

# Getting the Most Out of Your Medicare HOS Reports

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# Today's Web Seminar

## ■ Goal

- ◆ Maximize the use of your Medicare Health Outcomes Survey (HOS) reports to
  - ◆ Provide information about the health of your beneficiaries
  - ◆ Develop quality improvement (QI) and disease management (DM) programs

## ■ Topics

- ◆ HOS overview
- ◆ Baseline reports
- ◆ Performance Measurement reports

# What is the Medicare HOS?

- The Medicare HOS

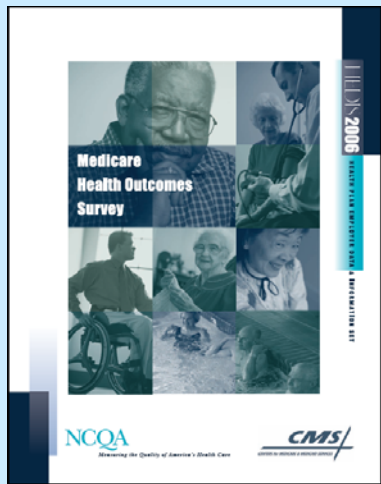
**Assesses each Medicare Advantage (MA) plan's ability to maintain or improve the physical and mental health functioning of its Medicare beneficiaries over a two-year period**

- Launched in 1998
- First Medicare managed care outcomes measure
- More than 1.8 million beneficiaries surveyed to date

# Survey Methodology

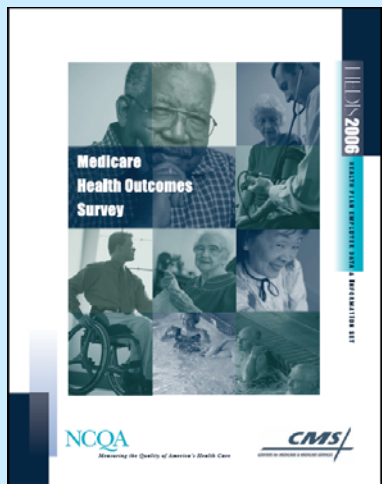
- MA members are surveyed at baseline, and respondents are resurveyed two years later
  - ◆ A cohort comprises respondents from one baseline and associated follow-up
- Baseline cohort of 1000 beneficiaries randomly sampled from each participating plan
  - ◆ In plans with less than 1000 members, all MA beneficiaries are sampled
- Survey mailed to baseline sample
  - ◆ Telephone follow-up of non-respondents

# Survey Content: Health Status



- 36-item health survey
  - ◆ Eight subscales
    - ◆ Physical health status (PCS)
    - ◆ Mental health status (MCS)
- Activities of daily living (ADLs)
- Healthy days
- Clinical symptoms
- Chronic medical conditions
- Depression screen

# Survey Content: HEDIS® Measures

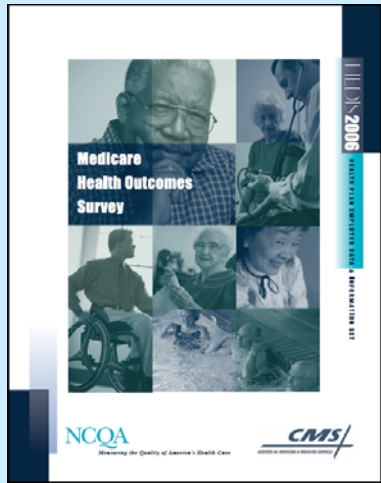


- Urinary Incontinence (UI)
- Physical Activity (PA)

The Health Plan Employer Data and Information Set (HEDIS) is a registered trademark of NCQA.

HEDIS results consist of the responses of all baseline and follow-up respondents taking the survey during a calendar year.

