

Curriculum Vitae

William H. McQuade, D.Sc., M.P.H.
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EDUCATION

Boston University School of Public Health, Boston, MA

Doctor of Science (D.Sc.) in Epidemiology 2006

University of Massachusetts, Amherst, MA

Master of Public Health (M.P.H.) in Epidemiology and Biostatistics 1993

Emory University, Atlanta, GA

Master of Arts (M.A.) in Political Science 1977

Emory University, Atlanta, GA

Bachelor of Arts (B.A.) in Sociology 1974

TEACHING / PROFESSIONAL EXPERIENCE

Brown University, Providence, RI

Assistant Professor of Health Services Research and Practice: 1993-present

The School of Public Health at Brown University

Medicaid/Medicare Research Group Leader

Program in Liberal Medical Education, Curriculum Committee, Program Development.
1999-2003

Student Advisor/Lecturer to 3rd Year Medical Students in Community Health Clerkship
conducting research project. 1988-1995.

Ignaz Semmelweis Epidemiology Lecture Series: Series of six lectures in Epidemiology and
Biostatistics provided to Family Medicine Residents: 1993-1995

University of Rhode Island

Guest Lecture, Fall 2018, PSY460-The Substance Troubled Person

Guest Lecture, Winter 2019, PSY460-The Substance Troubled Person

New England Comparative Effectiveness Public Advisory Council: Advisory Board, 2010-present

Academy Health, State Health Research and Policy Executive Committee, 2008-present.

RI Care Transformation Collaborative (RI's PCMH Project): Data and Evaluation Committee Co-chair: 2012-present.

RI Medicaid Medical Care Advisory Committee, 2009-present.

BRFSS Advisory Committee. RI Department of Health, 2008 to present.

Area Health Education Center (AHEC), 2003-2009

RI EOHHS/Brown University Statewide Epidemiology and Outcomes Workgroup (SEOW), 2006-2010

EMPLOYMENT

**RI Executive Office of Health and Human Services
Center for Policy and Innovation
Office of Evaluation and Analysis
Senior Health Policy Analyst. 1995-present**

Duties: Develop quantitative and qualitative methodologies to assess the quality of care provided in the RI Medicaid program that serves diverse populations (including children with special health care needs and adults with disabilities) and is administered through multiple delivery systems (including contracts with MCO, capitated arrangements with FQHCs and multiple care management systems). Design and implement analytical plan for program management, oversight and monitoring, quality assurance as well as research and evaluation. Work with program and clinical staff to develop process and outcome measures to monitor program performance (see In-Service Training Workshops). Serve as Medicaid's Chief Program Evaluator. Develop surveillance systems to monitor disease patterns (incidence and prevalence) in Medicaid (i.e., HIV, asthma, diabetes, and depression) and assess adequacy of care. Identify strategies to assess progress in achieving the Triple Aim and the effectiveness of system enhancements such as pay for performance, disease management programs, primary care medical homes (PCMH), prescription drug formularies and ACA enhancements to population health. Construct NCQA and NQF performance measures and implement strategies to improve outcomes. Interact directly with all levels of the RI health care delivery system (including CMS, State Medicaid Program, participating health plans, hospitals, and provider organizations as well as academic setting such as Warren Albert Medical School of Brown University and the College of Pharmacy at the University of RI) to implement program and policy initiatives as recommended by the Executive Office of Health and Human Services (EOHHS). Coordinate with other agencies under the EOHHS umbrella (i.e., DCYF, MHRH, Elderly Affairs, Health and DHS) on interdepartmental initiatives. Develop and maintain infrastructure for health services and policy research including creation of managed care datasets, links to fee-for-service

claims and eligibility files, assuring compatibility with relevant national datasets such as the All Payer Claims Data (APDC), staff training, supervision and resource allocation to support research activities. Design and implement Member Satisfaction Surveys including instrument development, sampling procedures and selection, and analysis. Conduct special focused studies as specified by program needs such as Emergency Department utilization, NICU care and teen pregnancy trends in the program. Present analytic results in suitable written and oral formats to local, regional and national audiences. Editor of quarterly *Policy Brief* entitled **RIte Stats**.

