

# Improving Prevention Services: Focus on Adolescent Health and Obesity

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Improving Care and Proving It!  
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# Michigan Demographics

- 9.8 million Michigan citizens
- 1.8 million Medicaid beneficiaries
- 1.2 million in the Managed Care Plans
- 37,879 are in the Michigan CHIP program known as MIChild
- Two-thirds of Michigan adults and 12.4 percent of youth at an unhealthy weight

# Obesity in Michigan

- Prior to 2008, Michigan saw an increase in obesity in the state as well as an increase in diabetes among children
- There was an effort by some school districts to address the lack of school activity and healthy foods on the school menus
- Obesity is a major focus of the Governor and the Department of Community Health (DCH) Director
- View the Michigan.gov website and search for Michigan dashboard (health and wellness)

# Department of Community Health

## Focus on Obesity

- In 2008, we believed the obesity issue important enough to initiate a focus project on obesity
- NCQA developed new HEDIS measures for Adult and Child BMI
- The Child (3 - 17 year olds) measure had three components:
  - BMI percentile
  - Counseling for nutrition
  - Counseling for physical activity
- There are usually no benchmarks for first year HEDIS measures
- We do not generally include first year HEDIS measures in performance standards or bonus activity
- However, we have learned over time that data is critical to the evaluation and assessment of improvement

# Performance Plan Rollout

- A draft plan to focus on obesity for both children and adults was developed and presented to the health plans for the 2009 bonus award
- During the discussion the plans raised some concerns and issues regarding:
  - the specifications for the measures
  - the potential provider pushback
- We realized that education and engagement of providers and members was just as important to some level of measurement

# Performance Plan Rollout

- After thorough discussion we assured the health plans that:
  - We understood the complexities in generating these measures, however we believed that creating measurement was an important step in assessing the obesity issue in the populations they serve
  - The performance bonus would not be based on the health plan rates for these measures
- We would conduct a review of their measurement/summary documents and Quality Improvement Programs to assess how they were preparing to address measurement and assessment of obesity

# Minimum Expectations

We expected the health plans to:

- Document measures in Audit Review Tables
- Conduct provider education/use incentives to capture measurement
- Conduct member education/use incentives for nutrition and physical activity
- Submit a summary plan of action to the DCH by due date

