



**Demonstrating  
DSRIP 2.0 Outcomes  
Effectively: Exploring the Proposed Metrics**

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# Metrics Considerations

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- Four primary goals of waiver proposal
- CMS guidance
- Reproducibility
- Experience with current DSRIP and 1115 Waiver



# Metrics Criteria

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- Reflect the theme of “Right Care, Right Place, Right Time”
- Address all three components of Triple Aim
- Majority are outcome metrics
- Preferentially chosen from state or nationally vetted metrics (e.g., NQF, NCQA).
- Aligned with Medi-Cal quality metrics where clinically appropriate
- Reporting requirements strike a balance between ambitiousness and current feasibility



# General Metric Sources

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- NY, NJ and TX DSRIP Metrics
- Let's Get Healthy California Task Force measures
- HEDIS – Adult and Pediatric (2014)
- CMS ACO Initiatives
- CMS Core Health Home Measures
- Eligible Professional Meaningful Use Menu Set Measures
- CMS Adult Core Measure Set
- DHCS External Accountability Set for Managed Care Plans (2014)
- [Oregon Health Authority Measure Set](#) and Baseline Data for CCOs
- [VA Sail](#) – VA's value model measures
- NQF Measures Application Partnership
- [NQF Quality Positioning Tool](#)
- Hospital Compare



# Content Experts

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- **Advisory Group Members**
  - 74 Clinical and Administrative content experts from across the 17 Public Health Systems  
Included local, state and national experts on the DSRIP projects
- **DHCS Content Experts**
  - CHCF (Palliative Care)
  - IBH Workgroup (IBH metrics)
  - Million Hearts Initiative
  - CMQCC (Perinatal Care)



# Metric Structure

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- Clinical event outcomes
- Potentially preventable events
- Patient Experience



# Questions for Discussion

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- Are there any broad themes missing?
- Is there an appropriate balance between ambitiousness and feasibility in project metrics to ensure their success?
- Are there any projects and/or metrics missing across the domains?
- Within each domain are there any metrics to remove?

