Care Management Request for Proposal

Attachment F – Reporting Examples

OHCA Example Reports and Queries
This list of reports and queries is indicative of the reporting requirements that the new System will need to fulfill.

OHCA Example Reports and Queries

	Name	Description	Data Fields Required	Data Source(s)	Report or Query	Audience	Frequency
EXP-1	**Staff Performance**	Provides details on Staff productivity over a predefined timeframe. Staff parameters may include the individual, departments, etc.	- Episode of Care Assignment - Staff Demographics - Compliance with policy (e.g., completing actions within set timeframe, other metrics as defined by the State). Policy, timeframes and Metrics may vary by episode of Care program. - Time logged to Episode of Care	The System	Report Query	OHCA Care Management Units and Staff	On Demand
EXP-2	**Capacity Planning**	Provides details on caseload by staff over a predefined timeframe.	- Episode of Care assignment - Staff demographic including skill sets - Geographically demand by member population - Calculates caseloads allowing adjustments for vacant Staff (FMLA, etc.)	The System	Report Query	OHCA Care Management Staff and Management	On Demand
EXP-3	**Member Population Count**	Provides count of total (unduplicated) members enrolled in a Care Management Program over a predefined timeframe as well as total count of members by condition, location, provider.	- Active members - Condition - Location(region) - PCP - Episode of Care group	The System	Report Query	OHCA Care Management Staff and Management	On Demand
EXP-4	**Geographic Variability by Chronic Disease including chronic disease**	Provides details on population report on geographic variability of chronic diseases - "hot spotters" by geography and practice (prevalence of condition(s) by a) region, b) provider practice)	- Disease type - Location - Practice	The System MMIS	Report Query	Care Management Staff and Management	On Demand

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	prevalence by practice						
EXP-5	**Member Adherence**	Provides details on member adherence to medication for a specific condition as well as percentage of enrolled members with completed assessments and medication adherence issues. The query should ask for a point in time for gaps.	Gaps in refills for all eligible members.	The System MMIS	Query	Care Management Staff and Management	Near real time
EXP-6	**Member's Gap in Care**	Identifies possible members with gaps in care based on their condition. Needs to be point in time and able to pull at any time.	Gaps in care based on evidence based treatment/guidelines, Associate an ED trip based on coded dx and relate it to the gap in care.	The System MMIS	Query	Care Management Staff and Management	Near real time
EXP-7	**Clinical outcomes by Member**	Provides overview of clinical outcomes achieved by member such as improved AIC (A1C), less ED utilization, etc.	Decrease in acuity level/cost associated with disease.	The System MMIS	Report Query	Care Management Staff and Management	On Demand
EXP-8	**Clinical outcomes by Plan of Care**	Provides overview of clinical outcomes achieved by different plans of care for specific conditions	Decrease in acuity level/cost associated with disease	The System MMIS	Report Query	Care Management Staff and Management	On Demand
EXP-9	**Operational Metrics both on individual staff and unit basis**	Provides Program-specific operational metrics including but not limited to: - Percentage of caseload capacity, those with SNA, etc. based on given metrics re: staff.	Information such as case types, volume & caseload capacity by unit.	The System MMIS	Report Query	Care Management Staff and Management	On Demand
EXP-10	**ER Visits**	Provides a count of total ER visits by Member for a predefined time frame and hospital; review of utilization of hospital services versus setting up predefined hospital; during specified timeframe	Date/name of ER/reason/disposition and any related gaps in care that can be associated with diagnosis for Emergency Department trip.	The System MMIS	Report Query	Care Management Staff and Management	On Demand

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		--i.e. 3 months prior to CM intervention, then 3 month s/p CM intervention.					
EXP-11	**Referral Sources**	Provides information on external referral sources the System has captured	Reason for referral, total # of referrals for each source	The System	Report Query	Care Management Staff and Management	On Demand
EXP-12	**Assessments by Condition, Acuity**	Provides the number and type of assessment by condition, acuity	Assessment Type, Assessment Scores, Amount of each type of assessment & subsequent referrals to other entities.	The System	Report Query	Care Management Staff and Management	On Demand
EXP-13	**Member Dashboard**	Provides Member's health profile compared to Member population profile and overall population profile	All contact info, PCP contact info, DOB, SSN, type of insurance (e.g., disabled managed care, etc.), Medicaid ID #, Guardian, Contact information if <18 year old, other services member receives.	The System MMIS	Report Query	Care Management Staff and Management	On Demand

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EXP-14	Clinical Metrics Dashboard	Provides a dashboard with clinical metrics, including but not limited to - - Asthma, Prescription Adherence - CHF, ACEI/ARB Adherence - CHF, Preferred Beta Blocker Adherence - Diabetes, Annual Lipid Panel (1 or more) - Achievement of goals/intervention or progress toward goals.	Individual staff member: report on each staff person's current caseload and provided clinical information on each member to be associated with the disease specific assessment that was done. For example, if diabetes assessment was done on John Doe, the report shows a1c lab data missing, lipid values, etc. A synopsis of clinical improvement in current diabetes population for individual staff member would be desired. So if staff Sally has 3 diabetes patients and their average initial a1c was 10.2, then their average 3 month a1c was 9.3- this would be ideal. If staff had 5 current members with Asthma assessment, this would show initial % without controller medication and then % on controller medication. Staff then has option of pulling over any gaps in medication adherence, report on ED utilization. For population: Statewide data of clinical measures for each condition and analysis of performance on each. If all of state team has 22 patients with systolic HF, then would like analysis of % on evidenced based meds- before and after. If the state has decreased A1Cs in enrolled population by 2.5%, we need to know this.	The System MMIS	Real Time Dashboard	Care Management Staff and Management	Near Real Time Dashboard

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EXP-15	**Member Utilization reports**	Provides cost of service for each member for a predefined timeframe	Information such as ICN, Provider Name, Diagnosis, Dates of Service Services rendered	The System	Report Query	Care Management Staff and Management	On Demand
EXP-16	**Workflow Dashboard Metrics**	Provide electronic dashboards depicting current statistic such as: Members scheduled appointments by nurse, nurses traveling, assessments due during a time period, and other metrics.	Based on integration with calendars, display unit average caseloads, capacity of an employee to accept a new case based on availability in the office and caseload capacity.	The System	Real Time Dashboard	Care Management Staff and Management	Near Real Time Dashboard