



Maryland Managed Care Quality Update

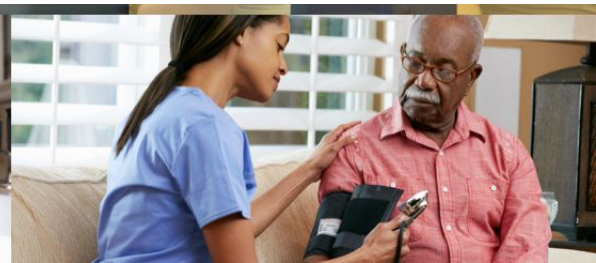
Sandy Kick

Director, Medical Benefits Management

Maryland Medicaid Administration

Maryland Medicaid Advisory Committee

Monday, January 22, 2024



Presentation Summary

- Brief HealthChoice and Quality Assurance Overview
- MY 2022 and MY 2023 Quality Results
 - Systems Performance Review (SPR)
 - Consumer Assessment of Healthcare Providers & Systems (CAHPS)
 - Primary Care Provider Satisfaction Survey (PCP)
 - Performance Improvement Projects (PIPs)
 - Consumer Report Card (CRC)
 - Grievances, Appeals, and Denials (GAD)
 - Network Adequacy Validation (NAV)
- Performance Monitoring Policy Results
 - MY 2022 HEDIS Results
 - MY 2022 Systems Performance Review (SPR)
- Questions & Wrap-Up

*Brief HealthChoice and Quality
Assurance Overview*

Managed Care Quality

Maryland HealthChoice Program

- HealthChoice is Maryland's statewide mandatory managed care program
- HealthChoice began in 1997 after the Centers for Medicare and Medicaid Services (CMS) approved Maryland's Section 1115 waiver under the Social Security Act
- Currently, HealthChoice has nine participating managed care organizations that cover ~86% of Medicaid lives in Maryland

Quality Assurance

Quality Assurance Area	Activities
MCO Operations	Systems Performance Review (SPR) Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) Network Adequacy Validation/Secret Shopper (NAV) Encounter Data Validation (EDV)
Enrollee and Provider Satisfaction	Enrollee Satisfaction Survey (CAHPS) Provider Satisfaction Survey (PCP)
Quality Measurement	HEDIS Reporting Population Health Incentive Program (PHIP) Consumer Report Card (CRC) Performance Improvement Projects (PIPs) NCQA Accreditation
Program Management and Oversight	Annual Technical Report (ATR) MCO Performance Monitoring Policy (PMP)

Quality Assurance

- All HealthChoice Quality Assurance Activity Reports can be found [here on our website](#).
- Currently contracted with 3 vendors to oversee the quality of care through the MCOs:
 - Healthcare Effectiveness Data and Information Set (HEDIS®) Audit Vendor
 - MetaStar: Madison, WI
 - Satisfaction Survey Vendor
 - Center for the Study of Services (CSS): Washington, DC
 - External Quality Review Organization (EQRO) Vendor
 - Qlarant Quality Solutions, Inc.: Easton, MD

*MY 2022 and MY 2023 HealthChoice
Quality Assurance Results*

Managed Care Quality

Systems Performance Review (SPR)

Qlarant provides an annual assessment of the structure, process, and outcome of each MCO's internal quality assurance programs. Through the triennial process, a comprehensive onsite review occurred in MY 2021 with interim desktop reviews having occurred in MY 2022 and MY 2023. Interim reviews focus on any new baseline standards and any required corrective action plans (CAPs).

Performance Standards

- | | |
|---|-----------------------|
| 1. Systematic Process of Quality Assessment | 7. Utilization Review |
| 2. Accountability to the Governing Body | 8. Continuity of Care |
| 3. Oversight of Delegated Entities | 9. Health Education |
| 4. Credentialing and Recredentialing | 10. Outreach |
| 5. Enrollee Rights | 11. Fraud and Abuse |
| 6. Availability and Accessibility | |

Systems Performance Review (SPR)

A total of 17 CAPs were required from the MY 2022 review (ABH/1, CFCHP/3, KPMAS/2, MPC/2, MSFC/1, PPMCO/4, UHC/1, WPM/3).

Interim Review Standards	MCOs with Corrective Action Plans	Total CAPs
4: Credentialing and Recredentialing	MPC*	1
5: Enrollee Rights	CFCHP*, KPMAS*, PPMCO, WPM*	4
7: Utilization Review	ABH, CFCHP*, KPMAS*, MPC, MSFC, PPMCO*, UHC*, WPM*	8
9. Health Education Plan	CFCHP, PPMCO, WPM	3
10: Outreach Plan	PPMCO	1

* Denotes a quarterly CAP submission is required per the MDH Performance Monitoring Policy.

2023 Consumer Assessment of Healthcare Providers and Systems (CAHPS) - Adult

Met or Exceeded HealthChoice Aggregate in Adult Surveys

Rating of Personal Doctor ($\geq 65\%$): CFCHP, JMS, and PPMCO

Rating of Specialist Seen Most Often ($\geq 62\%$): CFCHP, KPMAS, MSFC, PPMCO, and WPM

Rating of All Health Care ($\geq 55\%$): CFCHP, MSFC, UHC, and WPM

Rating of Health Plan ($\geq 56\%$): CFCHP, MSFC, PPMCO, UHC, and WPM

-
- CFCHP was **above** the statewide aggregate in all 4 categories
 - MSFC, PPMCO, and WPM were **above** the statewide aggregate in 3 categories.
 - JMS was **below** the statewide aggregate in 3 categories.
 - ABH and MPC were **below** the statewide aggregate in all 4 categories.

2023 Consumer Assessment of Healthcare Providers and Systems (CAHPS) - Children

Met or Exceeded HealthChoice Aggregate in Child Surveys

Rating of Personal Doctor ($\geq 74\%$): JMS, KPMAS, MPC, and PPMCO

Rating of Specialist Seen Most Often ($\geq 67\%$): CFCHP, JMS, KPMAS, and MPC

Rating of All Health Care ($\geq 68\%$): JMS, MPC, PPMCO, UHC, and WPM

Rating of Health Plan ($\geq 67\%$): MPC, PPMCO, UHC, and WPM

-
- MPC was **above** the statewide aggregate in all 4 categories
 - JMS and PPMCO were **above** the statewide aggregate in 3 categories.
 - CFCHP was **below** the statewide aggregate in 3 categories.
 - ABH and MSFC were **below** the statewide aggregate in all 4 categories.

