**Potential Quality & Cost Outcome Measures**

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| --- | --- | --- | --- | --- |
| **Outcome category** | **Outcome measure** | **Respondent** | **Data Source** | **Measurement period** |
| **Cost** | Total PMPM§ | Payer | Health plan claims | Monthly |
| # Inpatient events/yr | Monthly |
| # inpatient thru ER/y | Monthly |
| # inpatient days/yr | Monthly |
| # “community days” \* | Monthly |
| # ER visits/y | Monthly |
| # obs ER | Monthly |
| # ER visits with d/c | Monthly |
| # urgent care visits | Monthly |
| Ancillary/pharm sx† | Monthly |
|  |  |  |  |  |
| **Quality** | Access to care: utilization and unmet needs | Parent | Experience of Care P3C survey (a) |  |
| Barriers to care | Parent | Barriers to Care survey (b) |  |
| Child functioning | Parent/child | National Survey of CSHCN unmet needs questions (c) |  |
| Family burden | Parent/child | Caregiver Strain Survey |  |
| Family/child QOL | Parent/child | PEDS QOL 4.0 (d) |  |
| Satisfaction with care | Family | CAHPS (payer) |  |
| Member connection to PCP | Parent/child |  |  |
| Satisfaction with care | Provider | Provider satisfaction survey (payer) |  |
| Performance measures: access to primary care/WCC visits, dental visits, flu shots, immunizations | Payer/Provider | HEDIS claims and chart review | Quarterly |
| Condition-specific performance measures: diabetic tests and screens, medication adherence(best practices) | Payer/Provider | claims | Quarterly |
| MD satisfaction | Provider |  |  |
| MD perceived empowerment/enjoyment | Provider |  |  |
| MD unmet needs | Provider |  |  |

§expenses: medical, BH, pharm

\*(between unplanned care events)-survival curve

†private duty nursing, DME, generic fill rate

ADD: Decrease unnecessary meds, errors, # of hospital days (length of stay not just # of admissions)