Medicaid Scorecard

Alyssa Brown
Deputy Director, Office of Innovation, Research, and Development
December 16, 2019
Overview

• The Centers for Medicare & Medicaid Services (CMS) developed the Medicaid and Children's Health Insurance Program (CHIP) Scorecard to increase public transparency about the programs’ administration and outcomes.

• The Scorecard includes measures voluntarily reported by states, as well as federally reported measures.
  • Primarily the Adult and Child Health Care Quality Measures (also called Adult and Child Core Sets).

• First Scorecard (1.0): Released June 2018
  • FFY 2017/CY16 data

• Second Scorecard (2.0): Released November 2019
  • FFY 2018/CY17 data
Overview

• National Context: Highlights trends and how Medicaid and CHIP programs vary across states
  • Who enrolls in Medicaid and CHIP
  • How states deliver care in Medicaid
  • State efforts to collect and report data that support ongoing program improvement
  • Medicaid and CHIP expenditures

• Scorecard Measures are broken out into three pillars:
  • **State Health System Performance** - These measures show how states serve Medicaid and CHIP beneficiaries in six domains important for health care quality.
  • **State Administrative Accountability** - These measures provide insight into how states and the federal government work together to administer Medicaid and CHIP.
  • **Federal Administrative Accountability** - These measures provide insight into how states and the federal government work together to administer Medicaid and CHIP.
## State Health System Performance

### The Six Domains of the State Health System Performance Pillar

<table>
<thead>
<tr>
<th>Domain</th>
</tr>
</thead>
<tbody>
<tr>
<td>Promote Effective Communication &amp; Coordination of Care</td>
</tr>
<tr>
<td>Make Care Safer by Reducing Harm</td>
</tr>
<tr>
<td>Promote Effective Prevention &amp; Treatment of Chronic Diseases</td>
</tr>
<tr>
<td>Strengthen Person and Family Engagement as Partners in Care</td>
</tr>
<tr>
<td>Making Care Affordable</td>
</tr>
<tr>
<td>Work with Communities to Promote Best Practices of Healthy Living</td>
</tr>
</tbody>
</table>
State Health System Performance

• Maryland performed better than the national median on 17 measures and worse on only one measure in the 2019 Scorecard.

• For the 2019 Scorecard, Maryland reported on 5 of the 8 current behavioral health measures.
Pillar One: State Health System Performance

Promote Effective Communication & Coordination of Care

- Seven total measures in this domain
  - Five behavioral health measures
  - Maryland reported on 2/5 in the 2019 Scorecard

<table>
<thead>
<tr>
<th>Measure</th>
<th>Measure Description</th>
<th>2019 Scorecard</th>
<th>2018 Scorecard</th>
</tr>
</thead>
<tbody>
<tr>
<td>3a Adult</td>
<td>Percentage of Hospitalizations for Mental Illness with a Follow-Up Visit Within 7 Days of Discharge: Ages 21-64</td>
<td>The percentage of discharges for Medicaid beneficiaries age 21 and older who were hospitalized for treatment of selected mental illness diagnoses and who had a follow-up visit with a mental health practitioner. This measure is the percentage of discharges for which the beneficiary received follow-up within 7 days of discharge.</td>
<td>38.4%</td>
</tr>
<tr>
<td>3b Adult</td>
<td>Percentage of Hospitalizations for Mental Illness with a Follow-Up Visit Within 30 Days of Discharge: Ages 21-64</td>
<td>The percentage of discharges for Medicaid beneficiaries age 21 and older who were hospitalized for treatment of selected mental illness diagnoses and who had a follow-up visit with a mental health practitioner. This measure is the percentage of discharges for which the beneficiary received follow-up within 30 days of discharge.</td>
<td>60.3%</td>
</tr>
</tbody>
</table>
Pillar One: State Health System Performance

Promote Effective Communication & Coordination of Care

<table>
<thead>
<tr>
<th>Measure</th>
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<th>2019 Scorecard</th>
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</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>MD Rate</td>
<td>Nat’l Median</td>
</tr>
<tr>
<td>1 Child</td>
<td>Use of Multiple Concurrent Antipsychotics in Children &amp; Adolescents</td>
<td>NR</td>
<td>2.9%</td>
</tr>
<tr>
<td>2a Child</td>
<td>Follow-Up After Hospitalization for Mental Illness within 7 Days of Discharge: Ages 6-20</td>
<td>NR</td>
<td>44.7%</td>
</tr>
<tr>
<td>2b Child</td>
<td>Follow-Up After Hospitalization for Mental Illness within 30 Days of Discharge: Ages 6-20</td>
<td>NR</td>
<td>67.1%</td>
</tr>
</tbody>
</table>
Pillar One: State Health System Performance

Make Care Safer by Reducing Harm

- There is only one measure in this domain.

