

MaineCare Value-Based Purchasing
 Accountable Communities
 Quality Measures & Minimum Attainment Level



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Questions? Contact the AC Program Manager at Peter.Kraut@Maine.gov

Measure	Core/Elective/ Monitoring	Measure Definition	Comparison group	Performance Year 2: Minimum attainment (30 th percentile)
<i>At-Risk Populations</i>				
1. Diabetes- HbA1c Control (adult)	Core	Percentage of members ages 18-75 years with diabetes mellitus who had HbA1c < 8.0 %.	HEDIS	41.4%
2. Diabetes- Eye Care	Core	Percentage of members 18-75 years of age with diabetes mellitus who had a retinal eye exam performed within the past 1-2 years.	HEDIS	47.0%
3. Follow-Up After Hospitalization for Mental Illness	Elective	Percentage of discharges for members 6 years of age and older who were hospitalized for treatment of selected mental health disorders and who had an outpatient visit, an intensive outpatient encounter, or partial hospitalization with a mental health practitioner within 7 days of discharge.	Maine non-AC	35.2%
4. a) Initiation of Alcohol and Other Drug Dependence Treatment b) Engagement of Alcohol and Other Drug Dependence	Elective	Percentage of adolescent and adult members with a new episode of alcohol or other drug (AOD) dependence who received: (a) Initiation of AOD treatment (b) Engagement of AOD treatment	HEDIS HEDIS	35.5% 7.6%
5. Asthma- Medication Management (pediatric & adult)	Core	Percentage of members 5-64 years of age who were identified as having persistent asthma and were appropriately prescribed controller medication.	Maine non-AC	84.4%
6. Diabetes- HbA1c Testing (adult)	Elective	Percentage of members 18-75 years of age with diabetes mellitus who had a Hemoglobin A1c test in the measurement year.	HEDIS	83.9%
7. Diabetes- Nephropathy	Elective	Percentage of members 18-75 years of age with diabetes mellitus who received a nephropathy screening test within previous 12 months.	HEDIS	89.1%
8. Use of Spirometry Testing in the Assessment and Diagnosis of	Elective	Members 42 years of age and older with a new (within the measurement year) diagnosis or newly active COPD who	HEDIS	27.0%

Chronic Pulmonary Disease (COPD)		received spirometry testing to confirm the diagnosis. Spirometry testing must occur 730 days prior to or 180 days after the diagnosing event.		
<i>Care Coordination/ Patient Safety</i>				
9. Ambulatory Care- Sensitive Condition Admission- Prevention Quality Chronic Composite (PQ1 #92)	Core	Prevention Quality Indicator (PQI) composite of chronic conditions per 100,000 population, ages 18 years and older.	Maine non-AC	2,283
10. Ambulatory Care- Sensitive Condition Admission- Pediatric Quality Chronic Composite (PD1 #92)	Core	Pediatric Quality Indicators of chronic conditions per 100,000, ages 6-17 years.	Maine non-AC	0.0
11. Non-emergent ED Use	Core	Patients with non-emergent Emergency Department visits based on the diagnoses identified in a Maine ED study. Rate is calculated as members' non-emergent ED visits per 1,000 member months. *	Maine non-AC	0.010
12. Percent of Primary Care Providers Who Successfully Qualify for an EHR Program Incentive Payment	Core	Percent of primary care providers who successfully qualify for either a Medicare or Medicaid EHR payment, out of all primary care providers assigned to the AC Lead Entity's primary care practices.	Reporting	N/A
13. Plan All-Cause Readmission	Core	For members 18 years of age and older, the number of acute inpatient stays during the measurement year that was followed by an acute readmission for any diagnosis within 30 days. *	Maine non-AC	18.9%
14. Use of High-Risk Medications in the Elderly	Elective	Percentage of members 66 years of age and older as of the end of the measurement year who received at least one high-risk medication. *	HEDIS	12.2%
<i>Patient Experience</i>				
15. Clinician & Group (CG) Consumer Assessment of Healthcare Providers and Systems (CAHPS)	Core	For Performance Years 1-2, the Lead Entity will receive two points if all primary care practices in the AC submit survey results in accordance with the instructions and practice level sampling guidelines specified by CAHPS, and zero points for anything else. For Performance Years 3-4, ACs are scored based on national CG CAHPS data.	Reporting	N/A
<i>Preventive Health</i>				

16. Adolescent Well-Care Visit (12-21)	Core	Percentage of members 12-21 years of age who had at least one comprehensive well-care visit with a PCP or an OB/GYN practitioner during the measurement year.	HEDIS	42.1%
17. Developmental Screening-First Three Years of Life	Core	Percentage of members screened for risk of developmental, behavioral, and social delays using a standardized screening tool in the 12 months preceding or on their first, second, or third birthday.	Maine non-AC	4.1%
18. Well-Child Visit, Ages 0-15 Months	Core	Percentage of children who turned 15 months old with 6 or more well child care visits in their first 15 months.	HEDIS	54.5%
19. Well-Child Visit, Ages 3-6	Core	Percentage of children 3-6 years of age who received at least one well-child visit with a PCP during the measurement year.	HEDIS	66.6%
20. Well-Child Visit, Ages 7-11	Core	Percentage of children 7-11 years of age who received at least one well-child visit with a PCP during the measurement year.	Maine non-AC	54.1%
21. Breast Cancer Screening	Elective	Percentage of female members 50-74 years of age who had a mammogram to screen for breast cancer.	HEDIS	53.3%
<i>Monitoring only</i>				
Imaging for Low Back Pain	Monitoring	Percentage of members 18-50 years of age with a primary diagnosis of low back pain who did not have an imaging study within 28 days of the diagnosis. *	HEDIS	29.1%
Cardiovascular Health Screening for People With Schizophrenia or Bipolar Disorder Who Are Prescribed Antipsychotic Medications	Monitoring	Percentage of members 25-64 years of age with schizophrenia or bipolar disorder and prescribed any antipsychotic medication and who received a cardiovascular health screening during the measurement year.	Maine non-AC	44.9%

**A lower rate on these measures indicates better performance*