

MCO ID: AM

Total QAPI Score: 96.9

TEXAS MEDICAID MANAGED CARE AND CHILDREN'S HEALTH INSURANCE PROGRAM (CHIP) QUALITY ASSESSMENT AND PERFORMANCE IMPROVEMENT PROGRAM MCO EVALUATION SUMMARY

Contract Period: September 1, 2012 - August 31, 2013

Data Year: January 1, 2012 - December 31, 2012

This document reports the External Quality Review Organization's (EQRO) evaluation of the annual Quality Assessment and Performance Improvement (QAPI) Program Summary for State Calendar Year 2012, with requirements outlined in Section 8.1.7 of the Texas Health and Human Services Commission (HHSC) Uniform Managed Care Contract. Chapter 5.7.1 of the HHSC Uniform Managed Care Contract provides the QAPI Summary format and required supporting documents to be submitted by the Managed Care Organizations (MCOs) to cover each line of business (STAR, STAR+PLUS, STAR Health, CHIP, CHIP Perinatal, CHIP RSA, Medicaid Dental, and CHIP Dental) in which the MCO participates.

MCO Name: Amerigroup

Evaluator: ICHP

Detailed Assessment

The sections below present the required elements of the MCO QAPI Evaluation Summary. For each element, the EQRO has evaluated whether or not the MCO has provided sufficient documentation of the element.

Scoring:

Y = Documentation Complete	P = Documentation Partially Complete	N = No Documentation
100 points	50 point	0 points

Required Documentation			
Component/Standard	Score	Met	Comments
1 Quality Assessment and Performance Improvement Plan (QAPI) Summary Score as Yes or No	100	Yes	
2 MCO QI Organizational Chart Score as Yes or No	100	Yes	

Total Score: 100.0
Weighted Score: 5.0

A. Performance Improvement Structure

Activity A1: Role of Governing Body in QAPI			
Component/Standard	Score	Met	Comments
1 The Governing Body provides direct oversight of the QAPI/QIP program or formally delegates accountability. Score as Yes or No	100	Yes	
2 The Governing Body receives regular written reports of QAPI activities, actions, and processes in meeting goals and objectives. Score as Yes or No	100	Yes	
3 The Governing Body reviews the written QIP report at least annually. Score as Yes or No	100	Yes	
4 The Governing Body takes documented action as needed to modify the QIP. Score as Yes or No	100	Yes	

Total Score: 100.0
Weighted Score: 10.0

Activity A2: Structure of Quality Improvement Committee(s)			
Component/Standard	Score	Met	Comments
1 The Committee presents both Committee membership and activities. N/A is not applicable to this element for scoring.	100	Yes	
2 The Committee has active participation from provider representatives of the enrolled population. Score as Yes or No	100	Yes	The MCO is commended for having a voting member representative on the QMC.
3 The Committee has a specified role, structure, and function. Score as Yes or No	100	Yes	

4	The Committee is accountable to the governing Body and reports to the Governing Body on a scheduled basis. Score as Yes or No	100	Yes	
5	The Commttee meets regularly - at least once per quarter. Score as Yes or No	100	Yes	
6	The Committee records activities, findings, recommendations, and actions. Score as Yes or No	100	Yes	
7	The MCO discusses who is responsible for adopting the health plan's clinical practice guidelines. Score as Yes or No	100	Yes	

Total Score: 100.0
Weighted Score: 5.0

Activity A3: Adequate Resources				
Component/Standard		Score	Met	Comments
1	The MCO discussed the adequacy of human resources. Score as Yes or No	100	Yes	
2	The MCO discussed the adequacy of material resources. Score as Yes or No	100	Yes	

Total Score: 100.0
Weighted Score: 10.0

Activity A4: Improvement Opportunities				
Component/Standard		Score	Met	Comments
1	The MCO described clinical performance improvement that affected patient care, treatment, and/or services.	100	Yes	
2	The MCO described non-clinical organizational improvements.	100	Yes	
3	The MCO discussed measurements and results related to important systems, processes, and outcomes.	100	Yes	

4	The MCO discussed internal/external comparative Summary Measurements.	100	Yes	
5	The MCO listed current PIP topics for each line of business. N/A is not applicable to this element for scoring.	100	Yes	

