



Certification Requirements Policy (part 3):

Display of Quality Information

September 24, 2012

How should COHBE display quality information to consumers and employers?

Goals/Objectives of COHBE:

- Provide quality coverage options for Individuals and Small Employers using the Exchange
- Support a stable risk pool
- Increase affordability, access and choice for Individuals and Small Employers purchasing health insurance in the Exchange
- Foster a competitive marketplace for health insurance
- Not duplicate or replace the duties of the Division of Insurance
- Promote procedural timeliness in all applicable areas of the certification process

Colorado	<p>SB11-200</p> <ul style="list-style-type: none">• Increase affordability, access and choice for Individuals and Small Employers purchasing health insurance in the Exchange• The Exchange shall not duplicate or replace the duties of the Commissioner established in Section 10-1-108, including rate approval, except as directed by the Federal act.• The Exchange shall foster a competitive marketplace for insurance and shall not solicit bids or engage in the active purchasing of insurance. <p>Board duties:</p> <ul style="list-style-type: none">• Consider the affordability and cost in the context of quality care and increased access to purchasing health insurance.• Investigate requirements, develop options, and determine waivers, if appropriate, to ensure that the best interests of Coloradans are protected.
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Federal	<p>45 CFR §156 Outlines the general requirements of QHP certification. Additional certification requirements are included in 45 CFR §155 that impact QHPs exclusively.</p> <p>45 CFR §156.00(b)(5) requires QHPs to implement and report on quality improvement strategies including health care quality and outcomes described in sections 1311(c)(1)(H) and (I) of the Affordable Care Act</p> <p>45 CFR §156.290 Non-renewal and decertification of QHPs.(c)</p>
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Background

The Federal regulations for plan certification include a number of different components that the Exchange must validate prior to certifying a Qualified Health Plan (QHP). In addition to other certification requirements, COHBE must decide how quality information will be displayed to consumers and employers during the shopping experience.

QHPs must provide quality score information to the Exchange, enrollees, and prospective enrollees in accordance with sections 1311(c)(1)(H) and (I) of the Affordable Care Act. HHS is going to release a new national standard for quality measurement and display in 2016..This national quality measurement and display standard will be made available and may be required of the states. In the interim, COHBE must determine how it will display quality information about QHPs with consumers in a way that provides helpful, accurate, and comparable information.

There are two major national quality measurement systems, Consumer Assessment of Healthcare Providers and Systems (CAHPS) and Healthcare Effectiveness Data and Information Set (HEDIS). CAHPS is primarily a survey of customer satisfaction with their health care experience and HEDIS is a collection of clinical outcome measurements. Both systems are required for national accreditation. COHBE recognizes not all carriers are accredited for various reasons (i.e. high costs associated with accreditation, they are new in the market, etc.) and cannot report on CAHPS or HEDIS or both. Therefore, COHBE has allowed these carriers a two year grace period to become accredited.

Another important consideration to note is that CAHPS and HEDIS data vary based on the population covered. Both measures have different thresholds for excellent quality for Medicaid, Commercial, and Medicare populations. Some health plans have reported a difference in CAPHS and HEDIS measures for rural and urban populations.

Options for Consideration

COHBE has identified three potential approaches for displaying quality scores until national standards are released.

- 1) Utilize a CAHPS “star” rating and a link to detailed CAHPS and HEDIS data
 - a. Advantages
 - i. Most carriers can report on CAHPS for the 2014 plan year even if they are not accredited
 - ii. Easy, customer friendly metric
 - iii. Clinical data available to customers who want that data
 - b. Disadvantages
 - i. May differ based on the source of the data (e.g., Medicaid vs. commercial)
 - ii. Not all carriers will be able to provide this data for 2014

- 2) Provide a link to detailed CAHPS and HEDIS data (i.e., no star rating will be provided)
 - a. Advantages

- i. Consumers have access to the detailed information
 - ii. Does not require any further data aggregation in preparation of 2014
 - iii. Plans that cannot be rated for different reasons are not disadvantaged
- b. Disadvantages
 - i. Not an easy, customer friendly metric
 - ii. Will not enable filtering or plan search based on quality rating
 - iii. Not all carriers will be able to provide this score for 2014

3) Create a composite score

- a. Advantages
 - iv. Consumers can have access to quality information even if they are not accredited
- b. Disadvantages
 - v. Difficult to gather, compile and display quality metrics in short implementation timeframe
 - vi. Not all carriers will be able to provide this score for 2014

All three advisory groups met to discuss this information. The Health Plan Advisory Group initially worked through the issue and was split roughly between a group that favored a composite star rating that included combining the CAHPS and HEDIS data and including a link to the CAHPS and HEDIS data. Based on the complexity of the information and the lack of data for all plans, many members in the SHOP and Individual Advisory groups felt that linking to HEDIS and CAHPS would be a sufficient starting point until a national standard was available and new carriers have time to gather and report on quality measures. Both groups also felt that the Exchange should move towards a composite rating of quality and clinical data as soon as possible. It is important to note that members in all the advisory groups had mixed opinions on the topic and there was no option that everyone supported.

The Health Plan Advisory Group reconsidered the quality discussion at its most recent meeting. Based on additional information presented by the Colorado Business Group on Health on quality measures, a majority of the members in the Health Plan Advisory Group felt that, while imperfect, a CAHPS rating would provide useful information to a consumer and this could be converted to a star rating on the COHBE website during the shopping experience. The same majority felt that including a link to HEDIS data if available would provide additional data for consumers that wanted more information before making a decision. A smaller minority of health plans felt that a link to the data would be a better solution.