Medicaid CHIP Data Analytics Unit Quarterly Report of Activities State Fiscal Year 2022, Quarter 4

As Required by
2022-23 General Appropriations Act, Senate Bill 1, 87th Legislature, Regular Session, 2021 Texas Health and Human Services
(Article II, HHSC, Rider 7)

Texas Health and Human Services Commission

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1. Executive Summary

The 2022-23 General Appropriations Act, Senate Bill (SB) 1, 87th Legislature, Regular Session, 2021 (Article II, HHSC, Rider 7), directs the Health and Human Services Commission (HHSC) to submit a quarterly report on activities and findings of the Data Analysis Unit established pursuant to Government Code, §531.0082. In compliance with this rider, this report focuses on the quarterly activities, the status of major projects, and the findings of the Medicaid CHIP Data Analytics Unit (MCDA).

Highlights this quarter include:

- In SFY22 Q4, MCDA further improved the extract, transform, and load (ETL) and geoprocessing scripts for measuring geodistance and travel time between clients and providers by including quality control measures that reduced the amount of manual review required, making the process faster and more reliable. This quarter's results were completed, submitted, reviewed, and accepted in 5 weeks, an improvement from seven weeks in the previous quarter, including a new extension of the workflow to load the cleaned, geocoded provider datasets to the Microsoft SQL Server for wider usage.

- In anticipation of an integrated data system to monitor provider network adequacy, MCDA is improving methods to describe provider participation in Medicaid and CHIP. MCDA is geocoding providers' physical, billing, and licensed addresses, grouping the providers by specialty classification, and creating new database tables to store this information.

- This quarter, MCDA continued partnering with the Performance Management and Analytics System (PMAS) teams within the Office of Data, Analytics, and Performance (DAP) and HHSC Information Technology (IT), to integrate and automate the data systems required to monitor provider network adequacy in a more efficient and holistic manner. To date, MCDA has built multiple proof-of-concept data tables in Microsoft SQL Server, coordinated with IT to upgrade software to allow for dashboard automation in the PMAS Tableau Server, and continued to document processes and requirements for later use by IT.

- With the passage of House Bill (HB) 4, 87th Legislature, Regular Session, which has expanded teleservices coverage, MCDA continues to closely monitor trends in the use of this mode of service delivery.

  ‣ MCDA assisted the Benefit Management Review Team in DAP and Medical and Dental Benefits Policy in Medicaid and CHIP Services (MCS) in a fiscal estimate for expanding telemonitoring benefits for a large range of diagnoses.

  ‣ To improve the use of teleservices to provide and enhance mental and behavioral healthcare for children placed in conservatorship, MCDA worked with the Department of Family and Protective Services (DFPS) and MCS to analyze and map STAR Health clients utilization patterns, pursuant to SB 1896, 87th Legislature, Regular Session.

  ‣ To further evaluate the potential cost savings and improved health outcomes of teleservices, MCDA has been working with Texas A&M University on renewing the contract related to HB 1063, 86th Legislature, Regular Session.

- In SFY22 Q4, 34 new anomalies related to the utilization rate per 1,000 members or the amount paid per client were detected in the Service Utilization Dashboard data. On July 20, 2022, MCDA presented its highest priority anomaly findings from the Service Utilization Dashboard to the Service Utilization Workgroup, a committee of subject matter experts from across MCS, such as policy and program divisions, and other areas in HHSC, including Actuarial Analysis. Of those anomalies shared, 2 continued to be monitored into the next quarter.

2. Introduction

The 2022-23 General Appropriations Act, Senate Bill (SB) 1, 87th Legislature, Regular Session, 2021 (Article II, HHSC, Rider 7), directs HHSC to "report to the Legislative Budget Board on a quarterly basis the activities and findings of the Data Analysis Unit" created by Government Code, §531.0082. The following report fulfills this requirement for the fourth quarter of State Fiscal Year 2022 (SFY22 Q4).

During SFY22 Q4, MCDA within the Office of Data, Analytics, and Performance (DAP) completed 38 projects supporting the direction of the Government Code to "…(1) improve contract management, (2) detect data trends, and (3) identify anomalies relating to service utilization, providers, payment methodologies, and compliance with requirements…" in the state's Medicaid and CHIP programs. The status of major projects and activities, along with findings, are described in Table 1, below, and include updates to projects related to three general categories: 1) Monitoring Managed Care Organization (MCO) Contract Compliance, 2) Tracking Service Utilization and Related Data, and 3) Enhancing Data Infrastructure.

MCDA collaborates closely with many units within the MCS division. At the most recent quarterly Service Utilization Workgroup meeting, where MCDA presents its findings of service utilization trends and anomalies, 26 participants attended. Units represented included the Medical Director's Office, Policy and Program, Operations Management, Quality Assurance, and Utilization Review (UR). Several Actuarial Analysis staff also attended the Service Utilization Workgroup meeting. MCDA continues to meet with the Director of Actuarial Analysis on a monthly basis to exchange observations of data variations of interest.

