

New Maternity APM Design Review Team

Session 3 - Quality Measurement

June 27, 2024



Our Mission:

Improving health care equity, access and outcomes for the people we serve while saving Coloradans money on health care and driving value for Colorado.



Agenda

1. Welcome and Introductions
2. Session 2 (June 13, 2024) Recap (Goals and Objectives)
3. Quality Measurement
4. Break
5. Quality Measurement Continued
6. Looking Ahead

Today's Objectives

1. Review discussion and feedback from the previous Design Review Team (DRT) session (June 13, 2024; Goals and Objectives)
2. Provide feedback on proposed quality measures for the new Maternity Alternative Payment Model (APM)

How We Will Interact in Each Session

- Come to meetings prepared and willing to participate
- Respect the experience, knowledge, and expertise each person brings to the table
- Give space for others to contribute
- Use people's names and pronouns

Reminders for Virtual Interaction

- Use video if you are able
- Mute your audio when you are not speaking
- Share comments and questions verbally or in the chat, whichever you are most comfortable with
 - To make a verbal comment use the raise hand function in Zoom
 - Please speak at a slower pace and refrain from using acronyms to support interpretation
- Engage in Menti and/or Zoom polling when possible

1. Welcome and Introductions

The Maternity APM Team



Kathleen Le
Maternity Lead



Anoushka Milliar
Maternity Co-Lead



Lauren Bell
Design Review Team
Lead Facilitator



Kimberly Phu
Design Review Team
Supporting Facilitator



Suman Mathur
Design Review Team
Supporting Facilitator



Katey Ortlieb
Maternity Support Team Lead



Francois de Brantes
Maternity Support Team Co-Lead



Aaron Beckert
Maternity Support Team



Lyle Roddey
Maternity Support Team

Icebreaker

Go to
www.menti.com

Enter the code

5255 2215



Or use the QR Code

2. Session 2 (June 13, 2024) Recap (Goals and Objectives)

Approval of DRT 2 Meeting Minutes

By end of day Wednesday, July 3, please email the Stakeholder Engagement team at HCPF_VBPStakeholderEngagement@state.co.us with:

- Any proposed changes to the meeting minutes, for example correcting misinterpreted comments
- Any objections to posting a de-identified, abbreviated version of the minutes to the Maternity APM website (publicly accessible)

Feedback from DRT Session 2

- DRT members generally agreed that the program goals and objectives align with their values and priorities. Feedback HCPF has incorporated on modifications or additions to the goals and objectives are reflected in today's presentation as well as the reference sheet sent in the pre-meeting materials.



Questions?



