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What **W**ould **QTIP's** **M**edicaid **D**ata Say?

What **W**ould **QTIP's** **M**edical **D**irector Say?

Lynn Martin, LMSW
QTIP Project Director
SCDHHS

August 10, 2019

- **Review**
 - SCDHHS News
 - National Studies/Publications

- **Data**
 - HEDIS Administrative Results
 - QIDA

- **Future Plans**

SCDHHS

EPSDT

- EPSDT policy now links to the AAP periodicity schedule
- Implemented 4/2018



Immunizations

- Limit of billing more than 3 vaccine administrations/day was removed
- Effective 7/1/2019



Same Day Sick and Well Visits

- Providers can bill well-child visit on same day as sick-child visit using modifier 25 for beneficiaries from birth to age 21*
- Effective 7/1/2019



*	New Patient	Established Patient
Well-child visit	99381 – 99385	99391 – 99395
Sick-child visits with modifier 25	99201 – 99205	99211 – 99215



SCDHHS

Continuous Glucose Monitoring

- Coverage limited to:
 - Beneficiaries with Type 1 Diabetes (no age limitations)
 - Insulin-dependent pregnant women (any type diabetes)
- Prescribed by board-certified endocrinologist
- Implemented 7/1/2019



Ocular Screening

- Policy drafted to cover photo eye screening for beneficiaries 12 months to 3 years-old
- In progress



Behavioral Health Index

- Implemented as informational in 2018
- Recognized as incentive in 2019



SCDHHS

Autism Spectrum Disorder (ASD)

- Services were added for Medicaid beneficiaries with ASD between ages 0 and 21 in 2017.
- Two service rates received an increase:
 - Applied Behavior
 - Adaptive Behavior Treatment
- Implemented 7/1/2019

A.S.D.

Rate Review

- In 2018 SCDHHS began exploring rate methodologies that:
 - Were equitable and sustainable
 - Produced accurate and unbiased rates
- Physician reimbursement was updated from 2009 to 2019 Medicare fee schedule
- Currently only four physician type differentiations
- Implemented 7/1/2019



MCO Incentives and Withholds

Pediatric Preventative Care

- Well-child visits in the first 15 months of life (6 visits)
- Well-child visits in the 3rd, 4th and 5th and 6th years of life
- Adolescent well-care visits
- Weight Assessment and Counseling for Nutrition and Physical Activity for children/adolescents: BMI percentile total

Behavioral Health Index

Incentive only

- Antidepressant medication management
- Follow-up care for children prescribed ADHD medication (Initiation)**
- Metabolic monitoring of children and adolescents on antipsychotics **
- Initiation and engagement of alcohol and other drug dependence treatment

** **pediatric related**

Publications

The Center for the Study of Social Policy (CSSP) identified QTIP's work on the social and emotional well-being of young children (0 – 3) and their families.

CSSP findings will be used to develop recommendations and ideas for action that will be disseminated through reports, briefings and webinars.

Publication is anticipated August 2019 followed by various blog postings highlighting QTIP.

QTIP was cited in the *State of Babies Yearbook 2019* – authored by ZERO TO THREE and Child Trends (issued ~ May 2019).

https://stateofbabies.org/wp-content/uploads/2019/03/State_of_Babies_Yearbook_full_digital_download_2.28.19.pdf

In July 2019, National Institute for Children's Health Quality published a case study on what QTIP (you) have done with screenings, with special emphasis on maternal depression screening.

QTIP practices = 30

- 3 academic
- 15 private
- 7 associated with a hospital
- 5 FQHC

Size:

- 14 small (1-4 practitioners)
- 5 medium (5- 9)
- 11 large (10 +)

2011-2019:

- Total practices: 46
- Lead practitioners: 71+

Active practices:

- 2011 practices: 11
- 2015 practices: 7
- 2016 practices: 4
- 2017 practices: 4
- 2019 practices: 4

PCMH 4/2019

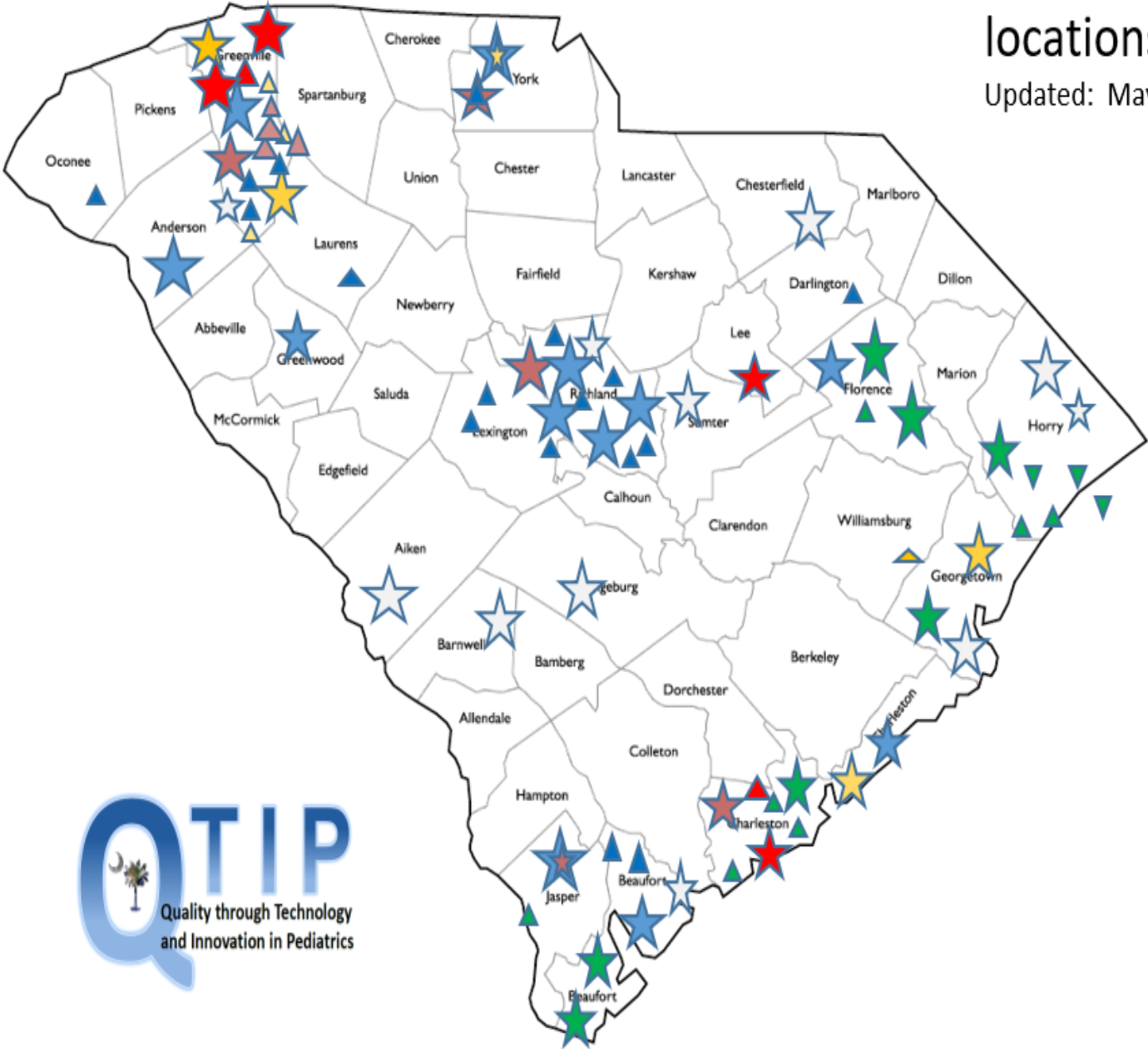
- 22 QTIP practices are NCQA PCMH recognized
- 1 JCAHO

