



CY 2016 QIP & CCIP Annual Update Training



**Medicare Drug and Health Plan
Contract Administration Group**

Donna Williamson
Brandy Alston
Theresa Wachter
Tracey Herring

December 13, 2016

Quality Improvement Project (QIP) CY 2016 Annual Update Submissions

Presentation Overview

- Important Dates
- QIP/CCIP Background
- Mandatory Topics
- Changes to HPMS
- Annual Update Requirements
- Resources
- Q & A

Important Dates

- QIP Annual Update Submission Window
 - Gates Open: 12:00 a.m. ET on January 9, 2017
 - Gates Close: 8:00 p.m. ET on January 13, 2017
 - MAOs that fail to submit a required Annual Update will be issued a NONC.
- All Annual Update reviews completed
 - March 2017

QIP Annual Update Submissions

- Each MAO must establish a single QIP for all non-SNP coordinated care plans and network-based MSA/PFFS plans offered under a single contract (1876 cost plans and PACE plans are excluded).
- Starting in 2016, MAOs will no longer be required to submit a QIP for each individual SNP PBP. CMS has consolidated SNP submissions so that MAOs, by contract, will only submit a single QIP per SNP type/subtype. All affected contracts have been notified of their 2016 SNP submission requirements.

QIP Submission Timeline

- **QIPs Implemented in 2014 and/or 2015**
 - 2nd or 3rd Annual Update
 - 30-Day All-Cause Hospital Readmissions

- **QIPs Implemented in 2016**
 - 1st Annual Update
 - Promote Effective Management of Chronic Disease

QIP Background

- Quality Improvement Program Requirements
 - CMS regulations at 42 CFR §422.152
 - Quality Improvement Project (QIP)
 - Chronic Care Improvement Program (CCIP)
 - Requires progress be reported to CMS
- Focus on Interventions and Outcomes
- Utilize the Plan, Do, Study, Act (PDSA) quality improvement model

CMS 2016 Quality Strategy Goals

1. Make care safer by reducing harm caused in the delivery of care.
2. Strengthen person & family engagement as partners in their care.
3. Promote effective communication and coordination of care.
4. Promote effective prevention and treatment of chronic diseases.
5. Work with communities to promote best practices of healthy living.
6. Make care affordable.

Mandatory Topics

QIPs

- **Promote Effective Management of Chronic Disease**
- Support CMS Quality Strategy Goals
 - #4 - Promote Effective Prevention and Treatment of Chronic Diseases
- **Address 30-Day All-Cause Hospital Readmissions**
- Support the national HHS initiative — Partnership for Patients

CCIPs

- **Reduce the incidence and severity of cardiovascular disease**
- Support the national HHS initiative — Million Hearts
- ABCS of heart disease

Annual Update Submissions

Changes to Guidance Documents

- **HPMS User Guide**
 - HPMS navigation & technical data entry only
 - Available in HPMS
- **QIP/CCIP Resource Document**
 - More detailed guidance and examples
 - Available on the MA Quality Improvement Program Website

CY 2016 QIP Annual Update Submissions HPMS

Changes to the HPMS Quality Module


- More logical flow in the overall navigation
- More standardized responses (radio buttons)
- For assistance on how to navigate plan user data entry, please refer to the HPMS QIP Technical User Guide
 - The HPMS Technical User Guide is available in HPMS
 - For HPMS technical assistance, please contact the HPMS Help Desk at hpms@cms.hhs.gov
 - For assistance with HPMS access, please e-mail hpms_access@cms.hhs.gov

QIP Annual Update Submissions

- **DO**
 - Implementation of the project
- **STUDY**
 - Analysis of the results
- **ACT**
 - Action plan, i.e. next steps
 - Lessons learned
 - Best practices, i.e. promising approaches
 - Overall Summary of results (3rd QIP Annual Update)

QIP Annual Update: Section (G)

MAO Information

 **HPMS**
Health Plan Management System

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[Contract Management](#) | [Plan Bids](#) | [Plan Formulaires](#) | [Monitoring](#) | [Quality and Performance](#) | [Risk Adjustment](#) | [Data Extract Facility](#)

Home » Quality Improvement Program » Annual Update » A. Information and Main Menu

QIP2 - Data Entry

QIP2 +

QIP - Annual Update 1 Section

Annual Update Selection

A. Medicare Advantage Organization (MAO) Information

MAO Name: EXAMPLE MAO NAME
Contract Number: Z0001
Plan: EXAMPLE PLAN
Parent Organization: EXAMPLE PARENT ORGANIZATION
Project Cycle: Annual Update 1 - 2016
QIP Topic: EXAMPLE QIP TOPIC
MAO Location: 123 Main Street
Arlington, VA 22201

Quality Contact Person

Name: John Smith
Title: Quality Contact
Telephone: 555-555-5555
Email: smith@test.com

Compliance Contact Person

Name: Mr. John Smith
Title: Medicare Compliance Officer
Telephone: 555-555-5555
Email: smith@test.com


Section:

G. Goal and Benchmark [View](#) [Edit](#) [Create PDF](#)
H. Results and Findings [View](#) [Edit](#) [Create PDF](#)
I. Next Steps [View](#) [Edit](#) [Create PDF](#)

[Create PDF for All Sections](#)

Note:
You must select Submit to ensure your submission is official, when all sections are completed.
You will then be asked to attest and receive a confirmation number.

