

Nevada Quality Strategy

Division of Health Care Financing and Policy

2014-2015 Goals and Objectives

State of Nevada
Division of Health Care Financing and Policy
Quality Assessment and Performance Improvement Strategy (Quality Strategy)
Goals and Objectives Results for FY 2014-2015

Goal 1: Improve the health and wellness of Nevada children by increasing the use of preventive services, thereby modifying health care use patterns for the population.						
Objective 1.1: Increase children's and adolescents' access to PCPs by 10 percent.						
	HPN 2014	QISMC Goal	HPN 2015	AGP 2014	QISMC Goal	AGP 2015
Medicaid:						
Children's Access to PCP (12-24 months)	91.73%	93.70%	91.42%	93.58%	95.36%	91.14%
Children's Access to PCP (25 months - 6 years)	78.58%	82.44%	79.21%	83.40%	86.16%	81.29%
Children's Access to PCP (7-11 years)	82.35%	84.06%	83.88%	84.06%	86.16%	85.47%
Adolescents' Access to PCP (12-19 years)	78.37%	80.94%	81.05%	80.97%	83.27%	81.76%
Nevada Check Up:						
Children's Access to PCP (12-24 months)	95.08%	97.26%	94.70%	98.85%	99.99%	95.83%
Children's Access to PCP (25 months - 6 years)	91.39%	93.57%	87.20%	94.11%	95.56%	90.48%
Children's Access to PCP (7-11 years)	94.88%	95.46%	93.83%	97.25%	97.35%	92.62%
Adolescents' Access to PCP (12-19 years)	91.49%	91.82%	90.79%	93.66%	93.97%	92.18%
Objective 1.2: Increase well-child visits (0 - 15 Months) by 10 percent.						
	HPN 2014	QISMC Goal	HPN 2015	AGP 2014	QISMC Goal	AGP 2015
Medicaid:						
Well-Child Visits 0 - 15 Months of Life	54.50%	56.21%	51.58%	53.47%	60.21%	50.58%
Nevada Check Up:						
Well-Child Visits 0 - 15 Months of Life	63.01%	68.50%	60.00%	54.05%	56.15%	70.37%
Objective 1.3: Increase well-child visits (3 - 6 Years) by 10 percent.						
	HPN 2014	QISMC Goal	HPN 2015	AGP 2014	QISMC Goal	AGP 2015
Medicaid:						
Well-Child Visits 3 - 6 Years of Life	54.74%	61.68%	58.15%	63.08%	68.84%	65.05%
Nevada Check Up:						
Well-Child Visits 3 - 6 Years of Life	73.72%	72.41%	71.95%	78.74%	80.94%	71.30%
Objective 1.4: Increase the prevalence of blood lead testing for children 1-2 years of age by 10 percent.						
	HPN 2014	QISMC Goal	HPN 2015	AGP 2014	QISMC Goal	AGP 2015
Medicaid:						
Lead Screening in Children	37.23%	39.12%	40.88%	34.26%	41.04%	35.88%
Nevada Check Up:						
Lead Screening in Children	55.24%	55.48%	42.75%	50.44%	54.56%	50.91%
Objective 1.5: Decrease avoidable emergency room visits by 10 percent.*						
	HPN 2014	QISMC Goal	HPN 2015	AGP 2014	QISMC Goal	AGP 2015
Medicaid:						
Avoidable Emergency Room Visit Rate*	42.90%	34.02%	27.91%	39.10%	37.26%	33.75%
Nevada Check Up:						
Avoidable Emergency Room Visit Rate*	41.70%	32.13%	24.92%	37.50%	35.19%	34.84%

*Lower rates are indicative of better performance for this measure.

