



# WORDS

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**Lynn Martin, LMSW**  
**QTIP Project Director**  
**SCDHHS**  
**January 20, 2021**

*adaptability*

*Modifications*

**GROWTH**

*SUCCESS*

**TRANSFORMATION**

- News
  - SCDHHS
  - QTIP
- Data
- Current and Future Plans

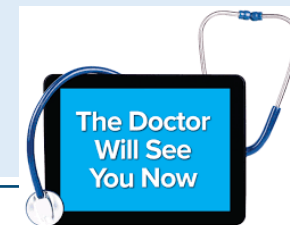
# SCDHHS Policy Updates

## Vaccine Administration (and counseling) policy

- **90460 and 90461 frequency increases**
- **Administration and counseling**
  - 90460 (first vaccine/toxoid component)
    - Frequency limit of 9
  - 90461 - as an add on to 90460 for each additional component
    - Frequency limit of 8
- September 1, 2020

## COVID-19

- Over 31 Medicaid COVID Alerts or Bulletins were issued in 2020.
- Many policy changes allowed telehealth options during the National Emergency.
- SCDHHS is currently reviewing all policies and considering long-range plans.



# SCDHHS Policy Updates

## MCO – Quality

- SCDHHS suspended the quality financial penalties for calendar year 2020 for MCO providers.
- For calendar year 2021, SCDHHS will reinstate the withholding of funds at 1.5% of capitation rates.

## Pediatric Measures

- Well-Child Visits in the First 30 Months of Life
- Child and Adolescent Well-Care Visits
- Child Immunization Status (Informational Only)
- Behavioral health index (Bonus only)



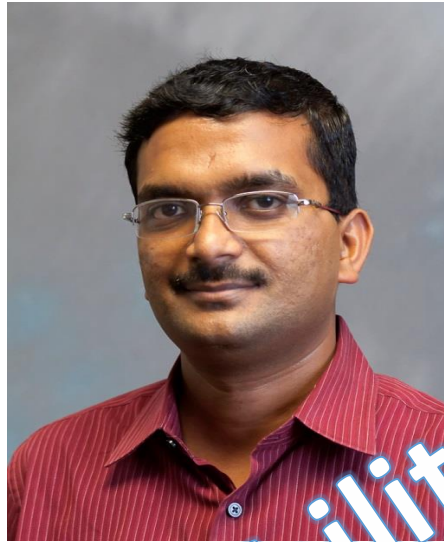
# SCDHHS Policy Updates

## Leadership Changes

- Director Joshua Baker departed SCDHHS on January 11, 2021. Thomas “Clark” Phillip will be serving as the Interim Director.
- Bryan Amick, Chief Innovations Officer, departed SCDHHS January 15, 2021.
- Janelle Smith was hired as the Office of Health Programs Director in July 2020.
- Michael Jones began serving as the Office of Medicaid Operations Director (which includes Managed Care) in 2020.