In addition, Rider 7 directs that "…any anomalies identified related to service utilization, providers, payment methodologies, and compliance with the requirements in Medicaid and CHIP shall be reported to the Office of the Inspector General (OIG) for further review." MCDA and the OIG communicate monthly to exchange updates on respective analyses. MCDA continues to assist the OIG with documentation related to the analysis as the OIG investigates further.

3. Routine Projects

Table 1. State Fiscal Year 2022 Quarter 4 Routine Project Updates

Project Name	Project Overview	Frequency of Update	Project Update
Monitoring MCO Contract Compliance - Extract, Transform, and Load (ETL) Automation	Due to the ETL automation developed by MCDA, MCS has been able to redirect Managed Care Compliance & Operations (MCCO) staff resources that would otherwise have been spent manually processing thousands of reports MCOs formerly submitted in Excel format.	Ongoing	In SFY22 Q4, MCDA provided MCCO staff with complete data extracts for quality review of two deliverables (network adequacy and provider termination) by extracting data directly from the TexConnect database.
Monitoring MCO Contract Compliance - ETL Automation	In SFY2022 Q1 MCDA staff began assisting STAR+PLUS and STAR KIDS policy staff in automating report production for MCO self-reported data submitted per Uniform Managed Care Manual chapters 5.4.5.3 and 5.4.5.6. The deliverables referenced in these chapters collect information about number of members authorized to receive Personal Care Services (PCS) and number of members who received those services, as well as the number of units authorized and received.	Ongoing	In SFY22 Q4, MCDA staff continued to work with STAR+PLUS and STAR KIDS policy staff in redesigning the deliverable to provide for quality review of the submissions and to improve data analysis between MCOs.
MCO Contract Compliance – Quality Performance Report (QPR) Dashboards	The goal of the MCDA compliance dashboards is to enhance contract oversight by trending MCOs' compliance with standards required by MCO contracts and the Medicaid Uniform Managed Care Manual, such as claims adjudication timeliness and hotline call pick-up rate standards.	Quarterly	In SFY22 Q4, the QPR compliance dashboards were updated and revised to include all new data points through SFY22 Q3.

Project Name	Project Overview	Frequency of Update	Project Update
MCO Contract Compliance - Complaints Dashboards	As a result of findings from the report required by Rider 61 of the 2018-2019 General Appropriations Act, SB 1, 85th Legislature, Regular Session, 2017 (Article II, HHSC), on Medicaid Managed Care Oversight, MCS initiated a project to revise the managed care member complaints process to streamline intake and tracking, more effectively leverage complaints data to identify risks, and ultimately improve quality of services. HB 4533, 86th Legislature, Regular Session, added related requirements, including making aggregated data available to the legislature and the public.	Quarterly	In SFY22 Q4, two complaints dashboards for SFY22 Q2, and a revised version of SFY22 Q1 were published on the HHSC website, including a new category of complaints on the Medical Transportation Program (MTP), which will help MCS monitor the performance of these services in the wake of the program's carve-in to managed care in June 2021. In SFY22 Q4, MCDA also compiled the SFY22 Q3 data for the upcoming dashboard update.
Provider Network Adequacy - Time and Distance Reporting	HHSC requires MCO provider networks to comply with distance and travel time standards in accordance with managed care contract requirements. MCDA measures geodistance and travel time between clients and providers using geospatial mapping analysis and displays results in a Tableau dashboard, which presents data on compliance with HHSC distance performance standards by MCO, county, and provider type.	Quarterly	MCDA updated the Distance Performance dashboard through SFY22 Q4.
Provider Network Adequacy – Provider Terminations Report	The Provider Terminations Report Dashboard includes counts of providers terminated, reason for termination, and the number of members impacted, allowing MCCO to filter by client program, MCO, Service Delivery Area (SDA), and provider type codes.	Quarterly	MCDA updated the Provider Terminations Report Dashboard with SFY22 Q1 data.

