



**Department
of Health**

Medicaid
Redesign Team

WEBINAR: PPS Preparation for Data Collection Associated with DSRIP Projects- non-claims measures for Domain 2 and 3

June 26, 2015

Presentation Overview

- Purpose of presentation
- Recap: Performance Measures and types of Domain 2 and 3 non-claims measures
- Medical Record Review – Domain 3 projects
- UAS-NY assessments for Palliative Care projects (3.g.i and 3.g.ii)
- Early Elective Delivery for Perinatal projects (3.f.i)
- PAM assessment for UI, NU, and LU for Patient Activation projects (2.d.i)
- Clinician and Group CAHPS Survey of Domain 2 and 3 Projects

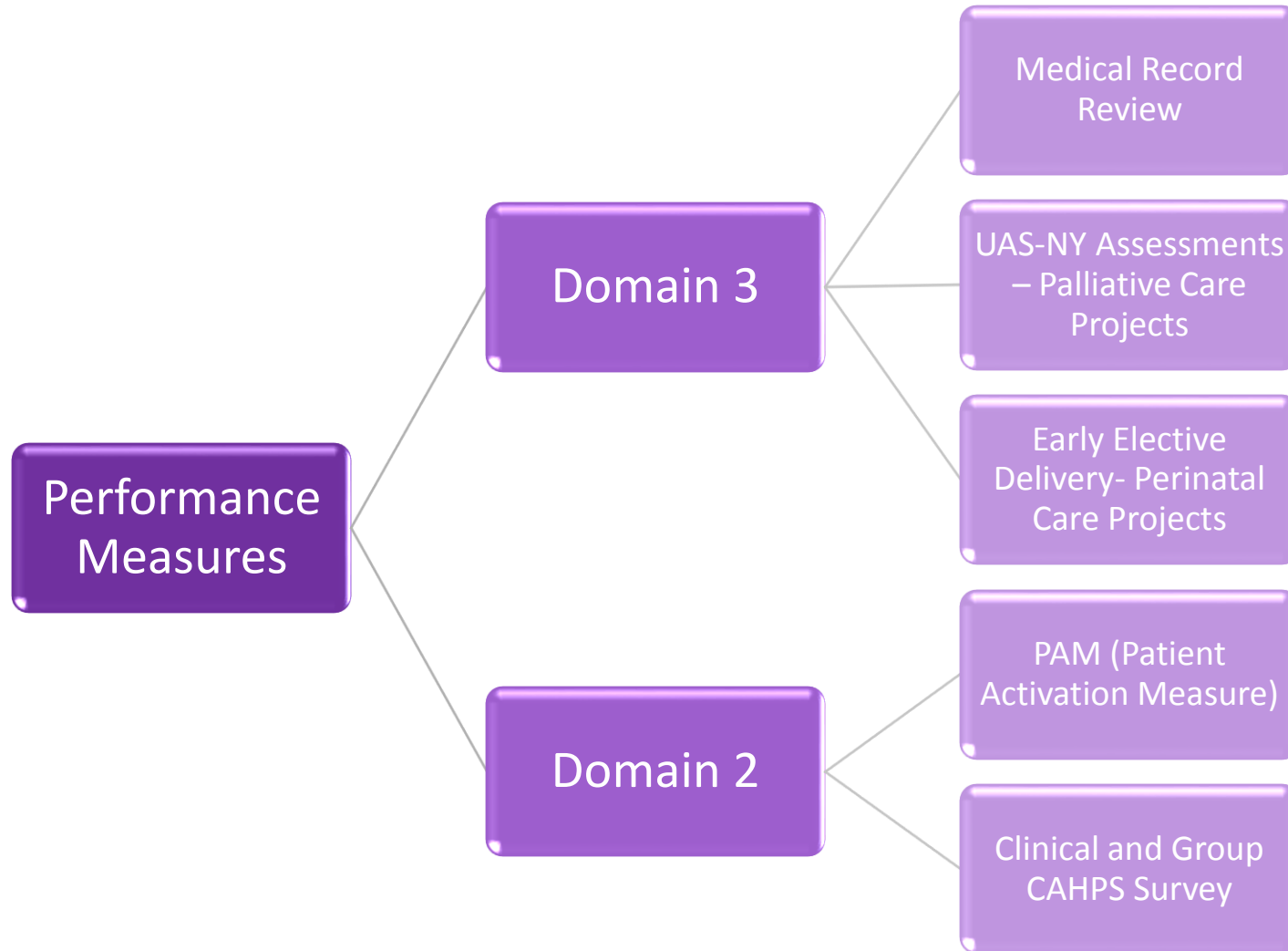
Purpose of presentation

- This presentation:
 - Provides PPSs with information on what they will need to plan for
 - Provides PPSs with details about:
 - Domain 2 and 3 non-claims performance measures and data required
 - A brief explanation on how PPSs can prepare themselves, including types of resources needed
 - Information about upcoming training sessions available

Domain 2 and 3 - Non-Claims measures

- This presentation illustrates that there are three instances in Domain 3 where non-claims data is required and two instances in Domain 2 in which the PPS' will be involved in data collection
- The presentation identifies each of these instances then provides a brief overview of:
 - Timelines
 - Next Steps
 - Resources required
 - Upcoming training sessions
- The presentation is meant to assist PPSs to begin data collection so that they are able to report on non-claims performance measures

Recap: Performance Measures and Types of Domain 2 and 3 non-claims measures



Perform Medical Record Review

Domain 3 projects

Measures Obtained from Medical Record Review

Screening for Clinical Depression and Follow-Up (SCD)

*Cholesterol Management for Patients with CV Conditions (CMC)**

Controlling High Blood Pressure (CBP)

Comprehensive Diabetes Care (CDC)

Viral Load Suppression (VLS)

Prenatal and Post Partum Care (PPC)

Frequency of Ongoing Prenatal Care (81% or more)

Childhood Immunization Status (CIS)

Lead Screening in Children (LSC)

*Cholesterol Management may be updated based on changes to HEDIS, awaiting approval from CMS

NYS DOH sponsored C&G CAHPS for Medicaid Enrollees TimeLine

Timelines

Next Steps

Resources
RequiredTraining
Sessions

Process Step	Responsible	Date Anticipated
Eligible Member Frame created and provided to vendor	DOH	August-2015
C&G CAHPS survey administration by vendor	DOH	September – December 2015
PPS result report from vendor	DOH	February, 2016

NYS DOH sponsored survey will be administered annually by a vendor. PPSs do not need to submit any information for this survey.