**Brown University/Memorial Hospital, Department of Family Medicine, Pawtucket, RI
Research Coordinator. 1986-1995**

Duties: Served as principal consultant with clinical and academic faculty on design, conduct and analysis of their individual research projects; develop research portfolios for each academic faculty member to enhance academic promotions and establish the Family Medicine Department as a viable entity within the University. Established the infrastructure within the Department for conducting clinical and health services research including hiring and training staff, resource allocation, development of clinical datasets, and information technologies. Design protocols to assess resident performance and assess various training protocols for clinical effectiveness. Served as Department liaison to other academic departments within the medical school such as pediatrics, psychiatry, the Center for Alcohol and Addiction Studies and the Department of Community Health. Established multidisciplinary research teams within the broader medical school community to foster multidisciplinary research in areas such as maternal and child health, substance abuse, psychosocial issues in medicine, primary and secondary prevention of cardiovascular disease, pediatrics. My role required participation at the highest level to establish teams, coordinate selection and design of research protocols and supervise all aspects of the research process from instrument design, data collection, analysis and publication. Also actively participated in securing outside funding for research, residency training and faculty development. Maintained national and local datasets as needed to support Department research (including state level hospital discharge data, birth certificates as well as national datasets such as NAMCS and NHIS). Presented results at regional and national meetings. Major teaching duties included designing and implementation of the Ignac Semmelweis Lecture Series in clinical research for family practice residents, Community Oriented Primary Care (COPC) training for Family Medicine faculty, as well as lecturing medical students on basic statistical analysis in their Community Health Clerkship and mentoring them on the design and conduct of their required clerkship research project.

**State of Georgia, Department of Human Resources, Atlanta, GA
Senior Operations Analyst, Division of Public Health. 1981-1985**

Duties included extensive epidemiologic analyses of State morbidity and mortality data, actively participated in writing the Five and Ten Year State Health Plan and evaluated progress in attaining stated goals; worked with State and local Health Department staff to develop epidemiologically sound annual and multi-year program objectives and developed training seminars in program evaluation for State and local public health personnel; served as a team leader with health program

staff for designing, implementing, evaluating, and estimating cost of public health services; worked with EIS officers from CDC to develop model programs in preventing low birth weight deliveries, promote timely access to prenatal care, and developing accident prevention programs. Served as editor of an *Issue Brief* called **Topics** focusing on timely issues of public health concern. Also, established forecasting systems to estimate expenditures of state public health programs such as WIC and STDs.

**State of Georgia, Judicial Council of Georgia, Atlanta, GA
Senior Research Associate, Administrative Office of the Courts. 1974-1979**

Developed first Statewide data system for the trial courts which included designing the methodology, training and supervising the data collection in four courts of record in each of 159 counties. Also, conducted all various analyses on the trial courts in Georgia including *The Annual Report to the Governor on the Need for Additional Superior Court Judgeships*. This position required hiring and supervisory responsibilities of four full-time research associates and ten part-time research assistants.

Professional Memberships and Certifications

Academy Health
American Public Health Association
RI Public Health Association

Fellowships and Related Experience

National Science Foundation: Student Initiated Study Grant. The Effects of Government Involvement in Housing on Social Interaction in Communities. Providence College - Summer 1973.

Centers for Disease Control and Prevention: CREST Project (Comprehensive Research and Evaluation of Sterilization Techniques), Atlanta, GA. March-June 1979.

Faculte Libre de Medicine, Lille, France. 1984-1986. Basic Science Medical Curriculum.