State of Nevada
 Division of Health Care Financing and Policy
Quality Assessment and Performance Improvement Strategy (Quality Strategy)
 Goals and Objectives Results for FY 2014-2015

Goal 2:	Increase use of evidence-based preventive treatment practices for Medicaid members with chronic conditions.					
Objective 2.1:	Increase rate of HbA1c testing for members with diabetes by 10 percent.					
	HPN 2014	QISM Goal	HPN 2015	AGP 2014	QISM Goal	AGP 2015
Diabetes Care - HbA1c Testing	69.59%	72.98%	77.13%	73.99%	71.88%	69.84%
Objective 2.2:	Increase rate of monitoring for nephropathy for members with diabetes by 10 percent.					
	HPN 2014	QISM Goal	HPN 2015	AGP 2014	QISM Goal	AGP 2015
Diabetes Care - Nephropathy	72.75%	75.22%	73.24%	67.29%	67.59%	67.52%
Goal 3:	Reduce and/or eliminate health care disparities for Medicaid and Nevada Check Up recipients.					
Objective 3.1:	Ensure that health plans develop a cultural competency plan, which details the health plans' goals, objectives and processes for reducing and/or eliminating racial or ethnic disparities that negatively impact health care.					
	HPN 2014	HPN 2015	AGP 2014	AGP 2015		
Plan Developed?	Yes	Yes	Yes	Yes		
Objective 3.2:	Stratify data for performance measures and avoidable emergency room utilization by race and ethnicity to determine where disparities exist.					
	HPN 2014	HPN 2015	AGP 2014	AGP 2015		
Medicaid: Stratified by Race and Ethnicity						
Performance Measures	Yes	Yes	Yes	Yes		
Avoidable Emergency Room Visits	Yes	Yes	Yes	Yes		
Nevada Check Up: Stratified by Race & Ethnicity						
Performance Measures	Yes	Yes	Yes	Yes		
Avoidable Emergency Room Visits	Yes	Yes	Yes	Yes		
Objective 3.3:	Ensure that health plans submit an annual evaluation of the cultural competency program (CCP) to DHCFP. Health plans must receive 100 percent <i>Met</i> compliance score for all of the criteria listed in the MCO contract for CCP development, maintenance, and evaluation.					
	HPN 2014	HPN 2015	AGP 2014	AGP 2015		
CCP Evaluation Submitted?	Yes	Yes	Yes	Yes		
MCO Fully Compliant with all CCP Provisions?	Yes	Yes	Yes	Yes		
Goal 4:	Improve the health and wellness of new mothers and infants and increase new-mother education about family planning and newborn health and wellness.					
Objective 4.1:	Increase the rate of postpartum visits by 10 percent.					
	HPN 2014	QISM Goal	HPN 2015	AGP 2014	QISM Goal	AGP 2015
Postpartum Care	57.66%	68.50%	51.58%	59.22%	65.62%	50.12%
HPN - Health Plan of Nevada AGP - Amerigroup Nevada, Inc. Rates in green have met or exceeded the QISM goal. QISM goals were set based on 2013 rates.						

2016 MCO HEDIS Measures

Required HEDIS Measures	Medicaid	Check-Up
Childhood Immunization Status— Combos 2–10 (CIS)	X	X
Lead Screening in Children (LSC)	X	X
Children’s and Adolescents’ Access to Primary Care Practitioners (CAP)	X	X
Well-Child Visits in the First 15 Months of Life (W15)	X	X
Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life (W34)	X	X
Adolescent Well-Care Visits (AWC)	X	X
Annual Dental Visit (ADV)	X	X
Mental Health Utilization— Percentage of Members Receiving Inpatient, Day/Night Care, and Ambulatory Services (MPT)	X	X
Follow-Up After Hospitalization for Mental Illness (FUH)	X	X

2016 MCO HEDIS Measures

Required HEDIS Measures	Medicaid	Check-Up
Medication Management for People with Asthma (MMA)	X	X
Use of Multiple Concurrent Antipsychotics in Children and Adolescents (APC)	X	X
Follow-Up Care for Children Prescribed Attention-Deficit/Hyperactivity (ADHD) Medication (ADD)	X	X
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC)	X	X
Ambulatory Care (AMB)	X	X
Immunizations for Adolescents (IMA)	X	X
Human Papillomavirus Vaccine for Female Adolescents (HPV)	X	X

2016 MCO HEDIS Measures

Required HEDIS Measures	Medicaid	Check-Up
Comprehensive Diabetes Care (CDC)	X	
Weeks of Pregnancy at the Time of Enrollment (WOP)	X	
Timeliness of Prenatal Care (PPC)	X	
Postpartum Care (PPC)	X	
Frequency of Ongoing Prenatal Care (FPC)	X	