

Care Integration Collaborative Core Measures

3/20/2012

<u>Name</u>	<u>Numerator</u>	<u>Denominator</u>	<u>Data Collection Plan</u>	<u>Goal/Target</u>
<p><u>Initial Target Population:</u> Clients in a clinic/panel/caseload from which individual clients requiring care coordination will be identified.</p> <p><u>Care Coordination Target Population (Care Coordination Clients):</u> Those clients in the Initial Target Population with CVD and/or diabetes and/or metabolic syndrome as well as MH/SD concerns that require specialty services.</p>				
1. Number of active clients in Initial Target Population	<p>PC: Number of clients in the primary care clinic, program or clinicians' panels(s) with CVD and/or diabetes and/or metabolic syndrome</p> <p>MH/SUD: Number of clients in the SUD/MH clinic, program or clinicians' panels(s)</p>	NA	<p>PC: On the last day of the month count the total number of clients in the primary care clinic, program or clinicians' panels(s) with CVD and/or diabetes and/or metabolic syndrome</p> <p>MH/SUD: On the last day of the month count the total number of clients in the SUD/MH clinic, program or clinicians' panels(s)</p>	
2. Percentage of clients in the Initial Target Population who have been screened for SUD/MH (PC) or CVD/diabetes/metabolic syndrome (SUD/MH) concerns within the last 12 months	<p>PC: Number of clients in Initial Target Population who have been screened for SUD/MH concerns within the last 12 months</p> <p>MH/SUD: Number of clients in the MH/SUD Initial Target Population who have been screened for CVD/diabetes/metabolic syndrome within the last 12 months</p>	<p>PC: Number of clients in the primary care clinic, program or clinicians' panels(s) with CVD and/or diabetes and/or metabolic syndrome</p> <p>MH/SUD: Number of clients in the SUD/MH clinic, program or clinicians' panels(s)</p>	<p>PC: On the last day of the month count the total number of clients in Initial Target Population who have been screened for SUD/MH concerns within the last 12 months and divide this number by the count of clients in the Initial Target Population (multiply by 100 to get a percentage)</p> <p>MH/SUD: On the last day of the month count the total number of clients in the SUD Initial Target Population who have been screened for CVD/diabetes/metabolic syndrome within the last 12 months and divide this number by the count of clients in the Initial Target Population (multiply by 100 to get a percentage)</p>	75%
3. Number of active clients in Care Coordination Target Population (Care Coordination Clients)	Number of clients in the Initial Target Population with CVD/diabetes/metabolic syndrome as well as MH/SD concerns that require specialty services	NA	On the last day of the month count the total number of clients in the Initial Target Population with CVD/diabetes/metabolic syndrome as well as MH/SD concerns that require specialty services, determined through screening or other methods	100 to 300

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4. Percentage of active clients in the Care Coordination Target Population (Care Coordination Clients) within the Initial Target Population	Number of clients in the Initial Target Population with CVD/diabetes/metabolic syndrome as well as MH/SD concerns that require specialty services	PC: Number of clients in the primary care clinic, program or clinicians' panels(s) with CVD and/or diabetes and/or metabolic syndrome MH/SUD: Number of clients in the SUD/MH clinic, program or clinicians' panels(s)	Divide numerator (#3) by denominator (#1) and multiply by 100 to get a percentage	N/A
5. Percentage of clients in the Care Coordination Target Population with an assigned care coordinator	Number of clients in the Care Coordination Target Population with an assigned care coordinator NOTE: The Care Coordinator can be from any partner agency	Number of clients in the Care Coordination Target Population	On the last day of the month, count the number of clients in the Care Coordination Target Population with an assigned care coordinator and divide this number by the count of in the Care Coordination Target Population (multiply by 100 to get a percentage)	>75%
6. Percentage of clients in the Care Coordination Target Population with a care plan shared between PC, SUD and/or MH	Number of clients in the Care Coordination Target Population with a care plan shared between PC, SUD and/or MH	Number of clients in the Care Coordination Target Population	On the last day of the month, count the number clients in the Care Coordination Target Population with a care plan shared between PC, SUD and/or MH and divide this number by the count of clients in the PC Care Coordination Target Population (multiply by 100 to get a percentage)	>90%
7. Percentage of clients in the Care Coordination Target Population with a reconciled medication list	Number of clients in the Care Coordination Target Population with medication list that has been reconciled within the last 3 months	Number of clients in the Care Coordination Target Population	On the last day of the month, count the number of clients in the Care Coordination Target Population with medication list that has been reconciled within the last 3 months and divide this number by the count of clients in the Care Coordination Target Population (multiply by 100 to get a percentage)	>90%

