AHCCCS Targeted Investments Program

Adult B Quality Improvement Collaborative

William Riley, PhD

Session #6 August 12, 2020







Disclosures

There are no disclosures for this presentation

Agenda

TIME	TOPIC	PRESENTER
11:30 AM – 11:35 AM	OverviewAgendaData Update	Kailey Love Neil Robbins, PhD
11:35 AM – 12:00 PM	Using Data to Reduce Costs & Improve Care – Targeted Investments QIC Program	Health Current
12:00 PM – 12:15 PM	Health Information Exchange Use Case	Resilient Health
12:15 PM – 12:50 PM	Discussion and Q&A	All
12:50 PM – 1:00 PM	Next StepsPost Event Survey	Kailey Love

Data Updates

- Dashboard last updated 7/30/2020
 - Performance periods ending March 2019 March 2020
 - Based on claims adjudicated as of May 31, 2020
- Why do our previously reported denominators (or performance) change when the dashboard is updated?
 - Changes can be caused by addition of, removal of, or revision to one or more of the following:
 - 1. Adjudicated claims
 - 2. Member eligibility
 - 3. Outcome of the attribution process
 - Each member's attribution is re-evaluated for all report periods prior to the Dashboard update
 - 4. Provider IDs or Group Billing IDs
 - 5. Allowed billing codes
 - E.g., inclusion of Collaborative Care Model codes for follow-up after hospitalization measures

Data Updates continued

- Response to COVID-19
 - We are monitoring the data as well as CMS and NCQA Guidelines
- Inclusion of Telehealth & Telephonic visits
 - Anticipate additional telehealth and telephonic codes will be included
 - We are reviewing AHCCCS Temporary and Permanent Telephonic Codes Sets as well as NCQA guidance for 2020
 - We will notify TI-Participants of decisions via email, QICs, and website
- Please look at <u>www.TIPQIC.org</u> for additional details



Center for Health Information and Research

Have any questions for the TIP Data Team?

Please e-mail <u>TIPQIC@asu.edu</u> to schedule a Zoom meeting

Provider meetings often cover topics such as:

- How to read the Dashboard
- Attribution methods
- HEDIS performance criteria
- Performance reporting



Using Data to Reduce Costs & Improve Care – Targeted Investments QIC Program

Peter Steinken, Pharm.D.

Director of Community Engagement

August 2020



Learning Objectives

- 1. Demonstrate how to retrieve relevant information regarding four Targeted Investment Program measures from Health Current.
- 2. Apply methods and strategies for customizing HIE data and services to know when a patient encounter requires action to meet a Targeted Investment Program measure.



How the HIE Can Help to Achieve Targeted Investment Program Measures



HIE vs. Other Data Sources

Source	Strengths/Weaknesses
HIE	 Frequency can be customized to provider need Comprehensive (all treating providers) Part 2 limitations for some providers & services
EHR	Provider services/data only
Claims	 Lagged Contingent on quality, completeness of coding Comprehensive (all treating providers)
Staff	• Anecdotal
Special Data Extracts (ACO, health plan, CIN)	TargetedMay only be partial population



TI Performance Measures & HIE Data Support

Y4 Measure	Performance Goal	HIE Service
Pediatric Wellness Visits	# of visits in first 15 months of life	HIE Portal, ADT Alerts, HIE Data Reports
Diabetes Screening	A1c test during measurement year	HIE Portal, LAB Alerts, HIE Data Reports
Hospitalization for Mental Illness	Follow up from discharge 7/30 days	HIE Portal, ADT Alerts
Metabolic Monitoring	Metabolic testing in measurement year	HIE Portal, LAB Alerts



Using the HIE Portal

HIE Portal

Secure online access to a consolidated patient record, including specialized view of SMI patient crisis data

- Includes all treating physical care providers. Can include behavioral health services with patient consent.
- Individualized one patient at a time
- Used by care managers & clinicians to identify the complete patient history for care coordination, transitions of care, changes, etc.
- Can use 36-month period for population health activities (risk stratification, outreach campaigns, etc.)



