



Director Jami Snyder
AHCCCS
801 E. Jefferson
Phoenix, Arizona 85034

February 26, 2021

Dear Director Snyder:

Thank you for the opportunity to comment on the AHCCCS Administration's CYE 2022 Differential Adjusted Payment (DAP) Preliminary Public Notice. I am responding on behalf of the Arizona Hospital and Healthcare Association (AzHHA). AzHHA is a statewide association of more than 80 hospital, healthcare and affiliated health system members, representing short-term acute care, behavioral health, post-acute care, and critical access hospitals, as well as their affiliated clinics and staff.

General Comments

For the last several years, AzHHA has regularly provided comments on the annual DAP request for information and DAP preliminary public notice. Our comments have consistently recommended that the Administration's decisions on value-based purchasing metrics be conducted as part of regularized, on-going consultation with the stakeholder community. We strongly believe that the DAP program should be incorporated into a broader, formalized, multi-year strategic approach developed by the AHCCCS Administration in consultation with a panel of subject matter experts who have expertise on healthcare quality improvement, metrics, best practices, and Medicaid data. This panel would convene regularly and advise AHCCCS on metrics and benchmarks that align with the Administration's overall strategic plan, and which will provide the greatest opportunity to improve the quality of care and health outcomes for AHCCCS members. AzHHA advocates for this process for a number of reasons:

1. There is a wealth of expertise within the provider community, at the Arizona Department of Health Services, and at the state's Medicare Quality Improvement Organization that AHCCCS can tap into to help identify appropriate metrics. AzHHA itself has 2 staff members who work under a federal grant with hospital Directors of Quality on data collection, analysis and performance improvement. These individuals and their peers are passionate about quality improvement and eager to participate in collaborative efforts to improve health outcomes for all Arizonans, including the identification of Medicaid-appropriate metrics.

2. Convening these experts with AHCCCS staff and health plan representatives will allow all stakeholders to vet Medicaid data in a transparent manner and identify areas of greatest need for improvement, and then collectively determine realistic metrics that also meet the Administration's principles.
3. Convening a panel of experts would help mitigate biases that may occur when individual providers (potential DAP recipients) simply suggest metrics from the narrow scope of their own performance.
4. Developing a multi-year strategy with metrics and benchmarks identified a year or more in advance will give providers advance notice of the Administration's priorities and allow for reallocation of provider resources if necessary. In addition, many Medicare measures (several of which we expect will meet AHCCCS's principles) are tied to performance data from previous years, and providers should be given time to improve scores if these will be used for AHCCCS DAP purposes.¹
5. Finally, convening this panel would help AHCCCS achieve some of the broader goals outlined on page 53 of the *Agency's Quality Strategy, Assessment, and Performance Improvement Report* (July 1, 2018). These include striving for:
 - Systemic research and sharing of best practices and lessons learned both locally and nationally.
 - Broader participation in collaborative community efforts to improve the health status of Arizonans; and potentially
 - The provision of technical assistance programs with subject matter experts.

Specific Comments on CYE 2022 HIE Proposal

AzHHA supports the proposed health information exchange (HIE) metric. Our clinical leads believe this metric is important for advancing equity of care. However, hospitals subject to the HIE metric must receive regular progress reports from Health Current to measure their advancement toward the target goals. This exchange of information will provide hospitals with data needed to focus resources on quality improvement.

At a recent meeting of Health Current's Clinical Advisory Council, staff was not able to convey whether hospitals receive only initial and final reports, or whether they also receive these more regular status-updates. AzHHA urges the AHCCCS Administration and Health Current to ensure hospitals receive more regular status-update reports, preferably monthly, or at a minimum quarterly, so the hospital can measure their progress. Without this information, hospitals are "flying blind", not knowing if they are improving until the year is done.

¹ We know, for example, from data that hospitals have reported to AzHHA as part of our Hospital Improvement Innovation Network that many hospitals' performance has shifted greatly relative to data publicly available through Hospital Compare. As such, many hospitals believe that the data publicly available through Hospital Compare is not a good reflection of current performance.

On behalf of our member hospitals and health care organizations, it is our hope that these comments will serve as the beginning of a conversation between AHCCCS and the stakeholder community in working together to formulate a new, strategic approach to improve quality of care and health outcomes for AHCCCS members.

Sincerely,

A handwritten signature in blue ink that reads "Debbie Johnston". The signature is written in a cursive, flowing style.

Debbie Johnston
Executive Vice President

Phone

602-445-4300

Fax

602-445-4299

2800 N. Central Ave., Suite 1450
Phoenix, AZ 85004