# QTIP Staff

Dr. Ramkumar Jayagopalan  
Medical Director



Kristine Hobbs  
MH Coordinator



Lynn Martin  
Project  
Director



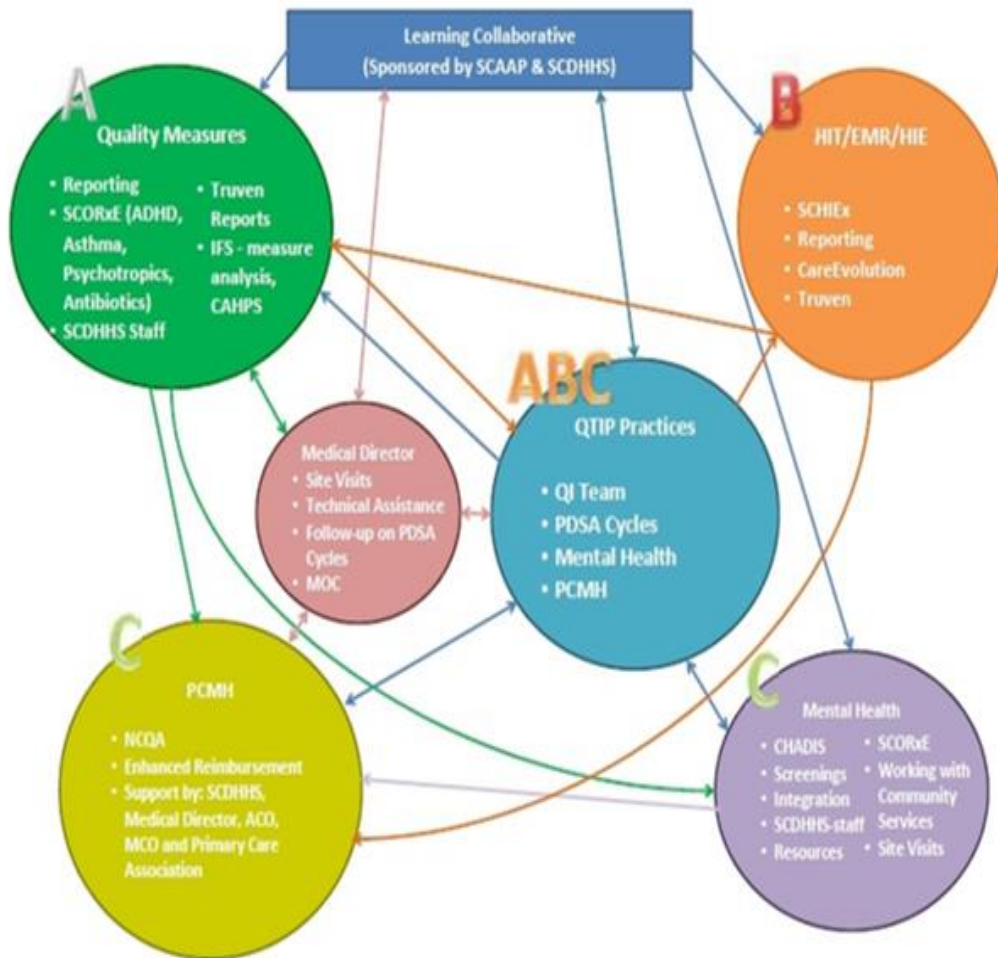
Laura Brandon Berry  
QI Specialist



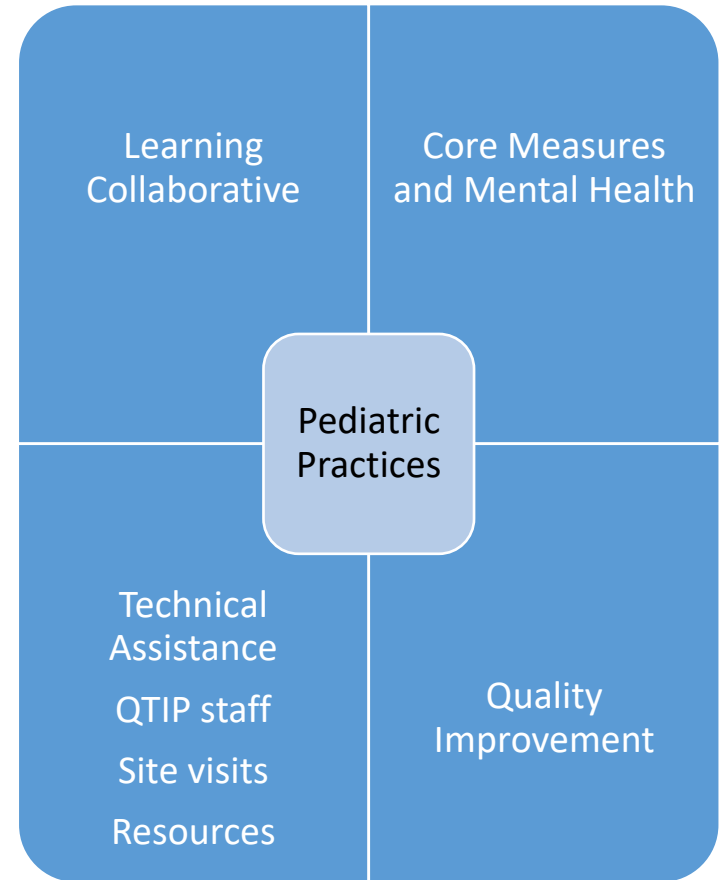
Stability

# Modifications

From this....



