

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 | Overview <ul style="list-style-type: none">• Agenda• Data 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 Steps <ul style="list-style-type: none">• Post 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 www.TIPQIC.org for additional details

Have any questions for the TIP Data Team?

Please e-mail TIPQIC@asu.edu to schedule a Zoom meeting

Provider meetings often cover topics such as:

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



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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 | <ul style="list-style-type: none"> • Frequency can be customized to provider need • Comprehensive (all treating providers) • Part 2 limitations for some providers & services |
| EHR | <ul style="list-style-type: none"> • Provider services/data only |
| Claims | <ul style="list-style-type: none"> • Lagged • Contingent on quality, completeness of coding • Comprehensive (all treating providers) |
| Staff | <ul style="list-style-type: none"> • Anecdotal |
| Special Data Extracts (ACO, health plan, CIN) | <ul style="list-style-type: none"> • Targeted • May 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

The screenshot displays a patient summary page for Peter Steinken. The page is organized into several sections:

- Encounters (8):** A table with columns for Admission Type, Date, and Source. One entry is highlighted: Emergency on 04/04/2019 at Dignity Health Mercy Gilbert Medical Center:HL7.
- Results (19):** A table with columns for Name, Date, and Source. It lists various lab tests such as Uric Acid, Pregnancy, and HPV mRNA.
- Medications (4):** A table with columns for Name, Dose, and Source. One entry is Prenatal Multivitamin with a dose of 1.0.
- Prescriptions (4):** A table with columns for Name, Strength, and Dosage Form. One entry is Prenatal Multivitamin.
- Immunizations (4):** A table with columns for Vaccine, Lot Number, and Status. It shows 'No data available for this section'.
- Conditions (37):** A table with columns for Title, Alternate, and Source. One entry is 'Patient currently pregnant (finding)'.
- External Documents (1):** A table with columns for Document Name, Creation Date, and Data Source. One entry is 'Transition of Care/Referral Summary'.

Two red arrows point from a central text box to the 'Emergency' encounter and the 'Uric Acid' lab result. The text box contains the following text:

Hospital Inpatient, Emergency, and Ambulatory Encounters easy to search within the HIE portal, along with corresponding Lab / Rad Results and Transcribed Reports

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

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

The screenshot displays a web mail interface with a left-hand navigation pane containing 'Inbox', 'Drafts', 'Sent', 'Junk', and 'Trash'. The main content area shows an email titled 'Fwd: SFAC: Banner Health Network, PN: [redacted] TYPE: Inpatient Admit, DATE: Fri, 6 Oct 2017 02:05'. The email header includes 'From: [redacted] Date: 10/06/2017 15:09'. The body of the email contains an 'Original Message' with the following details: Subject: SFAC: Banner Health Network, PN: [redacted] TYPE: Inpatient Admit, DATE: Fri, 6 Oct 2017 02:05; Date: 10/06/2017 15:03; From: alertinguser@direct.azhcc.org; To: [redacted]. The body text lists patient information: PN: [redacted], DOB: [redacted], SFAC: Banner Health Network, SMRN: [redacted], LOC: 5A,510,2,426,0CCPD, DIAG: N/A, TYPE: Inpatient Admit, MRN: [redacted], FAC: UHC, DATE: Fri, 6 Oct 2017 02:05, PCP: [redacted], and SENT DATE: 2017-10-06 15:03:59 MST. An attachment icon with the text 'CDA SFAC: Banner Health Networ...' is highlighted with a green box, and a red arrow points to it from the right.

Alert Notification has CDA (or PDF Encounter Summary) attached which contains more clinical data pertinent to that Encounter

Setting Up Alerts for Visits, Hospitalizations & Lab Results

Batch Alerts sent via Direct Secure Messaging or SFTP

| Batch Notifications | | | | | | | |
|---|------------|-----------------------------------|------------------------|---|---------------------|----------------------|---------------------------|
| Banner Health : | | ED Admit | | | 2018-07-18 07:30 AM | | |
| Patient | DOB | Source MRN | PCP | Diagnosis | Facility MRN | Date | Location |
| [REDACTED] | [REDACTED] | [REDACTED]-BH-Desert Med Ctr | GERALD R SHOCKEY | N/A | [REDACTED] | 17-Jul-2018 07:39 AM | N/A |
| [REDACTED] | [REDACTED] | [REDACTED]-BH-Page Community Hosp | SCOTT D SADLER | N/A | [REDACTED] | 17-Jul-2018 10:51 AM | N/A |
| [REDACTED] | [REDACTED] | [REDACTED]-BH-Boswell Med Ctr | RAMA | N/A | [REDACTED] | 17-Jul-2018 12:19 AM | N/A |
| [REDACTED] | [REDACTED] | [REDACTED]-BH-Page Community Hosp | DAVID | N/A | [REDACTED] | 17-Jul-2018 10:43 PM | N/A |
| Dignity Health Chandler Regional Medical Center : | | ED Admit | | | 2018-07-18 07:30 AM | | |
| Patient | DOB | Source MRN | PCP | Diagnosis | Facility MRN | Date | Location |
| [REDACTED] | [REDACTED] | [REDACTED] | TERESA M AYELA-UWANGUE | N/A | [REDACTED] | 17-Jul-2018 09:07 AM | EMERGENCY DEPT[undefined] |
| HonorHealth Osborn Hospital : | | ED Discharge | | | 2018-07-18 07:30 AM | | |
| Patient | DOB | Source MRN | PCP | Diagnosis | Facility MRN | Date | Location |
| [REDACTED] | [REDACTED] | [REDACTED]-HH-NMH | SUSAN | 786.52-Painful respiration R07.89-Other chest pain | [REDACTED] | 17-Jul-2018 04:34 AM | SCOTTSDALE OSBORN MEDICAL |

