



WAHBE Spring Quality Meeting

May 25, 2021

Agenda

- Welcome and Introductions
- Goal of Meeting
- Exchange Quality Program
- Areas of Focus
- Next Steps

Goal of Meeting

The Exchange introduced a Spring quality meeting this year to the cadence of quality meetings.

- Opportunity to engage with stakeholders on quality outside of the certification process
- Talk about current framework for quality programs and progress
- Discuss future areas of focus
- Gather feedback about quality program requirements and future developments

Washington Health Benefit Exchange Mission and Objectives

The Washington Health Benefit Exchange seeks to redefine people's experience with health care.

Our mission is to radically improve how Washington residents secure health insurance through innovative and practical solutions, an easy-to-use customer experience, our values of integrity, respect, equity and transparency, and by providing undeniable value to the health care community.

Increase access to affordable health plans

Organize a transparent and accountable insurance market to facilitate consumer choice

Provide an efficient, accurate, and customer-friendly eligibility determination process

Enhance health plan competition on value, price, access, quality, service, and innovation

Washington Health Benefit Exchange's Quality Program

WAHBE's Quality Program is a key component of our mission to improve WA residents' health by ensuring they receive high quality care.

WAHBE is building its quality program on the base requirements for reporting and improving quality outlined in the ACA.

WAHBE's quality program provides transparency and accountability for Exchange market improvement in care delivery, reduced health disparity, and improved health outcomes.

WAHBE advances quality standards through the Guidance for Participation, a key part of the QHP certification requirement, which includes stakeholdering.

WAHBE's Framework for Quality Initiatives

Improve quality and health outcomes, lower costs, and promote health equity

Align with community efforts

Use data and outcomes to measure success and inform quality

Focus on areas of opportunity across the individual market

Provide customers timely quality information

Reduce health disparities and integrate equity lens into all quality work

Align with community efforts

- Ensure that Exchange population is seeing same quality improvement efforts as other markets within the state, maximize impact, and reduce burden on carriers and providers
- Alignment of quality initiatives with payer-led initiatives in the state
 - Washington State Health Care Authority (HCA)
 - Washington Health Alliance
 - Bree Collaborative
- Alignment with quality initiatives nationally
 - NCQA
 - CMS
- Cervical cancer screening is an area of focus for QIS and a focus for the Bree Collaborative
- Race and ethnicity in quality measurements is a focus of the Exchange which aligns with state and national initiatives
 - NCQA proposed changes to stratify HEDIS measures

Use data and outcomes to measure success and inform quality

- Effective measurement is key to improving outcomes. Ensure focus areas and modifications to quality programs are data driven
- Leverage available data submitted to NCQA and CMS (HEDIS and CAHPS)
- Yearly review of plan performance for each measure; compare Exchange data to state and national data benchmarks
 - Identify areas of improvement
 - Increase opportunities to collaborate
- Data allows for targeted interventions
 - Reducing health disparities
- Data exchange allows for more opportunities to examine trends with less data collection
 - Continue exploring data exchange to examine health outcomes and to reduce consumer burden
- The Exchange requires carriers to have two common measures in the QIS due to data on these

Focus on areas of opportunity across the individual market

- While there is significant variation across Exchange carriers in quality, there are also measures where there is overall low-performance across the market.
- Focusing on the same measures across the market allows for cross market comparison, alignment, sharing of best practices, and improvement
- The following three measures were an area of opportunity for all measured carriers. All carriers were below the national 50th percentile in the following measures:
 - Cervical cancer screening
 - Well-child visits in the first 15 months of life (6 or more visits)
 - Plan all-cause readmissions

Provide customers timely quality information

- Share reliable data on quality and value to help customers make informed health insurance selections
- Work with CMS and stakeholders to make continuous improvements to the quality rating system (QRS)
- Continue to explore how to provide consumers with quality information that will enhance their shopping experience
 - Further rating and satisfaction information set forth in section 1311(c) of the ACA

The screenshot shows a web interface for a health insurance plan. A modal window titled "Overall Quality Rating" is displayed, showing a 4-star rating (four blue stars and one grey star). The text explains that ratings are on a scale from 1 to 5 stars based on customer surveys and clinical data. Below this, three categories are listed with their respective star ratings: Medical Care (4 stars), Patient Experience (4 stars), and Insurance Company Service (4 stars). The background shows the "LifeWise" logo and a plan name "LifeWise Cascade B". Other visible text includes "Provider and facility", "Edit", "Quality rating", "Plan metal level", "Bronze", "Primary c", "\$50", "Generic c", "\$32", and "Out-of-p", "\$8,550 Ind".

