



CY 2017/2018 QIP & CCIP Requirements



Medicare Drug and Health Plan Contract Administration Group

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Industry Training
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Presentation Overview

- Important Dates
- QIP/CCIP Background
- Changes to the CY 2017/2018 QIP and CCIP Requirements
- CCIP Focus Area
- QIP Focus Area
- Attestation Requirements
- Resources
 - Question & Answer Session

Important Dates

- QIP/CCIP Resource Document
 - Now available on the CMS MA Quality website
- HPMS QIP/CCIP User Guide Release
 - November 9, 2017
- QIP/CCIP Attestation Window
 - November 9-December 31st 2017
- QIP/CCIP Annual Updates conducted internally
 - Late December 2017/early January 2018
- New QIPs and CCIPs Implemented
 - January 1, 2018

Background

- Quality Improvement Program Requirements
 - CMS regulations at 42 CFR §422.152
 - Quality Improvement Project (QIP)
 - Chronic Care Improvement Program (CCIP)
 - Must assess performance
 - Clear quality indicators
 - Report progress to CMS as requested
- Utilize the Plan, Do, Study, Act (PDSA) quality improvement model

Changes to the MA QIP and CCIP Requirements

- Current CCIPs focusing on Million Hearts should be brought to a close
- Current QIPs will continue & become the newly-designated CCIP
- MAOs will develop a new QIP Plan Section in accordance with the CY 2017/2018 requirements
- Plan Sections & Annual Updates no longer need to be submitted for CMS review
 - Only upon request
- All MAOs will submit an annual attestation that they have an ongoing QIP/CCIP, and
- QIPs and CCIPs are 3 year projects

CCIP Focus Area

Overview

- Promote Effective Management of Chronic Disease;
- Slow disease progression, reduce complications, reduce utilization, etc.;
- Improve care and health outcomes for enrollees;
- Address potential health disparities; and
- Produce best practices.

CCIP Plan Section Requirements

- CCIP Title
 - Include the target chronic condition listed in Appendix A*
- CCIP Description
 - Brief summary
- Clinical or other guidelines (if applicable)
- Enrollee Population
 - Total # and description of enrollees

*2017/2018 MA QIP and CCIP Resource Document located on the CMS MA Quality Website

Appendix A

Possible CCIP Target Chronic Conditions

Atrial Arrhythmias	Diabetes
Behavioral Health Conditions: Anxiety Disorders Bipolar Disorder Depression/Major Depression Schizophrenia	End Stage Renal Disease (ESRD)
Cancer	HIV/AIDS
Chronic Kidney Disease (CKD) Stages 4 or 5	Hypertension
Chronic Obstructive Pulmonary Disease (COPD) and/or Asthma	Osteoporosis
Congestive Heart Failure (CHF)	Parkinson's Disease
Coronary Artery Disease (CAD)	Other Chronic Condition
Dementia	

CCIP Plan Section Requirements

- Target Goal
 - Must be specific and quantifiable
- Baseline
- National Standard (if applicable)
- Data Sources Used to Measure Goal
 - Examples include: medical records; claims; HEDIS; HRA; survey data; etc.

CCIP Plan Section Requirements

- Intervention Type(s)
 - Examples include: provider/enrollee outreach & education; medication adherence; care coordination; disease management; home visits; community resources and partnerships; etc.
- Description of Interventions
- Measurement methodology for each intervention
 - Include how the data source(s) will be used, target population & quantifiable measurement.

CCIP Annual Update Requirements

- **Barriers Encountered**
 - Examples include: communication; technology; non-compliance; financial; decline in condition; support system issues; etc.
- **Mitigation Strategies**
 - Examples include: care coordination; technology solutions; enrollee/provider outreach; follow-up after hospital discharge; link to community resources; etc.

CCIP Annual Update Requirements

- Results
 - Include both quantitative and qualitative data, number of enrollees and/or providers in the target population
- Analysis
 - Include how the intervention(s) helped to contribute to improvement

CCIP Annual Update Requirements

- Next Steps/Action Plan
 - Include any modifications (actual or proposed) and the rationale
- Best Practices
 - Include what worked well and produced positive outcomes
- Lessons Learned
 - Include both positive and negative and how they impacted the project

QIP Focus Area

Overview

- Improve Health Outcomes and/or Enrollee Satisfaction
- Address one or more of the CMS Quality Strategy Goals:
 - Make care safer by reducing harm caused in the delivery of care;
 - Strengthen person and family engagement as partners in their care;
 - Promote effective communication and coordination of care;
 - Promote effective prevention and treatment of chronic disease;
 - Work with communities to promote best practices of healthy living; and
 - Make care affordable.

QIP Focus Area

Overview

- Identify the needs of the enrollee population;
- Include a quantifiable goal, specific interventions and measurable outcomes;
- Guard against potential health disparities; and
- Produce best practices.

QIP Plan Section Requirements

- QIP Title
 - Include CMS Quality Strategy Goal(s)
- QIP Description
 - Brief summary
- Clinical or other guidelines (if applicable)
- Enrollee Population
 - Total # and description of enrollees

QIP Plan Section Requirements

- Target Goal
 - Must be specific and quantifiable
- Baseline
- National Standard (if applicable)
- Data Sources Used to Measure Goal
 - Examples include: medical records; claims; HEDIS; HRA; survey data; etc.

