**Category 3**

**University of California San Diego Health System**

**ADDENDUM TO DSRIP FIVE-YEAR PLAN SUBMITTEDONFEBRUARY 18, 2011**

**CATEGORY 3: POPULATION-FOCUSED IMPROVEMENT REPORTING MEASURES**

**April 14, 2011**

**Narrative:**

Enclosed please find the Category 3 supplemental submission for University of California San Diego Health System in support of the Delivery System Reform Incentive Pool Proposal for the California Section 1115(a) Medicaid Demonstration.

Primary Care in our health system is delivered at 5 ambulatory sites:

1. Family Medicine, La Jolla at 9333 Genesee Avenue, Suite 200, San Diego, California, 92121
2. Family Medicine, Hillcrest 4th & Lewis at 330 Lewis Street, Suite 400, San Diego, California, 92103
3. Family Medicine, Scripps Ranch at 9909 Mira Mesa Blvd, Suite 200, San Diego, California, 92131
4. Internal Medicine, 4th & Lewis at 330 Lewis Street, Suites 300 & 301, San Diego, California, 92103
5. Internal Medicine, La Jolla at 8939 Villa La Jolla Drive, Suite 110, La Jolla, California, 92037

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| **Patient/Care Giver Experience** | | | | |
| **Year 1** | **Year 2** | **Year 3** | **Year 4** | **Year 5** |
|  | 1. **Undertake the necessary planning, redesign, translation, training and contract negotiations in order to implement CG-CAHPS in DY8.** | 1. **Report results of CG CAHPS questions for “Getting Timely Appointments, Care, and Information” theme for at least data from the last two quarters of the demonstration year to the State** 2. **Report results of CG CAHPS questions for “How Well Doctors Communicate With Patients” theme for at least data from the last two quarters of the demonstration year to the State** 3. **Report results of CG CAHPS questions for “Helpful, Courteous, and Respectful Office Staff” theme for at least data from the last two quarters of the demonstration year to the State** 4. **Report results of CG CAHPS questions for “Patients’ Rating of the Doctor” theme for at least data from the last two quarters of the demonstration year to the State** 5. **Report results of CG CAHPS questions for “Shared Decisionmaking” theme for at least data from the last two quarters of the demonstration year to the State** | 1. **Report results of CG CAHPS questions for “Getting Timely Appointments, Care, and Information” theme to the State** 2. **Report results of CG CAHPS questions for “How Well Doctors Communicate With Patients” theme to the State** 3. **Report results of CG CAHPS questions for “Helpful, Courteous, and Respectful Office Staff” theme to the State** 4. **Report results of CG CAHPS questions for “Patients’ Rating of the Doctor” theme to the State** 5. **Report results of CG CAHPS questions for “Shared Decisionmaking” theme to the State** | 1. **Report results of CG CAHPS questions for “Getting Timely Appointments, Care, and Information” theme to the State** 2. **Report results of CG CAHPS questions for “How Well Doctors Communicate With Patients” theme to the State** 3. **Report results of CG CAHPS questions for “Helpful, Courteous, and Respectful Office Staff” theme to the State** 4. **Report results of CG CAHPS questions for “Patients’ Rating of the Doctor” theme to the State** 5. **Report results of CG CAHPS questions for “Shared Decisionmaking” theme to the State** |

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| **Care Coordination** | | | | |
| **Year 1** | **Year 2** | **Year 3** | **Year 4** | **Year 5** |
|  | 1. **Report results of the Diabetes, short-term complications measure to the State** 2. **Report results of the Uncontrolled Diabetes measure to the State** | 1. **Report results of the Diabetes, short-term complications measure to the State** 2. **Report results of the Uncontrolled Diabetes measure to the State** 3. **Report results of the Congestive Heart Failure measure to the State** 4. **Report results of the Chronic Obstructive Pulmonary Disease measure to the State** | 1. **Report results of the Diabetes, short-term complications measure to the State** 2. **Report results of the Uncontrolled Diabetes measure to the State** 3. **Report results of the Congestive Heart Failure measure to the State** 4. **Report results of the Chronic Obstructive Pulmonary Disease measure to the State** | 1. **Report results of the Diabetes, short-term complications measure to the State** 2. **Report results of the Uncontrolled Diabetes measure to the State** 3. **Report results of the Congestive Heart Failure measure to the State** 4. **Report results of the Chronic Obstructive Pulmonary Disease measure to the State** |

Care Coordination Denominator:

The following are the DPH system primary care clinic(s):

1. Family Medicine, La Jolla at 9333 Genesee Avenue, Suite 200, San Diego, California, 92121
2. Family Medicine, Hillcrest 4th & Lewis at 330 Lewis Street, Suite 400, San Diego, California, 92103
3. Family Medicine, Scripps Ranch at 9909 Mira Mesa Blvd, Suite 200, San Diego, California, 92131
4. Internal Medicine, 4th & Lewis at 330 Lewis Street, Suites 300 & 301, San Diego, California, 92103
5. Internal Medicine, La Jolla at 8939 Villa La Jolla Drive, Suite 110, La Jolla, California, 92037

Additionally, in order for there to be consistent reporting across DPH systems, the “past 12 months” for all care coordination measures will be defined as the prior demonstration year (July 1 – June 30 of the prior year).[[1]](#endnote-2)