Overall Quality Rating
★★★★☆

Quality ratings are on a scale from 1 star (lowest rating) to 5 stars (highest rated) and are based on customer surveys as well as clinical data. A plans overall quality rating is based on 3 categories, each with its own star rating:

MEDICAL CARE	★★★★☆
PATIENT EXPERIENCE	★★★★☆
INSURANCE COMPANY SERVICE	★★★★☆

LifeWise
LifeWise Health Plan of
LifeWise Cascade B

Provider and facility
Edit

Quality rating
★★★★☆

Plan metal level
Bronze

Primary c
\$50
Generic c
\$32
Out-of-p
\$8,550 Ind

Reduce health disparities and integrate equity lens into all quality work

- The Washington Health Benefit Exchange is committed to advancing health equity and addressing health disparities through quality programs
- WAHBE has measured carrier collection of race and ethnicity data for several years – there is substantial variation across carriers and little change over time.
- Introduced new benchmark for race and ethnicity data collection for MY 2022 and sharing *Washington Healthplanfinder* data
- Data will inform focus areas and/or potential interventions to reduce disparity
 - E.g. preventative service with substantial race disparity
- Working with HCA and other stakeholders on best practices for race and ethnicity data collection

Data collection

**Disparity
measurement**

**Disparity reduction
interventions**

Application of the Framework: Areas of current and near future focus

Reducing health and health care disparities

Effective primary care

Integrated and coordinated behavioral health

Increasing affordability and value

Innovation in care delivery

Discussion and Questions

We want to hear from you.

What are your reactions to the framework or areas of focus? Are there any areas you see missing?

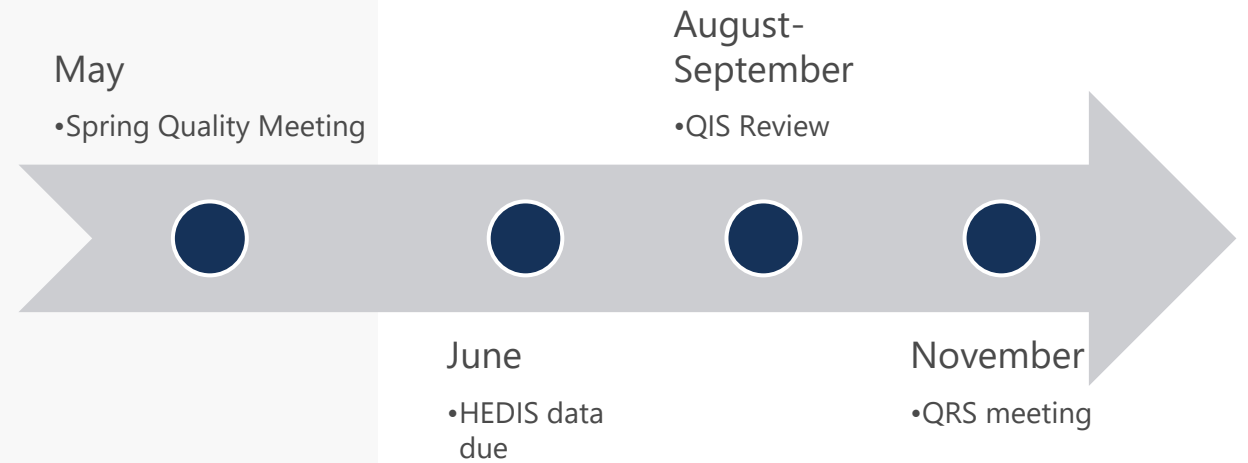
What are your organization's quality priorities?

Do you implement quality initiatives from other markets on the Exchange? How much alignment is there with your other lines of business?

Do you have best practices/findings from quality improvement activities on the Exchange?

Next steps

- Email us with feedback at QHP@wahbexchange.org
- Visit the Plan Certification workgroup page for resources
- Reach out to us with any questions



<https://www.wahbexchange.org/wp-content/uploads/2021/03/WAHBEqualitytimeline2021.pdf>