Performance Measures Coordinating Committee Council Meeting

Monday, January 30, 2023 9:00 a.m. – 11:00 a.m.



Housekeeping

- No formal break, so feel free to step out briefly if needed.
- ▶For committee members:
 - ▶ Please keep your phone line muted when not speaking.
- ▶ For members of the public:
 - ► Please keep your phone line muted at all times.
 - ► There will be dedicated time for questions and comments.
 - ▶ Please use the chat box to submit your question/comment and it will be addressed in the order received.

Public Process

- Maintaining a transparent process is important.
- Public comment opportunities:
 - ▶ PMCC meetings are open to the public.
 - ► There is time on the agenda for public comment prior to action on measures.
 - Meeting materials are posted on the Health Care Authority website.
 - Comments can be submitted to HCA anytime.

Today's Objectives

- Brief recap of October 2022 meeting
- Discuss letter to Legislature to confirm PMCC role/responsibilities
- Learn about rural health systems in Washington and current efforts to address quality
- Discuss updated PMCC administrative processes
- Discuss a 2022 request to consider the addition of obesity measures to the Washington State Common Measure Set
- Opportunity for public comment
- Wrap Up

Welcome & Introductions

- Welcome new members:
 - Becky Harless, Whidbey Health
 - ► Pam Schlauderaff, Mason Health
- Please share the following:
 - ► Your Name
 - ► Your Role
 - ► Your organization
 - ► What you are most looking forward to in 2023

Brief recap of October PMCC Meeting

- Reviewed the final definitions for the new criminal justice system measures
- Approved the addition of a modified version of the existing homelessness measure
- Discussed the role of the PMCC and options for responding to future legislative requests
- Learned of current efforts to incorporate the measures from the Primary Care Measures Workgroup into HCA contracts
- Learned about NCQA changes to HEDIS MY2023 measures and discussed potential impacts on the WSCMS, both short term and long term

PMCC letter to Legislature

Judy Zerzan-Thul, MD, Health Care Authority



Proposed letter from PMCC to Legislature

- Previously discussed the new requests to add social recovery measures to the Washington State Common Measure Set (WSCMS)
- PMCC members agree that the role of the PMCC is limit to address social needs through the WSCMS
- HCA has limited authority with influencing what the legislature brings to the PMCC
- PMCC agreed there may be an opportunity to remind the legislature what the role of the PMCC is and limitations due to a lack of resources
- Therefore, HCA staff worked with agency legislative staff and the Bree Collaborative to draft a letter from the PMCC to the legislature

Proposed letter contents

- Purpose of the Washington State Common Measure Set
- Overview of the role of the PMCC
- Reminder of recent requests from the legislature
- What is needed to continue to support these requests
 - ► Formalize and expand the Committee's current scope
 - Outreach to new members bringing an equity lens and more diverse perspectives
 - Explore topics beyond clinical quality measures
 - ► Perform an annual analysis of performance of the State Common Measure Set measures to identify additional opportunities
 - ► Convene working sessions with state quality experts to explore opportunities to adopt and utilize new types of measures to improve the health of everyone living in Washington State

Discussion

- Does this information provided in the letter make sense?
- Is there anything missing?
- ▶ Is there anything we would like to strike?
- Are you comfortable sending on behalf of the committee?
- Anything else?



BRIEF UPDATE



WA RURAL HEALTH SYSTEMS



Rural Healthcare is about equity.

Rural disparities can be left out of discussions about equity, diversity, inclusion.

Rural health systems are *not* just smaller urban models.

Rural Healthcare Systems

- Relationships with patients and their families across multiple roles
- Community engagement can be stronger
- Team members do not say "not my job."
- Multiple roles for many
- Hill Burton era buildings with crumbling infrastructure



- Uncommon to have ICU
- OB down to just over 40 percent of CAHs
- Workforce disruptions more common, and more difficult to patch up
- Many patients lack transportation, home care aides, adult family homes, assisted living, or long-term care.
- Those who had cash reserves are running through fast and say "it is not sustainable.
- Thin or negative margins

Narrow networks

Narrow networks can cause rural patients to drive further than seems necessary, for example, drive past two or three clinics with the needed specialty to get to the in-network clinic four hours away.



