

Federal Employees Health Benefits Program

PLAN PERFORMANCE ASSESSMENT

Highlights of 2018 Clinical Quality,
Customer Service, and Resource Use
(QCR) Measures

SUMMARY

For more than 50 years, the U.S. Office of Personnel Management (OPM) has offered Federal employees a choice of health insurance options through the Federal Employees Health Benefits (FEHB) Program. The FEHB is the nation's largest employer-sponsored health insurance program, contracting with 83 health insurance carriers in 2018 to provide health insurance coverage to 8.2 million Federal employees, retirees, and their families at a combined annual premium value of approximately \$54 billion.

The FEHB Program has a successful track record of providing high quality coverage at an affordable cost. Federal employees regularly cite health benefits as a key factor in the decision to join or remain in the Federal workforce. According to the 2017 Federal Employee Benefits Survey, 81 percent of participants indicated that health insurance through the program influenced their decision to remain employed with the Federal government.

In 2016, OPM began to phase-in the Plan Performance Assessment (PPA) to incorporate the use of common, objective criteria for the evaluation of FEHB Carriers. This year's reporting cycle represents the full implementation of the PPA, which is designed to tie FEHB Carrier performance on a range of performance areas to the award (service charge for experience-rated carriers) or retention of a portion of premium (performance adjustment for community-rated carriers). Overall, in 2018 approximately \$540 million of FEHB premiums were available to be paid to Carriers based on performance.

The PPA is comprised of four performance areas:

- Clinical Quality
- Customer Service
- Resource Use
- Contract Oversight

OPM selected measures from the Healthcare Effectiveness Data & Information Set (HEDIS) and the Consumer Assessment of Healthcare Providers & Systems (CAHPS) survey to reflect performance within the Clinical Quality, Customer Service and Resource Use (QCR) areas. The National Committee for Quality Assurance (NCQA) oversees the collection of HEDIS and CAHPS measures and also compiles national commercial benchmarks by plan type (HMO, PPO, etc.). Contract Oversight is assessed annually by OPM's FEHB Contracting Officers.

The 2018 PPA cycle demonstrated increases in the average score reported by FEHB Carriers on combined QCR measures. This was the second year that OPM awarded an Improvement Increment which allowed Carriers to augment their QCR scores if they achieved pre-specified levels of year-over-year improvement compared to their commercial peers. We discuss this and other significant findings from the 2018 QCR data below.

2018 RESULTS

QCR Scoring Methodology

Under the QCR scoring methodology, FEHB Carrier results are compared to the NCQA national commercial benchmarks that correspond to the product reporting type. All of OPM’s 83 FEHB Carrier contracts reported HEDIS and CAHPS measures in 2018. A complete list of measures used in 2018 is contained in Table 1, 2018 QCR Measure Set.

Table 1. 2018 QCR Measure Set

Performance Area	Measure Title (Abbreviation)
Clinical Quality	Controlling High Blood Pressure (CBP)
	Prenatal Care (Timeliness) (PPC)
	Breast Cancer Screening (BCS)
	Well-Child Visits First 15-Months of Life (6+ visits) (W-15)
	Flu Vaccinations for Adults (18-64) (FVA)
	Cervical Cancer Screening (CCS)
	Comprehensive Diabetes Care HbA1C <8% (CDC-Control)
	Asthma Medication Ratio (AMR)
	Avoidance of Antibiotics in Adults with Bronchitis (AAB)
	Medication Management for People with Asthma (75%) (MMA)
	Follow-up after Hospitalization for Mental Illness (7/30 day) (FUH)
Customer Service	Plan Information Costs (PIC)
	Getting Care Quickly (GCQ)
	Getting Needed Care (GNC)
	Claims Processing (CP)
	Overall Health Plan Rating (RHP)
	Coordination of Care (CoC)
	Overall Personal Doctor Rating (RDP)
	Customer Service (CS)
Resource Use	Plan All-Cause Readmissions (PCR)
	Use of Imaging Studies for Low Back Pain (LBP)

OPM provided a preview period for FEHB Carriers to view and confirm their reported QCR data and OPM’s scoring calculations. Because the QCR methodology is transparent and reproducible, FEHB Carriers are able to independently verify their scores. In 2018, the Standardized QCR Score plus any applicable Improvement Increment accounted for 65 percent of each carrier’s Overall Performance Score. Contract Oversight evaluations by the FEHB Contracting Officer contributed the remaining 35 percent. The Overall Performance Score is used to determine each Carrier’s service charge or performance adjustment. Highlights of the 2018 PPA cycle are contained in Figure 1, Summary of Overall 2018 QCR Results.

