CONFIGURING THE MCAS QUALITY MEASURE SET

March 14, 2023 Data Workgroup Webinar

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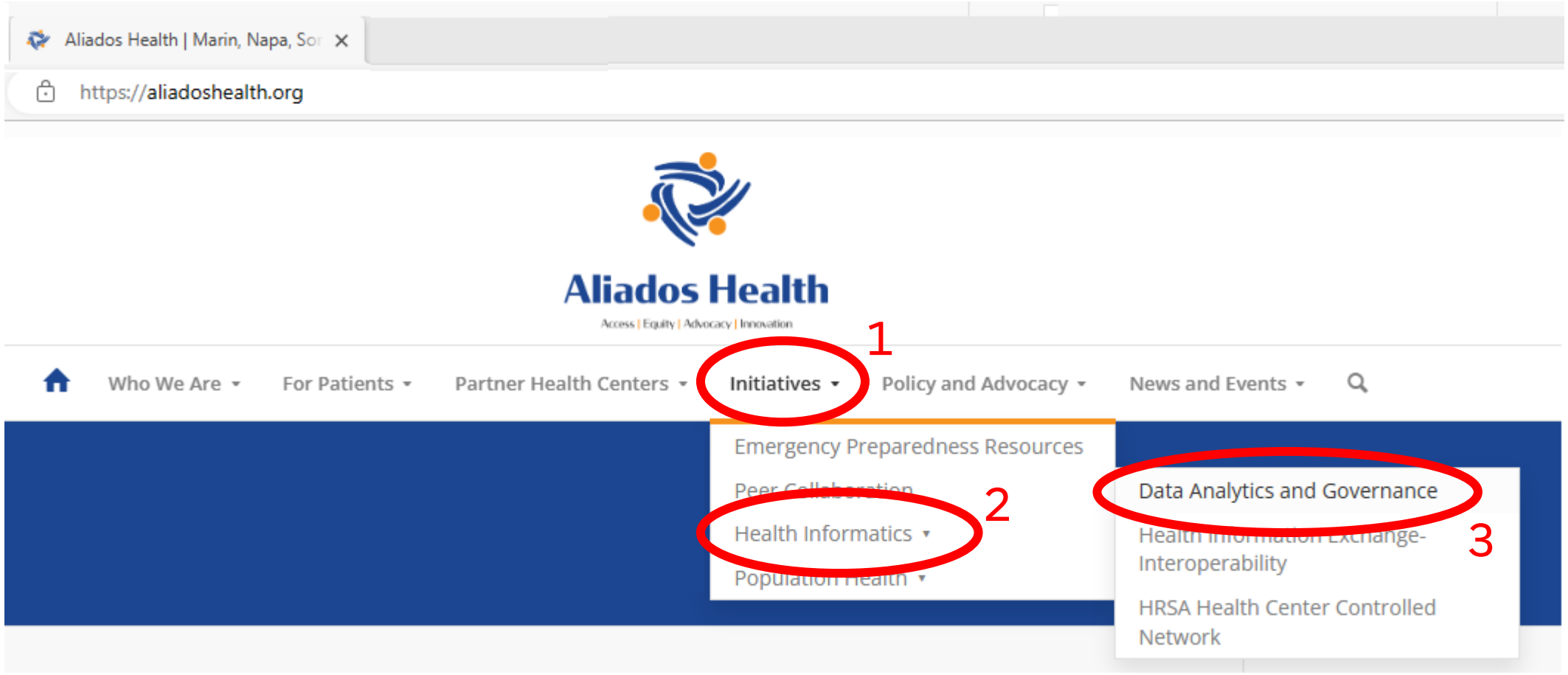
Aliados Health

AGENDA

- MCAS Background and Support Documents
- Overview of Measures and Required Data Elements
- General MCAS Data Element Design
- Specific MCAS Data Element Considerations
- Next Steps

MCAS BACKGROUND AND SUPPORT DOCUMENTS

ON THE NEW ALIADOS HEALTH WEBSITE



Data Analytics and Governance

PROGRAM

Data Standards and Integrity Council:

Aliados Health's Data Standards and Integrity Council (DSIC) meets bi-monthly with the objectives of improving data quality, increasing data literacy and maximizing the use of data for common measure sets and programs. The Council is made up of a representative from each health center who has the authority to make decisions related to the health center data reporting and governance.