# Other Survey Content



- Demographics
  - ◆ Age
  - ◆ Gender
  - ◆ Race
  - ◆ Income
  - ◆ Marital status
  - ◆ Education
  - ◆ Housing category
- Smoking status
- Proxy status

# HOS Version 2 (HOSv2)

- Implemented in 2006
  - ◆ 12-item health survey (VR-12)
  - ◆ Two additional HEDIS survey items
    - ◆ Osteoporosis
    - ◆ Management of Falls
- 2007 reports – new report format
  - ◆ More user-friendly
  - ◆ New information



# HOS Reports

- Baseline report
  - ◆ Cross-sectional: provides a snapshot of physical and mental health functioning of Medicare beneficiaries **at a single point in time**
- Performance Measurement report
  - ◆ Longitudinal: contains Performance Measurement results that reflect a health plan's ability to maintain or improve the physical and mental health functioning of its Medicare beneficiaries **over a two-year period**

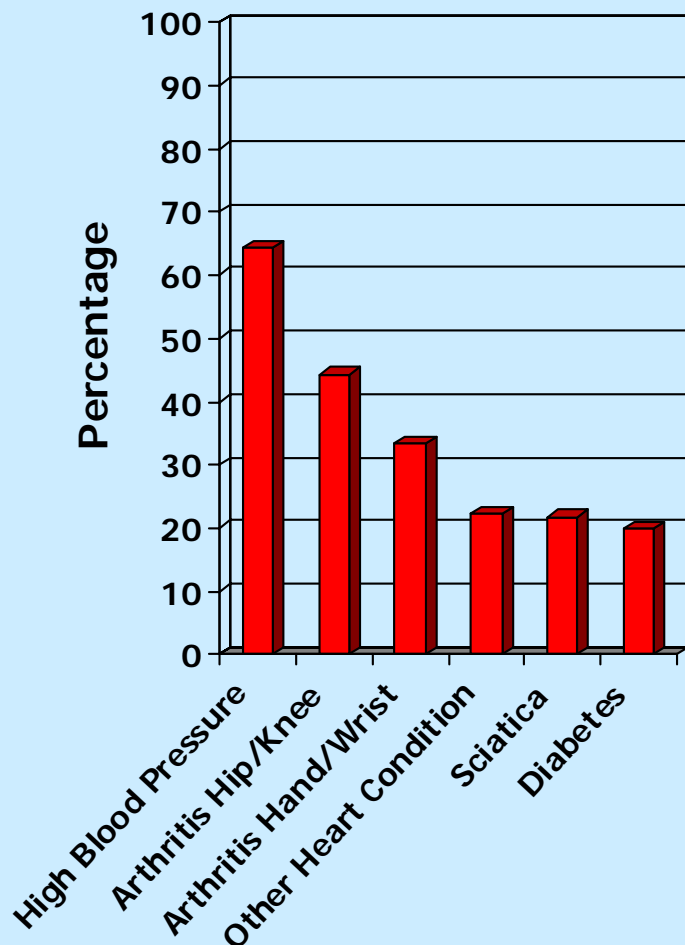
# What's in the Baseline Report?

- Demographic profile of your plan's beneficiary population
- Physical (PCS) and mental (MCS) status
- Depression screen
- Healthy days – since Cohort 7 (2004)
- HEDIS measures
  - ◆ Urinary Incontinence (UI) – since Cohort 7 (2004)
  - ◆ Physical Activity (PA) – since Cohort 8 (2005)
- Chronic medical conditions
- ADLs
- Supplemental (e.g., proxy status, health status subscale scores, etc.)

# How Can You Use Your Baseline Report?

- Identify the prevalence of chronic conditions
- Evaluate the percentage of patients reporting that providers are
  - ◆ Discussing Physical Activity (PA)
  - ◆ Treating Urinary Incontinence (UI)
- Examine the relationship between the number of unhealthy days reported and a positive depression screen
- Review the percentage of beneficiaries reporting difficulty with ADLs
- Monitor changes in percentages or rates over time as measures of QI success

# What is the Incidence of Chronic Medical Conditions?



What does this example tell us?