Mental Health 7/2019

- 30/30 QTIP practices are providing screening
- 18 mental health on-site

QTIP Practice locations

Updated: May 2019



QTIP Main office	QTIP satellite office
2011 	
2015 	
2016 	
2017 	
2019 	
previous 	





- **Review**
 - DHHS news
 - National Studies/Publications
- **Data**
 - Oral Health and MH screening
 - HEDIS Administrative Results
 - QIDA
- **Future Plans**

Past focal topics

2017

6-9 months

- Well child visits
- Vaccinations
- Maternal depression
- Socio environmental screening
- Family strengths

Adolescents

- Well child visits
- Vaccinations
- Mental Health assessments & follow-up
- Assessment for special health care needs (SHCN)
- Family Strengths
- BMI

24 months

- Well child visit
- Risk Assessments
- Screening Special Health Care Needs
- Family Strengths
- Family Concerns
- Oral Health
- Social Determinates of Health
- BMI

Asthma

- General Asthma Care
- Well child visits
- BMI

2018

3- 6 years

- Well child visits
- Positive parenting
- Vaccines
- Social-environmental screening
- BMI
- Tobacco Cessation
- Oral Health

SHCN

- Assessments/screens
- Work with subspecialist
- Care plans

Asthma

Adolescents

2019 Focus

Breastfeeding

(at 1 month)

- Infant breastfed (at certain intervals)
- Referral to lactation consultant
- Breastfeeding plan
- Safe sleep discussed
- Social determinates of health screening
- Reach Out and Read
- Tobacco use

ADHD

- Follow-up visit performed - 30 days
- Standardized screen
- Identify co-morbidities, teacher
- Social determinates of health
- Well-child visit in past year
- BMI

Continuous

- Oral health
- Developmental and Mental Health Screening
- Smoking Cessation - workshop

Fluoride Varnish (FV) in a Non-Dental Setting

*Data based on Medicaid Administrative claims; excludes FQHC

AT A GLANCE...

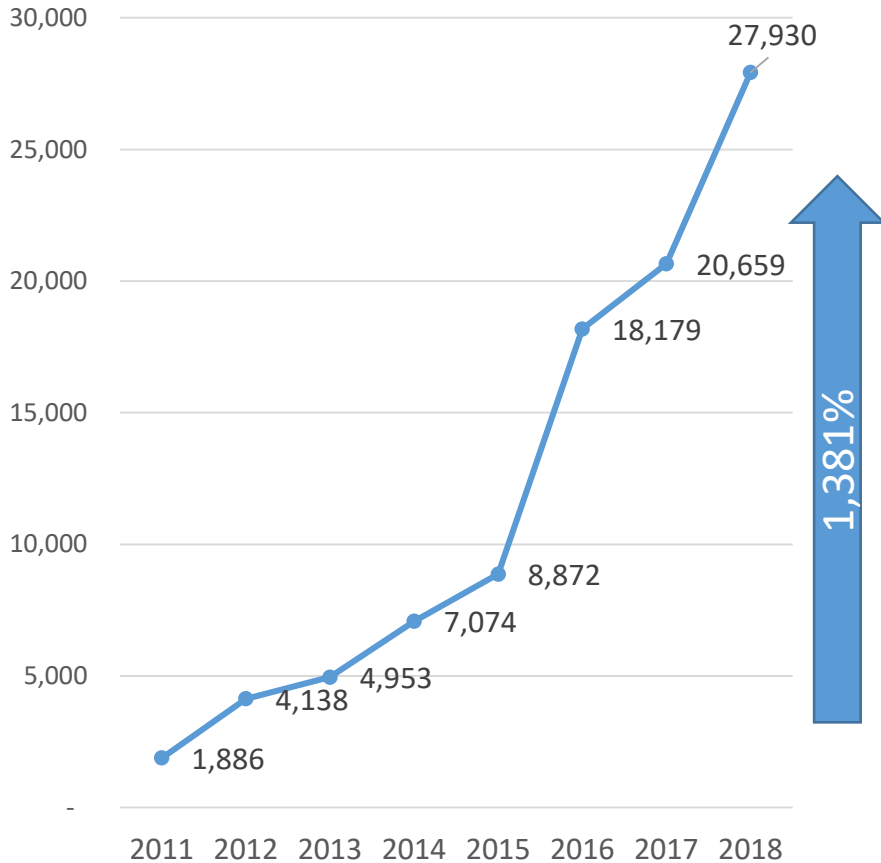
- A **1,381% increase** in the number of Medicaid children receiving FV in a non-dental setting has been noted since 2011
 - However, less than 30,000 children received FV in 2018
- CY2018 data reflects:
 - ~ 76% of the children were between 0 – 4 years old
 - ~ 22% were 5 – 12 years old
- The FV ratio for 0 – 4 year old children is 1.24



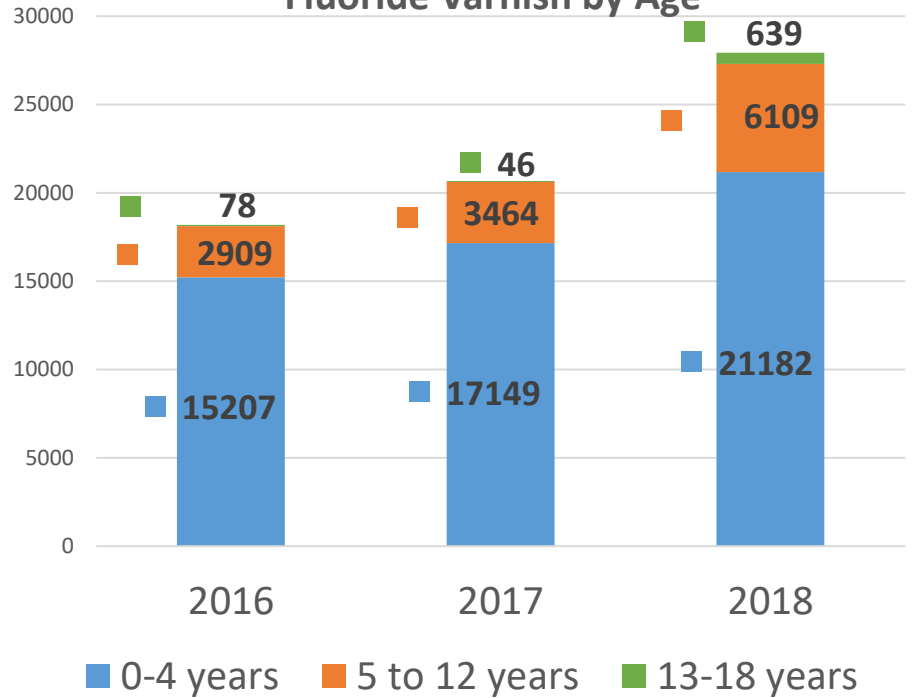
Fluoride Varnish in a Non-Dental Setting

*Data based on Medicaid Administrative claims; excludes FQHC

Number of Medicaid Children Receiving Fluoride Varnish



Fluoride Varnish by Age



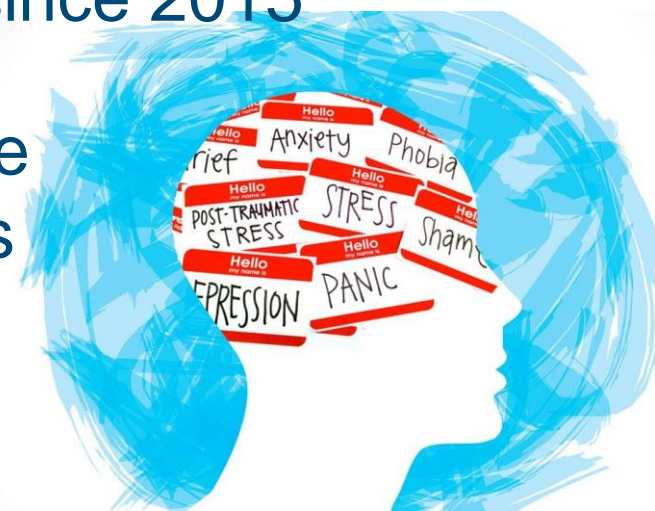
APPLICATION RATIO	2016	2017	2018
ages 0-4	1.25	1.21	1.24
ages 5 - 12	1.08	1.06	1.04
ages 13-18	1.10	1.00	1.03