Total Score: 100.0

Weighted Score: 10.0

Section A Total Weighted Score: 35.0

B. Organization's Assessment of the Effectiveness of the Quality Assessment and Improvement Program

Activity B1: Program Description				
Component/Standard	Score	Met	Comments	
1	QAPI includes a statement of purpose/mission of QAPI program. Scores as Yes or No	100	Yes	
2	QAPI includes a statement of scope addressing: clinical aspects of care, non-clinical aspects of care, all demographic groups, all care settings, and the types of services provided to members. NA is not applicable to this element for scoring.	100	Yes	
3	The MCO describes organization-wide communication of results of quality monitoring from the personnel in the field to the Governing Body. N/A is not applicable to this element for scoring.	100	Yes	
4	The MCO describes the methodology utilized for quality improvement - an action plan that includes Plan-Do-Study-Act (PDSA) or another recognized system. N/A is not applicable to this element for scoring.	100	Yes	

5	The MCO has broadly stated goals that discuss long-term outcomes in an overall statement relating to the health plan's philosophy, purpose, or desired outcome (NAHQ definition). N/A is not applicable to this element for scoring.	100	Yes	
6	The MCO has objectives that are: specific, action-oriented statements written in measurable and observable terms which define how the goals will be met (NAHQ definition). N/A is not applicable to this element of scoring.	50	Partial	It is recommended that the MCO develop objectives that are specific, action-oriented statements written in measurable and observable terms. Some of the objectives listed are more appropriate as goals. Consider revising objectives to make them more action-oriented and measurable.
7	The MCO describes how goals and objectives are being accomplished, the results, analyses, and subsequent strategies (if applicable).	100	Yes	
8	The MCO describes how the process of the QAPI program and the health plan's progress toward achieving the quality goals and objectives are monitored and evaluated. N/A is not applicable to this element for scoring.	100	Yes	

Total Score: 93.8
Weighted Score: 9.4

Activity B2: Overall Effectiveness				
Component/Standard		Score	Met	Comments
1	The MCO described the factors that contributed to the success of the QAPI program. N/A is not applicable to this element for scoring.	100	Yes	

2	The MCO described the barriers or problems encountered in the QAPI program design, implementation, and/or monitoring. N/A is not applicable to this element for scoring.	100	Yes	
3	The MCO includes an evaluation of overall QAPI program effectiveness for each Medicaid program in which it participates. N/A is not applicable to this element for scoring.	100	Yes	

Total Score: 100.0
Weighted Score: 5.0

Activity B3: Clinical Practice Guidelines

Component/Standard	Score	Met	Comments
1 The MCO Completed Appendix A: Clinical Practice Guideline Grid. Score as Yes or No	100	Yes	
2 The MCO discussed current clinical practice guidelines relevant to all lines of business. N/A is not applicable to this element for scoring.	100	Yes	
3 Guidelines are evidence-based. Score as Yes or No	100	Yes	
4 Guidelines are relevant to member needs. Score as Yes or No	100	Yes	
5 The MCO uses guidelines to support care and services.	100	Yes	
6 The MCO described how clinical guidelines are made available to members and providers. N/A is not applicable to this element for scoring.	100	Yes	

Total Score: 100.0
Weighted Score: 5.0

Activity B4: Availability and Accessibility - Access to Care Monitoring and Results

Component/Standard	Score	Met	Comments
--------------------	-------	-----	----------

1	The MCO completed Appendix B: Access to Care Monitoring and Results Grid. Score as Yes or No	100	Yes	
2	The MCO provided goals for all indicators. N/A is not applicable to this element for scoring.	100	Yes	
3	The MCO provided results for all indicator monitoring. N/A is not applicable to this element for scoring.	100	Yes	
4	The MCO described actions/interventions taken for all indicators. N/A is not applicable to this element for scoring.	100	Yes	
5	The MCO evaluated the effectiveness of actions taken.	50	Partial	The effectiveness of actions taken should be indicator specific. For example, an action is more effective if the results exceed the goal of 90% and are less effective if the results fall below the goal. It is recommended that the MCO describe the effectiveness of actions as they pertain to a particular indicator and it's outcomes.
6	The MCO described additional or future action.	50	Partial	Future actions should be indicator specific. It is recommended that the MCO implement modified interventions for the indicators that did not reach the set goal.

