

# OHIC Aligned Measure Sets 2023 Annual Review

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ACO Aligned Measure Set, Behavioral Health Measure Sets and Wrap-Up

*August 29, 2023*

# Agenda

1. Summary of August 7<sup>th</sup> Meeting Deliberations
2. Follow-up Task from the August 7<sup>th</sup> Meeting
  - CMS' *Screening for Depression and Follow-Up Plan*
3. Finish Reviewing ACO Measure Set Measures
4. Review Behavioral Health Hospital and Outpatient Behavioral Health Measure Sets
  - Measures with Significant Status or Specification Changes
  - Measured Proposed for Addition
5. Review Proposed 2024 Aligned Measure Sets
6. Public Comment
7. Next Steps

## Summary of August 7<sup>th</sup> Meeting Deliberations

# Summary of August 7<sup>th</sup> Meeting Deliberations (1 of 7)

- During the August 7<sup>th</sup> meeting, the Work Group reviewed the ACO Measure Set and made recommendations and learned of OHIC decisions:
  1. Recommendation: Elevate two measures from the Menu to the Core Set:
    - *Immunizations for Adolescents (Combo 2)*
    - *Lead Screening in Children*
  2. Decision: *Hospital-wide Readmission* from the Core to the Menu of the ACO and Acute Care Hospital for 2024 given the significant specification changes and (Recommendation) revisit whether to move the measure back to the Core Set for 2025.
  3. Recommendation: Add one measure to the Menu Set:
    - *Race, Ethnicity and Language Data Completeness\**

\*The specifications for this measure were adapted from Massachusetts EOHHS and were distributed with today's meeting materials.

# Summary of August 7<sup>th</sup> Meeting Deliberations (2 of 7)

- During the August 7<sup>th</sup> meeting, the Work Group reviewed the ACO Measure Set and made recommendations and learned of OHIC decisions:

4. Recommendation: Remove five measures from the Developmental Set:

- CAHPS Surveys*
- Depression Screening and Follow-Up for Adolescents and Adults*
- Depression Remission or Response for Adolescents and Adults*
- Unhealthy Alcohol Use Screening and Follow-Up*
- Utilization of the PHQ-9 to Monitor Depression Symptoms for Adolescents and Adults*

# Summary of August 7<sup>th</sup> Meeting Deliberations (3 of 7)

- During the August 7<sup>th</sup> meeting, we shared that EOHHS plans to move *Developmental Screening in the First Three Years of Life* from Pay-for-Performance (P4P) to Reporting-Only status in the AE Common Measure Slate because of its high performance and to create room for other P4P measures focused on other priorities (e.g., *Colorectal Cancer Screening*).
  - The Measure Alignment Work Group recommended retaining *Developmental Screening in the First Three Years of Life* in the ACO and Primary Care Core Sets.
- **Update:** OHIC is considering moving *Developmental Screening in the First Three Years of Life* to the ACO and Primary Care Menu Sets to (a) maintain alignment across EOHHS and OHIC Measure Sets and (b) because ACOs are still able to use the measure if it is in the Menu Set.

# Summary of August 7<sup>th</sup> Meeting Deliberations (4 of 7)

- During the August 7<sup>th</sup> meeting, the Work Group discussed but did not reach consensus on recommendations for the following measures:
  1. *Follow-up After Emergency Department Visit for Mental Illness (7-Day) and Follow-up After Emergency Department Visit for Substance Use (7-Day)*
    - The Work Group did not agree on whether to:
      - elevate the measures to the ACO Core Set, as was recommended for the Acute Care Hospital Set;
      - remove these measures from the ACO Set (but retain in the Acute Care Hospital Set); or
      - remove these measures from the ACO Set and the Acute Care Hospital Set.

# Summary of August 7<sup>th</sup> Meeting Deliberations (5 of 7)

- During the August 7<sup>th</sup> meeting, the Work Group discussed but did not reach consensus on recommendations for the following measures:

## *2. Initiation and Engagement of Substance Use Treatment*

- The Work Group did not reach consensus on whether to:
  - retain the measure because it is an NCQA certification measure and has room for improvement, or
  - remove the measure because of specification validity issues.