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| **Preventive Health** | | | | |
| **Year 1** | **Year 2** | **Year 3** | **Year 4** | **Year 5** |
|  | 1. **Report results of the Mammography Screening for Breast Cancer measure to the State** 2. **Reports results of the Influenza Immunization measure to the State** | 1. **Report results of the Mammography Screening for Breast Cancer measure to the State** 2. **Reports results of the Influenza Immunization measure to the State** 3. **Report results of the Child Weight Screening measure to the State** 4. **Report results of the Pediatrics Body Mass Index (BMI) measure to the State** 5. **Report results of the Tobacco Cessation measure to the State** | 1. **Report results of the Mammography Screening for Breast Cancer measure to the State** 2. **Reports results of the Influenza Immunization measure to the State** 3. **Report results of the Child Weight Screening measure to the State** 4. **Report results of the Pediatrics Body Mass Index (BMI) measure to the State** 5. **Report results of the Tobacco Cessation measure to the State** | 1. **Report results of the Mammography Screening for Breast Cancer measure to the State** 2. **Reports results of the Influenza Immunization measure to the State** 3. **Report results of the Child Weight Screening measure to the State** 4. **Report results of the Pediatrics Body Mass Index (BMI) measure to the State** 5. **Report results of the Tobacco Cessation measure to the State** |

Preventive Health Denominator:

1. Family Medicine, La Jolla at 9333 Genesee Avenue, Suite 200, San Diego, California, 92121
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4. Internal Medicine, 4th & Lewis at 330 Lewis Street, Suites 300 & 301, San Diego, California, 92103
5. Internal Medicine, La Jolla at 8939 Villa La Jolla Drive, Suite 110, La Jolla, California, 92037

Additionally, in order for there to be consistent reporting across DPH systems, the “past 12 months” for all preventive health measures will be defined as the prior demonstration year (July 1 – June 30 of the prior year).i

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| **At-Risk Populations** | | | | |
| **Year 1** | **Year 2** | **Year 3** | **Year 4** | **Year 5** |
|  | 1. **Report results of the Diabetes Mellitus: Low Density Lipoprotein (LDL-C) Control (<100 mg/dl) measure to the State** 2. **Report results of the Diabetes Mellitus: Hemoglobin A1c Control (<9%) measure to the State** | 1. **Report results of the Diabetes Mellitus: Low Density Lipoprotein (LDL-C) Control (<100 mg/dl) measure to the State** 2. **Report results of the Diabetes Mellitus: Hemoglobin A1c Control (<9%) measure to the State** 3. **Report results of the 30-Day Congestive Heart Failure Readmission Rate measure to the State** 4. **Report results of the Hypertension (HTN): Blood Pressure Control (<140/90 mmHg) measure to the State** 5. **Report results of the Pediatrics Asthma Care measure to the State** 6. **Report results of the Optimal Diabetes Care Composite for at least data from the last two quarters of the demonstration year to the State** 7. **Report results of the Diabetes Composite for at least data from the last two quarters of the demonstration year to the State** | 1. **Report results of the Diabetes Mellitus: Low Density Lipoprotein (LDL-C) Control (<100 mg/dl) measure to the State** 2. **Report results of the Diabetes Mellitus: Hemoglobin A1c Control (<9%) measure to the State** 3. **Report results of the 30-Day Congestive Heart Failure Readmission Rate measure to the State** 4. **Report results of the Hypertension (HTN): Blood Pressure Control (<140/90 mmHg) measure to the State** 5. **Report results of the Pediatrics Asthma Care measure to the State** 6. **Report results of the Optimal Diabetes Care Composite to the State** 7. **Report results of the Diabetes Composite to the State** | 1. **Report results of the Diabetes Mellitus: Low Density Lipoprotein (LDL-C) Control (<100 mg/dl) measure to the State** 2. **Report results of the Diabetes Mellitus: Hemoglobin A1c Control (<9%) measure to the State** 3. **Report results of the 30-Day Congestive Heart Failure Readmission Rate measure to the State** 4. **Report results of the Hypertension (HTN): Blood Pressure Control (<140/90 mmHg) measure to the State** 5. **Report results of the Pediatrics Asthma Care measure to the State** 6. **Report results of the Optimal Diabetes Care Composite to the State** 7. **Report results of the Diabetes Composite to the State** |

At-Risk Populations Denominator:

The following are the DPH system primary care clinic(s):

1. Family Medicine, La Jolla at 9333 Genesee Avenue, Suite 200, San Diego, California, 92121

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4. Internal Medicine, La Jolla at 8939 Villa La Jolla Drive, Suite 110, La Jolla, California, 92037

Additionally, in order for there to be consistent reporting across DPH systems, the “past 12 months” for all at-risk populations measures will be defined as the prior demonstration year (July 1 – June 30 of the prior year).i **Category 3 Five-Year Incentive Payment Table**

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|  | DY 6 | DY 7 | DY 8 | DY 9 | | DY 10 |
| Category 3 | | | | | | |
| Patient/Care Giver Experience | - | $2,252,250 | $3,003,000 | $4,504,500 | $5,255,250 | |
| Care Coordination | - | $2,252,250 | $3,003,000 | $4,504,500 | $5,255,250 | |
| Preventive Health | - | $2,252,250 | $3,003,000 | $4,504,500 | $5,255,250 | |
| At-Risk Populations | - | $2,252,250 | $3,003,000 | $4,504,500 | $5,255,250 | |

1. “The past 12 months” is defined as the prior demonstration year (July 1 – June 30 of the prior year) because:

   This definition allows the DPH system’s year-end DSRIP report to build on the 6-month DSRIP report by using the same population in the denominator, which is consistent with the program mechanics and therefore, with how the other categories are being reported.

   The visit/admission/discharge in which the numerator event occurred (e.g., LDL recorded, admission for diabetes complications) will have occurred after the 2 visits to primary care, which is consistent with the reason for defining the population as patients for whom the health system has had sufficient opportunity to provide good care and influence good health. [↑](#endnote-ref-2)