- 64% report high BP
- 30 to 45% report at least one type of arthritis
- 20% report diabetes and more than 20% report 'other heart' conditions

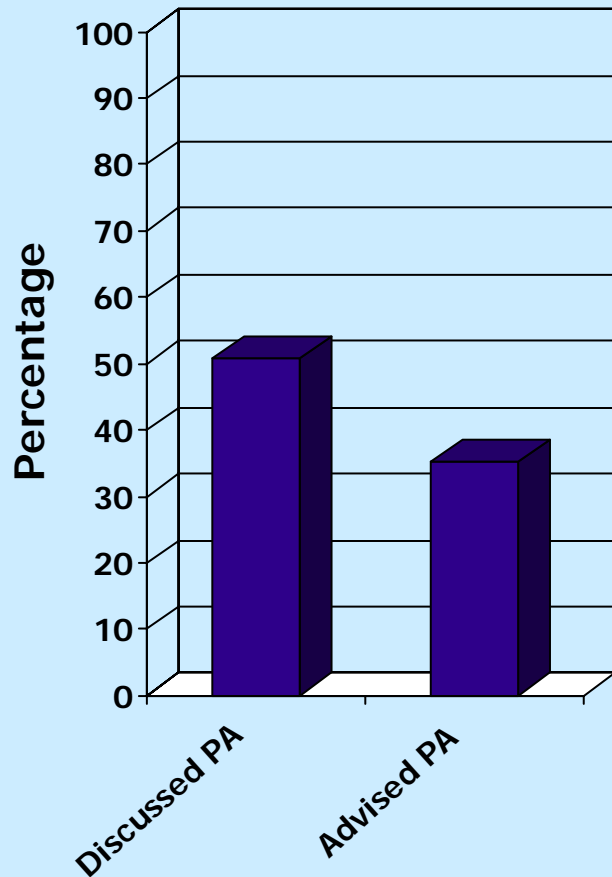
How can it be used for QI ?

- Focus on diagnosis of diabetes, high BP, and 'other heart' to ameliorate or prevent costly decline
- Examine availability and utilization of prevention, treatment, and DM processes - adjust if indicated

# Results From the HEDIS Measures

- Currently Urinary Incontinence (UI) and Physical Activity (PA)
  - ◆ Osteoporosis and Management of Falls in reports starting in 2007
- Respondents include all baseline and follow-up respondents who took the survey during a calendar year
- Results are reported as rates
- Results are not reported (N/A) for plans with less than 100 in denominator
- Plan, state, national, and regional results are presented

# Are Providers Discussing and Advising Physical Activity?



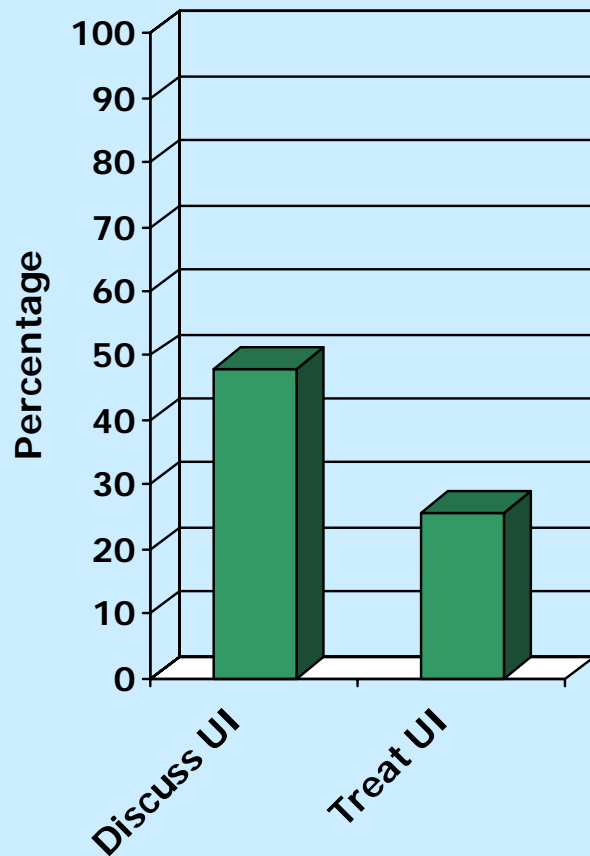
What does this example tell us?

