Using the DSRIP Performance Dashboard

Managed Care Policy and Planning Monthly Meeting May 12, 2016

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Managed Care Plan User Access to these Dashboards



- DOH/OHIP is currently working with the Bureau of Managed Care to load Managed Care Plans (MCP) by product type (MMIS) into these Dashboards
- MCP will need to complete DEAAs to access this data. Bureau of Managed Care and the DOH/OHIP Privacy Office will soon be in contact with your MCP.
- 2 Gatekeepers will be identified for each Product Line on these DEAAs.
- Displays will be filterable by MCP and Product Line as of June 2016.
- MCP Rosters with Members' Attributed PPS are in development now.



Using the DSRIP Performance Dashboard to Plan Project Roll-Out

Goal of Training:

Raise awareness of Pay for Performance (P4P) measures for which data is currently being collected and highlight tools available to MCO to help PPS reach their P4P goals.

Agenda

- 1. Where are we now in DSRIP?
- 2. Using the dashboard to get insight in, improve and support PPS performance
- 3. Rapid Cycle Improvement



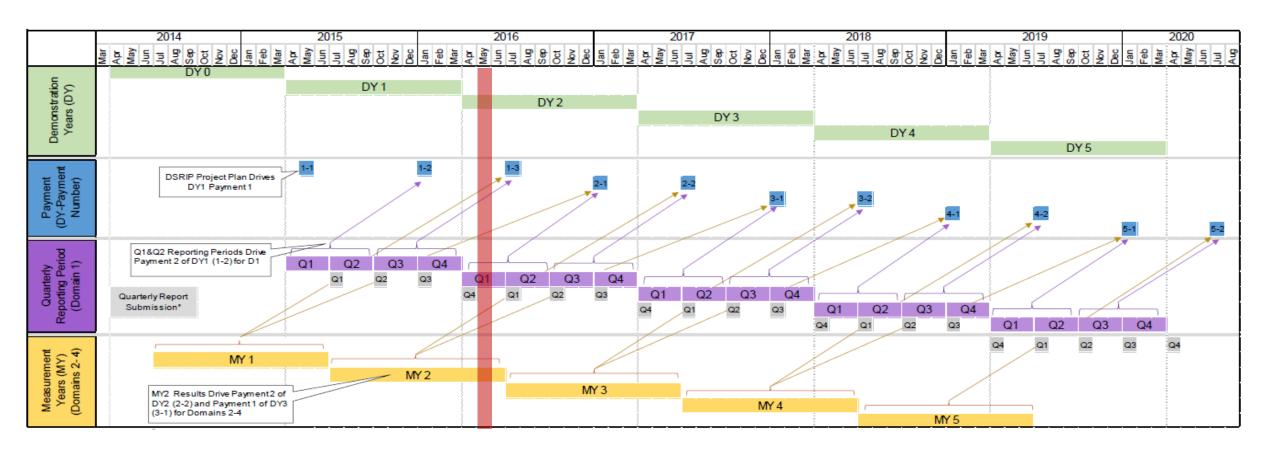


Part 1

Where Are We Now in DSRIP?

May 12th, 2016

Currently in Demonstration Year 2 (DY2) and Measurement Year 2 (MY2)



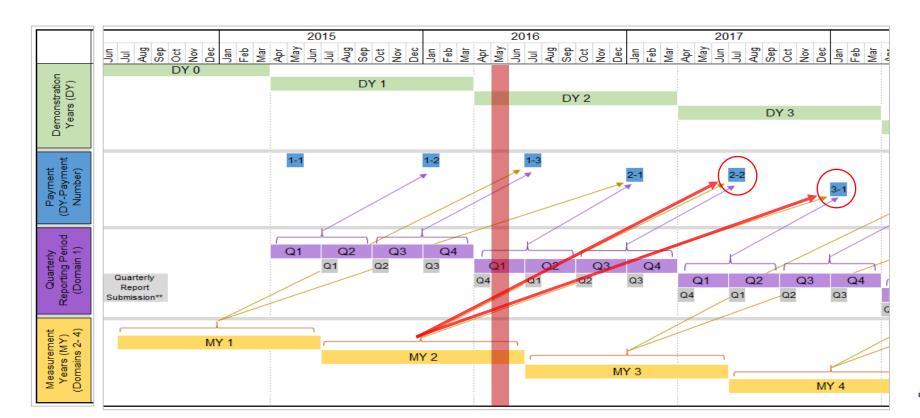


May 12th, 2016

Currently in MY2: MY2 Results Affect Pay For Performance (P4P)

