distance: 1 provider within 25 miles	X	X

Table indicates that standard is met when 90% or more of members in each county meet time or distance standards.

Measure Description:

- Table indicates that the MCOs are meeting MCM contract time and distance standards by provider types.

NH MCM Impact:

- First year results are **STRONG** showing both MCOs meeting network adequacy standards.

CARE MANAGEMENT PROGRAM OPERATIONS:

Opportunities for Improvement

- None

ANTICIPATED DATA

Anticipated Data: *Preventive Care*

- Well Child Visits in the First 15 Months of Life
- Non-Recommended Cervical Cancer Screening in Adolescent Females (NCS)
- Lead Screening in Children (LSC)

Anticipated Data: *Acute and Chronic Care*

- Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis (AAB)
- Persistence of Beta-Blocker Treatment After a Heart Attack (PBH)
- Comprehensive Diabetes Care (CDC), HbA1c Control (<7.0%)
- Disease Modifying Anti-Rheumatic Drug Therapy in Rheumatoid Arthritis (ART)
- Children and Adolescents' Access to Primary Care Practitioners (CAP),
 - 7-11 Years
 - 12-19 Years

Anticipated Data: *Behavioral Health Care*

Anticipated Data

- Antidepressant Medication Management (AMM),
 - Effective Acute Phase Treatment
 - Effective Continuation Phase Treatment
- Use of Multiple Concurrent Antipsychotics in Children and Adolescents (APC)

CONCLUSIONS

Conclusions: *Preventive Care*

- **“STRONG”** (2)
 - Prenatal and Postpartum care
 - Adult Access to Primary Care

- **“AVERAGE”** (12)
 - Prenatal and Postpartum care (7)
 - Childhood Immunization Combination #2
 - Counseling for Physical Activity
 - HPV Vaccination
 - Chlamydia Screening
 - Ambulatory (Office) Visits

- **“OPPORTUNITY FOR IMPROVEMENT”** (11)
 - BMI Percentile
 - Counseling for Nutrition
 - Childhood #10 and Adolescent Immunization Series (2)
 - Cervical Cancer Screening
 - Chlamydia Screening
 - Well Child (3-6 y) and Adolescent Visits (2)
 - Child Access (11-24 months, 25 months – 6 y) to Primary Care (2)
 - Adult Access to Primary Care

Conclusions: *Acute and Chronic Care*

- **“STRONG”** (6)
 - Appropriate Strep Testing in Children
 - Appropriate Treatment of URI in Children
 - Hemoglobin A1c Testing
 - Pharmacotherapy Management of COPD Exacerbation (Bronchodilator)
 - ED Visits
 - Avoidable ED Visits
- **“AVERAGE”** (6)
 - Appropriate Strep Testing in Children
 - Controlling Blood Pressure
 - Controlling Hemoglobin A1c (<9%, <8%) (2)
 - Controlling Blood Pressure with Diabetes
 - Use of Low Back Imaging
- **“OPPORTUNITY FOR IMPROVEMENT”** (6)
 - Appropriate Treatment of URI in Children
 - Diabetes Care: Eye Exam, Kidney monitoring (2)
 - Avoidable Hospitalizations
 - Pharmacotherapy Management of COPD Exacerbation (System Corticosteroid & Bronchodilator) (2)
- **MEASURES WITHOUT COMPARATORS**
 - Annual Monitoring for ACE/ARBs, Diuretics, Total (3)

Conclusions: *Behavioral Health*

- **“STRONG”** (4)
 - 7 Day Follow up After Acute Hospitalization (HEDIS Measure)
 - 30 Day Follow up After Acute Hospitalization
 - NHH Discharge with Follow Up Appointment within 7 days
 - Adherence to Medications: Schizophrenia