Additional Resources and Companion Documents

Data Workgroup and Report Documentation:

This is Aliados Health's longest running data peer group and historically is the forum where Aliados Health has shared measure documentation, how to use new standard reports, validation practices, benchmarking and assistance with questions around standard report sets such as the Uniform Data System (UDS Federal Reporting) and Office of Statewide Health Planning and Development (OSHPD State of California Reporting), as well as other shared standardized reports.

Additional Resources and Companion Documents

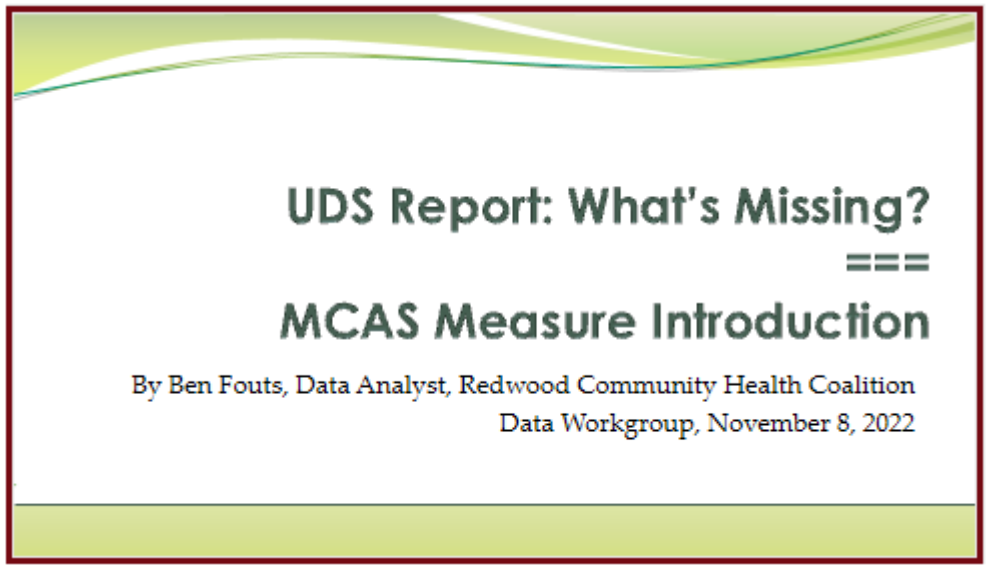
Click (+) to expand

PREVIOUS DATA WORKGROUP PRESENTATIONS: NOVEMBER 2022

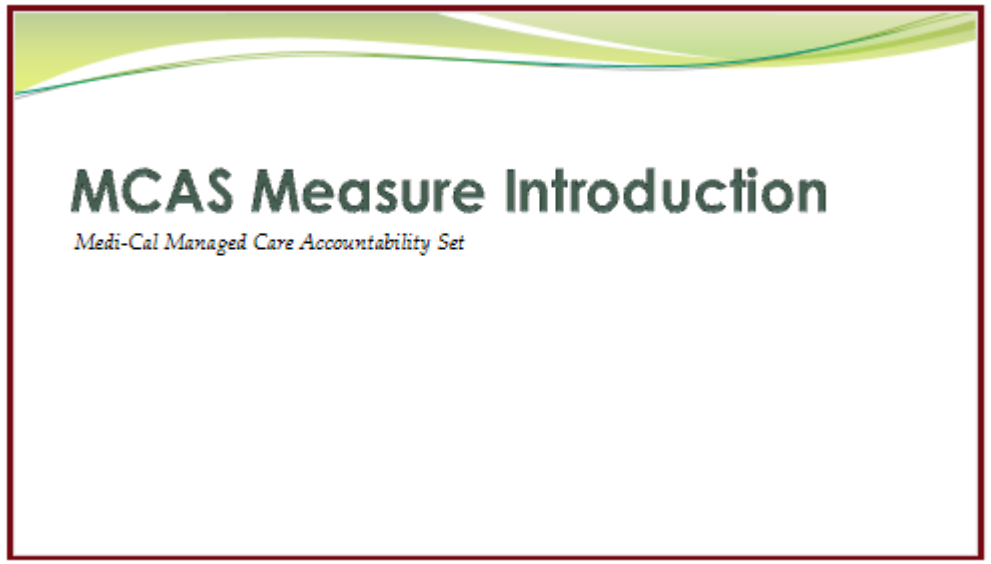
On Aliados webpage:

- **UDS Federal Reporting (2022)**
  - UDS Whats Missing_MCAS Intro(recording, 11/2022)
  - UDS_WhatsMissing_MCAS_Intro(slides, 11/2022)

Presentation slides:



Second section



Note. One measure mentioned in this presentation was extremely complex and therefore not developed for this measure set: Use of Opioids at High Dosage in Persons Without Cancer (OHD)

PREVIOUS DATA STANDARDS AND INTEGRITY COUNCIL MEETINGS: NOVEMBER 2022

On webpage:

2022 Issues Documents

- New MCAS Measures and Related Data Elements in Relevant_Establishing the ECDS Data Elements (November 2022)

- List of Quality Measures and proposed Data Elements
- Discussion of Medication Observations versus Medication Duration

- Both of these subjects will be covered below in this presentation

BACKGROUND MATERIALS (CALIFORNIA, 2022)

https://www.dhcs.ca.gov/dataandstats/reports/Pages/MgdCareQualPerfEAS.aspx

(Reporting Year 2022)

California Department of Health Care Services

Medi-Cal Managed Care Accountability Set (MCAS) for Managed Care Health Plans (MCPs)

Updated December 31, 2021

Measurement Year 2022 | Reporting Year 2023

Total Number of Measures = 39 (8 Hybrid/Administrative and 31 Administrative)

MPL means Minimum Performance Level

#	MEASURE REQUIRED OF MCP	MEASURE ACRONYM	MEASURE STEWARD	MEASURE TYPE METHODOLOGY	HELD TO MPL
1	Breast Cancer Screening	BCS	NCQA	Administrative	Yes
2	Cervical Cancer Screening	CCS	NCQA	Hybrid/Admin**	Yes

CMS TECHNICAL SPECIFICATIONS (FEDERAL, 2022)

Adult (note that page recently updated with 2023 specs):

https://www.medicaid.gov/medicaid/quality-of-care/performance-measurement/adult-and-child-health-care-quality-measures/adult-core-set-reporting-resources/index.html

Child (also recently updated with 2023 specs):

https://www.medicaid.gov/medicaid/quality-of-care/performance-measurement/adult-and-child-health-care-quality-measures/childrens-health-care-quality-measures/index.html

OVERVIEW OF MEASURES AND REQUIRED DATA ELEMENTS

NEW MEASURE SET IN RELEVANT

- 14 new MCAS Quality Measure Definitions. Two have more than one numerator
- 16 new Relevant Quality Measures in total
- Because they overlap other reporting sets, they are not named with “MCAS”

LIST OF MEASURES (SLIDE 1)

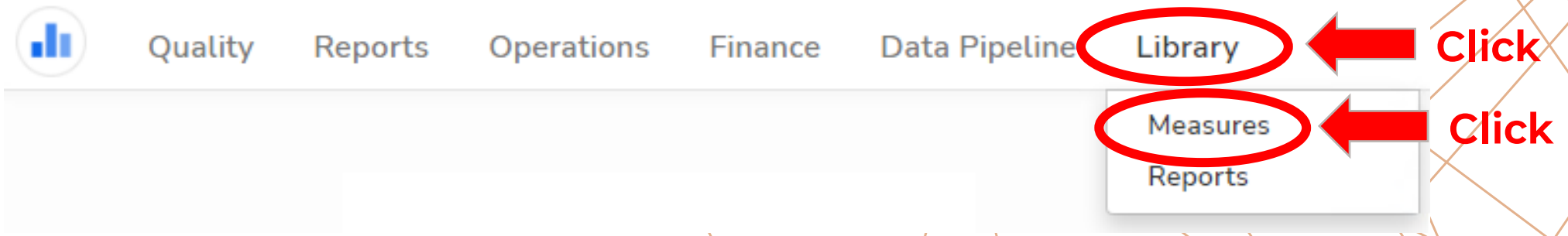
Measure Name to use in Document	Abbreviation	Alignment	Name of Quality Measure(s) in Relevant
Lead Screening in Children	LSC	HEDIS	Lead Screening in Children (Aligns with 2022 HEDIS Measure LSC)
Topical Fluoride for Children	TFL	DQA	Topical Fluoride for Children (Aligns with 2022 CMS Measure TFL-CH)
Well-Child Visits for Age 15 Months to 30 Months	W30	HEDIS	Well-Child Visits for Age 15 Months–30 Months (Aligns with 2022 HEDIS Measure W30)
Developmental Screening in the First Three Years of Life	DEV	CMS	Developmental Screening in the First Three Years of Life (Aligns with 2022 CMS Measure DEV-CH)
Metabolic Monitoring for Children and Adolescents on Antipsychotics	APM	HEDIS	Metabolic Monitoring for Children and Adolescents on Antipsychotics (Aligns with 2022 HEDIS Measure APM)
Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications	SSD	HEDIS	Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (Aligns with 2022 HEDIS Measure SSD)
Antidepressant Medication Management	AMM	HEDIS	1. Antidepressant Medication Management - Acute Phase (Aligns with 2022 HEDIS Measure AMM) 2. Antidepressant Medication Management - Continuation Phase (Aligns with 2022 HEDIS Measure AMM)