2023 Consumer Assessment of Healthcare Providers and Systems (CAHPS) – Children CCC

Met or Exceeded HealthChoice Aggregate in Children with Chronic Conditions (CCC)

Access to Prescription Medicines (≥88%): CFCHP, JMS, MPC, PPMCO, and WPM

Access to Specialized Services (≥66%): MPC, MSFC, PPMCO, and UHC

Getting Needed Information (≥88%): CFCHP, JMS, MPC, MSFC, PPMCO, WPM

Personal Doctor Who Knows Child (≥90%): JMS, MPC, MSFC, and WPM

Coordination of Care for Children with Chronic Conditions (≥70%): JMS, MSFC, PPMCO, and WPM

-
- No MCO was **above** the statewide aggregate in all 5 categories
 - JMS, MPC, MSFC, PPMCO, and WPM were **above** the statewide aggregate in 4 categories.
 - UHC was **below** the statewide aggregate in 4 categories.
 - ABH and KPMAS were **below** the statewide aggregate in all 5 categories.

Primary Care Provider Satisfaction Survey (PCPs)

Maryland HealthChoice PCP Satisfaction surveys were fielded to primary care physicians who participate in Maryland’s HealthChoice program. PCPs were asked to rate their satisfaction with a specified Managed Care Organization (MCO) they participate with. The survey questionnaire included questions on finance issues, utilization management, customer service, and provider relations.

	HC 2021	HC 2022	HC 2023
Overall Satisfaction	78%	77%	78%
Would Recommend MCO to Patients	87%	89%	86%
Would Recommend MCO to Other Physicians	86%	88%	87%

Primary Care Provider Satisfaction Survey (PCPs)

Maryland HealthChoice PCP Satisfaction Surveys summary rate results for 2023 for *Overall Satisfaction* by MCO.

	ABH	CFCHP	JMS	KPMAS	MPC	MSFC	PPMCO	UHC	WPM
Overall Satisfaction	78.9%	83.6%	87.9%	85.0%	83.5%	92.8%	70.0%	60.8%	83.2%
Would Recommend MCO to Patients	87.5%	91.2%	90.9%	95.0%	93.3%	92.8%	85.0%	67.5%	93.1%
Would Recommend MCO to Other Physicians	87.4%	92.6%	90.9%	85.0%	93.3%	95.5%	85.6%	67.9%	93.1%

Performance Improvement Projects (PIPs): MDH Annual PIP Intervention Evaluations

PIPs impact the overall quality of care for HealthChoice enrollees through planned improvements to selected processes and health outcomes of care.

PIPs undergo annual validation by the contracted external review organization (EQRO). In addition, HCQA now performs annual evaluations of the MCOs' interventions. Implemented in 2020, the HealthChoice Program developed this new process based on the following:

- In-depth evaluation of PIPs beyond EQR validation performed by Qlarant
- Majority of MCOs reporting unmet or partially met PIP goals on EQR validation
- Need for comprehensive approach and greater collaboration to improve health outcomes
- Healthcare for larger number of enrollees impacted by MCO performance - alignment with Maryland's population health improvement initiatives is necessary
- Greater emphasis placed on quality health outcomes and process improvements from CMS
- PIPs are now a component of the Quality Strategy Health Disparities Plan

MDH Annual PIP Intervention Evaluation Scoring and Grades

MDH Annual PIP Intervention Evaluation grades are based upon the Total Evaluation Scores including criteria on *Report Quality*, *Intervention Planning & Design*, and *Intervention Evaluation*.

Grade	Definition	Equivalent Score
A	Excellent: <ul style="list-style-type: none"> ● Model design ● Scored 'met' in most or all the review criteria 	9-11 points
B	Satisfactory: <ul style="list-style-type: none"> ● Meets criteria but needs to strengthen certain elements 	6-8 points
C	Needs Improvement: <ul style="list-style-type: none"> ● Stronger effort required in multiple areas of reporting, design, and evaluation 	3-5 points
D	Unsatisfactory: <ul style="list-style-type: none"> ● Does not apply performance or quality improvement processes in its design or evaluation 	0-2 points

MDH Annual PIP Intervention Evaluation 2022

The trending results of MDH evaluation of the LEAD PIP is shown in the table below.

LEAD Evaluation Intervals	ABH	CFCHP	JMS	KPMAS	MPC	MSFC	PPMCO	UHC	WPM
Annual 2020	NA	D	C	C	D	C	D	D	C
Annual 2021	NA	D	B	C	D	B	C	D	C
Annual 2022	NA	D	B	B	B	B	C	C	D

MDH Annual PIP Intervention Evaluation 2022

The trending results of MDH evaluation of the AMR PIP is shown in the table below.

AMR Evaluation Intervals	ABH	CFCHP	JMS	KPMAS	MPC	MSFC	PPMCO	UHC	WPM
Annual 2020	NA	C	B	C	C	C	C	B	D
Annual 2021	NA	C	A	C	D	C	C	D	C
Annual 2022	NA	B	A	C	D	B	B	D	C

