



Health Home Highlights



Promoting Wellness and Recovery

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August 9, 2013

Revised Performance Measures for Phase II Health Homes

Community Behavioral Health Centers that deliver the Health Home service will be expected to collect and report data to meet performance measurement requirements. These requirements consist of mandatory Centers for Medicare and Medicaid Services (CMS) core measures and measures established by the Ohio Department of Mental Health and Addiction Services (OhioMHAS) in conjunction with stakeholder input.

In the Phase II Health Home State Plan Amendment, the state provides CMS assurance that it will require all Health Home providers to report on both the core and state-selected quality measures as a condition of receiving payment from the state. Ohio also has assured it will report to CMS on the 19 performance measures selected that will be used to evaluate clinical outcomes and quality improvement.

Outcomes Reporting for Phase II Health Home Providers

Phase II Health Home providers must actively track, collect and report data to the state related to the nine measures in **BOLD** listed below. Follow-up after hospitalization for mental illness and smoking and tobacco use cessation measures include a blended approach of both state and provider-level tracking and data sources. The remaining measures in **BOLD** will be tracked by the state by claims and encounter data.

CMS Core Measures

- 1. Controlling high blood pressure**
2. Screening for clinical depression and follow-up plan
- 3. Follow-up after hospitalization for mental illness**
4. Initiation and engagement of alcohol and other drug dependence treatment
- 5. Adult Body Mass Index (BMI) assessment**
6. Ambulatory care — Sensitive condition admission
7. All-cause readmission within 30 days of inpatient stay
- 8. Care coordination/timely transmission of transition record**

State-Selected Measures

1. Asthma medication management
- 2. Cholesterol management**
- 3. Comprehensive diabetes care — Hemoglobin A1c (HbA1c) level less than 7 percent**
- 4. Comprehensive diabetes care — Cholesterol management/LDL screening**
- 5. Smoking and tobacco cessation**
6. Timeliness of prenatal care
7. Adolescent well-care visits
8. Adults' access to preventative/ambulatory health services
9. Appropriate treatment for children with upper respiratory infections
10. Inpatient and emergency department utilization
- 11. Medication reconciliation post-discharge**

Methods for Clinical Performance Measures for Health Homes

To access a draft of the Ohio Department of Medicaid's Methods for Clinical Performance Measures for Medicaid Health Homes, visit <http://1.usa.gov/18gUJHh>. This document provides an overview of the measurement methodology, data sources and reporting periods to inform Health Home program clinical performance and quality improvement activities. In addition, each clinical quality measure is individually defined and described. CMS methodology provided for the eight Core Measures may undergo revisions once CMS releases the full measure specifications.

Upcoming Health Home Application Webinars

Register for upcoming technical assistance webinar sessions hosted by the OhioMHAS Bureau of Licensure and Certification by clicking the links below:

Aug. 12, 2013, 1-2 p.m. EDT

Aug. 26, 2013, 1-2 p.m. EDT

Sept. 9, 2013, 1-2 p.m. EDT

Sept. 23, 2013, 1-2 p.m. EDT

Visit the OhioMHAS Health Home Website

To learn more about Health Homes, access recorded webinars, past editions of Medicaid Health Home Highlights and more, visit the [OhioMHAS Medicaid Health Home website](#).

Questions?

Please submit general questions about Ohio Medicaid Health Homes to healthhomes@mha.ohio.gov. For questions about Health Home certification, contact Rob Nugen at Robert.Nugen@mha.ohio.gov.