Current State:

- In DY2 (DY2 began April 1, 2016)
- In MY2 (MY2 began July 1, 2015 and ends June 30, 2016)
- MY2 drives some P4P payments
 - MY2 drives payments in July 2017 (DY2 Payment 2) and January 2018 (DY3 Payment 1)





26 Measures Transition to P4P in DY2

The 26 Measures transitioning to P4P are listed below

All P4P measures in DY2 are Domain 3 measures

P4P measures in DY2	
PPV rate for patients w behavioral health Diagnosis	% Admitted for hypertension (PQI # 7)
% Patients on depression meds through acute phase	% Admitted for angina w/o procedure (PQI # 13)
% Patients on depression meds through continuation phase	% Admitted for diabetes w short-term complications (PQI # 1)
% Diabetic schizophrenics w diabetes monitoring	% Young adults admitted for asthma (PQI # 15)
% Patients on antipsychotic meds screened for diabetes	% Children admitted for asthma (PDI # 14)
% With schizophrenia/CVD monitored for CVD	Controller % of total meds
% Patients w BH admission and f/u visit w/in 7 days	% With med management for 50% of treatment period
% Patients w BH admission and f/u visit w/in 30 days	% With med management for 75% of treatment period
% Schizophrenics maintained on meds	% HIV/AIDs patients engaged in care
% With substance abuse episode and treatment w/in 14 days	% HIV/AIDs patients viral load monitoring
% With substance abuse episode and initial plus f/u treatment in 44 days	% HIV/AIDS patients w syphilis screening
PPR rate for SNF residents w behavioral health Dx	% Young women w chlamydia screening
% Long-stay SNF residents w depression	% Newborns w low birth weight (PQI # 9)

Total available dollars for the 26 measures is \$65.5 Million in DY2

■ This accounts for 7.3% of the total available dollars in DY2



DSRIP Performance Dashboards which P4P Measures are Improving or Worsening

- DSRIP Performance Dashboards show results from the rolling 12 months of July 2014 to June 2015.
- DY2 P4P measures show those results that are worse than their baselines in many instances.
- PPS need to reverse this trend (and close the 10% gap to goal) in order to achieve their P4P targets in DY2
- Utilizing the dashboards can help to reverse the trend
 - Identification of measures at risk
 - Analysis of subsets of data within a performance measure
- Part 2 of this presentation will walk MCO audience though an example of how to use the dashboards to support PPS performance improvement



Note to reviewers:

- > Part 2 will be a live Demo.
- > Screen shots are included in this deck to provide reviewers the ability to see what content will be covered in the live demonstration

Part 2

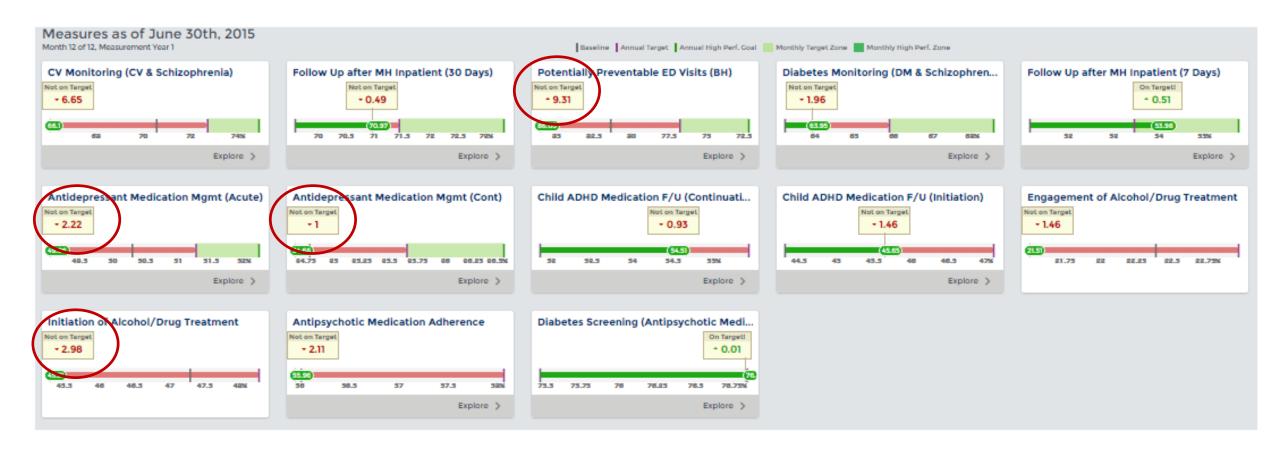
Using the DSRIP Performance Dashboard to Plan and Improve Project Performance