NEW PIP Sustainability Assessment and Monitoring

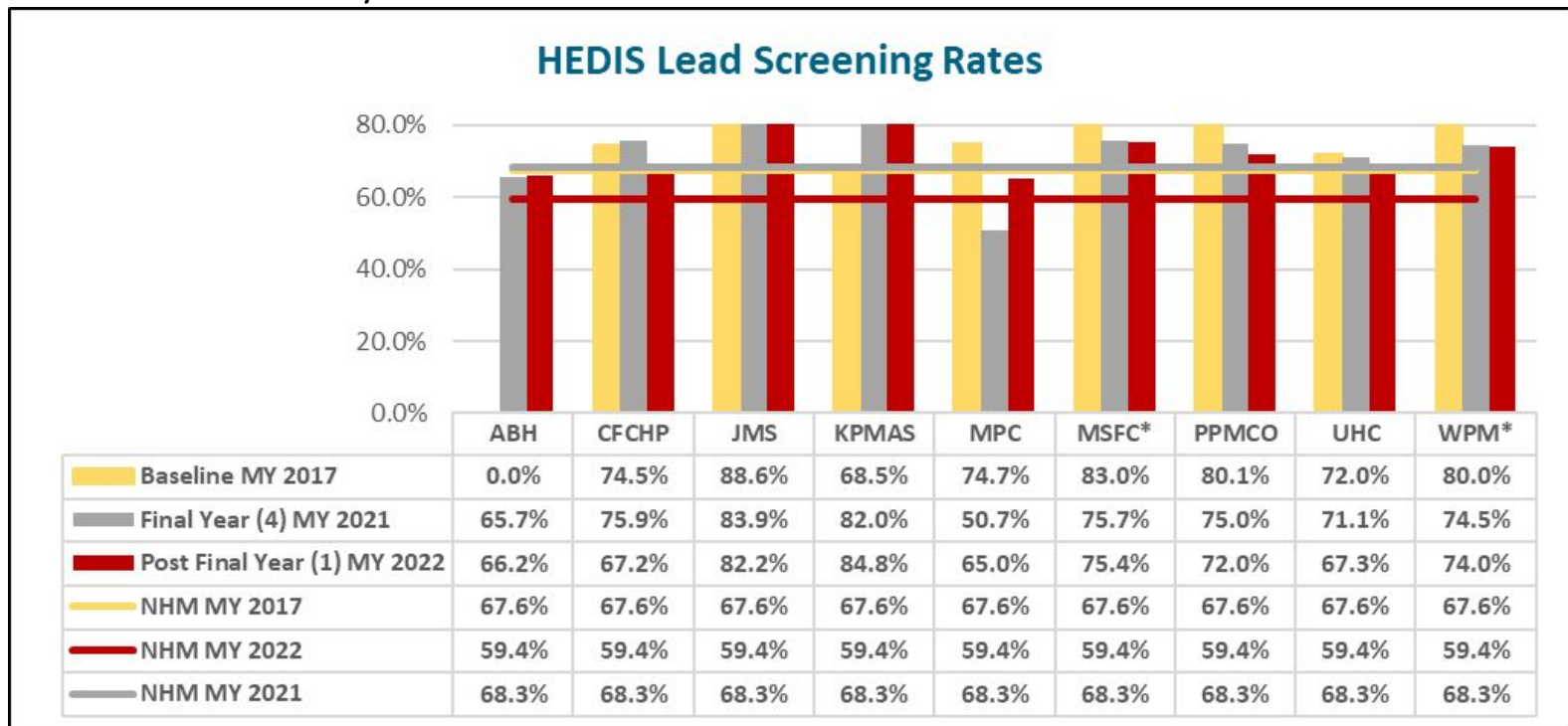
Qlarant validates MCO annual PIP submissions for two projects. At the start of CY 2023, the former topics, Childhood Lead Screening and Asthma Medication Ratio (AMR), were closed. MDH has initiated a sustainability monitoring plan to ensure that the improvements seen in the prior PIP cycle will be maintained and to provide additional feedback to the MCOs on the types of interventions they should develop for future PIPs.

PIP Sustainability Assessment and Monitoring will:

- Determine what impact the interventions from prior PIPs have had on MCO performance once the PIP cycle has ended
- Provide feedback on the sustainability of the interventions to the MCOs for future evolution of PIP interventions
- Encourage MCOs to continue to invest in the improvements seen during the PIP cycle
- Track HEDIS trends for 3 years from the conclusion of the PIP and be included as part of the Annual MDH PIP Intervention Evaluation Report

Sustainability Assessment of 2017-2022 LEAD PIP

The following results identify the National HEDIS Means (NHM) compared to the baseline HEDIS rates for each MCO, the final PIP year HEDIS rates and the HEDIS rates for the measurement year following the PIP closure for sustainability.

