Evaluation Highlight No.11, April 2015

#### The CHIPRA Quality **Demonstration Grant Program**

In February 2010, the Centers for Medicare & Medicaid Services (CMS) awarded 10 grants, funding 18 States, to improve the quality of health care for children enrolled in Medicaid and the Children's Health Insurance Program (CHIP). Funded by the Children's Health Insurance Program Reauthorization Act of 2009 (CHIPRA), the Quality Demonstration Grant Program aims to identify effective, replicable strategies for enhancing quality of health care for children. With funding from CMS, the Agency for Healthcare Research and Quality (AHRQ) is leading the national evaluation of the program.

The 18 CHIPRA quality demonstration States are implementing 52 projects in fve general categories:

- · Using quality measures to improve child
- health care.

conclude on February 21, 2015. The national evaluation of the grant program started on August 8, 2010, and is expected to be completed by September 8, 2015.

# How are CHIPRA quality demonstration States using quality reports to drive health care improvements for children?

Authors: Grace Anglin and Mynti Hossain

H\]gEvaluation Highlight ]gh\Y%h\]b Ug\f]Ygh\UndfYg\blgXYg\N]dl\j YUbXUbUml\W ÚbX|b| gZfca l\YbU\cbU Y| Ui U\cb cZ\\Y7\|XfYb\gec{y}U\\ \=bg fUbWDfc| fUa FYU h\cf]nU1cb5WicZ&\$\$ f7< =DF5ŁEiU]lm8YacbgfU1cb; fUbhDfc[fUa"% H\YHighlight focuses on how six States are using quality reports to draw attention to State- or practice-level performance on quality measures in order to drive ]a dfcj Ya Yblg]b l\Yei U]lmcZWfYZcf W]`XfYb"

## **KEY MESSAGES**

• Applying yEMC Bnformation tec74t10Eaf()con Feb States indicated that circuplementing a range of State- and practice-level initiatives lgcZMbbYXXXhc la dfcj Yci hWa YgcbUgdYMÚWa YUgi fY'''

- States formed workgroups or held formal discussions to review quality reports k jih głu\_Y\c`XYfgzjbWiXjb[ głu UhW]XlgYfj jb[ U YbVJYgz\YUh d`UbgzUbX` \YUh\ gngha g"H\YgYX]gWgglcbg\YdYXgdi f ]bhYfYghi]b ei U]lmi]a dfcj Ya Ybh fE=LUbXg\UfdYb h\YZcWgcbW]`X\YUh\"
- Practices found reports helpful for identifying QI priorities but less useful for [i]Xb[UbXUgyggb]E=dfcYMg"
- Practices needed technical assistance from the State to understand the quality fYdcflg



WifYzUbXh\Yk Ung]bk\]WZLa]`]YgYldYf]YbWWfY'

HMb cZh\Y% GLLHgdUflyldUflb[]b h\Y7< =DF5 ei U]lmXYa cbglfUflcb i gYXU dcfhcb cZh Yf [fUbhZ bX]b[ lt fYdcfhcb h Y7\] X7cfYGMht 7A G<sup>8</sup> Six of these Głułygi 5 'lg\_lz: 'cf]Xlz=``]bc]gzA UbYzA lzgUWi gyłłgzUbXB cfl\ 7lfc`]bU Ugc' i gYX:ei U]lmfYdcflglic Xf]j YgUllik |XYE=Y cflgfl][i fY%L"5``gll cZh\YgYGUllig i gXXYI |g||b| XUUfffcfYl Ua d'YzA YX|W|XWUa gXUUUbX|a a i b|nU|cbfY| |g|f|YgL hc [YbYfUYfYdcfhgZcfGHJM] Y glU\_Y\c XYfgzgi WUgl\YglU UhW] XlgYfj ]b[ U YbVMgUbX\YUh d'Ubg''A UbYžA UgUWi gYhpžUbXB cfh 7Ufc`]bUUgc i gYX'

Figure 1. How States Used Quality Reports to Drive QI at the State and Practice Levels

**Note:** All six States pursued State-level reporting and quality improvement activities. Maine, North Carolina, and Massachusetts produced practice-level reports from existing State-level data sources; only North Carolina and Maine helped practices use those reports for QI.

these data to develop reports on quality for practices in their States that serve W]'XfYb']b'A YXJWJX'bX'7< =D'H\]g' Highlight describes the reports States produced, how States used the reports to encourage QI at the State and practice levels, and the changes that cWWffYXUg'UfYgi 'H'

H\Y]bZcfa UIcb ]b I\ ]gHighlight comes from semi-structured interviews conducted by the national evaluation IMA ]b gdf]b[ '85% UbX'gdf]b[ '85% ' k ]I\ gU UbQUYU YbUWgZ\YU\ plans, consumer groups, professional associations, and primary care dfUMWg"H\YHighlight also draws on the semi-annual progress reports that GUNgg Va ]IMXIc '7A G]b '85% 8285% Z UbX'85% ""

Hk c'dfYj ]ci g'Evaluation Highlights
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ei U]lma YLbi fYa Ybhk cf\_"H\YÚfgh
Highlight described the technical
and administrative steps States took
to calculate quality measures at the
dfUMJWY'Yj Y"H\YÚZh 'Highlight
outlined how practices and health
systems used data from electronic
\YUh fYWfXgf9< FgLUbX'a Ubi U'
chart reviews to track their own quality
dYfZcfa UbW"