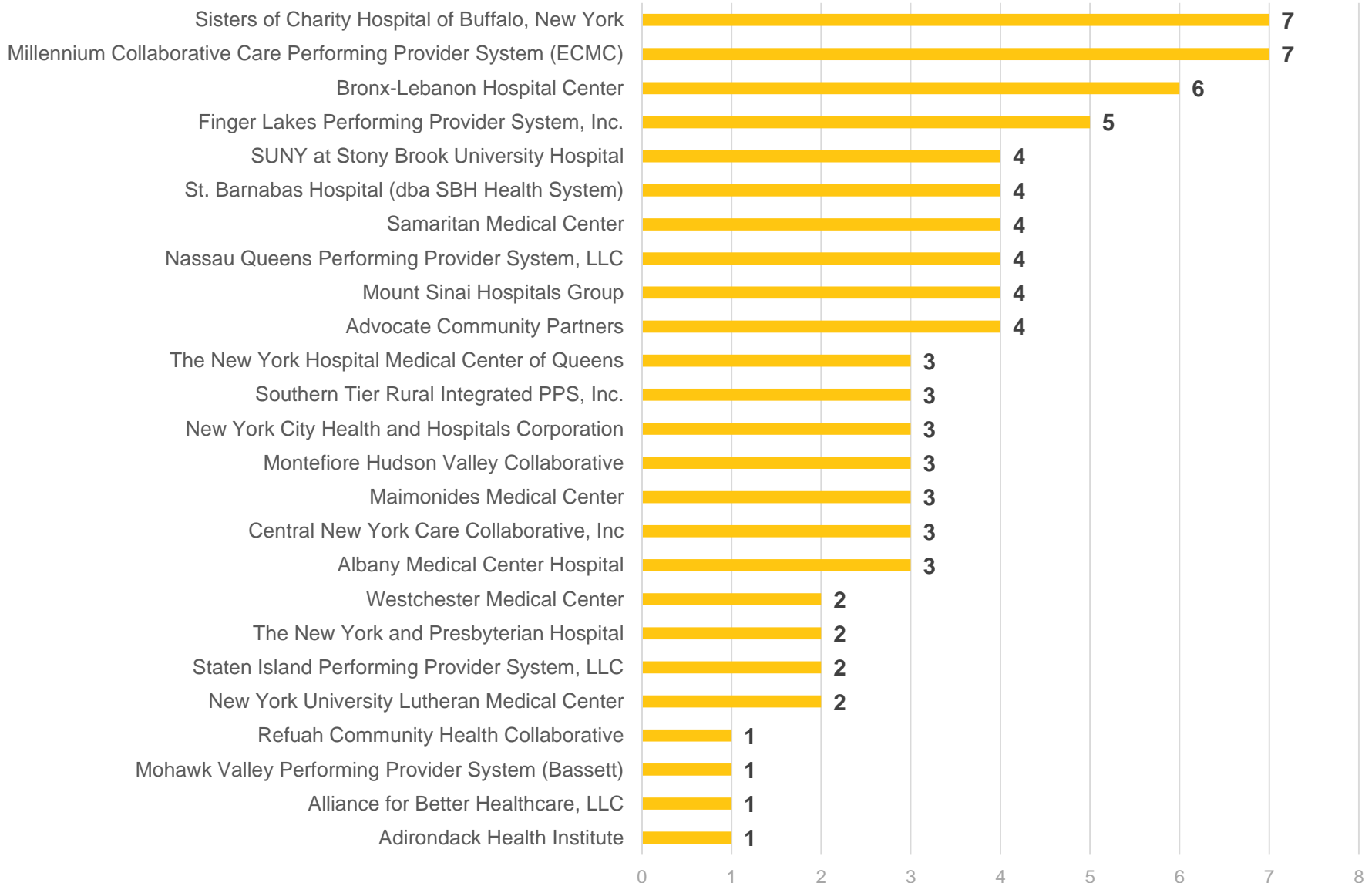
Number of Measures that Require Medical Record Review by PPS