Developmental and Mental Health Screening

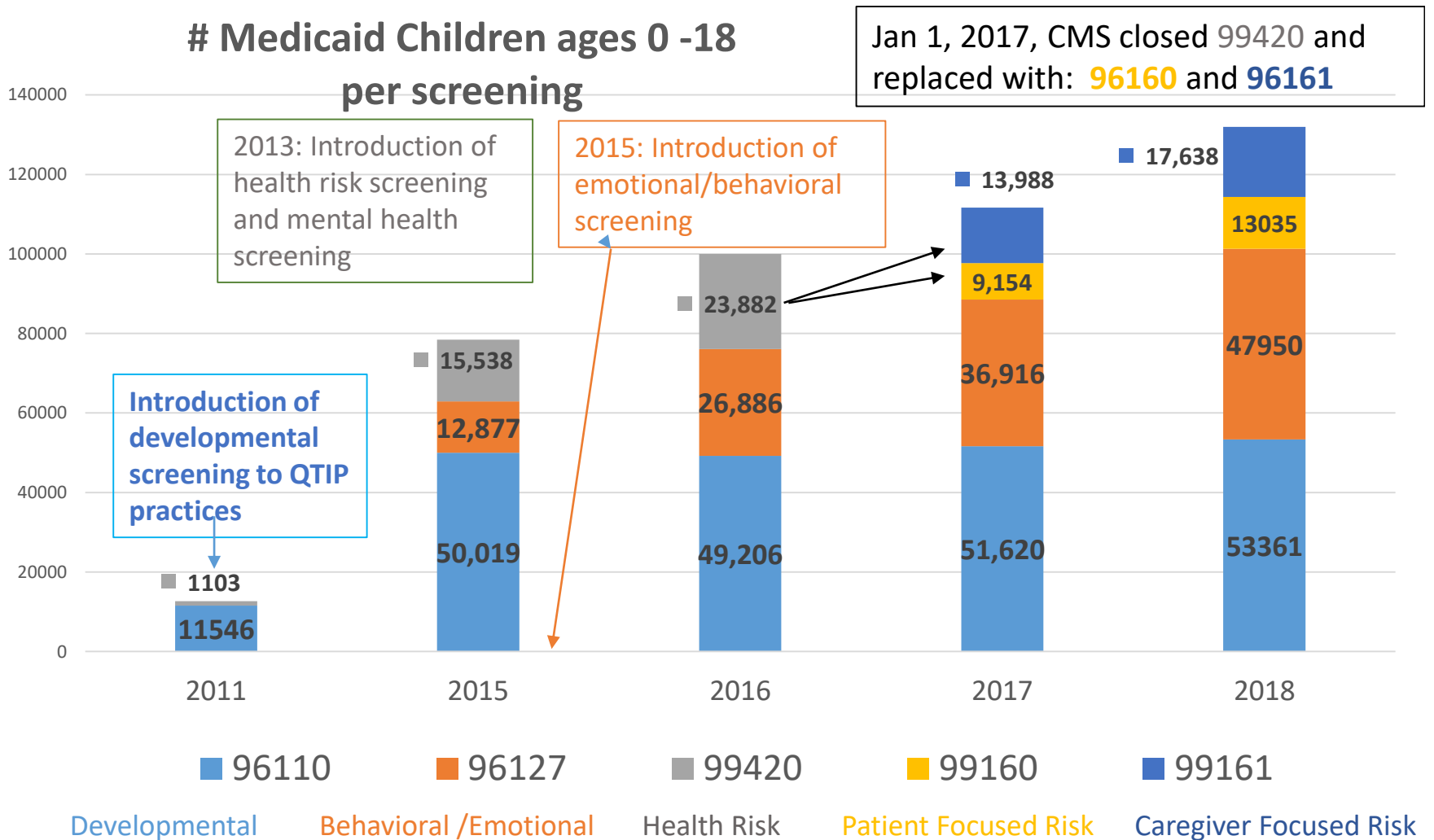
(administrative claims)

At A Glance ...

- **362% increase** in the number of children receiving a developmental screenings since 2011
- **374% increase** in the number of children receiving an emotional/behavioral screening since 2015
- A **1,499% increase** since 2011 in the environmental and risk assessments



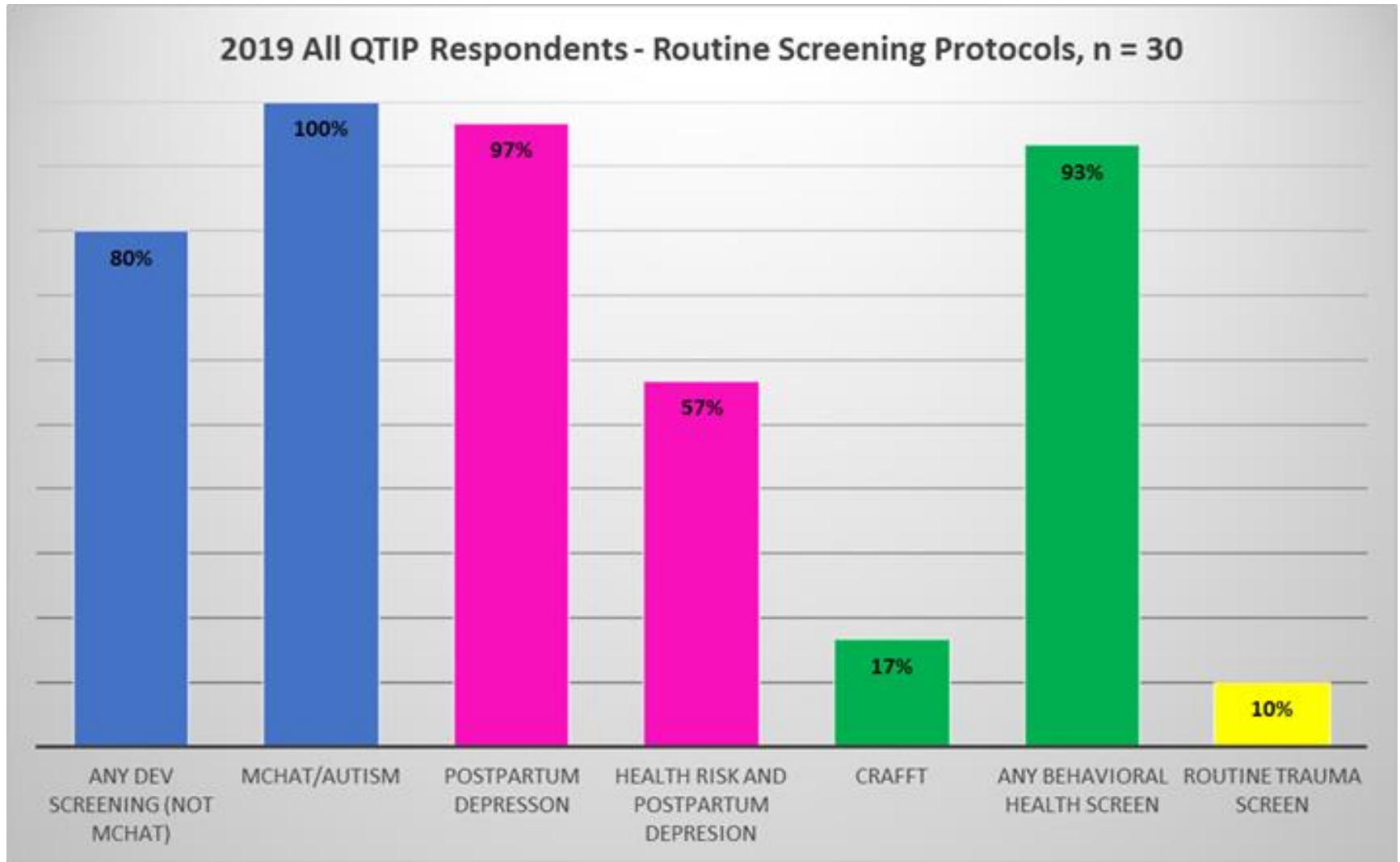
Developmental and Mental Health Screening*