# Summary of August 7<sup>th</sup> Meeting Deliberations (6 of 7)

- During the August 7<sup>th</sup> meeting, the Work Group discussed but did not reach consensus on recommendations for the following measures:

## 3. *Statin Therapy for Patients with Cardiovascular Disease*

- The Work Group did not reach consensus on whether to:
  - retain the measure
  - remove the measure due to lack of prescription fill information for plans and potential gaming of the adherence rate.

# Summary of August 7<sup>th</sup> Meeting Deliberations (7 of 7)

- **Update:** For the measures for which the Work Group did not reach consensus, OHIC is considering retaining the measures in their current status (see below) for 2024, and then convening a small group of clinicians to discuss each measure's clinical merits and make a recommendation to the Work Group for 2025.
  1. *Follow-up After Emergency Department Visit for Mental Illness (7-Day) (ACO Menu)*
  2. *Follow-up After Emergency Department Visit for Substance Use (7-Day) (ACO Menu)*
  3. *Initiation and Engagement of Substance Use Treatment (ACO Menu)*
  4. *Statin Therapy for Patients with Cardiovascular Disease (ACO Developmental)*

## Follow-Up Task from the August 7<sup>th</sup> Meeting

# Screening for Clinical Depression and Follow-Up Plan (1 of 4)

- During the August 7<sup>th</sup> Measure Alignment Meeting, the Work Group recommended removing three NCQA depression measures from the Primary Care and ACO Aligned Measure Sets:
  1. *Depression Screening and Follow-Up for Adolescents and Adults*
  2. *Depression Remission or Response for Adolescents and Adults*
  3. *Utilization of the PHQ-9 to Monitor Depression Symptoms for Adolescents and Adults*
- Bailit Health asked the Work Group if it would like to consider adding CMS' *Screening for Clinical Depression and Follow-Up Plan* back into the OHIC Aligned Measure Set for MY 2024.
  - The Work Group expressed interest in seeing the specifications and performance data for CMS' *Screening for Clinical Depression and Follow-Up Plan* before making a recommendation.

# Screening for Clinical Depression and Follow-Up Plan (2 of 4)

- **But first, some background...**

- From 2016-2019, CMS' *Screening for Clinical Depression and Follow-Up Plan* was in the ACO and Primary Care Measure Sets.
- In 2020, OHIC removed CMS' *Screening for Clinical Depression and Follow-Up Plan* from the ACO and Primary Care Measure Sets because:
  1. The measure has specification challenges related to provider use of G-codes and what qualifies as a positive screen and follow-up.
  2. The Work Group expressed interest in working towards implementing the NCQA depression measures.

# Screening for Clinical Depression and Follow-Up Plan (3 of 4)

- **But first, some background (cont'd)...**
  - *Screening for Depression and Follow-up Plan* is a pay-for-performance quality measure for EOHHS' AE program for 2023 and 2024.
  - EOHHS uses the CMS measure specifications as the basis for the AE measure, but EOHHS modified the measure in the following ways to address the specification challenges:
    - EOHHS developed criteria to identify a positive screen at the request of AEs because CMS does not do so in its specifications.
    - EOHHS developed guidance for what constitutes as eligible “follow-up” activities because it found that plans and providers had varying interpretations of what constituted “follow-up.”
  - EOHHS' specifications and the associated guidance document were distributed with today's meeting materials.

# Screening for Clinical Depression and Follow-Up Plan (4 of 4)

- Performance data on *Screening for Clinical Depression and Follow-Up Plan* from AE Common Measure Slate reporting to EOHHS (2021) and PCMH reporting to OHIC (2019) are below.\*

Measure Name	AE Performance in 2021		
	Minimum	Maximum	Range
Screening for Clinical Depression and Follow-Up Plan	25%	74%	50%

Measure Name	PCMH Practice Percentile Rates for 10/1/18 – 9/30/19			
	25 <sup>th</sup> Percentile	50 <sup>th</sup> Percentile	75 <sup>th</sup> Percentile	90 <sup>th</sup> Percentile
Screening for Clinical Depression and Follow-Up Plan	73%	85%	89%	98%

\*This measure specifications changed significantly in 2021, so data from the two sources cannot be directly compared. 15