- Only 50% discuss PA
- About 35% advise to start, increase, or maintain PA

How can it be used for QI?

- Develop and implement standards of care that emphasize discussing and advising PA or exercise during physical exams and office visits

# Are Providers Discussing and Treating Urinary Incontinence?



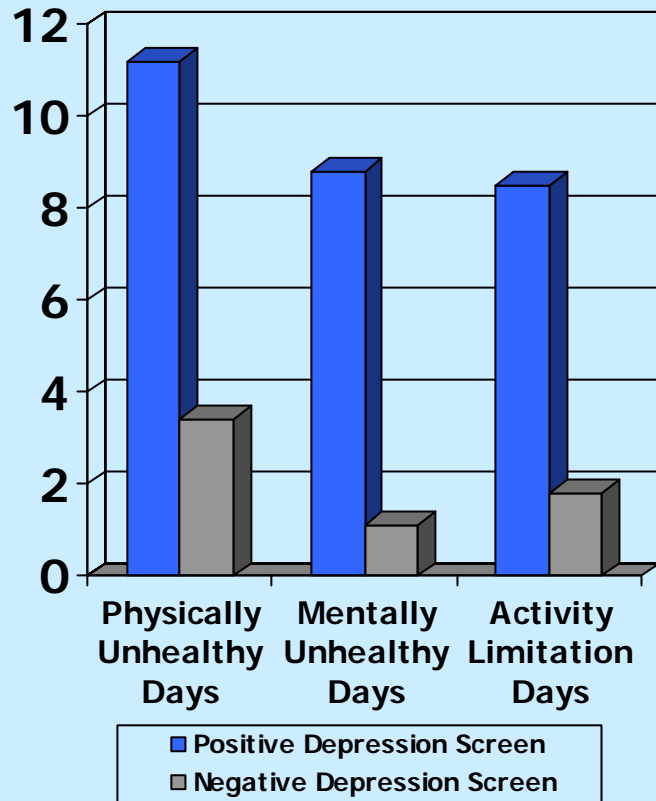
What does this example tell us?

- Less than 50% of providers discuss problematic UI
- About 25% of providers treat UI

How can it be used for QI?

- Develop and implement standards of care for all seniors that include talking about, diagnosis of, and treatment of UI
- Develop and implement prevention and DM programs for UI

# How Is Depression Related to Number of Unhealthy Days?



What does this example tell us?

- Positive screen for depression = many more unhealthy days (than negative depression screen)

What doesn't this tell us?

- Direction of effect: Being depressed causes more unhealthy days, or vice versa, or third factor causes both

How can it be used for QI?

- Screen for and treat depression to reduce functional impairment
- Develop and implement prevention, treatment, and DM for common conditions of seniors (including depression) - *may* decrease unhealthy days and *may* decrease depression



# What's in the Performance Measurement (PM) Reports?

- Physical and mental health performance measurement results for your plan
  - ◆ Compared to all plans in your state
  - ◆ Compared to all plans in the nation
- Demographic profile of your plan's beneficiary population
- Healthy days measures

