



SCHOOL OF PUBLIC HEALTH AND TROPICAL MEDICINE

Department of Health Policy and Management

April 2021

## **1115 Waiver (SUD) Evaluation Quarterly Report (DY4, Q1)**

### **Project Activities**

During the period defined in this report, Tulane continued regular monthly meetings with its entire research team and quarterly meetings with LDH to ensure consistent project coordination. The research team continued their work on the three sub-analyses: Cost, Quantitative, and Qualitative.

### **January**

The quarterly meeting with LDH and Tulane was held on January 11<sup>th</sup>. During this meeting there were three primary points of discussion.

- Differences between Tulane's evaluation results and LDH's reporting results.
  - o A meeting was set up for later in the week to discuss this further with Bryan Hardy.
- Several items concerning the Demonstration Year 2 Results Report were brought up by LDH.
  - o There is a discrepancy between average length of stay calculated by LDH and Tulane. We need to determine the root of this discrepancy and align the calculation of this measure. LDH calculates average length of stay annually, and Tulane is calculating this monthly. The monthly frequency is needed for other metrics Tulane is calculating. Candace will schedule a meeting to further discuss this calculation with a small group.
  - o The MPI denominator used by Tulane is # of provider/100,000 state residents. Why was this denominator used? The denominator was not specified in the monitoring protocol. The state population is likely to fluctuate less than the Medicaid population.
- MPA
  - o Baseline Year is 2018 for LDH, not 2017 as Tulane used. Tulane will consider this for future reports but will leave as is for the MPA.
  - o The state has a process in place to monitor residential providers referring MAT treatment. Reviewers audit the facilities and look at a statistically significant sample of patient records. If the facilities are not meeting 80% compliance,

corrective action is taken. Monitoring reviews are on hold due to COVID 19. Tulane will incorporate this information into the report.

- Billing vs. Attending MPI: Both billing and attending MPI need to be demonstrated in the MPA, not just billing. The count in the attending MPI field was used for Measure 14.
- LDH MPA is due to CMS January 19<sup>th</sup>. Candace sent the MPA with comments following this meeting. It was requested back with edits incorporated by January 14<sup>th</sup>.

## **February**

The February Tulane research team internal meeting was held on February 8<sup>th</sup>. The following topics were discussed:

- Analysis Status and Needs
  - Cost Analysis: Nothing to report currently.
  - Quantitative:
    - Kevin and Charles met with Dani and Bryan to discuss reconciliation of the data evaluation and reporting metrics.
    - Mark is meeting with Dani, Candace, and Brian Bennett today to discuss Tulane potentially using the calculated metrics that the state is producing.
    - The state is only calculating monthly results on about half of the measures, we need monthly results for all measures. Can the state provide these?
  - Qualitative:
    - Need for list of providers and specialty code within the data to identify those providers. Quantitative team will work on compiling this information.

A meeting with LDH, CMS, and the Tulane lead investigator was held following the Tulane internal meeting on February 8<sup>th</sup>. The following items were discussed:

- Tulane will use LDH calculated metrics for those that are calculated monthly. For the metrics that LDH calculates annually, there are two options:
  - LDH can begin calculating the metrics monthly.
  - Tulane can use the specifications used by LDH to calculate the metrics monthly in house.
  - Bryan Hardy will check with OBH leadership to see if this revised evaluation plan is reasonable.
- CMS expects LDH to use the metric specifications for the period that they are in effect and expects calculations to change across time as the specifications evolve.
- IAT and FUA measures, metrics 15 and 17, are not collected/calculated by LDH. They are completed by ULM annually. Tulane may need to connect with ULM to get the inputs to calculate this monthly.

- Draft Interim Evaluation Report is due to CMS on Dec. 31st, 2021. Dani will send a timeline of their review activities so that we can be sure to submit our results in enough time.

### **March**

The March Tulane internal meeting was held on March 8<sup>th</sup>. The following topics were discussed:

- Analysis Status and Needs
  - o Cost Analyses
    - Conditional on the monthly metric transition
  - o Quantitative
    - Meeting with Tulane, LDH, ULM, and Medicaid on March 23<sup>rd</sup> to discuss how to get monthly data for measures #15 and #17.
    - We have received some of the LDH monthly calculated metrics. The Quantitative Team will see if they can replicate the numbers.
    - Strategize for the Year 3 Results report and how to handle 2020 data. Can Interrupted Time Series be used to analyze Covid data?
  - o Qualitative
    - Need list of providers and specialty code within the data to identify those providers from Quantitative team.
    - Care Coordination surveys round two is in the field.
- Upcoming Report Deadlines
  - o Results Report
    - Second draft of the Year 2 Results Report for year 2 was submitted to LDH on 12/15. Waiting on review and feedback before finalizing.
    - Next report is the Year 3 Results Report due September 2021.
  - o Draft Interim Evaluation Report
    - LDH must submit to CMS by Dec. 31st, 2021. Dani will advise on when Tulane should submit results prior to that deadline. Recalculating previous years measures with the metrics we have, to move forward with the draft interim report.

A meeting with LDH and ULM was held on March 23<sup>rd</sup> to discuss monthly data for measures #15 and #17. Key takeaways from this meeting were as follows:

- ULM suggestion: For the initiation and engagement measure, look within one month at an index event (diagnosis) and if there was follow up after that interaction, either initiation (14 days) or engagement (30 days). These monthly calculations will vary from the annual calculations using HEDIS measures. Similarly, the follow-up measure would look for follow up events within one month.
- ULM will aim for getting the data to Tulane by mid-July.
- Tulane will follow up with ULM with the complete time frame of data needed and what format.

As of March 31<sup>st</sup>, the following items have been received from LDH:

- 1115 SUD Demonstration Waiver Administrative Cost Report – CY21 – January
- 1115 SUD Demonstration Waiver Administrative Cost Report – CY21 – February
- 1115 SUD Demonstration Waiver Administrative Cost Report – CY21 – March

### **Status of analysis by topic – March 31<sup>st</sup>, 2021**

Quantitative Analyses (Lead Researcher: Dr. Kevin Callison)

- In the process of recoding the evaluation metrics to align with the reporting metrics that LDH is utilizing.
- Awaiting monthly data for certain measures from LDH and ULM.

Cost Analyses Report (Lead researcher: Dr. Charles Stoecker):

- Pending the necessary quantitative results needed to complete Year 3 results analysis

Care Coordination (Lead researcher: Dr. Janna Wisniewski):

- Care Coordination Survey has been deployed for Year 3.

### **DELIVERABLE STATUS**

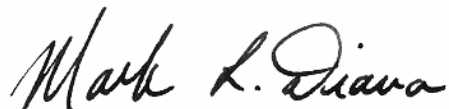
Quarterly and Annual Reports: Quarterly reports have been submitted on deadline and have summarized the evaluation feedback process with LDH and CMS.

Data reports: The Baseline, Year 1, and Year 2 Data Analysis Report were submitted in December 2020. The report will be revised according to feedback from LDH. The Tulane Research team is currently working towards the Year 3 Data Analysis Report.

### **USE OF FUNDS**

Funds have been used for this project to cover faculty and staff time to develop the initial SUD evaluation plan, define the work timetables once the evaluation plan was approved; coordinate activity with within Tulane and with LDH, and to develop reports and associated deliverables.

Respectfully submitted,



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