Project Name	Project Overview	Frequency of Update	Project Update
Provider Network Adequacy - PMAS	MCDA is partnering with the PMAS teams within DAP and HHSC IT, to further integrate and automate the data systems required to monitor provider network adequacy in a more holistic manner.	Ongoing	In SFY22 Q4, as part of a proof of concept of an integrated provider data system, MCDA built several provider-related data tables in Microsoft SQL Server.
Teleservices Quarterly Dashboard	The Teleservices Quarterly Dashboard presents telehealth, telemedicine, and telemonitoring costs, claims, clients, and providers, allowing filtering factors like client age and program.	Quarterly	MCDA updated the internal Teleservices Quarterly Dashboard with data through February 2022.
Prior Authorization Data Collection	In SFY22 Q4, HHSC, in collaboration with Texas Medicaid & Healthcare Partnership (TMHP) completed development of the project to finalize variables to include in the new Member-Level Data Warehouse. UR staff have continued to work with the MCOs to assist them in successfully submitting test data to the TMHP Data Warehouse.	Ongoing	As of the end of SFY22 Q4 all MCOs have successfully submitted required 'catchup' detail data back to September 2021. As each MCO finalized their catchup data they were allowed to stop submitting aggregate data. The last aggregate deliverable was submitted for the data month of May 2022 in August 2022.
Service Utilization Dashboard	MCDA creates and maintains a comprehensive service utilization dashboard displaying healthcare utilization by multiple service types, broken out by Medicaid and CHIP programs, MCOs, SDA, age groups, race/ethnicity, and gender. The dashboard features multiple measures, including amounts paid, utilization rates, and number of claims.	Quarterly	In SFY22 Q4, the Service Utilization Dashboard was updated to include finalized data through SFY21 Q4 and preliminary data through SFY22 Q2.

Project Name	Project Overview	Frequency of Update	Project Update
Ongoing Trend and Anomaly Detection	MCDA presents its highest priority anomaly findings from the Service Utilization Dashboard to the Service Utilization Workgroup, a committee of subject matter experts from across MCS, such as policy and program divisions, and other areas in HHSC, including Actuarial Analysis. The MDCA team asks the workgroup members to offer ideas for what is driving the anomaly and to provide direction on next steps. Anomalies may continue to be monitored past the quarter in which they are identified and may be referred to MCS leadership or OIG for further review.	Quarterly	In SFY22 Q4, new anomalies related to the utilization rate per 1,000 members or the amount paid per client were detected in the Service Utilization Dashboard data and shared with the Service Utilization Workgroup. Observations about the impact of the Public Health Emergency (PHE) on services since then were based on final data through SFY21 Q4 (August 2021) and preliminary data from September 2021 - February 2022.
COVID-19 Dashboards and Studies	Since January 2021, MCDA has been posting external dashboards displaying the numbers and rates of Medicaid and CHIP clients receiving COVID-19 tests or receiving a service with a diagnosis of COVID-19, including emergency department visits and inpatient stays.	Quarterly	In SFY22 Q4, MCDA refreshed the external COVID-19 dashboards with data through February 2022.
COVID-19 Non-risk Payment Expenditures	MCDA conducted an analysis to estimate the non-risk payment expenditures for COVID-19 testing/diagnostic services as well as inpatient hospital treatment. MCDA has built a dashboard that identifies any abnormal billing practices for MCOs that are receiving non-risk payments for testing/diagnostic services.	Monthly	MCDA has updated this dashboard to include data up to July 2022's reporting time period. MCDA has also fulfilled a request by MCS Operations division to calculate how much HHSC has paid out in non-risk payments for COVID-19 vaccinations, medical treatment, and testing/diagnostic services.
Physical, Occupational, and Speech Therapy Monitoring	MCDA continues to closely monitor physical, occupational, and speech therapy utilization rates in compliance with Senate Bill 1, 87th Legislature, Regular Session, 2021 (Article II, HHSC, Rider 10).	Biannual	In SFY22 Q4, MCDA began working on analyses on client service utilization, provider network adequacy, and services provided to clients while on wait lists, for inclusion in the December 2022 report. The most recently published Biannual Therapy Access Monitoring Report is for June 2022.

Project Name	Project Overview	Frequency of Update	Project Update
Behavioral Health	MCDA continues to revamp its dashboard on psychotropic medications to focus on the information most commonly requested by MCS leadership. The dashboard will feature best practice parameters, including use of polypharmacy, first developed to monitor psychotropic medication use among foster care children due to concerns over overprescribing. Since 2004, HHSC has updated these measures annually in the Use of Psychotropic Medications for Children in Texas Foster Care report. The most recently published report is for SFY19.	Annual	In SFY22 Q4 MCDA finalized the SFY20 Use of Psychotropic Medications for Children in Texas Foster Care report and anticipate the report to be published in December 2022.
Autism Applied Behavior Analysis	The Medicaid Autism Services Applied Behavior Analysis (ABA) benefit went live Feb. 1, 2022, in compliance with Rider 28 (SB 1, 87th Legislature, Regular Session, 2021 (Article II, HHSC)). MCDA provides the Autism benefit work group and the MCOs a bi-weekly update on licensed behavior analysts (LBAs) that have applied for enrollment and preliminary assessments to assist with recruitment and outreach.	Bi-weekly	In SFY22 Q4, MCDA provided analysis to the Medicaid Benefits Policy staff for Readiness Governance presentations.
Client Enrollment and Eligibility Reporting	MCDA developed the monthly Medicaid and CHIP Enrollment and Eligibility Report to help investigate variations in client eligibility and enrollment data. The data in this report alerts the team to fluctuations in enrollment or Medicaid program rollouts which might impact service utilization. Enrollment data also provides the denominators used in utilization rates, which normalizes the rates to aid in direct comparisons between, for example, MCOs. The one-page enrollment report is distributed widely to MCS and other HHSC staff.	Monthly	The last Medicaid CHIP Enrollment and Eligibility Report released in SFY22 Q4 was compiled in July 2022 and included data as of December 2021. In addition to the static PDF report produced by MCDA, MCDA has designed and implemented a Tableau Dashboard version of the eligibility/enrollment report.