### **Findings**

Quality reports helped spur Statelevel QI activities

Assessing statewide performance. 5 ```
six States used statewide reports to
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flactorial diffaction and the statewide performance. The statewide performance is a statewide performance. The statewide performance is a statewide performance in the statewide performance is a statewide performance. The statewide performance is a statewide performance in the statewide performa

Several States indicated that selecting df]cf]lmiLfyLgk LgX] WhUbXgck when groups new to QI were actively engaged or when a large number of groups were involved in the XYMglcba U\_]b[ 'dfcWgg"Ht ZMY]hLhY the conversation, States included information in State-level reports that coincided with their priorities and Wbhhl H": cf Yl La d YZ: 'cf]XUUbX' Illinois are reporting measures for their ChlhYlgUk \c YUbXZcf YUWA YX]WJX' a UbU YXWIYd Ub"=b UXX]hJcbžVch 'cZ h YgYChHgUbX'A UbYXXj YcdYXg\cfh

Policy and Programmatic Changes	
Alaska	

Practices implemented workf ow changes
Practices reported that concrete
changes came about as a result of
their work with practice facilitators
or their participation in the learning
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B cfl\hata 7Ufc ]bUdfUMJW]a d Ya YbhX\tag{W}behavioral and risk-factor screening for
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# Conclusion

H\Ygl GUYgÑY dYf]YbWk ]l\ i gb[ ' reports to drive improvements in the quality of care for children WbÚfa gdfYj ]ci gÚbX]b[glàUh change requires more than simply producing and disseminating reports cb'ei U]lma YUgi fYg"·7< =DF5 ei U]lmi XYa cbgffUfcb glU \UXfc UMj Ym engage stakeholders at the State and dfUMJWYYj Yghc ZcghYf WUb[Y": cf example, the States used reports on U`W]`XfYb`]b`A YX]W]X`UbX`7< =D` hc YXi WhYU YbWnigHU ž\YUh\d`Ubgž and other stakeholders about the [ Udg]bei U]lmcZWfYZcfW]`XfYb" H\YWbj YfgUljcbgh\Uh[fYk ci hcZ h\YgYY cflg[U Yf]gYhc bYk ei U]lmi monitoring initiatives and policy WUb[Yg"5 hil\YdfUMJWYYjYžfYdcflg k YfYUi gYZ `hcc`Zcf'df]cf]h]n]b[ E= Y cflpžVi hih Ymk YfY`Ygg\YdZI`Zcf`

Lbbygbb[E=Y cflgVyWl gYcZXYUng in claims processing and infrequent fydcfl]b[dYf]cXg"A cfYcj Yfzlc UW]Y Y concrete changes, most practices needed technical assistance from the State to establish a QI process, la d'Ya YbhbYk k cf\_Ûck gžUbXi gY XUUZca '9< FgcfdUdYf WUflgfc lfUW]h YfdYZcfa UbWcj Yfl]a Y"

# **Implications**

## **LEARN MORE**

Additional publications from the CHIPRA Quality Demonstration Grant Program on quality measurement, reporting, and QI are available at http://www.ahrq.gov/chipra/demoeval/.

#### Calculating quality measures

• *Highlight 1:* How are CHIPRA Demonstration States Approaching Practice-Level Quality Measurement and What are They Learning?

#### Developing quality reports

- Reports from States: Results from Massachusetts's Family Focus Groups and Provider Interviews and Maine's Provider Survey on Quality Reports
- State-level quality reports: Illinois CHIPRA Data Workbook, Maine Summary of Pediatric Quality Measures, Florida Performance Measure Reports

#### Encouraging State-level QI

- Implementation Guide 1: Engaging Stakeholders to Improve the Quality of Children's Health Care
- Highlight 4: How the CHIPRA Quality Demonstration Elevated Children on State Health Policy Agendas

#### Encouraging practice-level measurement and QI

- Highlight 5: How Are CHIPRA Quality Demonstration States Encouraging Health Care Providers to Put Quality Measures to Work?
- Manuscript: Nine States' Use of Collaboratives to Improve Children's Health Care Quality in Medicaid and CHIP

Use the tabs and information boxes on the Web page to also:

- Find out about the 52 projects being implemented in the 18 CHIPRA quality demonstration States.
- Get an overview of projects in each of the fve CHIPRA quality demonstration grant categories.
- View other reports that the national evaluation team and the State evaluation teams have produced on specific evaluation topics and questions.
- Learn more about the national evaluation, including its objectives, evaluation design, and methods.
- Sign up for email updates from the national evaluation team.

#### **Endnotes**

- We use the term "national evaluation" to distinguish our work from the activities of evaluators who, under contract to many of the grantees, are assessing the implementation and outcomes of State-level dfc 'YMg'H-Yk cfXf bUhcbUi' gk ci 'Xbch WjbhfdfYhXltc'a YUb hUhci f 'ÜbXjb[ gUf' fYdfYghbH-Hj YcZh YI b]hX'GH-hg UgUk \c'Y'
- &": cfa cfY]bZcfa Uljcb cb lhY7< =DF5 7\]X 7cfYCMzj |glh\hnd.##k k k 'a YXJWJX'[ cj # A YXJWJX!7< =D!Dfc[ fUa !=bZcfa Uljcb# 6mHcd]WJ#E i U]lmt"

#### **Acknowledgments**

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