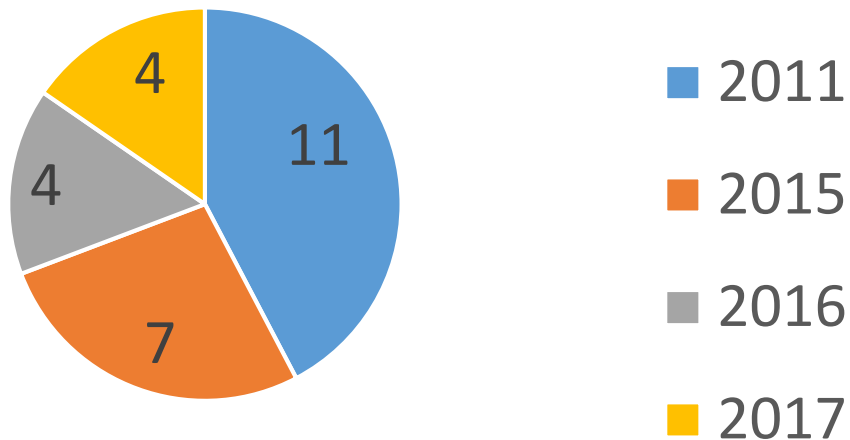


WOW - LOOK AT YOUR SCREENING RESULTS

Kristine's Mental Health Survey



- Data provided by Institute for Families in Society
- Reflects ONLY ADMINISTRATIVE claims (differs from MCOs)
- Quality Measure Year 2018
- QTIP 2018 data grouping:



NOTE: Unlike previous years, QTIP19 (n=4) baseline was NOT included in the QTIP grouping

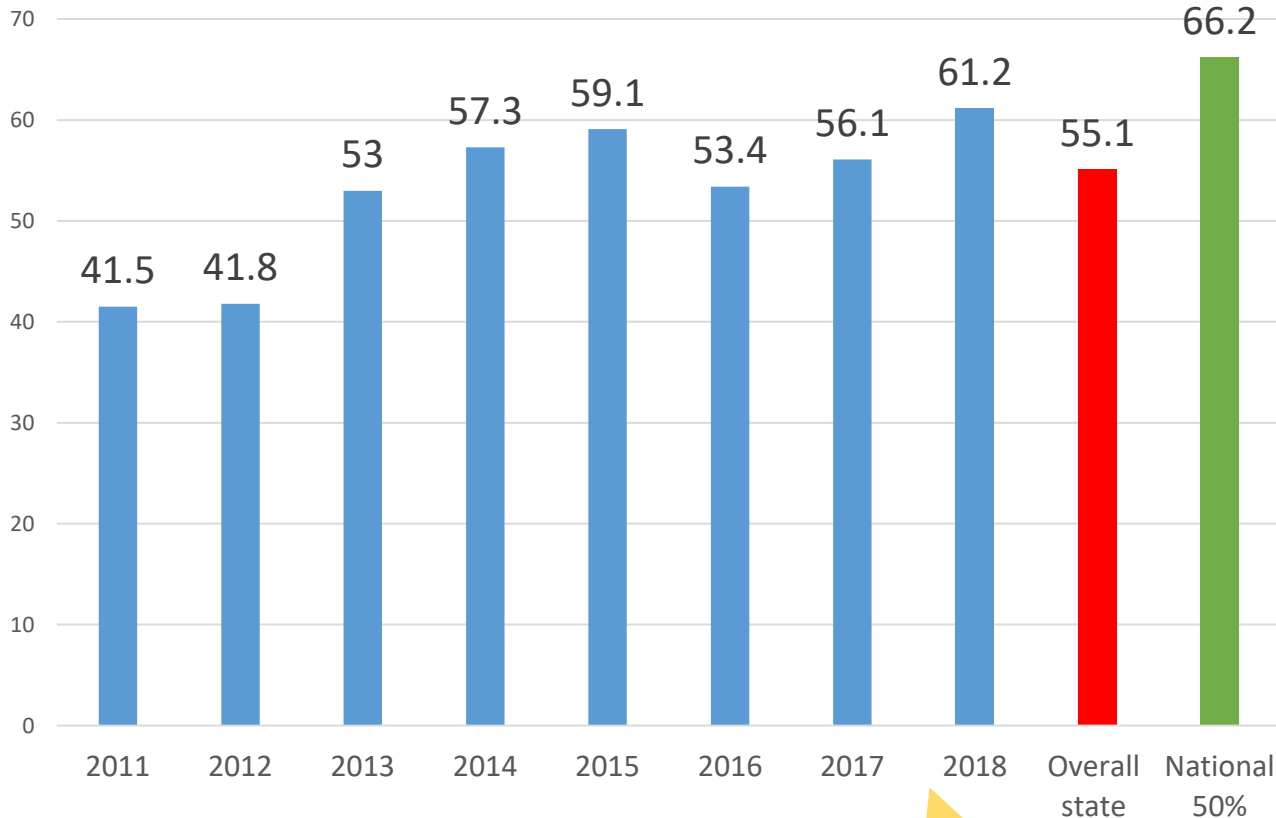
- QTIP, NON-QTIP data, SC state average (QTIP & non-QTIP PCPs) and national 50% benchmarks are presented

HEDIS – Administrative Claims Data - 2018

Well Child Visits (WCV)

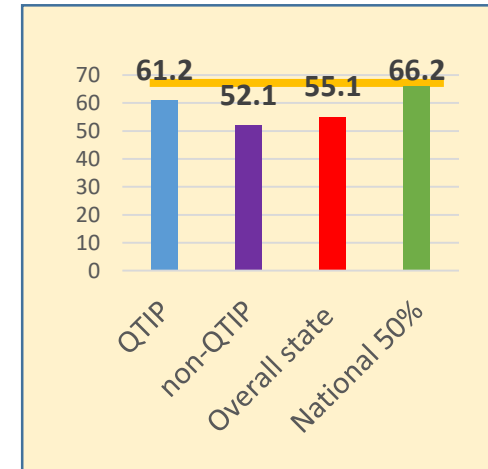


WCV First 15 Months - 6 + Visits



2018 Results compared to National Percentile

QTIP: 25th - 49th percentile
 Non-QTIP: < 10th percentile
 SC: 10th - 24th percentile