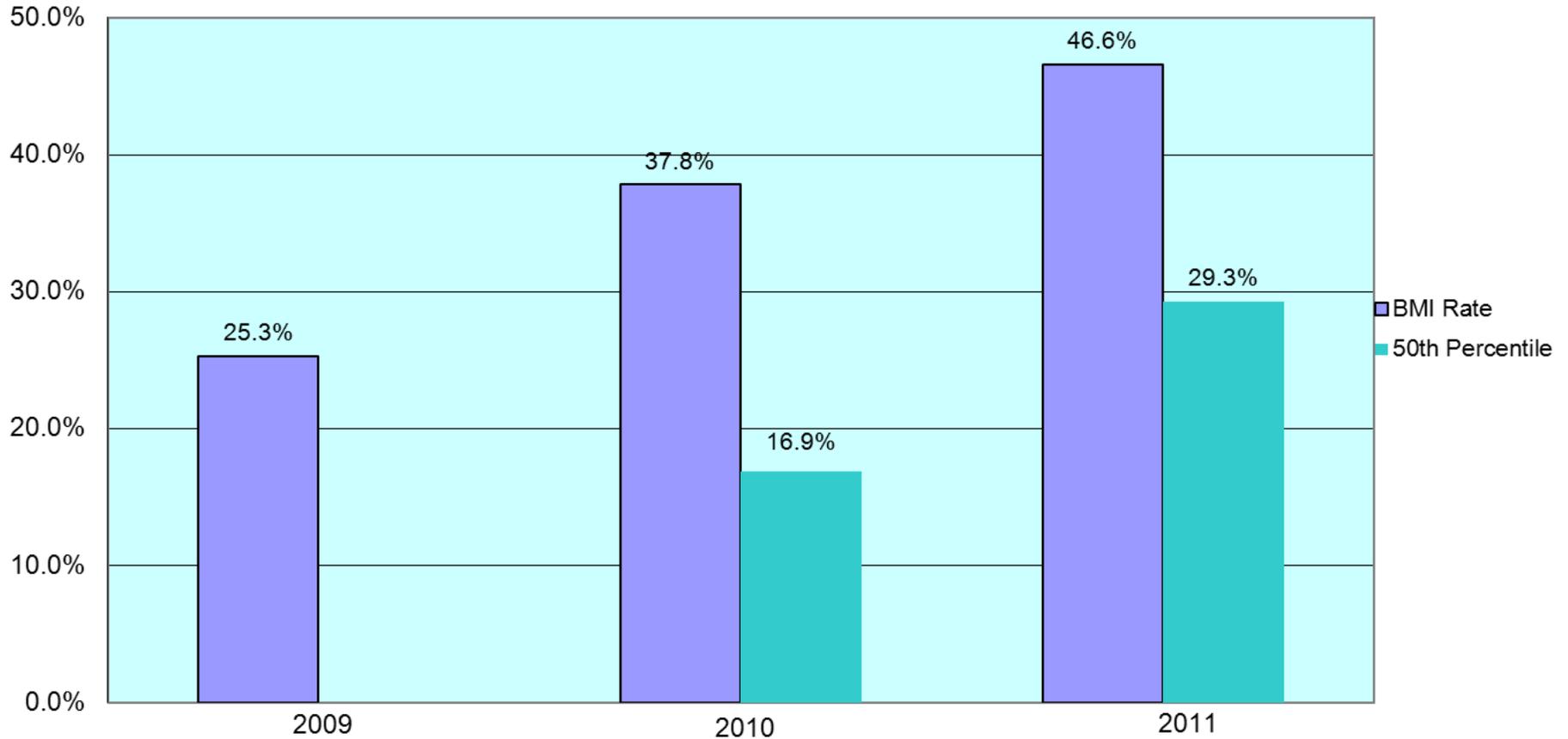
# Plans of Action

- **Providers**
  - Articles for Provider newsletters
  - BMI assessments added to health forms
  - BMI Calculator access for provider offices, and incentives to report the data
- **Members**
  - Articles in Member newsletters
  - Gym membership
  - Sponsored health programs
  - Healthy eating campaigns

