

From Data Sharing to Incentivizing a Viral Suppression Performance Measure: Collaborating with Medicaid in Louisiana

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Disclosures

Presenter(s) has no financial interest to disclose.

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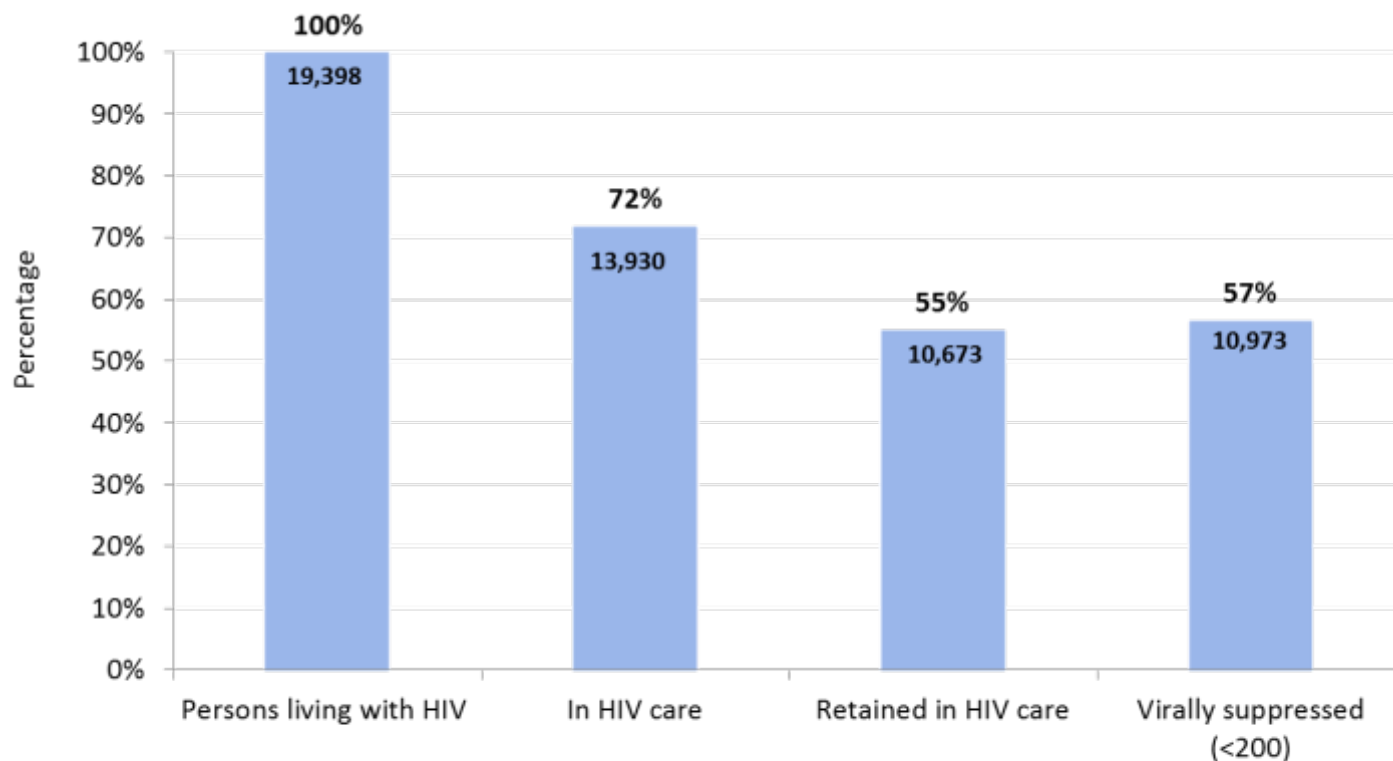


Learning Objectives

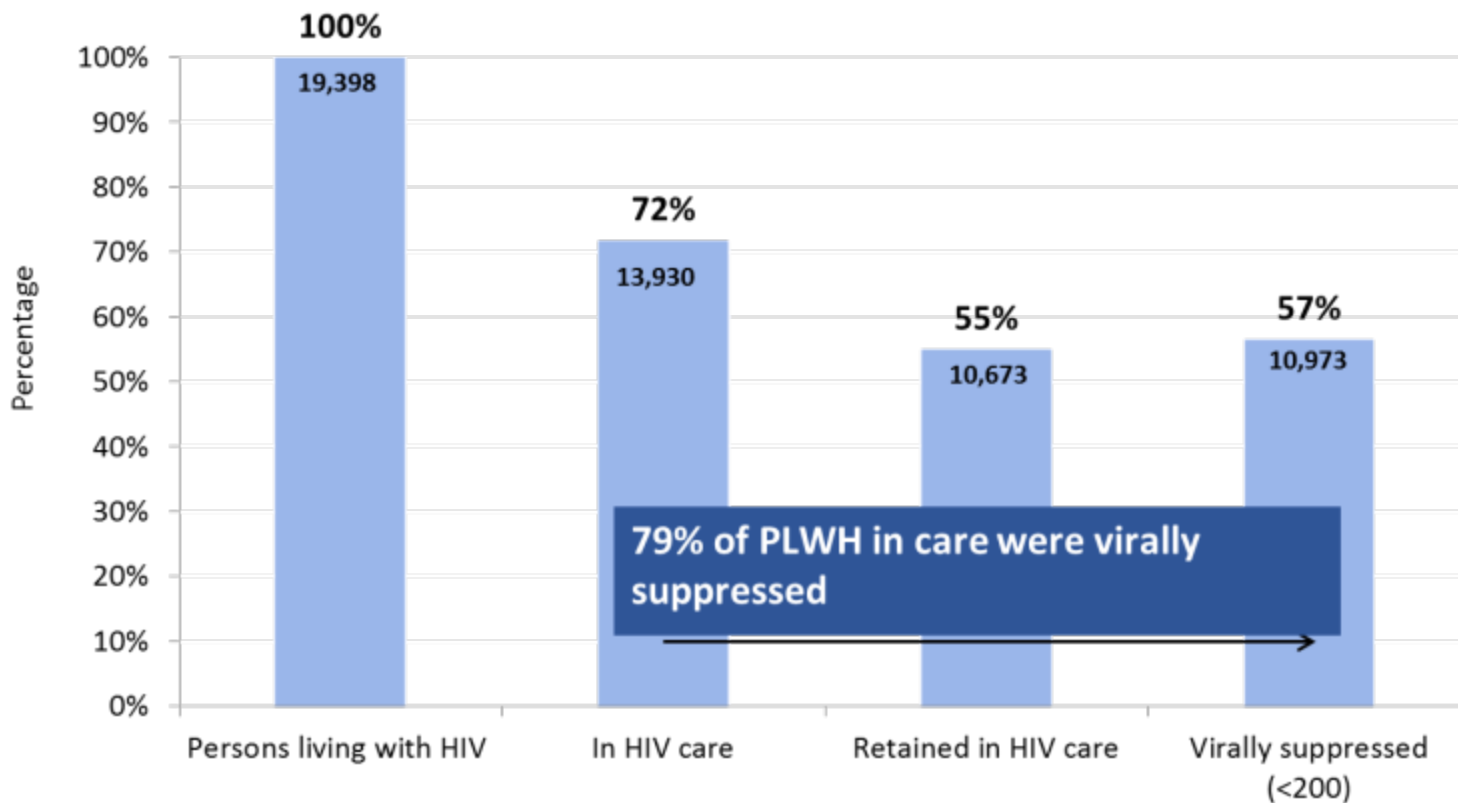
At the conclusion of this activity, the participant will be able to:

1. Describe methods utilized to strengthen collaboration with State Medicaid Office
2. Summarize data sharing methods and describe analyses to determine viral suppression performance measure
3. Identify benefits of collaborating with Medicaid to improve linkage to care and viral suppression rates

HIV Continuum of Care Louisiana, 2015



HIV Continuum of Care Louisiana, 2015





Louisiana Medicaid

- Both Office of Public Health and Bureau of Health Services Financing (Medicaid) under Louisiana Department of Health
- Separate application process for RW and Medicaid services
- Non-expansion state until July 1, 2016
- Medicaid program – new Name in 2016



OPH/Medicaid Data Sharing Agreement

- Historically a few OPH Programs had negotiated their own data sharing agreements with Medicaid, but many programs had no access to Medicaid data
- Change in leadership at Medicaid three years ago facilitated process to establish an agency-wide data sharing agreement
- Support of OPH Assistant Secretary
- Staff had moved from Medicaid to OPH and had established relationships
- Process took only 6 months

OPH/Medicaid Data Sharing Agreement

- Signed data sharing agreement in Feb 2014
- All users complete an annual “Data Sharing User Agreement”

DATA SHARING AGREEMENT
LOUISIANA DEPARTMENT OF HEALTH AND HOSPITALS (DHH),
BUREAU OF HEALTH SERVICES FINANCING (BHSF),
AND
OFFICE OF PUBLIC HEALTH (OPH)

I) PURPOSE

The Department of Health and Hospitals (DHH), through both the Bureau of Health Services Financing (BHSF) and the Office of Public Health (OPH), will exchange Medicaid claims and eligibility data and public health data and statistics. This exchange of information will assist in the administration and evaluation of Louisiana Medicaid and public health services. The data will only be used for program planning, implementation, administration, research, and analytical purposes and will not be used to determine eligibility. This agreement will define and permit the reporting exchange between BHSF and OPH to address the provision of personal health services, as well as other core public health functions.

Healthy Louisiana MCO VL Measure

- Based on HRSA HAB Performance Measure



HIV/AIDS Bureau Performance Measures



Performance Measure:	HIV Viral Load Suppression	National Quality Forum #: 2082
Percentage of patients, regardless of age, with a diagnosis of HIV with a HIV viral load less than 200 copies/mL at last HIV viral load test during the measurement year		
Numerator:	Number of patients in the denominator with a HIV viral load less than 200 copies/mL at last HIV viral load test during the measurement year	
Denominator:	Number of patients, regardless of age, with a diagnosis of HIV with at least one medical visit in the measurement year	
Patient Exclusions:	None	
Data	1. Does the patient, regardless of age, have a diagnosis of HIV? (Y/N) <ul style="list-style-type: none"> a. If yes, did the patient have at least one medical visit during the measurement 	



Incentive-based Performance Measures

- Healthy Louisiana (Medicaid) Managed Care Organizations have eight incentive-based performance measures
- Viral load measure included in new RFP in 2014
- Plans will receive \$250,000 annually if VL measure is achieved

Identifier	Measure	Measure Description	Target Population	Condition	Target for Improvement
NQF #2082 (HIV) \$\$	HIV Viral Load Suppression	Percentage of patients, regardless of age, with a diagnosis of HIV with an HIV viral load less than 200	Chronic Disease	HIV	54.34

How were we able to add a VL incentive-based measure?

- Very helpful to have a “champion” at Medicaid
- OPH/Medicaid have monthly meetings to discuss joint projects
 - STD/HIV Program staff very involved
- Support from OPH Leadership
 - Had discussed viral load measure/importance of viral suppression at OPH strategic planning meetings
- Started out as a PIP (Performance Improvement Plan)
 - Evolved into an incentive-based measure

Louisiana HIV Surveillance Data

■ Complete

- Beginning in 1993, HIV names-based reporting required
- Since 1999, all CD4/VL values have been reportable
- All public/private labs are reporting (except VA)