DRT Session #3

Today's Session

- Quality measurement

Covered in Future Sessions

- Target setting and payment
- Performance improvement
- Program sustainability

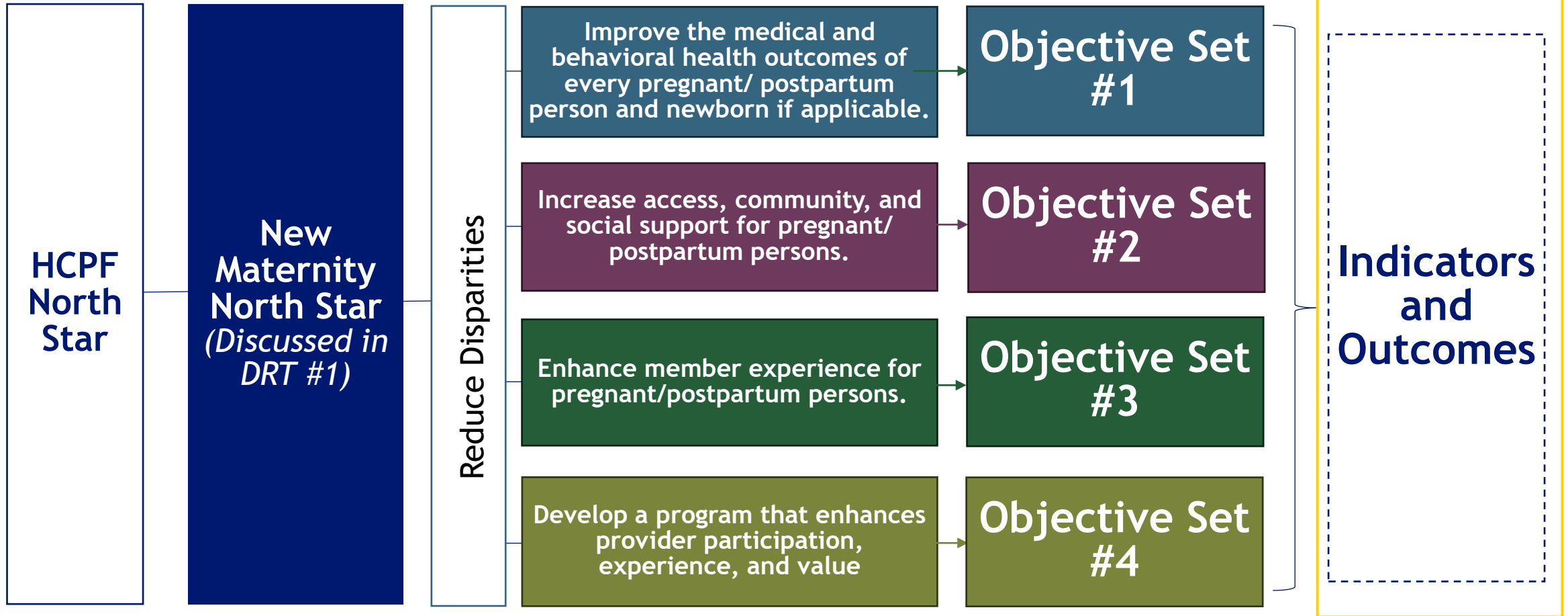
Not Covered in DRT Sessions

- Program eligibility
- Attribution methods
- Reimbursement rates

Mapping It Together

Goals and Objectives (Discussed in DRT #2)

Today's focus!



4. Quality Measurement

What Can Measures Be Used For?

1. To evaluate and track program success
2. To tie to payment
3. To support continuous improvement activities for providers
4. To support member choice

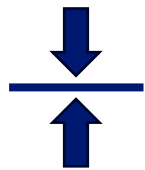
Measure Selection Considerations



Link back to the New Maternity APM program goals



Statistically reliable and valid



Alignment with industry standards

Alignment With Industry Standards (Measure Stewards)

- Centers for Medicare and Medicaid Services (CMS)
 - CMS Measure Inventory Tool (CMIT)
- National Committee for Quality Assurance (NCQA)
- Agency for Healthcare Quality and Research (AHRQ)
- The Joint Commission

Goal 1: Improve the medical and behavioral health outcomes of every pregnant/postpartum person and newborn if applicable.

Objective	Measure Name and Description	Measure Steward/ID
Increase timeliness of prenatal/postpartum care	<ul style="list-style-type: none"> • Prenatal and Postpartum Care: Percentage of deliveries that received a prenatal care visit in the first trimester, on or before the enrollment start date or within 42 days of enrollment. Percentage of deliveries that had a postpartum visit on or between 7 and 84 days after delivery. 	NCQA PPC
Increase comprehensive behavioral health screenings, including substance use disorder and depression screenings, and timely follow-up at each phase of the perinatal period	<ul style="list-style-type: none"> • Prenatal Depression Screening and Follow-up: The percentage of deliveries in which members were screened for clinical depression while pregnant and, if screened positive, received follow-up care. Two rates are reported. • Postpartum Depression Screening and Follow-up: The percentage of deliveries in which members were screened for clinical depression during the postpartum period, and if screened positive, received follow-up care. Two rates are reported. 	NCQA PND-E NCQA PDS-E

Goal 1 Continued

Objective	Measure Name and Description	Measure Steward/ID
Promote vaginal delivery when appropriate and reduce low-risk cesarean deliveries	<ul style="list-style-type: none"> • Cesarean Birth: The proportion of live babies born at or beyond 37.0 weeks gestation to women in their first pregnancy, via cesarean birth. • Vaginal Birth After Cesarean (VBAC) Delivery Rate, Uncomplicated: Vaginal births per 1,000 deliveries by patients with previous Cesarean deliveries. 	The Joint Commission PC-02 AHRQ IQI 22
Reduce incidence of low birthweight (for single live births)	<ul style="list-style-type: none"> • Live Births Weighing Less Than 2,500 Grams (LBW-CH): Percentage of live births that weighed less than 2,500 grams at birth during the measurement year. • Weeks of Gestation: Monitored via administrative data. 	CMIT ID 413 N/A
Reduce unexpected complications in term newborns	<ul style="list-style-type: none"> • Unexpected Complications in Term Newborns: Unexpected complications among full term newborns with no pre-existing conditions. 	The Joint Commission PC-06

Goal 1 Continued

Objective	Measure Name and Description	Measure Steward/ID
Reduce the incidence of severe maternal morbidity	<ul style="list-style-type: none"> • Severe Obstetric Complications: Patients with severe obstetric complications which occur during the inpatient delivery hospitalization. 	CMS 1028v2
Monitor the use of postpartum contraceptive care	<ul style="list-style-type: none"> • CCP: Contraceptive Care - Postpartum Ages 15 to 44: Among people ages 15 to 44 who had a live birth, the percentage that: <ol style="list-style-type: none"> 1. Were provided a most effective or moderately effective method of contraception within 3 and 90 days of delivery 2. Were provided a long-acting reversible method of contraception (LARC) within 3 and 90 days of delivery 	CMIT ID 166 Ages 15 to 20 Ages 21 to 44

Goal 1 Continued

Objective	Measure Name and Description	Measure Steward/ID
<p>Improve facilitation of the transition of care between antepartum, labor and delivery, and postpartum teams</p>	<ul style="list-style-type: none"> Maternity Care: Postpartum Follow-up and Care Coordination: Percentage of patients, regardless of age, who gave birth during a 12-month period who were seen for postpartum care before or at 12 weeks of giving birth and received the following at a postpartum visit: breastfeeding evaluation and education, postpartum depression screening, postpartum glucose screening for gestational diabetes patients, family and contraceptive planning counseling, tobacco use screening and cessation education, healthy lifestyle behavioral advice, and an immunization review and update. 	<p>CMIT ID 420</p>

Activity 1.1

Share Out

- Do any of these measures inaccurately capture the objective?
- Are there other measures HCPF should consider to support:
 - Evaluating and tracking program success
 - Continuous improvement activities for providers

Activity 1.2

Mentimeter

- For each measure in Objective Set #1, please rank how **feasible** and **impactful** you believe each metric is.

