



KanCare Meaningful Measures Collaborative (KMMC)

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Robert G. (Bob) Bethell Joint Committee on Home and Community Based Services and KanCare Oversight

AGENDA

- KMMC Purpose
- Cycle 1 Recommendations
- Next Steps

ACKNOWLEDGEMENTS

- Supported by a grant from the REACH Healthcare Foundation
- Participating organizations, agencies and individuals contribute their expertise, perspective and time to the effort
- Facilitated by the Kansas Health Institute

KMMC PURPOSE

- Increase the visibility, credibility, validity and usefulness of information broadly available about KanCare
- Establish a transparent process that transcends administrations and individuals

KMMC PURPOSE (cont.)

- Establish consensus on meaningful metrics, how to measure, how to report
- Focus on outcomes of whole person
- Over time, build capacity in Kansas to generate and use KanCare data

CYCLE 1: PRIORITY AREAS

- Stakeholder priority areas selected for work:
 - Care Coordination
 - Network Adequacy
 - Pregnancy Outcomes
 - Social Determinants of Health
- Task groups reviewed each topic
- Recommendations published April 2020, available here: <https://bit.ly/30MVMmm>

RECOMMENDATION TYPES

- Existing meaningful measures
- New meaningful measures
- Other recommendations

PREGNANCY OUTCOMES

1. Develop a summary report on pregnancy process and clinical outcomes measures

PREGNANCY OUTCOMES

Meaningful Measures	
Process Measures	Outcomes Measures
Timeliness of prenatal care	Birth weight
Postpartum care	Gestational age
	Infant mortality
	Neonatal abstinence syndrome diagnosis at birth
	Neonatal intensive care unit admission at birth
	Maternal mortality (statewide)

Note: More information can be found at <https://bit.ly/30MVMmm>

PREGNANCY OUTCOMES

2. Work toward the ability to monitor changes over time and identify disparities on measures included in Pregnancy Outcomes 1.

PREGNANCY OUTCOMES

3. Continue to explore the use of Pregnancy Risk Assessment Monitoring System (PRAMS).

CARE COORDINATION

1. Develop a summary report on care coordination meaningful measures in relation to:
 1. General care coordination
 2. Care coordination for HCBS waiver participants
 3. Targeted case management for intellectual/developmental disability waiver participants

CARE COORDINATION

Examples of Meaningful Measures

General Care Coordination	Care Coordination for HCBS
How often was it easy to get the care, tests, or treatment you (your child) needed? [survey question]	Do you know who your MCO Care Coordinator is? [survey question]
Personal doctor seemed informed and up-to-date about your (your child's) care received from other providers. [survey question]	Rating of help received from MCO Care Coordinator. [survey question]
Follow-Up After Mental Health Hospitalization	Proportion of people who had someone follow up with them after being discharged from a hospital or rehabilitation facility in the past year. [survey question]

Note: This is a subset of the care coordination meaningful measures. More information, including the full set of meaningful measures, can be found at <https://bit.ly/30MVMmm>

CARE COORDINATION

Other recommendation topics:

- HCBS CAHPS
- Sampling/sub-group analyses
- SED waiver experiences
- SUD survey
- OneCare Kansas data

NETWORK ADEQUACY

1. Develop a summary report on network adequacy meaningful measures in relation to contract standards as well as measures that capture the experience of KanCare members accessing care.

NETWORK ADEQUACY

Examples of Meaningful Measures

Contract Standards	Member Experience
Percent of members covered within network adequacy standards by provider type, MCO and geography.	[Urgent/emergent care] In the last 6 months, when you (your child) needed care right away, how often did you (your child) get care as soon as you (he or she) needed? [survey question]
Number of counties with no provider access by provider type, geography and MCO.	[Primary/preventive care] In the last 6 months, how often did you get (when you made) an appointment for a check-up or routine care (for your child) at a doctor's office or clinic (how often did you get an appointment) as soon as you (your child) needed? [survey question]
Sufficient number of providers by provider type, MCO and geography to provide adequate coverage within defined time and distance standards.	Number and percent of waiver participants who received services in the type, scope, amount, duration and frequency specified in the service plan.

Note: This is a subset of the network adequacy meaningful measures. More information, including the full set of meaningful measures, can be found at <https://bit.ly/30MVMmm>

NETWORK ADEQUACY

2. Make technical documents available and provide the derivation of measures as part of public KanCare reports.

NETWORK ADEQUACY

3. Describe the KanCare network adequacy monitoring process and utilize data collected for program improvement.

NETWORK ADEQUACY

4. Provide information on the following questions

- Full set of questions included in recommendation summary document
- Examples: When is the network determined to be inadequate? What will KanCare MCOs do when members do not have access to care/services as required by the contract?

SOCIAL DETERMINANTS OF HEALTH

1. Strongly recommends that data source(s) related to the social determinants of health be pursued. One option by which this information may be accessed is by assessing the information currently collected in the Health Screening Tool.

NEXT STEPS

- Summary reports of existing meaningful measures in September 2020
- Work on new measures/other recommendations forthcoming
- Cycle 2 prioritization has begun
 - Consumer engagement
 - COVID-19 issues

CONNECT WITH THE KMMC

- Get monthly updates via the KMMC newsletter. Email KMMC@khi.org to join
- Website: kmmcddata.org



QUESTIONS?