

AHCCCS Targeted Investments Program

# Peds Quality Improvement Collaborative

Tasneem Doctor, EdD, Lic. Psychologist

Troy Garland, MBA, BA, RN

William Riley, PhD

TIP Year 5: Session #7

May 4, 2021

# Disclosures

- Tasneem Doctor, Vice President, Behavioral Health, Equality Health
- Troy Garland, Vice President, Clinical and Quality Operations, Equality Health

# Agenda

TIME	TOPIC	PRESENTER
11:30 AM – 11:32 AM	Introduction	William Riley
11:32 – 12:15 PM	Integrated Care Coordination Role in TIP: Addressing Quality and Access to Treatment	Equality Health: Troy Garland
12:15 PM – 12:45 PM	Round Table Discussion	Moderator: Tasneem Doctor  <u>Southwest Behavioral &amp; Health Services:</u> Kristen Evans-Hardy, Kathy Villa <u>North Valley Pediatrics:</u> Louis Trunzo, JoAnn Kolnick <u>Jewish Family &amp; Children's Services:</u> Megan Lipman, Brian Rosenstein
12:45 PM – 1:00 PM	Next Steps	Kailey Love



EQUALITY  
HEALTH.

## **Integrated Care Coordination Role in TIP**

Addressing Quality and Access to Treatment

**Troy Garland, MBA, BA, RN**

May 4, 2021

## Learning Objectives

1. Participants will learn core components of an Integrated Care Management Model
2. Participants will understand care and case management activities that support pediatric TIP measures (well child and FUH)
3. Participants will be presented with options for systemic changes to support and improve TIP measure performance
4. Participants will learn how an integrated care coordination model improves clinical quality and lowers costs
5. Participants will learn best practices for performing on TIP performance measures from during a round table discussion



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## Panel Speakers

1. North Valley Pediatrics
2. Southwest Behavioral Health
3. Jewish Family and Children's Services



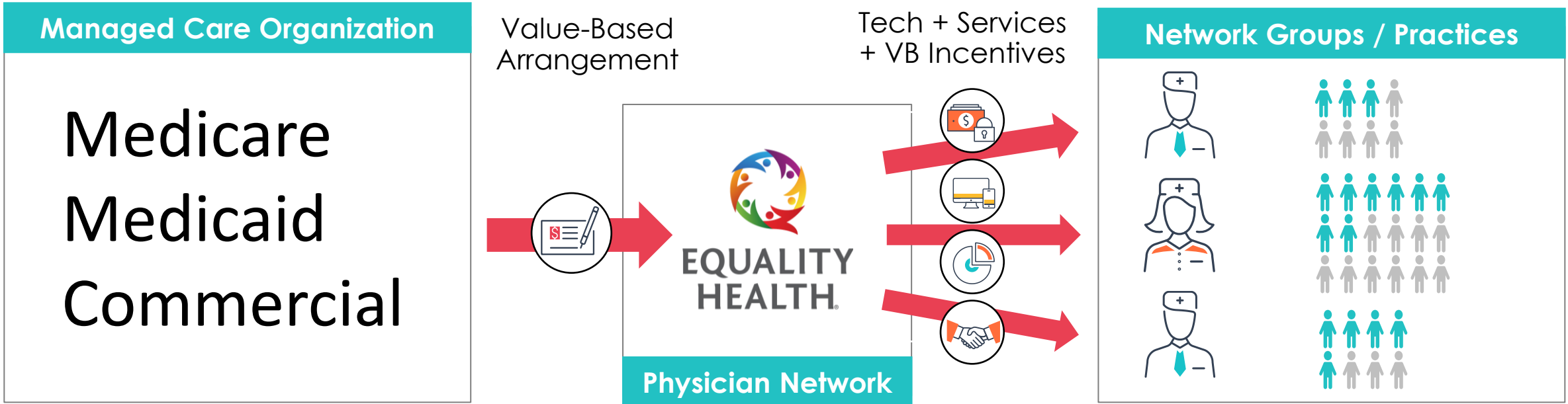
# Equality Health Care Model

A whole-person health, care delivery model designed to drive quality, efficiency, provider and member satisfaction.



