

MMA Technical Assistance

QUALITY IMPROVEMENT



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IPRO Meetings, 7/25-26





FOCUS

- **CMS is a Public Health Agency**
- **Quality Improvement for MA Plans**
 - Subpart D of Title II
- **Quality Improvement for PDPs and MA-PDs (not covered)**
 - Subpart D of Title I

HMOs and PPOs

- **Chronic Care Improvement Projects (CCIP)**
- **Quality Improvement (QI) Projects**
- **Performance Measures Reporting**
- **See rules and preamble**

CCIP (Disease Management)

- **Methods for identifying persons with chronic conditions**
- **Mechanisms for monitoring**
- **Reporting to CMS**
 - Diseases served
 - Services
 - Types of performance measures



CCIP (Disease Management) contd

- **Guidance from CCIP pilot program under MMA Section 721**
- **Your input on future directions and technical assistance needs**

QI Projects

- **Measure performance for clinical and nonclinical areas**
 - Systems interventions
 - Improve performance
 - Periodic follow-up on the intervention effects

QI projects continued

- **Assess performance using quality indicators**
 - Objective
 - Measure outcomes
 - Collect valid and reliable data
 - Interventions must achieve demonstrable improvement
 - Report to CMS
- Encourage participation in national voluntary projects
- Your input on national projects



Performance Measures Reporting

- **HEDIS, CAHPS, and HOS**
 - All HMOs and PPOs, except some special needs plans (SNPs)
- **CAHPS and HOS**
 - same for HMOs and PPOs



Performance Measures Reporting

- **HEDIS**

- PPOs

- Initial years, just administrative data
 - Over time, medical records data also

- HMOs

- Continue administrative and medical record data

Performance Measures Reporting

- **SNPs**
 - Dual Eligibles
 - same as above
 - Institutionalized
 - Submit Nursing Home Minimum Data Set (MDS) like measures, hospital measures
 - Will also compare on MDS
 - Other types of plans
 - To be determined

Coordinated Care Plans

- **HMOs and local PPOs with HMO license**
- **Additional requirements**
 - Written policies for service authorizations
 - Detect over and under utilization
 - Same HEDIS measures as HMOs

- **Including Private Fee for Service Plans and MSAs**
 - Health information systems
 - Annual review of impact and effectiveness of QI program
 - Remedial action on all problems

FUTURE DIRECTIONS

- **Option to submit Report to Congress for new measure systems – no current plans**
- **Pay for performance (P4P) – see preamble**
 - CMS is conducting several demonstrations, e.g., with hospitals and with physicians
 - MEDPAC has made legislative proposal for managed care using HEDIS and CAHPS
 - Senate Finance Committee recently introduced P4P legislation that includes MA plans.
- **Challenge stakeholders to further develop standards**

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