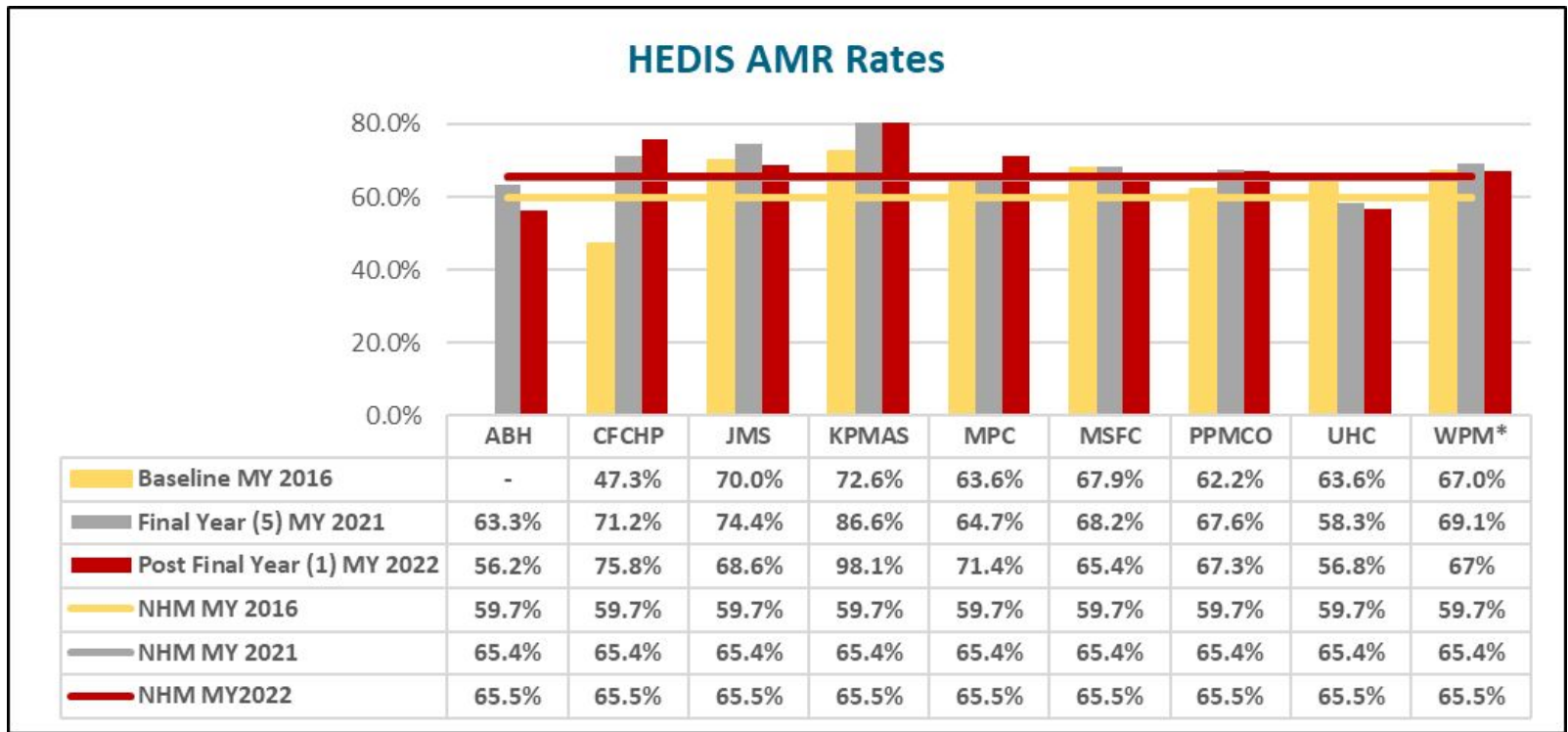


Note: ABH began participating in the annual report submissions for both Lead and AMR PIPs in 2022.

*Formerly Amerigroup (ACC)

Sustainability Assessment of 2017-2022 AMR PIP

The following results identify the National HEDIS Means (NHM) compared to the baseline HEDIS rates for each MCO, the final PIP year HEDIS rates and the HEDIS rates for the measurement year following the PIP closure for sustainability.



Note: ABH began participating in the annual report submissions for both Lead and AMR PIPs in 2022.

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NEW PIP Topics for CY 2023-2026

Two new PIP topics have been launched for CY 2023 with a focus on Perinatal Health. The PIP timeframe is CY 2023 – CY 2026.

#1: Timeliness of Prenatal Care and Identification of High-Risk Pregnancies

Performance Measure

HEDIS PPC-CH: Prenatal and Postpartum Care: Timeliness of Prenatal Care

Health Equity Focus

Stratify data to determine disparate groups by race/ethnicity and tailor ALL interventions to address the unique needs and challenges among those populations. Align the MCO's focus with the specifications of the NCQA's Expansion of Race and Ethnicity Stratification In Select HEDIS Measures.

NEW PIP Topics for CY 2023-2026

#2: Maternal health and infant/toddler care during the postpartum period

Performance Measures

- HEDIS PPC-AD: Prenatal and Postpartum Care: Postpartum Care
- HEDIS Postpartum Depression Screening and Follow-up (PDS)
- HEDIS W30: Well-Child Visits in the First 30 Months of Life
- HEDIS Childhood Immunization Status (CIS-3)

Health Equity Focus

Stratify data to determine disparate groups by race/ethnicity and tailor ALL interventions to address the unique needs and challenges among those populations. Align the MCO's focus with the specifications of the NCQA's Expansion of Race and Ethnicity Stratification In Select HEDIS Measures.

For W30 and CIS-3, MCOs should begin to structure and report measure stratification for this PIP during MY 2023 in preparation for the MY 2024 NCQA reporting requirement.

CY 2023-2026 Perinatal PIP Topics and Applied Strategies

#1: Timeliness of Prenatal Care and Identification of High-Risk Pregnancies

- Improve completion and use of the M-PRA
- Clinical-Community linkages
- Increase engagement with Medicaid-enrolled doulas and/or home visiting services
- Pregnancy Medical Homes or Group Prenatal Care
- Identification of pregnant persons with SUD and integration of substance use management

#2: Maternal Health and Infant/Toddler Care During the Postpartum Period

- Increase engagement throughout the 12-month coverage period
- Implement electronic postpartum depression screening tool
- Clinic-community linkages on behavioral health referrals and parenting supports
- Value-added benefits for well child care
- Promote WCV through engagement with home visiting services, doulas
- Improve immunization rates

2023 Consumer Report Card (CRC)

2023

Maryland
DEPARTMENT OF HEALTH

HealthChoice Performance Report Card for Consumers

KEY	
★ ★ ★ Above HealthChoice Average	★ Below HealthChoice Average
★ ★ HealthChoice Average	N/A Not Applicable*

This Report Card shows how Maryland HealthChoice plans compare to each other. You may use this Report Card to help you choose a health plan. To choose a plan call 1-855-642-8572 (TDD: 1-855-642-8573) or visit www.marylandhealthconnection.gov.

If you are having trouble getting health care from your health plan or your doctor, try calling your health plan's customer service line. If you still need help, call the HealthChoice Help Line at 1-800-284-4510 (TDD: 800-977-7389). For more information, visit www.marylandhealthconnection.gov/assets/MCO-Comparison-Chart.pdf

HEALTH PLANS	PERFORMANCE AREAS					
	ACCESS to CARE	DOCTOR COMMUNICATION and SERVICE	KEEPING KIDS HEALTHY	CARE for KIDS with CHRONIC ILLNESS	TAKING CARE of WOMEN	CARE for ADULTS with CHRONIC ILLNESS
AETNA BETTER HEALTH 1-866-827-2710	★	★ ★	★	N/A	★	★
CAREFIRST BLUECROSS BLUESHIELD COMMUNITY HEALTH PLAN <i>(formerly UNIVERSITY OF MARYLAND HEALTH PARTNERS)</i> 1-800-730-8530	★	★ ★	★	★ ★	★	★
JAI MEDICAL SYSTEMS 1-888-524-1999	★ ★	★ ★ ★	★ ★ ★	N/A	★ ★ ★	★ ★ ★
KAISER PERMANENTE 1-855-249-5019	★ ★	★ ★	★ ★ ★	N/A	★ ★ ★	★ ★ ★
MARYLAND PHYSICIANS CARE 1-800-953-8854	★ ★ ★	★ ★	★	★ ★ ★	★ ★	★
MEDSTAR FAMILY CHOICE 1-888-404-3549	★ ★	★ ★	★ ★	★ ★	★ ★	★
PRIORITY PARTNERS 1-800-654-9728	★ ★ ★	★ ★	★ ★ ★	★ ★	★	★ ★
UNITEDHEALTHCARE 1-800-318-8821	★ ★	★ ★	★ ★ ★	★	★	★ ★
WELLPOINT MARYLAND <i>(formerly AMERIGROUP COMMUNITY CARE)</i> 1-800-600-4441	★ ★	★ ★	★ ★ ★	★ ★	★ ★	★ ★

MDH complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability in its health programs and activities.