■ Timely

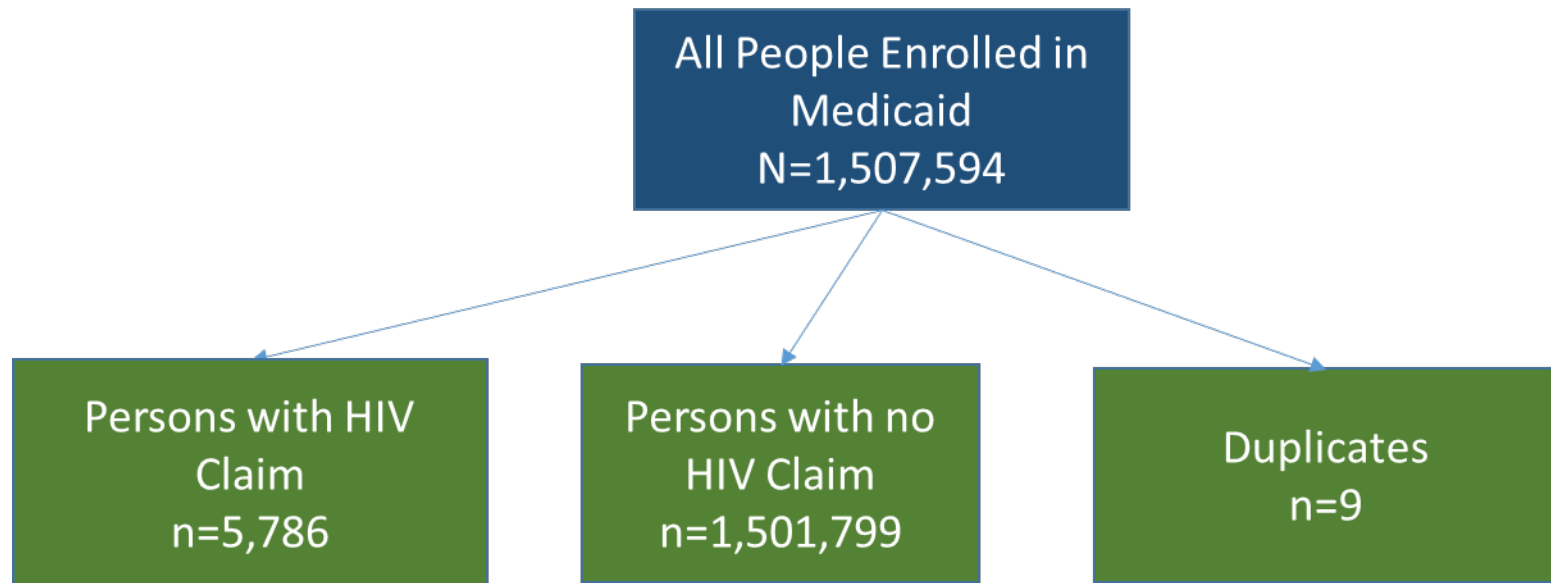
- 90% of labs are reported electronically
- Large laboratories report daily

Medicaid VL Measure

OPH/Medicaid Match

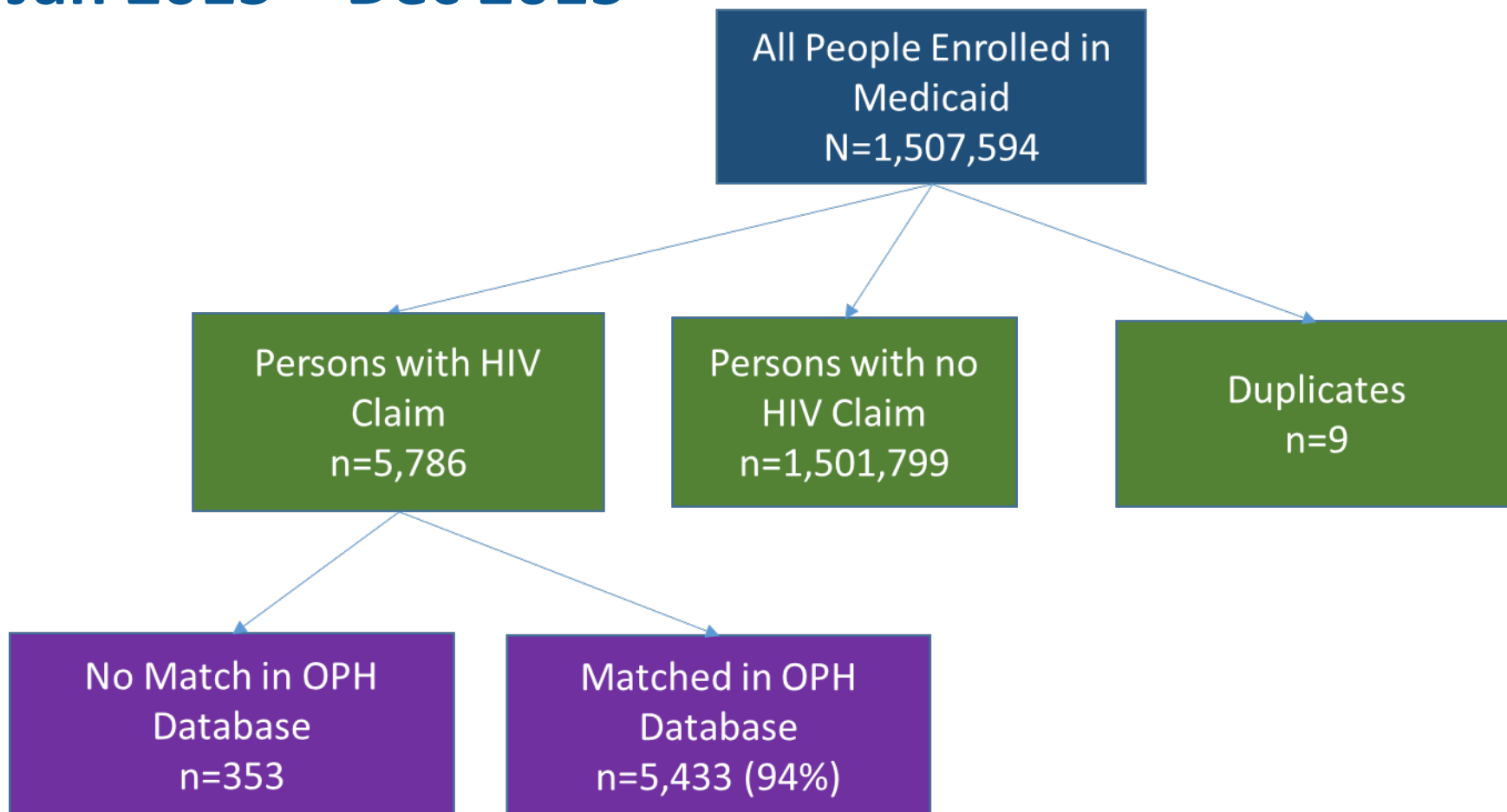
- Conducted an initial match between Medicaid and OPH HIV Surveillance data in July 2014
 - Medicaid provided all recipients with an HIV-related diagnosis code
- Medicaid determined the VL suppression target of 54.34%
(Target should be higher!)
- Conducted a second match in January 2015
 - Medicaid provided all recipients who were enrolled as of December 2014
 - Included the plan name and a field “Did recipient have an HIV-related claim in 2014?”