Timelines

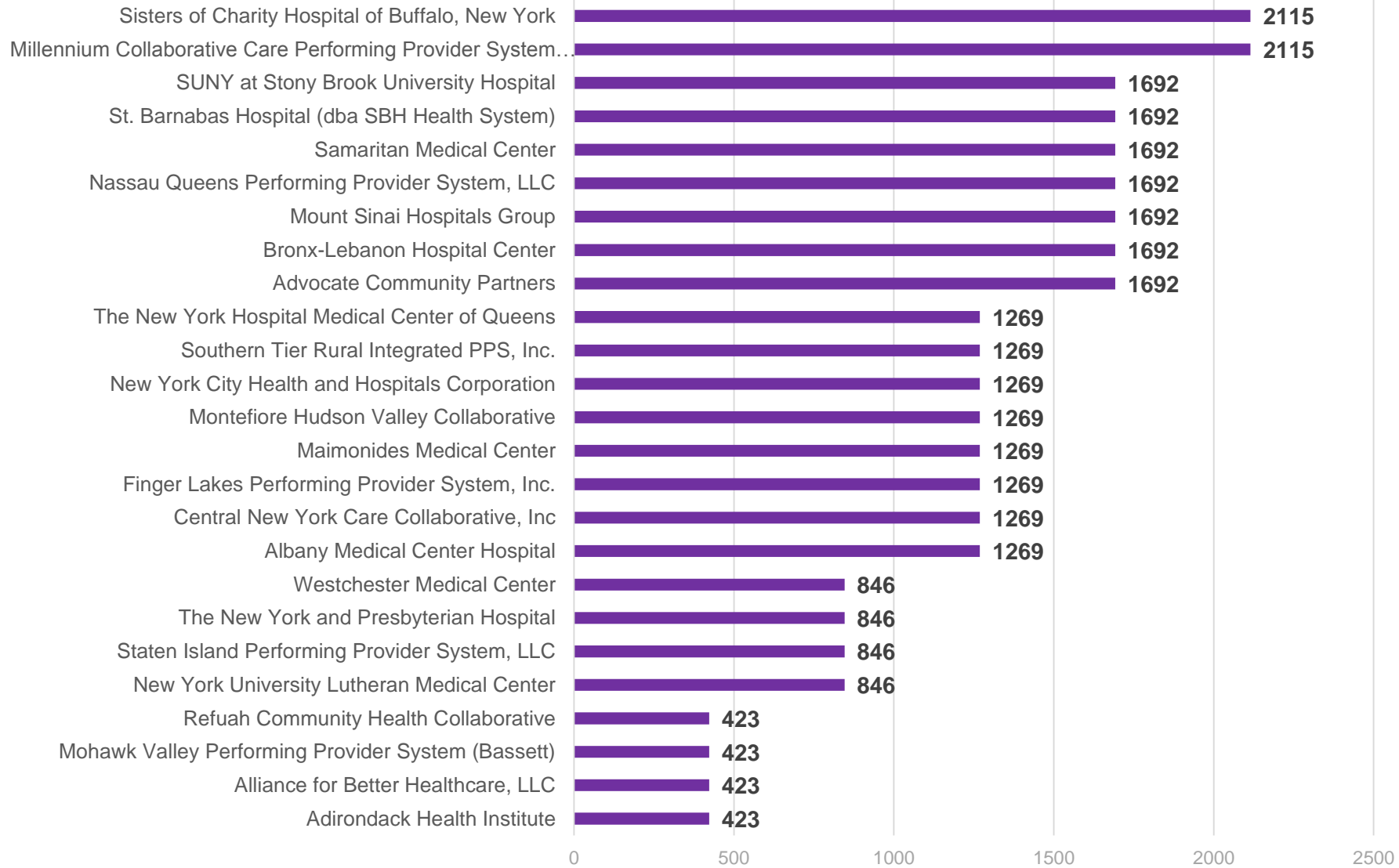
Next Steps

Resources Required

Training Sessions



Number of Medical Charts to Review by PPS



Timelines

Next Steps

Resources Required

Training Sessions



Medical Record Collection- Next Steps

Timelines

Next Steps

Resources
RequiredTraining
Sessions

- a) PPS Samples Generation and Record Request
 - Secure transfer mechanism between DOH and PPSs
- b) Medical Record Abstraction Process (DOH Single Vendor responsible MY 1 because Opt Out will not be completed until after MRR completed)
 - Record collection coordination
 - Review Staff
 - Over-read Staff
 - Data entry
- c) Review Validation Process
 - Records and abstraction forms transmitted securely to validation vendor
- d) Member Detail File Production
 - Data entry and verification

Medical Record Collection- Next Steps

Timelines

Next Steps

Resources
RequiredTraining
Sessions

a) PPS Sample Generation and Record Request

- OQPS will identify a sample population for each PPS (for each measure)
- File transmitted securely to DOH Single Vendor
- DOH Single Vendor will manage the following
 - Data available to determine providers
 - Determining record chase logic
 - Request Letter production (members, providers, visit dates)
 - Record retrieval and retention coordination

TIMEFRAME: August – September 2015

Medical Record Collection- Next Steps

Timelines

Next Steps

Resources
RequiredTraining
Sessions

b) Medical Record Abstraction Process

- Abstraction tool (paper tool MY1; moving to web application future years)
- PPS Assistance Training (for communication and support of DOH Single Vendor)
- Over-read process for validation of abstraction work
- Support for questions regarding specifications
- Data entry of abstraction findings

TIMEFRAME: September– November 2015

Medical Record Collection- Next Steps

Timelines

Next Steps

Resources
RequiredTraining
Sessions

c) Review Validation Process

- Validation of the information captured from medical records is important to ensure consistency of results when measuring improvement over time
- Random sample of 30 records per measure will be reviewed
- Validation vendor will review records and issue determination of findings
- Record findings will pass or fail; if the threshold of failures is exceeded, the data for the measure will be invalidated and not included in the result calculation
- Ongoing support from vendor with opportunity to test abstraction findings prior to the validation

TIMEFRAME: mid November – mid December 2015

Medical Record Collection- Next Steps

Timelines

Next Steps

Resources
RequiredTraining
Sessions

d) Member Detail File Production

- Information collected from medical records extracted/entered into Member Detail File
 - Members excluded from a measure need to be indicated in the denominator column of the measure
 - Members pulled from the oversample need to be indicated in the denominator column
- Review of data entry for errors
 - Counts of denominator columns larger than numerator columns
 - Numerator is '0' whenever denominator is '0'
- Secure file transfer to NYS DOH