Total Score: 83.3

Weighted Score: 8.3

Activity B5.a: Activities and Ongoing Quality Indicators - Appendix C: Clinical Indicator Monitoring			
Component/Standard	Score	Met	Comments

1	The MCO completed Appendix C: Clinical Indicator Monitoring Grid. Score as Yes or No	100	Yes	
2	The MCO provided goals for all indicators. N/A is not applicable to this element for scoring.	50	Partial	Goals should be set to achieve a statistically significant improvement in the previous year's (baseline) rate. For example, for the W34 indicator, the goal was set as 71%. Although this is a HHSC dashboard goal, the MCO's rate last year was 80.35%, which exceeded the goal of 71% by close to 10 percentage points.
3	The MCO provided results for all indicator monitoring. N/A is not applicable to this element for scoring.	100	Yes	
4	The MCO described actions/interventions taken for all indicators. N/A is not applicable to this element for scoring.	100	Yes	
5	The MCO evaluated the effectiveness of actions taken.	100	Yes	
6	The MCO described additional or future actions.	100	Yes	

Total Score: 91.7

Weighted Score: 9.2

Activity B5.b: Activities and Ongoing Quality Indicators - Appendix D: Service Indicator Monitoring				
Component/Standard		Score	Met	Comments
1	The MCO completed Appendix D: Service Indicator Monitoring Grid. Score as Yes or No	100	Yes	
2	The MCO provided goals for all indicators. N/A is not applicable to this element for scoring.	100	Yes	
3	The MCO provided results for all indicator monitoring. N/A is not applicable to this element for scoring.	100	Yes	
4	The MCO described actions/interventions taken for all indicators. N/A is not applicable to this element for scoring.	100	Yes	

5	The MCO evaluated the effectiveness of actions taken.	100	Yes	
6	The MCO described additional or future actions.	100	Yes	

Total Score: 100.0
Weighted Score: 10.0

Activity B6: Credentialing and Re-credentialing				
Component/Standard		Score	Met	Comments
1	Providers are re-credentialed every three (3) years. Score as Yes or No	100	Yes	
2	The MCO described the process of credentialing and re-credentialing providers and included how background checks are performed. Not applicable if NCQA-accredited for credentialing.	100	Yes	
3	The MCO reported the number of providers and facilities credentialed during this measurement period. Score as Yes or No	100	Yes	It is recommended that the MCO separate out the number of providers and facilities credentialed.
4	The MCO reported the number of requests for initial credentialing denied, with reasons. Score as Yes or No	100	Yes	
5	The MCO reported the number of providers and facilities re-credentialed during this measurement period. Score as Yes or No	100	Yes	It is recommended that the MCO separate out the number of providers and facilities credentialed.
6	The MCO reported the number of requests for re-credentialing denied, with reasons. Score as Yes or No	100	Yes	
7	The MCO reported the number of providers who were reduced, suspended, or had privileges terminated by the MCO, with reasons. Score as Yes or No	100	Yes	

8	The MCO reported the number of providers who chose to appeal reduction, suspension, or termination of privileges, with outcome(s) of the appeal(s). Score as Yes or No	100	Yes	
---	--	-----	-----	--

Total Score: 100.0
Weighted Score: 5.0

Activity B7: Delegation of QAPI Activities

Component/Standard	Score	Met	Comments	
1	The MCO completed Appendix E: Delegation of QAPI Activities. N/A is not applicable to this element for scoring.	100	Yes	
2	There is a written description of delegated activities that include the delegate's accountability and frequency of reporting. Score as Yes or No	100	Yes	
3	The MCO reported the results of its on-going evaluation of delegated activities. Score as Yes or No	100	Yes	
4	The MCO identified improvements or corrective actions as needed. N/A is not applicable to this element for scoring.	100	Yes	
5	The MCO discussed planned or completed follow-up of delegated functions. N/A is not applicable to this element for scoring.	100	Yes	

Total Score: 100.0
Weighted Score: 5.0

Activity B8: Corrective Action Plans

Component/Standard	Score	Met	Comments	
1	The MCO reported the issue was identified and the needs to be addressed.		N/A	
2	The MCO reported the date the issue was identified.		N/A	

3	The MCO identified the individual or entity within the MCO responsible for assessing quality implication.		N/A	
4	The MCO described the Corrective Action required by TDI and included the schedule and accountability for implementing the corrective action.		N/A	
5	The MCO described the actions taken to correct the Corrective Action, any modifications to the actions taken, and the status of the Corrective Action. The MCO's description included the involvement of any necessary professionals and/or personnel.		N/A	
6	The MCO reported the date or targeted dated the Corrective Action was completed.		N/A	

Total Score: N/A

Weighted Score: N/A

Section B Total Weighted Score: 56.9

Previous Year's Recommendations

Number of Recommendations	10
Number of Recommendations Implemented	10
Percent of Recommendations Implemented	100

Previous Year's Recommendations	Score	Met	Comment
---------------------------------	-------	-----	---------