We Believe  
in Equal  
Healthcare  
for All

EQUALITY AND NATIONAL PAYORS ARE PARTNERING WITH PHYSICIANS TO BUILD A FOUNDATION FOR VALUE-BASED-CARE ADOPTION AND PERFORMANCE





# Integrated Clinical Care Model

## Engagement: One Size Does not Fit All

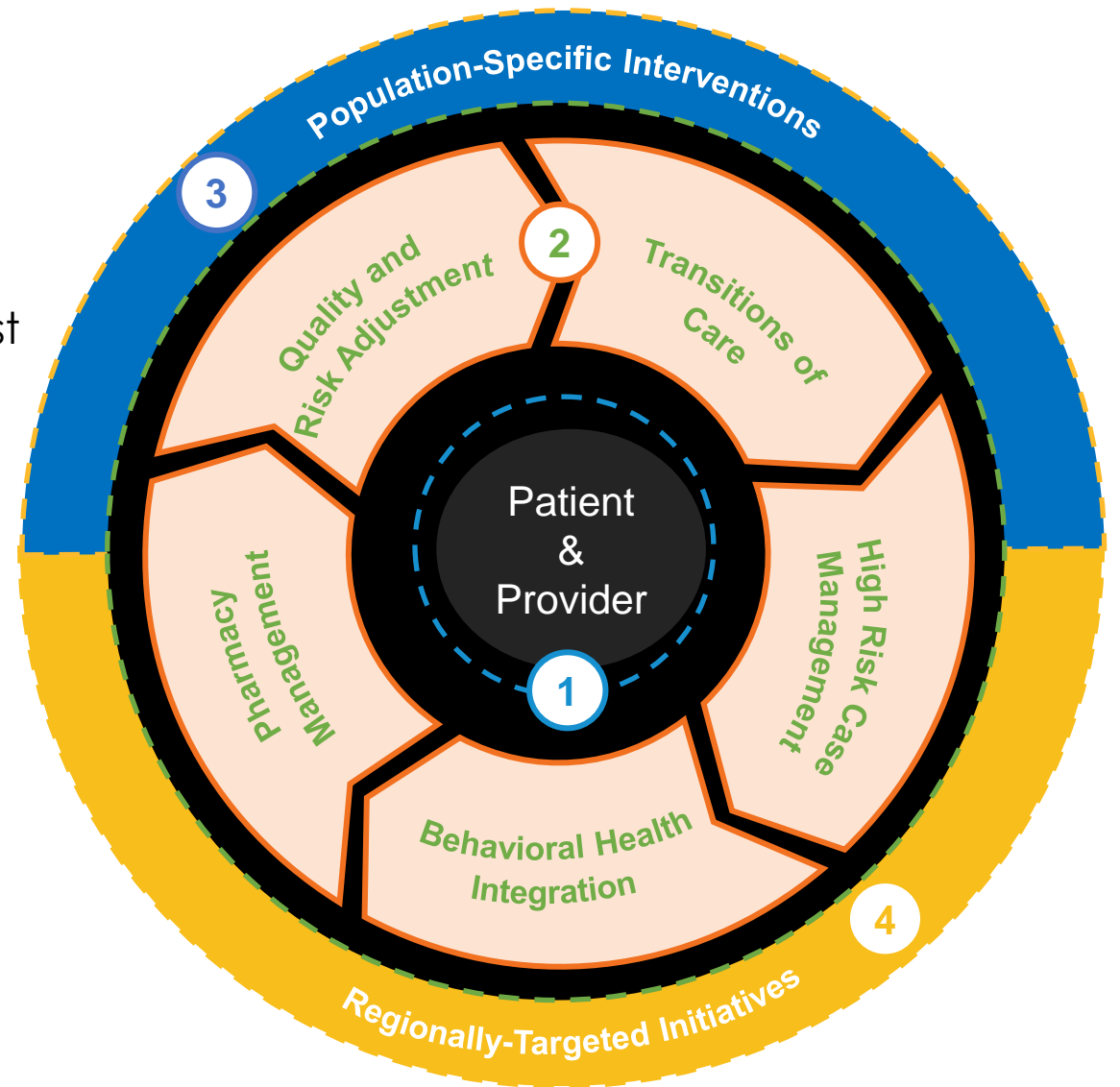
- Multiple Approaches
  - EQH and Provider
  - Digital and Telephonic
  - Chaplain, CHW, SW, RN, Pharm D, Care Specialist
  - Look for an excuse to engage: Happy Birthday