To this





# Consistency

- Working **directly** with a group of pediatric practices increased understanding and communication at the **practice level**
- Developing and supporting a clinical **quality improvement team** at each practice is essential
- **Learning Collaborative** sessions are effective at introducing evidenced based practices, anticipatory guidance and promotes sharing of ideas
- Keep practices engaged and activities meaningful:
  - **Continuous** messaging and technical assistance
- Teach **Quality Improvement**

# Transformation

Increased “comfort” with  
mental health and screenings

Comfort

Willingness to try new things

Readiness

Patient Centered Medical  
Homes

Electronic Medical Records

Progress

# Suicide Prevention Workshop

## WHY do we focus on Suicide Prevention

- Why suicide prevention? (focus on AAP guidelines) Dr Ramkumar
- Why we need safer suicide care in primary care. Verna Little

## HOW do we focus on Suicide Prevention?

- How each child's individual factors play into suicide risk (Dr Khetpal)
- The role of the pediatrician in suicide prevention and how a pediatric office can be an intervention (Dr Woods)
- Moving suicide prevention ideas to QI... (Hobbs)

- 21 practices participated in lecture series
- 7 practices intensive work
- Assistance from Dr Sheila Woods

- Follow-up
  - Individual call @ 2 weeks
  - Practice calls @ 6 and 12 weeks
  - Presentation of data/projects

# WOW

12

## Suicide Prevention Workshop practices:

- Beaufort Pediatrics
- Beaufort Hampton Jasper
- Carolina Pediatrics
- Center for Pediatric Medicine
- Charles Towne
- Northwoods Pediatrics
- Rock Hill Pediatrics





Quality through  
Technology and Innovation in Pediatrics

QTIP AWARD

for CREATIVITY

Beaufort  
Hampton  
Jasper

# RELATIONSHIPS

- Relationships
  - Practices
  - SCDHHS and AAP

Partners

Networking

Voice

“DHHS/QTIP provides an invaluable resource for the pediatricians of South Carolina... Through a strong liaison/working relationship, both organizations can and do deliver innovative and substantial programs to our children and families. We are the envy of many AAP chapters in the country!”

Robert Saul, MD SC AAP Chapter President

## HEDIS-like Measures

- QTIP practices ranked higher than the state average in all three well-child measures

## QTIP highlighted during Legislative Oversight

- Relationship with provider community
- Work on various measures/results

## National - 2020

- NIPN suicide prevention
- MEDS call on Improving Academic Readiness in Young Children
- (2021) AAP projects: Firstline and Smoking Cessation

## QTIP practices = 28

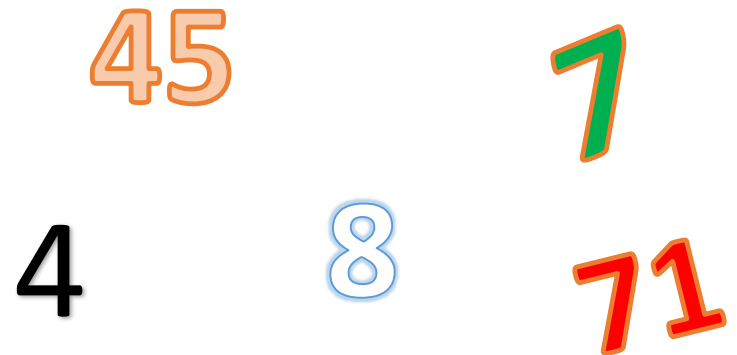
- 3 academic
- 14 private
- 7 associated with a hospital
- 4 FQHC

### Size:

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

## Active practices:

- 2011 practices: 12
- 2015 practices: 4
- 2016 practices: 3
- 2017 practices: 4
- 2019 practices: 4
- 2020 practices: 1





- News
  - SCDHHS
  - QTIP
- Data
- Current and Future Plans

# Quality Measure Focus 2011 – 2016

- Emergency department visits
- Well-child visits in the first 15 months of life
- Developmental screenings in the first three years of life
- Follow-up care for children prescribed ADHD medication
- Access to primary care practitioners
- Preventative dental services
- Consumer Assessment of Healthcare Providers and Systems (CAHPS)
- % of live births weighing less than 2,500 grams
- Cesarean rate for Nulliparous Singleton Vertex
- Frequency of ongoing prenatal care
- Asthma
- Weight assessment & Counseling for Nutrition and Physical Activity: BMI Assessment
- Annual pediatric hemoglobin testing and control
- NCQA -PCMH
- Follow-up after hospitalization for mental illness
- Family-friendly offices
- Timeliness of prenatal care
- Mental health screening
- Adolescent well-care visits
- Immunizations for adolescents
- Chlamydia screening
- Appropriate testing for children with pharyngitis
- Otitis Media with effusion
- Pediatric Central-Line Associated Bloodstream Infections
- Childhood immunization status
- Well-child visits in the third, fourth, fifth, and sixth years of life

