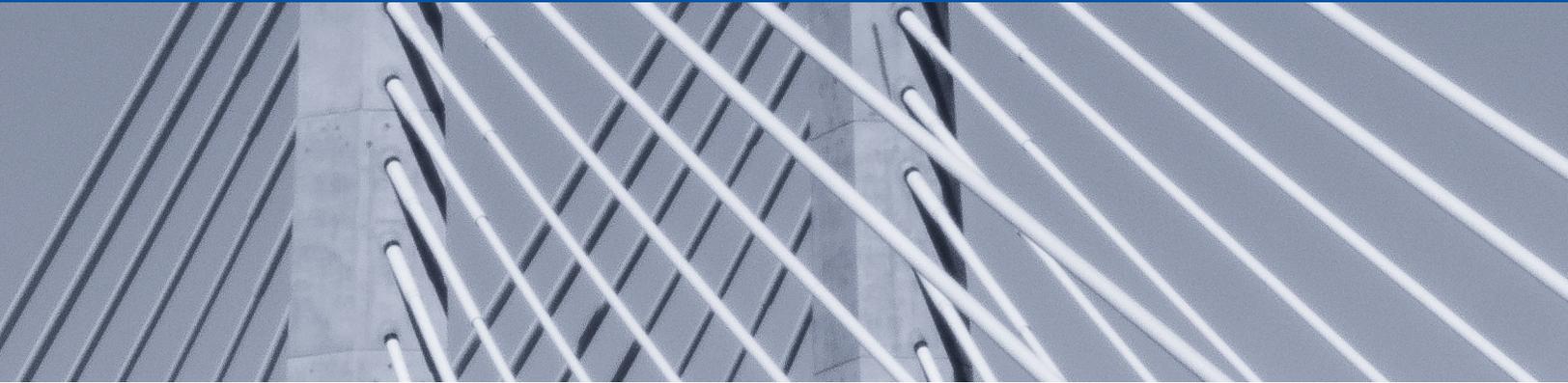


Medicaid Transformation Project Evaluation

Rapid-Cycle Report

March 29, 2019

CENTER FOR HEALTH SYSTEMS EFFECTIVENESS



Prepared for:

Washington State Health Care Authority



Medicaid Transformation Project Rapid-Cycle Report

Overview

This report covers activities from CHSE's evaluation of Washington's Medicaid Transformation Project (MTP) from January 1 to March 29, 2019. In this period, CHSE collected and began to analyze the first data for the evaluation. These included qualitative data from 11 interviews with state agency key informants, and administrative data on demographics and metric results for the state's Medicaid population. We also laid groundwork for evaluation activities that will begin later this year, including identification of target populations for ACHs' health improvement projects and administration of primary care practice and hospital surveys.

Accomplishments

Foundational Tasks

We applied and received approval for a study amendment from the Washington State Institutional Review Board (WSIRB) to cover important components of the evaluation. These included: the addition of primary care practice and hospital surveys for pilot testing and the use of primary care practice and hospital lists from the Washington All-Payer Claims Database (WA-APCD) for survey administration (described below); the addition of interview guides for use in primary care practice and hospital interviews; and the addition of new evaluation team members.

Another amendment will be needed to obtain detailed administrative data required to evaluate ACHs' health improvement projects. We plan to apply for the amendment in early April.

Document Analysis

We continued analyzing ACHs' semi-annual reports and other documents from ACHs and State agencies. We began using these documents to draft internal-facing summaries of MTP as a whole and summaries of ACHs' activities. These summaries will help the qualitative and quantitative teams understand MTP and interpret results from subsequent evaluation activities.

Key Informant Interviews

State Agency Key Informants

The qualitative team completed 11 Round 1 interviews with key informants from the Health Care Authority (HCA), the Department of Social and Health Services (DSHS), and other state employees from February through March, 2019. The initial state informants were purposively selected for subject-matter expertise in the following areas:

- Leadership and administration
- Health care transformation and policy

- Data and analytics
- Health information technology and exchange
- Value-based payment
- Workforce
- Long-term services and supports
- Foundational community supports

As part of each interview, participants were asked to recommend other experts to interview to get a deeper understanding or a different perspective on these issues. We will continue Round 1 interviews with state employees through early April, 2019, completing approximately 15 interviews. Data from these interviews will provide us with historical and contextual information to better understand the Medicaid Transformation Project (MTP) and help us plan and interpret results from subsequent evaluation activities.

