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### 2023 QIP Quality Measure Set Using Relevant

Aliados Health Data Group Webinar June 6, 2023 By Ben Fouts, Data Analyst

### Agenda

- 1. Review set of new 2023 QIP Quality Measures. Highlight the changes to the measure set
- 2. The "new" QIP Quality Measure
- 3. The "modified" QIP Quality Measure
- 4. Discuss new exclusions
- 5. Introduce the new version of Aliados Health QIP Instruction Manual
- 6. Anticipated Prescriptions Data Element



### List of Eleven New 2023 QIP Quality Measures

- Asthma Medication Ratio (QIP 2023)
- Breast Cancer Screening (QIP 2023)
- Cervical Cancer Screening (QIP 2023)
- Child and Adolescent Well-Care Visits (QIP 2023)
- Childhood Immunization Status (QIP 2023)
- Colorectal Cancer Screening (QIP 2023)
- Controlling High Blood Pressure (QIP 2023)
- Diabetes: HbA1c Good Control (≤9%) (QIP 2023)
- Diabetes: Retinal Eye Exam (QIP 2023)
- Immunizations for Adolescents (QIP 2023)
- Well-Child Visits in the First 15 Months of Life (QIP 2023)



## Context for the Quality Measures

- This year (2023), a full set of new Quality Measures is being released
- The measures are currently in the Aliados Health aggregate instance and must be copied to your health center instance
- For established measures, no new Data Elements are needed at this time. Thus, the measures should work right away
- The instruction manual has also been updated for 2023 (more on this later)



### **Changes to the QIP Measures Since 2022**

#### New measure:

• Diabetes: Retinal Eye Exam (QIP 2023)

#### Removed measures:

- Counseling for Nutrition for Children/Adolescents (QIP 2022)
- Counseling for Physical Activity for Children/Adolescents (QIP 2022)

### **Changed definition:**

Colorectal Cancer Screening (QIP 2023)



## New Measure: Diabetes Retinal Eye Exam

Or... an old measure that has been brought back



### Diabetes: Retinal Eye Exam (QIP 2023)

**Denominator** (same as the other QIP DM measure, HbA1c Good Control):

- Diagnosis of diabetes (on Problem List)
- Age 18 to 75 years (as of last day of Measurement Period)
- At least one medical visit in the Measurement Period

#### **Exclusions**:

- Diagnosis of gestational diabetes or steroid-induced diabetes during the two years prior to the end of the measurement period
- In hospice, palliative care, a nursing home, or died during the measurement period
- Diagnosis of frailty and advanced illness.



### Diabetes: Retinal Eye Exam (QIP 2023)

#### **Numerator Definition**

- A retinal or dilated eye exam in the measurement period
- A negative result from a retinal or dilated eye exam in the year prior to the measurement year
- Bilateral eye enucleation any time during the member's history through December 31 of the measurement year



### Diabetes: Retinal Eye Exam (QIP 2023)

#### **Unique Data Elements**

Retinal Eye Exams

```
retinal_eye_exams

patient_id bigint

performed_on date

result boolean
```

Eye Enucleations

```
eye_enucleations
```

- patient\_id bigint
- performed\_on date
- bilateral boolean



# Change in Definition: Colorectal Cancer Screening

Same change as the new UDS definition



### **Colorectal Cancer Screening (QIP 2023)**

### Previous (2022 and earlier) patient age range

Age 51 to 75 years (as of last day of Measurement Period)

### New (2023) patient age range

Age 46 to 75 years (as of last day of Measurement Period)



## **Other Exclusions**

New to the QIP measures



### **Changes to Exclusions (For All Measures)**

# HEDIS: Exclude patients who die any time during the measurement year

- These patients would have had a visit in the measurement period, and so they would have previously been included
- Theoretically, they would not have had the same opportunity to be included in the numerator as other patients
- A patient who died will display in the denominator but be excluded like other exclusions.
- The field for measurement\_value will display "Patient Deceased" and the deceased date if it occurred in the measurement year



### **Deceased Patients Are Rare**

Measure	Percentage deceased		
Diabetes measures	0.87%		
Controlling High Blood Pressure	0.78%		
Colorectal Cancer Screening	0.69%		
Breast Cancer Screening	0.51%		
Asthma Medication Ratio	0.43%		
Cervical Cancer Screening	0.15%		
Childhood Immunization Status	0.05%		
Child and Adolescent Well-Care Visits	0.01%		
Immunizations for Adolescents	0.00%		
Well-Child Visits in the First 15 Months of Life	0.00%		
Unduplicated patients in all above measures	0.30%		

Data aggregated from all Aliados Health participating health centers for the most recent measurement period

- Also, deceased patients are 1.5 times more likely to not be in the numerator than be in the numerator
- No measure numerator changed by more than 0.11%