Results of Medicaid and HIV Data Match Jan 2015 – Dec 2015



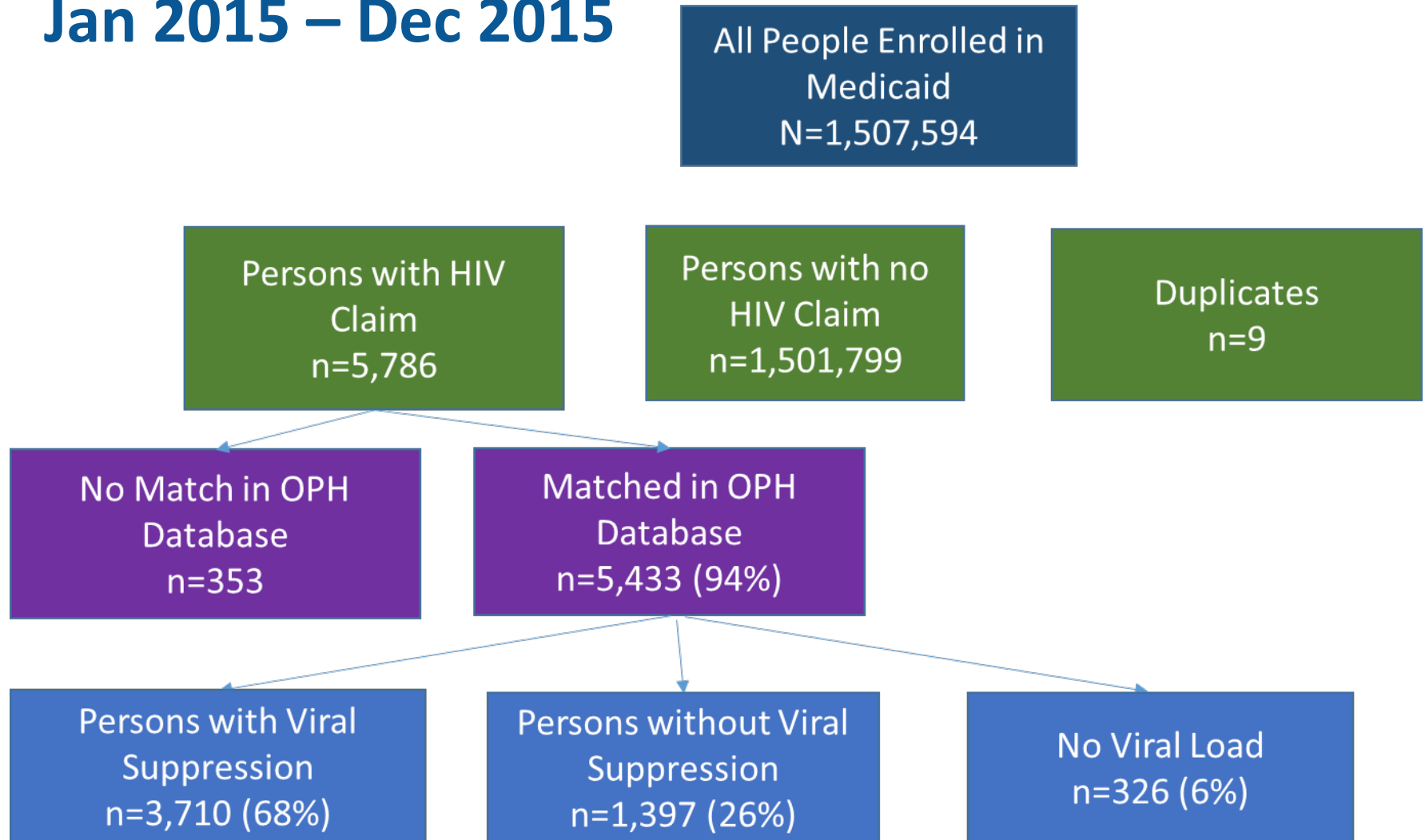
Results of Medicaid and HIV Data Match

Jan 2015 – Dec 2015



Results of Medicaid and HIV Data Match

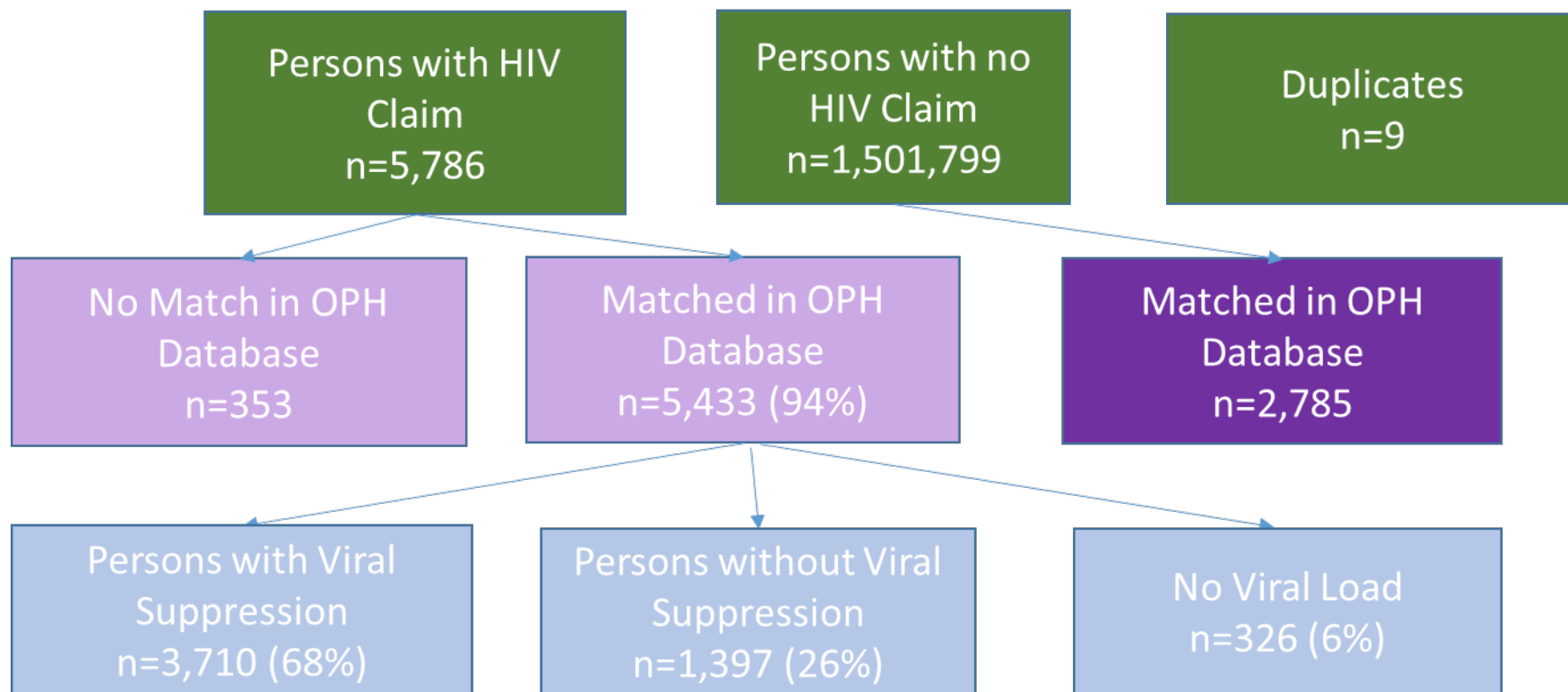
Jan 2015 – Dec 2015



Results of Medicaid and HIV Data Match

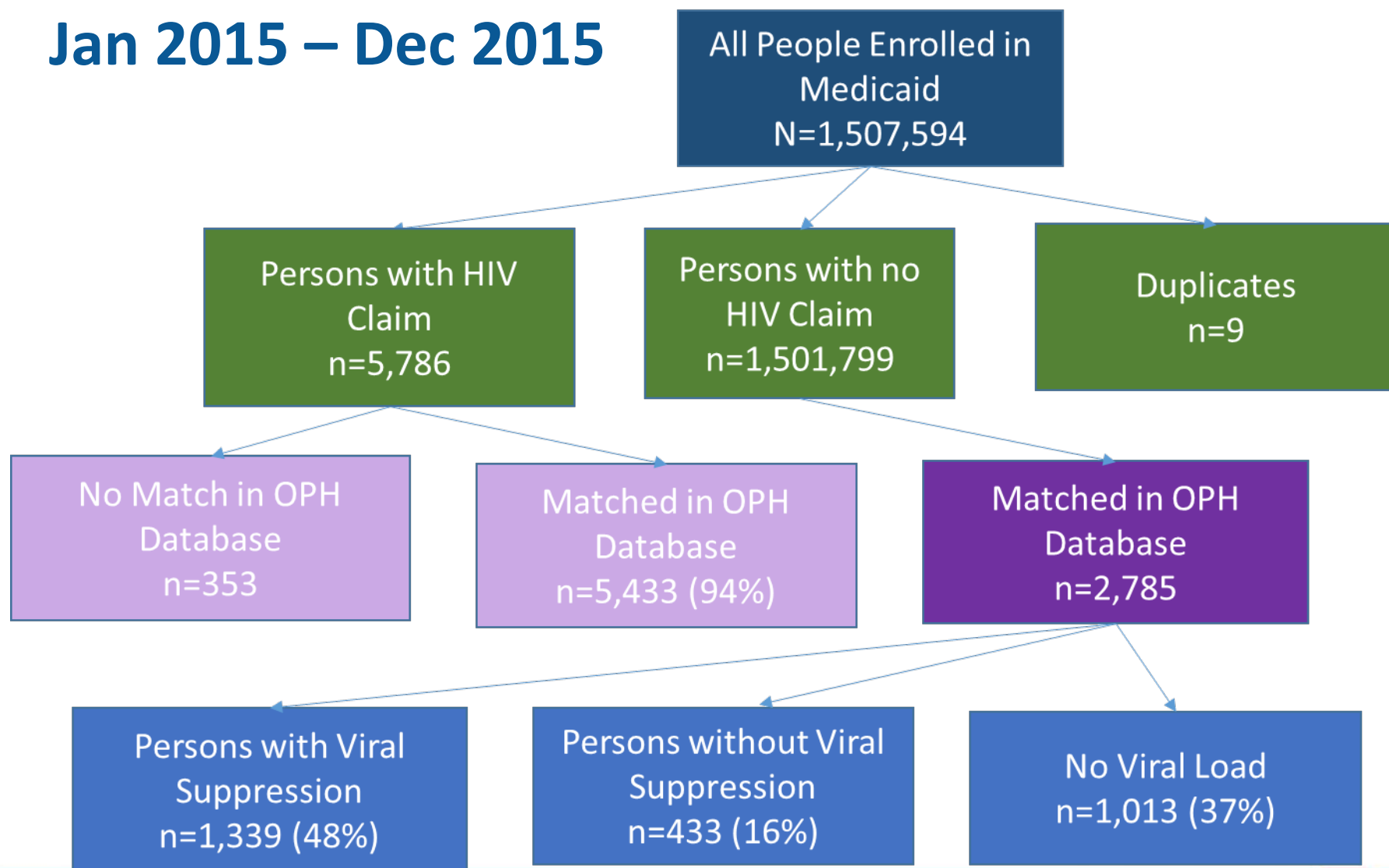
