

Rhode Island Medicare-Medicaid Plan Quality Withhold Analysis Results Demonstration Year 2 (Calendar Year 2018)

The Medicare-Medicaid Financial Alignment Initiative (FAI) seeks to better serve people who are dually eligible for Medicare and Medicaid by testing person-centered, integrated care models. In order to ensure that dually eligible individuals receive high quality care and to encourage quality improvement, both Medicare and Medicaid withheld a percentage of their respective components of the capitation rate paid to each Medicare-Medicaid Plan (MMP) participating in a capitated model demonstration under the FAI. MMPs are eligible for repayment of the withheld amounts subject to their performance on a combination of CMS Core and State-Specific quality withhold measures.¹ For each measure, MMPs earn a “met” or “not met” designation depending on their achieved rate relative to the benchmark level, or where applicable, the gap closure target.² Based on the percent of measures with a “met” designation, MMPs receive a quality withhold payment according to the following tiered scale:

Percent of Measures Met	Percent of Withhold MMP Receives
0-19%	0%
20-39%	25%
40-59%	50%
60-79%	75%
80-100%	100%

This report provides the results of the quality withhold analysis for the MMP in the Rhode Island Integrated Care Initiative for Demonstration Year (DY) 2, which covers Calendar Year 2018. On the following pages, Table 1 provides results for each CMS Core measure, Tables 2a and 2b provide results for each State-Specific measure, and Table 3 provides summary results for the quality withhold analysis. In Tables 1, 2a, and 2b, measures that also utilize the gap closure target methodology are marked with an asterisk (as noted above, for these measures, the MMP can earn a “met” designation by meeting the benchmark or the gap closure target).

For more information about the quality withhold methodology, measures, and benchmarks, refer to the Medicare-Medicaid Capitated Financial Alignment Model CMS Core Quality Withhold Technical Notes for DY 2 through 8 and the Rhode Island Quality Withhold Technical Notes for DY 2 through 4. These documents are available on the [MMP Quality Withhold Methodology & Technical Notes](#) webpage.

¹ CMS Core measures apply consistently across all capitated model demonstrations, unless a certain measure is inapplicable due to differences in demonstration design or timing/enrollment constraints. State-Specific measures apply to a specific capitated model demonstration. Note that the number, type, and complexity of State-Specific measures vary depending on key areas of interest for the respective demonstration.

² For certain measures, an MMP can also earn a “met” designation if the MMP closes the gap between its performance in the prior calendar year and the benchmark by a stipulated improvement percentage (typically 10%). The gap closure target methodology applies to most CMS Core measures. For State-Specific measures, states have the discretion to determine whether the gap closure target methodology applies.

Table 1: CMS Core Measure Results

Medicare-Medicaid Plan	CW3 – Customer Service ⁺	CW5 – Getting Appointments and Care Quickly ⁺	CW6 – Plan All-Cause Readmissions	CW7 – Annual Flu Vaccine*	CW8 – Follow-Up After Hospitalization for Mental Illness*	CW12 – Medication Adherence for Diabetes Medications*	CW13 – Encounter Data
	Benchmark: 86%	Benchmark: 74%	Benchmark: 1.00	Benchmark: 69%	Benchmark: 56%	Benchmark: 73%	Benchmark: 80%
Neighborhood Health Plan of Rhode Island	Met	Met	Met	Met	Met	Met	Met

Table 2a: Rhode Island State-Specific Measure Results

Medicare-Medicaid Plan	RIW7 – Care for Older Adults – Medication Review*	RIW8 – Care for Older Adults – Functional Status Assessment*	RIW9 – Care for Older Adults – Pain Assessment*	RIW10 – Care for Older Adults – Advance Care Planning*	RIW11 – LTC Nursing Facility Diversion	RIW12 – SNF Discharges to the Community*
	Benchmark: 79%	Benchmark: 67%	Benchmark: 62%	Benchmark: 40%	Benchmark: 3.5%	Benchmark: 65%
Neighborhood Health Plan of Rhode Island	Met	Met	Met	Met	Not Met	Met

Table 2b: Rhode Island State-Specific Measure Results (Continued)

Medicare-Medicaid Plan	RIW13 – SNF Hospital Admissions*	RIW14 – Rhode to Home Eligibility*	RIW15 – Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment*	RIW16 – Long-Stay, High-Risk Nursing Facility Residents with Pressure Ulcers	RIW17 – Long-Stay Nursing Facility Residents Who Received Antipsychotic Medications*
	Benchmark: 12%	Benchmark: 40%	Benchmarks: 45% (Initiation) and 16% (Engagement)	Benchmark: 5%	Benchmark: 16%
Neighborhood Health Plan of Rhode Island	Not Met	Met	Not Met	Met	Not Met

⁺ Due to the continuous enrollment requirement and sampling timeframe associated with the Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey, the Rhode Island MMP was unable to report CMS Core measures CW3 and CW5 for DY 1. As a result, these measures were included as part of the withhold analysis for DY 2.

* Indicates measures that also utilize the gap closure target methodology (see page 1 for more information).

Table 3: Quality Withhold Analysis Summary Results

Medicare-Medicaid Plan	# of Measures in Analysis			# of Measures Met			% of Measures Met			% of Withhold Received
	Core	State	Total	Core	State	Total	Core	State	Total	
Neighborhood Health Plan of Rhode Island	7	11	18	7	7	14	100%	64%	78%	75%