Strategic Overview for the North Dakota Medicaid Quality Strategy
The Quality Strategy framework drives **data-driven decision making** that guides strategic business decisions by communicating the vision, goals, and initiatives that reflect the **six dimension of healthcare quality**.

The Quality Strategy is intended to **guide** the North Dakota Medicaid program by establishing clear aims, goals, and objectives to drive quality improvements in care delivery by measuring progress using quality performance metrics.

The Quality Strategy sets a **clear direction for priority interventions** and details the standards and mechanism for holding accountability for desired quality performance and health outcomes.

The Quality Strategy is a **roadmap** through which Medical Services will use the care management infrastructure to facilitate improving care delivery and outcomes through programmatic innovations, whole-person centered care, health equity, provider engagement, and to address health related unmet resource needs.

The vision is refined by using the Quadruple Aim to **optimize performance** by establishing clear aims and goals to drive quality improvements.
North Dakota’s Quadruple Aim

Included within each of these four aims is a series of goals, intended to highlight key areas of expected progress and quality focus.

Together, these aims create a framework through which North Dakota defines and drives the overall vision for advancing the quality of care provided to Medicaid members.

These aims and goals were designed to align closely with CMS’s Quality Strategy, adapted to address North Dakota’s local priorities, challenges, and opportunities for its Medicaid program.

- **Healthier Populations**: improve the health status of North Dakotans by promoting healthy lifestyles, preventive care, disease management, and disparity elimination.
- **Better Outcomes**: improve access to quality healthcare at an affordable price to improve outcomes.
- **Better Experience**: enhance member and provider experience.
- **Smarter Spending**: increase effectiveness and efficiency in the delivery of healthcare programs and ensure value in healthcare contracts.
Quality Strategy Aims and Goals

Included within each of these four aims is a series of goals, intended to highlight key areas of expected progress and quality focus. This creates a framework through which North Dakota defines and drives the overall vision for advancing the quality of care provided to Medicaid members.

<table>
<thead>
<tr>
<th>Aims</th>
<th>Goals</th>
<th>Metrics</th>
</tr>
</thead>
</table>
| Aim 1: Healthier Populations | **Goal 1.1:** Improve Behavioral Health for Members  
**Goal 1.2:** Improve Outcomes for Members with Substance Use Disorder  
**Goal 1.3:** Improve Health for Members with Chronic Conditions | FUA-AD, FUH-AD, FUM-AD  
IET-AD  
CBP-AD, HBD-AD, PQI01-AD, PQI05-AD |
| Aim 2: Better Outcomes     | **Goal 2.1:** Enhance Provider Support  
**Goal 2.2:** Ensure Access to Care                                                             | CPA-AD                                        |
| Aim 3: Better Experience   | **Goal 3.1:** Enhance Member Experience                                                       | CPA-AD                                        |
| Aim 4: Smarter Spending     | **Goal 4.1:** Focus on Paying for Value                                                       | PCR-AD                                        |

*Each goal has targeted metrics to measure progress, as well as outlined interventions to advance the goals. This approach provides a data-driven decision making to drive interventions, inform priority setting, and facilitate efficient and effective distribution of resources.*
Quality Performance Measures
Number of Child Core Set Measures Reported by North Dakota

Sources: Mathematica analysis of NACCHO reports for the FFY 2019 reporting cycle as of May 31, 2020; Form CMS-416 reports for the FFY 2019 reporting cycle as of July 1, 2020; and Centers for Disease Control and Prevention Wide-ranging Online Data for Epidemiologic Research (CDC WONDER) data for calendar year 2018.
Notes: The term “states” includes the 50 states and the District of Columbia. The 2019 Child Core Set includes 25 measures. This chart excludes the CLABSI measure, which is obtained from CDC’s National Healthcare Safety Network.

*Data retrieved from Medicaid.gov

Child Chart Pack: Quality of Care for Children in Medicaid: Findings from the 2019 Child Core Set Chart Pack
Child Chart Pack: Quality of Care for Children in Medicaid and CHIP: Findings from the 2020 Child Core Set Chart Pack
Number of Adult Core Set Measures Reported by North Dakota

Notes: The term “states” includes the 50 states and the District of Columbia.
The 2019 Adult Core Set includes 33 measures.

*Data retrieved from Medicaid.gov
Adult Chart Pack Quality of Care for Adults in Medicaid: Findings from the 2019 Adult Core Set Chart Pack
Adult Chart Pack Quality of Care for Adults in Medicaid: Findings from the 2020 Adult Core Set Chart Pack
Health Care Quality Measures for Medicaid:

**Child Core Set** is a set of measures encompassing preventative health, maternal health, behavioral health, dental health, and experience of care.

*Mandatory State Reporting for all Child Core Set Measures by 2024*

**Adult Core Set** is a set of measures encompassing preventative health, maternal health, behavioral health, and experience of care.

