

DMHC Health Equity and Quality Committee

October 16, 2023

Mary Watanabe, Director

Nathan Nau, Deputy Director, Office of Plan Monitoring

DMHC Mission Statement

The California Department of Managed Health Care protects consumers' health care rights and ensures a stable health care delivery system.

Agenda

- Welcome and Introductions
- Opening Remarks
- Benchmark Discussion
- Public Comment
- Closing Remarks

Welcome and Introductions

Mary Watanabe, Director

Opening Remarks

Mary Watanabe, Director

Health Equity and Quality Initiative

- The Health Equity and Quality Committee met nine times from February – September 2022.
- The Committee recommended 13 measures to be stratified by race and ethnicity.
- The DMHC released an All Plan Letter on December 21, 2022 adopting the 13 measures.
- The Committee recommended using the National Committee for Quality Assurance (NCQA) Quality Compass National Medicaid data for benchmarking but did not reach consensus on a percentile.

Health Equity and Quality Measures

1. Colorectal Cancer Screening
2. Breast Cancer Screening
3. Hemoglobin A1c Control for Patients with Diabetes
4. Controlling High Blood Pressure
5. Asthma Medication Ratio
6. Depression Screening and Follow-Up for Adolescents and Adults
7. Prenatal and Postpartum Care

Health Equity and Quality Measures

8. Childhood Immunization Status
9. Well-Child Visits in the First 30 Months of Life
10. Child and Adolescent Well-Care Visits
11. Plan All-Cause Readmissions
12. Immunizations for Adolescents
13. Consumer Assessment of Healthcare Providers and Systems (CAHPS) Health Plan Survey, Version 5.0 (Medicaid and Commercial): Getting Need Care

Key Dates

- Measurement Year 2023: Health plans begin collecting data on health equity and quality measures.
- 2024: Health plans submit MY 2023 data to the DMHC.
- 2025: First annual report published.
- By January 1, 2027: The DMHC will promulgate a regulation codifying the measures and benchmarks. Once the regulations are promulgated, the DMHC may begin assessing administrative penalties for failure to meet the health equity and quality benchmarks.

Benchmark Discussion

Nathan Nau, Deputy Director

Benchmark Discussion

1. Benchmark Increase Over Time
2. Gap Closure
3. Measure Phase-In Approach
4. Glidepath Approach

Benchmark Increase Over Time

- Start the benchmark at the NCQA Quality Compass Medicaid 33.3rd Percentile Rate for all measures and increase to the 50th percentile after three years.

Benchmark Increase Example

MY 2023-2025

Benchmark: Medicaid 33.3rd percentile –

- Breast Cancer Screening: 51.2%*
- Childhood Immunization Status: 33.33%*

MY 2026-2028

Benchmark: Medicaid 50th percentile –

- Breast Cancer Screening: 53.93%*
- Childhood Immunization Status: 38.2%*

*Medicaid rates for MY 2021

[HealthHelp.ca.gov](https://www.healthhelp.ca.gov)

Gap Closure

- Use the NCQA Quality Compass Medicaid 33.3rd percentile rate as the benchmark for aggregate measures with a Gap Closure process for stratified measures.
 - For each year that a health plan closes the gap by a minimum of 10%, the DMHC would not take enforcement action.

Gap Closure Example

Measure: Prenatal and Postpartum Care

- Benchmark (Medicaid 33.33rd): 68.5%
- Plan A subpopulation X result: 47.25%
- Annual improvement to avoid enforcement: 2.125%
 - $68.5\% - 47.25\% = 21.25 \times 10\% = 2.125\%$

Measure Phase-In Approach

- Set benchmark for an initial set of measures and phase in benchmark for the additional measures over time.
 - Initial set of measures would align with those collected by the Department of Health Care Services, Covered California, and CalPERS.

Six of the 13 Health Equity and Quality Measures are currently or will be collected by other State Departments:

1. Colorectal Cancer Screening
2. Hemoglobin A1c Control for Patients with Diabetes
3. Depression Screening and Follow-Up for Adolescents and Adults
4. Controlling High Blood Pressure
5. Prenatal and Postpartum Care
6. Childhood Immunization Status

Measure Phase-In Example

MY 2023-2025

(start with six measures)

1. Colorectal Cancer Screening
2. Hemoglobin A1c for Patients with Diabetes
3. Depression Screening and Follow-up for Adolescents and Adults
4. Controlling High Blood Pressure
5. Prenatal and Postpartum Care
6. Childhood Immunization Status

Measure Phase-In Example

MY 2026-2028

(seven additional measures)

1. Breast Cancer Screening
2. Asthma Medication Ratio
3. Well-Child Visits in the First 30 Months
4. Child and Adolescent Well-Care Visits
5. Plan All-Cause Readmissions
6. Immunizations for Adolescents
7. CAHPS Health Plan Survey

Glidepath Approach

- Changes to the benchmark and enforcement would be made gradually over 10 years.
 - Plans would report by subpopulation on all measures each year and the benchmark would gradually increase.
 - The number of measures subject to enforcement would increase over time.

Glidepath Example

MY 2023-2025

- Reporting: All measures by subpopulation to establish baseline results and compare the performance to the Medicaid 25th percentile.
- Benchmark: None
- Enforcement: None

Glidepath Example

MY 2026-2028

- Reporting:
 - All aggregate measures at the Medicaid 33.33rd percentile.
 - Four Healthcare Effectiveness Data and Information Set (HEDIS) measures at the Medicaid 25th percentile for subpopulations.
- Benchmark: Medicaid 25th percentile for four HEDIS measures at the aggregate and subpopulation level.
- Enforcement: For the four HEDIS measures at the aggregate and subpopulation level compared to the Medicaid 25th percentile.

Glidepath Example

MY 2029-2031

- Reporting:
 - All aggregate measures at the Medicaid 33.33rd percentile.
 - Eight HEDIS measures at the Medicaid 33.33rd percentile for subpopulations.
- Benchmark: For the eight HEDIS measures at the aggregate and subpopulation level compared to the Medicaid 33.33rd percentile.
- Enforcement: For the eight HEDIS measures at the aggregate and subpopulation level compared to the Medicaid 33.33rd percentile.

Glidepath Example

MY 2032 and onward

- Reporting: All measures at the aggregate and subpopulation level at the Medicaid 33.33rd percentile.
- Benchmark: Medicaid 33.3rd percentile for all measures.
- Enforcement: Enforcement of all measures at aggregate and subpopulation level compared to the Medicaid 33.3rd percentile.

Questions?

Public Comment

*Public comments may be submitted until 5:00 p.m. on
October 23, 2023,
to publiccomments@dmhc.ca.gov*

Closing Remarks

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Members of the public may find Committee [materials](#) on
the [DMHC website](#)