Jan 2015 – Dec 2015

All People Enrolled in
Medicaid
N=1,507,594



Results of Medicaid and HIV Data Match

Jan 2015 – Dec 2015

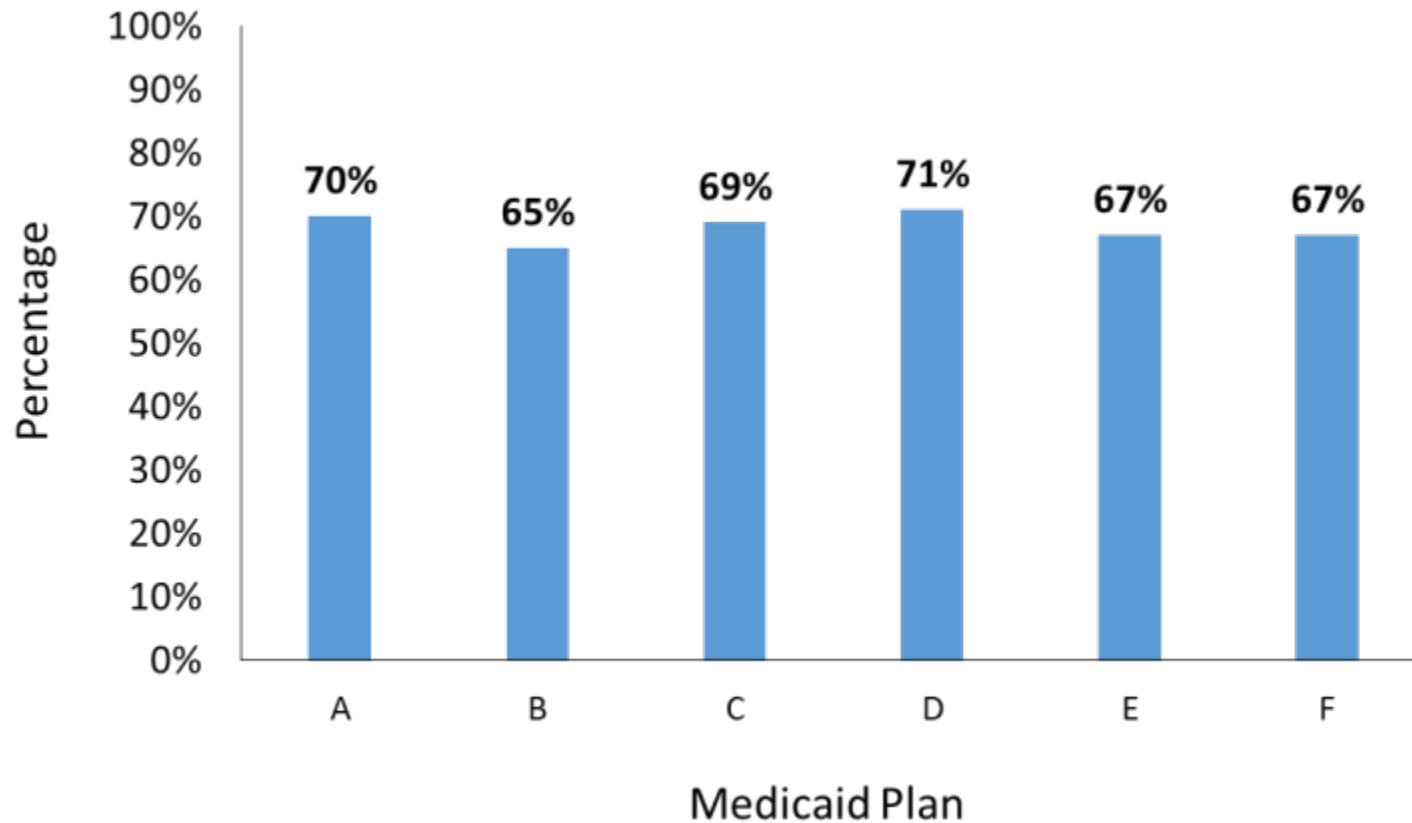


Healthy Louisiana VL Measure

Current Matching Process

- Now conducting quarterly matches between Medicaid claims and OPH HIV Surveillance data
- Individual-level data are provided back to each Health Louisiana plan for their clients only
- These variables are provided by OPH:
 1. Was the client virally suppressed (i.e., VL <200 copies/mL) at the most recent test in the last 12 month period?
 2. Was the client confirmed to be HIV positive in the OPH HIV Surveillance database?