### Other Notes on Excluding Deceased Patients

- Remember, the Quality Measures run several Measurement Periods at a time and a patient can appear in more than one Measurement Period
- Deceased patients should only be excluded from the denominator of the Measurement Period when they become deceased
- Therefore, the report uses the date in the deceased\_on field of the Data Element "Patients"



### **End-of-Life Exclusion (For Certain Measures)**

The following HEDIS (QIP) and CQM (UDS) measures have slightly modified exclusion criteria for the end-of-life exclusion definition:

- Breast Cancer Screening
- Colorectal Cancer Screening
- Diabetes

The specification definition and the SQL code for the end-of-life exclusion is the exactly the same between the QIP and UDS Quality Measures for these measures



### Standard End-of-Life Exclusion Definition

- In hospice care any time during the measurement period
- In palliative care any time during the measurement period
- Age 66 years or above and <u>living in a nursing home</u> any time before the end of the measurement period
- Age 66 years or above with advanced illness and frailty. Defined as having frailty AND one of the following:
  - A. Advanced illness diagnosis on Problem List <u>AND at least two visits</u> with an advanced illness diagnosis on the assessment in the past two years
  - B. Used dementia medications in the past two years

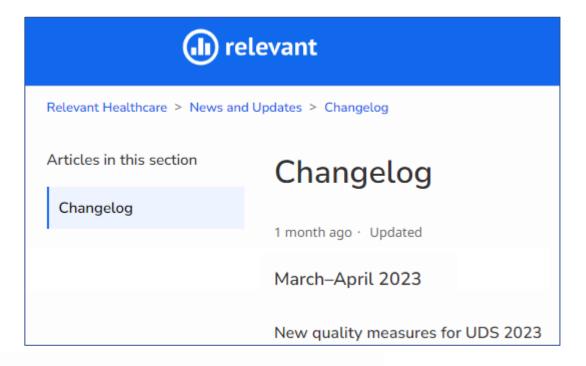


# End-of-Life Exclusion: 1. Nursing Home Stay

- Definition: Nursing Home Stay any time before the end of the measurement period
- Uses Data Element nursing\_home\_stays
- Replaces "long-term care for at least 90 days during the measurement period" using the Data Element long\_term\_care\_stay\_length



### **Nursing Home Stay**



#### New data elements for UDS 2023

 Several of the new UDS 2023 quality measures reference "Nursing Home" stays, which is more specific than the "Long Term Care" stays referenced in prior-year measure definitions. We've added a new Nursing Home Stays data element to support these new measures. Data pipeline administrators can click Data Pipeline -> Data Elements -> Nursing Home Stays -> "Map data element" to enable the default mapping.



### End-of-Life Exclusion: 2. Advanced Illness Diagnosis

- Previously only used the Data Element advanced\_illness\_cases which should be taking advanced illness diagnosis codes from the Problem List
- Now, in addition to the Problem List, the definition adds at least two visits in the past two years with advanced illness diagnosis codes from Assessments using the Data Element advanced\_illness\_outpatient\_visits



### Standard End-of-Life Exclusion Data Elements

These should already be established (but check!)

- hospice\_care\_interventions
- palliative\_care\_cases
- nursing\_home\_stays
- advanced\_illness\_cases
- advanced\_illness\_outpatient\_visits
- dementia\_medications



# **End-of-Life Exclusion for Controlling High Blood Pressure Measure**

- This is a unique case among the QIP measures
- The exclusion is very close to the "standard" definition on the previous slides
- Same hospice care, palliative care, and nursing home criteria
- Modified criteria: Age 66 to 80 years with advanced illness and frailty (same definition as above but different age range)
- Additional criteria: Age 81 years or above with frailty



### **End-of-Life Patients Are Rare**

Measure	Percentage end-of-life	
Diabetes Maeasures	0.05%	
Controlling High Blood Pressure	0.07%	
Colorectal Cancer Screening	0.06%	
Breast Cancer Screening	0.05%	
Undunlicated nationts in all above measures	0.06%	



### **Running 2021/2022 vs 2023 versions**

QIP Measure	MP Ending June 2023	
Asthma Medication Ratio	Same	
Breast Cancer Screening	Same	
Cervical Cancer Screening	Same	
Child and Adolescent Well-Care Visits	Same	
Childhood Immunization Status	Same	
Colorectal Cancer Screening	Cancer Screening Different by definition	
Diabetes: HbA1c Good Control	Small difference*	
Diabetes: Retinal Eye Exam	New but same as A1c	
Controlling High Blood Pressure	Small difference*	
Immunizations for Adolescents	Same	
Well-Child Visits in the First 15 Months of Life	Same	



<sup>\*</sup> See next slide Data from all Aliados Health for most recent measurement period

# Example of the Impact of the Advanced Illness and Frailty Exclusion Change

#### Diabetes measures

- Numerator 0.06% higher (no change to numerator definition)
- 0.48% fewer patients excluded
- Exclusion difference entirely due to advanced illness and frailty definition change