## Finish Review of ACO Measure Set Measures



# Remaining ACO Measure Set Measures to be Reviewed

- During the August 7<sup>th</sup> Meeting, the Work Group reviewed all but three measures in the ACO Measure Set:
  1. *Plan (ACO) All-Cause Readmission*
  2. *Prenatal and Postpartum Care - Postpartum Care Rate*
  3. *Prenatal and Postpartum Care – Timeliness of Prenatal Care*
- These three measures have not been discussed in the context of the Acute Care Hospital or Primary Care Measure Sets.
- For each measure, please consider whether you recommend:
  - retaining the measure,
  - removing the measure, or
  - changing the measure's status (e.g., move from Menu to Core).

# Plan (ACO) All-Cause Readmission (Menu)

## Equity Analysis: Race/Ethnicity

**CA Medicaid managed care:** Readmission rate 4.4 percentage points lower for Whites than Blacks

**U.S. study:** Likelihood of readmission higher among Blacks than Whites (OR\* = 1.05)

Status/Measure Specification Changes	Presence in Other RI Sets	Use by RI Payers	Commercial Performance (2022)	Medicaid Performance (2021)
Minor changes	None	2 ACO Contracts	0.65 (below National 50 <sup>th</sup> percentile)	1.2 (below National 50 <sup>th</sup> percentile)

**Data Source:** Claims

\*OR = odds ratio (value greater than 1 indicates higher odds; value less than 1 indicates lower odds)

# Prenatal & Postpartum Care - Timeliness of Prenatal Care (Developmental)

Equity Analysis: Race/Ethnicity		Equity Analysis: Disability Status		
<b>RI delayed prenatal care:</b> 22.3% for Blacks, 21.2% for AI/AN, 18.2% for Hispanics, 13.4% for Whites <b>CA Medicaid Managed Care performance:</b> 6.3% higher for Whites than Blacks		<b>CA study:</b> Women with IDD more likely to delay prenatal care initiation (RR* = 1.21) compared to women without IDD		
Status/Measure Specification Changes	Presence in Other RI Sets	Use by RI Payers	Commercial Performance (2022)	Medicaid Performance (2021)
No proposed changes for MY 2024	None	None	87.6% (between 75 <sup>th</sup> and 90 <sup>th</sup> percentile)	90.6% (between 75 <sup>th</sup> and 90 <sup>th</sup> percentile)

**Data Source:** Claims/Clinical Data

**Note:** The Work Group recommended adding this measure as Developmental to the 2023 ACO Aligned Measure Set so the measure could be stratified by race, ethnicity and language in the future.

\*RR = risk ratio (value greater than 1 indicates increased risk; value less than 1 indicates reduced risk)

# Prenatal & Postpartum Care - Postpartum Care Rate (Developmental)

Equity Analysis: Race/Ethnicity		Equity Analysis: Disability Status		
<p><b>RI study of postpartum health care utilization:</b> Hispanic women had higher odds of not having one-week check-up (OR* = 1.73) compared to White women</p> <p><b>CA Medicaid Managed Care performance:</b> 11.1% higher for Whites than Blacks</p> <p><b>MI Medicaid Managed Care performance:</b> 9.2% higher for Whites than Blacks</p>		<p><b>MA study of postpartum hospital utilization:</b> Women with IDD had at least 2x higher rates for any hospitalization and repeated hospitalizations compared to women without IDD</p>		
Status/Measure Specification Changes	Presence in Other RI Sets	Use by RI Payers	Commercial Performance (2022)	Medicaid Performance (2021)
No proposed changes for MY 2024	None	None	80.8% (between 50 <sup>th</sup> and 75 <sup>th</sup> percentile)	86.7% (above 90 <sup>th</sup> percentile)

**Data Source:** Claims/Clinical Data

**Note:** The Work Group recommended adding this measure to the 2023 ACO Aligned Measure Set so the measure could be stratified by race, ethnicity and language in the future.

# Review Behavioral Health Hospital and Outpatient Behavioral Health Measure Set Measures

# Reminder About This Year's Annual Review Process

- As a reminder, during the 2023 annual review, due to time and resource constraints, the Work Group:
  - has reviewed the ACO, Primary Care and Acute Care Hospital measure sets in detail, and
  - is reviewing the Behavioral Health Hospital and Outpatient Behavioral Health measure sets this year for major status and specification changes only.
- The Work Group will review all of the measure sets in full in 2024.