LIST OF MEASURES (SLIDE 2)

Measure Name to use in Document	Abbreviation	Alignment	Name of Quality Measure(s) in Relevant
Contraceptive Care: Most or Moderately Effective Contraception (Postpartum Women)	CCP	CMS	Contraceptive Care - Postpartum Women: Most or Moderately Effective Contraception Within 60 Days of Delivery (Aligns with 2022 CMS Measure CCP-AD)
Contraceptive Care: Most or Moderately Effective Contraception (All Women)	CCW	CMS	Contraceptive Care - All Women: Most or Moderately Effective Contraception (Aligns with 2022 CMS Measure CCW-AD)
Chlamydia Screening in Women	CHL	HEDIS	Chlamydia Screening in Women (Aligns with 2022 HEDIS Measure CHL)
Prenatal and Postpartum Care	PPC	HEDIS	1. Prenatal and Postpartum Care: Timeliness of Prenatal Care (Aligns with 2022 HEDIS Measure PPC) 2. Prenatal and Postpartum Care: Postpartum Care (Aligns with 2022 HEDIS Measure PPC)
Prenatal Immunization Status	PRS	HEDIS	Prenatal Immunization Status (Aligns with 2022 HEDIS Measure PRS)
Concurrent Use of Opioids and Benzodiazepines	COB	CMS	Concurrent Use of Opioids and Benzodiazepines (Aligns with 2022 CMS Measure COB-AD)
Pharmacotherapy for Opioid Use Disorder	POD	HEDIS	Pharmacotherapy for Opioid Use Disorder (Aligns with 2022 HEDIS Measure POD)

RELEVANT MEASURE LIBRARY

- Location



- Download measures by clicking button

- Relevant is adding finished and approved measures to the Library beginning this week. But health centers can begin planning Data Elements now

DATA ELEMENTS

- There are 17 new Data Elements
- Note: Even though “Data Elements” are referenced in this presentation and the instruction manual, in reality, Health Centers can extract data using SQL code in Transformers, which is then selected by the Data Elements.
- Continue to use the approach and naming convention already employed in your instance

NAMES OF NEW DATA ELEMENTS

New Data Element Name	Value Set code type	General Measure Name
infertility_cases	Diagnosis	1. Contraceptive Care: Most or Moderately Effective Contraception (Postpartum Women) 2. Contraceptive Care: Most or Moderately Effective Contraception (All Women)
sickle_cell_disease_cases	Diagnosis	Concurrent Use of Opioids and Benzodiazepines
opioid_use_or_dependence_cases	Diagnosis	Pharmacotherapy for Opioid Use Disorder
contraceptive_observations	Diagnosis, procedure, medication	1. Contraceptive Care: Most or Moderately Effective Contraception (Postpartum Women) 2. Contraceptive Care: Most or Moderately Effective Contraception (All Women)
topical_fluoride_applications	Procedure	Topical Fluoride for Children
lead_blood_tests	Labs	Lead Screening in Children
glucose_labs	Labs	1. Metabolic Monitoring for Children and Adolescents on Antipsychotics 2. Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications
total_cholesterol_labs	Labs	Metabolic Monitoring for Children and Adolescents on Antipsychotics
chlamydia_labs	Labs	Chlamydia Screening in Women
antipsychotic_medications	Medications	1. Metabolic Monitoring for Children and Adolescents on Antipsychotics 2. Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications
antidepressant_medications	Medications	Antidepressant Medication Management
benzodiazepine_medications	Medications	Concurrent Use of Opioids and Benzodiazepines
opioid_medications	Medications	Concurrent Use of Opioids and Benzodiazepines
opioid_use_disorder_medications	Medications	Pharmacotherapy for Opioid Use Disorder
sexual_activity_observations	Structured data	Chlamydia Screening in Women
childhood_development_screens	Structured data + procedure (?)	Developmental Screening in the First Three Years of Life
postpartum_treatments	Structured data	Prenatal and Postpartum Care: Postpartum Care

