

CICP Clinic Quality Payment Update

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COLORADO
Department of Health Care
Policy & Financing

Quality Payment

- 25% of the total CICIP funding
- Points based
 - Points awarded for meeting benchmark
 - Points awarded for improvement
 - Points awarded based on tiers
- None of these things are changing



Quality Metrics

- Four Health Resources & Services Administration (HRSA) metrics are used for the calculation – these are not changing
 - Body Mass Index (BMI) Screening and Follow-Up Plan
 - Screening for Clinical Depression and Follow-Up Plan
 - Controlling High Blood Pressure (Hypertensive Patients with Blood Pressure less than 140/90)
 - Diabetes: Hemoglobin A1c Poor Control (Diabetic Patients with HbA1c > 9%)



Total Points

- Each measure has a maximum score of 7 points
 - One point for meeting the benchmark
 - One point for maintaining or improving the clinic's HRSA metric percentage from the previous year AND being above the benchmark
 - Points based on where the current year's HRSA metric percentage falls within the tier system
 - Tier 1 – 0-20% - 1 point
 - Tier 2 – 20-40% - 2 points
 - Tier 3 – 40-60% - 3 points
 - Tier 4 – 60-80% - 4 points
 - Tier 5 – 80-100% - 5 points



Diabetes Metric

- This metric is backwards from the rest, the goal is to be as close to 0% as possible instead of 100%
 - Tiers are reversed for this metric
 - 0-20% is awarded 5 points
 - 20-40% is awarded 4 points
 - 40-60% is awarded 3 points
 - 60-80% is awarded 2 points
 - 80-100% is awarded 1 point



Example

- Clinic's HRSA metric percentage is 75%, the previous year's percentage was 78%, and the benchmark is 68%
 - Clinic is awarded one point for being over the benchmark
 - Clinic is NOT awarded the second point because their current year percentage is lower than the previous year
 - Clinic is awarded four points for where the current year percentage falls in the tier
- Five total points are awarded for this metric



Proposed Change

- The Department is currently using Healthy People 2020 benchmarks in the calculation
- Two of the Healthy People 2020 goals had to be adjusted because they were looking at visits while the HRSA metrics were looking at patients
- The method used to convert the two benchmarks no longer works with the updated Healthy People 2030 goals



New Benchmarks

- The Department is proposing a change to the benchmarks that more closely mirrors how the Hospital Quality Incentive Payment (HQIP) Program calculates their benchmarks
- Benchmark would be set to the average of all clinics' percentages for each of the four metrics



Comparison for 2020-21

- Current benchmarks used for the 2020-21 calculation:
 - BMI - 50.2%
 - Depression - 7.9%
 - Hypertension - 61.2%
 - Diabetes - 16.2%
- Benchmarks using average for 2020-21:
 - BMI - 70.4%
 - Depression - 68.8%
 - Hypertension - 67.2%
 - Diabetes - 34.3%



Benchmark Changes

- In the 2020-21 payment calculation:
 - All 18 clinics met the Depression goal
 - Zero clinics met the Diabetes goal
 - Fourteen clinics met the Hypertension goal
 - Fifteen clinics met the BMI goal
- Using the new benchmarks:
 - Twelve clinics meet the Depression goal
 - Ten clinics meet the Diabetes goal
 - Eleven clinics meet the Hypertension goal
 - Ten clinics meet the BMI goal





Questions?



Council Discussion