Figure 1. Summary of Overall 2018 QCR Results

Overall Scores	Priority Measures	Bottom Up Change	Year-Over-Year Improvement
Improved mean and minimum scores on program-wide QCR Scores	Increased mean on all high priority measures	16 QCR measures saw a rise in the minimum score reported as well as a reduction in the number of health plans performing in the bottom quartile	30 contracts earned a partial Improvement Increment; Lower Back Pain received greatest number of Improvement Increments

2017-2018 Standardized QCR Scores

The Standardized QCR Score reflects Carrier performance on the QCR Measure Set before the addition of any applicable Improvement Increment. QCR scores continue to reflect a range of performance across all product reporting types, as shown in Figure 2, Standardized QCR Scores (2018). The following trends were observed in the 2018 PPA cycle:

- Overall, the QCR average increased between 2017 and 2018. This is also true for each category of plan type: PPO, HMO, and HMO/POS product reporting types. Figure 3, Average QCR Score by Plan Type, compares 2017 average scores to 2018 averages by plan type.
- FEHB Carriers’ cumulative performance demonstrated an increase in the Standardized QCR Scores in 2018 compared to 2017 results. These results build on similar improvements observed in 2017 compared to reporting during the inauguration of the PPA in 2016.
- PPO and HMO/POS plans attained higher mean, median, maximum, and minimum Standardized QCR Scores than in 2017.

Figure 2. Standardized QCR Scores (2018)

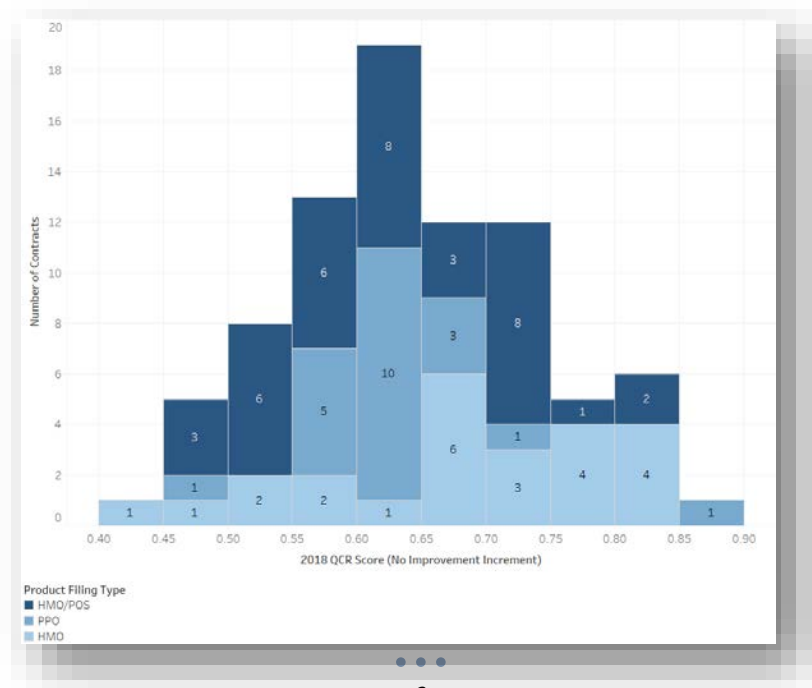
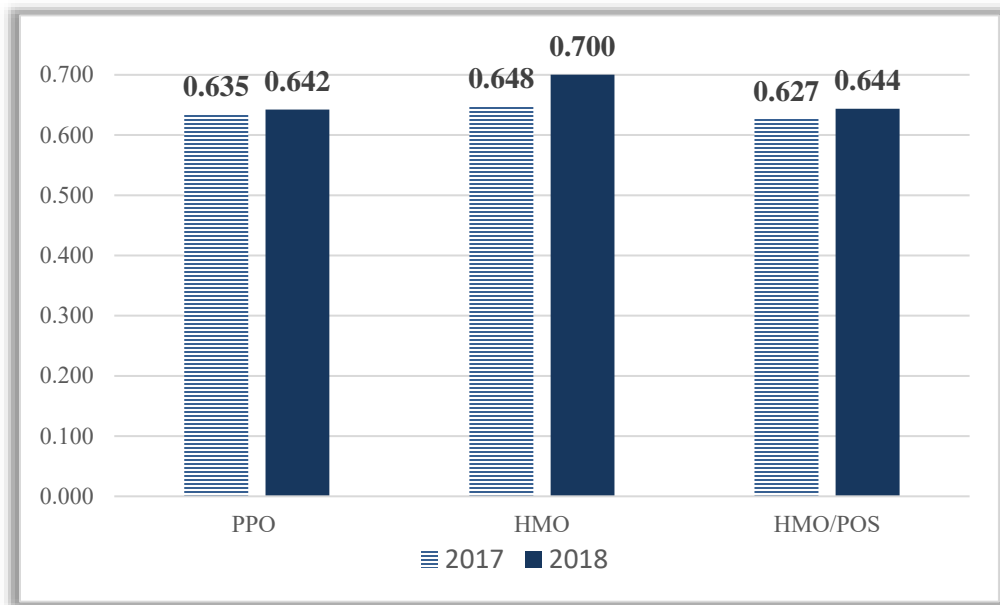