QIP Plan Section Requirements

- Intervention Type(s)
 - Examples include: enrollee/caregiver engagement; provider outreach, prevention programs; linking enrollees to community resources; health; wellness & fitness programs; rewards & incentives; etc.
- Description of Interventions
- Measurement methodology for each intervention
 - Include how the data source(s) will be used, target population & quantifiable measurement

QIP Annual Update Requirements

- **Barriers Encountered**
 - Examples include: communication; technology; non-compliance; financial; decline in condition; support system issues; etc.
- **Mitigation Strategies**
 - Examples include: care coordination; technology solutions; enrollee/provider outreach; follow-up after hospital discharge; link to community resources; etc.

QIP Annual Update Requirements

- Results
 - Include both quantitative and qualitative data, number of enrollees and/or providers in the target population
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QIP Annual Update Requirements

- Next Steps/Action Plan
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 - Include what worked well and produced positive outcomes
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 - Include both positive and negative and how they impacted the project

QIP/CCIP Attestation Requirements

- QIP and CCIP Attestation in HPMS
 - MAOs are required to attest annually that they have an ongoing QIP and CCIP for each contract that meet CMS requirements
 - Attestations can be completed starting November 9th through December 31st
 - User guide available in HPMS November 9th

QIP/CCIP Attestation Requirements

- Additional Information Uploads in HPMS
 - CMS maintains the authority to request QIP and CCIP data
 - CMS may periodically request that some MAOs upload information about their QIPs and CCIPs
 - Upload feature should only be utilized when requested by CMS
 - The QIP/CCIP upload templates are available on the CMS MA Quality Website

QIP/CCIP Attestation Requirements

The screenshot displays the HPMS (Health Plan Management System) interface. At the top left is the HPMS logo and name. At the top right, it shows the user is logged in as 'PLAN USER' and provides a 'Log Out' link. Below this is a green navigation bar with tabs for 'Contract Management', 'Plan Bids', 'Plan Formularies', 'Monitoring', 'Quality and Performance', and 'Risk Adjustment'. The main content area is titled 'CCIP/QIP Attestations - Start Page'. It features a photo of two healthcare professionals in a clinical setting. Below the photo, there is a list of functions: 'Attestations' (submitting attestations), 'Uploads' (uploading documents), 'Reports' (viewing reports), and 'User Guide' (viewing module information). A sidebar on the right contains a 'CCIP/QIP Attestations' menu with sub-items for 'Submission' (Attestations, Uploads), 'Reports' (Reports), and 'Documentation' (User Guide). The footer contains a navigation menu, a disclaimer about federal law, and the CMS logo.

HPMS
Health Plan Management System

PLAN USER | User Resources | Log Out | A A
Last logged in at 3:11 PM on October 17, 2017

Contract Management | Plan Bids | Plan Formularies | Monitoring | Quality and Performance | Risk Adjustment

Home » CCIP/QIP Attestations

CCIP/QIP Attestations - Start Page

You will use this module to perform the following:

- Attestations** - Submit CCIP and QIP Attestations.
- Uploads** - Upload CCIP and QIP project-related documents.
- Reports** - Select and view reports.
- User Guide** - View the CCIP and QIP module information.

Home | About HPMS | Website Accessibility | Web Policies | File Formats and Plug-Ins | Rules Of Behavior | System Requirements | FAQ
This is a U.S. Government computer system subject to Federal law.
CV-1.27.0.0.B

CCIP/QIP Attestations

- Submission**
 - Attestations
 - Uploads
- Reports**
 - Reports
- Documentation**
 - User Guide

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QIP/CCIP Attestation Requirements

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CCIP/QIP Attestations - Attestations

[CCIP/QIP Attestations](#)



Attestation

Contract Year: 2017

Program: QIP

Contract: Z0001

- We hereby attest that we have an ongoing Quality Improvement Program (QIP) that meets the regulatory requirements set forth at 42 CFR § 422.152, and the sub-regulatory guidance set forth in the Medicare Managed Care Manual - Chapter 5, and in the QIP & CCIP Resource Document.

QIP/CCIP Attestation Requirements

Contract Management

Plan Bids

Plan Formularies

Monitoring

Quality and Performance

Risk Adjustment

Home » CCIP/QIP Attestations » Attestations

CCIP/QIP Attestations - Attestations

CCIP/QIP Attestations



Attestation

Contract Year: 2017

Program: CCIP

Contract: Z0001

- We hereby attest that we have an ongoing Chronic Care Improvement Program (CCIP) that meets the regulatory requirements set forth at 42 CFR § 422.152, and the sub-regulatory guidance set forth in the Medicare Managed Care Manual - Chapter 5, and in the QIP & CCIP Resource Document.

QIP/CCIP Resources

CMS MA Quality Improvement Program Website

<https://www.cms.gov/Medicare/Health-Plans/Medicare-Advantage-Quality-Improvement-Program/Overview.html>

CMS Quality Strategy Goals

<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/QualityInitiativesGenInfo/CMS-Quality-Strategy.html>

HPMS QIP/CCIP User Guide

<https://hpms.cms.gov/app/home.aspx>

HPMS Help Desk

hpms@cms.hhs.gov or 1-800-220-2028

Medicare Part C Policy Mailbox (website)

<https://dpap.lmi.org>

Medicare-Medicaid Plans

mmcocapsmodel@cms.hhs.gov