

Quality Improvement and Performance Measurement in Medicaid Care Management

The mission of AHRQ is to improve the quality, safety, efficiency, and effectiveness of health care by:

- Using evidence to improve health care.
- Improving health care outcomes through research.
- Transforming research into practice.

Introduction

More than 90 million Americans have chronic illnesses, and approximately 20 million children have at least one chronic health condition. Medical care costs associated with chronic illness are substantial and account for more than 75 percent of the Nation's \$1.4 trillion in annual health care costs.¹ Improving care quality and reducing its cost for patients with chronic illness(es) represent a challenge for all Medicaid programs. An increasing number of States are developing or implementing care management programs in an attempt to meet this challenge.

Despite growing interest, many States simply do not have the technical capabilities or financial resources available within their agencies to design, implement, and monitor such programs to the degree they would like. Through this new knowledge transfer initiative, the Agency for Healthcare Research and Quality is collaborating

with States to improve the health of people with chronic illness through successful care management programs.

What is AHRQ doing?

AHRQ is establishing a learning network to help State Medicaid agencies measure and improve the quality of care for Medicaid beneficiaries with multiple chronic diseases.

With whom?

- Four to eight "action ready" State Medicaid programs that have recently implemented care management or disease management programs or are well along in planning for such programs.
- One or two States that will participate with regional coalitions that include at least health plans and purchasers and focus on care management at the provider level.

¹ Source: Centers for Disease Control and Prevention, October 1994.



- AHRQ's Federal partners are the Centers for Medicare & Medicaid Services (Medicaid Quality Strategy) and the Centers for Disease Control and Prevention.
- Non-Federal partners are the National Committee for Quality Assurance, the National Academy for State Health Policy (NASHP), and the Center for Health Care Strategies.

Why?

- Medicaid beneficiaries who lack effective care management often receive lower quality care for chronic disease. Also, State Medicaid programs may experience over-use of hospital and other services and increasing costs.
- Very few State Medicaid agencies have implemented care management programs for chronic conditions.
- States are inexperienced in developing performance measurement systems or designing quality improvement (QI) projects, and they have scant resources in-house to develop these programs.
- Without performance measurement, it is difficult to implement QI strategies.
- AHRQ has the information, tools, expertise, and linkages with the research community to help States develop effective strategies for their care management programs.

How are AHRQ resources being used?

- Create and support a multi-State learning network.
- Make site visits to States to identify and prioritize their needs.
- Provide technical assistance and facilitate peer to peer learning.
- Identify ways AHRQ (and others) can help States decide what to focus on, which strategies work, and what and how to measure.
- Promote sharing of strategies among States, identify best practices, and use evidence-based research (workshops, teleconferences, Web site/extranet, peer-to-peer assistance, particularly with peers who have had success with concrete solutions).

How will we know success?

- States will be able to use tools and knowledge gained through the network to measure outcomes by collecting, analyzing, and documenting changes in care.
- Quality of care will improve for Medicaid beneficiaries with multiple chronic diseases.
- States will present results/lessons learned through the AHRQ learning network at yearly national meetings of State-based organizations such as NASHP.
- Additional States outside of the learning network will approach AHRQ for help in developing their expertise, tools, and measures.

Synergies with other AHRQ programs

The AHRQ Care Management Strategy Workgroup will work closely with AHRQ staff in the following programs to ensure that the most appropriate tools are used in the learning network:

- National Healthcare Quality Report and National Healthcare Disparities Report.
- Quality Connect, a partnership with State and local leaders to improve the quality of health care and help States achieve greater value for their health care investments.
- AHRQ Quality Indicators.
- Healthcare Cost and Utilization Project.
- Knowledge transfer strategies for decreasing disparities in pediatric asthma care.
- Purchaser-provider synergies knowledge transfer strategy.
- Diabetes workbook for States (Center for Quality Improvement and Patient Safety).
- Supporting business coalitions on diabetes QI (Center for Quality Improvement and Patient Safety).
- Long-term care portfolio.
- Center for Financing, Access, and Cost Trends and Center for Outcomes and Effectiveness for activities relating to costs of chronic illness.

When will we reassess?

We will reassess continuously to ensure that specific projects are on track. We will perform an in-depth assessment at least every 6 months to gauge whether a change in overall strategy is needed.



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