

AHCCCS Targeted Investments Program

# Peds B Quality Improvement Collaborative

William Riley, PhD

Session #6

August 26, 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"><li>• Agenda</li><li>• Data Update</li></ul>	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	Banner University Medical Group
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"><li>• Post Event Survey</li></ul>	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](http://www.TIPQIC.org) for additional details

## **Have any questions for the TIP Data Team?**

Please e-mail [TIPQIC@asu.edu](mailto: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

**Christy Dye, MPH**  
Chief Business Development Officer

**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.

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

## 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

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Summary ◀ 5 of 6 ▶  
Search Results Views ▾ Filter ▾ Actions ▾

More Patient Information

**Encounters (8)**

AMB (2) ER (1) IN (0) OTHER (5)

Admission Type	Date	Source
Emergency	04/04/2019	Dignity Health Mercy Gilbert Medical Center:HL7

**Results (19)**

Lab (5) Img (0) Trans (1) Path (0) Other (0) Unknown (13)

Name	Date	Source
↓ Uric Acid, Protein, Urine, Random, Normalized, Comprehensive Metabolic Panel, WBC, RBC, Hematocrit, Hemoglobin, Platelet Count, MCV, MCH, MCHC, RDW(cv), MPV, Segmented Neutrophils, Lymphocytes, Monocytes, Absolute Neutrophil, Absolute Lymphocyte, Absolute Monocyte, Absolute Eosinophil, Absolute Basophil, Eosinophils, Basophils, RDW(sd), NRBC RE, Nucleated Red Blood Cell Percent, Immature Granulocytes, Absolute Immature Granulocytes	06/30/2020	Sonora Quest Lab
↑ Pregnancy, Qualitative	12/16/2019	Sonora Quest Lab
HPV mRNA w/Rfx Genotype 16, 18/45, 799, TP Pap Panel	01/17/2019	Sonora Quest Lab
Lipid Panel, TSH with Reflex Free T4, WBC, RBC, Hematocrit, Hemoglobin, Platelet Count, MCV, MCH, MCHC, RDW(cv), MPV, Segmented Neutrophils, Lymphocytes, Monocytes, Absolute Neutrophil, Absolute Lymphocyte, Absolute Monocyte, Absolute Eosinophil, Absolute Basophil, Eosinophils, Basophils, RDW(sd), Immature Granulocytes, Absolute Immature Granulocytes	10/04/2016	Sonora Quest Lab
↑ HPV mRNA, 799, TP Pap Panel	10/04/2016	Sonora Quest Lab

**Medications (4)**

Name	Dose	Source
Prenatal Multivitamin	1.0	Dignity Health Chandler Regional Medical Center:HL7 (4)

**Prescriptions (4)**

Name	Strength	Dosage Form
Prenatal Multivitamin		(4)

**Immunizations (4)**

Vaccine	Lot Number	Status
No data available for this section		completed (4)

**Conditions (37)**

Problems (31) Diagnoses (6)

Title	Alternate	Source
Patient currently pregnant (finding)		Dignity Health Chandler (22)

**External Documents (1)**

Document Name	Creation Date	Data Source
Transition of Care/Referral Summary	07/31/2020	Dignity Health Chandler

[Configure Layout](#)

**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 sidebar on the left containing folders like 'Inbox', 'Drafts', 'Sent', 'Junk', and 'Trash'. The main area shows an email thread. The selected email is titled 'Fwd: SFAC: Banner Health Network, PN: [redacted] TYPE: Inpatient Admit, DATE: Fri, 6 Oct 2017 02:05' and is dated '10/06/2017 15:09'. The email body 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]

Below the header, the following information is listed:

- 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]
- SENT DATE: 2017-10-06 15:03:59 MST

An attachment is visible at the bottom right of the email body, titled 'CDA SFAC: Banner Health Networ...', which is highlighted with a green rectangular box. A red arrow points from the text below towards this attachment.

**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**



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fully  
informed  
health.**



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Imagine fully informed health

# BANNER UNIVERSITY MEDICAL GROUP FCM TUCSON

PEDS & ADULT PCP PARTICIPANT

Taylor Hedges  
Wilton Hall

# HIE: PURPOSE

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- To establish bi-lateral data exchange with Health Current
  - Transmit data on core set of patients on active care load
  - Utilize data received via notification to provide care to high-risk members
  - Provide adequate follow-up for discharges (7/30 day)

# HIE: INDUCTION

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- Patients complete release at registration practice-wide for PCP appointment
- Patients on active registry complete additional release and are loaded into HIE panel for discharge notification
- After established consent and “opt-in”, staff will submit patient data via patient panel per HIE with required data elements including;
  - Unique Patient ID
  - Last name, first name
  - DOB
  - Gender
  - Transaction Code (A/D = Add or Delete)

# HIE: NOTIFICATION

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- Receipt/Review of Data from HIE:
  - A. Upon receipt of notification from HIE staff will;
    - 1. Review data received from HIE concerning ED admission including;
      - A. Patient name and demographic information
      - B. Place of admission
      - C. Date of admission
      - D. If included: Reason for admission, provider, medications
    - 2. Within 24 hours: attempt to contact ED and patient for debrief of patient visit and if not included in notification reason for admission, provider, and medication list
    - 3. Document attempt/engagement in EHR

# HIE: FOLLOW-UP FROM PATIENT ED VISIT

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- Patient follow-up:
  - 1. After debriefing with patient, offer patient follow-up appoint with PCP, Behavioral provider or established care team member within 7 days and appropriate referrals based on nature of visit.
  - 2. Assist patient and provide care management for any needs presented and for follow up based on provider referrals if any made from ED visit.
  - Care Manager offers appropriate services including community resources, SDOH needs, Wellness Coaching, Peer Support, Therapy, Psychology and Psychiatric services (internal and external referrals).
  - 3. Document engagements and care management in EHR and notify PCP
  - 4. If patient and ED do not respond to outreach attempt(s), document in EHR and notify PCP and care management team.

# HIE: EXPERIENCE

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- Provides notification from ED visits
  - Timely
  - Custom
- Clinical Support Specialist assistance (Austin Peters #rules)
  - Participant support services
  - Patient panel guidance/creation
  - Technical Support

# HIE: POSSIBLE IMPROVMENTS

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- Ability to upload rosters for notification
- Bypass manual entry for panel notification

# HIE: CONCLUSION

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- Provides timely and custom notifications
- Allows for follow-up of patients on active registry
- Allows for follow-up of Medicaid patients practice-wide from hospital discharge for 7/30 appts

# 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](mailto:TIPQIC@asu.edu) if questions or concerns regarding performance data

# Thank you!

[TIPQIC@asu.edu](mailto:TIPQIC@asu.edu)