EOHHS In-Service Training Workshops

Establishing a Comprehensive Analytical Plan for a State Medicaid Program

Description: Most state Medicaid programs have a standard set of reports that support basic business processes such as program management (i.e., enrollment and financial reports), oversight and monitoring activities, as well as quality measurement and performance review. While these analyses serve most State and Federal reporting requirements, they often fall short of providing policy and clinical staff the kinds of insightful information they need to guide program planning and development. This presentation is designed to engage the analytic staff more

effectively with the policy and clinical units to transform data into useful information that can lead to actionable policy changes. Topics include: needs assessment, disease surveillance, case identification, delivery system modifications, and outcome assessment. Special attention is given to identifying and measuring components of the Triple Aim and how to implement Triple Aim concepts into new and existing Medicaid programs. How do we define quality? How do we measure quality? How do we reimburse for quality? (These are 90 minute power point presentations offered periodically to relevant workgroups with follow-up consultations scheduled).

Designing and Implementing Methods for Effective Program Evaluation in Medicaid

Description: Program evaluation in Medicaid is an often neglected component of program management and policy development. This presentation is designed for clinical and program managers to assist in integrating evaluation principles into program design and implementation. Topics including setting quantitative goals and objectives, establishing process and outcome measures, implementing data systems to monitor program participation, and analytical tools to assess progress. Special emphasis is given to identifying the components of the intervention believed to have a measureable effect (as well as an a priori estimate of the magnitude of effect) and establishing data systems to track administration of the intervention. Participants are encouraged to think about ‘lead time’ (how long does it take to get the program up and running?), ‘induction time’ (how long does it take for the program to have an effect on the population?), ‘therapeutic dose’ (how much of an intervention do participants need to have an effect?), and ‘lag time’ (how long will the effects last after the intervention stops?). Focused discussion of PSDA Cycles also included. Workgroup lasts 90 minutes with follow-up consults to follow.

Using Administrative Data to Assess Quality of Care in Observational Studies

Description: Timely availability, easy access and increasing standardization make claims-based data systems an attractive data source in health services research. However, as with any secondary data analysis, one needs to understand the primary functions of the dataset in order to adequately apply the information to issues of access and clinical quality. This presentation is intended for clinical, program and policy staff and attempts to identify the skill set required to adequately apply claims-based data to policy and health services research issues. Topics covered include: tracking continuous enrollment, identifying incident and prevalent cases, defining episodes of care (including bundled and capitated services), categorizing utilization patterns, constructing NCQA and NQF quality measures, and estimating cost of care. Sources of variation and problems in linking data from multiple processing systems are also covered. Duration 60 minutes.

Constructing Analytical Files in Health Services Research

Description: Medical Management Information Systems (MMIS) are enormous relational data systems with complex links among the various sub-components (i.e., enrollment and eligibility files, institutional and professional (837) files and NCPDP files. Linking relevant fields of related data sets into useful analytical files can greatly improve the efficiency of data analysis. This presentation is designed for IT and analytic staff and reviews the content of several of the statistical analytical files (SAFs) including: Inpatient Services, Outpatient ED

services, PCP visits, specialist visits and behavioral health claims. Each of these files contain data fields pulled from enrollment, utilization and provider files to link relevant information from multiple sources.

Peer Reviewed Publications

Laws B, Michaud J, Shield R, McQuade W, Wilson I. Comparison of EHR-based diabetes care quality measures: Causes of discrepancies. Health Services Research, Dec 28. doi: 10.1111/1475-6773.12819. [Epub ahead of print].

Kogut S, Quilliam B, Marcoux R, McQuade W, Wojciechowski C, Wentworth C, Plonsky R, Wood N. Persistence with newly initiated antidepressant medication in Rhode Island Medicaid: analysis and insights for promoting patient adherence. Rhode Island Medical Journal 2016; 99(4):28-32.

McQuade W, Raimondo M, Phivilay-Bassette P, Marak T, Loberti P. Implications of the Affordable Care Act on access to effective HIV services in Rhode Island. Medicine and Health/Rhode Island 2015; 98 (7): 45-48.

McQuade W, Dellapenna M, Oh J, Fuller D, Leonard L, Florio D. Assessing the impact of RI's managed care oral health program (RIte Smiles) on access and utilization of dental care among Medicaid children ages ten years and younger. Medicine and Health/Rhode Island 2011; 94 (8): 247-249.