Help is available in your language: 1-855-642-8572 (TTY: 1-855-642-8573). These services are available for free.

Hay ayuda disponible en su idioma: 1-855-642-8572 (TTY: 1-855-642-8573). Estos servicios están disponibles gratis.

Access to Care

- Appointments are scheduled without a long wait
- The health plan has good customer service
- Everyone sees a doctor at least once a year
- The health plan answers member calls quickly

Doctor Communication and Service

- Doctors explain things clearly and answer questions
- The doctor's office staff is helpful
- Doctors provide good care

Keeping Kids Healthy

- Kids get shots to protect them from serious illness
- Kids see a doctor and dentist regularly
- Kids get tested for lead

Care for Kids with Chronic Illness

- Doctors give personal attention
- Kids get the medicine they need
- A doctor or nurse knows the child's needs
- Doctors involve parents in decision making

Taking Care of Women

- Women are tested for breast cancer and cervical cancer
- Moms are taken care of when they are pregnant and after they have their baby

Care for Adults with Chronic Illness

- Doctors monitor blood sugar and cholesterol levels
- Doctors examine eyes for vision loss and check kidneys are healthy and working properly
- Adults get antibiotics and treatment for lower back pain when they need it

若您需要免费中文帮助, 请拨打这个电话号码: 1-855-642-8572 (TDD: 1-855-642-8573)

**NOTE: N/A means that the rating is not applicable and does not describe the performance or quality of care provided by the health plan. It should not affect your choice of health plan. This information was collected from health plans and their members and is the most current performance data available. The information was reviewed for accuracy by independent organizations. Health plan performance scores have not been adjusted for differences in service regions or member composition.*



2022 vs. 2023 Consumer Report Card (CRC) Comparison

Access to Care

- MPC and PPMCO ranked Above the HealthChoice average for 2023, while MSFC, UHC, and WPM maintained their ranking at the HealthChoice average.
- ABH fell Below the HealthChoice average for 2023, along with CFCHP.
- JMS and KPMAS maintained their rankings at the HealthChoice average.

Doctor Communication and Service

- JMS maintained a ranking Above the HealthChoice average for 2023, while CFCHP, KPMAS, MPC, MSFC, UHC, and WPM maintained the HealthChoice average from 2022 to 2023.
- PPMCO decreased its HealthChoice Above average ranking in 2023 to the HealthChoice average in 2023.
- ABH increased in ranking from 2022 to 2023, meeting the HealthChoice average.

Keeping Kids Healthy

- CFCHP decreased its Below HealthChoice average ranking from 2022 to 2023. MPC maintained a Below HealthChoice average from 2022 to 2023. ABH maintained a Below Average HealthChoice average from 2022 to 2023.
- MSFC decreased its ranking from Above the HealthChoice average to Below the HealthChoice average from 2022 to 2023.
- JMS, KPMAS, UHC, and WPM all met Above the HealthChoice average for 2023. PPMCO made an outstanding improvement, ranking from Below the HealthChoice average in 2022 to Above the HealthChoice average in 2023.

2022 vs. 2023 Consumer Report Card (CRC) Comparison

Care for Kids with Chronic Illness

- ABH, JMS, and KPMAS did not have a reported ranking for 2023. CFCHP improved their ranking from Below the HealthChoice average to the HealthChoice average. MSFC and WPM maintained their ranking at the HealthChoice average from 2022 to 2023.
- MPC maintained its Above HealthChoice average ranking, while UHC maintained its Below HealthChoice average ranking from 2022 to 2023. PPMCO decreased from Above the HealthChoice average in 2022 to the HealthChoice average in 2023.