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8. Rate per 1,000 of clients in the Care Coordination Target Population with one or more visits to ER/hospital/urgent care	Number of clients in the Care Coordination Target Population with one or more visits to ER/hospital/urgent care centers during the month	Number of clients in the Care Coordination Target Population/1,000	On the last day of the month, count the number of clients in the Care Coordination Target Population with one or more visits to ER/hospital/urgent care centers during the month. Multiply that number by 1,000, then divide by the number of clients in the Care Coordination Target Population	50% Reduction
9. Percentage of clients in the Care Coordination Target Population with documented BMI, A1c, LDL, and blood pressure	Number of clients in the Care Coordination Target Population with documented BMI, A1c, LDL, and blood pressure in the last 6 months	Number of clients in the Care Coordination Target Population	On the last day of the month, count the number of clients in the Care Coordination Target Population with documented BMI, A1c, LDL, and blood pressure in the last 6 months and divide this number by the count of clients in the Care Coordination Target Population (multiply by 100 to get a percentage)	>90%
10. Percentage of clients in the Care Coordination Target Population with metabolic parameters out of control	Number of clients in the Care Coordination Target Population with metabolic parameters out of control: <ul style="list-style-type: none"> • BMI > 30 • A1c > 7 • Blood Pressure > 140/90 • LDL > 100 	Number of clients in the Care Coordination Target Population	On the last day of the month, count the number of clients in the Care Coordination Target Population whose last documented BMI or A1c or Blood Pressure or LDL is out of control (see below) and divide this number by the count of clients in the Care Coordination Target Population (multiply by 100 to get a percentage) <ul style="list-style-type: none"> • BMI > 30 • A1c > 7 • Blood Pressure > 140/90 • LDL > 100 	<20%
11. Percentage of clients in the Care Coordination Target Population who use tobacco	Number of clients in the Care Coordination Target Population who currently use tobacco (use tobacco in any form)	Number of clients in the Care Coordination Target Population	**On the last day of the month, count the number of clients who currently use tobacco (use tobacco in any form) and divide this number by the count of clients in the Care Coordination target population (multiply by 100 to get a percentage)	<20%

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12. Average number of times that clients in the Care Coordination Target Population exercise per week	Total number of times that clients in the Care Coordination Target Population exercise (at least 20 minutes per time) per week	Number of clients in the Care Coordination Target Population with exercise documented	**On the last day of the month, total the number of times that Care Coordination clients reported exercising per week (at least 20 minutes per time) documented in the record for all clients in the target population and divide this number by the number of Care Coordination clients who reported on the number of times they exercised per week. All of these numbers are collected for the given month.	>3
13. Client Satisfaction Care: Percentage of clients in the Care Coordination Target Population who answer 4 or 5 to the statement: "I receive exactly the care I want and need exactly when and how I want and need it."	Number of clients in the Care Coordination Target Population who responded with a 4 or 5.	Number of clients in the Care Coordination Target Population who responded to the question that month.	*For at least 25 randomly selected clients (from the Care Coordination target population) each month, ask them to rate their response, on a 1 to 5 scale, to the following question: "I receive exactly the care I want and need exactly when and how I want and need it." 1=strongly disagree, 2=disagree, 3=neither, 4=agree, 5=strongly agree	>90%
14. Client Wellness	Number of clients in the Care Coordination Target Population who responded with a 4 or 5.	Number of clients in the Care Coordination Target Population who responded to the question that month.	*For every client in the target population who is seen during the month, ask them to rate their response, on a 1 to 5 scale, to the following question: "Describe your health during the past 14 days:" 1=Poor, 2=Fair, 3=Good, 4=Very Good, 5=Excellent On the last day of the month add up all the responses of either 4 or 5 to this question and count the number of clients who responded. Divide the first number by the second number and multiply by 100 to get the percentage.	>50%
*Note: These two questions are all done together on a single piece of paper with all clients seen. The tool for this is provided to you.				