McQuade W, Pearlman D, Robinson D, and Sutton N. Treatment of asthma symptoms and prevalence of persistent asthma among children enrolled in Rhode Island's managed care Medicaid program. Medicine and Health/Rhode Island 2011; 94 (3): 78-80.

McQuade W. Assessing the impact of routine preventive care on health outcomes in a Medicaid population continuously enrolled in managed care. Doctoral dissertation. Boston University School of Public Health. 2006.

McQuade W, Levy S, Yanek L, Davis S, Liepman M. Detecting symptoms of alcohol abuse in primary care settings. Archives of Family Medicine 2000; 9:814-821.

Mitchell R, Jack B, McQuade W. Mapping the cognitive environment of a residency: an exploratory study of a maternal and child health rotation. Teach Learn Med 1999; 11(1):6-11.

Eaton CB, Monroe A, McQuade WH, Eimer M. A comparison of screening and management of hypercholesterolemia between family physicians, general internists and cardiologists: the national ambulatory medical care survey. J Am Board Fam Pract 1998; 11:180-6.

Monroe AD, Levy S, McQuade WH, Yanek L. Effect of patient gender on documentation of alcohol use histories in patients with mental disorders. Substance Abuse 1997; 18 (2):79-87.

Eaton CB, Bostom A, Lanek L, LaReno J, McQuade W, Eimer M. Family history and premature coronary heart disease. J Am Board Fam Pract 1996; 9:462-3.

Rockney RM, McQuade WH, Days AL, Linn HE, Alario AJ. Encopresis treatment outcomes: long-term follow-up of 45 cases. J Dev Behav Pediatr 1996; 17: 380-385.

Rockney RM, McQuade WH, Days Al. The plain abdominal radiograph in the management of encopresis. Arch Ped Adol Med. 1995;149:623-27.

Jack BW, Campanile C, McQuade W, Kogan MD. Negative pregnancy test: an opportunity for preconception care. Arch Fam Med 1995; 4: 340-345.

Bostom AG, Yanek L, Hume A, Eaton CB, McQuade W, Nadeau M, Perrone G, Jacques PF, Selhub J. High dose ascorbate supplementation fails to affect plasma homocyst(e)ine levels in patients with coronary heart disease. Atherosclerosis 1994;111:267-270.

Eaton CB, McQuade WH, Glupczynski D. Primary vs. secondary prevention of cardiovascular disease in an academic family practice. J Fam Med 1994; 26:587-92.

Bostom A, Eaton CB, McQuade WH, Laurino J, Craig WL. Nontraditional risk factors for premature coronary heart disease. Circulation 1994; 90: I-395.

Lasswell AB, Liepman MR, McQuade WH, Wolfson MA, and Levy SM. Comparison of Primary Care Residents Confidence and Clinical Behavior in Treating Hypertension versus Treating Alcoholism. Academic Medicine 1993; 68: 580-582.

Gans KM, Jack B, Lasater TM, Lefebvre RC, McQuade WH, Carlton RA. Changing physicians attitudes, knowledge, and self-efficacy regarding cholesterol screening and management. Am J Prev Med 1993;9(2):101-106.

Bostom AG, Eaton CB, Yanek L, McQuade W, Catalfamo J, Selhub J. Letter to the Editor. Atherosclerosis 1993;102:121-124.

Jack B, Gans K, McQuade W, Lasswell A, Dowling P, Lefebvre RC, Culpepper L, Carlton R. A Successful Physician Training Program in Cholesterol Screening and Management. Preventive Medicine 1991; 20:364-377.

Levy S, Dowling P, Boulton L, Monroe A, McQuade W. The Effect of Physician and Patient Gender on Preventive Medicine Practices in Patients Older than Fifty. Family Medicine 1991; 24:58-61.

Lazarus B, Murphy J, Colleta E, McQuade W, Culpepper L. The Delivery of Physical Activity to Hospitalized Elderly Patients. Arch Intern Med. 1991;151:2452-2456.

Jack B, Lasswell A, McQuade W, Culpepper L. A Follow-up Survey of Family Physicians Interest

and Knowledge of Nutrition. Academic Medicine 1990; 65: 710-712.