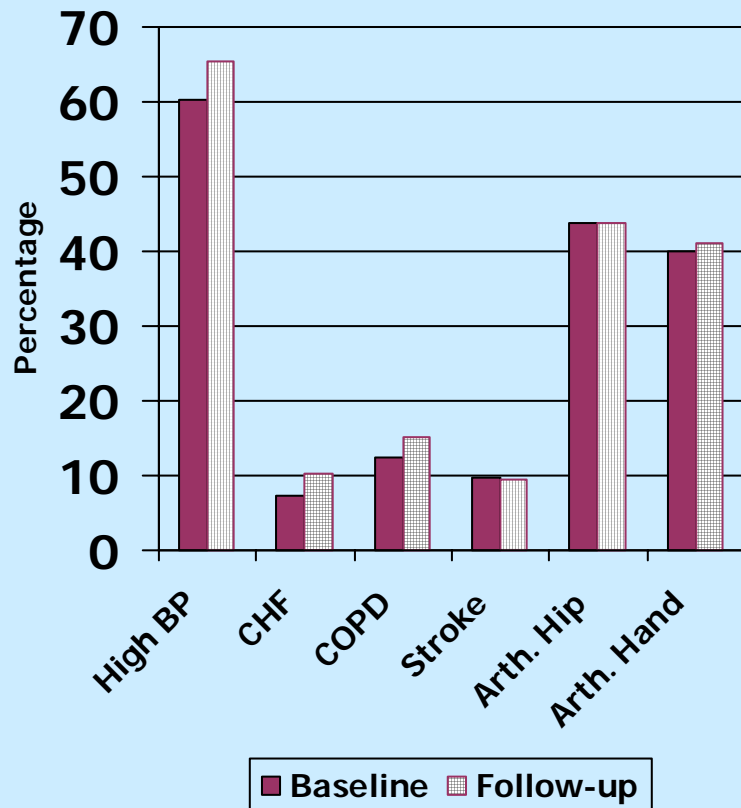
# What Else Is in the Performance Measurement (PM) Reports?

- National two-year trends and baseline/follow-up results for
  - ◆ Chronic medical conditions
  - ◆ ADLs
  - ◆ Positive depression screen
- Health questions
  - ◆ General health
  - ◆ Health transition
  - ◆ Comparative health
- Proxy status

# How Can You Use the PM Reports?

- Examine average changes in self-reported health from baseline to follow-up for a single cohort (plan, state, and national)
  - ◆ General health, health transition, and comparative health
  - ◆ Prevalence of chronic conditions
  - ◆ Number of comorbid chronic conditions
  - ◆ Impairment in ADLs
  - ◆ Others (e.g. positive depression screen, frequency of chronic conditions, etc.)
- Explore average changes in health status over time for multiple cohorts (plan, state, and national)
  - ◆ Look at changes in the prevalence of chronic conditions
  - ◆ Examine changes in difficulty with ADLs
  - ◆ Observe changes in number of chronic conditions

# Has the Prevalence of Chronic Conditions Changed since Baseline?



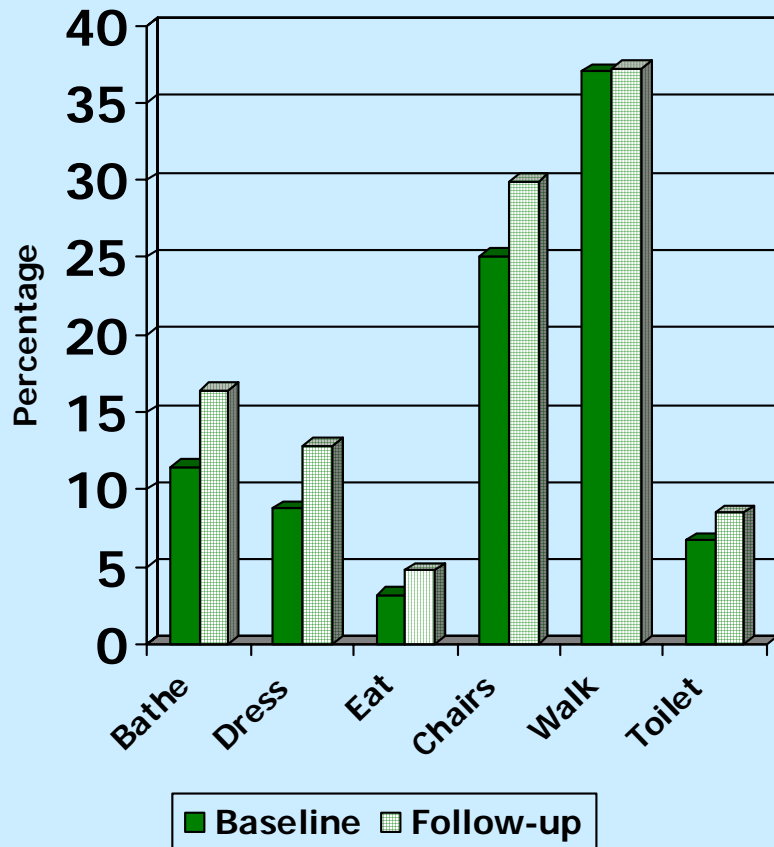
What does this example tell us?