# The Behavioral Health Hospital Aligned Measure Set (1 of 2)

- The 2023 Behavioral Health Hospital Aligned Measure includes eight measures:
  - **There are two Core Measures:**
    1. *Follow-Up After Hospitalization for Mental Illness (7-Day)*
    2. *30-Day All-Cause Unplanned Readmission Following Psychiatric Hospitalization*

# The Behavioral Health Hospital Aligned Measure Set (2 of 2)

- The 2023 Behavioral Health Hospital Aligned Measure includes eight measures:
  - **There are five Menu Measures:**
    1. *Alcohol & Other Drug Use Disorder Treatment at Discharge (SUB-3a)*
    2. *Hours of Physical Restraint Use (HBIPS-2)*
    3. *Hours of Seclusion Use (HBIPS-3)*
    4. *Patients Discharged on Multiple Antipsychotic Medications with Appropriate Justification (HBIPS-5)*
    5. *Medication Continuation Following Inpatient Psychiatric Discharge*
  - **There is one Monitoring Measure:**
    1. *Transition Record with Specified Elements Received by Discharged Patients*



# Measures with Significant Status/Specification Changes

- CMS is removing *Patients Discharged on Multiple Antipsychotic Medications with Appropriate Justification (HBIPS-5)* from the Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program, beginning with FY 2025 payment determination.
  - **Rationale:** The American Psychiatric Association's (APA) clinical guidelines for patients with schizophrenia, which form the basis for this measure, have been updated, and the measure no longer aligns with the current clinical guidelines.
- **Does the Work Group recommend removing *Patients Discharged on Multiple Antipsychotic Medications with Appropriate Justification (HBIPS-5)* from the Behavioral Health Hospital Measure Set?**

# Measures Proposed for Addition to the Behavioral Health Hospital Measure Set (1 of 3)

- BCBSRI has proposed adding *Facility Commitment to Health Equity Measure* to the Behavioral Health Hospital Measure Set as a Menu Measure.
  - **Rationale:**
    - CMS is [adopting](#) *Facility Commitment to Health Equity* measure in the IPFQR program, beginning with reporting of CY 2024 data for the FY 2026 payment determination.
    - *Facility Commitment to Health Equity* assesses an IPF's commitment to health equity by asking the IPF to attest to its efforts to address health equity across five domains: (1) Equity is a Strategic Priority; (2) Data Collection; (3) Data Analysis; (4) Quality Improvement; and (5) Leadership Engagement.

# Measures Proposed for Addition to the Behavioral Health Hospital Measure Set (2 of 3)

- BCBSRI has proposed adding *Screening for Social Drivers of Health* and *Screen Positive for Social Drivers of Health* to the Behavioral Health Hospital Measure Set as On Deck Measures.
  - **Rationale:**
    - CMS is [adopting](#) *Screening for Social Drivers of Health* and *Screening for Social Drivers of Health* in the IPFQR program, beginning with voluntary reporting of CY 2024 data followed by mandatory reporting of CY 2025 data for the FY 2027 payment determination.

# Measures Proposed for Addition to the Behavioral Health Hospital Measure Set (3 of 3)

- *Screening for Social Drivers of Health* assesses the percentage of patients, aged 18 years and over at the time of admission, who are screened for five specific health-related social needs (HRSNs) — food insecurity, housing instability, transportation needs, utility difficulties, and interpersonal safety.
- *Screen Positive for Social Drivers of Health* assesses the percentage of patients screened under the *Screening for SDOH* measure who screen positive for each of the five HRSNs, which is calculated and reported as five separate rates for each HRSN.

