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**Quality Subcommittee of the
Medicaid Advisory Committee**

James R. Thompson Center
100 W. Randolph
2nd Floor 2025
Chicago, IL

And

201 South Grand Avenue East
1st Floor Video Conference room
Springfield, Illinois

March 21, 2017
10 a.m. – 12 p.m.

Conference Call-In Number: 888-494-4032
Access Code: 7218869057

Agenda

- I. Call to Order
- II. Introductions
- III. Approval of November 1, 2016 Meeting Minutes
- IV. New Business:
 - a. Committee Transitions
- V. Old Business
 - a. Update on Diabetes Affinity Group – Dr. Arvind Goyal
- VI. Other Business
- VII. Adjournment

Next Meeting Date: June 6, 2017

DRAFT

Illinois Department of Healthcare and Family Services MAC Quality Care Subcommittee November 1, 2016

MAC Quality Care Subcommittee Members Present

Kelly Carter, Illinois Primary Health Care Association
Kathy Chan, Cook County Health and Hospital systems
Margaret Kirkegaard, Illinois Academy of Family Physicians
Edward Pont, Illinois Chapter of American Academy of Pediatrics
Alvia Siddiqi, Advocate Physician Partners

MAC Quality Care Subcommittee Members Absent

Barrett Hatches, Chicago Family Health Center

HFS Staff Present

Julie Doetsch
Arvind Goyal
Catina Latham
Robert Mendonsa
Wendie Medina
Sharon Pittman
Sylvia Riperton-Lewis

- I. **Call to Order:** The regular quarterly meeting of the MAC Quality Care Subcommittee was called to order November 1, 2016 a.m. by Kelly Carter.
- II. **Introductions:** Quality Subcommittee members and HFS staff were introduced in Chicago and Springfield.
- III. **New Business**
 - a. **Consumer report card (previous known as STAR report):** Catina Latham and Sylvia Riperton-Lewis from HFS and the Health Services Advisory Group (HSAG), the state's external quality reviewer required by CMS for all states with Medicaid managed care, presented an overview of the draft 2015 Consumer Report Card. The Healthcare Effectiveness and Data Information Set (HEDIS) and the Consumer Assessment of Health Plans satisfaction survey form the basis for the data presented in the report card. HFS is seeking feedback from this subcommittee, MCOs, and others on how to improve consumer health report card. This report will be presented to MAC, consumers and legislators. The final 2015 report card will be posted on the HFS website in January 2017. The report card for 2016 will be expanded upon to follow HB6213 and will be published by January 2018.
[\[See meeting materials at https://www.illinois.gov/hfs/SiteCollectionDocuments/QC%20Agenda%20110116.pdf\]](https://www.illinois.gov/hfs/SiteCollectionDocuments/QC%20Agenda%20110116.pdf)

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Illinois Department of Healthcare and Family Services MAC Quality Care Subcommittee November 1, 2016

Although the development of this report card predates the consumer comparison tool outlined in HB6213, HFS aligned the report to closely follow those requirements as much as possible. The new Medicaid managed care regulations also require states to create a consumer report card.

- b. **Quality Strategy Report:** HFS will be posting quality strategy document online for comment for a 30-day period. This quality strategy is required by CMS as a blueprint for states. HFS will email the members of the quality subcommittee when it is posted.
 - c. **Auto-Assignment Algorithm:** Robert Mendonsa from HFS provided an overview of the Department's new auto assignment algorithm. This new algorithm only impacts those who are new to Medicaid and/or who do not have a history with a provider or an MCO, as well as those who lost Medicaid because of redetermination and did not get reinstated within a two month period. [See meeting materials at <https://www.illinois.gov/hfs/SiteCollectionDocuments/QC%20Agenda%20110116.pdf>]
 - d. **MCO Performance Dashboard:** Robert Mendonsa from HFS provided an overview of the Department's new performance dashboard that tracks MCOs on operational and administrative metrics on a quarterly basis. HFS aims to have it online by January 1, 2017 for data from July-Sept 2016. HFS will have a report for FHP in addition to ICP. [See meeting materials at <https://www.illinois.gov/hfs/SiteCollectionDocuments/QC%20Agenda%20110116.pdf>]
- IV. **Old Business**
- a. **Approval of Meeting Minutes:** Kelly Carter, Chair made a motion to approve the July 19, 2016 minutes; the motion was seconded by another member with all committee members voting to approve the minutes.
- V. **Other Business**
- None.
- VI. **Adjournment:** The meeting was adjourned at 12:00 pm.

1. Identify Overall Aim /Measure(s) to improve: (one goal of affinity group project)

Comprehensive Diabetes Care (CDC) is a HEDIS measure applied to ages 18-75 with Type I or Type II Diabetes, who during the year had: 1). HbA1C testing; 2). Eye exam (retinal) performed; and 3). Medical attention for nephropathy. None of these measures outcomes or tracks improvements. Claims data alone would not allow yearly comparison; self-reporting or chart reviews will be needed. Under 18 & those over 75 are excluded. The proposal below will measure effectiveness of recommended interventions (and any other strategies the practitioners might choose to employ in their practices) tracked via claims with Diabetes as one of the diagnoses (dx) for: a). ED visits; b). hospitalizations; c). new dx of Coronary Disease, MI or stroke; d). new dx of nephropathy; e). new dx of retinopathy; and/or, f). new lower limb amputation.

Baseline rate (date): **October 1, 2016**

Target rate (date): **April 1, 2017, then Oct 1, 2017; yearly thereafter**

2. Who will take action?

3. How can each actor/stakeholder contribute

4. How will you track progress?

5. What can the state do to drive each stakeholder towards the goals?



Key Stakeholders
Patients and Families

Goals & Interventions
Lifestyle: Changes in diet, regular exercise/sleep, take prescribed tests & meds, eyefoot care, regular appts

Measure and/or data
a) through f) above

Your Levers of Influence
Patient & family education regarding disease & preventable potential complications: hospitalizations, heart attack, stroke, kidney disease, blindness, dialysis, amputation etc.

Practitioners
Diab Educator
Pharmacists

Education+ lifestyle interventions
Rx: Metformin, Insulin, Aspirin, ACE Inhibitor, Statin, etc. as appropriate
Monitor/control BP, HbA1C, Chol, Kidney function, Feet & Retina

a) through f) above

Provider Notice, Education & Recognition
Quality Data shared at baseline, 6 mths, then yrly
P4P and other incentives
Allow diabetic group visits with reimbursement

3rd Parties,
MCOs,
Hospitals & LTCs etc.

Facilitate above interventions
Coding+billing-coach practitioners
Ensure availability of diabetic Rx's, educators, ex trainers/equip, eye doctors & foot doctors w short wait

a) through f) above

Review Contracts & Agreements for proper care
Require submission of timely encounter data
Require plan level quality measurement & reporting
P4P and preferred enrollment incentives