Performance Tile Allows Examination by Domain and Sub-domain



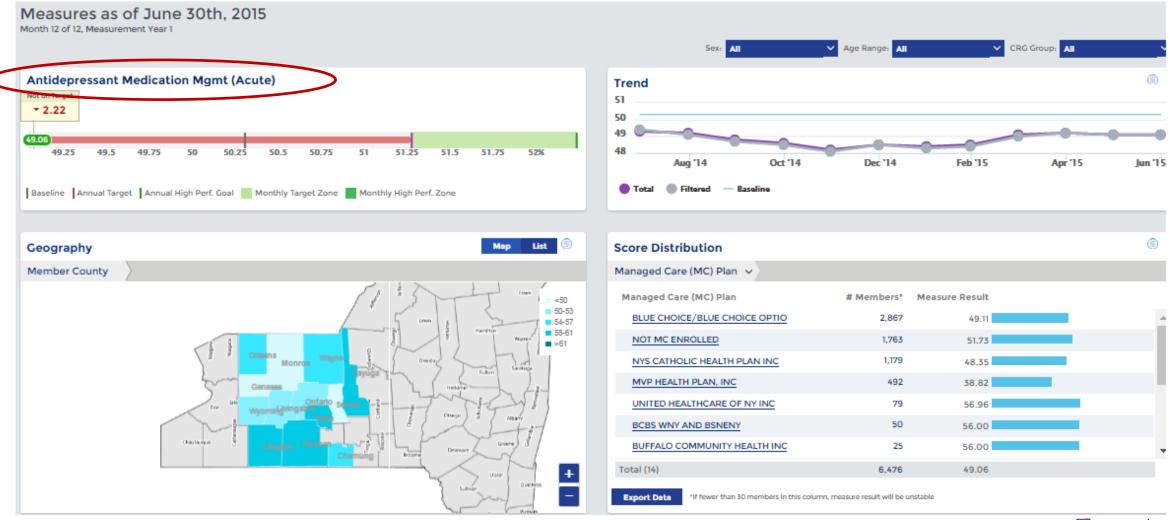


Performance Tile – Selecting a Measure to Examine





Performance Tile – Honing in on One Measure

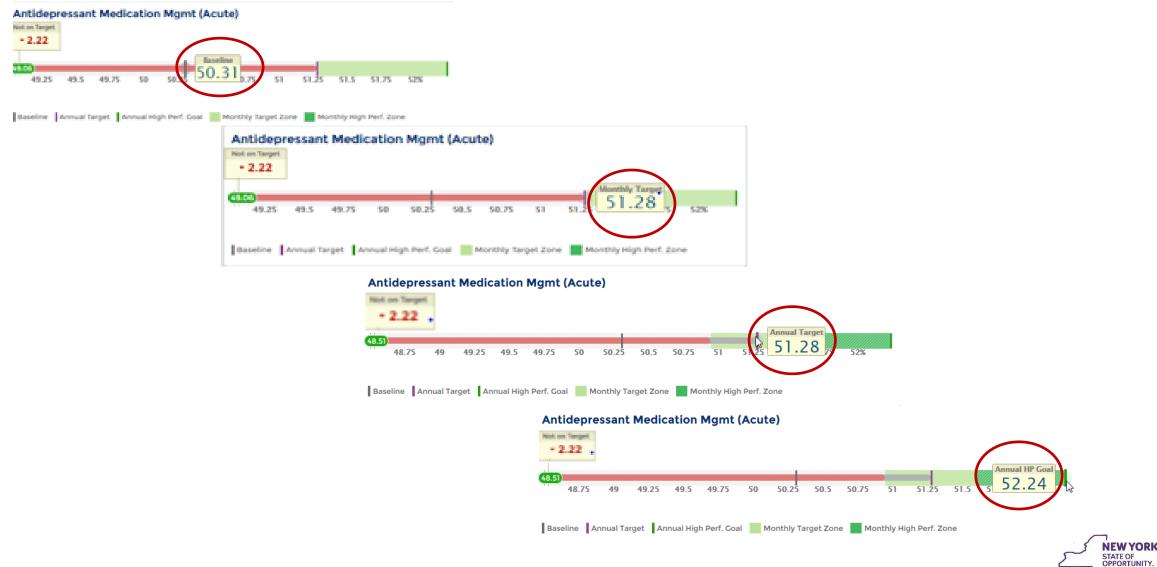




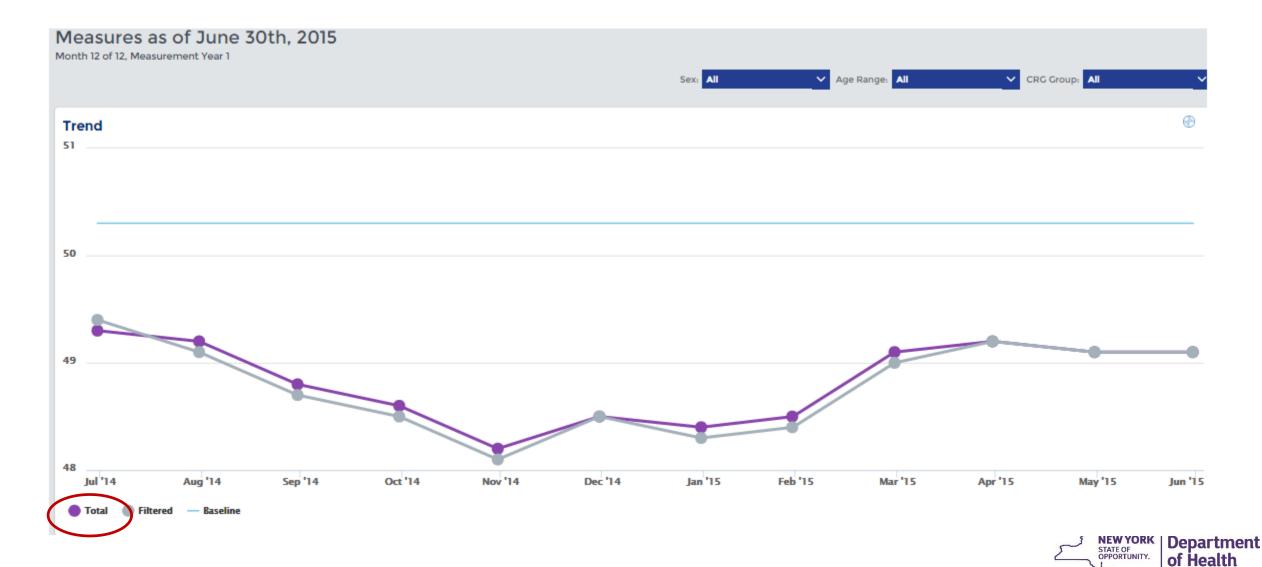
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Baseline Result, Monthly Target, AIT, and HP Goal



Examine Trend Over Time





Identifying Opportunity

Look at Subgroup Populations (i.e., Age Group)



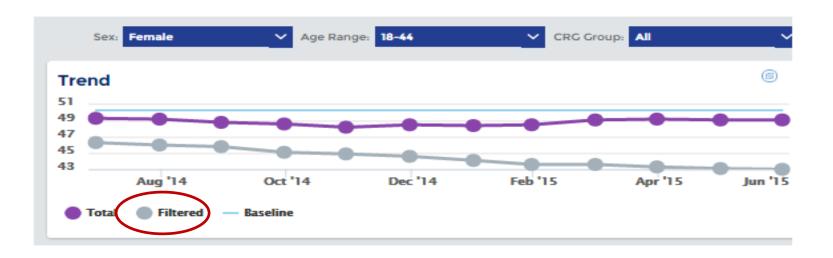




CONCLUSION: Patients aged 18-44 years are less adherent to their medication compared to those aged 45 years and older.



