Quality Measurement and Quality Improvement

Policy #	Policy Recommendations	Required Change/ Recommended Action	Due Date	FY18 Progress Report	Progress Clarification
10.1	are standardized across systems and consistent with national standards and federal requirements, including but not limited to the State Innovation Model (SIM), and 2703 health homes.	MDHHS will detail its plan for working across all administrations; Federal regs. require a "comprehensive quality strategy," which is inclusive of shared metrics.	10.2018	Partailly Complete	MDHHS has expanded the set of shared metrics from the "Follow-up after Hospitalization" to include "Plan All-Cause Readmission" and "Follow-up after Emergency Department Visit for Alcohol and Other Drug". The department is also reviewing seven different measures across MHP/PIHP for possible change and alignment. All measures are HEDIS specifications. There is no change in progress related to the Medicaid administration leading the development of a comprehensive quality strategy.
10.2	MDHHS should convene a workgroup to evaluate existing performance metrics and eliminate metrics that do not align with state and national practice and performance guidelines. Increased emphasis should move to measurement of outcomes from measurement of compliance.				
10.3	standards of performance (commonly known as "site review standards") to which all providers are held accountable by a designated entity (a PIHP, CMHSP or a MHP, but not more than one).	12) If opportunities for improvement are identified, widths will		Not Started Not Started	The 1115 waiver is still being developed and has not been approved as of this date therefore this will need to be addressed once a revised 1115 waiver is approved. MDHHS continues ongoing conversations with the Center for
		assigned responsibility and timeframe for completion). 3) Finalize changes to the site review protocol (pending 115 waiver).	Pending 1115 waiver	Not Started	Medicare and Medicaid (CMS).