

# **Presentation to the House Public Health Committee: Chronic Disease in Medicaid**

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April 5, 2016

# Medicaid Clients

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- How many people receive Texas Medicaid?
  - In FY 2015, Medicaid served approximately 5.1 million clients.
  - On any given month, there were just over 4 million clients.
  - As of June 2015:
    - 4,030,139 clients enrolled in Texas Medicaid.
    - 3,531,587 members are enrolled managed care.
      - STAR: 2,916,905
      - STAR Health: 30,789
      - STAR+PLUS: 549,380
      - Dual Demonstration: 34,513
    - 498,552 clients enrolled in Medicaid fee-for-service (FFS).

# Medicaid Clients and Chronic Disease

- Chronic Disease Incidence in Texas

Smoking and Tobacco-Related and Obesity-Related Conditions, Texas Adults (18+ years of age), CY 2014\*

Risk Factor/Condition	Total Texas Patients	Percent of clients with the condition who are obese	Percent of clients with the condition who smoke	Percent of clients who use tobacco
Obese	5,721,158	100%	15%	18%
Smoke	2,697,748	31%	100%	NA
Use Tobacco	3,258,643	33%	NA	100%
Cardiovascular Disease	1,532,948	43%	18%	22%
Diabetes	2,178,723	56%	13%	15%
Cancer	1,785,541	30%	12%	14%
Hypertension*	6,066,379	44%	17%	20%
Asthma	1,312,573	42%	16%	20%
COPD	1,050,194	39%	28%	31%

\*Hypertension data is from CY 2013.

Source: Texas Behavioral Risk Factor Surveillance System, 2013 (Hypertension) and 2014 data

# Medicaid Clients and Chronic Disease

- How do these estimates relate to Medicaid?

Texas Medicaid Chronic Conditions: Clients and Cost, Fiscal Year 2014

	Medicaid Adults		Medicaid Children (<18)		Total	
	Clients (unduplicated)	Expenditures	Clients (unduplicated)	Expenditures	Clients (unduplicated)	Expenditures
Cardiovascular Disease	438,951	\$611,800,000	42,264	\$72,820,000	480,933	\$684,620,000
Diabetes	240,256	\$300,240,000	8,135	\$16,430,000	248,061	\$316,670,000
Cancer*	64,169	\$229,450,000	10,532	\$79,040,000	74,604	\$308,490,000
Hypertension	323,444	\$235,520,000	7,790	\$4,390,000	331,085	\$239,910,000
Asthma	51,944	\$28,770,000	240,724	\$89,500,000	292,195	\$118,270,000
COPD	98,396	\$59,980,000	55,114	\$19,010,000	153,450	\$78,990,000
		\$1,465,760,000		\$281,190,000		\$1,746,950,000

\*excluding skin cancer

Clients could potentially be included in the Children and Adult Groups if they turn 18 during the year, however the Total is unduplicated

# Medicaid Clients and Chronic Disease

- How do these estimates relate to Medicaid?

Texas Medicaid Chronic Conditions in Adults: Clients, Costs, and Estimated Risk Behavior  
Incidence, Fiscal Year 2014

	Medicaid Adults		Risk Behavior Estimate (CY 14)	
	Clients (unduplicated)	Expenditures	Percent Smoke	Percent Obese
Cardiovascular Disease	438,951	\$611,800,000	18%	43%
Diabetes	240,256	\$300,240,000	13%	56%
Cancer*	64,169	\$229,450,000	12%	30%
Hypertension	323,444	\$235,520,000	17%	44%
Asthma	51,944	\$28,770,000	16%	42%
COPD	98,396	\$59,980,000	28%	39%
		\$1,465,760,000		

*\*excluding skin cancer*

Risk data incidence is based on CY 14

*Source: Texas Behavioral Risk Factor Surveillance System, 2013 (Hypertension) and 2014 data applied to Medicaid populations*