- Three conditions with known cost and health implications show increases:
  - ◆ High BP, CHF, and COPD

How can it be used for QI?

- Focus standards of care for seniors on treatment of High BP, CHF, and COPD
- Examine availability and utilization of prevention, treatment, and DM processes - adjust if indicated

# Has Difficulty with ADLs Changed since Baseline?



What does this example tell us?

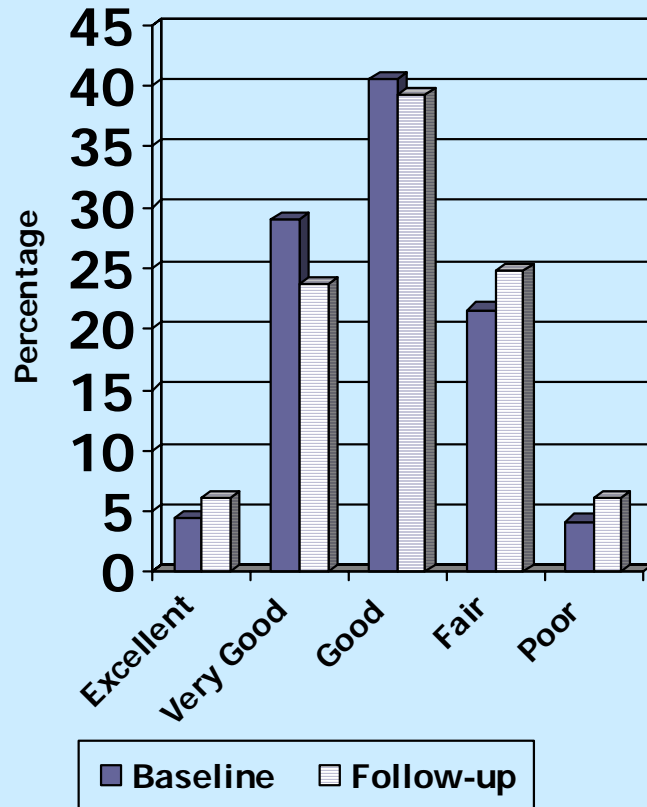
- Notable increase in respondents with difficulty bathing, dressing and in/out of chairs

How can it be used for QI?

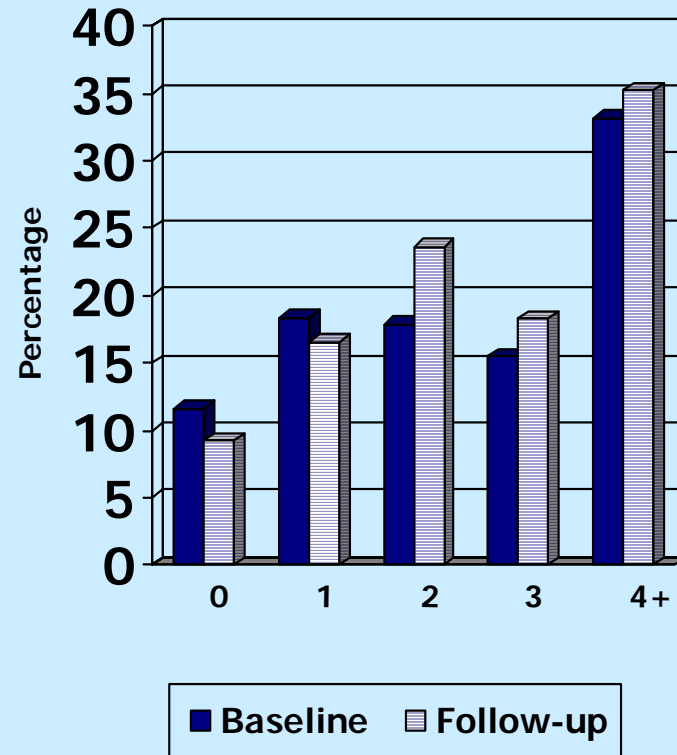
- Expand focus of usual care from illness and diagnosable disorders to include ADLs in standards of care
- Develop programs to help older members maintain or improve ADL function