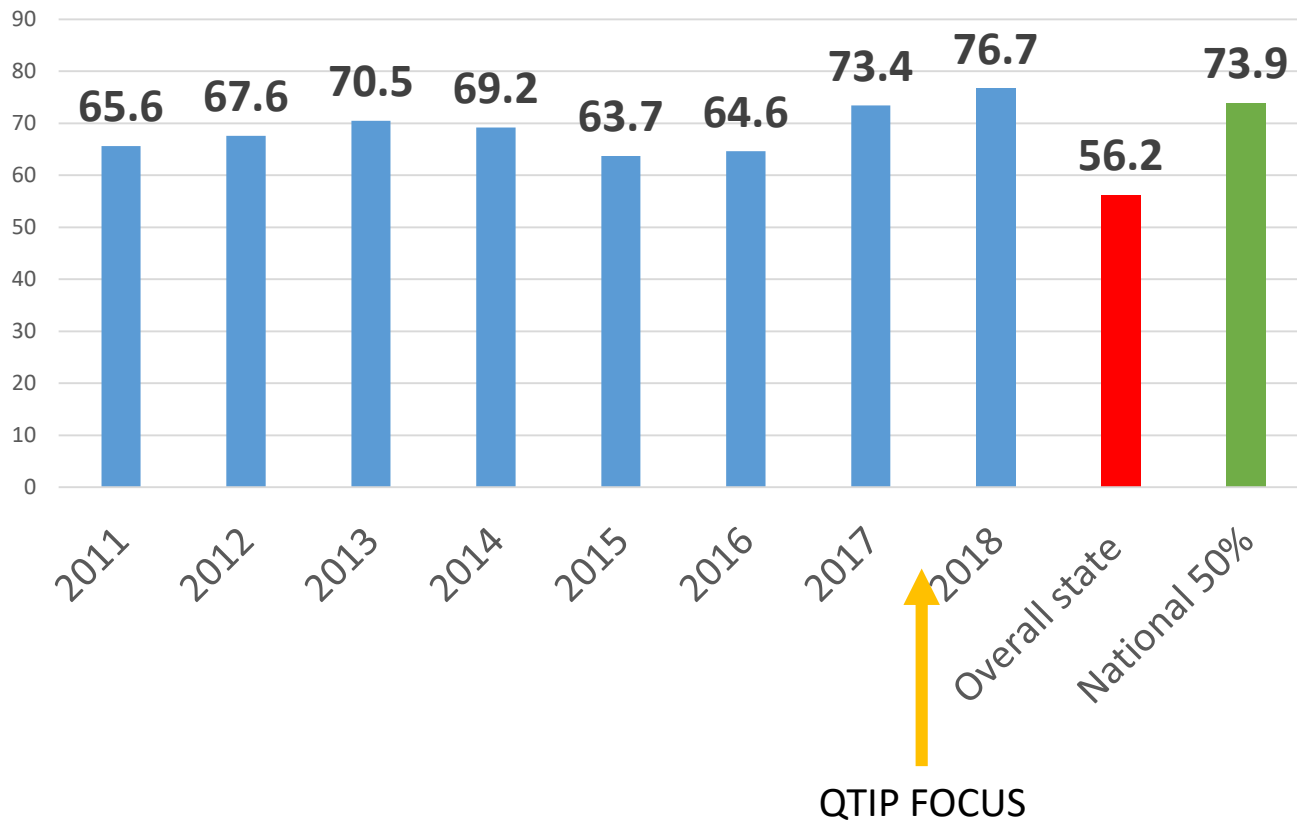


HEDIS – Administrative Claims Data - 2018

Well Child Visits



WCV 3, 4, 5, 6

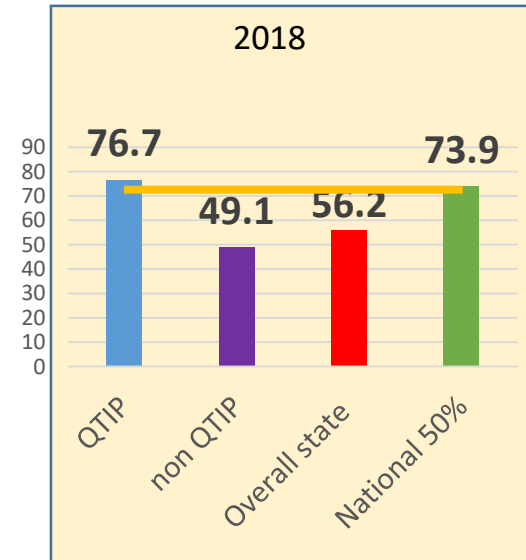


2018 results compared to National Percentile

QTIP: 50th - 74th percentile

Non-QTIP: < 10th percentile

SC: < 10th percentile

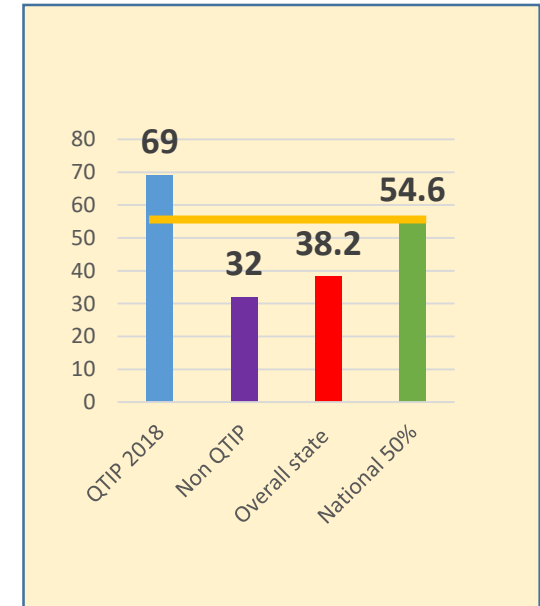
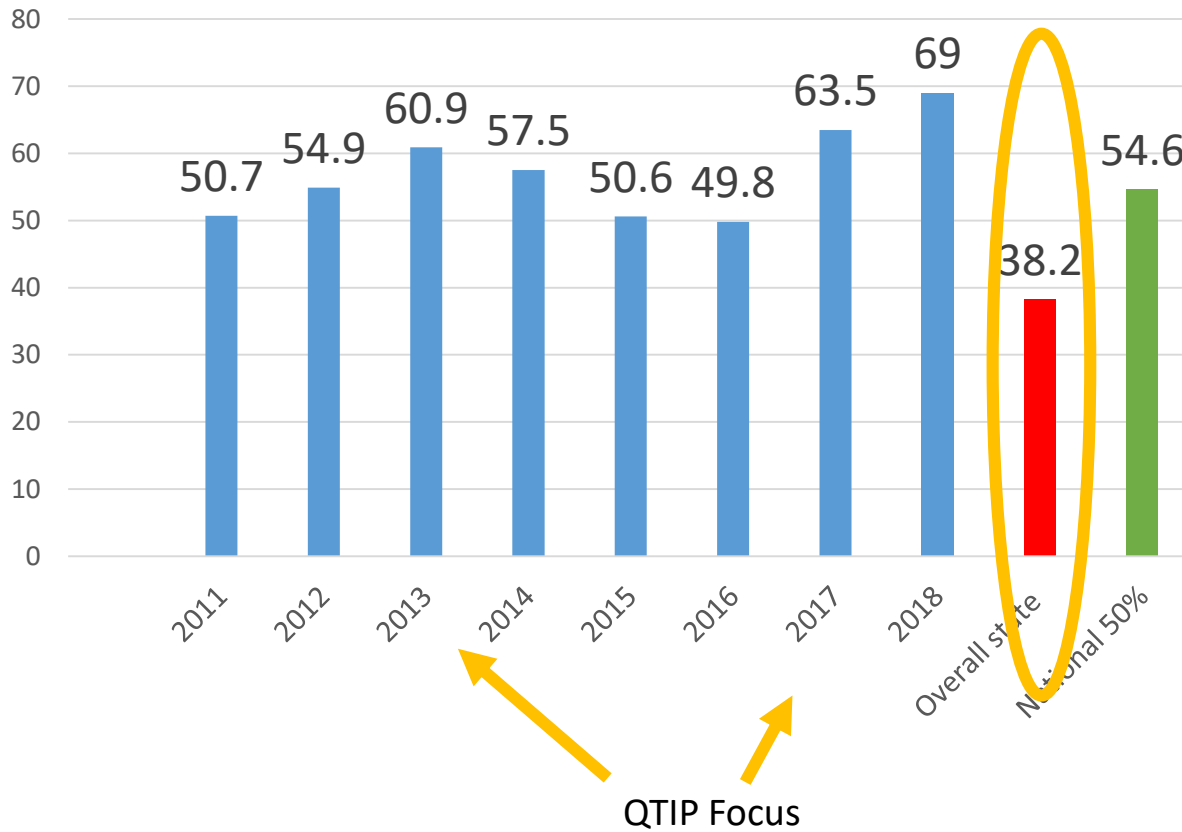