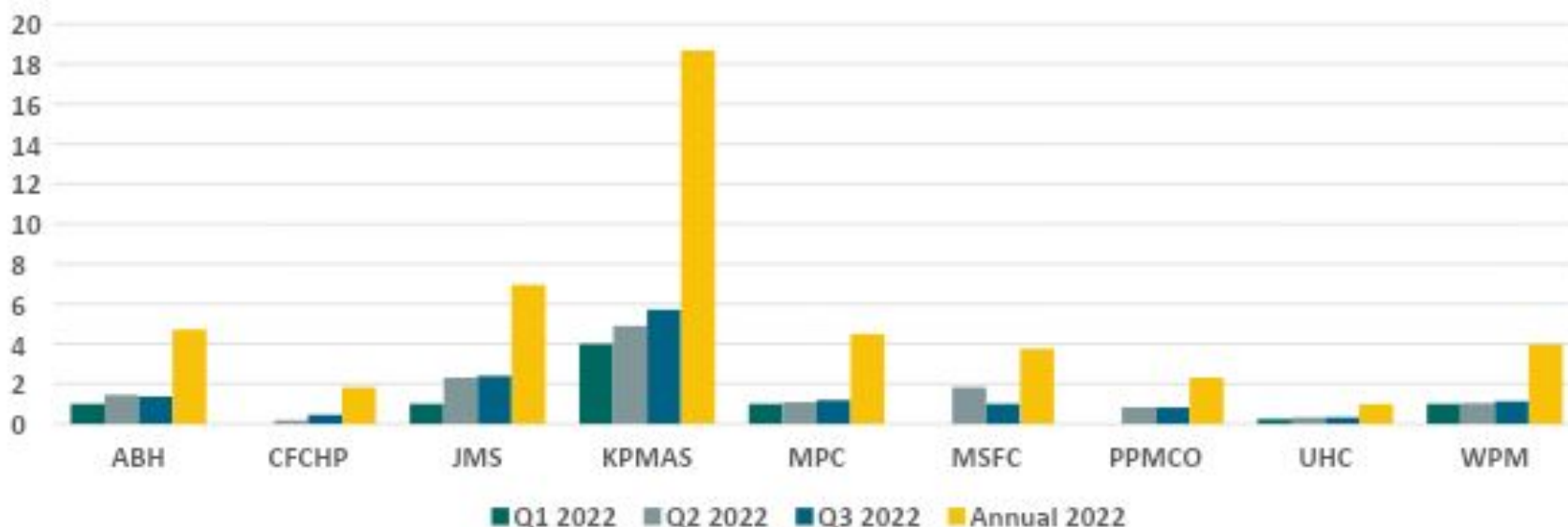
Taking Care of Women

- ABH, CFCHP, PPMCO and UHC ranked at Below the HealthChoice average for 2023.
- MPC, MSFC, and WPM, ranked at the HealthChoice average, a decrease for WPM from 2022 to 2023.
- JMS and KPMAS maintained their Above HealthChoice average ranking from 2022 to 2023.

Care for Adults with Chronic Illness

- ABH, CFCHP, MPC, and MSFC all ranked Below the HealthChoice average, a decrease for ABH and MSFC from 2022 to 2023.
- PPMCO, UHC, and WPM improved their rankings at the HealthChoice average in 2023 from Below the HealthChoice average in 2022 to the HealthChoice average in 2023.
- JMS and KPMAS maintained their Above HealthChoice average ranking from 2022 to 2023.

Grievances, Appeals, and Denials (GAD)



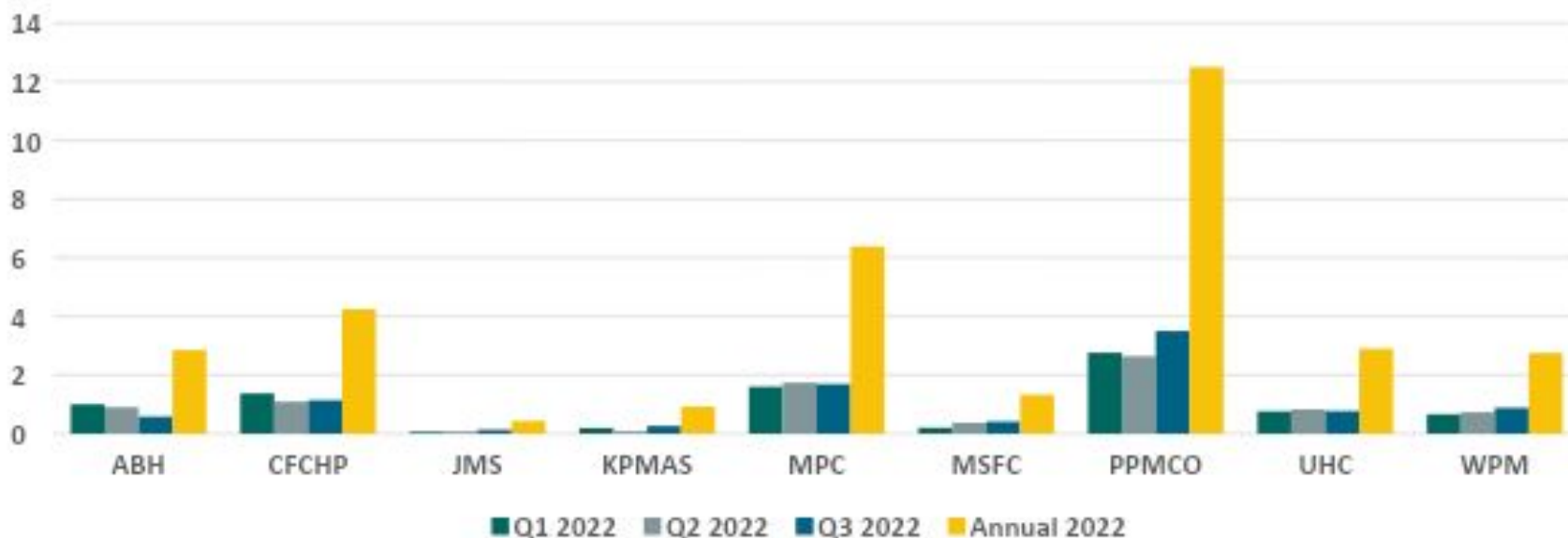
- KPMAS was a major outlier in grievances/1000 enrollees for all 3 quarters and the year.
- Attitude/Service-related issues were most of KPMAS' grievances.
- Billing/Financial-related issues were most of JMS' grievances.
- CFCHP and UHC had the lowest number of grievances of each of the timeframes reviewed.

Grievances, Appeals, and Denials (GAD)

Compliance: Enrollee Grievance Resolution Timeframes									
Timeframe	ABH	CFCHP	JMS	KPMAS	MPC	MSFC	PPMCO	UHC	WPM
Q1 2022	M	M	M	M	M	M	PM	M	M
Q2 2022	M	M	M	PM	M	M	PM	M	M
Q3 2022	M	PM	M	PM	M	PM	PM	M	M
Annual 2022	M	PM	M	M	PM	M	M	PM	M
Compliance: Provider Grievance Resolution Timeframes									
Q1 2022	M	M	M	NA	M	M	M	M	M
Q2 2022	M	M	M	NA	M	M	M	M	M
Q3 2022	NA	M	M	NA	NA	NA	M	M	M
Annual 2022	M	PM	M	NA	M	M	M	M	M

Green – M (Met); Yellow – PM (Partially Met); White – NA (Not Applicable as the MCO did not receive any provider grievances during the reporting period.)