# Answer Other Questions

## Self Reports of General Health

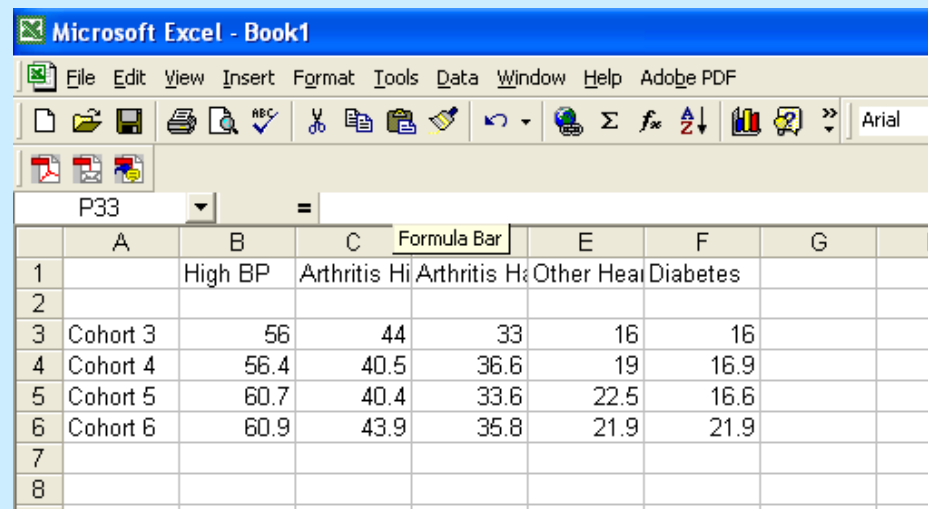


## Chronic Conditions



# How Do Chronic Conditions Change Over Time, Across Cohorts?

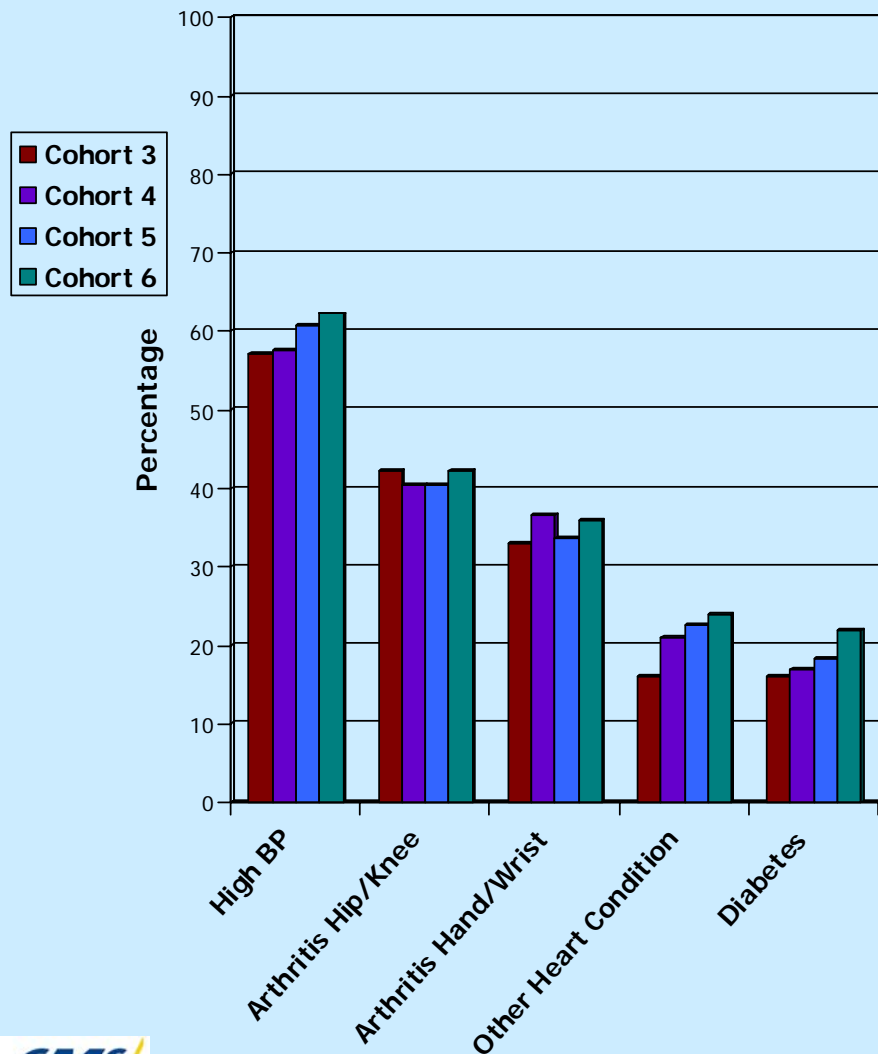
- First, use the last 4 or 5 PM reports—Cohorts 3 - 6
- Find “Percent Distribution of Chronic Medical Conditions” supplemental figure for each cohort
- Identify 5-6 most common conditions
- Enter the numbers for each cohort into a spreadsheet and create chart



The screenshot shows a Microsoft Excel spreadsheet titled "Microsoft Excel - Book1". The spreadsheet has a menu bar (File, Edit, View, Insert, Format, Tools, Data, Window, Help, Adobe PDF) and a toolbar with various icons. The active cell is P33. The spreadsheet data is as follows:

	A	B	C	Formula Bar	E	F	G	H
1		High BP	Arthritis Hi	Arthritis H:	Other Hear	Diabetes		
2								
3	Cohort 3	56	44		33	16	16	
4	Cohort 4	56.4	40.5		36.6	19	16.9	
5	Cohort 5	60.7	40.4		33.6	22.5	16.6	
6	Cohort 6	60.9	43.9		35.8	21.9	21.9	
7								
8								

# What Are the Changes in Chronic Conditions Across Cohorts?



What does this example tell us?

- Arthritis shows no trend
- High BP, diabetes, and 'other heart' show increasing number of beneficiaries reporting these conditions

How can it be used for QI?

- Focus care on prevention, early diagnosis and treatment, and disease management
- Emphasize developing, and increasing patient participation in prevention and DM programs for conditions with increasing incidence



# Other Questions Your HOS Reports Can Answer

- Is the physical and/or mental health status of your MA members changing over time?
- Is the demographic composition of your MA enrollees changing?
- With what ADLs do your MA members need assistance?
- How do your MA beneficiaries compare to other plans in your state? To all plans participating in HOS?
  - ◆ (e.g., number of unhealthy days, demographic composition, number of chronic medical conditions, ADLs, depression screen results, etc.)

Please!!

Make use of the valuable information contained in your HOS Baseline and Performance Measurement Reports-- you'll be glad you did.

Thank you!

# For Further Information

- A recording of today's web conference will be posted at
  - ◆ <https://ifmcevents.webex.com>
  
- HOS Web Site
  - ◆ [www.hosonline.org](http://www.hosonline.org)
  
- HOS Technical Support
  - ◆ Medicare HOS Information and Technical Support  
Telephone Line: 1-888-880-0077
  - ◆ E-mail address: [hos@azqio.sdps.org](mailto:hos@azqio.sdps.org)