OTHER NOTES ON MEASURES AND DATA ELEMENTS

- “Follow-Up Care for Children Prescribed ADHD Medication” is an existing Quality Measure that was developed for the ECDS measure set. A new version (and a new recommendation for the medication Data Element) is likely in the near future
- An additional version of “Chlamydia Screening in Women” may be released without the denominator criterion for sexual activity. This would make it more general for screening all women 16 to 24 years of age.

OTHER NOTES ON MEASURES AND DATA ELEMENTS

- One Data Element already exists (Existing: depression_cases) but must be modified

Data Element Name	Value Set code type	General Measure Name
Existing: depression_cases	Diagnosis	Antidepressant Medication Management

GENERAL MCAS DATA ELEMENT DESIGN

DESIGNING THE DATA ELEMENTS

- If possible, base the data on the standard Relevant Transformers, if they exist in your instance

Value Set Code Type	Data Source	Transformer (Staging)
Diagnosis	Problem List	relevant_cases
Diagnosis	Assessments	relevant_visit_diagnosis_codes
Procedure	Claim	relevant_visit_billing_codes
Labs	Labs	relevant_lab_results
Medications	Medications (med list)	relevant_medications
Medications	Prescriptions (using best data available)	relevant_prescriptions
Structured data	Structured data (HPI,Social History, Preventive Medicine, etc.)	relevant_structured_data

- This will also help during your transition to Epic

MOST DATA ELEMENTS SHOULD JOIN TO VALUE SETS

- Value Sets define the codes (diagnosis, procedure, etc.)
- May change annually. Relevant will update the Value Sets which, if coded properly in the Data Element, would automatically update the Value Set codes used
- Some of the Data Elements that already exist for UDS Quality Measures (non-MCAS) may feature a JOIN to the eCQM Value Set table named “cqm_value_set_codes”
- You can study and employ the standard way Value Sets are joined in your system or you can use the coding suggestions in the Aliados Health MCAS Instruction Manual

VALUE SET TABLES IN RELEVANT

- See the article “Reference Tables” in the Relevant Help Center

  Relevant Healthcare > Data Warehouse and SQL > Data warehouse contents

- List of tables

Source Table in Relevant
hedis_value_set_codes
hedis_medication_lists
cms_cob_ohd_value_set_codes
cms_cob_ohd_medication_lists
cms_non_hedis_contraceptive_value_set_codes

VALUE SET TABLES CODING TIPS

- All rows from the most recent update are marked `latest=TRUE`
  … all rows from all prior versions are marked `latest=FALSE`
- Appendix A in the Aliados Health MCAS Instruction Manual features a table with the Value Set Source Table in Relevant and the Value Set ID number for all of the new Data Elements
- Example:

General Measure Name	Data Element Name	Source Table in Relevant	Value Set Name	OID or Unique Name	Code System Name
Lead Screening in Children	lead_blood_tests	hedis_value_set_codes	Lead Tests	2.16.840.1.113883.3.464.1004.1147	LOINC
Antidepressant Medication Management	antidepressant_medications	hedis_medication_lists	Antidepressant Medications	2.16.840.1.113883.3.464.1004.1503	RXNorm

FORMAT OF DATA ELEMENT SQL CODE

```
SELECT
      <required fields>
FROM <standard transformer>
WHERE <code field> IN
      (SELECT <code field>
       FROM <value set table>
       WHERE <value set ID> = 'value set identifier'
            AND latest = TRUE)
```

TYPICAL DATA ELEMENT DESIGN

- Appendix B of the instruction manual has several examples
- Here is an example for diagnosis code on the Problem List:

```
SELECT
   patient_id,
   started_on,
   ended_on
FROM relevant_cases
WHERE relevant_cases.code IN
      (SELECT DISTINCT code_value
      FROM cms_cob_ohd_value_set_codes
      WHERE value_set_id = 'SICKLE_CELL_DISEASE'
         AND code_system = 'ICD_10'
         AND latest = TRUE)
```