*Mandatory State Reporting for all Adult Core Behavioral Health Measures by 2024*

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**Number of Child Core Set Measures Reported by ND Medicaid**

<table>
<thead>
<tr>
<th>Measurement Year</th>
<th>Total Measures</th>
<th>Total Reported</th>
<th>Total Not Reported</th>
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<tbody>
<tr>
<td>2018</td>
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</tr>
<tr>
<td>2019</td>
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<td>13</td>
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<tr>
<td>2020</td>
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</tr>
<tr>
<td>2021</td>
<td>23</td>
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</table>

**Number of Adult Core Set Measures Reported by ND Medicaid**

<table>
<thead>
<tr>
<th>Measurement Year</th>
<th>Total Measures</th>
<th>Total Reported</th>
<th>Total Not Reported</th>
</tr>
</thead>
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<td>2021</td>
<td>32</td>
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</tbody>
</table>

*Adult Core Set Data includes both Medicaid and Medicaid Expansion*
**Posted the Following Documents to the ND Medicaid website**

- ND Medicaid Quality Strategy
- Adult and Child 2020 Performance Measures Charts
- Quality PowerPoint Presentation

**Collaborative Meetings**

<table>
<thead>
<tr>
<th>Stakeholders/Agencies</th>
<th>Purpose of Meeting</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicaid Medical Advisory Committee</td>
<td>Quality Presentation</td>
</tr>
<tr>
<td>Foster Care, Children &amp; Family Services, and Medical Services</td>
<td>Performance Measures for Medicaid Children and Foster Care</td>
</tr>
<tr>
<td>Community HealthCare Association of the Dakotas &amp; BCBS</td>
<td>Care Coordination: Health Homes, Patient Centered Medical Homes</td>
</tr>
<tr>
<td>North Dakota Hospital Association and Hospitals</td>
<td>Value-Based Purchasing Program</td>
</tr>
<tr>
<td>CMS Oral Health Affinity Group</td>
<td>Technical Assistance from CMS to improve Fluoride Varnish application rates for children enrolled in Medicaid and CHIP ages 0-20</td>
</tr>
<tr>
<td>North Dakota Oral Health Coalition</td>
<td>Medical-Dental Integration: Topical Fluoride Varnish during Well-Visit</td>
</tr>
<tr>
<td>Department of Public Instruction</td>
<td>Preventive and Developmental Screenings and eligible children being connected to early intervention services</td>
</tr>
<tr>
<td>Early Childhood</td>
<td>Administer National Core Indicator Survey</td>
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<tr>
<td>Aging Services and Developmental Disabilities</td>
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<tr>
<td>DoH Healthy &amp; Safe Communities</td>
<td>Standing meeting to collaborate in areas of overlap between Title V, Health Tracks, Maternal Health, and NDHIN</td>
</tr>
<tr>
<td>Special Health Services</td>
<td></td>
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<tr>
<td>NDDHHS Quality Workgroup: Integration Leadership Team</td>
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<tr>
<td>DHS – DoH Leads</td>
<td>Leadership Readiness Assessment for Organizational Culture of Quality Propose Quality Governance Structure</td>
</tr>
<tr>
<td>Operations &amp; Customer Experience</td>
<td></td>
</tr>
<tr>
<td>Program Integration</td>
<td></td>
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</table>
Next Steps

• **Quality Improvement Resources**
  - Day to day needs: access to resources and tools

• **Procurement of a new EQRO contract**
  - Scope of work for both MCO and FFS
  - Administration of Quality-of-Care Surveys for FFS
  - Focus Studies & PIPs
    - Maternal Focus Study- aligns with DoH-PRAMS project for Maternal-Infant Health & Postpartum Care Coverage Extension to 12 months
    - Drafting a comprehensive Medicaid Quality Strategy aligning Medicaid FFS and Medicaid Expansion programs

• **VBP – Health Systems**
  - Reports-Scorecards-Dashboards
  - Quality Committee to recommend measures
  - Outreach and Support to provider groups

• **Improving Healthcare Quality and Reducing Cost**
  - Workgroups
    - State Level Care Coordination – better coordinating care and linking people to needed services
    - Health Tracks Redesign – PCMH
    - Maternal Health – Postpartum Care coverage extension to 12 months

  - Child and Adolescent Wellness
    - Data- Gap in Care Reports for Well-Visits and Dental Visits
    - Oral Health – Primary Care Integration Model – incorporating Fluoride Varnish Application during Well-Visits
    - Partnership with BCBS and SHP Quality

  - ND Oral Health Coalition
    - Member of Steering Committee
    - Present Medicaid Oral Health Data to Stakeholders
    - Partnership with CHAD, BCBS, and SHP

• **Administer the Leadership Readiness Assessment for Organizational Culture of Quality**
  - Propose a Centralized Quality Structure
  - Propose a State Quality Strategy that aligns agencies’ Quality Plans