

2017 QUALITY ASSURANCE ANNUAL REPORT

Executive Summary

Jai Medical Systems Managed Care Organization, Inc. (JMSMCO) and its providers have closed out their twentieth *full* year in the Maryland Medicaid HealthChoice Program. JMSMCO is committed to improving the quality of care that its members receive.

JMSMCO's Quality Assurance Program is designed to promote and facilitate the maintenance of good health and a sense of well-being to its members by rendering superior quality health care to the sick and those in need of diagnostic services and/or other treatment modalities.

The purpose of this program is to provide a formal process for continuously and systematically monitoring and evaluating the adequacy and appropriateness of health care services, as well as administrative services rendered to members of JMSMCO. This pro-active process provides the mechanisms to study and review multifaceted components of managed health care, to recommend changes when opportunities to improve are identified, to incorporate recommended enhancements, and to re-examine the components to assure improvements as a result of the process.

JMSMCO has continued to concentrate on the way the quality of medical care was measured. Throughout the past few years, the Maryland Department of Health (MDH) has increased its focus on the Value-Based Purchasing Initiative (VBPI). The Initiative uses encounter data and HEDIS scores to establish whether HealthChoice plans meet certain quality thresholds. In 2016, JMSMCO once again received 13 out of 13 incentives. In 2017, we predict that we will meet 12 out of 13 incentives; however this information is to be determined. In addition, the Department of Legislative Services once again acknowledged our high scores on the State required HEDIS measures in their "*Analysis of the FY 2019 Maryland Executive Budget, 2018.*" It was noted that "Jai Medical Systems again had the best overall relative performance, despite a slight drop in relative performance."

Jai Medical Systems Managed Care Organization Inc. (Jai Medical Systems) is the Highest Rated Medicaid MCO in the United States, having earned a rating of 5 out of 5 in the National Committee of Quality Assurance (NCQA) Medicaid Health Insurance Plan Ratings 2017-2018. Jai Medical Systems is the only Medicaid Plan in the United States with a 5 out of 5 rating from NCQA. This is the first year that Jai Medical Systems is the highest rated Medicaid MCO in the United States and the third year in a row that Jai Medical Systems is the highest rated Medicaid MCO in Maryland. This rating is based on clinical quality, member satisfaction, and NCQA Accreditation survey results.

Annual EQRO Quality Assurance Review 2016

The Maryland Department of Health (formerly Department of Health and Mental Hygiene) contracted with Delmarva Foundation, an External Quality Review Organization (EQRO), to perform annual quality reviews of our systems performance. This was the twentieth Delmarva audit since the implementation of JMSMCO. There were two components to this review:

- ❖ Systems Performance Review
- ❖ The outcome of the Healthy Kids Program Quality Monitoring Review of Early and Periodic Screening, Diagnosis and Treatment (EPSDT) services.

JMSMCO received the Final Report in May 2017. The Final Report noted proficiencies and deficiencies that were found by Delmarva Foundation. The Systems Performance review evaluated the structure, process, and outcome of the systems that were reviewed. Please see the results of the Systems Performance review in the table below:

Table: Systems Performance – Annual EQRO Quality Assurance Review Results – 2004-2016

Std #	Description	CY	CY	CY	CY	CY	CY	CY	CY	CY	CY	CY	CY	MCO Aggregate
		'05	'06	'07	'08	'09	'10	'11	'12	'13	'14	'15	'16	CY '15
1.0	Systematic Process of Quality Assessment and Improvement	100%	100%	100%	100%	Exempt	Exempt	100%	100%	Exempt	Exempt	100%	Met	100%
2.0	Accountability to the Governing Body	100%	100%	100%	100%	Exempt	Exempt	100%	100%	100%	100%	100%	NA	99%*
3.0	Oversight of Delegated Entities	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	Met	93%*
4.0	Credentialing and Recredentialing	99%*	90%*	100%	87%*	100%	100%	100%	99%*	100%	100%	100%	Met	99%*
5.0	Enrollee Rights	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	Met	99%*
6.0	Availability & Accessibility	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	NA	98%*
7.0	Utilization Review	100%	98%*	95%*	98%*	98%*	98%*	100%	100%	100%	100%	100%	Met	94%*
8.0	Continuity of Care	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	Met	100%
9.0	Health Education Plan	Exempt	Exempt	100%	100%	100%	100%	100%	100%	Exempt	Exempt	100%	Met	95%*
10.0	Outreach	Exempt	Exempt	100%	100%	100%	100%	100%	100%	Exempt	Exempt	100%	100%	96%*
11.0	Fraud and Abuse	79%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	Met	98%*

***BOLD** denotes that the minimum compliance rate was unmet for the measurement year.

+ Denotes a baseline assessment for this standard.

