Wisconsin Health Care Making Progress Toward CMS Quality Strategy Goals, Part II

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Alcohol Use and Depression Screening, Diabetes Education, and Quality Payment Program Assistance Demonstrate Notable Improvements for the Health of Wisconsinites

etaStar, which represents Wisconsin in the Lake Superior Quality Innovation Network (QIN), has been working alongside Wisconsin health care professionals in many settings to advance the 6 CMS Quality Strategy goals.¹ MetaStar served as Wisconsin's Quality Improvement Organization for 40 years. Following a change in the structure of the program by Centers for Medicare and Medicaid Services (CMS) in 2014, this work became part of a regional partnership, Lake Superior QIN, which serves Michigan, Minnesota, and Wisconsin.

Lake Superior QIN works with partners and stakeholders, including the Wisconsin Medical Society, to impact the 1.05 million Medicare beneficiaries in the state. Current initiatives

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include antibiotic stewardship, behavioral health, cardiac health, coordination of care, diabetes care, medication safety, nursing home quality, the Quality Payment Program, and quality reporting.

Three goals are featured in this article. For more information about the remaining goals, refer to MetaStar Matters in the previous issue of *WMJ*.

Goal 4: Promote effective prevention and treatment of chronic disease

While there are several chronic diseases that affect patients and care in Wisconsin, 1 chronic disease being addressed in primary care clinics across the state involves mental health and substance use conditions. While some of these conditions can be acute and treated successfully with brief interventions, others are known to be chronic issues that require ongoing treatment and medical management.

Depression has been identified by the World Health Organization as the leading cause of disability worldwide.² According to the National Alliance on Mental Illness, 1 in 5 adults in America experience a mental illness, 1 in 25 adults in America live with a serious mental illness, and 60% of adults with a mental illness did not receive mental health services in the previous year.³

MetaStar has been working with approxi-

mately 200 primary care clinics in Wisconsin to screen for depression and alcohol use. The intention is to identify, treat, and/or refer patients who score positive during screening so they can obtain the care they need. To date, these clinics have increased their average screening rates from below 25% in 2015 to more than 50% by the end of 2017. In addition, some organizations report they are screening anywhere from 75% to 90% of their patients. As a result, many more patients in Wisconsin are now receiving treatment for mental health and substance use conditions.

Goal 5: Work with communities to promote best practices of healthy living

Diabetes continues to be a disparity in Wisconsin and according to American's Health Rankings, in 2017 diabetes increased 17% in Wisconsin.⁴ Diabetes self-management education and support (DSMES) is a strategy that can support patients to better understand the disease and take actions that can improve their overall health. DSMES are available in the form of a billable Medicare service and/or a free peer-led workshop. Both opportunities are underutilized by clinicians as a referable service for their patients.

In order to increase utilization of DSMES, MetaStar has been working with a number of Wisconsin clinical practices to develop a process to offer DSMES or refer to DSMES in the surrounding area. In addition, MetaStar has partnered with the Wisconsin Institute for Healthy Aging (WIHA), which has been a strong supporter of individuals with diabetes

for a number of years and is recognized as an innovator in providing programs and services to meet the changing needs of older people. WIHA offers a Stanford-based DSMES curriculum called Healthy Living with Diabetes in both English and Spanish throughout Wisconsin. MetaStar has also partnered with the Midwest Latino Health Research Training and Policy Center to offer a second curriculum using the Diabetes Empowerment Education Program (DEEP). Survey results from workshop participants indicate marked improvement in knowledge, empowerment, and changes in behaviors following completion of a standard 6-week program.

Since 2014, approximately 2600 people with diabetes have completed DSMES through the programs mentioned above.

Goal 6: Make care affordable

Prior to the Quality Payment Program (QPP), payment increases for Medicare services were set by the Sustainable Growth Rate (SGR) law. This capped spending increases according to the Medicare population, and included a modest allowance for inflation.⁵ Due to clini-

cian's increased utilization for services, the reimbursements for each unit of service were adjusted downward to hold costs constant. The SGR would have resulted in large decreases in the Physician Fee Schedule. These large decreases were not sustainable and required Congress to pass a new law every year authorizing the current fee schedule and a small increase for inflation.

The Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) replaced the SGR and provided an avenue for Medicare to reward high value, high quality clinicians with payment increases. As a result, the QPP began in 2017. MetaStar works with eligible clinicians and provider group to provide support and education on this new program.

Through extensive outreach, MetaStar engaged more than 90% of the eligible clinicians in Wisconsin to assist with successfully reporting in the QPP. This also helped eligible clinicians avoid a payment penalty in payment year 2019.

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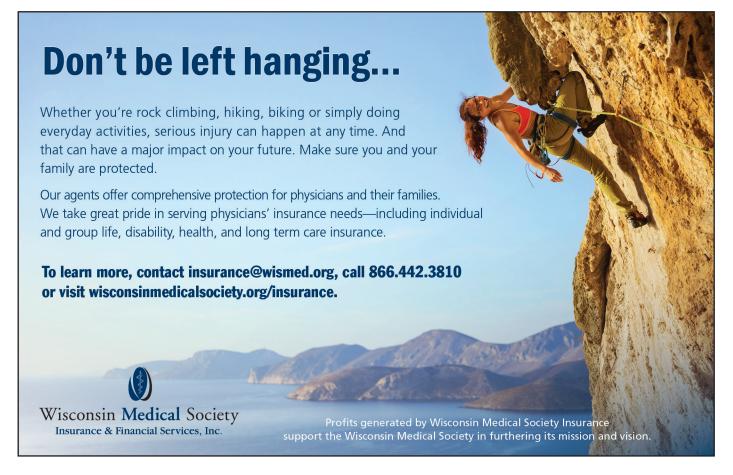
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CMS Quality Strategy Goals

- 1. Make care safer by reducing harm caused in the delivery of care.
- 2. Strengthen person and family engagement as partners in their care.
- 3. Promote effective communication and coordination of care.
- 4. Promote effective prevention and treatment of chronic disease.
- 5. Work with communities to promote best practices of healthy living.
- 6. Make care affordable.

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WMJ (ISSN 1098-1861) is published through a collaboration between The Medical College of Wisconsin and The University of Wisconsin School of Medicine and Public Health. The mission of *WMJ* is to provide an opportunity to publish original research, case reports, review articles, and essays about current medical and public health issues.

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