#### Controlling High Blood Pressure

- Numerator 0.09% higher (no change to numerator definition)
- 0.09% more patients excluded
- Exclusion difference entirely due to advanced illness and frailty and nursing home stays



### **Unique Diabetes Exclusions**

- The two QIP Diabetes Quality Measures have an additional exclusion for patients with polycystic ovarian syndrome, gestational diabetes or steroid-induced diabetes in the past two years
- This is built into the Quality Measure SQL using the HEDIS Value Set codes and does not use a separate Transformer/Data Element
- Not part of the UDS specification



### **Summary of Notes on Exclusions**

- The SQL for the End-of-Life Exclusion is the same for these QIP and UDS pairs of Quality Measures:
  - ✓ Breast Cancer Screening
  - ✓ Colorectal Cancer Screening
  - ✓ Diabetes
  - ✓ Controlling High Blood Pressure
- All QIP Quality Measures have an additional exclusion for deceased patients
- The QIP Diabetes Quality Measures have an additional exclusion that is not part of the UDS definition



## 2023 QIP Instruction Manual

With Update to HEDIS Value Set Table in Appendix



### New version of Aliados Health QIP Instruction Manual

- Look for e-mail from Aliados
   Health that will announce when it
   is ready
- It will be posted on the Aliados Health website along with these slides and webinar recording



# Partnership Quality Improvement Program (QIP) Quality Measure Notes and Set-up Instructions (2023 Edition)

#### Version 3

June, 2023

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### **Appendix With HEDIS Value Set Codes**

#### **Appendix A: Value Set References**

The following tables show the Value Set references needed to properly code the Data Elements for the new Quality Measures.

#### Current QIP Measures Attached to HEDIS Value Sets

Quality Measure Name	Data Element	HEDIS Value Set Name	HEDIS OID	Value Set Type
Well-Child Visits in the First 15 Months of Life (QIP 2023)	well_child_interventions	Well-Care (see Note #7)	2.16.840.1.113883.3.464.1004.1262	Procedures and Diagnosis
Child and Adolescent Well-Care Visits (QIP 2023)	well_child_interventions	Well-Care (see Note #7)	2.16.840.1.113883.3.464.1004.1262	Procedures and Diagnosis
Immunizations for Adolescents (QIP 2023)	mcv_immunizations	Meningococcal Immunization	2.16.840.1.113883.3.464.1004.1777	Vaccines
		Meningococcal Vaccine Procedure	2.16.840.1.113883.3.464.1004.1778	Procedures
	tdap_immunizations	Tdap Immunization	2.16.840.1.113883.3.464.1004.1791	Vaccines
		Tdap Vaccine Procedure	2.16.840.1.113883.3.464.1004.1792	Procedures
	hpv_immunizations	HPV Immunization	2.16.840.1.113883.3.464.1004.1763	Vaccines
		HPV Vaccine Procedure	2.16.840.1.113883.3.464.1004.1764	Procedures
	mcv_vaccine_allergies	No applicable Value Set (see Note #1)		
	tdap_vaccine_allergies	No applicable Value Set (see Note #1)		
	hpv_vaccine_allergies	No applicable Value Set (see Note #1)		
	meningococcal_meningitis_antigen_labs	No applicable Value Set (see Note #1)		
	tetanus_antigen_labs	No applicable Value Set (see Note #1)		
	diphtheria_antigen_labs	No applicable Value Set (see Note #1)		
	pertussis_antigen_labs	No applicable Value Set (see Note #1)		
	hpv_antigen_labs	No applicable Value Set (see Note #1)		
	encephalopathy_cases	eCQM: Encephalopathy due to Childhood Vaccination (see Note #8)	See Note #8	Diagnosis



# **Anticipated Prescriptions Data Element**

... Coming soon ...



### Asthma Medication Ratio: The Switch to Prescriptions

- Some measures specifically require prescription data because the number of days of medication prescribed at one time is needed in the calculation
- Relevant is working on the technical challenges to getting this data
- Transformers: relevant\_medications vs relevant\_prescriptions
- The QIP measure "Asthma Medication Ratio" contains wording for prescriptions, but was built years ago based on medications
- Once relevant\_prescriptions is available, a recommendation will be made on how to design the Data Element for Asthma Medications using prescriptions and also the new HEDIS medications Value Set table



### Other Measures That Will Switch to Prescriptions

#### **ECDS**

Follow-Up Care for Children Prescribed ADHD Medication (ADD)

#### **MCAS**

- Antidepressant Medication Management (AMM) 2 measures acute phase and continuation phase
- Concurrent Use of Opioids and Benzodiazepines (COB)
- Pharmacotherapy for Opioid Use Disorder (POD)



# Questions?