TIMEFRAME: end December 2015 – early January 2016

Medical Record Collection- Resources Required

Timelines

Next Steps

Resources
RequiredTraining
Sessions

1. Staff to send letters/emails requesting medical records, coordinate retrieval of records, and organize what records have been reviewed or not
2. Qualified medical record reviewers (number depends on the number of measures associated with your projects)
3. Staff to over-read abstracted data to verify consistency between reviewers, completeness of data elements in review
4. Data entry staff for the medical record findings into a file
5. Technical support to produce the Member Detail file from the data entry file

PPSs will only be responsible for supporting the DOH Single Vendor. Support activities will include assistance with tracking the sample request, data collection, and follow-up questions. The PPS will not be responsible for hiring a Qualified Medical Record Review vendor.

Medical Record Collection- Upcoming Training Sessions

Timelines

WHEN: TBD, July 2015

WHO: PPS staff involved in medical record collection processing

PURPOSE: Train designated staff members how to:

- ✓ Coordinate record requests and retrieval
- ✓ Determine what providers to ask for records
- ✓ Develop data entry system
- ✓ Oversee quality of reviews and data entry

Next Steps

Resources
RequiredTraining
Sessions

UAS-NY Assessments

Palliative Care Projects 3.g.i. & 3.g.ii.

Measures Obtained from Uniform Assessment System

Percentage of members who remained stable or demonstrated improvement in pain

Percentage of members who had severe or more intense daily pain

Percentage of members whose pain was not controlled

Advanced Directives – Talked about appointing for health decisions

Depressive feelings – percentage of members who experienced some depression feeling

UAS-NY Assessments - Timeline

Timelines

Process Step	Responsible	Date Anticipated
Collect UAS Assessments for MY 1	DOH	September – December 2015

Next Steps

Resources
Required

Training
Sessions

UAS- NY Assessment – Next Steps

Timelines

- Review of PPS network for agencies currently conducting UAS-NY assessments (i.e. home care agencies)
- Identification of scope of members in palliative care not currently in long-term home care programs
- Staff needed to conduct UAS-NY assessments for members outside of long-term home care programs
 - Health Commerce System and UAS-NY accounts for staff and lead PPSs
 - Training for staff
- UAS-NY assessments completed every 6 months

Next Steps

Resources
Required

TIMEFRAME:

1. **Data for MY1 will be based on MLTC UAS-NY assessments attributed to the PPS similar to baseline**
2. **Data for MY2 will be based on all (both PPS and MLTC) completed UAS-NY assessments attributed to the PPS**

Training
Sessions

UAS- NY Assessment – Resources Required

Timelines

1. UAS-NY training and accounts for staff who will be conducting assessments for people not in long-term care programs who are involved in palliative care
2. PPS training to access UAS-NY assessments for completed assessments for the attributed population in palliative care

Next Steps

Resources
RequiredTraining
Sessions

UAS- NY Assessments- Upcoming Training Sessions

Timelines

WHEN: TBD

WHO: PPS staff involved in UAS-NY collection

PURPOSE: Share details on:

- ✓ Methods to determine trained UAS-NY assessors within PPS network and additional staff training needs
- ✓ Set up Health Commerce System and UAS-NY accounts
- ✓ Completing UAS-NY training
- ✓ Accessing completed assessments in the UAS-NY system

Next Steps

Resources
RequiredTraining
Sessions

Early Elective Delivery Data

Perinatal Project 3.f.i.

Early Elective Delivery- Timeline

Timelines
Next Steps
Resources Required
Training Sessions

Process Step	Responsible	Date Anticipated
<p>MY2 Data Collection (prospective; monthly)</p> <ol style="list-style-type: none"> 1) Review medical charts EACH MONTH to identify those that meet case definition 2) Use the data collection form 3) Submit data via the Health Commerce System 	Hospitals	<p>July 1, 2015 – June 30, 2016</p> <p><i>*Data is due no later than the last Wednesday of each subsequent month.</i></p>
<p>MY1 Data Collection (retrospective)</p> <ol style="list-style-type: none"> 1) Look back and review PAST medical charts to identify those that meet case definition 2) Use the data collection form 3) Submit data via the Health Commerce System by December 1, 2015 	Hospitals	July 1, 2015 – November 30, 2015