JMSMCO received 100% in all applicable standards. Since a score of 100% was achieved, no CAPs were required by Delmarva Foundation. All of the scores for the categories reviewed in the 2015 EQRO SPR met or exceeded the Maryland aggregate scores. Compared to CY 2014, JMSMCO maintained its performance in all of the standards. JMSMCO received a finding met for all elements/components in the CY 2016 Interim Desktop Review.

Healthy Kids Quality Monitoring Program

The Healthy Kids Program is a Maryland initiative intended to ensure that all private physicians, licensed health practitioners, hospital clinics, and managed care organizations (MCOs) are complying with the federally mandated Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) benefit. This EPSDT benefit is extensive and includes a variety of preventative tests and screenings to improve and detect health concerns in children, from birth to age 20. While the benefit is federally mandated, the schedule for these services is designed by each state.

To ensure that each Managed Care Organization is encouraging their members to receive these covered services, the Maryland Department of Health uses a third party auditing company to assess the quality of care each Maryland Medicaid recipient receives.

Results

The Delmarva Foundation is the External Quality Review Organization (EQRO) that has been contracted to perform this annual medical record review of preventative services for our pediatric members. The Delmarva auditors are nurse consultants who perform medical record reviews to determine our compliance rating.

Please note that prior to CY 2007 the onsite annual medical record audits were performed by Healthy Kids nurse consultants with the Maryland Department of Health (MDH). The same review criteria are used by both the DHMH and the Delmarva nurses. The MDH nurse consultants also provided input on the training of the Delmarva nurse reviewers.

These results are from the 2017 audit which was based on calendar year (CY) 2016 data. The sample is generated using a random sampling method of both EPSDT-certified PCPs and non-certified PCPs. The Maryland Medicaid program, also known as HealthChoice, requires that MCOs have a minimum compliance of 80%. Our sample total was 363 members.

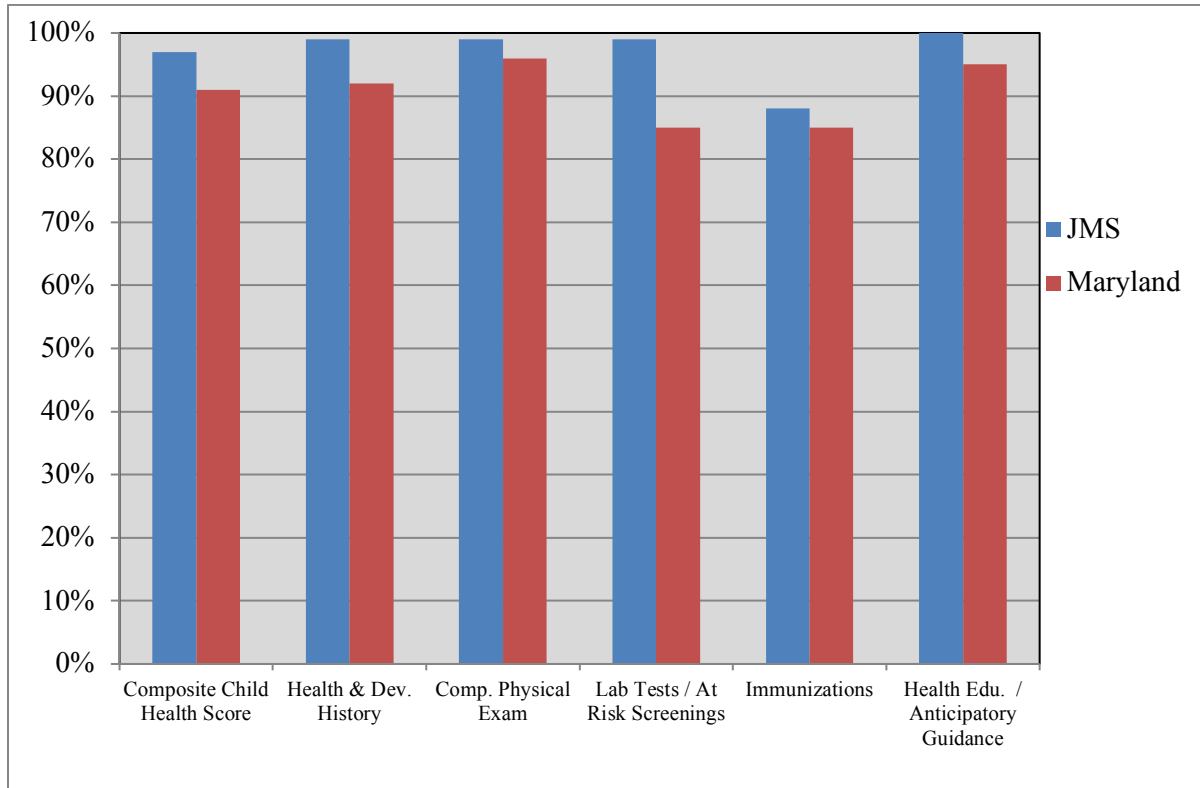
Table: EPSDT/Healthy Kids Component Scores – Annual EQRO 2016 Quality Assurance Review Results 2004-2016

