

**ALTCS E/PD Contractor Performance Measures for CYE 2014**

Measure	New Measures? (Y/N)	Administrative (A) or Hybrid (H)?	MPS	Goal	Methodology	Comments
Inpatient Utilization (days/1,000 member months)	Y	A	480	430	HEDIS - IPU	The PM rate will be reflective of an aggregate rate of days per 1,000 member months (ages 20+).
ED Utilization (visits/1,000 member months)	Y	A	725	600	HEDIS - AMB (Ambulatory Care)	Only the ED visit portion of the methodology will be utilized for PM evaluation. The PM rate will be reflective of an aggregate rate of visits per 1,000 member months (ages 20+).
Readmissions within 30 days of discharge	Y	A	0.91	0.81	Adult Core*	The average adjusted probability will serve as the reported PM rate. The PM rate will be reflective of an aggregate rate for all age groups included in the measure.
Follow-up After Hospitalization within 7 Days	Y	A	50%	80%	Adult Core <sup>(1)</sup>	This measure will be for both mental health and physical health discharge diagnoses. The PM rate will be reflective of an aggregate rate for all hospitalizations.
Follow-up After Hospitalization within 30 Days	Y	A	70%	90%	Adult Core <sup>(1)</sup>	This measure will be for both mental health and physical health discharge diagnoses. The PM rate will be reflective of an aggregate rate for all hospitalizations.
<i>Comprehensive Diabetes Management:</i>						
-- HbA1c Testing	N	H	83%	91%	Adult Core	Intentionally left blank.
-- LDL-C Screening	N	H	75%	91%	Adult Core	Intentionally left blank.
-- Eye Exam	N	H	60%	68%	HEDIS	Intentionally left blank.
Diabetes Admissions, short-term complications	Y	A	TBD	TBD	Adult Core	This rate will be calculated on an annual basis; there is no continuous enrollment criteria. The PM rate will be reflective of an aggregate rate for all age groups included in the measure.
<i>Flu Shots for Adults</i>						
Ages 50-64	Y*	H	55%	80%	AHCCCS	PM rate will be reflective of the number of members within the age group that received a flu shot during the study period. AHCCCS will utilize administrative and ASIS data and will then send a sample file to Contractors for any members included in the sample that do not have a record.

Ages 65+	Y*	H	60%	80%	AHCCCS	PM rate will be reflective of the number of members within the age group that received a flu shot during the study period. AHCCCS will utilize administrative and ASIIS data and will then send a sample file to Contractors for any members included in the sample that do not have a record.
Chronic obstructive pulmonary disease admissions	Y	A	TBD	TBD	Adult Core	This rate will be calculated on an annual basis; there is no continuous enrollment criteria. The PM rate will be reflective of an aggregate rate for all age groups included in the measure.
Congestive heart failure admissions	Y	A	TBD	TBD	Adult Core	This rate will be calculated on an annual basis; there is no continuous enrollment criteria. The PM rate will be reflective of an aggregate rate for all age groups included in the measure.
EPSDT Dental Participation	N	A	46%	56%	CMS 416 data will be used (Line 12.a./Line 1.b.)	Intentionally left blank.
EPSDT Participation	N	A	68%	80%	CMS 416 will be used (Line 10)	Intentionally left blank.
ADL Maintenance/Improvement (Functional Status Assessment)	Y	H	<b>PHASED IMPLEMENTATION - TABLED FOR CYE 14</b>			
Screening for Clinical Depression and Follow-Up Plan	Y	A	<b>PHASED IMPLEMENTATION - TABLED FOR CYE 14</b>			
Advance Directives	Y*	H	55%	75%	AHCCCS	This measure is in place to sustain the success of the Advance Directive PIP. The PM methodology mirrors the methodology used for the PIP.
Use of High-Risk Medications in the Elderly	Y	H	<b>PHASED IMPLEMENTATION - TABLED FOR CYE 14</b>			
Medication reconciliation post discharge	Y	A	<b>PHASED IMPLEMENTATION - TABLED FOR CYE 14</b>			
HCBS Member Satisfaction Survey	Y	n/a	This survey is currently being developed. Results will not be used as a PM rate; rather, AHCCCS will meet with contractors following receipt of survey results to discuss and plan future interventions, which may include opportunities to sustain positive feedback or Corrective Action Plans in areas of lower satisfaction.			
CAHPS Health Plan Survey v 4.0 - Adult questionnaire	Y	n/a	A CAHPS survey is not planned for the ALTCS E/PD population at this time. AHCCCS will continue to monitor national movement for LTSS satisfaction surveys and reserves the right to implement a CAHPS or CAHPS-like survey at a later date.			

\* Based on information from CMS, there are no standardized risk adjustment tables for Medicaid. AHCCCS is finalizing the methodology for this measure and will release it soon. The goal for the adult measure is to align as closely as possible with the NCQA risk adjustment tables as long as they are reflective of/meaningful to the population served.

(1) The adult core methodology is specifically for Follow-Up After Hospitalizations for Mental Illness. AHCCCS has broadened this measure to focus on follow-up after all hospitalization discharges. We will not exclude any hospitalizations when running the measure; however, data will be made available specifically related to physical health vs. mental health follow-up.