# The Outpatient Behavioral Health Aligned Measure Set (1 of 2)

- The 2023 Outpatient Behavioral Health Aligned Measure includes nine measures:
  - **There are zero Core Measures**
  - **There are three Menu Measures**
    1. *Adult Major Depressive Disorder (MDD): Suicide Risk Assessment*
    2. *Child and Adolescent Major Depressive Disorder: Suicide Risk Assessment*
    3. *Follow-Up After Hospitalization for Mental Illness (7-Day)*
  - **There is one On Deck Measure**
    1. *Antidepressant Medication Management*

# The Outpatient Behavioral Health Aligned Measure Set (2 of 2)

- The 2023 Outpatient Behavioral Health Aligned Measure includes nine measures:
  - **There are five Developmental Measures**
    1. *Depression Remission or Response for Adolescents and Adults*
    2. *Depression Screening and Follow-Up Adolescents and Adults*
    3. *Social Determinants of Health Screening*
    4. *Unhealthy Alcohol Use Screening and Follow-Up*
    5. *Utilization of the PHQ-9 to Monitor Depression Symptoms for Adolescents and Adults*

# Measures with Significant Status/Specification Changes (1 of 2)

- NCQA has proposed retiring *Antidepressant Medication Management (AMM)* in MY 2024.
  - **Rationale:**
    - *Antidepressant Medication Management* only addresses adherence to antidepressants as a treatment for depression, and does not address other guideline-recommended treatments such as psychotherapy.
    - Other HEDIS measures address critical gaps in depression care, including screening, follow-up, routine monitoring and improvement in outcomes. NCQA is committed to expanding the use of these measures in reporting programs.

# Measures with Significant Status/Specification Changes (2 of 2)

- During the 2022 Annual Review, the Work Group recommended that *Social Determinants of Health (SDOH) Screening* be modified for use in outpatient behavioral health settings, with the intention that the measure be elevated to the Outpatient Behavioral Health Menu Set for 2024.
  - Bailit Health has modified the *SDOH Screening* specifications for use in outpatient behavioral health settings (distributed with today's meeting materials).
- The updated specifications measure the percentage of patients seen by an outpatient behavioral health provider who were screened for SDOH in an outpatient behavioral health setting using a screening tool once per measurement year, where the outpatient behavioral health provider has documented the completion of the screening and the results.
  - The updated specifications use NCQA's Behavioral Health Outpatient code set to identify an outpatient behavioral health visit.
- **Please review the updated specifications and offer any feedback to Grace at [gflaherty@bailit-health.com](mailto:gflaherty@bailit-health.com) by Friday, September 8<sup>th</sup>.**



## Review Proposed 2024 Aligned Measure Sets

# Review Proposed 2024 Acute Care Hospital Aligned Measure Set (1 of 3)

- The proposed 2024 Acute Care Hospital Aligned Measure includes nineteen measures:
  - **There are six Core Measures:**
    - CAHPS Survey (HCAHPS)
    - Catheter-Associated Urinary Tract Infection (HAI-2)
    - Central Line-Associated Blood Stream Infection (HAI-1)
    - Clostridium Difficile (C.diff.) Infection (HAI-6)
    - Follow-Up After Hospitalization for Mental Illness (7-Day)
    - Severe Sepsis and Septic Shock Management Bundle (SEP-1)

# Review Proposed 2024 Acute Care Hospital Aligned Measure Set (2 of 3)

- The proposed 2024 Acute Care Hospital Aligned Measure includes nineteen measures:
  - **There are seven Menu Measures:**
    - Cesarean Rate for Nulliparous Singleton Vertex (PC-02)
    - Follow-Up After Emergency Department Visit for Mental Illness (7-day)
    - Follow-Up After Emergency Department Visit for Substance Use (7-day)
    - HAI-3: SSI: Colon – Surgical Site Infection for Colon Surgery
    - Hospital-wide Readmission (RADM-30-HOSP-WIDE) [Move from Core to Menu]
    - Methicillin-resistant Staphylococcus Aureus Blood Infections (HAI-5)
    - Patient Safety for Selected Indicators (PSI-90)