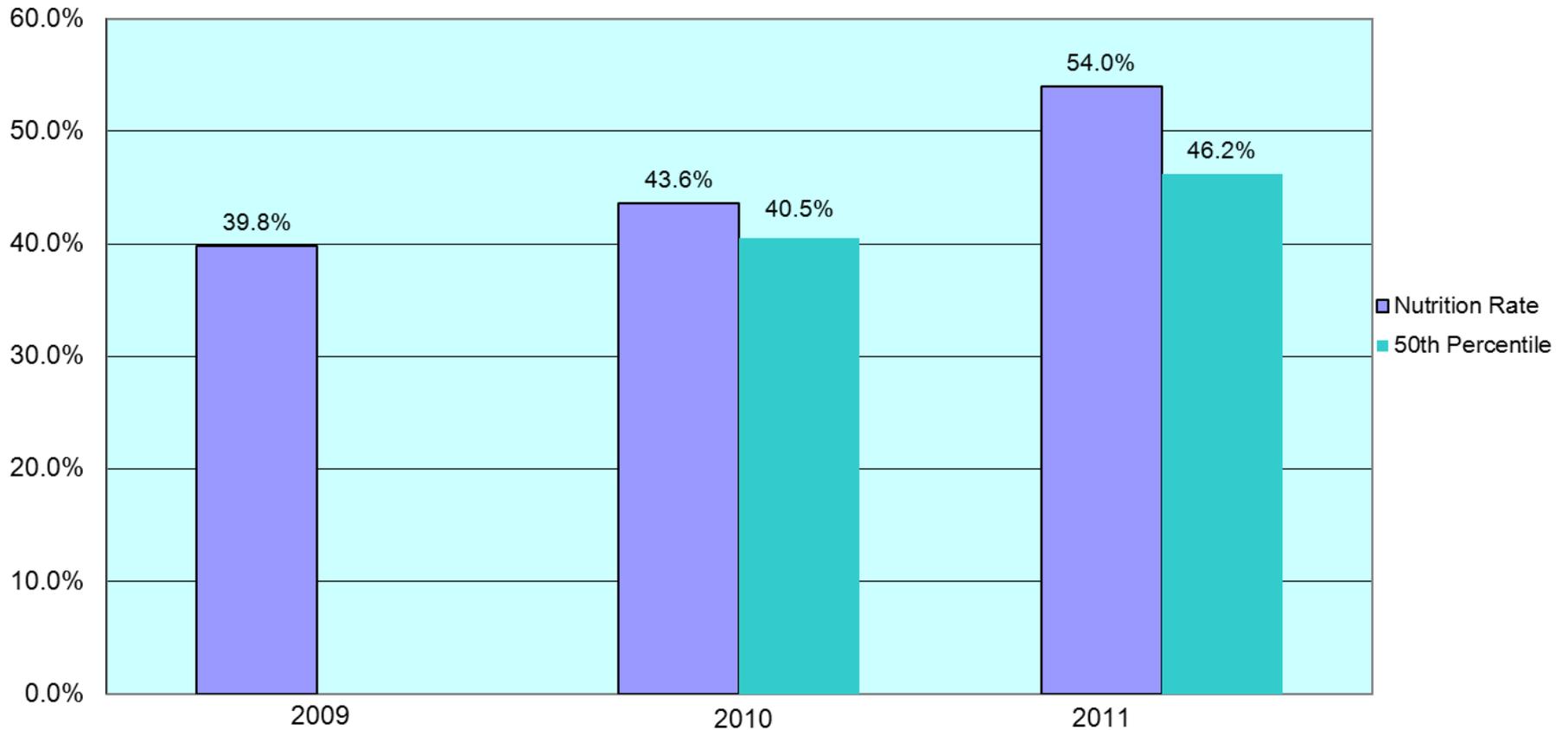
# Plans of Action

- Use of Michigan Quality Improvement Consortium's (MQIC) clinical practice guideline for Childhood Overweight Prevention and Obesity
- Mandated External Quality Review performance improvement project on “Childhood Obesity”
- The plans are now engaged to develop a collaborative addressing obesity through their Quality Improvement directors committee

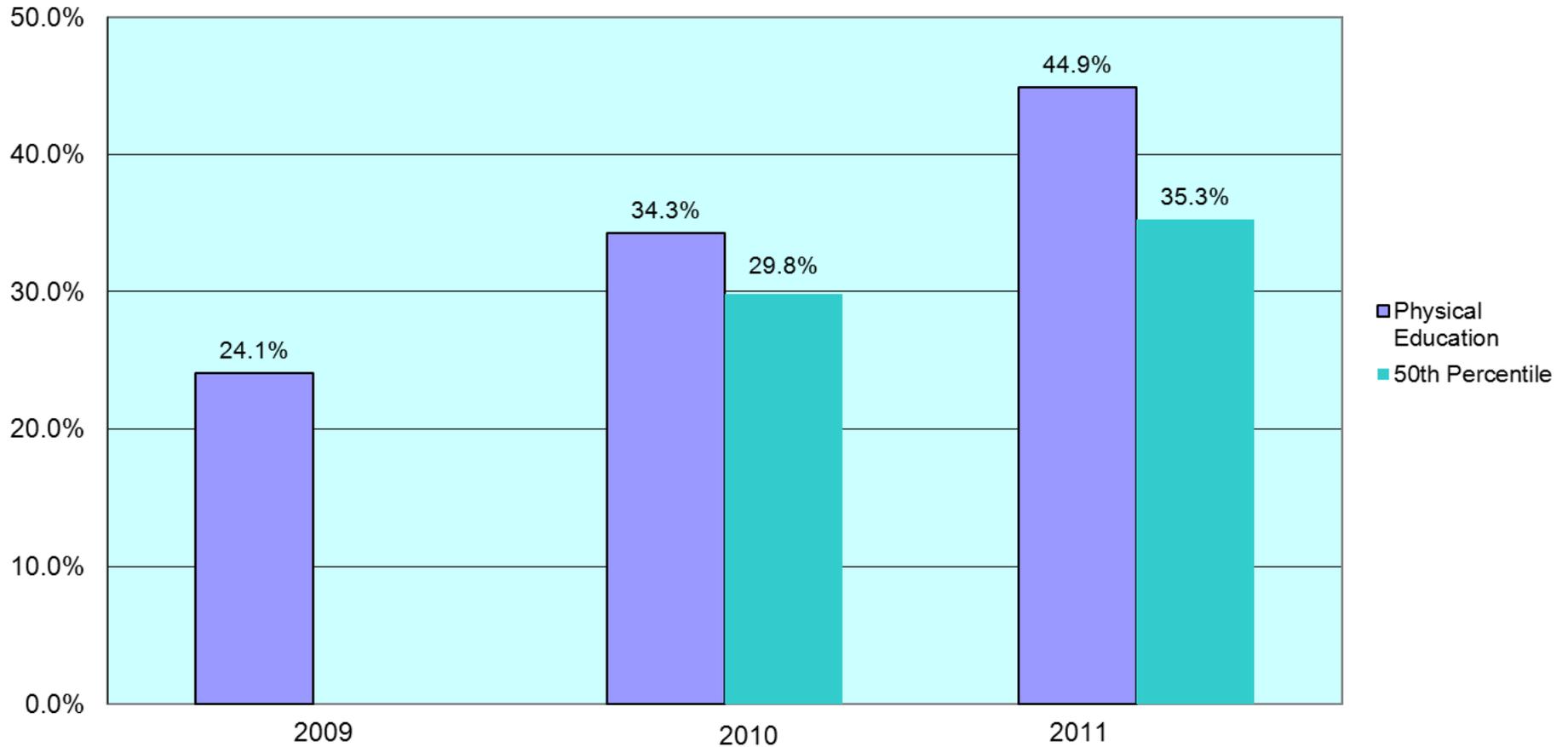
# Michigan Medicaid HEDIS Child BMI - Total



# Michigan Medicaid HEDIS Counseling for Nutrition - Total



# Michigan Medicaid HEDIS Counseling for Physical Activity - Total



# Questions

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# Contact Information

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