- **“AVERAGE”** (5)
 - 7 Day Follow up After Acute Hospitalization (HEDIS Measure)
 - 30 Day Follow up After Acute Hospitalization
 - Initiation of AOD Treatment
 - Engagement of AOD Treatment
 - Metabolic Screening in Adults with Schizophrenia using Antipsychotics

- **“OPPORTUNITY FOR IMPROVEMENT”** (1)
 - Diabetes Monitoring Adults with Schizophrenia

- **MEASURES WITHOUT COMPARATORS**
 - Metabolic Monitoring Children using Antipsychotics
 - Use of Psychosocial Care First for Children and Adolescents

Conclusions: *Consumer Experience of Care*

- **“STRONG”** (6)
 - Overall rating of Health Plan: Adults, Children (3)
 - Ease of getting treatment: Children
 - Got routine appointment as soon as needed: Children
 - Doctor up to date about other Health Providers: Adults

- **“AVERAGE”** (6)
 - Overall rating of Health Plan: Children
 - Customer Service Provided Help: Adults, Children (2)
 - Ease of getting treatment: Adult
 - Got routine appointment as soon as needed: Adult, Children (2)
 - Doctor up to date about other Health Providers: Adults

- **“OPPORTUNITY FOR IMPROVEMENT”** (1)
 - Overall rating of Health Plan: Adults,

Conclusions: *Care Management Program Operations*

- **“STRONG”** (19)
 - Answering Calls Promptly: Member (2)
 - Low numbers of Grievances, Appeals (2)
 - Timely Processing: Grievances, Appeals (5)
 - Timely and Accurate Claims Processing (4)
 - Timely Services Authorizations: Medical, Pharmacy (4)
 - Provider Network Adequacy
 - NEMT Approvals

- **“SATISFACTORY”** (3)
 - Answering Calls Promptly: Provider
 - Timely and Accurate Claims Processing (2)

- **“OPPORTUNITY FOR IMPROVEMENT”** (0)
 - None related to contract standards

EQRO Activities

- Review compliance with state standards for access to care, structure and operations, and quality measurement and improvement
 - 2015 findings indicate a need to increase the number of Consumer Advisory Board meetings
- Validation of performance measures
 - Passed
- Validation of encounter data reported by an MCO Administration or validation of consumer or provider surveys of quality of care
 - In progress
- Calculation of performance measures in addition to those reported by an MCO and validated by an EQRO
 - Statewide calculations (for example, CMS Core Measure Sets: Adult, Child; CAHPS)
- Conduct of PIPs in addition to those conducted by an MCO and validated by an EQRO
 - Prior Authorization Study
- Conduct of studies on quality that focus on a particular aspect of clinical or nonclinical services as a point in time
 - Biannual Consumer Focus Groups
 - Provider Availability (Secret Shopper)

EQRO Activities: *continued*

- Validation of performance improvement projects (PIPs)
 - New Hampshire Healthy Families
 - Vision screening for adults with diabetes
 - Well care visits for 3,4,5,and 6 year olds
 - Diabetes screening for people with schizophrenia or bipolar disorder who are using antipsychotic medications
 - Weight assessment & counseling for nutrition and physical activity for children/adolescents
 - Well Sense
 - Diabetes Care – HbA1c Testing
 - Percent of Women (16 to 24 years) receiving Chlamydia Screening
 - Well-Child Visits for 3-6 years
 - Reduce Readmissions to New Hampshire Hospital
- Annual Technical Report
 - 2015 will include a comparison between MCOs

MCO Quality Activities

- Quality Staff
- MCM Contract
 - Pharmacy Quality Improvement (for example, monitoring for psychiatry consultation, maximum allowable dose for opioids)
 - Standard Service Authorization Process
 - EQRO validation of data and quality activities
 - Third party vendor for provider and member surveys
 - Provider Survey
 - Member Surveys (CAHPS, Behavioral Health, LTSS)
 - NCQA
 - Accreditation
 - Validation of measures
- Quality Assurance and Performance Improvement Plans



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