



State Government · Health and Human Services

A Quality of Care analytics solution that helps a state Medicaid program track care quality, flag preventable events, and control cost

Intuceo built a Quality of Care analytics solution, compliant with the Health Insurance Portability and Accountability Act (HIPAA), that tracks recognized quality measures, surfaces potentially preventable events, and analyzes utilization and hospital performance to drive transparency and improve the quality and cost-effectiveness of Medicaid services.

Sector

State Government,
Medicaid

Focus

Quality of Care
analytics

Scope

Quality, preventable
events, utilization

Compliance

HIPAA compliant

Client Overview

The client is a state program accountable for the quality and cost of Medicaid services

The client oversees Medicaid services at the state level and is accountable both for the quality of care members receive and for the cost-effectiveness of those services. That accountability depends on measuring care against recognized quality standards and on seeing clearly where care or spending falls short.

The Challenge

The client is a state program accountable for the quality and cost of Medicaid services

Improving quality of care while controlling cost across Medicaid services means measuring performance against recognized national quality measures, watching for avoidable events, and understanding how utilization and hospital performance affect both outcomes and spend. Carrying that out across separate data, under strict privacy requirements, is difficult.

The program needed transparency and accountability across its services, quality measures it could benchmark, and a way to surface potentially preventable admissions, readmissions, and complications, all while handling protected health information in a HIPAA-compliant way.

The Solution

Intuceo built a HIPAA-compliant analytics solution that tracks recognized measures and surfaces avoidable events

Intuceo delivered a Quality of Care analytics solution for the state Medicaid program, built to be HIPAA-compliant and organized around the measures and analyses the program is accountable for.



01

Quality of Care tracking and benchmarking.

Tracks and benchmarks quality of care against the Healthcare Effectiveness Data and Information Set (HEDIS®) and HEDIS® Hybrid Measures, together with Agency for Healthcare Research and Quality (AHRQ) metrics.

02

Potentially preventable events.

Surfaces potentially preventable events across admissions, readmissions, and complications, so avoidable harm and the cost that comes with it become visible.

03

Utilization analysis and hospital performance.

Analyzes utilization alongside hospital performance to show how care is being delivered and where it varies across the

04

Core measures for Star Ratings.

Tracks the Centers for Medicare and Medicaid Services (CMS) core measures that feed Star Ratings, keeping performance against them in view.

05

HIPAA-compliant transparency and accountability.

Handles protected health information in a HIPAA-compliant way while giving the program the transparency and accountability to hold services to account.



Technology

The solution is organized around recognized measures, defined analytics domains, and HIPAA-compliant handling of data

01

Measures and benchmarks

- HEDIS® and HEDIS® Hybrid Measures
- AHRQ metrics
- CMS core measures for Star Ratings

02

Analytics domains

- Quality of Care tracking and benchmarking
- Potentially preventable admissions, readmissions, and complications
- Utilization analysis and hospital performance

03

Compliance

- HIPAA-compliant handling of protected health information
- Support for transparency and accountability of services



Outcomes

What the state Medicaid program now has in place after the engagement

- **Quality of care tracked and benchmarked** against HEDIS®, HEDIS® Hybrid Measures, and AHRQ metrics.
- **Potentially preventable admissions, readmissions, and complications made visible**, so avoidable events can be acted on.
- **Utilization and hospital performance analyzed together**, showing where care and spend vary.
- **CMS core measures for Star Ratings kept in view**, with performance against them tracked.
- **Protected health information handled in a HIPAA-compliant way**, supporting transparency and accountability across Medicaid services.

Close the Gap Between Quality of Care and Cost

Quality of care and cost are two sides of the same problem. When quality slips, avoidable admissions, readmissions, and complications follow, and the spend follows with them. Intuceo tracks Medicaid quality against HEDIS®, AHRQ, and the core measures behind CMS Star Ratings, flags potentially preventable events, and ties utilization to hospital performance, so a quality gap can be acted on before it becomes a cost, with the transparency your oversight stakeholders expect. Every part of it is handled in a HIPAA-compliant way.

[Talk to us](#)



Thank You



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