Presentations:

McQuade W. Rebalancing LTC/LTSS: Developing Metrics that Matter. Academy Health: State Health Research and Policy Interest Group. Annual Research Meeting. New Orleans, LA. June 24, 2017

McQuade W. Reducing reliance on emergency department treatment: Preliminary findings from RI's communities of care program. Academy Health: Annual Research Meeting: Identifying and Managing Medicaid's Neediest Session. Baltimore, MD. June 24, 2013.

McQuade W. Reducing reliance on emergency department treatment: Preliminary findings from RI's communities of care program. Academy Health: State Health Policy and Research Interest Group. Baltimore, MD. June 22, 2013.

McQuade W. Developing quantitative methods to identify actionable causes of excess emergency department utilization in a managed care Medicaid program. Academy Health: State Research and Policy Special Interest Group: Innovative Approaches to Improve Outcomes and Manage Costs. Chicago, Ill. June 27, 2009

McQuade W. Strengths and weaknesses in using administrative datasets for observational studies in epidemiology. Brown University, Center for Primary Care & Prevention Memorial Hospital of RI, Grand Rounds. Pawtucket, RI. September 19, 2006

McQuade W. The role of disruptions in health insurance on management of asthma among children 3-18 enrolled in a managed care Medicaid program. RI Department of Human Services, Center for Child and Family Health, Research and Evaluation Workgroup. Cranston, RI. March 30, 2006

McQuade W. Assessing the evidence and causes of overcrowding in pediatric hospital-based emergency departments. Department of Pediatrics. Brown University / Hasbro Children's Hospital. Providence, RI. June 7, 2005.

McQuade W. Developing datasets to guide policy decisions in health care. UMASS Center for Health Policy and Research, UMASS Medical School, Shrewsbury, MA. April 10, 2003

McQuade W. Establishing face validity in a medical management information system. Maternal and Child Health Fellowship Lecture Series. Department of Family Medicine. Brown University / Memorial Hospital of RI. Pawtucket, RI. March 26, 1999.

McQuade, W. Using encounter data to assess the quality of care provided in a managed care Medicaid program. HCFA Northeastern Regional Conference on Encounter Data. HCFA Regional Office. New York City. September 23 and 24 1998.

McQuade, W. How to work with health plans to obtain timely, complete and accurate encounter data. HCFA Northeastern Regional Conference on Encounter Data. HCFA Regional Office. New York City. September 23 and 24 1998.

McQuade, W and Brown, M. Patient perception of services provided in a managed care environment: Experience in RItE Care. Faculty Development Workshop. Department of Family Medicine. Brown University/Memorial Hospital of RI. October 25, 1998.

McQuade, W. Using encounter data for primary care research. Brown University School of Medicine / Memorial Hospital of RI, Center for Primary Care and Prevention. Pawtucket, RI. June 30, 1998.

McQuade W. Managed care Medicaid encounter data. Poster Presentation accepted at The Inaugural Health Studies Institute Conference sponsored by Brown University Health Studies Institute. Ray Conference Center, Butler Hospital, Providence, RI. March 20, 1998.

Rockney R, McQuade W, Linn H, Days A, Alario A. Long-term outcome after treatment of encopresis. Presentation at the Ambulatory Pediatric Association Annual Meeting, San Diego, Ca. May 7-11, 1995.

Rockney R, McQuade W, Linn H, Days A, Alario A. Risk factor changes in a multidisciplinary heart disease prevention center. Kenney Day Symposium, Memorial Hospital of RI. February 1995.

Bostom A, Eaton CB, McQuade WH, Laurino J, Craig WL. Nontraditional risk factors for premature coronary heart disease. 67th Scientific Session of the American Heart Association, Dallas, Tx. November 1994.

Eaton CB, Bostom A, McQuade W, Yanek L, Laurino JP, Hume AI, Selhub J, Crowley J. The relationship of family history to premature coronary heart disease. North American Primary Care Research Group Meeting. Toronto, Canada. October 1994.