	CY '04	CY '05	CY '06	CY '07	CY '08	CY '09	CY '10	CY '11	CY '12	CY '13	CY '14	CY '15	CY '16	MCO Aggregate CY '16
Composite Child Health Scores	98%	96%	96%	98%	96%	94%	93%	96%	96%	93%	93%	96%	97%	91%
Health & Developmental History	98%	93%	94%	98%	93%	97%	97%	97%	98%	97%	97%	99%	99%	92%
Comprehensive Physical Exam	99%	99%	98%	99%	96%	94%	93%	98%	98%	95%	94%	97%	99%	96%
Laboratory Tests/At Risk Screenings	96%	93%	94%	95%	91%	96%	95%	97%	96%	94%	95%	98%	99%	85%
Immunizations	96%	94%	94%	97%	96%	87%	87%	90%	88%	84%	83%	88%	88%	85%
Health Education / Anticipatory Guidance	99%	96%	96%	99%	96%	97%	95%	96%	97%	94%	96%	98%	100%	95%

*BOLD denotes that the minimum compliance rate was unmet for the measurement year.

For the CY 2016 Healthy Kids review, JMSMCO received an overall score of 97%. Since this score is well above the minimum compliance rate of 80%, there were no corrective action plans required. Please note that JMS has met or exceeded the MCO aggregate in every category.

Figure: EPSDT/Healthy Kids Scores Comparison – Annual EQRO 2016 Quality Assurance Review



It is also important to note that JMS’ grades were factored into the aggregate scores, therefore JMS brought up the aggregate scores for all of the measures while surpassing the Maryland minimum. Throughout the history of the program, JMS consistently scores above the Maryland average score.

HealthChoice Comparison Report Card

Every year MDH publishes a report card comparing the quality ratings of the eight Maryland Medicaid HealthChoice MCOs in several key areas based on the encounter data, HEDIS, and CAHPS results. This report card is intended as a tool to aid Maryland Medicaid members in choosing which MCO they wish to join. One star indicates a below average rating, two stars is average, and three stars indicates an above average rating in comparison to the other MCOs. Please see the figure on the next page to view the HealthChoice Comparison Report Card for 2018.