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QIP Annual Update: Do Section (G)

Goal and Benchmark

DO Section (G)

G. Goal and Benchmark

G1. Goal:

G2. Baseline:

G3. Total Enrollment:

G4. Population Description:

G5a. Intervention 1:

G5b. Intervention 2:

G5c. Intervention 3:

G6. Time Frame:

January 1, 2016 through December 31, 2016.

QIP Annual Update: Do Section (G) Barriers/Mitigation Strategies

G7. Barriers Encountered: Yes No

If YES: What barrier(s)? (check all that apply)

- Healthcare Team Issue(s)
- Transportation Issue(s)
- Communication Issue(s)
- Financial Issues
- Non-compliance
- Decline in Condition
- Technology Issue(s)
- External Factor(s)
- Medication Issue(s)
- Knowledge Deficit
- Support Systems Issue(s)
- Other

If YES: Mitigation: How did you address the barrier(s) encountered? (check all that apply)

- Case Management/Care coordination
 - Provider Outreach
 - Culturally appropriate materials
 - Increase enrollee family engagement
 - Information Technology Solutions
 - Healthcare Team Coordination
 - Improve Communication
 - Information Technology
 - Post Hospital Discharge Care
 - Link to Community Resources
 - Other
-

QIP Annual Update: Study Section (H) Results

H. Results and Findings

H1. Results and Findings 1:

H1a. Total Population:

H1b. Number of Enrollees who Received Intervention(s):

H1c. Number of Enrollees who were Eligible to Receive Intervention(s):

H1d. Results and/or Percentage:

QIP Annual Update: Study Section (H) Results

H4. Other Data or Results:

H5. Analysis of Results or Findings:

QIP Annual Update: Act Section (I) Action Plan

HPMS
Health Plan Management System

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Home » Quality Improvement Program » Annual Update - I. Next Steps

QIP2 - Data Entry QIP2 +

QIP - Annual Update 1 Section

Contract Number: Z0001
Plan: EXAMPLE PLAN
QIP Topic: EXAMPLE QIP TOPIC
QIP Title: EXAMPLE QIP TITLE

ACT Section (I)

I. Next Steps

11. Action Plan: (check all that apply)


Revise intervention
 Revise methodology
 Change goal
 Other

12. Action Plan Description:

13. Describe "Best Practices":

14. Describe "Lessons Learned":

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QIP Annual Update: Act Section (I) Best Practices/Lessons Learned

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Home » Quality Improvement Program » Annual Update » I. Next Steps

QIP2 - Data Entry

QIP2

QIP - Annual Update 1 Section

Contract Number: Z0001
Plan: EXAMPLE PLAN
QIP Topic: EXAMPLE QIP TOPIC
QIP Title: EXAMPLE QIP TITLE

ACT Section (I)

I. Next Steps

11. Action Plan: (check all that apply)

Revise intervention
 Revise methodology
 Change goal
 Other

12. Action Plan Description:

13. Describe "Best Practices":

14. Describe "Lessons Learned":

Back Save & Exit

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CMS

QIP Annual Update: Act Section (I)

QIP Final Summary: 3rd Annual Update Only

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QIP2 - Data Entry

QIP2

QIP - Annual Update 3 Section

Contract Number: Z0001
Plan: EXAMPLE PLAN
QIP Topic: EXAMPLE QIP TOPIC
QIP Title: EXAMPLE QIP TITLE

ACT Section (I)

I. QIP Final Summary

11. Did your plan meet the goal of your QIP? (check one)

Yes
 No

11a. If yes, please describe how your plan met the goal:

12. Summary of Overall QIP Results:

13. Describe "Best Practices":

14. Describe "Lessons Learned":

15. Having now completed this QIP, will your plan(s) continue with the changes that have been implemented? (check one)

Yes
 No

16. Please explain how completing this QIP will affect your plan(s) going forward:

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CMS

CCIP Requirements

- MAOs are no longer required to report CCIP activities/progress to CMS. However, MAOs
 - Must comply with CCIP requirements per MA Quality Regulations
 - Must document/track progress internally
- CMS has simplified the CCIP requirements
 - Mirror the QIP requirements
- MAOs may document other aspects of CCIPs

CCIP Requirements

- Barriers
- Mitigation Strategies
- Conduct Proposed Education?
- Results Data
- Analysis of Results
- Action Plan
- Best Practices
- Lessons Learned

MA QIP/CCIP Resources

MA Quality Improvement Program Website

CMS MA QIP/CCIP Resource Document 2016

<https://www.cms.gov/Medicare/Health-Plans/Medicare-Advantage-Quality-Improvement-Program/6QIP.html>

CMS Quality Strategy Goals

<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/QualityInitiativesGenInfo/CMS-Quality-Strategy.html>

HPMS QIP User Guide

<https://hpms.cms.gov/app/login.aspx?ReturnUrl=%2fapp%2fhome.aspx>

HPMS login > Quality and Performance > QIP > Documentation > User Guide

HPMS Help Desk

hpms@cms.hhs.gov or 1-800-220-2028

Medicare Part C Policy Mailbox (website)

<https://dpap.lmi.org>

Questions?

- Please submit any MA/SNP questions to the Medicare Part C Policy Mailbox at:
<https://dpap.lmi.org>
- Please submit any MMP questions to the Medicare-Medicaid Coordination Office at:
mmcocapsmodel@cms.hhs.gov