Look at Subgroup Populations (i.e., Gender and Age)



CONCLUSION: Among patients aged 18-44 years, females are *slightly* less adherent.



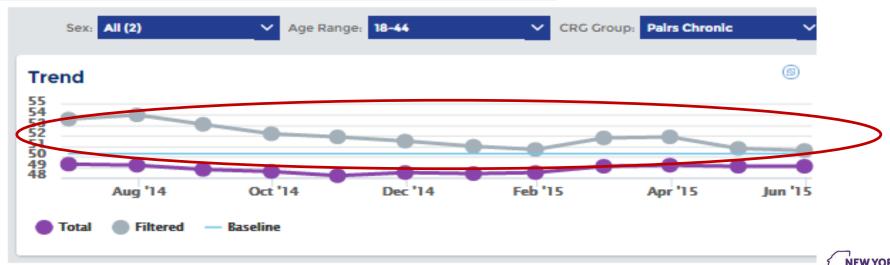


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Look at Subgroup Populations (i.e., Age Group & CRG group)



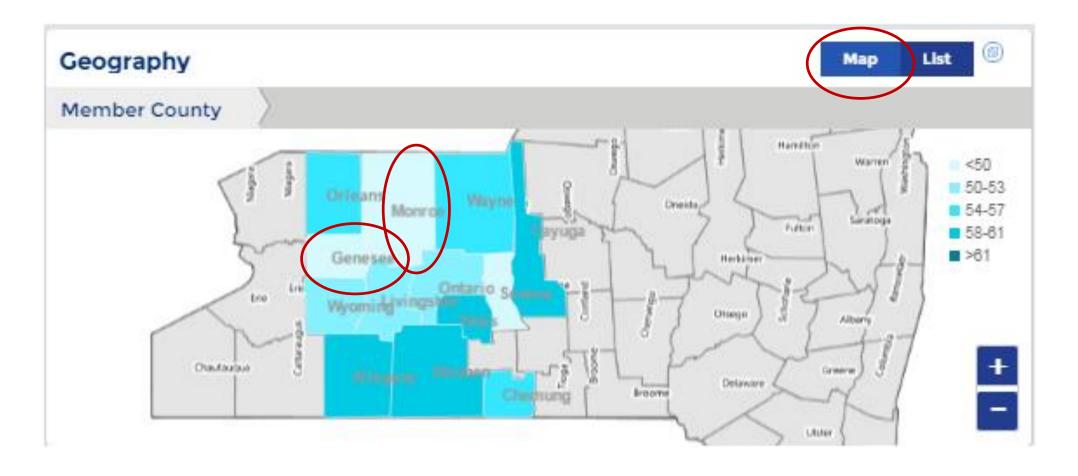
CONCLUSION: Among patients aged 18-44 years, members with a single chronic condition are less adherent than those members with pairs chronic.





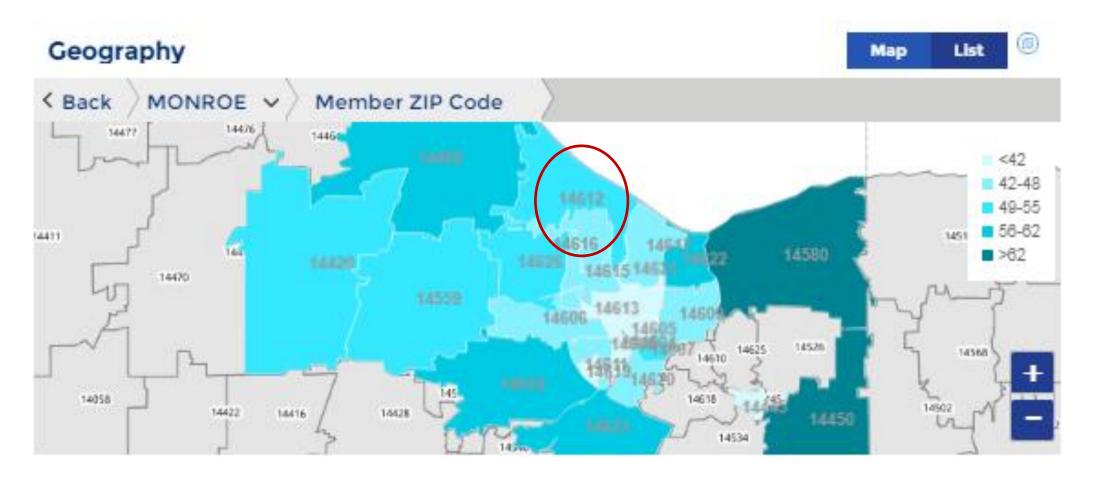
Exploring The Potential

Examine Results by Geography (i.e., County)