Figure: 2018 HealthChoice Comparison Report Card

Name	Access to Care	Doctor Communication and Service	Keeping Kids Healthy	Care for Kids with Chronic Illness	Taking Care of Women	Care for Adults with Chronic Illness
AMERIGROUP	★★★	★★★	★★★★	★★★	★★★	★
JAI MEDICAL SYSTEMS	★★★★	★★★★	★★★★	★★★★	★★★	★★★★
KAISER PERMANENTE	★★★	★★★	★	★★★	★★★★	★★★★
MARYLAND PHYSICIANS CARE	★★★	★★★	★★★	★★★	★	★★★
MEDSTAR FAMILY CHOICE	★	★★★	★★★	★★★★	★	★★★
PRIORITY PARTNERS	★★★★	★★★	★★★	★★★	★	★★★
UNITED HEALTHCARE	★★★	★★★	★★★	★★★	★	★
UNIVERSITY OF MARYLAND HEALTH PARTNERS	★	★★★	★	★★★	★	★

JMSMCO was able to be rated in all six categories. JMSMCO was rated above average in five of the six categories. In comparison, none of the other plans scored above average in more than two categories. JMSMCO was also the only plan that did not receive a one star (below average) rating in any of the 6 categories.

Value-Based Purchasing Initiative

During CY 2003, the Maryland Department of Health increased its focus on the Value-Based Purchasing Initiative (VBPI). The VBPI uses encounter data and HEDIS scores to establish baseline scores. In 2004, the Maryland Department of Health began to use these scores to evaluate the MCOs in the HealthChoice program. They applied disincentive and incentive offsets where necessary. JMSMCO began to educate MCO staff, providers, and clinic office staff regarding measures included in the VBPI. Eleven of these measures were implemented for CY 2004. Performance thresholds for the Practitioner Turnover and Claims Timeliness measures were eliminated from reporting in CY 2005. In CY 2009, the measures for Timeliness of Prenatal Care and Dental Services for Children Ages 4-20 were removed and replaced by Adolescent Well-Care, Postpartum Care, and the Use of Appropriate Medications for Asthma. Also in CY 2009, the Childhood Immunization measure was updated from Combo 2 to Combo 3, which adds the Pneumococcal Conjugate Vaccine to the requirement. For CY 2013, the Adolescent Immunization measure was added and the Use of Appropriate Medications for Asthma measure was retired. For CY 2014, the Cervical Cancer Screening and Diabetic Eye Exam measures were retired and five new measures were added: Adult BMI, Breast Cancer Screening, Diabetic HbA1c Testing, Controlling High Blood pressure, and Medication Management for People with Asthma – 75% Compliance.

Please see the table on the next page for results of the 13 measures and their targets for CY 2016 services:

Table: Value-Based Purchasing Performance Measures – CY 2016 –

Performance Measure	Data Source	2016 Target	MC0 Aggregate CY 2016	CY 2016 Rates
Adolescent Well Care: % of adolescents ages 12-21 (enrolled 320 or more days) receiving at least one comprehensive well-care visit with a PCP or an OB/GYN practitioner during the measurement year	HEDIS®	Incentive: ≥ 73% Neutral: 68%–72% Disincentive: ≤ 67%	65%	84% (Incentive)
Adult BMI Assessment: % of enrollees ages 18 to 74 who had an outpatient visit and whose body mass index was documented during the measurement year or the year prior to the measurement year	HEDIS®	Incentive: ≥ 88% Neutral: 85%–87% Disincentive: ≤ 84%	92%	98% (Incentive)
Ambulatory Care Services for SSI Adults Ages 21–64 Years: % of SSI adults (enrolled 320 or more days) receiving at least one ambulatory care service during the measurement year	Encounter Data	Incentive: ≥ 87% Neutral: 84%–86% Disincentive: ≤ 83%	81%	90% (Incentive)
Ambulatory Care Services for SSI Children Ages 0–20 Years: % of SSI children (enrolled 320 or more days) receiving at least one ambulatory care service during the measurement year	Encounter Data	Incentive: ≥ 86% Neutral: 83%–85% Disincentive: ≤ 82%	81%	91% (Incentive)
Breast Cancer Screening: % of women 50–74 years of age who had a mammogram to screen for breast cancer	HEDIS®	Incentive: ≥ 71% Neutral: 66%–70% Disincentive: ≤ 65%	71%	87% (Incentive)
Childhood Immunization Status (Combo 3): % of children who turned 2 years of age during the measurement year who were continuously enrolled for 12 months immediately preceding their second birthday and who had 4 DTaP, 3 IPV, 1 MMR, 2 H influenza type B, 3 hepatitis B, 1 chicken pox vaccine (VZV), and pneumococcal conjugate by the time period specified and by the child’s second birthday	HEDIS®	Incentive: ≥ 82% Neutral: 79%–81% Disincentive: ≤ 78%	82%	88% (Incentive)
Comprehensive Diabetes Care – HbA1c Testing: % of enrollees 18–75 years of age with diabetes (type 1 and type 2) who had a Hemoglobin A1c (HbA1c) test	HEDIS®	Incentive: ≥ 92% Neutral: 89%–91% Disincentive: ≤ 88%	89%	95% (Incentive)
Controlling High Blood Pressure: % of enrollees ages 18 to 85 who had a diagnosis of hypertension and whose blood pressure was adequately controlled during the measurement year	HEDIS®	Incentive: ≥ 69% Neutral: 63%–68% Disincentive: ≤ 62%	68%	72% (Incentive)
Immunizations for Adolescents (Combo 1): % of adolescents 13 years of age during the measurement year who had one dose of meningococcal vaccine and either one Tdap or Td vaccine by their 13 th birthday	HEDIS®	Incentive: ≥ 79% Neutral: 75%–78% Disincentive: ≤ 74%	86%	89% (Incentive)
Lead Screenings for Children Ages 12–23 Months: % of children ages 12–23 months (enrolled 90 or more days) who receive a lead test during the current or prior calendar year	Lead Registry, Encounter & Fee for Service Data	Incentive: ≥ 69% Neutral: 64%–68% Disincentive: ≤ 63%	60%	91% (Incentive)
Medication Management for People with Asthma – Medication Compliance 75%: % of enrollees 5-64 years of age during the measurement year who were identified as having persistent asthma and who were appropriately prescribed medication during the measurement year	HEDIS®	Incentive: ≥ 42% Neutral: 31%–41% Disincentive: ≤ 30%	31%	52% (Incentive)