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</thead>
<tbody>
<tr>
<td>6 Nursing Home</td>
<td>Percentage of Long-stay Nursing Home Residents who got an Antipsychotic Medication</td>
<td>12.2%</td>
<td>14.4%</td>
</tr>
</tbody>
</table>

This measure reports the percentage of long-stay nursing home residents who received antipsychotic drugs from April 1 through March 31.
# Promote Effective Prevention & Treatment of Chronic Diseases

**Pillar One: State Health System Performance**

- There are 14 total measures in this domain
- Two behavioral health-related measures with an additional measure to be added in future Scorecards.

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<tr>
<td></td>
<td></td>
<td>MD Rate</td>
<td>Nat’l Median</td>
</tr>
<tr>
<td>15a Adult</td>
<td>Percentage with a New Episode of Alcohol or Drug Dependence who Initiated Treatment: Ages 18-64</td>
<td>31.4%</td>
<td>40.0%</td>
</tr>
<tr>
<td>15b Adult</td>
<td>Percentage with a New Episode of Alcohol or Drug Dependence who Initiated and Engaged in Treatment: Ages 18-64</td>
<td>21.7%</td>
<td>14.5%</td>
</tr>
<tr>
<td>NEW Adult</td>
<td>Use of Opioids at High Dosage in Persons without Cancer</td>
<td>N/A</td>
<td>New measure for future Scorecards</td>
</tr>
</tbody>
</table>

The percentage of beneficiaries age 18 and older with a new episode of alcohol or other drug (AOD) abuse or dependence who received the following:
- Initiation of AOD Treatment. Percentage of beneficiaries who initiate treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization, telehealth, or medication assisted treatment (MAT) within 14 days of the diagnosis.

The percentage of beneficiaries age 18 and older with a new episode of alcohol or other drug (AOD) abuse or dependence who received the following:
- Engagement of AOD Treatment. Percentage of beneficiaries who initiate treatment and who had two or more additional AOD services or MAT within 34 days of the initiation visit.

The percentage of beneficiaries age 18 and older who received prescriptions for opioids with an average daily dosage greater than or equal to 90 morphine milligram equivalents (MME) over a period of 90 days or more. Beneficiaries with a cancer diagnosis or in hospice are excluded.

Beneficiaries with a cancer diagnosis or in hospice are excluded.
The measures in this domain focus on making care affordable by optimizing resource use, which helps Medicaid and CHIP beneficiaries access the care they need and may lead to better health outcomes.

There are two measures in this domain, neither of which are directly behavioral health focused, but are impacted by behavioral health and somatic conditions.

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<td></td>
<td></td>
<td>MD Rate</td>
<td>Nat’l Median</td>
</tr>
<tr>
<td>20 Child</td>
<td>Emergency Department Visits per 1,000 Enrollee Months: Ages 0-19</td>
<td>Rate of ED visits per 1,000 enrollee months among children up to age 19</td>
<td>38.8%</td>
</tr>
<tr>
<td>21 Adult</td>
<td>Adult Emergency Department Visits</td>
<td>This measure reports on Emergency Department visits among adult Medicaid beneficiaries.</td>
<td>N/A</td>
</tr>
</tbody>
</table>
State Administrative Accountability

• These measures provide insight into how states and the federal government work together to administer Medicaid and CHIP.

• Measures include:
  • Timeliness of state submissions around various different programs and applications to CMS,
  • MAGI and CHIP application processing times,
  • T-MSIS quality issues, and
  • Initiation of Collaborative Investigations with CMS and Healthcare Fraud Prevention Partnership Participation.

• Payment Error Rate Measurement (PERM) measure to be included in a future Scorecard.
Federal Administrative Accountability

• These measures provide insight into how the federal government and states work together to administer Medicaid and CHIP.

• Measures include:
  • Timeliness of federal response to state submissions around various different program and applications, and
  • Managed care capitation rate review measures

• Managed care contract review measure to be included in future scorecards
Future Medicaid Scorecards expected annually in November.

CMS anticipates keeping the measures as consistent with the Adult and Child Core Sets as possible.

In the future, CMS anticipates increased reliance on T-MSIS data in lieu of state reported results.
Next Steps for Maryland

• Reporting on all behavioral measures to be completed for FFY19 (CY18 data), which is in process now.

• Behavioral health measures will be reported on claims data, rather than HEDIS vendor results like other measures.

• Ongoing monitoring of performance through both the CMS Scorecard and Managing for Results (MFR) reporting.

• The Department participates in the National Associations of Medicaid Directors (NAMD) Scorecard Advisory Group and is committed to contributing to the group moving forward.
Medicaid Scorecard

Additional Information

2019 Scorecard


Medicaid Adult Health Care Quality Measures


Medicaid Children's Health Care Quality Measures

Medicaid Scorecard

Contact Information

Alyssa Brown

• Alyssa.Brown@maryland.gov
• 410-767-9795