## Build Trust and Connect to Provider

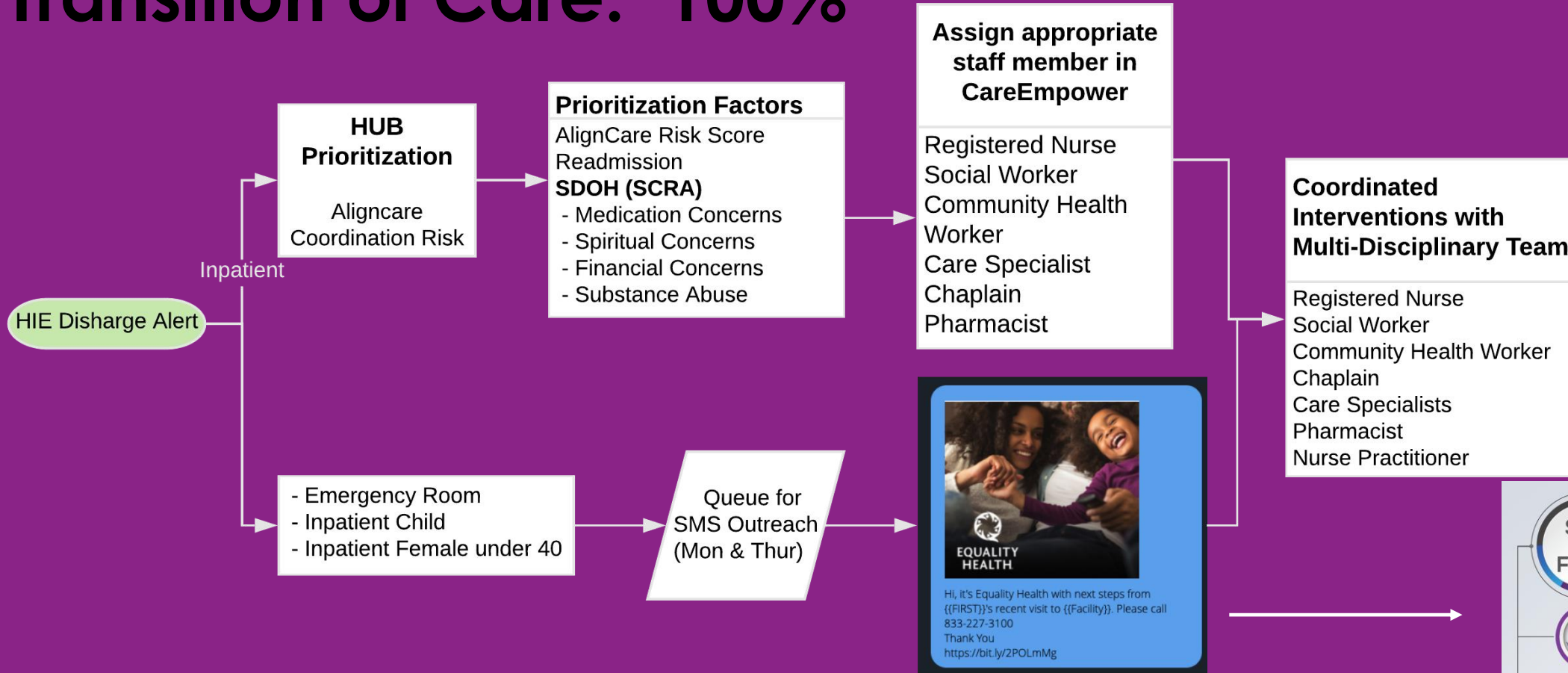
- Address SDOH Needs, look for early wins
- Ensure or Find stable primary care provider
  - Integrated PCP + BH Specialty Network
- Reinforce the provider / patient relationship

## Continue to Support Relationship

- Activate, Empower, Nudge
- Home-Based Care
- Digital Programs



# Transition of Care: 100%



**SEE ME FIRST**

The next time you have a minor or non-emergency health issue, call us first.

We offer:

- Same-day appointments
- After-hours appointments
- Weekend appointments

**FOR PREVENTIVE AND ROUTINE CARE, AND CHRONIC CONDITIONS:**

**YOUR PRIMARY CARE OFFICE** (Single Appointment Office)

- Shots
- Diabetes
- Arthritis
- Adult & Child Wellness
- High Blood Pressure
- Common Illnesses
- Minor Injuries

**IF WE'RE NOT AVAILABLE: OPTION 1**

**WALK-IN CLINIC** (Single Appointment Office)

- Minor Illnesses and Injuries
- Women's services
- Physical exams, sports/physicals
- Confidential behavioral health counseling services

Call: 602-715-0110 | [equalityhealthinc.com](http://equalityhealthinc.com)

**IF WE'RE NOT AVAILABLE: OPTION 2**

**URGENT CARE CENTER** (Double Appointment Office)

- Common Illnesses
- Cold, flu, sore throat
- Low-grade fevers, flu, migraines, sore throats
- Minor Injuries
- Sprains, back pain, minor bone fractures, cuts, burns and eye injuries

**FOR LIFE-THREATENING ILLNESSES, MAJOR TRAUMA OR INJURIES, GO HERE:**

**EMERGENCY ROOM** (Triple Appointment Office)

- Chest pain
- Severe abdominal pain
- Head trauma
- Loss of consciousness
- Uncontrolled bleeding
- Difficulty breathing
- Sudden change in vision
- Sudden weakness or trouble speaking

All these facilities are staffed with licensed healthcare professionals. Consider your condition when deciding where to go for treatment.