# Review Proposed 2024 Acute Care Hospital Aligned Measure Set (3 of 3)

- The proposed 2024 Acute Care Hospital Aligned Measure includes nineteen measures:
  - **There are five On-Deck Measures:**
    - Hospital-wide Readmission, stratified by race, ethnicity and language
    - Hospital Commitment to Health Equity [Move from Developmental to On-Deck]
    - Screen Positive Rate for Social Drivers of Health [Move from Developmental to On-Deck]
    - Screening for Social Drivers of Health [Move from Developmental to On-Deck]
    - Severe Obstetric Complications [Move from Menu to On-Deck]
  - **There is one Monitoring Measure:**
    1. ~~Elective Delivery Prior to 39 Completed Weeks Gestation (PC-01)~~ [Remove]
    2. HAI-4: SSI: Hysterectomy – Surgical Site Infection for Abdominal Hysterectomy [Move from Menu to Monitoring]

# Review Proposed 2024 Primary Care Aligned Measure Set (1 of 3)

- The proposed 2024 Primary Care Aligned Measure includes 16 measures:
  - **There are nine Core Measures:**
    - Breast Cancer Screening
    - Child and Adolescent Well-Care Visits (Total)
    - Chlamydia Screening
    - Colorectal Cancer Screening
    - Controlling High Blood Pressure
    - Eye Exam for Patients with Diabetes
    - Hemoglobin A1c Control for Patients with Diabetes: HbA1c Control (<8.0%)
    - Immunizations for Adolescents (Combo 2) **[Move from Menu to Core]**
    - Lead Screening in Children

# Review Proposed 2024 Primary Care Aligned Measure Set (2 of 3)

- The 2023 Primary Care Aligned Measure includes 16 measures:
  - **There are five Menu Measures:**
    - Primary Care Health Equity Measure (*stratifies the following measures by REL*):
      1. *Controlling High Blood Pressure*
      2. ~~*Developmental Screening in the First Three Years of Life*~~ [Remove]
      3. *Child and Adolescent Well-Care Visits* [Add]
      4. *Eye Exams for Patients with Diabetes*
      5. *Hemoglobin A1c Control for Patients with Diabetes: HbA1c Control (<8.0%)*
    - Cervical Cancer Screening
    - Developmental Screening in the First Three Years of Life [Move from Core to Menu]
    - Kidney Health Evaluation for Patients with Diabetes
    - Social Determinants of Health Screening

# Review Proposed 2024 Primary Care Aligned Measure Set (3 of 3)

- The 2023 Primary Care Aligned Measure includes 16 measures:
  - **There are two Developmental Measures:**
    - ~~CAHPS Surveys [Remove]~~
    - ~~Depression Remission or Response for Adolescents and Adults [Remove]~~
    - ~~Depression Screening and Follow-Up for Adolescents and Adults [Remove]~~
    - Fluoride Varnish
    - Statin Therapy for Patients with Cardiovascular Disease
    - ~~Unhealthy Alcohol Use Screening and Follow-Up [Remove]~~
    - ~~Utilization of the PHQ-9 to Monitor Depression Symptoms for Adolescents and Adults [Remove]~~

# Review Proposed 2024 ACO Aligned Measure Set (1 of 4)

- The proposed 2024 ACO Aligned Measure Set includes 24 measures:
  - **10 Core Measures:**
    - Breast Cancer Screening
    - Child and Adolescent Well-Care Visits (Total)
    - Chlamydia Screening
    - Colorectal Cancer Screening
    - Controlling High Blood Pressure
    - Eye Exam for Patients with Diabetes
    - Follow-Up After Hospitalization for Mental Illness (7-Day)
    - Glycemic Status Assessment for Patients with Diabetes: HbA1c Control (< 8.0%)  
[Update Measure Name]
    - Immunizations for Adolescents (Combo 2) [Move from Menu to Core]
    - Lead Screening in Children [Move from Menu to Core]



# Review Proposed 2024 ACO Aligned Measure Set (2 of 4)

- The proposed 2024 ACO Aligned Measure Set includes 24 measures:

- **11 Menu Measures:**

- ACO Health Equity Measure (*stratifies the following measures by REL*):
  1. Controlling High Blood Pressure
  2. ~~Developmental Screening in the First Three Years of Life~~ [Remove]
  3. Child and Adolescent Well-Care Visits [Add]
  4. Eye Exams for Patients with Diabetes
  5. Hemoglobin A1c Control for Patients with Diabetes: HbA1c Control (<8.0%)
- Cervical Cancer Screening
- Developmental Screening in the First Three Years of Life [Move from Core to Menu]
- Follow-Up After Emergency Department Visit for Mental Illness (7-Day)
- Follow-Up After Emergency Department Visit for Substance Use (7-Day)
- Hospital-wide Readmit