Viral Suppression by Medicaid Plan, 2015

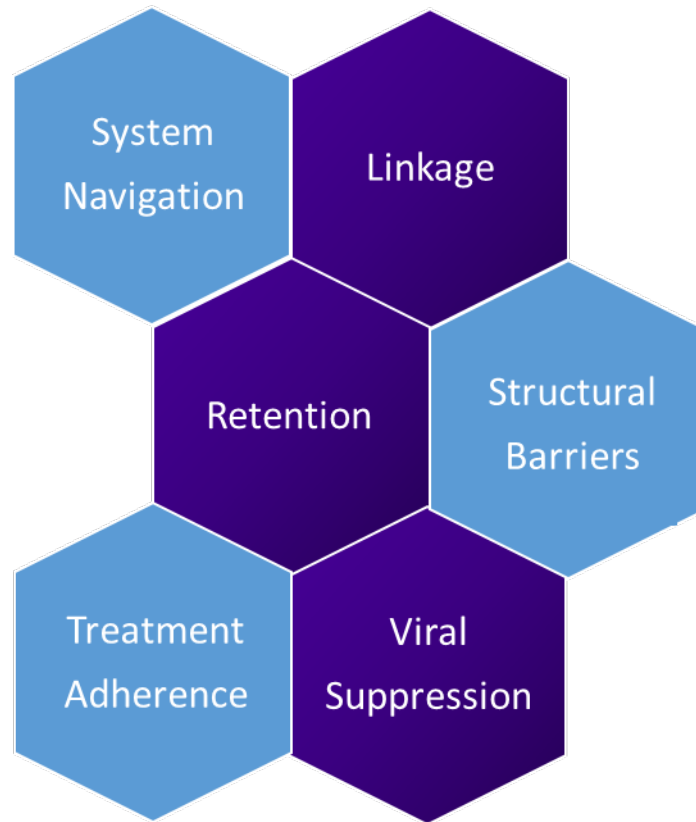


Louisiana Links

- Based on data results, as many as 3,169 persons living with HIV enrolled in Medicaid could benefit from Linkage to Care Services
- CAPUS-funded, “Data to Care” intervention
- October 2013-September 2015 – demonstration project in 3 metro areas with highest prevalence
 - Expanded statewide in 2016
- Utilizes surveillance data to identify PLWH who are:
 - Newly diagnosed and not linked to care
 - Previously diagnosed who need re-engagement
 - Previously diagnosed and not virally suppressed
- Automated electronic line lists with weekly automated update process

Louisiana Links

- 10 Linkage to Care Coordinators (LCCs) – provide extensive services above and beyond the scope of traditional linkage services



Louisiana Links – Eligibility Criteria

- Newly diagnosed and not linked to care
 - Diagnosed within the last 9 months and not linked to care within 30 days (case must be closed by DIS)
- Previously diagnosed – out of care
 - 9-months – 5 years without reported lab result
- Previously diagnosed – not virally suppressed
 - No clinical difference between last pair of viral loads, both over 1,000 copies/mL
 - Viral load over 100,000 copies/mL and no subsequent care visit within 4 months



Louisiana Links - Results

Enrollment and Linkage to Care: Louisiana Links, October 2013 – June 2016

	Newly Diagnosed	Previously Diagnosed - Out of Care	Previously Diagnosed - Not Virally Suppressed	Total
Number Enrolled	64	449	148	661
% Enrolled*	75%	60%	63%	62%
Number Linked to Care	57	397	102	556
% Linked to Care	89%	88%	69%**	84%

*Percent of all referred clients who were eligible at time of contact and have a final contact disposition

**Must show clinically significant drop in viral load to be considered 'linked to care'

Medicaid Expansion in Louisiana

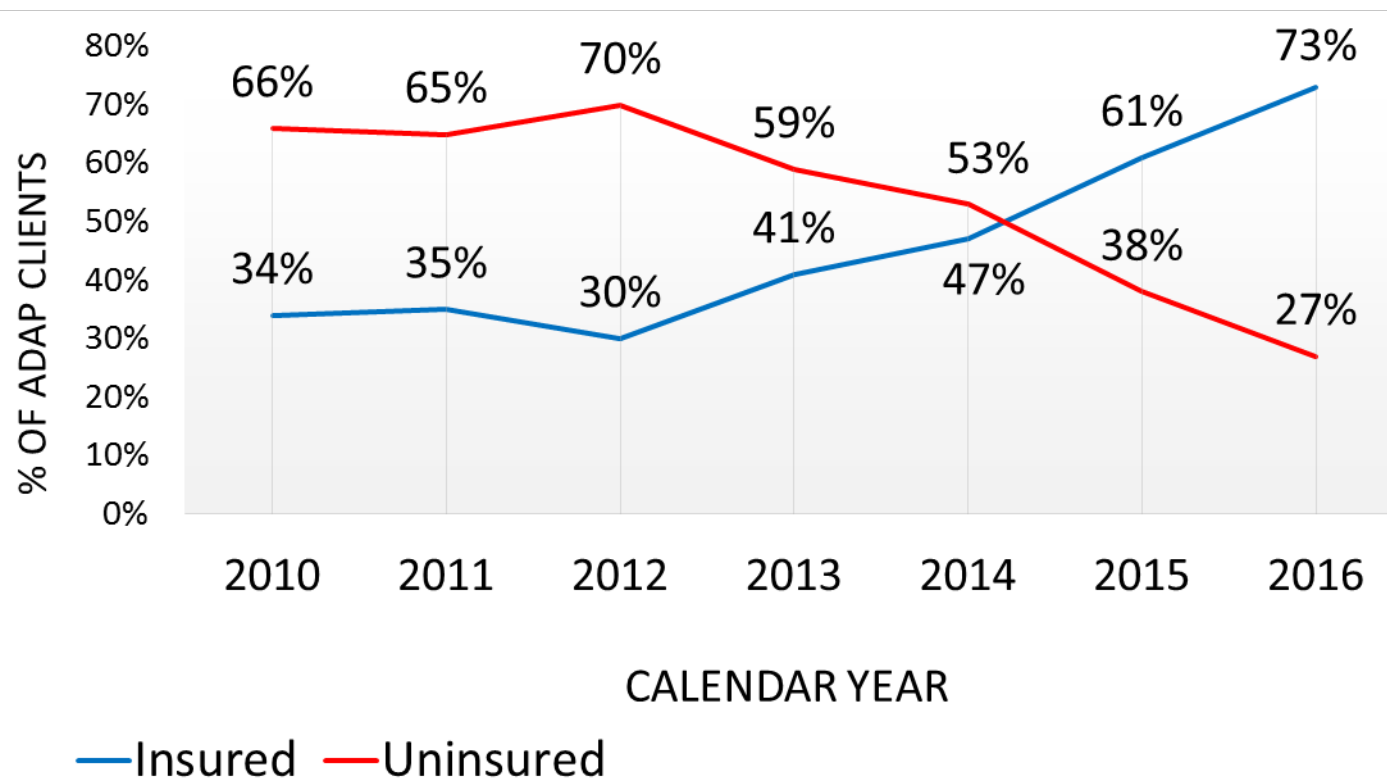
- January 2016 - New Governor and Executive Order to expand Medicaid
- July 1, 2016 - Medicaid expansion
 - With this new coverage, adults who earn up to \$16,395 per year for an individual or \$33,534 per year for a family of four are eligible for insurance through Medicaid.
 - Enrolled 250,000 people in Medicaid in 45 days