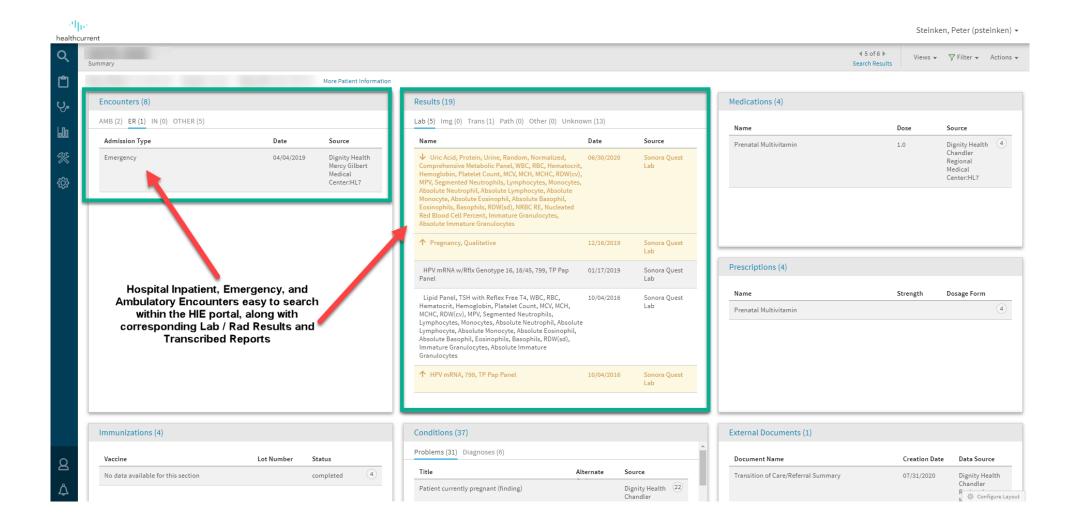
Data Available (varies by data source)

- Demographics
- Encounters (Inpatient/ED/Outpatient)
- Results (Lab/Rad/Trans)
- Allergies/Adverse Reactions
- Medications/Prescriptions
- Conditions (Diagnosis/Problems)
- Procedures/Treatments
- Immunizations
- Vital Signs
- Advance Directives
- Payers

- Family History
- Social History
- Clinical Documents
 - Discharge Summary
 - CCD/CCDA
 - Emergency Room Report
 - Encounter Summary
 - Progress Notes
 - Transition of Care/Referral Summary
 - History & Physical Report
 - Operative Note
 - Consultation Note
 - BH Court Orders



Finding Visits, Hospitalizations & Clinical Lab Results





Using HIE Alerts

Patient Alerts

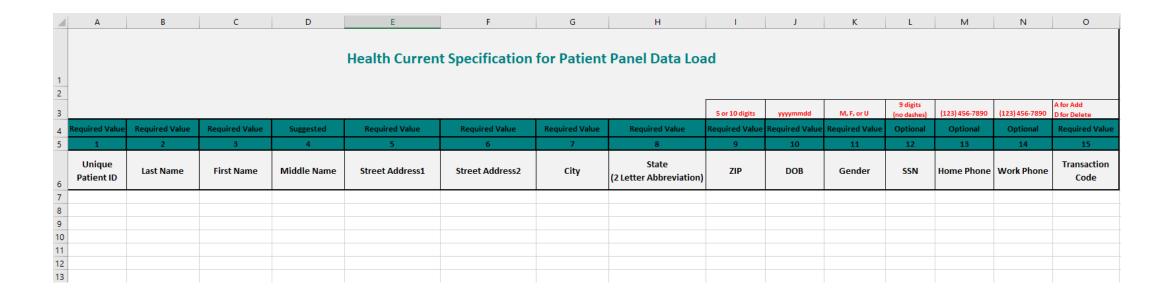
Event-driven notifications triggered by admissions, discharges, registrations and clinical/laboratory results

- Notification that an identified event has happened to a member of a pre-defined population (e.g. high needs patients, chronic care panels, SMI, condition-specific panels)
- Used by care managers, case managers & clinicians for monitoring care plan activities (e.g. annual labs, needed tests) & utilization of services



Setting Up Alerts for Visits, Hospitalizations & Lab Results

Upload your list of patients to the HIE





Types of Alerts

Admission / Discharge / Transfer (ADT)

