

# Using Data to Improve Asthma Control: Asthma Quality Measures

#### Center for Medicaid and CHIP Services (CMCS) Improving Asthma Control Learning Collaborative: Webinar #2

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# **Housekeeping Instructions**



## **Webinar Logistics**

#### Mute phone, unless speaking

- Q&A
- Chat

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| Ask: All Panelists   |          |
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# Agenda

- Welcome and introductions
- Use of data in asthma control quality improvement initiatives
- State panel discussion
- Q&A



### CMCS's Improving Asthma Control Learning Collaborative

### Objectives

- Support state Medicaid agencies' efforts to reduce the impact of asthma among Medicaid and CHIP beneficiaries
- Expand state Medicaid agencies' knowledge of evidence-based asthma interventions
- Discuss the importance of using data-driven approaches to focus asthma improvement efforts
- Learn from states' experiences implementing asthma interventions



# Using Data to Improve Asthma Control: Asthma Quality Measures

Natasha Reese-McLaughlin, MPP Health Researcher Mathematica



## **Poll Question #1**

### Which type of organization do you represent?

- a) Medicaid agency
- b) Department of public health
- c) Other state or local agency
- d) Health plan
- e) Health care provider
- f) Community asthma program
- g) Other



How do you currently use data in your asthma program? Select all that apply.

- a) Use data to target high-risk individuals or identify areas of need
- b) Use data to monitor health outcomes
- c) Use data to assess return on investment (ROI)
- d) Collect data but do not use data to track results
- e) Other

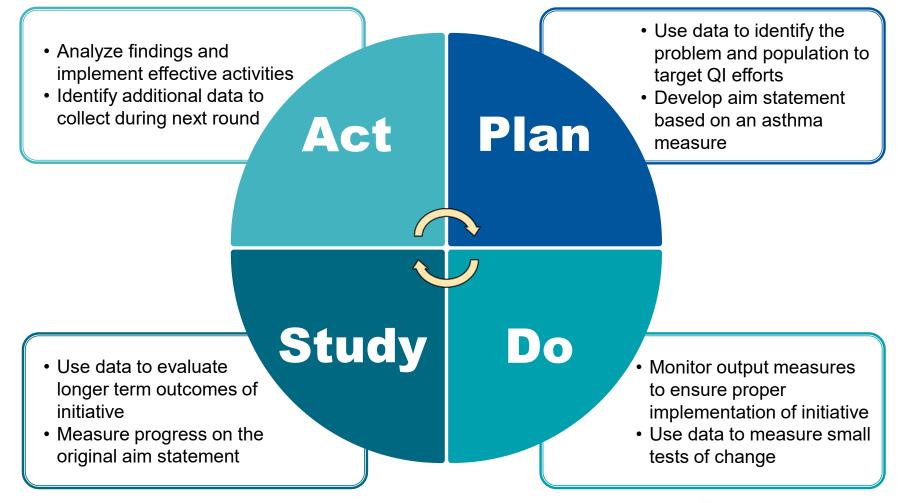


# **Use of Data in Quality Improvement**

- Quality improvement (QI) is initiated and sustained with data and effective quality measures.
- Analysis of data can answer key questions, such as:
  - How are we performing on asthma care?
  - What should the goal and aim of the QI initiative be?
  - Which factors or populations should we focus on to drive improvement?
  - Is the QI initiative being implemented as intended?
  - How successful was the QI initiative?

