Impact of Payer Mix on Performance on Specific Quality Measures in an Advanced Primary Care Setting

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Presenter Disclosures

Hannah Sevcik, MPH

The following personal financial relationships with commercial interests relevant to this presentation existed during the past 12 months:

No relationships to disclose
Problem/Gap Analysis

Inefficient Healthcare System
- Delivery of care
- Payment system

Triple Aim
- Improve population health outcomes
- Lower healthcare costs
- Improve quality of care

Previous Research
- Limited high-quality research on success of payment and delivery system reform
Background

• New York State initiatives to improve health of Medicaid population
  • Maimonides Medical Center’s participation in the Delivery System Reform Incentive Payment (DSRIP) program as Community Care of Brooklyn
  • Changing physician behavior in the primary care setting through monetary incentives

• Advanced Primary Care / New York State PCMH program
Research Question

Are primary care practices with a higher proportion of Medicaid patients achieving better performance on process measures?
Project Description

• Data source: NYS PCMH practice scorecard
  • n = 17

• Dependent variable: clinical quality measures
  • 16 process measures (HEDIS)

• Independent variable: payer mix
  • High vs. low Medicaid volume
### Methods:

**Dependent Variable(s)**

<table>
<thead>
<tr>
<th>Prevention</th>
<th>Chronic Disease</th>
<th>Behavioral Health/Substance Use</th>
<th>Appropriate Use</th>
</tr>
</thead>
<tbody>
<tr>
<td>Breast Cancer Screen</td>
<td>Comprehensive Diabetes Care – Eye Exam</td>
<td>Antidepressant Medication Management – Effective Acute Phase Treatment</td>
<td>Use of Imaging Studies for Low Back Pain</td>
</tr>
<tr>
<td>Cervical Cancer Screen</td>
<td>Comprehensive Diabetes Care – HgA1c Test</td>
<td>Antidepressant Medication Management – Continuation Phase Treatment</td>
<td></td>
</tr>
<tr>
<td>Chlamydia Screening in Women (16-20)</td>
<td>Comprehensive Diabetes Care – Nephropathy</td>
<td>Engagement of Alcohol &amp; Other Drug Treatment</td>
<td></td>
</tr>
<tr>
<td>Chlamydia Screening in Women (21-24)</td>
<td>Asthma Medication Management 50%</td>
<td>Initiation of Alcohol and Other Drug Treatment</td>
<td></td>
</tr>
<tr>
<td>Chlamydia Screening in Women (16-24)</td>
<td>Asthma Medication Management 75%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Childhood Immunization</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Methods:
*Sample Practice Characteristics*

- Practice characteristics by payer type
- 50th percentile for Medicaid patient volume
- Practice characteristics by Medicaid category
Methods:
HEDIS Measures

- HEDIS definition
- Comparing mean HEDIS rates between practices with low vs. high Medicaid volume
- Comparison to payer statewide benchmark for HEDIS
Methods:
Mann-Whitney U

Mann-Whitney U Test (*SPSS, Version 25*)

Mean rate differences between high and low volume Medicaid practices

Statistical significance, p < 0.05
# Results:

*Sample Practice Characteristics*

<table>
<thead>
<tr>
<th>Payer Category</th>
<th>Scorecard (#)</th>
<th>Patients (#)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicaid</td>
<td>17</td>
<td>53,131</td>
</tr>
<tr>
<td>Medicare</td>
<td>12</td>
<td>5,670</td>
</tr>
<tr>
<td>Commercial</td>
<td>17</td>
<td>7,312</td>
</tr>
</tbody>
</table>
Results:
*Medicaid Category Practice Characteristics*

<table>
<thead>
<tr>
<th>Medicaid Category</th>
<th>Scorecard (#)</th>
<th>Patients (#)</th>
</tr>
</thead>
<tbody>
<tr>
<td>High Medicaid</td>
<td>8</td>
<td>43,846</td>
</tr>
<tr>
<td>Low Medicaid</td>
<td>9</td>
<td>22,267</td>
</tr>
</tbody>
</table>
Results:

**HEDIS Prevention Measures**

HEDIS Prevention Measure Mean Rate Comparisons

- Breast Cancer Screen
- Cervical Cancer Screen
- Chlamydia Screening in Women (16-20 years)
- Chlamydia Screening in Women (21-24 years)
- Chlamydia Screening in Women (16-24 years)
- Child Immunization
Results:

**HEDIS Chronic Disease Measures**
Results:

HEDIS Behavioral Health/Substance Use Measures

HEDIS Behavioral Health/Substance Use Measure Mean Rate Comparisons
Results:

**HEDIS Appropriate Use Measure**

HEDIS Appropriate Use Measure Mean Rate Comparisons
Results: 
Mann-Whitney U

Significant Results

p = 0.006

Cervical Cancer Screen

Rate (%)

77.8%  50.7%
Discussion/Limitations

- Selection bias
- Confounding factors
- Payer data
- Practice size
- Generalizability
Public Health Implications

Policy Change

- Information sharing & transparency
- Coordination and communication incentives

Future Research

- Differences in payer policy and effects on physician behavior/success in VBP
- Inform policy changes
Conclusion

• Additional data is needed to fully address research question

• Primary care practice process measure performance varies across payer categories

• Policy-level differences for value-based payment contracts exist across payer categories and may impact physician behavior
Contact Information

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