Examine Results by Geography (i.e., ZIP Code)





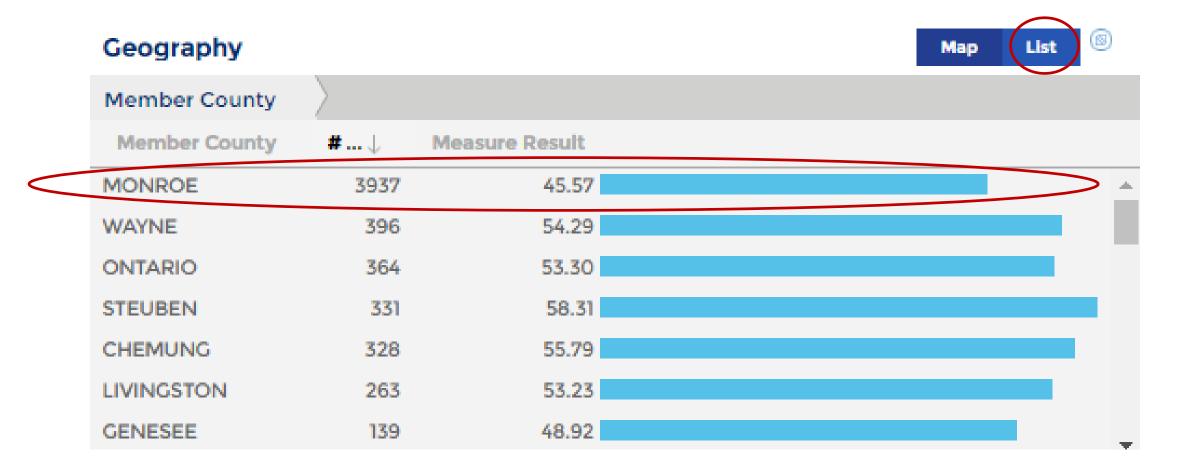
Examine Results by Geography: # of Members is an Important Consideration





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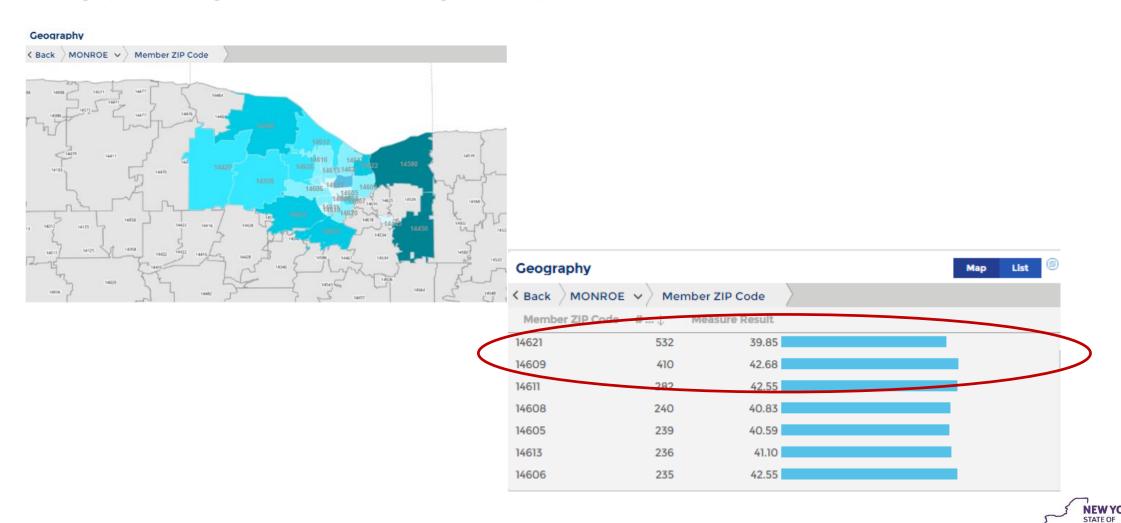
Target Based on BOTH Gap and High Volume