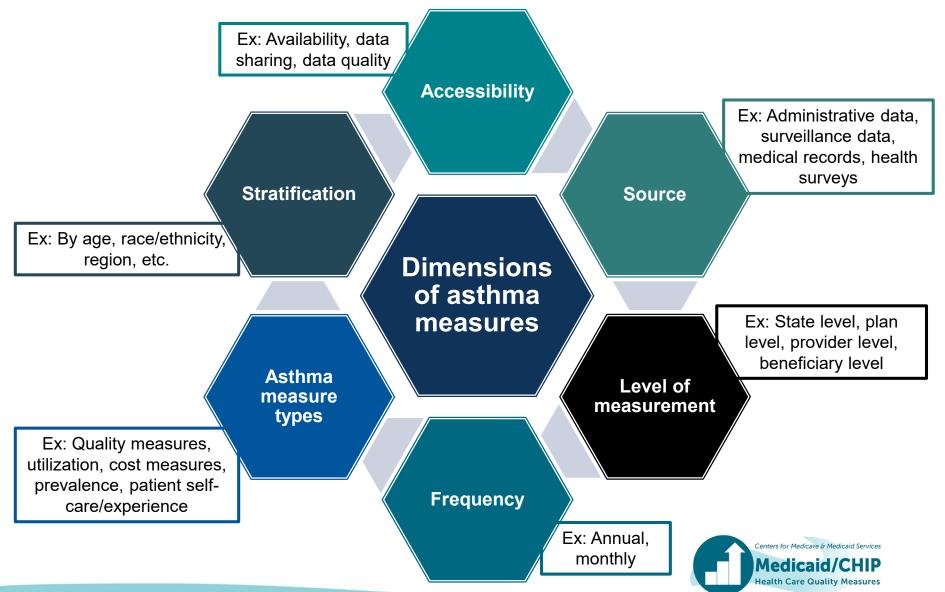


# **Use of Data During QI Lifecycle**

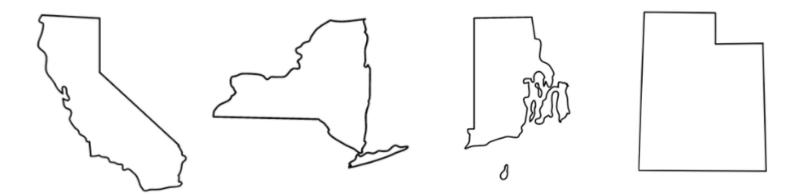




## **Considerations for Selecting Asthma Measures**



# **State Panel Discussion**





# Introductions

#### California



Ashley Kissinger Program Manager CA Department of Public Health

#### New York



**Ryan Ashe** Director of Value Based Payment & Healthcare Innovation NYS Department of Health



**Stephanie Mack** Population Health Data Manager NYS Department of Health

#### **Rhode Island**



**Dr. Jerry Fingerut** Associate Medical Director RI Executive Office of Health & Human Services



**Julian Rodríguez-Drix** Asthma Control Program Manager RI Department of Health

#### Utah



Holly Uphold Epidemiologist UT Department of Health

# What asthma measures are you using to drive and demonstrate improvement?

Ashley Kissinger California DPH Ryan Ashe & Stephanie Mack New York DOH Dr. Jerry Fingerut & Julian Rodríguez-Drix Rhode Island EOHHS & DOH

Holly Uphold Utah DPH



# What were some challenges your program faced with obtaining and using asthma data for quality improvement?

# How did you overcome these challenges?

Ryan Ashe & Stephanie Mack New York DOH

Ashley Kissinger California DPH Dr. Jerry Fingerut & Julian Rodríguez-Drix Rhode Island EOHHS & DOH



# What tips can you share for identifying, selecting, and using asthma measures?

Holly Uphold Utah DPH Dr. Jerry Fingerut & Julian Rodríguez-Drix Rhode Island EOHHS & DOH

Ryan Ashe & Stephanie Mack New York DOH

Ashley Kissinger California DPH



# How do you stratify the data in order to target interventions, address disparities, or monitor impact?

Ashley Kissinger California DPH Holly Uphold Utah DPH



# If you used benchmarks, how did you choose them?

# If your asthma program has a performance target, how did you set that target?

Ryan Ashe & Stephanie Mack New York DOH



 To submit a written comment, click on the "Q&A" pod and submit your question in the text box provided.
Please select All Panelists in the "Ask:" field when submitting your question or comment.