# Review Proposed 2024 ACO Aligned Measure Set (3 of 4)

- The proposed 2024 ACO Aligned Measure Set includes 24 measures:
  - **11 Menu Measures (cont'd):**
    - Initiation and Engagement of Substance Use Treatment
    - Kidney Health Evaluation for Patients with Diabetes
    - Plan (ACO) All-Cause Readmission [discussed today]
    - Race, Ethnicity and Language Data Completeness Measure [New]
    - Social Determinants of Health Screening

# Review Proposed 2024 ACO Aligned Measure Set (4 of 4)

- The proposed 2024 ACO Aligned Measure Set includes 24 measures:
  - **three Developmental Measures**
    - ~~CAHPS Surveys~~
    - ~~Depression Remission or Response for Adolescents and Adults~~ [Remove]
    - ~~Depression Screening and Follow-up for Adolescents and Adults~~ [Remove]
    - Prenatal & Postpartum Care - Postpartum Care Rate [discussed today]
    - Prenatal & Postpartum Care - Timeliness of Prenatal Care [discussed today]
    - Statin Therapy for Patients with Cardiovascular Disease
    - ~~Unhealthy Alcohol Use Screening and Follow-Up~~ [Remove]
    - ~~Utilization of the PHQ-9 to Monitor Depression Symptoms for Adolescents and Adults~~ [Remove]

# Review Proposed 2024 Behavioral Health Hospital Aligned Measure Set (1 of 2)

- The proposed 2024 Behavioral Health Hospital Aligned Measure includes seven measures:
  - **There are two Core Measures:**
    - Follow-Up After Hospitalization for Mental Illness (7-Day)
    - 30-Day All-Cause Unplanned Readmission Following Psychiatric Hospitalization

# Review Proposed 2024 Behavioral Health Hospital Aligned Measure Set (2 of 2)

- The proposed 2024 Behavioral Health Hospital Aligned Measure includes seven measures:
  - **There are four Menu Measures:**
    - Alcohol & Other Drug Use Disorder Treatment at Discharge (SUB-3a)
    - Hours of Physical Restraint Use (HBIPS-2)
    - Hours of Seclusion Use (HBIPS-3)
    - ~~Patients Discharged on Multiple Antipsychotic Medications with Appropriate Justification (HBIPS-5) [Remove]~~
    - Medication Continuation Following Inpatient Psychiatric Discharge
  - **There is one Monitoring Measure:**
    - Transition Record with Specified Elements Received by Discharged Patients

# Review Proposed 2024 Outpatient Behavioral Health Aligned Measure Set (1 of 2)

- The proposed 2024 Outpatient Behavioral Health Aligned Measure includes eight measures:
  - **There are zero Core Measures**
  - **There are four Menu Measures**
    - Adult Major Depressive Disorder (MDD): Suicide Risk Assessment
    - Child and Adolescent Major Depressive Disorder: Suicide Risk Assessment
    - Follow-Up After Hospitalization for Mental Illness (7-Day)
    - Social Determinants of Health Screening [Move from Developmental to Menu]
  - **There are zero On Deck Measures**
    - ~~Antidepressant Medication Management [Remove]~~

# Review Proposed 2024 Outpatient Behavioral Health Aligned Measure Set (2 of 2)

- The proposed 2024 Outpatient Behavioral Health Aligned Measure includes eight measures:
  - **There are four Developmental Measures**
    - Depression Remission or Response for Adolescents and Adults
    - Depression Screening and Follow-Up Adolescents and Adults
    - Unhealthy Alcohol Use Screening and Follow-Up
    - Utilization of the PHQ-9 to Monitor Depression Symptoms for Adolescents and Adults

## Public Comment



## Next Steps

# Next Steps

1. Bailit Health will share the Work Group's recommendations with Acting Commissioner Cory King for review. His approval is required to finalize the 2024 OHIC Aligned Measure Sets.
2. OHIC will share the final adopted 2024 OHIC Aligned Measure Sets with Work Group members in September.