# Medicaid Managed Care Programs

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- **STAR+PLUS**
  - Integrates acute care & long-term services and supports (LTSS) for persons with disabilities and “dual eligibles” (eligible for both Medicare & Medicaid)
- **STAR**
  - Provides acute care services for pregnant women without disabilities and children
- **STAR Health**
  - Medical, dental, vision, and behavioral health services for children in foster care
- **Children’s Medicaid Dental Services**
  - Dental Maintenance Organizations provide dental care for children in Medicaid
- **NorthSTAR**
  - Behavioral health services for Medicaid clients and non-Medicaid eligible residents in Dallas service delivery area
- **Dual Demonstration**
  - Fully integrated model for adults enrolled in both Medicare and Medicaid

# STAR+PLUS: Overview

- STAR+PLUS is a managed care program focused on Medicaid clients who are age 65 and older and those with disabilities.
  - As of June 2015: 549,380 members served
  - Available statewide as of September 1, 2014
  - Service coordination: specialized care management service that is available to all members and performed by a managed care organization (MCO) service coordinator
  - Quality: a combination of established sets of measures and state-developed measures validated by the External Quality Review Organization (EQRO) is used to measure MCO performance
    - Example: National Committee for Quality Assurance Healthcare Effectiveness Data and Information Set (HEDIS)
  - Pay-for-Quality establishes incentives and disincentives for managed care organizations based on their performance on certain quality measures
  - Disease management programs
  - Value-added services

# Performance Improvement Projects (PIPS)

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- Federal law requires all states with Medicaid managed care to ensure health plans conduct PIPs as a comprehensive quality improvement strategy.
  - PIPs must be designed to achieve significant and sustainable improvements in both clinical and non-clinical care areas through ongoing measurements and interventions.
- MCOs are required to have two performance improvement projects per program and follow the Centers for Medicare and Medicaid Services (CMS) External Quality Review protocols when conducting performance improvement projects.
  - MCOs are required to collaborate on one performance improvement project in order to implement system-wide interventions.
- Topics for performance improvement projects are selected based on each MCO's performance and the number of members affected.
- 2014 performance improvement projects have been extended and future performance improvement projects will be two years.

# Performance Improvement Projects

- Projects focusing on chronic diseases:

Topic	Number of Projects	Programs Impacted	Project Years
Asthma	19	STAR	2014-2016
Diabetes	4	STAR+PLUS	2014-2016
COPD (Chronic Obstructive Pulmonary Disease)	1	STAR+PLUS	2016-2018

# Delivery System Reform Incentive Payment (DSRIP)

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- Forty-nine DSRIP projects are implementing initiatives focusing on obesity prevention or weight management or have a project outcome related to obesity prevention and/or weight management.
- Twenty-eight DSRIP projects are implementing a tobacco/smoking cessation project or have a project outcome related to measuring adult and/or adolescent tobacco use or measuring the rate of tobacco use screening and cessation.
- At least 270 projects focus on prevention, treatment and management of diabetes or have a project outcome related to diabetes.
  - Many of these projects also work with individuals with other chronic health conditions such as congestive heart failure, chronic obstructive pulmonary disease, or hypertension.

# DSRIP Project Examples

- There are 20 Regional Healthcare Partnerships (RHP) in Texas. Examples focusing on diabetes, obesity, and smoking cessation:

University Physician Associates  
(RHP 1)

- Implement an evidence based, multi-disciplinary pediatric weight management program in Lamar County.

City of Houston Department of  
Health and Human Services  
(RHP 3)

- Establish self-management and wellness programs for individuals with diabetes residing in an underserved area.

University of Texas Health  
Science Center at San Antonio  
(RHP 6)

- Use Community Health Workers to implement a patient navigator program linked to a primary care safety net clinic to improve diabetes outcomes.

Dell Children's Medical Center  
(RHP 7)

- Deploy a tiered approach to treat and prevent childhood obesity (family intervention, best practices and tools for clinicians, and a multi-media health promotion).

Texas Tech University Health  
Sciences Center Amarillo  
(RHP 12)

- Implement a smoking cessation program for high-risk hospitalized patients.