 Please note, your comments can only be seen by our presentation team and are not viewable by other attendees.



# Wrap Up



# **Asthma Quality Measures Resources**

- CMS Core Set of Children and Adult Health Care Quality Measures: <u>https://www.medicaid.gov/medicaid/quality-of-care/performance-measurement/adult-and-child-health-care-quality-measures/index.html</u>
  - Each year CMCS publishes sets of core measures assessing the quality of care and health outcomes for adults participating in Medicaid and children enrolled in Medicaid and CHIP. The Core Sets include several measures related to asthma care (AMR-CH/AD, PQI05-AD, PQI 15-AD).
- HCUPnet: <u>http://hcupnet.ahrq.gov/</u>
  - This website allows users to select national or state-level statistics, based on conditions and procedures. Users can compare types of patients and hospitals. Statistics are based on data received from statewide hospital discharge data programs.
- **MEPSnet:** <u>http://www.meps.ahrq.gov/mepsweb/data\_stats/meps\_query.jsp</u>
  - This website offers statistics and trends about health care expenditures, utilization of health services, and health insurance coverage, including national and regional health insurance estimates.
- Medicaid Claims, Uses for Asthma Surveillance: <u>https://www.cdc.gov/asthma/data-analysis-guidance/medicaid-claims-data.htm</u>
  - This website provides guidance on how Medicaid claims can be used for asthma surveillance.
- CDC Fastats: <a href="http://www.cdc.gov/nchs/fastats/asthma.htm">http://www.cdc.gov/nchs/fastats/asthma.htm</a>
  - This website provides easy access to asthma statistics and links to specific data sources for more information on national asthma data.



# **Upcoming Learning Collaborative Events**

- Webinar #3: Models of Asthma Care: Successful State Case Studies – December 19, 2019
- Webinar #4: Improving Asthma Control Affinity Group Q&A – January 2020
- Affinity Group Expression of Interest Form posted January 2020

To listen to the recording or view the slides from the introductory asthma control webinar (Webinar #1), please visit: <u>https://www.medicaid.gov/medicaid/quality-of-care/improvement-initiatives/asthma/index.html</u>



#### Contact for Improving Asthma Control Learning Collaborative

For questions related to the Improving Asthma Control Learning Collaborative, please submit your questions to the TA mailbox at:

MACQualityImprovement@mathematica-mpr.com



# Thank you for participating in the webinar.

# Please complete the evaluation as you exit the webinar.



# **California DPH: Example Measures and Phases**

|     | Baseline data for patients/clients who receive asthma SME |        |           |             |                 |             |            |              |               |               |                         |               |              |  |
|-----|---|--------|-----------|-------------|-----------------|-------------|------------|--------------|---------------|---------------|-------------------------|---------------|--------------|--|
|     |   |        |           |             |                 |             |            |              |               |               | Action                  |               |              |  |
|     | Demographics  |        |           | Smoking     | PCP             | Asthma      | control    | Medicat      | tion use      | plan          | Health care utilization |               |              |  |
| ID* | Age of  | Gender | Race/     | Language(s) | Smokes or lives | Has         | Has poorly | Scored <19   | Number of     | Number of     | Had written             | Number of     | Number of    |  |
|     | patient/  |        | ethnicity | spoken      | with smoker(s)  | primary     | controlled | on asthma    | controller    | rescue        | asthma                  | asthma-       | asthma-      |  |
|     | client  |        |           |             | (client         | care        | asthma at  | control test | medication    | (reliever)    | action plan             | related       | related ED   |  |
|     |   |        |           |             | smokes/client   | provider at | enrollment | prior to     | refills in 12 | medication    | prior to                | hospitalizati | visits in 12 |  |
|     |   |        |           |             | lives with      | enrollment  |            | enrollment   | months prior  | refills in 12 | enrollment              | ons in 12     | months prior |  |
|     |   |        |           |             | smoker(s)       |             |            |              | to            | months prior  |                         | months prior  | to           |  |
|     |   |        |           |             |                 |             |            |              | enrollment    | to            |                         | to            | enrollment   |  |
|     |   |        |           |             |                 |             |            |              |               | enrollment    |                         | enrollment    |              |  |