Postpartum Care: % of deliveries that had a postpartum visit on or between 21 and 56 days after delivery	HEDIS®	Incentive: ≥ 74% Neutral: 70%–73% Disincentive: ≤ 69%	74%	81% (Incentive)
Well-Child Visits for Children Ages 3 – 6 Years: % of children ages 3–6 (enrolled 320 or more days) receiving at least one well-child visit during the measurement year, consistent with American Academy of Pediatrics & EPSDT recommended number of visits	HEDIS®	Incentive: ≥ 88% Neutral: 85%–87% Disincentive: ≤ 84%	82%	90% (Incentive)

JMSMCO reached the incentive range and exceeded the aggregate score in all of the thirteen measures. JMSMCO had the high score or was tied for the high score in ten of the VBPI measures and was awarded a financial incentive for its outstanding results in all thirteen of these quality measures. Please see the charts below which track JMSMCO VBPI scores and incentives from 2010-2015:

Table: VBPI Incentive Counts 2011-2016

Year in which services were received	2011	2012	2013	2014	2015	2016
Incentives Received	9	10	9	12	13	13
Total Incentives Possible	10	10	10	13	13	13

Table: VBPI Scores and Measures 2010-2015

	2011	2012	2013	2014	2015	2016
Adolescent Well Care	80%	77%	77%	80%	83%	84%
Adult BMI				99%	97%	98%
SSI Adults	85%	86%	85%*	88%	89%	90%
SSI Kids	81%	85%	86%	86%	88%	91%
Breast Cancer Screening				72%	73%	87%
Childhood Immunization	79%*	84%	86%	88%	87%	88%
Diabetes – HbA1c Testing				91%	94%	95%
Controlling High Blood Pressure				69%	76%	72%
Adolescent Immunizations			76%	77%	82%	89%
Lead Screening for Children	75%	75%	79%	78%	74%	91%
Medication Management for Asthma				35%*	51%	52%
Postpartum	78%	84%	79%	84%	88%	81%
Well Child 3-6	89%	88%	89%	91%	91%	90%
Cervical Cancer Screening	79%	81%	80%			
Diabetes – Eye Exam	81%	80%	80%			
Use of Appropriate Medications for Asthma	94%	93%				

For 2016 services, JMSMCO once again received a perfect score by receiving an incentive in 13 out of 13 measures. JMSMCO’s goal for 2017 is to again achieve the incentive range in all of the VBPI measures. JMSMCO will continue its efforts in 2018 to improve the quality of care its members receive by analyzing the VBPI measures.