Early Elective Delivery– Next Steps

Timelines

- Hospitals participating with a PPS that has selected this project will review medical records for all scheduled births occurring at or after 36 0/7 weeks and at or before 38 6/7 weeks gestation
 - Many hospitals recently participated in the NYS Perinatal Quality Collaborative capturing this measure, but all hospitals in the network are required to review and submit the data forms
- Hospitals will establish Health Commerce System (HCS) accounts to submit the data monthly
- Monthly data will be aggregated for a measurement year result for each hospital and then aggregated to the PPS result

Next Steps

Resources
Required

TIMEFRAME:

1. Data for MY1 due December 2015 (retrospective)
2. Data for MY2 submitted monthly; begins in July 2015 (prospective)

Training
Sessions

Early Elective Delivery– Resources Required

Timelines

1. Hospital staff to complete record review and the NYS PQC form for all scheduled births occurring at or after 36 0/7 weeks and at or before 38 6/7 weeks gestation each month

Next Steps

Resources
RequiredTraining
Sessions

Early Elective Delivery- Upcoming Training Sessions

Timelines

WHEN: Monday June 22, 2015 @ 9:30-10:30am

WHO: New hospital staff members who are designated to data enter Early Elective Delivery (EED) data

PURPOSE: Train designated staff members how to:

- ✓ Complete the NYSPQC Scheduled Delivery Form
- ✓ Submit data electronically via the Health Commerce System (HCS)

Next Steps

Resources
RequiredTraining
Sessions

Patient Activation Activities (P.A.M. Survey)

Project 2.d.i.

PAM Survey- Timeline

Timelines
Next Steps
Resources Required
Training Sessions

Process Step	Responsible	Date Anticipated
Determine Eligible Patients (LU, NU, UI)	PPS	TBD
Individual Provider performs PAM survey on eligible patients	PPS	TBD
Enter patient responses into PAM Tool	PPS	TBD
Results enter Insignia database	PPS	TBD
PAM Level calculated	DOH	TBD

PAM Survey– Next Steps

Timelines

- DOH is working through policy decisions related to the methodology of PAM application and tracking
- State will release training dates soon for;
 - Scope of assessment
 - Identification of LU, NU, UI members
 - Staff needed to conduct PAM survey
 - Insignia accounts for staff and lead PPSs
 - Training for staff
 - Data Collection and aggregation

Next Steps

Resources
RequiredTraining
Sessions

TIMEFRAME: July – September 2015

PAM Survey– Resources Required

Timelines

Next Steps

Resources
Required

Training
Sessions

1. Insignia training and accounts for staff who will be conducting PAM surveys

PAM Survey- Upcoming Training Sessions

Timelines

WHEN: TBD

WHO: Staff members who are designated to perform PAM

PURPOSE: Train designated staff members how to apply the PAM tool

Next Steps

Resources
Required

Training
Sessions

Clinical and Group CAHPS Survey

Domain 2 and 3

Clinical and Group CAHPS Survey – Next Steps

Timelines

Next Steps

Resources Required

Training Sessions

- DOH is working to hire DataStat to conduct the CAHPS Survey for the Domain 2 and 3 C&G Measures
 - DataStat will prepare the questionnaire, select the sample frame, and administer the survey with a mixed mail/phone methodology in a 5 wave procedure over a 12 week time frame
 - The completed surveys are processed and analyzed for PPS results for a number of composites, ratings and measures

Project 2.d.i - DOH is working with CMS to amend and possibly remove this metric. More information will be provided as soon as it is available.

C&G CAHPS Performance Measurement
Care Coordination with provider up-to-date about care received from other providers
Getting Timely Appointments, Care and information
Helpful, Courteous, and Respectful Office Staff
Primary Care - Length of Relationship
Primary Care - Usual Source of Care
Aspirin Use
Discussion of Risks and Benefits of Aspirin Use
Flu Shots for Adults Ages 18 – 64
Health Literacy
Medical Assistance with Smoking and Tobacco Use Cessation - Advised to Quit
Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Medication
Medical Assistance with Smoking and Tobacco Use Cessation - Discussed Cessation Strategies

Questions and Comments should be addressed to:

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