



Charter Overview

Workgroup: Quality Strategy/Metrics

Date of Charter: 3/30/2015

Deliverables: Quality measure alignment plan, Monitoring and evaluation plan

Background

The Center for Medicare and Medicaid Innovation (CMMI) established the SIM initiative to help drive improvements in service delivery and payment reform. In doing so, CMMI highlights the importance of developing a statewide plan to align quality measures across all payers in Kentucky, and to reduce the administrative and/or non-clinical burden to providers. CMMI also emphasizes the need for quantifiable measures for regularly monitoring the impact of Kentucky's proposed model, including the effectiveness of the policy and regulatory levers applied, on the three key outcomes of (1) strengthening population health; (2) transforming the health care delivery system; and (3) decreasing per capita health care spending.

To deliver upon these goals, Kentucky will work with a diverse set of stakeholders to develop a plan for more effective measurement of quality and quantifiable improvement in clinical outcomes for all Kentuckians. In developing this quality measure alignment plan, Kentucky will also explore how to leverage the quality strategies of the five Medicaid managed care organizations (MCO), Medicare, and the commercial payers operating in the State. Kentucky will also select a set of measures with a focus on the particularized health demographics and health needs of the State, and establish measure domains that encompass population health, health care delivery system transformation, and per capita cost spending, using the state's entire population in the denominator.

Mission Statement

The Quality Strategy/Metrics Workgroup has been formed to establish a vision and roadmap for more effective measurement of quality and quantifiable improvement in clinical outcomes, and the use of policy levers to advance Kentucky's SIM Model Design. The workgroup will develop a core set of measures that incorporate the concepts, themes, and three focus areas from the Population Health Improvement Plan (PHIP) – tobacco, obesity, and diabetes. The workgroup will also pay particular attention to the use of policy levers needed to implement a statewide quality strategy, and how health information technology can be used to improve the quality of care provided across the State.

Approach

The Quality Strategy/Metrics Workgroup will take a consensus-based approach to identifying measurement strategies and tangible metrics to transform the health care delivery system in Kentucky. It will begin by reaching agreement among stakeholders on the most critical quality metrics for the Model Design, in the absence of a national consensus on the harmonization

of metrics to date. The workgroup will then identify if the selected measures are currently measured by the payers engaged in the SIM initiative, and how the model can leverage this existing work. Once a consensus has been reached regarding the measurement strategy, the workgroup will identify barriers to quality measure alignment and payer commitment, and propose initiatives and policies for inclusion in the state health system innovation plan (SHSIP) to address these gaps.

Taking a consensus-based approach to developing components of the SHSIP will promote broad stakeholder input and inclusion, and allow for an iterative review and comment process. This approach will also contain a continuous feedback loop between the workgroup, the full stakeholder group, and the Commonwealth. Specifically, as plans are developed and refined, each point of consensus reached by the workgroup will be presented to the full stakeholder group on a monthly basis and reviewed by the State's Core SIM Team for inclusion in the final SHSIP.



Proposed Workgroup Topics

The Quality Strategy/Metrics Workgroup will cover a variety of different topics during the SIM initiative, including but not limited to:

1. Overall Quality Definition and Direction

- a. What should our core set of measures be? What process measures should be included?
 - b. Do we have good measures for our three target areas of tobacco, obesity, and diabetes?
 - c. Do we have good measures for behavioral health that facilitate the theme of integration?
 - d. Are the selected measures currently measured by the payers engaged in the SIM initiative?
 - e. Are the selected measures nationally recognized and aligned across the continuum of providers?
2. Statewide Quality Strategy
- a. How can we leverage DMS' work in focusing quality metrics across the five Medicaid MCOs, including common metrics for performance improvement?
 - b. How can we leverage the quality strategy of the commercial payers in Kentucky?
 - c. How can we leverage Medicare's quality strategy?
 - d. How do we align public health quality reporting with payer quality strategies?
 - e. How can we duplicate this process with the MCOs, with the Kentucky Employees' Health Plan (KEHP), with commercial payers, and with others?
 - f. How can we leverage the Community Health Needs Assessment(s) that non-profit hospitals and public health departments currently complete?
 - g. How can we use short term process measures correctly so that they are early warning signs for long term outcome measures?
 - h. What platform will be used to generate the quality measurement of SIM initiatives?
 - i. How we can align with the federal reporting requirements of all provider types?
 - j. How can we address the reporting fairness levels between providers, e.g. what makes sense depending on where one is on the provider spectrum?
 - k. How can we leverage Aligning Forces for Quality (AF4Q), the Robert Wood Johnson Foundation's effort to lift the overall quality of health care in targeted communities?
3. Necessary Legal/Regulatory Levers
- a. What legal/regulatory levers are needed to implement a statewide quality strategy?
 - b. How can we secure payers' commitment to reducing the administrative and/or non-clinical burden to providers in the State?
4. Use of Technology
- a. How can we leverage the use of health information technology to improve quality (e.g., electronic quality reporting)?
 - b. How can we develop a circulatory pattern with real time feedback from a state model, perhaps using the Kentucky Health Information Exchange (HIE)?

Timeline

Task	2015									
	Mar.	Apr.	May	Jun.	Jul.	Aug.	Sep.	Oct.	Nov.	
	Workgroup Sessions									
Phase 1: Assess Current Landscape and Discuss Key Topics <ul style="list-style-type: none"> Review workgroup charter Conduct as-is review of current initiatives in Kentucky Conduct driver diagram/goal setting exercise Discuss key topics related to integrated and coordinated care: <ul style="list-style-type: none"> Overall Quality Definition and Direction Statewide Quality Strategy Necessary Legal / Regulatory Levers Use of Technology 										
Phase 2: Design Plans for Quality Measure Alignment and Monitoring and Evaluation <ul style="list-style-type: none"> Develop straw person outlines for relevant SHSIP components Reach consensus on plans for Quality Measure Alignment and Monitoring and Evaluation 										
Phase 3: Review Plans for Quality Measure Alignment and Monitoring and Evaluation <ul style="list-style-type: none"> Review draft plans for Quality Measure Alignment and Monitoring and Evaluation Incorporate workgroup feedback into SHSIP components 										

★ Final Workgroup Meeting