Figure 3. Average QCR Score by Reporting Type



High Priority Measures

OPM selects high priority HEDIS or CAHPS measures based on their relevance to the needs of the FEHB population. For the past three years, the PPA high priority measures have remained Timeliness of Prenatal Care, Blood Pressure Control, and Plan All-Cause Readmissions. As in 2017, the FEHB program-wide average on each of the three high priority measures exceeded the average of their respective commercial benchmark.

For the second year in a row, FEHB Carriers reported heart disease as their most prevalent condition and one of their top cost drivers via FEHB’s Automated Data Collection, which is a tool that OPM utilizes to gather information from Carriers. The prevalence and cost of heart disease confirms OPM’s emphasis on the Controlling Blood Pressure measure, which focuses on outcomes related to the appropriate treatment of high blood pressure. Improving care on this important clinical topic reduces cardiovascular risk factors among FEHB enrollees. For the third year in a row, the number of FEHB Carriers reporting results below the 25th percentile on this measure fell compared to commercial insurers.

Improvement Increment

In response to Carrier feedback, OPM introduced the Improvement Increment in 2017 and awarded it again in the 2018 PPA. FEHB Carriers that performed below the 50th percentile on a particular measure in 2017, improved faster than their peers in 2018, and maintained the same plan reporting type with NCQA, were awarded a partial Improvement Increment. The full Improvement Increment is earned by demonstrating significant improvement on three or more measures.

Eighty of the 83 FEHB Carriers were eligible for the Improvement Increment in 2018. The Resource Use measure, Use of Imaging for Low Back Pain, saw the greatest number of FEHB Carriers earning a partial Improvement Increment in 2018. Altogether, 38 percent of eligible carriers met the requisite conditions for

improved performance thereby earning at least a portion of the Improvement Increment in 2018. Overall, there were fewer FEHB Carriers performing below the 50th percentile on any individual measure in 2018 than in 2017.

Measure Specific Highlights

Three HEDIS measures moved into QCR scoring for the first time in 2018:

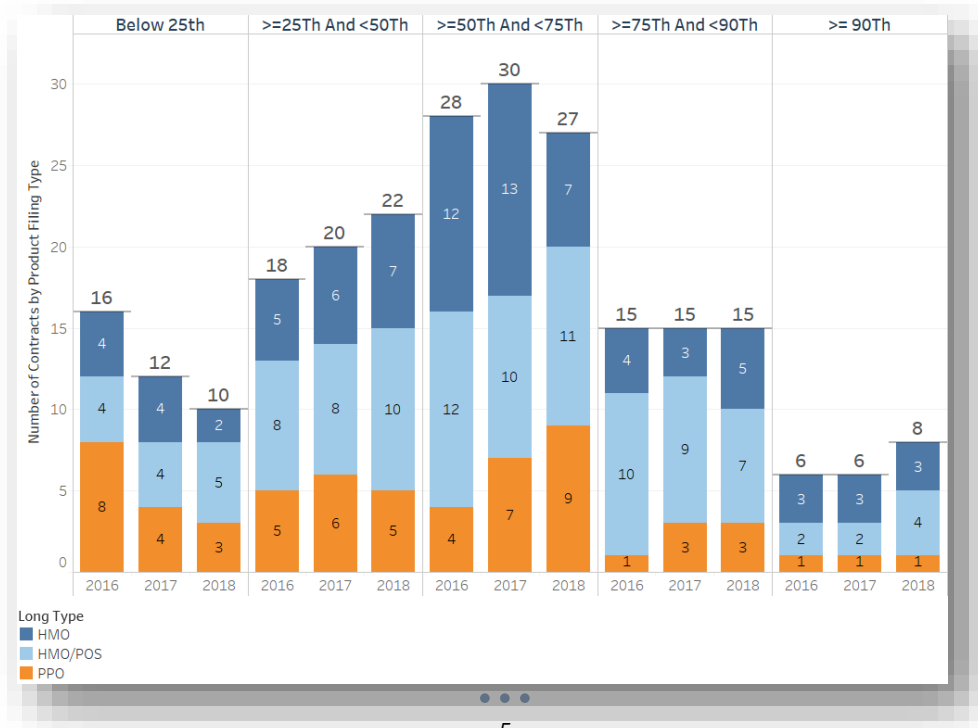
- Cervical Cancer Screening,
- Asthma Medication Ratio, and
- Avoidance of Antibiotics in Adults with Acute Bronchitis.

One third of all FEHB Carriers reported results under the 25th percentile on Cervical Cancer Screening.

Performance on Asthma Medication Ratio improved for the third year in a row, with an average above the 50th percentile compared to their commercial peers. The strongest results were achieved in the Avoidance of Antibiotics in Adults with Acute Bronchitis measure, where 59 percent of FEHB Carriers reported results at or above the commercial average. Attention to the appropriate use of antibiotics has been an ongoing concern for OPM due to the potential for adverse drug events and the ongoing threat that antibiotic resistance poses.

This was also the second year that OPM included Comprehensive Diabetes Care (Control) in QCR scoring. This intermediate outcome measure examines the percentage of a FEHB Carriers’ diabetic patients who had their diabetes under control. Improvement on this measure, akin to the Controlling Blood Pressure measure, supports better health outcomes for diabetic enrollees. Figure 4, Performance on CDC-Control (2016-2018), shows the range of scores earned between 2016 and 2018 by plan reporting type. The CDC-Control scores are also displayed in relation to the four benchmarks that OPM uses to evaluate FEHB Carriers’ performance compared to commercial insurance carriers. These benchmarks are the 25th, 50th, 75th and the 90th.

Figure 4. Performance on CDC-Control (2016-2018)



UPDATES FOR 2019

The following section highlights previously announced changes to the QCR Measure Set for 2019 which were announced in Carrier Letter 2017-11.

1. OPM will transition two measures from the Measures Farm Team (i.e., measures reported but not utilized in QCR scoring) into the QCR Measure Set for scoring in 2019:
 - Emergency Department Utilization
 - Statin Therapy for Cardiovascular Disease
2. One measure will be retired from the QCR Measure Set in 2019:
 - Medication Management for Asthma
3. OPM will continue to pursue the inclusion of measures that assess the value and affordability of the health insurance benefits offered.

CONCLUSION

The 2018 FEHB contract cycle represents the full implementation of the PPA. Under the 2018 PPA, calculations based on QCR measurement data represented 65 percent of a FEHB Carriers' Overall Performance Score. As a group, FEHB Carriers are demonstrating improvement on QCR measures that are highly correlated with better health outcomes for their members. Additional reporting cycles will allow for more informed trend analysis. One of OPM's strategic goals remains the improvement of healthcare quality and affordability in the FEHB Program. More detailed information on these topics will be forthcoming as they are developed.