Louisiana LaHAP

- Louisiana Health Access Program (LaHAP) provides health insurance premiums, cost shares, and medication assistance (RW Part B/ADAP)
- Since ACA and Marketplace Plans began, intensive efforts to transition individuals from medication assistance to comprehensive health insurance plans
- LaHAP provides premium/co-pay assistance to ~ 5,000 PLWH and drug assistance to ~1,800 uninsured PLWH



Louisiana ADAP Insured vs Uninsured: 2010-2016

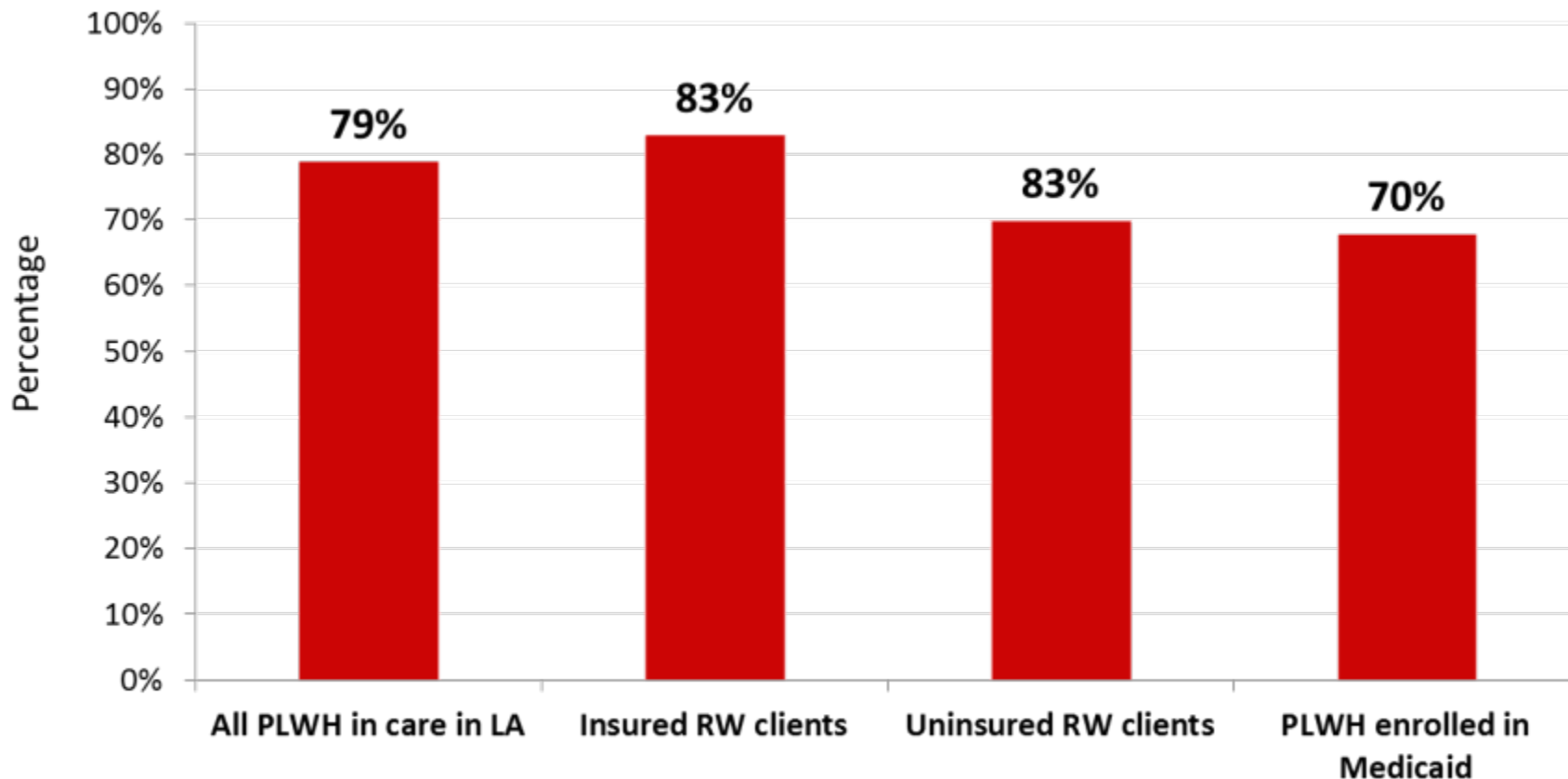


Medicaid Expansion

- August 2016 – linked LaHAP and Medicaid data to identify clients who are now eligible for Medicaid
 - 2,720 have already enrolled
 - 1,839 eligible based on current income information in CAREWare
- Conducting monthly matches to monitor enrollment and to share information with contracted case management providers re: unenrolled, but eligible clients

Viral Suppression

Louisiana, 2015



Challenges

- Medicaid leadership agreed to postpone incentive
- Low VS target
- Departure of several key Medicaid staff
- Lack of available Medicaid data analysts
- Complexity of analyzing claims data
- Maintaining engagement and focus on HIV outcomes

Successes

- Frequent communication between STD/HIV Program and Medicaid Programs
- University of Louisiana at Monroe – provides assistance with data analysis
- 3 MCOs actively involved in HIV CQI process and attend quarterly meetings
 - Thursday, 10:30 am-12:00 pm: “Valuing Medicaid Participation in Louisiana Ryan White Quality Initiatives in the Wake of Medicaid Expansion”
- OPH IT staff currently being trained on analyzing and exporting Medicaid data

Additional Collaborations with Medicaid

- First and third trimester syphilis and HIV screening among pregnant Medicaid clients
- Number of HIV-negative persons enrolled in Medicaid who are prescribed PrEP
- Proportion of women age 15-24 enrolled in Medicaid who are screened for chlamydia annually
- CMS/HRSA RW HIV Health Improvement Affinity Group

Questions?

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