HEDIS – Administrative Claims Data - 2018

Well Child Visits



WCV Adolescents



2018 results compared to National Percentile

QTIP: GREATER THAN 90th percentile

Non-QTIP: < 10th percentile

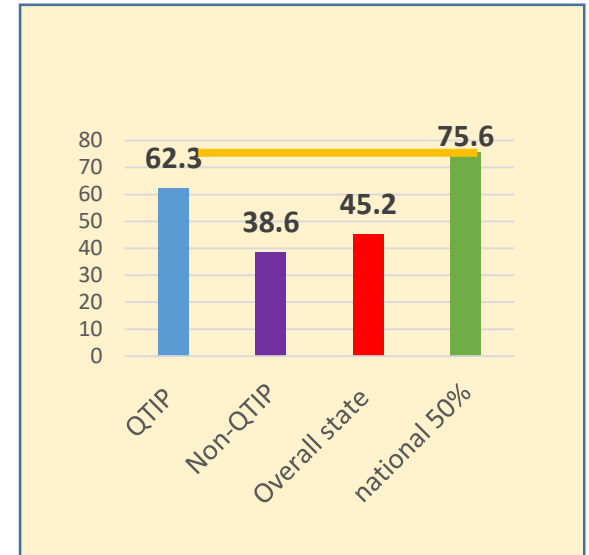
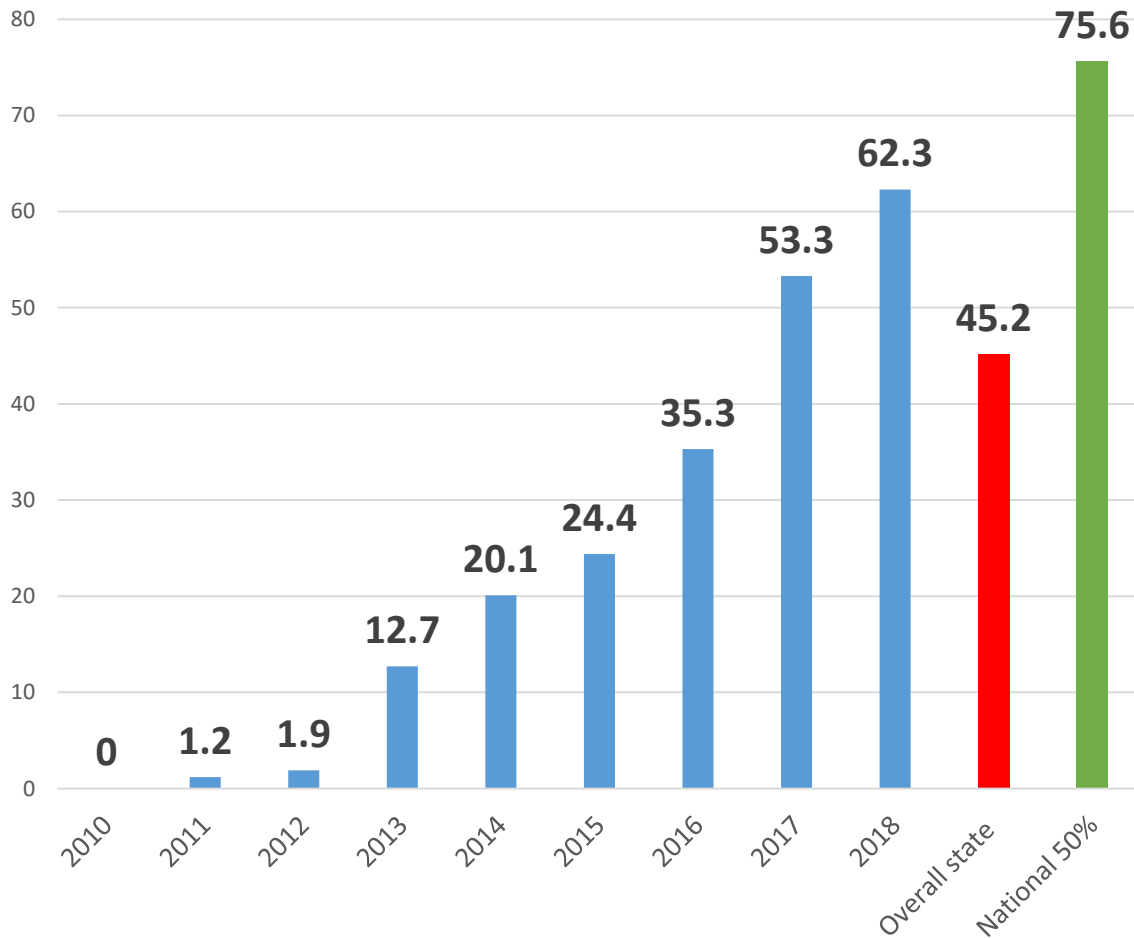
SC: 10th - 24th percentile