| 6-month follow-up data for patients/clients who receive asthma SME |          |           |                  |            |              |              |                |            |                |              |              |            |                         |            |             |
|--|----------|-----------|------------------|------------|--------------|--------------|----------------|------------|----------------|--------------|--------------|------------|-------------------------|------------|-------------|
|  |          | Referrals |                  |            | Skills and   | knowledge    |                |            |                |              |              | Action     | on                      |            |             |
|  |          |           |                  |            |              |              | Asthma control |            | Medication use |              |              | plan       | Health care utilization |            |             |
| D*   | Number   | Referred  | Which asthma     | Referred   | Successfully | How were     | Self-          | Scored     | Self-          | Number of    | Number of    | Had        | Number                  | Number     | Self-       |
|  | of       | for       | services? (e.g., | to smoking | demonstrate  | asthma       | reported that  | <19 on     | reported       | controller   | rescue       | written    | of                      | of         | reported    |
|  | asthma   | additiona | asthma           | cessation  | d basic      | skills and   | asthma is      | asthma     | improved       | medication   | (reliever)   | asthma     | asthma-                 | asthma-    | reduction   |
|  | SME      | l asthma  | management       | resources  | asthma       | knowledge    | "well-         | control    | controller     | refills in 6 | medicatio    | action     | related                 | related    | in missed   |
|  | sessions | services  | education,       | (client    | knowledge    | assessed?    | controlled"    | test after | medication     | months       | n refills in | plan       | hospitaliz              | ED visits  | school or   |
|  | attended |           | home visit,      | referred/  | and skills   | (e.g., test, | one month      | interventi | adherence      | after        | 6 months     | after      | ations in               | in 6       | work days   |
|  |          |           | healthy          | family     |              | questionnair | or more        | on         | after          | interventio  | after        | interventi | 6 months                | months     | after       |
|  |          |           | housing, PCP)    | member     |              | e,           | after          |            | interventio    | n            | interventio  | on         | after                   | after      | interventio |
|  |          |           |                  | referred)  |              | demonstrati  | intervention   |            | n              |              | n            |            | interventi              | interventi | n           |
|  |          |           |                  |            |              | on, etc.)    |                |            |                |              |              |            | on                      | on         |             |

|     | 12-month follow-up data for patients/clients who receive asthma SME |                |                     |                       |                    |                         |                    |                 |                  |  |  |  |  |  |
|-----|---|----------------|---------------------|-----------------------|--------------------|-------------------------|--------------------|-----------------|------------------|--|--|--|--|--|
|     | Asthma co   | ontrol         |                     | Medication use        | Action plan        | Health care utilization |                    |                 |                  |  |  |  |  |  |
| ID* | Self-reported that  | Scored <19 on  | Self-reported       | Number of             | Number of rescue   | Had written             | Number of          | Number of       | Self-reported    |  |  |  |  |  |
|     | asthma is "well-  | asthma control | improved controller | controller            | (reliever)         | asthma action           | asthma-related     | asthma-related  | reduction in     |  |  |  |  |  |
|     | controlled" 12 months   | test after     | medication          | medication refills in | medication refills | plan after              | hospitalizations   | ED visits in 12 | missed school or |  |  |  |  |  |
|     | after intervention  | intervention   | adherence after     | 12 months after       | in 12 months       | intervention            | in 12 months       | months after    | work days after  |  |  |  |  |  |
|     |   |                | intervention        | intervention          | after intervention |                         | after intervention | intervention    | intervention     |  |  |  |  |  |
|     |   |                |                     |                       |                    |                         |                    |                 |                  |  |  |  |  |  |
|     |   |                |                     |                       |                    |                         |                    |                 |                  |  |  |  |  |  |