Qualitative analysts began formally analyzing state-level interviews this quarter. Interviews were audio-recorded and professionally transcribed. Transcripts were reviewed for accuracy and uploaded into ATLAS.ti, an industry-standard text analysis tool, for data management and analysis. The qualitative team began meeting weekly to listen to the audio recordings, review the transcripts together, discuss key passages of text, and develop a list of codes reflecting topics and themes discussed by informants. Interview participants shared information about the following topics:

- Prior initiatives that influenced and preceded the MTP demonstration and Washington's current vision for health care transformation
- Department and organization roles and responsibilities, and relationships between state partners and other stakeholders
- Successes and barriers to MTP implementation, experience with communication and engagement, ACH model design, and work related to MTP initiatives and domains

We will provide a summary of results from Round 1 interviews with state key informants in the next rapid-cycle report.

ACH Key Informants

As a next step, we will interview leaders from each of Washington State's ACHs between April and September, 2019. As with state key informants, we will ask ACH leaders to recommend other ACH stakeholders to interview. Informants may include board members, individuals with expertise in clinical care delivery, clinical quality measures, or domain 2 and 3 projects, and representatives of Medicaid managed care organizations. The qualitative team anticipates interviewing three to six stakeholders for each ACH. Our experience with regionally-based health care transformation in Oregon shows that in-person interviews can help establish relationships and build the foundation for future interviews. We plan to travel to each ACH region to conduct initial interviews and site visits in person.

Administrative Data Analysis

We delivered a description of our proposed methods for identifying the target populations of each ACH's health improvement projects using administrative data, and for attributing Medicaid members to provider organizations that partner with ACHs on these projects. These methods will be critical for categorizing Medicaid members into "treatment" and "comparison" groups for the purpose of evaluating the projects.

As a next step, we plan to refine these methods based on feedback from ACHs about their intended target populations. In addition, we continued to consult with State experts on means to identify ACHs' target populations. For example, we presented options for identifying Medicaid members with specific chronic conditions using administrative data, since ACHs include chronic conditions in their definitions for some target populations. Also, we discussed options for identifying people served by the Pathways HUB model, since several ACHs using this model for Project 2B: Care Coordination.

We received an initial set of "Phase 1" administrative data needed to begin evaluating the impact of MTP on Washington State's Medicaid system as a whole. The set consisted of a person-level enrollment file, several metric results files, and a health risk file. Our quantitative team began examining and plotting the data in order to understand trends and identify any unexpected features.

Primary Care Practice and Hospital Surveys

Survey Development

The primary care practice and hospital survey team finalized initial versions of two surveys that will be administered to a sample of primary care practices, and to all hospitals, at two points in time: mid-2019 and early 2021. The surveys will be used to answer evaluation questions about trends in value-based payment (VBP) adoption, health information technology (HIT) adoption, and workforce needs associated with MTP. In addition, we will use survey results to help select a subset of practices and hospitals for qualitative interviews, providing an in-depth understanding of factors driving these trends. We prepared initial versions of the surveys based on evaluation questions in the State's Evaluation Design, discussion with state key informants, and review of items on existing VBP, HIT, and workforce surveys, including some surveys administered by ACHs. The surveys are now ready for pilot testing.

We plan to carry out pilot testing and refinement of the surveys in April and May. For pilot testing, we will administer the surveys to administrative staff at a small group of primary care practices and hospitals in Washington State that volunteer to help test the surveys. The testing will allow us to determine how well they understood the questions, how much time they needed to complete the surveys, and where they may have been inclined to discontinue the surveys (i.e., "drop off"). This information will help us tailor question wording, survey length, and other aspects of the surveys to optimize response rates and obtain accurate results. In particular, limiting the total number of items and the time needed to complete the surveys will be critical to obtaining high response rates. Follow-up interviews with a subset of practices and hospitals identified through completion of the survey will enable us to obtain additional in-depth information on VBP adoption, HIT adoption, and workforce needs.

Survey Sampling and Administration

In addition to finalizing the initial versions of the surveys, we submitted a data request to obtain lists of Washington State primary care practices and hospitals from the Washington All Payer Claims

Database (WA-APCD). The WA-APCD will provide a comprehensive list of primary care practices and hospitals, along with their physical locations, approximate size (in terms of attributed patients for practices and discharges for hospitals), and Medicaid payer mix. These variables will be used to identify the sample of primary care practices selected for survey completion, and to analyze survey results by ACH region and practice or hospital characteristics.

Once we complete the pilot testing, we will finalize the survey. After we receive the list of practices and hospitals from Washington State, we can identify the sample of practices to survey. Since the dataset does not include the names and email addresses we need to administer the surveys, we will contact each selected practice and hospital to gather this information. With all of these steps completed, we can begin to administer the surveys with several reminders to ensure robust response rates.

SUD Amendment

We continued to consult with the State about planning for evaluation of the substance use disorder (SUD) amendment to the Medicaid waiver. For example, we finalized a plan for the SUD midpoint assessment and provided input on cost analysis for the evaluation.

Key Decisions and Actions

HCA agreed to extend the deadline for conducting and analyzing Round 1 interviews from May to September to allow adequate time to plan and conduct Round 1 interviews in person.