HEDIS – Administrative Claims Data - 2018



Weight



2018 results compared to National Percentile

QTIP: 10th – 24th percentile

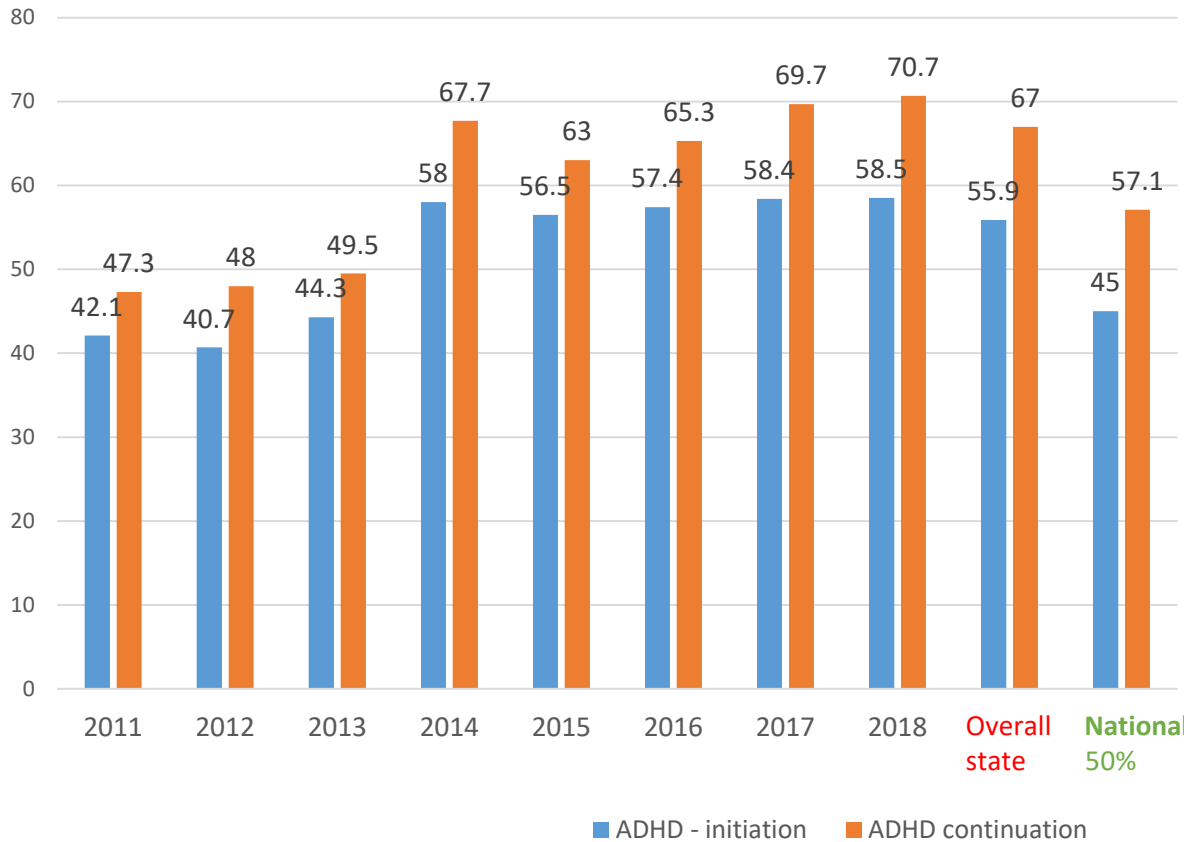
Non-QTIP: < 10th percentile

SC: < 10th percentile

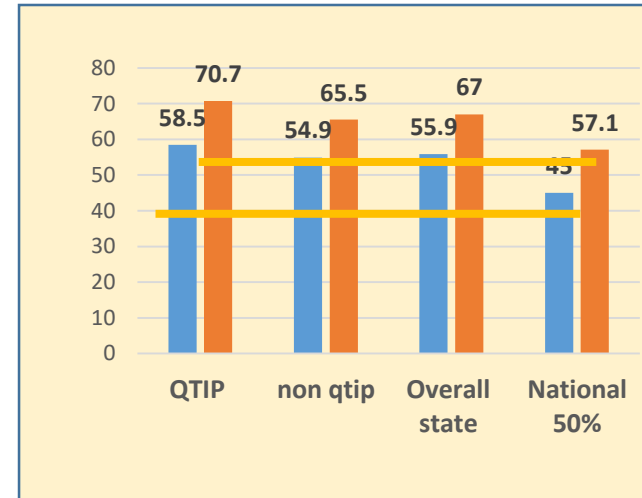
HEDIS – Administrative Claims Data - 2018



ADHD Initiation/Continuation



Initiation 39% increase
Continuation: 49.5% increase



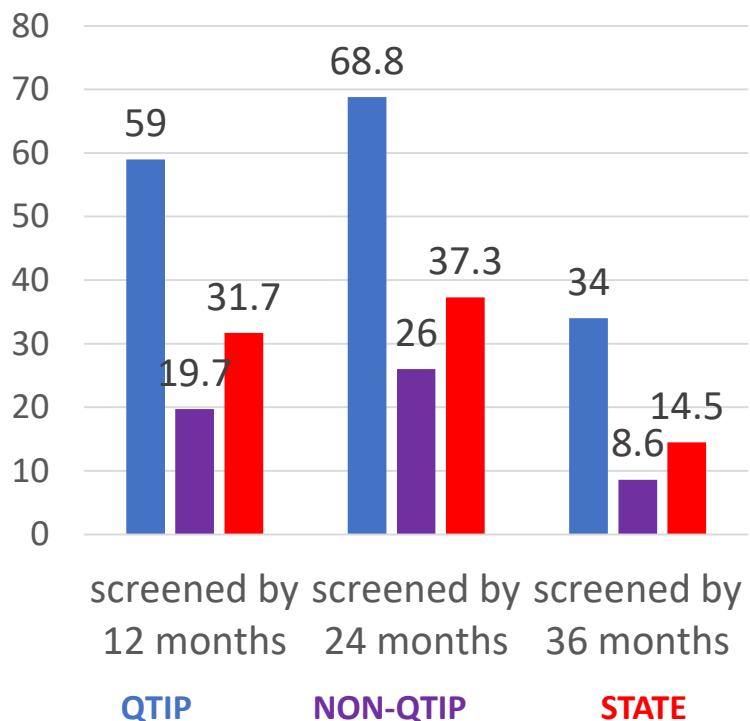
2018 results compared to National Percentile (both)
QTIP: greater than 90th
Non-QTIP: 75th – 89th
SC: 75th – 89th

Administrative Claims Data - 2018

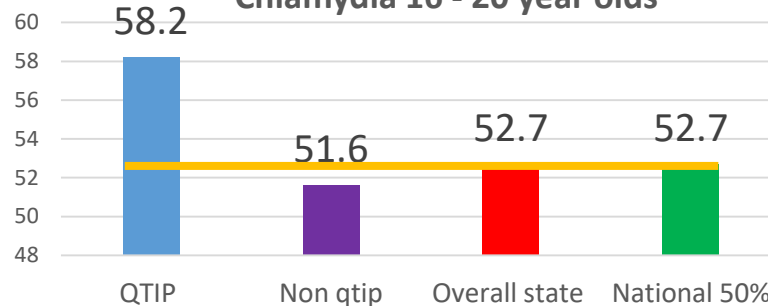


New data point

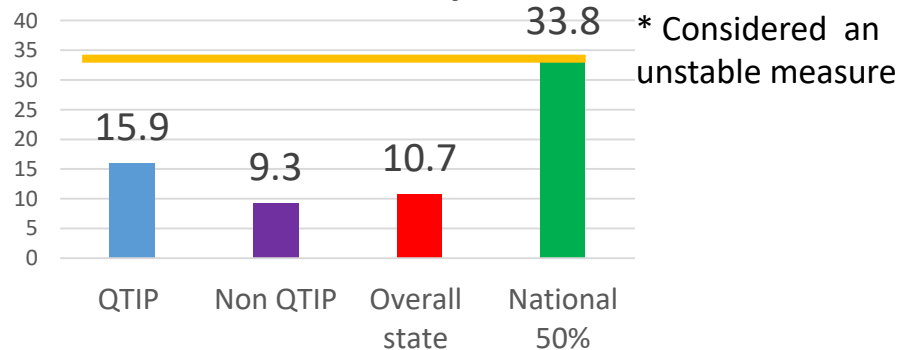
Developmental Screenings



Chlamydia 16 - 20 year olds



HPV 2 doses 9 - 13 yr. *



Of 36 data elements, QTIP:

- Improved on 23
- Went down on 12
 - 11 related to asthma (medications ratio and medication management)
- Remained the same on 1

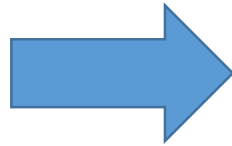
*Although QTIP scores are higher than the SC state average, we need to spread the quality results beyond QTIP.