Rockney R, Days A, McQuade W. Clinical Correlates of Fecal Retention by Radiologic Criteria in Encopretic Children. Ambulatory Pediatric Association Region 1 Meeting, Worcester, MA. March 11, 1994.

Rockney R, Days A, McQuade W. Clinical Correlates of Fecal Retention by Radiologic Criteria in Encopretic Children. Accepted at the Ambulatory Pediatric Association Annual Meeting, Seattle, WA. May 2-5, 1994.

McQuade W, Levy S. The Epidemiologic Basis of Screening in Primary Care Medicine. Accepted at the RI Academy of Family Practice Annual Meeting. Newport, RI. April 22, 1994.

Monroe AD, McQuade WH, Yanek L, Levy SM. Risk factor identification and management in patients with premature cardiovascular disease in an academic family practice. Kenney Day Symposium, Memorial Hospital of RI, February 1993.

Monroe AD, McQuade WH. The Role of Patient and Physician Gender in the Recording of Substance Abuse Histories and Prescribing of Psychoactive Medication for Mental Disorders. Third Primary Care Research Conference of the Agency for Health Care Policy and Research. Atlanta, Ga. January 10-12 1993.

Rockney R, Days A, Wallach M, Anderson R, McQuade W. The Plain Abdominal Radiograph in the Management of Encopresis. Presented at the Primary Care Research and Development Conference, East Lansing, Michigan. June 10-11 1993.

McQuade W, Liepman M, Davis S, Levy S, Monroe A, Culpepper L. Ambulatory Diagnoses Comorbid with Alcohol Abuse Recognition: A Logistic Regression Analysis. Paper presented at the North American Primary Care Research Group Twentieth Annual Meeting, Richmond, Va. April 12-15, 1992.

McQuade W, Liepman M, Davis S, Levy S, Monroe A, Culpepper L. Comorbidities Most Predictive of Diagnosis of Alcoholism in the Primary Care Setting. Poster presentation at the Research Society on Alcoholism Annual Meeting, La Jolla, Ca., June 13-18, 1992.

Campanile C, Jack B, McQuade W, Culpepper L. Preconception Identification of Prenatal Risks in Family Practice Paper presented at the North American Primary Care Research Group Nineteenth Annual Meeting, May 22-25, 1991, Quebec City, Canada.

McQuade W, Liepman M, Davis S, Levy S, Monroe A, Culpepper L. Alcohol-Related Comorbidities in Primary Care: Hidden Clues to the Diagnosis. Paper presented at the National Conference of the Association of Medical Education and Research in Substance Abuse, Bethesda, Md., November 1991.

McQuade W, Liepman M, Davis S, Levy S, Monroe A, Culpepper L. Methodological Issues Involved in Chart Audit Research. Poster presented at the National Conference of the Association of Medical Education and Research in Substance Abuse, Bethesda, Md., November 1991.

Liepman M, Laswell A, McQuade W, Levy S, Monroe A. Family Practice Residents Provide Discontinuous Care for the Alcoholic Patient. Poster presented at the 1990 National Conference of the Association of Medical Education and Research in Substance Abuse, Rockville, MD., November 13-16, 1990.

Jack B, Gans K, McQuade W, Lasswell A, Dowling P, Lefebvre RC, Culpepper L, Carlton R. A Successful Physician Training Program in Cholesterol Screening and Management. Paper presented at the American Academy of Family Physicians Scientific Assembly, Dallas Tx., October 9, 1990. Levy S, Feldman A, McQuade W. Medical Co-morbidity of Child Behavioral Problems Seen in Family Practice. Poster Presented at the 4th Annual NIMH International Research Conference on the Classification and Treatment of Mental Disorders in General Medical Settings. Washington, D.C., June 1990.

Liepman M, Lasswell A, McQuade W, Levy S, Monroe A, Wolfson M, Parmentier H. Differences in Clinical Approaches to Alcoholism and Hypertension by Primary Care Residents. Paper presented at the National Conference on Medical Education and Research in Substance Abuse, Rockville, Md., November 7-10 1989.