SPECIFIC MCAS DATA ELEMENT CONSIDERATIONS

DEPRESSION_CASES

- This Data Element already exists
- Because it is used for the UDS depression screening measure, it is linked to the CQM Value Set for “Major Depression Including Remission”
- The Antidepressant Medication Management measure uses only a sub-set of the CQM codes (i.e., “Major Depression” and not “Remission”)
- Therefore, the HEDIS Value Set should also be joined in the Data Element. Where they overlap, the new field major_depression = TRUE (the name of the column is not yet official). There is a code example in the instructions for this.

TOPICAL_FLUORIDE_APPLICATIONS

- No Value Set exists on a table. However, the instructions feature the DPT and CPT codes for the application of topical fluoride
- The assumption is that these are the codes we are using locally. You need to validate this at your health center.
- Consider that perhaps these procedures are not always being billed
- Sometimes fluoride is applied in a primary care medical setting. Investigate if this is entered into structured data at your health center.

POSTPARTUM_TREATMENTS

- The measure features Value Set codes for “bundled” services. These are services often associated with postpartum visits. These Value Sets are used directly in the SQL of the Quality Measure
- The Data Element postpartum_treatments should rely on Postpartum Visits from the OB flowsheet, similar to the prenatal_care_treatments Data Element (even though the approach to identifying them requires different SQL)
- This is why we say this Data Element relies on Structured Data (although not HPI, Social History, etc.). Do not add the Value Sets of CPT/ICD codes to the Data Element.
- The Postpartum Visit data on the Data Element should be “clean” (i.e., real postpartum visits in the same way they are normally seen in your EHR) and can therefore be used for other purposes

CONTRACEPTIVE_OBSERVATIONS

- Data on contraception can come from
  - ✓ Assessment diagnosis codes
  - ✓ Procedure codes on a claim
  - ✓ Medications from the medication list
  - ✓ Structured data
- These are “observations” which means they are tied to a particular date when the patient was asked or received a service
- All of these types of observations go into the Data Element
- There is example SQL code in the instructions

SEXUAL_ACTIVITY_OBSERVATIONS

- The measure features Value Sets for **proxies** to sexual activity (e.g., pregnancy tests, other STD testing, contraceptives, etc.). These Value Sets are used directly in the SQL of the Quality Measure
- A more direct way of recording sexual activity is through structured data. The Data Element will only rely on question(s) from structured data , if those exist in your system
- These are “observations” which means they are tied to a particular date when the patient was asked the question and the answer indicated that the patient was sexually active

SEXUAL_ACTIVITY_OBSERVATIONS, CONTINUED

- This is very sensitive information. Note that the age range for the measure is 16 to 24 years of age.
- If your health center already asks patients, or if your health center decides to implement a new workflow, add the date of the positive response to the Data Element. Do not add the Value Sets of CPT/ICD codes to the Data Element.
- If your health center does not ask and decides not to ask, the Data Element will not be mapped. The Quality Measure will still work with the proxies
- There may be another Quality Measure that assumes chlamydia screening for all female patients in this age group regardless of sexual activity.

CHILDHOOD_DEVELOPMENT_SCREENS

- Best to use structured data, if the screen is actually entered
- According to the specifications, the numerators identifies “children who were screened for risk of developmental, behavioral, and social delays using a standardized tool.”
- Examples of tools (from the specifications):
  - ✓ Ages and Stages Questionnaire - 3rd Edition (ASQ-3)
  - ✓ Parents’ Evaluation of Developmental Status, birth to age 8 (PEDS) or Developmental Milestones (PEDS-DM)
  - ✓ Survey of Well-Being in Young Children (SWYC)

CHILDHOOD_DEVELOPMENT_SCREENS

- The specifications also list tools that do **NOT** meet the criteria for global developmental screening tools, such as tools for socio-emotional development [ASQ-SE] or autism [M-CHAT]. Do not map these tools or similar kinds of domain-specific tools.
- There are some CPT and ICD codes included in the instructions, but they are not part of an official Value Set and it is questionable if these codes are exclusively used for the screens specified by the measure. You may find that some of the domain-specific tools use these codes for billing