- Emergency Department Visits
- Hospital Inpatient Admits
- Outpatient Treatment Visits

Laboratory Results

- By Ordering Provider
- Out of Range Results
- COVID-19 Lab Results/Antibody Tests



Alert Delivery

Real-time Alerts

- Individualized based on identified event
- Immediate care team response, next day coordination of care, follow through on tests ordered

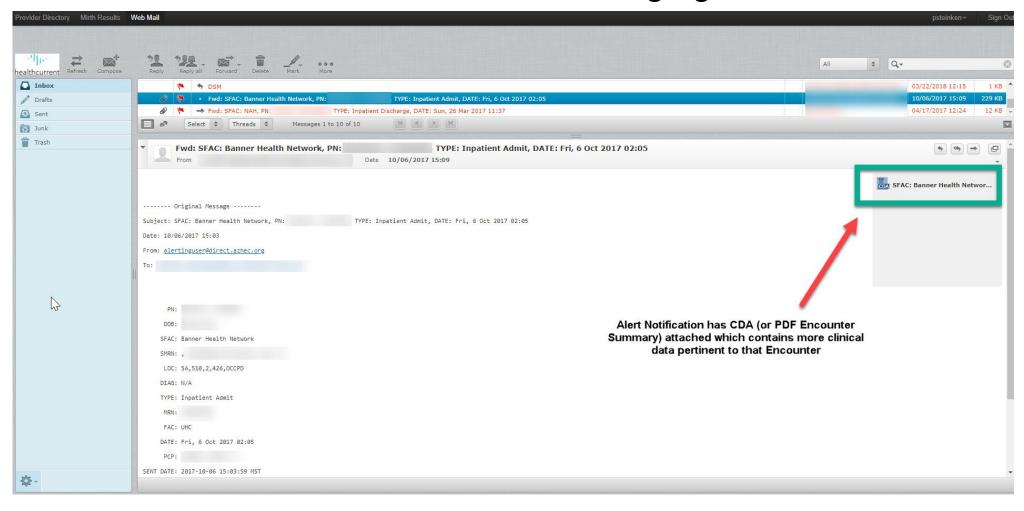
Batch Alerts

- Aggregate reports for all patients experiencing the event or condition being monitored
- Can be trended to monitor performance over time at a team/clinic level



Setting Up Alerts for Visits, Hospitalizations & Lab Results

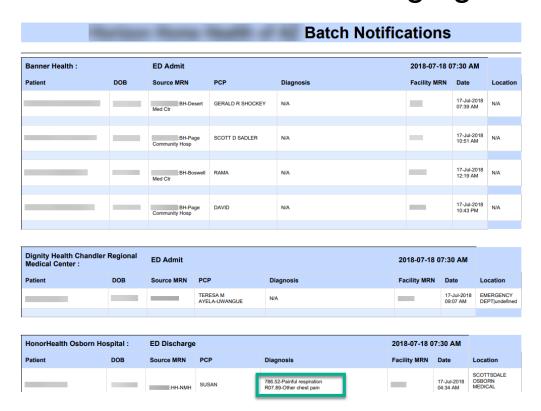
Real-time Alerts sent via Direct Secure Messaging





Setting Up Alerts for Visits, Hospitalizations & Lab Results

Batch Alerts sent via Direct Secure Messaging or SFTP



Sending Facility, Visit Type, Sending ID, Patient, DOB, Patient ID, PCP, Diagnosis, Date, Time, Location

Banner Health, ED Admit,

Banner Health, ED Discharge,

N/A, NO,N/A,12-Jan-2019,01:24 PM,N/A

Banner Health, ED Discharge

N/A, NO,N/A,12-Jan-2019,01:24 PM,N/A

Banner Health, ED Discharge

N/A, BLANK, N/A, 12-Jan-2019,03:16 PM,N/A



Alert Decisions

Pilot:

- Which patients?
- Which alerts?
- Who will receive alerts?
 - Primary and backup / Manager and staff
- How will they be managed?
 - Addressed
 - Complete
 - Documentation

Rollout:

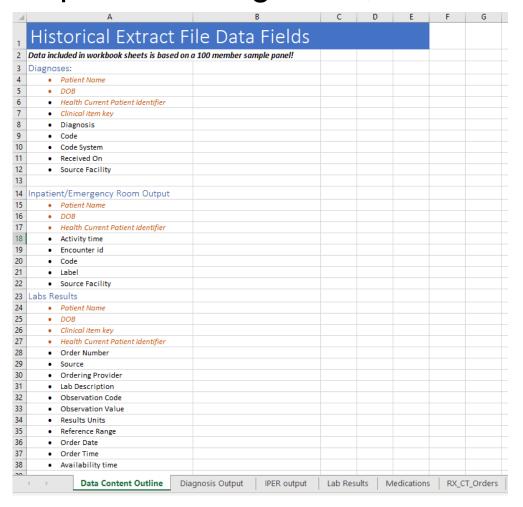
How to expand use?



HIE Data Reports

Historical "look-back" Reports for Diagnoses, Encounters, Lab Results,

etc.





Future Initiatives to Support TI Providers

HIE Data Reports

Health Current Data Request Form

The following form must be completed by any entity seeking data from Health Current. Complete this form and submit the same to your Health Current account manager. Please attach any additional documentation as needed and consult your account manager for assistance.

III Permitted Us

Select the permitted use(s) for which you intend to use this report. Note that the Health Current Minimum Necessary Standard Procedure sets parameters around the types of individuals about whom data may be accessed and a maximum time-period for access—indicated above each category. **Only fill out the section pertaining to your organization: Health Plan, Healthcare Provider, or Health Current Internal Request.

I am a...Healthcare Provider

Data available up to 36 months prior to date of request for:

- Care Coordination (current; prospective; past patients provider is transitioning)
- Care or Case Management (current; prospective; past patients provider is transitioning)
- Transition of Care Planning (current, prospective; past patients provider is transitioning)
 Population Health (current patients; past patients with Health Current approval)

Data available up to 13 months prior to date of request for:

Payment (current, prospective; past patients with payment obligation to Participant)

Limited Healthcare Operations — Quality Assessment and Improvement, Developing Clinical Guidelines and Protocols, Conducting Patient Safety Activities (current and past

patients)

TO PACE 2 IF YOU ARE A HEAT THE PLAN OR PLACING AN INTERNAL HEALT!

PROCEED TO PAGE 2 IF YOU ARE A HEALTH PLAN OR PLACING AN INTERNAL HEALTH CURRENT DATA REQUEST

Revision 2019-01-22

imagine fully informed neall.



Imagine fully informed health



Tyler Stott, LCSW, Clinical Director Sarah Kong, Care Coordinator Kimberly Quiros, MBA, COO





- Each day an assigned staff reviews the ADT report.
- Assigned staff member reviews reason for admit and MIRTH data.
- Information gathered from Health Current is staffed between clinical team members to better support member to reduce hospitalizations.





- Improved overall member care
- More focused treatment approach to help identify what was causing members to go into the hospital
- The more information you have the better care you can provide.





- Provides a more efficient work flow to provide better overall care for our members.
- Gives our providers more access to members records through the MIRTH function.





- Important tool for us to monitor the admissions and/or discharges of our participants.
- We can quickly reach out to our participants and provide them with the proper services within a timely manner.





- Each clinic location has an assigned staff who receives emailed batched alerts for a new ADT notification.
- Assigned staff retrieves ADT notification from Health Current and begins to review the data.
- Assigned staff coordinates with clinical team to inform them of what has been learned through the notification
- Assigned staff member reaches out to participant to offer additional support and schedules an appointment in an efficient manner.





- More ADT notifications come with a diagnosis to why the participant was admitted to the ED.
- Include a point of contact at hospital for clinical team to outreach and coordinate care upon admission.





Questions?





Thank you!



Q&A

Please insert any questions in the Q&A box

Next Steps

- Next Steps
 - Post-Event Survey: 2 Parts
 - General Feedback Questions
 - Continuing Education Evaluation
 - Continuing Education will be awarded post all 2020 QIC sessions (November 2020)

- Questions or concerns?
 - Please contact ASU QIC team at <u>TIPQIC@asu.edu</u> if questions or concerns regarding performance data

Thank you!

TIPQIC@asu.edu







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