Share Out

4. Break

5. Quality Measurement Continued

Goal 2: Increase access, community, and social support for pregnant/ postpartum persons.

Objective	Measure Name and Description
<p>Improve care coordination across the pregnant/postpartum person’s care journey</p>	<p>Under review; Potentially could be monitored by Regional Accountable Entities (RAEs)</p>
<p>Increase provider and member awareness of supportive programs (for example, WIC and SNAP) and community organizations, so that providers can effectively use referral networks to connect members with programs specific to their unique needs</p>	
<p>Better integrate community-based organization support during the perinatal period</p>	

Goal 2 Continued

Objective	Measure Name and Description	Measure Steward/ID
<p>Increase the creation and execution of transition of care plans from the designated perinatal team during the postpartum period to the primary care physician and pediatrician</p>	<ul style="list-style-type: none"> • Postpartum Visits in the 12-month Period: Occurrence of postpartum visits at 3, 6, and 12 weeks • Transition Plans: Documented process in place for transitioning back into primary care from maternity care 	<p>N/A</p>
<p>Leverage telehealth during the prenatal and postpartum period where appropriate</p>	<ul style="list-style-type: none"> • Telehealth Use: TBD - Identified through codes in the claims data 	<p>N/A</p>
<p>Improve social needs screening and intervention</p>	<ul style="list-style-type: none"> • Social Needs Screening and Intervention: The percentage of members who were screened, using prespecified instruments, at least once during the measurement period for unmet food, housing and transportation needs, and received a corresponding intervention if they screened positive. Six rates are reported 	<p>NQCA SNS-E</p>

Goal 2 Continued

Objective	Measure Name and Description	Measure Steward/ID
Increase the collaboration between perinatal team and specialists on the management of mental, behavioral and medical conditions (e.g., diabetes, hypertension, substance use disorders, depression)	TBD	
Improve follow-up care in the first year after delivery	TBD	



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Policy & Financing

Activity 2.1

Share Out

- Do any of these measures inaccurately capture the objective?
- Are there other measures HCPF should consider to support:
 - Evaluating and tracking program success
 - Continuous improvement activities for providers

Activity 2.2

Mentimeter

- For each measure in Objective Set #2, please rank how **feasible** and **impactful** you believe each metric is.

Share Out

Goal 3: Enhance member experience for pregnant/postpartum persons.

Year 1 Objectives	Measure Name and Description
Define member experience	N/A - HCPF Objectives/Measures
Identify a single, validated tool that measures pregnant/postpartum member experience effectively and holistically.	
Create an implementation plan for measuring member experience	

Goal 3 Continued

Future Objectives	Measure Name
Promote collaborative creation of birthing plans/preferences between providers and members, stressing the significance of honoring these plans/preferences	To be developed in future years upon completion of Year 1 Objectives by HCPF
Develop and follow (as appropriate) the plan of safe care for those with perinatal substance use disorder	
Improve support of the member during the post-discharge transition period	
Encourage involvement of a pregnant/postpartum person’s family unit as defined by the member	
Promote a culture of equitable and respectful care for pregnant/postpartum persons, fostering an environment where they feel valued, heard, and supported throughout their pregnancy, labor and delivery, and postpartum experiences, ensuring they are treated holistically rather than a task	
Foster a diverse and inclusive care experience by encouraging involvement from maternal health providers of marginalized or underrepresented backgrounds, reflecting the full spectrum of the communities served, including various races, ethnicities, nationalities, languages, gender identities, sexual orientations, socioeconomic statuses, disabilities, ages, immigration statuses, geographic locations, religions, and spiritualities	
Member empowerment	

Activity 3

Share Out

- Do members feel survey fatigue?
- What other ways could these objectives be measured?

Goal 4: Develop a program that enhances provider participation, experience, and value

Objective	Measure Name and Description
Identify administrative burden pain points and work to reduce these burdens.	N/A - HCPF Objectives/Measures
Implement health information technology tools that impart valuable insights into performance metrics	
Create a model design that is operationally efficient and financially sustainable for providers	

Activity 4

Share Out

- What other measures should HCPF consider to support:
 - Reducing administrative burden
 - Evaluating and tracking program success
 - Continuous improvement activities for providers

6. Looking Ahead

Up Next

- **Optional Office Hours:** Thursday, July 11 from 3:00-4:00 p.m. via Zoom
- **Next DRT Session:** Thursday, July 25 from 7:30-9:30 a.m.
- **Topic:** Quality Target Setting, Payment and Cost Target Setting
- **Resources:** To be sent via email

For questions or to provide written feedback, please email
HCPF_VBPStakeholderEngagement@state.co.us

Thank you!