

Amendment 1 to RFP #20150123

Appendix C-MississippiCAN 2014 Performance Measures- has been added to RFP #20150123 (please see below)

Receipt of Amendment Acknowledged: _____

Title: _____

Appendix C: 2014 MississippiCAN Performance Measures

DOM Performance Measures	Relevant HEDIS Measure(s)	
Effectiveness of Care Measures		
OBESITY		
1. BMI for adults Percentage of members who had an outpatient visit and their body mass index (BMI) documented during the measurement period.	Adult BMI Assessment (ABA)	63.15 percent
2. BMI, weight assessment for nutrition and physical activity counseling for children and adolescents Percentage of members who had an outpatient visit with a PCP or OB/GYN and who had evidence of BMI percentile documentation, counseling for nutrition, and counseling for physical activity during the measurement year (<i>BMI Percentile Total</i>)	Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents – <i>BMI Percentile (Total)</i>	26.99 percent
	Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents- <i>Counseling for Nutrition (Total)</i>	39.72 percent
	Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents- <i>Counseling for Physical Activity (Total)</i>	27.25 percent
ASTHMA		
3. Use of appropriate medications for people with asthma	Use of Appropriate Medications for People with Asthma-Total (ASM) <i>Percentage of members age 5-11 and 12-50 who were identified as having persistent asthma and who were appropriately</i>	Total- 89.44 percent 5-11 years of age-95.94 percent 19-50 years of age- 74.76 percent

	<i>prescribed medications during the measurement year</i>	
4. Asthma-related ER visits <i>Percentage reduction in asthma-related ER visits</i>	The 2013 data for members with diagnosis of asthma (specified dx codes) and calculate the percentage that asthma related ER visits. Then for 2014, report the percentage of reduction in asthma related (specified dx codes) ER visits	35 percent decrease in ER visits from 2013 data reporting for each CCO
5. Avoidable asthma-related re-hospitalizations <i>Percentage reduction in avoidable asthma-related hospitalizations</i>	The 2013 data for members with diagnosis of asthma (specified dx codes) and calculate the percentage of asthma related re-hospitalizations- the number of members who were admitted during 2013 with diagnosis of asthma more than once (re-hospitalization). Then for 2014, report the percentage of reduction in asthma related re-hospitalization-get percentage by taking number of asthma related admissions that had more than one admission for asthma related diagnosis and compare it to the 2013 to report the percentage	35 percent decrease in ER visits from 2013 data reporting for each CCO
WELL-CHILD AND EPSDT		
6. Lead Screening for Children <i>Percentage of children 2 years of age who had one or more capillary or venous lead blood test for lead poisoning by their second birthday</i>	Lead Screening in Children (LSC)	57.35 percent
7. Childhood Immunizations <i>Percentage of children 2 years of age had four diphtheria, tetanus and acellular pertussis (DTaP); three polio (IPV); one measles, mumps and rubella (MMR); three H influenza type B (HiB); three hepatitis B (Hep B); one chicken pox (VZV); four pneumococcal conjugate (PCV); two hepatitis (HepA); two or three rotavirus (RV); and two influenza (flu) vaccines by their second birthday</i>	Childhood Immunization Status-Combo 2 (CIS) *Note: The HEDIS measure calculates a rate for each vaccine and nine separate combination rates. This sample HEDIS measure uses Combo 2, which is a combination of vaccines	90.00 percent (HEDIS) DOM contract requirement Immunization rate of 90 percentile
8. Childhood Immunizations <i>Percent of children age one or under the age of one who have received up-to-date immunizations using the ACIP Recommended Immunization Schedule –</i>	Contractually required	90.00 percent DOM contract requirement Immunization rate of 90 percentile

