

HEALTH CARE PERFORMANCE MEASUREMENT IN THE CONTEXT OF PURCHASING 2006 WCHQ FALL FORUM

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Wisconsin Medicaid Program: By the Numbers

- ◆ 4.5 billion dollars in annual expenses.
- ◆ Program covers 1 out of 7 state residents.
- ◆ 70% of recipients covered by managed care.
- ◆ Process 3,000,000 claims per month.



How does the Medicaid program envision using WCHQ measures or processes to make informed purchasing choices?

- ◆ DHCF wants to develop a partnership with WCHQ to advance quality and economically efficient health care within the Medicaid program.
- ◆ Wisconsin Medicaid applied for a Medicaid Transformation Grant through CMS to advance this collaborative partnership (\$6.154M for FFY07 and FFY08) and further pursue value-based purchasing strategies in the Medicaid program.
- ◆ Wisconsin Medicaid intends to adapt its program data infrastructure to support a Population Health Baseline derived from Medicaid administrative claims and encounter data. The program will aggregate fee-for-service and managed care data, apply the WCHQ measurement methodology, and report on specific quality indicators, including chronic disease outcomes across the entire population.



What strategies does the Medicaid program envision using in the future?

- ◆ Transform the Medicaid reimbursement strategies, i.e., purchase for value rather than cost. Reward providers who use evidence-based best practices to manage chronic disease, such as diabetes, renal disease, coronary heart disease, congestive heart failure, and asthma.
- ◆ Advance P4P models and measures in the Medicaid program.
- ◆ Require publicly reported measures on quality performance outcomes for all Medicaid providers either through the WCHQ or the Medicaid repository.
- ◆ Wisconsin Medicaid currently has 42 measures on HMO performance included in the National Quality Measures Clearinghouse and 5 years of HMO performance data.
- ◆ A number of these measures are similar to the WCHQ measures but are targeted to the Medicaid population and the Department's health priorities.
- ◆ WCHQ does not currently measure blood lead toxicity screening in children. The Medicaid program's dataset could be included in the WCHQ's measures for comparison against other populations.



What could WCHQ and other similar organizations do better/differently to meet purchasers' needs (measures, processes)?

- ◆ Enable drill down of performance measures by specific populations across providers, such as payer groups, and population type. The majority of Medicaid population are women who are pregnant and children; however, low-income elderly and disabled (SSI) account for the majority of the Medicaid programs' expenditures – 75%.
- ◆ Provide more comparative information on value and cost of services.
- ◆ For DHFS, population health and addressing chronic health problems and health disparities among certain populations (such as racial disparities in healthy birth outcomes, preventing obesity in children) is important. Data should facilitate analysis of health care quality and performance for specific conditions and specific populations and regions in the state.



How does the Medicaid program see WCHQ and WHIO adding value to purchasing decisions?

- ◆ Setting and implementing standards for uniform measurement.
- ◆ Establishing health care benchmarks and care best practices to incorporate in our Medicaid managed care contracts.
- ◆ Continue to be change agents in helping transform our delivery system.