Issue Briefs

McQuade W and Lebeau R. Assessing total cost of care (TCOC) methodologies in RI accountable entities. RI Executive Office of Health and Human Services; Issue Brief: May 2018.

McQuade W. Tracking utilization of services by program and line of business: an oversight and monitoring tool in managed care. RI Executive Office of Health and Human Services; Issue Brief: April 2018.

McQuade W and Lebeau R. Designing a logic model for evaluating implementation and outcomes of an accountable care organization in Medicaid. RI Executive Office of Health and Human Services; Issue Brief: March 2018.

Lebeau R and McQuade W. Assessing the impact of integrated health homes on routine preventive care and ongoing behavioral health treatment. RI Executive Office of Health and Human Services; Issue Brief: March 2018.

McQuade W. Defining behavioral health and substance abuse treatment programs in Medicaid and the Department of Behavioral Health, Developmental Delays and Hospitals: an interagency approach. RI Executive Office of Health and Human Services; Issue Brief: January 2018.

McQuade W. Rebalancing long term care services and supports: Opportunities to divert elderly patients into more effective and less costly community services. RI Executive Office of Health and Human Services; Issue Brief: December 2017.

McQuade W. Communities of Care: Program description, principal findings and policy recommendations. RI Executive Office of Health and Human Services; Issue Brief: September 2017.

Lebeau R and McQuade W. Impact of the Affordable Care Act on access and utilization of Services in Medicaid. RI Executive Office of Health and Human Services; Issue Brief: August 2017.

McQuade W. Developing infrastructure to report on quality measures for adults enrolled in Medicaid. RI Executive Office of Health and Human Services; Issue Brief: May 2016.

McQuade W. Teenage Pregnancy: Prevention and access to prenatal care in RIte Care. RI Department of Human Services. RIte Stats VI (1): 2014.

McQuade W. Analysis of hospital-based emergency department utilization within the core RIte Care population: volume and type of services used and predictors of excess utilization. RIte

Stats V (1): 2008

McQuade W. Characteristics and enrollment patterns of children with special health care needs in RI Medicaid: Calendar Year 2005. RI Department of Human Services. RIte Stats IV (2): October 2007.

McQuade W. Emergency Department Utilization: 2005. RI Department of Human Services. RIte Stats IV (1): 2006.

McQuade W. Prescription Drug Utilization in RIte Care. RI Department of Human Services. RIte Stats III(1): 2003.

McQuade W. Asthma Surveillance in RIte Care. RI Department of Human Services. RIte Stats II (3): 2003.

McQuade W. Ambulatory professional services in RIte Care. RI Department of Human Services. RIte Stats II (2): 2002.

McQuade W. Neonatal intensive care unit utilization in RIte Care. RI Department of Human Services. RIte Stats II (1): 2002.

McQuade W. Hospital inpatient services in RIte Care. RI Department of Human Services. RIte Stats I (5): 2002.

McQuade W. Mental health and substance abuse services. RI Department of Human Services. RIte Stats I (4): 2002.

McQuade W. Utilization of services provided in emergency departments. RI Department of Human Services. RIte Stats I (3): 2002.

McQuade W. RIte Care enrollment: Enrollment time and periods of disenrollment (Gaps) in RIte Care through calendar year 2000. RI Department of Human Services. RIte Stats I (2): 2001

McQuade W. Utilization of hospital and outpatient services in RIte Care: state fiscal year (SFY) 1996-2000. RI Department of Human Services. RIte Stats I (1): 2001.

Most of above reports can be found on the following website:

<http://dhs.embolden.com/Publications/ReportsPublications/RIteStats/tabid/955/Default.aspx>

White Papers

Estimating the impact of enhanced outpatient services on behavioral health utilization patterns among children in Medicaid. EOHHS White Paper 2012

McQuade W. Defining and measuring a patient centered medical home in the RI Medicaid program. 2010

McQuade W. Benchmarking medical expenses and utilization rates in RIte Care: Comparison of expenditures and PMPM costs by health plan. 2010.

