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## Medicaid Health Plan Report Card

Questions and Answers

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### Report Card Location

#### 1. Where will the report card be posted?

The report card will be posted on the following website: [www.floridahealthfinder.gov](http://www.floridahealthfinder.gov)

In addition, links to the report card will be placed on the following websites:

- Choice Counseling website: [www.flmedicaidmanagedcare.com](http://www.flmedicaidmanagedcare.com), and
- Agency for Health Care Administration website: [www.ahca.myflorida.com/Medicaid](http://www.ahca.myflorida.com/Medicaid).

### Methodology

#### 2. What are HEDIS measures?

The Healthcare Effectiveness Data and Information Set (HEDIS) is a tool used by more than 90 percent of America's health plans to measure performance on important dimensions of care and service. Altogether, HEDIS consists of 81 measures across 5 domains of care. Because so many plans collect HEDIS data, and because the measures are so specifically defined, HEDIS makes it possible to compare the performance of health plans on an "apples-to-apples" basis. For more information on HEDIS and Performance Measurement, please visit the National Committee for Quality Assurance (NCQA) website at: <http://www.ncqa.org/HEDISQualityMeasurement.aspx>

#### 3. What is the Agency's methodology for assigning stars to each category?

Each plans' individual HEDIS measure scores are compared against the national means and percentiles of all Medicaid health plans. Where a score falls relative to the percentile rates determines the number of stars for that particular measure. For example, if a plan's score for Adolescent Well Care is 66%, and the 50<sup>th</sup> percentile rate is 63%, then the plan would have a rating of 5 stars for this measure because its rate is above the 50<sup>th</sup> percentile rate.

Next, an average of all stars for the individual measures that comprise a performance measure category is calculated. The ratings are rounded down. For example, if two out of six individual measures are each two stars and four of the six are each three stars, the



average would be a two-star rating ( $16 \div 6 = 2.6$ ).

#### **4. How do plans obtain the national means and percentiles?**

The Agency sends the national Medicaid means and percentiles to health plans each year. If you are a Medicaid health plan and need another copy of these data, please contact your plan manager.

### **Performance Measures**

#### **5. What are the performance measure categories?**

The performance measure categories are:

- Pregnancy-related Care;
- Keeping Kids Healthy;
- Children's Dental Care;
- Keeping Adults Healthy;
- Living with Illness; and,
- Mental Health Care.

#### **6. Will Diabetes: LDL Screening and Diabetes: LDL-C Control continue to be reported?**

These two individual performance measures will be included in this first report card in 2015 since they were reported in CY 2013, but may not be required in 2016 (Year 2 of the report card). Further information on these measures will be provided to the plans.

#### **7. Will HIV/AIDS performance measures be included?**

The Agency requires the plans to report on several HIV/AIDS measures and the results are posted on the Agency's Florida Medicaid Quality in Managed Care webpage. The Agency would like to add HIV/AIDS-related performance measures to the report card in the future; however, at present, there are no HEDIS measures related to HIV/AIDS so there are no national benchmarks against which we can compare Florida Medicaid plans' performance.

#### **8. Will additional dental performance measures be included?**

The Agency would like to add additional dental performance measures to the report card in the future; however, at present, the HEDIS Annual Dental Visit is the only dental-related measure that can be compared to national data on Medicaid plan performance. The Agency will continue to monitor the MMA plans' annual performance on three other dental performance measures (Preventive Dental Services, Dental Treatment Services, and Sealants), but they will likely not be included in the report card until they can be compared to national data.

## **Verification of Data**

### **9. Since health plans self-report, who oversees the accuracy of the ratings?**

The Agency requires that health plans have a National Committee for Quality Assurance (NCQA)-certified HEDIS auditor review and certify their HEDIS and other performance measures. NCQA licenses organizations and certifies selected employees or contractees of licensed organizations to conduct audits of states' HEDIS measure data using NCQA's standardized audit methodology. The auditor looks at how the plans' systems are configured, how medical reviews are performed and ensures that the plans' algorithms for calculating scores meet approved specifications. The audit adds a higher degree of integrity to HEDIS data, and enables managed care plans to provide consumers and purchasers with consistent and comparable HEDIS reports. In addition, the Agency's External Quality Review Organization (EQRO) validates the health plans' data each year and reviews NCQA audit reports.

## **Health Plans' Performance Measure Data**

### **10. The report card only includes current MMA plans. How do we get access to data for plans that were operating in 2013, but did not continue as MMA plans?**

The Agency has, for a number of years, reported all plans' performance data on the Agency's Florida Medicaid Quality in Managed Care website at: [http://ahca.myflorida.com/Medicaid/quality\\_mc/index.shtml](http://ahca.myflorida.com/Medicaid/quality_mc/index.shtml). Since the report card is consumer-focused, we determined it made sense to only report on plans that are currently available as choices for consumers. Of the 27 health plans under contract with the Agency prior to the implementation of the MMA program, 20 continued as MMA plans.

### **11. Will there also be a report card for LTC plans?**

The Agency is considering developing a report card for LTC plans. There are, however, few established national performance measures for managed long-term care. LTC plans are only required to submit one HEDIS measure, two HEDIS-like measures and other Agency-defined measures which do not have national benchmarks; so the current report card methodology which uses HEDIS measures with national benchmarks would have to be modified.

### **12. Will subcontractors be listed under the health plans or together?**

The health plans are held accountable for their HEDIS scores and ratings, so the data will be reported as the plans' data. Subcontractors will not be listed separately in the report card.

**13. Are new MMA plan members included in the first report card that will be published in 2015?**

Plan members who were previously enrolled in a plan during CY 2013 and who are currently enrolled in a health plan that continued to operate as an MMA plan will be included in the report card published in 2015, as long as the plan members meet the standards and criteria for continuous enrollment.

**14. If a plan in 2013 was operating in a particular county but isn't operating in that county anymore under MMA, will the plan still be listed in that county?**

No, plans are only listed in counties where they are currently operating.

**15. Does this first report card include the recent data after implementation of MMA?**

No. The first report card that will be published in early 2015 is based on performance measure data for calendar year 2013. MMA was implemented between May and August 2014, so this report card will not include MMA data.

**16. Will performance measures for Medicare and Commercial health plans continue to be reported on Florida Health Finder using 1-3 stars?**

No. Medicare and Commercial health plans will switch to a 5 star rating scale beginning in 2015 using HEDIS measures compared against national means and percentiles for all Medicare and Commercial health plans.

**17. Is there an option to view a plan's actual scores?**

Yes. There is an option to view a plan's scores for each category for each individual performance measure.

**18. Is county-level data available?**

Plans report statewide data to the Agency, so the data for a plan in a particular county will be its statewide data. For example, if Alpha Health Plan is available in Alachua and Bay counties, you will see the same ratings/scores for Alpha in both counties.

**Outcomes**

**19. What happens if a plan scores Poor (2 stars) or Very Poor (1 star) in a performance measure category?**

The MMA contracts include liquidated damages and sanctions related to poor performance on performance measures. Conversely, if plans perform highly on performance measures,

they may be eligible for the Achieved Savings Rebate 1% Incentive.

**20. How will the report card be marketed to consumers?**

Links to the report will be placed on the Choice Counseling and Medicaid websites. In addition, the report card has been presented to various groups, including the Medical Care Advisory Committee and subcommittees and the health plan quality directors.