Project Name	Project Overview	Frequency of Update	Project Update
Enhancing Data Marts	The Analytical Data Store (ADS) is a 'Best Picture' view of the claims and encounter data, meaning that it contains only the most current version of a transaction. ADS offers a cohesive blend of managed care and fee-for-service medical and pharmacy data, allowing a holistic view of a provider or member at the time a service took place. The ADS has become the preferred source for blended claims/encounters data and is accessible to MCDA and other DAP teams via the Data Analytics Platform.	Ongoing	In SFY22 Q4, MDCA continued to work with TMHP to enhance ADS with additional variables which will improve the accuracy and consistency of analyses. These enhancements include creating indicators for Healthy Texas Women (HTW) and HTW Plus pharmacy claims, as well as standardized addresses and enhanced geocoding of client and provider addresses.

4. Goals for Next Quarter

In SFY23 Q1, MCDA will build on the work it is conducting on MCS key initiatives and other projects, including the following:

Provider Network Adequacy

MCDA will continue its partnership with the PMAS teams in the project to further integrate and automate the data systems required to monitor provider network adequacy in a more efficient and holistic manner, as directed by the HHS DGPM Executive Steering Committee and Council. Next quarter, MCDA plans to complete validating its method for producing key provider network adequacy measures and pilot a semi-automated system to produce the measures. MCDA is working with MCCO to expand network adequacy reporting to include quarterly comparisons and a more detailed provider fallout report[1] in order to make it easier to identify changes in provider networks that may affect geographic accessibility.

ADS

In SFY23 Q1, MCDA and TMHP will continue its collaborative work on enhancements to the ADS. Upcoming upgrades include United States Postal Service standardized and geocoded provider and client addresses. A separate flag, to help analysts distinguish which pharmacy services were received through the HTW program or the HTW Plus program, and which services were paid for through Medicaid or general revenue, should be completed and in production.

Enhancing Data Infrastructure

Given the breadth of the MCDA dashboard library, it is a resource-intensive endeavor to continuously carry out the ongoing updates necessary to keep the data as current as possible. To increase the efficiency of this process, MCDA is investigating the feasibility of using Tableau Python Server (TabPy) to automate these dataset refreshes. TabPy is an external server implementation which allows

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[1] The provider fallout report includes managed care providers who are not included in provider network adequacy time and distance reporting. Providers may be excluded from time and distance reporting because they are a primary care provider or main dentist with a closed panel, have an out of state address, or submit a bad address.

the execution of Python scripts on Tableau. MCDA is also exploring the use of Microsoft Power BI as a method for increasing the efficiency of its ETL processes.

Behavioral Health

In SFY23 Q1, the annual Use of Psychotropic Medications for Children in Texas Foster Care report for SFY21 will be completed and routed for approval with the SFY20 report, in preparation for data from both years to be released in SFY23 Q2.

List of Acronyms

Acronym	Full Name
ABA	Applied Behavior Analysis
ADS	Analytical Data Store
CHIP	Children's Health Insurance Program
COVID-19	Coronavirus Disease of 2019
DAP	Office of Data, Analytics, and Performance
DFPS	Texas Department of Family and Protective Services
DGPM	Data Governance and Performance Management
ETL	Extract, Transform, and Load
HB	House Bill
HHS	Health and Human Services
HHSC	Health and Human Services Commission
HTW	Healthy Texas Women
IT	Information Technology
LBA	Licensed Behavioral Analyst
MCCO	Managed Care Compliance and Operations
MCDA	Medicaid CHIP Data Analytics
MCO	Managed Care Organization
MCS	Medicaid and CHIP Services
MTP	Medical Transportation Program
OIG	Office of Inspector General
PCS	Personal Care Services
PCP	Primary Care Providers
PHE	Public Health Emergency
PMAS	Performance Management and Analytics System
QPR	Quality Performance Report
SB	Senate Bill
SDA	Service Delivery Area
SFY	State Fiscal Year
TabPy	Tableau Python Server
TMHP	Texas Medicaid & Healthcare Partnership
UR	Utilization Review