EQUALITY HEALTH NETWORK



# Impact of Direct to Member Care Management Programs (1 of 2)

**Key Observation:** Equality Health supplements the work of our network providers with targeted interventions deployed to high-risk individuals. Pre-post analysis with control group comparison suggests that members successfully engaged in one of these programs have significantly lower costs (6 months pre/post, excluding month of initial engagement) as compared to members targeted but not engaged.

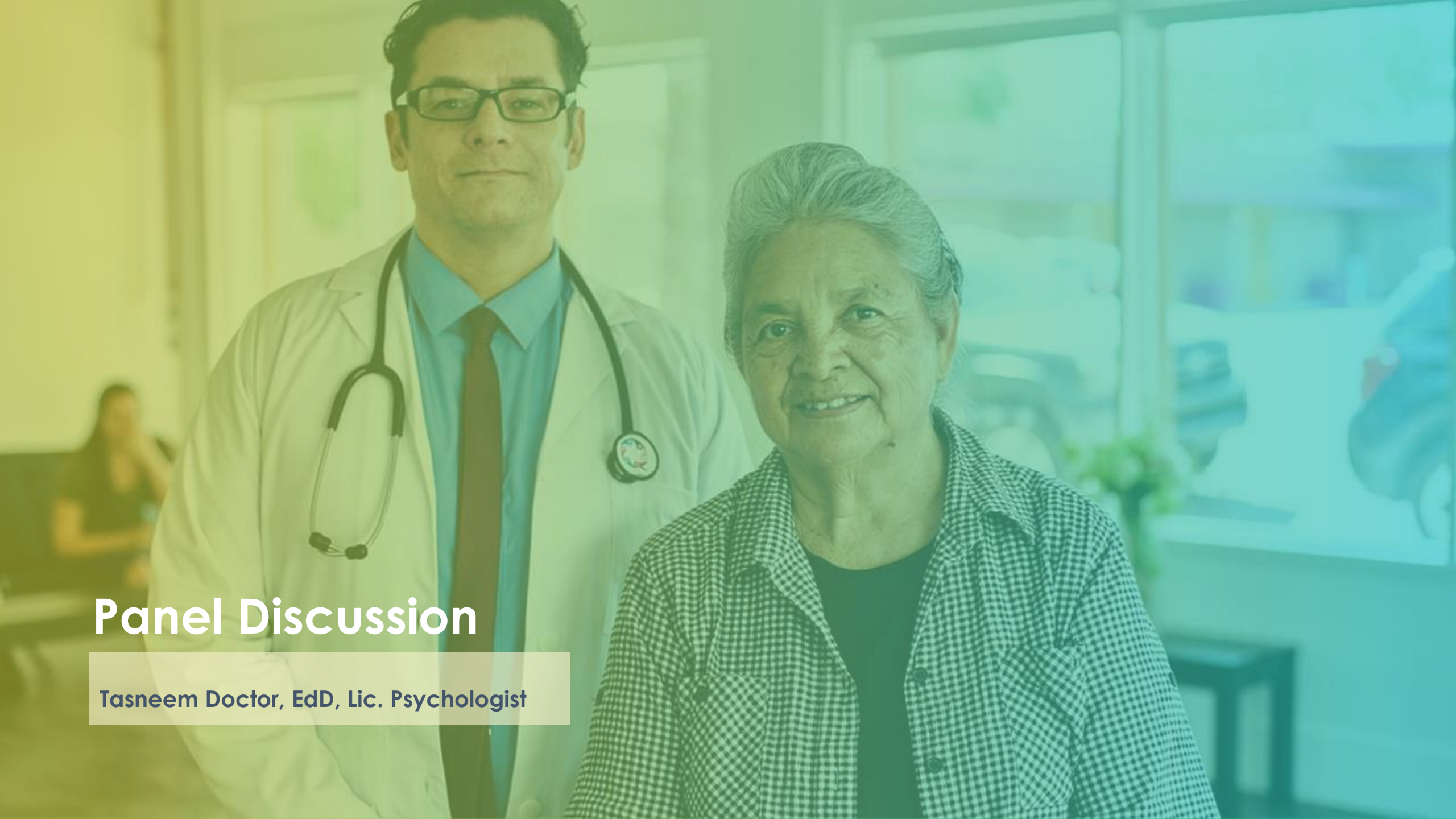
	2019	Total Attempt	Engaged	Opted out	UTC	Reach Rate	Engaged	Opt Out	UTC
Transition of Care		2048	1043	223	782	61.8%	50.9%	10.9%	38.2%
Care Coordination		2507	1297	219	991	60.5%	51.7%	8.7%	39.5%
Pharmacy/Specialty		595	149	157	289	51.4%	25.0%	26.4%	48.6%
Behavioral Health		32	9	3	20	37.5%	28.1%	25.0%	62.5%
Case Management		909	437	167	305	66.4%	48.1%	18.4%	33.6%
<b>Total 2019</b>		<b>6091</b>	<b>2935</b>	<b>769</b>	<b>2387</b>	<b>60.8%</b>	<b>48.2%</b>	<b>20.8%</b>	<b>39.2%</b>
	2020	Total Attempt	Engaged	Opted out	UTC	Reach Rate	Engaged	Opt Out	UTC
Transition of Care		5871	1616	1287	2968	49.4%	27.5%	21.9%	50.6%
Care Coordination		3692	2019	518	1155	68.7%	54.7%	14.0%	31.3%
Pharmacy/Specialty		446	175	76	195	56.3%	39.2%	17.0%	43.7%
Behavioral Health		206	45	122	39	81.1%	21.8%	59.2%	18.9%
Case Management		191	78	42	71	62.8%	40.8%	22.0%	37.2%
<b>Total 2020</b>		<b>10406</b>	<b>3933</b>	<b>2045</b>	<b>4428</b>	<b>57.4%</b>	<b>37.8%</b>	<b>19.7%</b>	<b>42.6%</b>