Grievances, Appeals, and Denials (GAD)



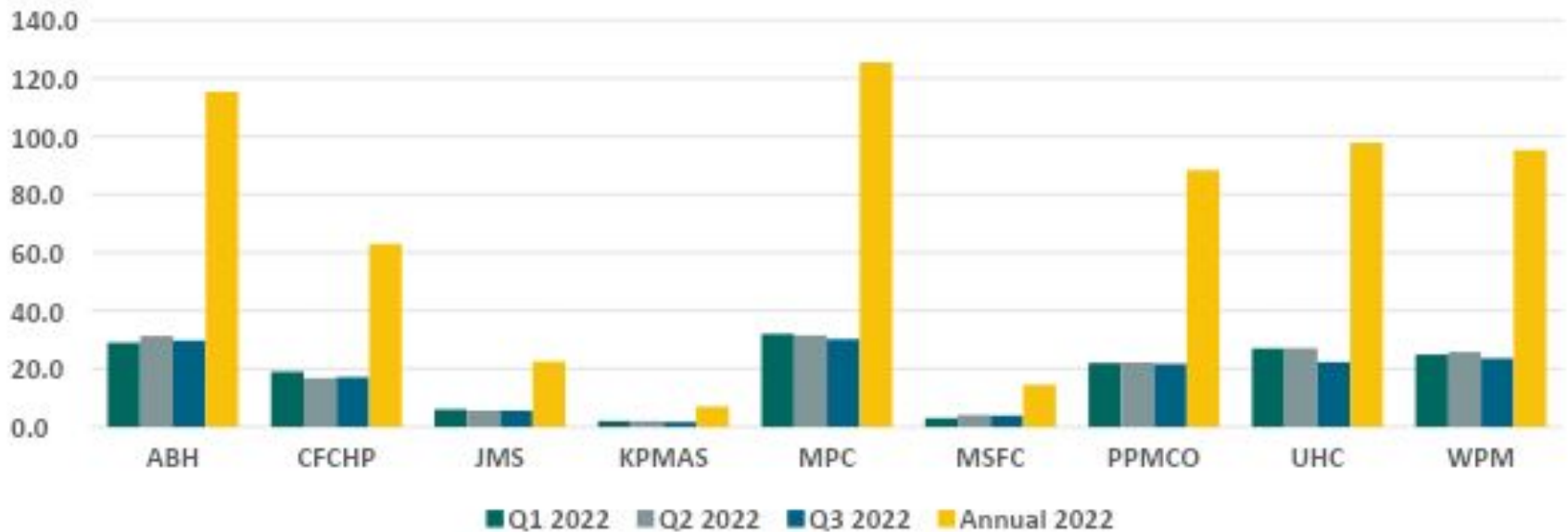
- PPMCO has consistently been an outlier, at the top of the range, in reported appeals per 1000 enrollees. MPC and CFCHP are second and third in this ranking.
- Outliers for the lowest appeal rates are JMS, KPMAS, and MSFC (and could be attributed to lower denials per 1,000 rate).
- Pharmacy Services was the most frequently reported category for the majority of MCOs for the past three calendar years.

Grievances, Appeals, and Denials (GAD)

Compliance: Enrollee Appeal Resolution/Notification Timeframes									
Quarter	ABH	CFCHP	JMS	KPMAS	MPC	MSFC	PPMCO	UHC	WPM
Q1 2022	M	M	M	PM	PM	PM	M	PM	PM
Q2 2022	M	M	M	M	M	M	M	M	M
Q3 2022	M	M	M	M	M	M	M	M	M
Annual 2022	M	M	M	PM	PM	M	M	M	PM

Green – M (Met); Yellow – PM (Partially Met)

Grievances, Appeals, and Denials (GAD)



- The rates of pre-service denials per 1,000 enrollees show that JMS, KPMAS, and MSFC have few denials in comparison to the other six MCOs.
- ABH, MPC, and UHC had the highest pre-service denial rates among the MCOs for the first three quarters of the year.
- When looking at the annual data, ABH, MPC, and UHC, followed by WPM, are outliers demonstrating the highest pre-service denial rates.

Grievances, Appeals, and Denials (GAD)

Quarter	ABH	CFCHP	JMS	KPMAS	MPC	MSFC	PPMCO	UHC	WPM
Compliance with Expedited Pre-Service Determination Timeframes for Medical Denials									
Q1 2022	100%	100%	NA	100%	100%	100%	99%	100%	100%
Q2 2022	92%	100%	100%	100%	100%	100%	97%	100%	96%
Q3 2022	100%	100%	NA	100%	98%	NA	96%	100%	94%
Annual 2022	99%	100%	100%	100%	99%	100%	98%	100%	98%
Compliance with Standard Pre-Service Determination Timeframes for Medical Denials									
Q1 2022	98%	99%	100%	96%	100%	99%	99%	100%	98%
Q2 2022	99%	100%	100%	96%	100%	99%	100%	100%	94%
Q3 2022	99%	100%	100%	88%	100%	98%	100%	100%	78%
Annual 2022	98%	100%	100%	92%	100%	99%	99%	100%	84%
Compliance with Outpatient Pharmacy Pre-Service Determination Timeframes for Denials									
Q1 2022	100%	100%	100%	NA	100%	96%	99%	100%	100%
Q2 2022	100%	99%	100%	100%	99%	97%	99%	100%	100%
Q3 2022	99%	99%	99%	100%	98%	100%	99%	100%	100%
Annual 2022	100%	99%	99%	100%	99%	98%	99%	100%	100%

NA - Not Applicable

Network Adequacy Validation (NAV)

Compliance Category	MY 2021	MY 2022	MY 2023
Routine Appointment Timeframes (≤ 30 days Requirement)	99.6%	88%	91%
Urgent Care Appointments (48-hour Requirement)	87%	85%	90%
Accuracy of Provider Directory			
PCP Listed in Online Directory	96%	97%	97%
PCP's Practice Location Matched Survey Response	98%	93%	91%
PCP's Telephone Number Matched Survey Response	97%	91%	93%
Specifies PCP Accepts New Medicaid Patients for MCO	81%	<u>78%</u>	<u>78%</u>
Specifies Age Specifications of Patients Seen	99.6%	97%	97%
Specifies Languages Spoken by PCP	99.9%	97%	97%
Specifies Practice Accommodations for Patients with Disabilities	96%	92%	95%

*Updated Performance Monitoring
Results*

Managed Care Quality

HEDIS Performance Monitoring Results

- HealthChoice MCOs are required to collect Healthcare Effectiveness Data and Information Set (HEDIS®) measures each year. HEDIS is a registered trademark of the National Committee for Quality Assurance.
- HEDIS compliance audits were conducted of all HealthChoice MCOs to report validated HEDIS results.
- HEDIS Performance Monitoring Policy
 - MDH monitors when a plan has 35 percent or more of its HEDIS measures with scores that fall below the national HEDIS average.
 - Sanctions in the past have focused on short-term freezes of auto-enrollment, ranging from one to three months.