<p><i>DOM contract requirement of 90%</i></p> <p>a) <i>Report the number and percentage of members 12 months old who had a well-child visit during their 12 months of life</i></p>		
<p>9. Well-Child Visits in the First 15 months of Life (HEDIS Modifier)</p> <p><i>DOM modified to limit to first 12 months of life for 2014 only</i></p>	Well-Child Visits (HEDIS)	82.73 percent
<p>10. Well-Child Visits in the First 15 months of Life (HEDIS Modifier)</p> <p>*CCO to report either number 9 or 10 based on their population and expansion of children in 2015</p>	Well-Child Visits (HEDIS)	82.73 percent
<p>11. EPSDT Screening</p> <p><i>Percentage of children age one or under the age of one who received a Periodic Health Screening Assessment</i></p>	Quarterly 416 Report	DOM Target: Screening rate of 85 percent. For a child enrolled from birth to 12 months, EPSDT periodicity schedule dictates six (6) screens
<p>DIABETES</p>		
<p>12. Nephropathy Screening</p> <p><i>Percentage of members with diabetes who received a nephropathy screening test</i></p>	Comprehensive Diabetes Care (CDC) Medical Attention for Nephropathy	90.33 percent
<p>13. Cholesterol Screening for diabetes</p> <p><i>Percentage of members with diabetes who received a LDL-C Screening test</i></p>	Comprehensive Diabetes Care (CDC) LDL Screening	74.06 percent
<p>14. Cholesterol control for diabetics</p> <p><i>Percentage of members 18 through 75 years of age with diabetes mellitus (Type 1 and Type 2) whose most recent low-density lipoprotein cholesterol (LDL-C) level is less than 100 mg/dl</i></p>	Comprehensive Diabetes Care (CDC) LDL Poor Control (< 100 mg/dl)	16.51 percent

<p>15. Blood sugar poorly controlled in people with diabetes</p> <p><i>Percentage of members with HbA1c results greater than or equal to 9.0 percent</i></p>	<p>Comprehensive Diabetes Care (CDC) HbA1c Poor Control (> 9.0 percent)</p>	<p>83.24 percent</p>
<p>16. Blood sugar well controlled in people with diabetes</p> <p><i>Percentage of members with HbA1c results less than or equal to 8.0 percent</i></p>	<p>Comprehensive Diabetes Care (CDC) HbA1c Good Control (< 8.0 percent)</p>	<p>34.99 percent</p>
<p>CONGESTIVE HEART FAILURE</p>		
<p>17. Ace inhibitor therapy</p> <p><i>Percentage of members 18 or older on persistent medications (ACE inhibitors) for at least 180 days who received at least one annual monitoring</i></p>	<p>Annual Monitoring for Patients on Persistent Medications (MPM)</p>	<p>96.02 percent</p>
<p>18. Congestive Heart Failure</p> <p><i>Percentage decrease in CHF-related hospital readmissions</i></p>	<p>The 2013 data for members with diagnosis of CHF (specific dx codes) and calculate the percentage of CHF related re-hospitalizations- the number of members who were admitted during 2013 with diagnosis of CHF more than once (re-hospitalization). Then for 2014, report the percentage of reduction in CHF related re-hospitalization- percentage by taking number of CHF related admissions that had more than one admission for CHF related diagnosis and compare it to the 2013 to report the percentage</p>	<p>35 percent decrease in ER visits from 2013 data reporting for each CCO</p>