1	<p>Many of the recommendations made in the previous year have not been incorporated and were not addressed in this report. Utilize a recognized methodology for MCO-wide continuous quality improvement, such as Plan-Do-Study-Act (PDSA). Write objectives defining how goals will be achieved using terms that are specific, action-oriented, and measurable. Determine the effects or outcomes of quality interventions by measuring pre- and post-intervention behavior. The process of providing information does not, in and of itself, define a successful intervention. If the MCO's goal is to change behavior by providing information to member or providers, the success of providing information is determined by measuring changes in behavior through the comparison of pre- and post-intervention behavior. Capture the "big picture" when identifying quality improvement goals. For example, the MCO identified a goal to improve health care quality:</p>	100	Yes	
2	<p>The MCO states that the QM Committee reports to the Governing Body on a semi-annual basis. It is recommended that the MCO include a statement referring to the contents and nature of the reports, including information on activities, actions, and status of the goals and objectives, as well as on the response from the Governing Body.</p>	100	Yes	
3	<p>It is recommended that goals and objectives be clearly defined and concise. The MCO should define the goal and list objectives for that specific goal. In this report there are 15 goals and 14 objectives; it is difficult to determine which objective(s) define(s) the strategies to attain a specific goal. It is recommended that the MCO format the Goals & Objectives as follows: Goal 1...Objective 1, 2, etc.</p>	100	Yes	

4	<p>Amerigroup Louisiana, Inc.</p> <p>More specific detail on the methods for attaining the goals and objectives is needed. Additionally, it is recommended that the MCO adopt a recognized methodology for MCO-wide continuous quality improvement, such as Plan-Do-Study-Act (PDSA). It is also recommended that the MCO identify how the projects are being monitored and evaluated addressing the following:</p> <p style="padding-left: 40px;">Methods</p> <p>What programs/interventions are being implemented to accomplish the goal? Elaborate on the proposed plan described in the objectives.</p> <p style="padding-left: 40px;">Monitoring and Evaluation</p> <p>Discuss how the goals and objectives are being measured and monitored to ensure the MCO is on track and continually improving. Discuss barriers and successes. What hindered the success of attaining your goal(s)?</p> <p>What assisted in the accomplishment of the goal(s)?</p>	100	Yes	Attachment E.6-2: Texas QAPI MCO Evaluation Summary
5	<p>It is recommended the MCO include a results section followed by a discussion section. Discuss the results of the interventions implemented. Also, include future plans and changes, if any, to current interventions.</p>	100	Yes	MCO provided detailed information in the Appendices.
6	<p>It is recommended the MCO include all demographic groups, reflecting the diversity of the population served, in the statement of scope.</p>	100	Yes	
7	<p>Clinical practice guidelines should be based on enrollees' needs. Rationale for guidelines should include incidence or prevalence rates supporting the need of the guideline. For example, include a statement such as, "schizophrenia is a significant problem, affecting X% of members enrolled" or "the diagnosis of X% of behavior health inpatient admissions and X% of readmissions is schizophrenia."</p>	100	Yes	

8	<p>Amerigroup Louisiana, Inc. Appendix B: Access to Care Monitoring and Results - It is recommended that the MCO make some reference to each SDA when reporting results that are applicable to the SDAs, especially if no actions were taken in response to the results. If the indicator does not apply to a certain SDA, please indicate N/A to the specific SDA. For example, for the "children with 1 open PCP within 30 miles or members" indicator, it is reported that the Tarrant, Dallas, Harris, and Travis SDAs met and exceeded the goal. There is no mention, however, of the Nueces and Bexar SDAs. Is this indicator not applicable to these SDAs? Are these SDAs monitored for this indicator? If these SDAs are monitored for this indicator, what are the results not reported?</p>	100	Yes	
9	<p>For quality improvement activities and on-going quality indicators - A 0.43% increase in postpartum care visits is a small increase. Has this small increase been found to be a statistically or clinically significant change? If not, it is recommended to reconsider actions being taken to increase percentage of postpartum care visits and to explore different avenues to attain your goal. The current course of action has valuable components. It is recommended, however, that the MCO conduct a root cause analysis to identify strategies to improve these rates. Evaluation of the analysis should help formulate new actions to attain the goal. For example, members may miss postpartum visits due to a lack of transportation rather than a lack of knowledge.</p>	100	Yes	
10	<p>For quality improvement activities and on-going quality indicators - When current actions in place have not achieved the annual target/goal for an indicator, it is recommended the MCO develop/implement future actions that will address the specific problems associated with not attaining its goal for this indicator. The root cause of the problem needs to be evaluated and addressed in order to determine and develop a strategy that will lead to improvement in this area.</p>	100	Yes	