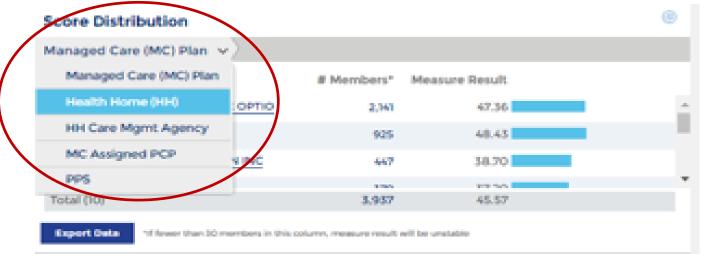
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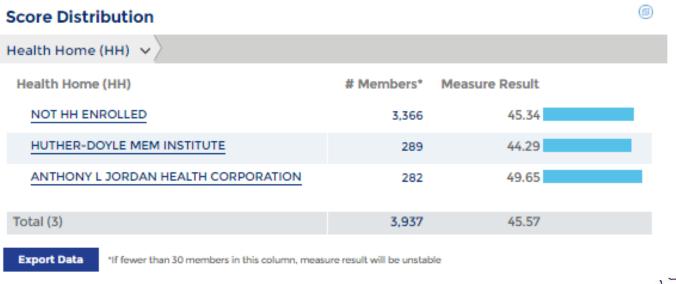
Target Practices and Providers Using Gap and Volume: Select Certain ZIP Codes



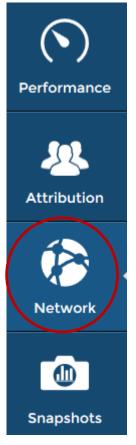
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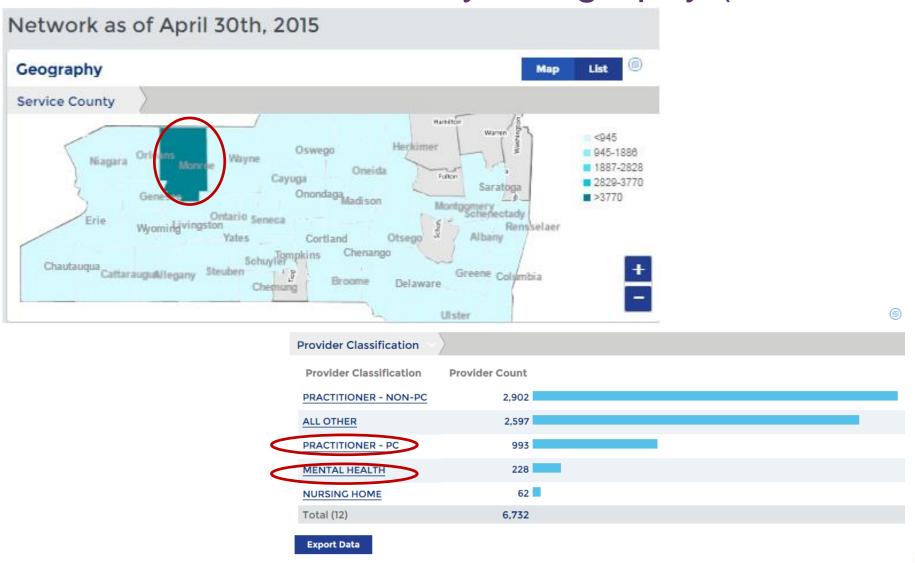
Examine by Health Home or Assigned PCP





Examine Provider Counts by Geography (i.e., County)









Part 3

Rapid Cycle Improvement using Plan-Do-Study-Act (PDSA)

Plan

- Capture the problem or idea
- Plan what you will change and predictions for what the impact will be
- Plan what information you will collect to measure whether the change has had an effect

Do

- Try out the change on a small scale
- Collect the information required to measure the change

Act

- Standardise your improvement; or
- Decide whether to make further change
- Plan how to improve on the original change made

Study

- Analyse the information collected to understand the impact of the change
- Compare your analysis with the predictions from the 'Plan' stage
- Summarise what you have learned



Thank You!

If you have any questions, please reach out to dsrip@health.ny.gov.

Subject line: MCP Access to DSRIP Dashboards