Unstable measures and data results:

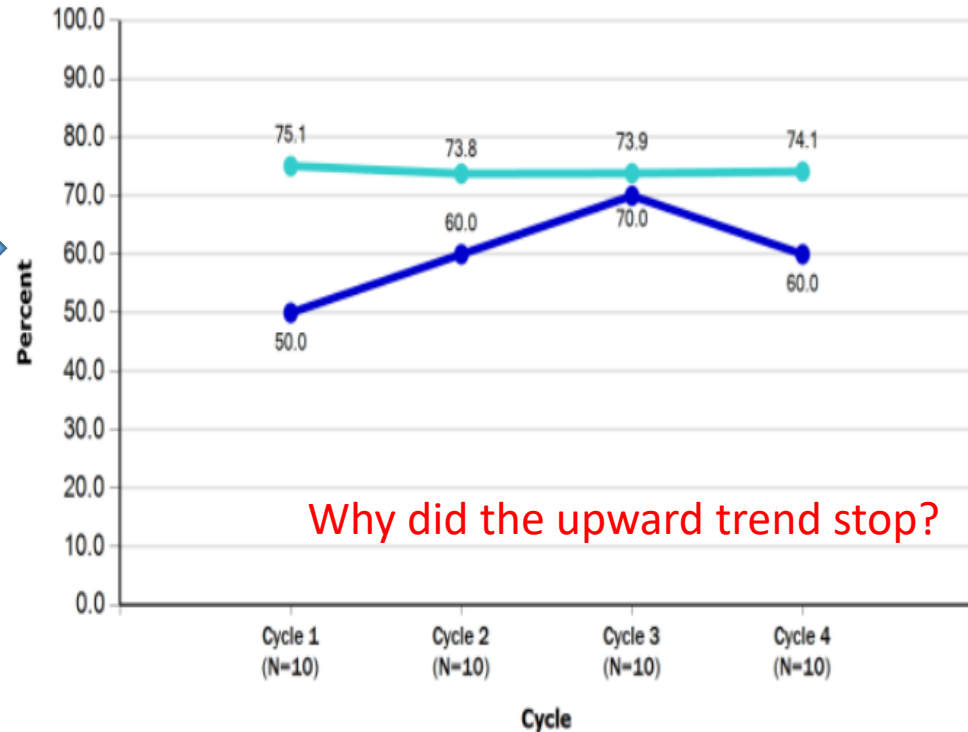
- childhood immunizations status (combo 10)
 - Immunizations for adolescents (HPV, combo 1 and combo 2)
- QTIP interventions appear to be improving average state rates
- QTIP is higher than non-QTIP practices in all categories
- Coding for Quality will affect BMI and immunization data

QIDA - Remember

- Standardized data
- Freedom to select what to work on
- Develop run charts, examine data and develop quality projects
- “Real time” data pulled by you (10 charts/topic)



Rate of patients who have had at least one HPV shot



Why did the upward trend stop?

REMEMBER....

QIDA and HEDIS data are different

QIDA can show you where you have the **most** room for the **most** improvement, where you could benefit to take a deeper dive and initiate a QI project

QIDA

- Gathered and entered by YOU using your medical records
- Real-time data – current patients
- Medicaid and private pay... ALL patients
- You determine the focus and what you gather

QTIP HEDIS

- Provided by IFS and based on Medicaid administrative claims
- Based on 2018 data and “assignment”
- Medicaid patients only
- Based on HEDIS specifications

(based on June entry)



CONSISTENTLY 85% +

- Maternal depression screening: 92%
- Family screened for tobacco use: 97%
- Safe sleep discussion: 97%

IMPROVEMENTS NOTED

- | | |
|-------------------------------|-----------|
| • Breastfeeding plan in chart | 43% - 58% |
| • Reach Out and Read | 24% - 41% |

Notable:

- Any breastfeeding documented: 71%
- Breast milk at 2 weeks: 65%

ROOM FOR CONTINUED IMPROVEMENT

- Discussing breastfeeding issues (59-63%)
- Lactation consultant referral (26%)
- Screening for SDOH (varies from 47% to 68%)



CONSISTENTLY 85% +	IMPROVEMENTS NOTED	
<ul style="list-style-type: none"> Well visits up-to date Weight counseling Use of standardized instrument 3 with co-morbidities: identified, documented and discussed 	<ul style="list-style-type: none"> Social determinates of health screening Follow-up in 30 days Teacher screen completed Co-morbidities identified and documented 	<p>45%- 100% (57 aver)</p> <p>71% – 94%</p> <p>83%- 100%</p> <p>74% - 100%</p> <p>91%-100%</p>

ROOM FOR CONTINUED IMPROVEMENT

- Completed HPV series 81% - 50%

2019 Tobacco Cessation Workshop

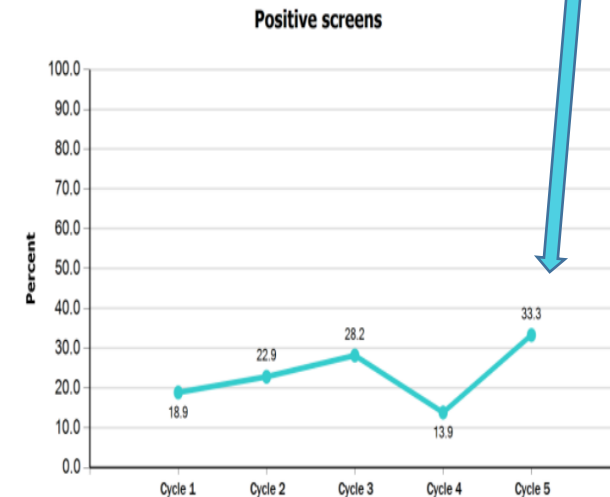
- Workshop focused on:
 - The effects of secondhand and thirdhand smoke
 - Prescribing NRTs
 - Motivational interviewing
 - Resources
 - Education on vaping



Practices documented 20%; validates sample since 19% SC smokes

- Weekly PDSA cycles and QIDA entry
 - Participating practices demonstrated textbook rapid cycle QI
 - 1 change, 1 week, 1 provider

Practices found that by focusing on a very specific aspect of the tobacco cessation project they were able to see improvement quickly.



- Review
 - DHHS news
 - National studies/publications
- Data
 - HEDIS administrative results
 - QIDA
- **Future Plans**

2019 Components

Learning Collaborative

Technical Assistance:

- On-site visits
- Skill building
- Communication
- ABP MOC part 4

Quality Improvement

- QTIP staff
- Workshops/calls

Mental Health

- QTIP staff

Areas of Focus/Measures

- Breastfeeding – 6 months
- ADHD

Data Collection

- QIDA
- QI and PDSA documentation instruments

Participation Agreement

Tier 1 – Active Participant

Requirements:

- Practices must establish/maintain a quality improvement team
- At least two QTIP team members are expected to attend each LC
- Actively participate and document quality improvement initiatives
- Data entered into QIDA every month on selected topic areas
- Must participate in site visits (on-site/regional) per year
- Actively participate with all surveys sent by QTIP staff

NOW

Being Considered For 2020

- QIDA breastfeeding 6 months (enter for July)
- Hire new QI staff
- Back to Basics with QI and PDSAs
- New QTIP
Medical Director



- Adolescents:
 - Mental health and depression screening
 - Sexual health
- Asthma
- Regional mental health workshops on suicide prevention

SAVE THE DATE:

Next Learning Collaborative
January 24-26, 2020
Charleston, SC

News ... Future Projects



where great stories begin™



“Training and Engagement”

- Making RO&R more available
- Expanding criteria for QTIP practices eligibility
- Tutorials/training
- Expansion of topics
- Wants QTIP to help them scale

DSS working to develop an intensive plan to ensure foster children’s health care needs get addressed.

News ... Future Projects



QTIP staff was asked to partner with DHEC and NIPN on a Collaborative Improvement and Innovation Network (**CoIIN**) project

- Increasing adolescent depression screening (16 -25) and the related policy
- QTIP, pediatric offices, and family practices will have option to apply



The SC Campaign to Prevent Teen Pregnancy

Collaborative for Reproductive Education and Wellness (CREW)

- Panel of pediatricians to provide input on current efforts and barriers

Challenge You

- Spread within your practice
- Relationships/networking
- Finding time for quality improvement
- Using your data to effect change
- Continue with your PDSA cycles and documenting your QI activities
- Be a leader and a mentor ...

FEEDBACK :

- Ways to keep QTIP interesting
- QI workshop topics
- QIDA topics/questions
- Regional site visits
- Please complete your evaluation

What is available for you?

QTIP Blog

<https://msp.scdhhs.gov/chipraqtip/>

QTIP Website

<https://msp.scdhhs.gov/qtip/>

ABP MOC Part 4

Monthly Calls

Site Visits

Assistance from QTIP staff:

- QI
- Mental Health

QTIP staff



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