HEDIS Monitoring Guidelines

No Problem	<ul style="list-style-type: none">● No performance monitoring finding
Minor Problem	<ul style="list-style-type: none">● One year with 35% or more elements with scores below the National Medicaid HEDIS Mean (NHM)or● Two consecutive years with 35% or more elements with scores below the NHM
Moderate Problem	<ul style="list-style-type: none">● Three years in a row or three years within a five-year period with 35% or more elements with scores below the NHM
Major Problem	<ul style="list-style-type: none">● Four years in a row or four years within a five-year period with 35% or more elements with scores below the NHM

MY 2022 HEDIS Performance Monitoring Results

Value		ABH	CFCHP	JMS	KPMAS	MPC	MSFC	PPMCO	UHC	WPM
A= At or Above the NHM	A	21	25	33	40	29	28	25	28	30
B=Below the NHM	B	21	19	9	3	16	16	20	16	14
N = No rate	N	3	1	3	2	0	1	0	1	1

%At or Above = A / (B+A)	50.0%	56.8%	78.6%	93.0%	64.4%	63.6%	55.6%	63.6%	68.2%
%Below = B / (B+A)	50.0%	43.2%	21.4%	7.0%	35.6%	36.4%	44.4%	36.4%	31.8%

MY 2022 HEDIS Performance Monitoring Results

ABH	CFCHP	JMS	KPMAS	MPC	MSFC	PPMCO	UHC	WPM
MY2022: 21/42 (50.0%)	MY2022: 19/44 (43.2%)	MY2022: 9/42 (21.4%)	MY2022: 3/43 (7.0%)	MY2022: 16/45 (35.6%)	MY2022: 16/44 (36.4%)	MY2022: 20/45 (44.4%)	MY2022: 16/44 (36.4%)	MY2022: 14/44 (31.8%)
MY2021: 19/41 (46.3%)	MY2021: 20/42 (47.6%)	MY2021: 15/42 (35.7%)	MY2021: 6/43 (14.0%)	MY2021: 22/44 (50.0%)	MY2021: 17/44 (38.6%)	MY2021: 16/45 (35.6%)	MY2021: 13/44 (29.5%)	MY2021: 13/44 (29.5%)
MY2020: 24/37 (64.9%)	MY2020: 16/38 (42.1%)	MY2020: 19/39 (48.7%)	MY2020: 6/38 (15.8%)	MY2020: 21/40 (52.5%)	MY2020: 14/40 (35.0%)	MY2020: 26/41 (63.4%)	MY2020: 17/40 (42.5%)	MY2020: 13/40 (67.5%)
MY2019: 29/42 (69.0%)	MY2019: 16/52 (30.8%)	MY2019: 8/52 (15.4%)	MY2019: 6/51 (11.8%)	MY2019: 16/53 (30.2%)	MY2019: 7/53 (13.2%)	MY2019: 19/54 (35.2%)	MY2019: 16/53 (30.2%)	MY2019: 14/53 (26.4%)
MY2018: 12/23 (52.2%)	MY2018: 17/60 (28.3%)	MY2018: 7/59 (11.9%)	MY2018: 7/58 (12.1%)	MY2018: 28/57 (49.1%)	MY2018: 10/60 (16.7%)	MY2018: 18/58 (31.0%)	MY2018: 18/57 (31.6%)	MY2018: 15/60 (25.0%)
	MY2017: 30/61 (49.2%)	MY2017: 9/61 (14.8%)	MY2017: 7/59 (11.9%)	MY2017: 31/61 (50.8%)	MY2017: 11/61 (18.0%)	MY2017: 21/62 (33.9%)	MY2017: 14/61 (23.0%)	MY2017: 12/61 (19.7%)

SPR Performance Monitoring

- The Systems Performance Review (SPR) is an assessment of 11 standards. MCOs that do not meet minimum compliance scores for a standard are required to submit Corrective Action Plans (CAPs), which are reviewed annually.
- When an MCO has received a finding of Unmet or Partially Met for more than one consecutive year, the Performance Monitoring Policy is enforced.
- SPR Performance Monitoring Policy
 - MDH monitors when System Performance Review elements go unmet or partially met for multiple consecutive review periods.
 - Sanctions in the past focused on quarterly monitoring of corrective actions and financial sanctions.

SPR Performance Monitoring Guidelines

Minor Problem	<ul style="list-style-type: none">• Does not receive a “Met” in an element of component
Moderate Problem	<ul style="list-style-type: none">• Receives an “Unmet” score two years in a row on the same element (without components) or an “Unmet” or “Partially Met” score on the same component
Major Problem	<ul style="list-style-type: none">• Receives an “Unmet” score three or more years in a row on the same element (without components) or an “Unmet” or “Partially Met” score on the same component

SPR Performance Monitoring Results

MCO	MY 2022	MY 2022 Status	Sanction
CFCHP	7.8c: Unmet	Major SPR Problem	Quarterly Updates, Review of CAP by Qlarant, and Fine
KPMAS	7.8c: Unmet	Major SPR Problem	Quarterly Updates, Review of CAP by Qlarant, and Fine
MPC	4.4i, 4.4j Unmet	Moderate SPR Problem	Quarterly Updates, Review of CAP by Qlarant
PPMCO	7.7e: Unmet	Moderate SPR Problem	Quarterly Updates, Review of CAP by Qlarant
UHC	7.10: Unmet	Moderate SPR Problem	Quarterly Updates, Review of CAP by Qlarant
WPM	7.6b, 7.10: Unmet	Moderate SPR Problem	Quarterly Updates, Review of CAP by Qlarant

Managed Care Quality in Maryland

Questions/Wrap-Up



Managed Care Quality in Maryland

Thank You!