Constraints on movement to value based contracts



Fewer resources to perform retrospective and prospective analysis to segment their population and predict utilization patterns

Administrative burden of five or more ways to work with Medicaid (MCOs and FFS)

Bright spot: Many rural health systems are involved in Medicare ACOs

Difficulties with small numbers for quality incentives

EHRs with less-than-optimal registries for pop health data

Not enough lives to manage the risk

Some health plans disinterested in value-based contracts due to small numbers of lives

Social drivers of health are more dominant



Mixed incentives....means harming your own fiscal health to do the right thing.

Pat Justis, MA

Executive Director, Rural Health

Washington State Office of Rural Health

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Critical Access Hospital Rural Health Clinics Walk-in Clinics Specialty Clinics

Becky Harless, Senior Quality Analyst



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Leaders in health transformation.

We Value Independence Through Interdependence

MEET OUR MEMBERS -

24 Members | 23 Counties | 635,000 Lives





TRC Dashboard Funded by the Molina Cares Foundation





Why these measures?

MEASURE NAME	HRSA QI Project (2020-2022)	ACO Shared Savings (2021-2024)	ACO Quality (2021-2024)	Collab. MCO VB Contracts (2021)	HCA Withhold Measures (2021)	SETTING
All-Cause Readmission w/in 30 Days	Χ	X	Χ			Inpatient
Annual Wellness Visit (AWV)**	X	X	X			Outpatient
Avoidable ED Visits		X	X			ED
Diabetes care - HbA1c Poor Control (>9%)	X		X	Χ		Outpatient
Depression Screening	Χ		X			Outpatient
Inpatient Admissions		Χ	X			Inpatient
Child and Adolescent Well Child Visit				Х	Χ	Outpatient
Colorectal Cancer Screening			X			Outpatient
Breast Cancer Screening			X	Χ		Outpatient
Blood Pressure Control	Χ		X	Χ		Outpatient
Falls with Injury	Based on QI & CNE Input					Inpatient
Days of Cash on Hand	Based on CFO Input					Administrative
Operating Margin	Based on CFO Input					Administrative
Days in Accounts Receivable	Based on CFO Input					Administrative
Charity Care as a percent of net revenue	Based on CFO Input					Administrative
Labor Cost as a percent of net revenue		В	ased on CFO Inp	ut		Administrative



Barriers to Reporting

- EMR limitations
- Staffing
- Measures specifications differences
- Multiple reporting platforms
- Changing criteria from year to year





Updated PMCC Processes

Laura Pennington, Health Care Authority



Updating PMCC administrative processes

- Quorum for voting
 - ▶ Need to have a majority present to vote (over 50%)
 - ▶ If not able to attend, please send a replacement who can vote on your behalf
 - > If this is not possible, please reach out to Laura P. for additional options
- Expectations of members
 - Attendance
 - > If you are not able to attend, please send a representative in your place
 - Required "Open meeting" training
 - Retirement of members
- Adding new members
- Official public comment period

Request for consideration to add Obesity Measures to the State Common Measure Set

Laura Pennington, Health Care Authority



Request to add obesity measures

- Letter received from Novo Nordisk in 2022 to consider the addition of measures that address obesity
- Currently there are two survey-based measures on the WSCMS
 - Youth Obesity (Self-reported BMI)
 - Adult Obesity (Self-reported BMI)
- We acknowledge the importance of this issue
- There are currently no new nationally-vetted obesity measures
- Novo is currently working with the Minnesota Community Measurement group to develop and pilot 5 new measures
- In keeping with our measurement criteria, we felt it would be premature to bring to the PMCC until there are appropriate and validated measures for consideration

Wrap Up/Next steps

- Action items
- Next meeting
 - ► April 2023 (TBD)
 - Proposed agenda topics:
 - > Review of WSCMS data
 - > Send topics to Laura P.