CHILDHOOD_DEVELOPMENT_SCREENS

- According to the specifications, documentation in the medical record must include all of the following:
  - ✓ The name of the standardized tool used
  - ✓ A note indicating the date on which the test was performed
  - ✓ Evidence of a screening result or screening score
- This is a similar approach already used with other screens (like depression) at most health centers

MEDICATIONS VERSUS PRESCRIPTIONS (SLIDE 1)

- Most of the measures we are already familiar with that focus on medicine use an observational approach: did the patient use the medication within the measurement period?
- For example, the numerator for Statin Therapy for the Prevention and Treatment of Cardiovascular Disease reads: “Patients who are actively using or who received an order (prescription) for statin therapy at any time during the measurement period.”
- relevant_medications shows medications observations by date

MEDICATIONS VERSUS PRESCRIPTIONS (SLIDE 2)

- Some of the new measures that focus on medicine use an interval approach: did the patient use the medication continually for a period of time?
- For example, the numerator for Antidepressant Medication Management reads: “[Patients] who remained on an antidepressant medication for at least 84 days.”
- We therefore need some way of knowing how long the patient was using the medication

MEDICATIONS VERSUS PRESCRIPTIONS (SLIDE 3)

- relevant_prescriptions is a new Transformer being designed that shows only data from actual prescriptions where it is known how many days (the duration) worth of medication the patient received
- This is different than an observation that the patient was taking the medication at a particular time. It is a quantification of the medication.

MEDICATIONS VERSUS PRESCRIPTIONS (SLIDE 4)

Quality Measure	Approach
Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM)	Observation
Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD)	Observation
Contraceptive Care: Most or Moderately Effective Contraception (All) (CCW)	Observation
Contraceptive Care: Most or Moderately Effective Contraception (Postpartum) (CCP)	Observation
Antidepressant Medication Management (AMM)	Duration
Concurrent Use of Opioids and Benzodiazepines (COB)	Duration
Pharmacotherapy for Opioid Use Disorder (POD)	Duration
Follow-Up Care for Children Prescribed ADHD Medication (ADD)	Duration

Note that Follow-Up Care for Children Prescribed ADHD Medication is part of an existing Quality Measure Set. A new version will likely be developed along with recommendations for standardizing the Data Element SQL code

NEXT STEPS

WHERE SHOULD YOU START? (SLIDE 1)

- Read through the Aliados Health MCAS instructions manual. Begin to sketch out the approach you want to take.
- Who will be responsible for programming the Data Elements?
- Who will be responsible for downloading the Quality Measures when they are placed in the library?
- Who will validate the data?

WHERE SHOULD YOU START? (SLIDE 2)

- Identify structured data in your EHR
- If you do not have Structured Data for certain items, consider initiating the process to add them.
- If the structured data exists, is it in the format that the Data Element requires? Look at the wording of the questions and answers. Is it detailed enough to extract? Are only some values or responses useable?

WHERE SHOULD YOU START? (SLIDE 3)

Some of the Data Elements are more straightforward and will probably mirror other Data Elements that already exist. It is a good idea to start with these:

- sickle_cell_disease_cases
- opioid_use_or_dependence_cases
- infertility_cases
- topical_fluoride_applications
- depression_cases (modify the existing Data Element)
- lead_blood_tests
- glucose_labs
- total_cholesterol_labs
- chlamydia_labs

THINGS THAT ARE STILL PENDING AS OF THE DATE OF THIS PRESENTATION

- Quality Measures need to be finalized by Relevant
- Quality Measures need to be added to the Library
- A Prescriptions Data Element needs to be designed and tested by Relevant
- A field for the NDC code needs to be added to medication Data Elements

WHAT RELEVANT IS RESPONSIBLE FOR

- Programming the Quality Measures
- Providing Data Elements
- Making updates to the Quality Measures as specifications are updated
- Adding updated Value Sets to the tables annually

WHAT ALIADOS HEALTH IS RESPONSIBLE FOR

- The Data Element configuration Instruction Manual. The first version will be released this week and an updated version released in April.
- Guiding and answering questions about the design of the Data Elements
- Helping to interpret the measure specifications and explaining measures and approaches

WHAT HEALTH CENTERS ARE RESPONSIBLE FOR

- Coding the required Data Elements
- Can be done with their own programmers or using Relevant hours
- Validating the data in the Data Elements
- Validating the result data in the Quality Measures

QUESTIONS?