# Impact of Direct to Member Care Management Program

Oct. 2018-2019	PMPM		
	Engaged	Declined	Unable to Reach
Member Months – Before Total Cost of Care - Before	1,395 \$3,028.29	1,071 \$2,141.69	3,925 \$1,854.24
Member Months – After Total Cost of Care - After	1,411 \$2,271.49	1032 \$2,106.30	3,984 \$1,906.59
Net Difference Percent Difference	\$(756.80) -25.0%	\$(35.39) -1.7%	\$52.36 2.8%

**Key Observation: Equality Health supplements the work of our network providers with targeted interventions deployed to high-risk individuals.** Pre/Post analysis with control group comparison suggests that **members successfully engaged** in one of these programs have **significantly lower costs** (6 months pre/post, excluding month of initial engagement) as compared to members targeted but not engaged.



# Panel Discussion

Tasneem Doctor, EdD, Lic. Psychologist

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## Panel Speakers

1. North Valley Pediatrics
2. Southwest Behavioral Health
3. Jewish Family and Children's Services



# Panel Inquiry

## Physical Health Pediatric Questions:

- How has TIP participation helped improve engagement with your patient population (attendance of well child visits specifically?)
- Have you implemented best practices or new procedures within your practice in order to increase well child visit attendance based upon your participation in TIP? What are you doing differently as a result of your participation?
- Do you have tips for other providers to help them perform better on TIP performance measures?
- What are your biggest challenges with your ability to meet TIP performance measures?

## Behavioral Health Pediatric Practices:

- How do you know when your patients are admitted to psychiatric facilities? What is the process for obtaining this data so that you can schedule 7 day follow ups?
- How do you ensure that you have providers availability for these urgent appointment?
- Have you changed your workflow or process to ensure that individuals being discharged from the hospital are being schedule within 7 days?
- How do you coordinate post-discharge appointments with the psychiatric facilities?
- What are your biggest challenges with your ability to meet TIP performance measures?





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HEALTH.

EQUALITY HEALTH

Questions?



# Next Steps

- Post-Event Survey: 2 Parts
  - General Feedback
  - Continuing Education Evaluation
- Continuing Education for 2021 will be awarded post all 2021 QIC sessions (December 2021)
- Questions or concerns?
  - Please contact ASU QIC team at [TIPQIC@asu.edu](mailto:TIPQIC@asu.edu) if questions or concerns

# Thank you!

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