Sending Facility, Visit Type, Sending ID, Patient, DOB, Patient ID, PCP, Diagnosis, Date, Time, Location
 Banner Health,ED Admit, [REDACTED] N/A, NO,N/A,11-Jan-2019,07:28 PM,N/A
 Banner Health,ED Discharge, [REDACTED] N/A, NO,N/A,12-Jan-2019,10:40 PM,N/A
 Banner Health,ED Admit, [REDACTED] N/A, NO,N/A,12-Jan-2019,01:24 PM,N/A
 Banner Health,ED Discharge, [REDACTED] 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.

| | A | B | C | D | E | F | G | |
|----|--|---|---|---|---|---|---|--|
| 1 | Historical Extract File Data Fields | | | | | | | |
| 2 | <i>Data included in workbook sheets is based on a 100 member sample panel!</i> | | | | | | | |
| 3 | Diagnoses: | | | | | | | |
| 4 | • Patient Name | | | | | | | |
| 5 | • DOB | | | | | | | |
| 6 | • Health Current Patient Identifier | | | | | | | |
| 7 | • Clinical item key | | | | | | | |
| 8 | • Diagnosis | | | | | | | |
| 9 | • Code | | | | | | | |
| 10 | • Code System | | | | | | | |
| 11 | • Received On | | | | | | | |
| 12 | • Source Facility | | | | | | | |
| 13 | | | | | | | | |
| 14 | Inpatient/Emergency Room Output | | | | | | | |
| 15 | • Patient Name | | | | | | | |
| 16 | • DOB | | | | | | | |
| 17 | • Health Current Patient Identifier | | | | | | | |
| 18 | • Activity time | | | | | | | |
| 19 | • Encounter id | | | | | | | |
| 20 | • Code | | | | | | | |
| 21 | • Label | | | | | | | |
| 22 | • Source Facility | | | | | | | |
| 23 | Labs Results | | | | | | | |
| 24 | • Patient Name | | | | | | | |
| 25 | • DOB | | | | | | | |
| 26 | • Clinical item key | | | | | | | |
| 27 | • Health Current Patient Identifier | | | | | | | |
| 28 | • Order Number | | | | | | | |
| 29 | • Source | | | | | | | |
| 30 | • Ordering Provider | | | | | | | |
| 31 | • Lab Description | | | | | | | |
| 32 | • Observation Code | | | | | | | |
| 33 | • Observation Value | | | | | | | |
| 34 | • Results Units | | | | | | | |
| 35 | • Reference Range | | | | | | | |
| 36 | • Order Date | | | | | | | |
| 37 | • Order Time | | | | | | | |
| 38 | • Availability time | | | | | | | |
| 39 | | | | | | | | |

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.

I. Requestor Information

- a. Participant Organization Name: _____
- b. Participant Project Contact: _____, email: _____

II. Scope of Request

- a. Date of request: _____
- b. Short description of request:
Targeted Investment Program Y4 Measure Report:
1. # of visits in first 15 months of life
2. A1c test during measurement year
3. Follow up from discharge 7/30 days
4. Metabolic testing in measurement year **+**
- c. Date requested to receive report by: _____
- d. Is this a recurring report?: _____, if so at this frequency: _____
- e. Preferred format of report (e.g. CSV, CCD, PDF): _____
- f. Patient Panel(s) to be used for report (if applicable/known): _____

III. Permitted Use

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)

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



**Imagine
fully
informed
health.**



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Imagine fully informed health



Using Health Current at Resilient Health

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





What are some specific examples of how you use Health Current in your organizational processes, including reports and so forth?

- 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.



What caused you to engage and utilize Health Current?

- 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.



What experience have you had with Health Current?

- 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.



How has the HIE supported you in the Targeted Investments program?

- 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.



What workflow and clinical changes have you made to incorporate the HIE into your practice?

- 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.



How could the HIE be improved to better support you in achieving the Targeted Investment milestones?

- 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 TIPQIC@asu.edu if questions or concerns regarding performance data

Thank you!

TIPQIC@asu.edu