McQuade W. Assessing practice implications and cost savings from a mandatory generic prescription drug program in a managed care Medicaid program. RI Department of Human Services. White Paper: 2009.

Monitoring Quality and Access in RIte Care, 2009. RI Department of Human Services.
(http://dhs.embolden.com/Portals/0/Uploads/Documents/Public/Reports/2009_PGP_Report.pdf)

McQuade W. Assessing the adequacy of capitation rates: reconciliation of paid claims within clinically relevant categories of care reported in encounter data with internal health plan reporting mechanisms. RI Department of Human Services. Center of Child and Family Health. Financial Reporting Series. 2009.

McQuade W. Validation and determination of hospital disproportionate share (DSH) payments: FFY 2007. Department of Human Services, Center for Child and Family Health. 2008.

McQuade W. Characteristics and service utilization of children enrolled in RIte Care prescribed antidepressant or ADHD medication. Department of Human Services, Center for Child and Family Health. 2008

McQuade W. Financial reconciliation and rate setting report: SFY 2007. Capitation rate setting report by health plan and age/sex cell. Department of Human Services, Center for Child and Family Health. 2008.

Monitoring Quality and Access in RIte Care, 2008. RI Department of Human Services.
(http://dhs.embolden.com/Portals/0/Uploads/Documents/Public/Reports/2008_PGP_Report.pdf)

2007 RIte Care Member Satisfaction Survey, 2008. RI Department of Human Services
(http://dhs.embolden.com/Portals/0/Uploads/Documents/Public/Reports/2007_rc_satisfaction_survey.pdf
)

RI Annual Medical Expenditure Report. SFY 2008. RI Department of Human Services
(http://dhs.embolden.com/Portals/0/Uploads/Documents/Public/Reports/RI_Medicaid_Expend2008_final.pdf)

McQuade W. RIte Care Member Satisfaction Survey: Analysis of 2007 survey of members enrolled in core RIte Care by health plan and primary language spoken at home. Department of Human Services, Center for Child and Family Health. 2008

McQuade W. Utilization of hospital-based services by children with special health care needs.

RI DHS. Center of Child and Family Health. Special Population Series. Cranston, RI. 2006.

McQuade W. Utilization rates per 1,000 member months for selected services by health plan and quarter: calendar year 2000-2005. RI Department of Human Services. Center of Child and Family Health. Quarterly Utilization Series. 2006.

McQuade W. Top 15 inpatient diagnoses by health plan and capitation group. RI Department of Human Services. Center of Child and Family Health. Medical Management Series. 2005.

Medicaid Annual Report 2005 RI Department of Human Services
(http://dhs.embolden.com/Portals/0/Uploads/Documents/Public/DHS%20Reports/ma_annualreport_2005.pdf)

McQuade W. Estimating the cost and utilization of services related to labor and delivery in a managed care Medicaid program: Results from the RIte Care program. Department of Human Services, Center for Child and Family Health. 2008

McQuade W. RIte Smiles: Preliminary Results of a Managed Care Dental Program for RI Medicaid Children. RI Department of Human Services, Center for Child and Family Health. Cranston RI. 2008

McQuade W. Assessing the costs of labor and delivery services in RIte Care. RI Department of Human Services. Center of Child and Family Health. Financial Reporting Series. 2004.

McQuade W. Encounter Data: A tool for documenting utilization and assessing quality of care provided in RIte Care. RI Department of Human Services, Center for Child and Family Health. October 1998

Manuscripts in Preparation

McQuade W. Using administrative datasets in observational studies in health services research: Methods and applications.

McQuade W, DeLia D, Assessing the impact of patient outreach and case management on outpatient emergency department utilization patterns.

McQuade W, Wood N, Gifford D. Can nontraditional therapies effectively improve quality and reduce costs among Medicaid recipients treated for chronic pain?

McQuade W, Wilson I, Wood N. Treating Diabetes in Medicaid: Tracking incident and prevalent cases and assessing adequacy of care.

References

Ann Aschengrau, Sc.D.
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