MATERNAL AND CHILD HEALTH		
<p>19. Pre and post-natal complications</p> <p>a) <i>Number and percent of deliveries that meet the following criteria, based on gestational weight: low birth weight, very low birth weight, or large for gestational age</i></p> <p>b) <i>Number and percentage of deliveries with prenatal complications (list prenatal complications)</i></p>	<p>Number and percent of deliveries that meet the following criteria:</p> <ul style="list-style-type: none"> • Get the weight for low birth weight • Get the weight for very low birth weight • Get the weight for large for gestational age <p>Pre-natal complications include members with the following—Pregnancy Induced Hypertension (PIH), gestational diabetes, alcohol/drug/smoking dependence, poor nutrition status, maternal co-morbidities, pre-term labor, maternal age</p> <p>Report the number and percent of deliveries that due to pre-natal complications listed, resulted in low birth weight, very low birth weight and large for gestational age</p>	<p>5 percent decrease for each CCOs 2013 reported percentage of complications for pre-natal complications</p>
<p>20. Pregnancy Outcome for Members Enrolled Throughout the Pregnancy</p> <p><i>For those members who were enrolled in the first trimester and maintained enrollment with the same CCO throughout the pregnancy and receiving case management services, report the outcome of the pregnancy</i></p>	<p>For these members report any that non-scheduled delivery prior to 38 weeks of gestation.</p>	<p>5 percent decrease for each CCOs 2013 reported non-scheduled delivery prior to 38 weeks gestation.</p>
<p>21. Prenatal and Postpartum Care</p> <p>a) <i>Timeliness of Prenatal Care: Percentage of deliveries that received a prenatal care visit as a member of the organization in the first trimester or within 42 days of enrollment in the organization</i></p> <p>b) <i>Postpartum Care: Percentage of deliveries that had a postpartum visit on or between 21 and 56 days after delivery.</i></p> <p>c) <i>Report the number of members (that received a postpartum visit on or between 21 and 56 days of delivery</i></p>	<p>Modified HEDIS</p>	<p>a) 73.82 percent b) 57.20 percent</p>
MEMBER SATISFACTION		
<p>22. Member Satisfaction</p> <p>a) <i>Improve overall rating of health plan (CCO)</i></p>	<p>CAHPS</p>	<p>DOM established to increase by 5 percent the :</p> <p>a) Overall rating of the health plan</p>

b) <i>Improve percentage of members reporting they receive needed care</i>		(CCO) b) Percentage of members reporting they receive needed care
BEHAVIORAL HEALTH		
<p>23. Mental Health Utilization</p> <p>a) <i>Number and percentage of members receiving mental health services by service type (e.g., any service inpatient, intensive outpatient/partial hospitalization, outpatient or Emergency Department)</i></p> <p>b) <i>All members receiving behavioral health services must be enrolled in high-risk case management. For this subset of the population:</i></p> <ul style="list-style-type: none"> ➤ <i>Treatment plan: number and percentage of members receiving behavioral health services with a treatment plan (therapy, medications, etc.)</i> ➤ <i>Number of emergency department visits for members receiving behavioral health services</i> 	<p>Percentage of members receiving mental health services (e.g., any service, inpatient, intensive outpatient/partial hospitalization, outpatient or ED) and what was the outcome of the visit- therapy, medications, day treatment, intensive therapy, etc.</p>	<p>a) 17.05 percent</p> <p>b) 5 percent decrease in number of emergency room visits with a behavioral health primary diagnosis for each CCOs 2013 reporting</p>
<p>24. Screening for Clinical Depression and Follow-Up Plan</p> <p>a) <i>Number and percent of members 18 years and older who were screened for clinical depression using a standardized tool</i></p> <p>b) <i>Number of members screened who were referred to the behavioral health subcontractor for case management or behavioral health services (Note: Initial performance measure would involve the CCO developing and using a standardized tool)</i></p>	<p>Percentage of members 18 years and older screened for clinical depression using a standardized tool and with documented follow-up, including referral to therapy, inpatient treatment, medication, intensive therapy, etc.</p> <p>CMS Core Adult Measure</p>	<p>a) 35 percent decrease in ER visits from 2013 data reporting for each CCO</p> <p>b) 100 percent should be referred to BH case management or behavioral health services based on the clinical depression screening tool findings when indicated</p>
<p>25. Follow-up After Hospitalization for Mental Illness (HEDIS)</p> <p>a) <i>Percentage of members completing a follow-up appointment after hospitalization for a mental illness within 30 days and/or 7 days of discharge.</i></p> <p>b) <i>CCO to report percentage of members who did not complete a follow-up appointment within the standards who had a re-admission for mental illness within 15 days of what would have been the 7 day appointment or 45 days from what should have been the 30 day appointment.</i></p>	<p>Percentage of members completing a follow-up appointment after hospitalization for a mental illness within 30 days and/or 7 days of discharge</p>	<p>a) 30 days-55.90 percent 7 days-53.17</p> <p>b) 35 percent decrease in missed follow up appointments resulting in re-admission for 7 days and/or 45 days from 2013 data reporting for each CCO</p>