# 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

# Past Focal Topics

2019

## Breastfeeding

### at 1 month and 6 months

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

## ADHD

- Follow-up visits
- Standardized screen
- Social determinates of health

## Smoking Cessation

2020/21

## Adolescents

- Well child visits
- Reproductive Health
- Mental Health (depression and anxiety screening)
- Substance Abuse Screening (2021)

## Suicide Prevention

## Asthma

# Innovative

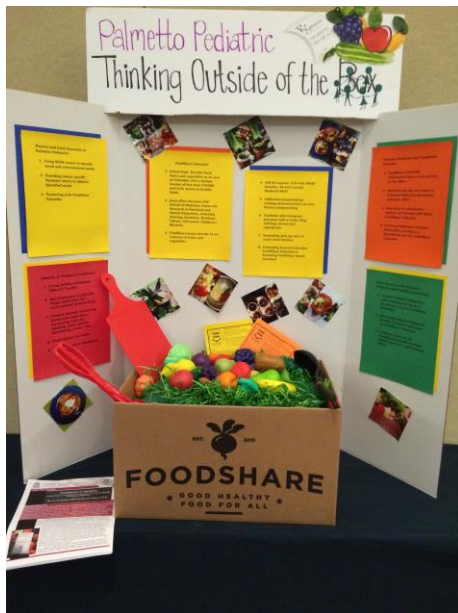
- Handouts on when to come into the office and when to go to the ED
- Working on office flow
- “specialties” among staff
- Strategic decisions on timing of screenings



Outdoor sick child visits and flu shot administrations

# Innovative

- Lunch and Learns
- Financial incentives/penalties



# Trend setting

QTIP interventions appear to be improving average state rates

- QTIP is higher than non-QTIP practices and SC overall in all WCC categories (HEDIS-Like Administrative Claims)

## Well Child Care first 15 months 6+ visits

QTIP practices have shown a 53.7% increase since 2011

There has been a 15.4% increase in State rate since 2011.

## Well Child Care 3 – 6 years

QTIP practices have shown a 17.5% increase since 2011

... a 13.5% increase in State rate...

## Well Child Care Adolescents

QTIP practices have shown 37.7% increase since 2011

... a 50.5% increase in State rate...

> 90<sup>th</sup>

# Engagement in Health Care

Comparison of 2019 and 2020  
Medicaid administrative claims only  
(Note: Sept 2020 data ~ 82% complete)

## Well Child visits

- April 2019 & 2020
  - 33.5% decrease
- July 2019 & 2020
  - 12.9% decrease
- Sept: 2019 & 2020
  - 4.2% increase
- Telemed in Sept <1%

## Sick Visits

- April 2019 & 2020
  - 70.5% decrease
- July 2019 & 2020
  - 16.4% decrease
- Sept: 2019 & 2020
  - 48.2% decrease
- Telemed in Sept 6%

## Immunizations

- April: 2019 & 2020
  - 35% decrease
- July 2019 & 2020
  - 19.3% decrease
- Sept: 2019 & 2020
  - 6% increase

# Challenges



- **Review**

- SCDHHS News
- QTIP Updates

- **Data**

- **Current and Future Plans**

# 2020-2021 Components

## Learning Collaborative

### Technical Assistance:

- On-site visits
- ABP MOC Part 4

### Quality Improvement

- QTIP staff
- Monthly calls (2<sup>nd</sup> Wed @ 12:30)
- Suicide Prevention Workshop
- AAP projects: pandemic and vaping

### Mental Health

- QTIP staff

## Areas of Focus/Measures

(January 2020 – July 2021)

- Asthma
- Adolescent Health
  - Mental
  - Sexual
  - Substance Abuse screening (1/21)

### Data Collection

- QIDA
- QI and PDSA documentation instruments

# MOC

- Portfolio renewed March 2020 – Feb 2022
- Located on QTIP website

## Topics

- Access
- ADHD
- Adolescent Health
- Asthma
- Behavioral Health
- Breastfeeding
- Developmental Screening
- Emergency Department Usage
- Obesity
- Oral Health Disease
- Smoke Exposure
- Well-Child Visits
- Pandemic Response (new)
- Suicide Prevention (new )

your words...

over it!

CRAZY

Adaptable

Social distancing

Zoom

Tele-

Masks

Demanding

visits

Decreased  
patients

STRESSFUL, STRESSFUL

Lots of

Go with the flow

testing

slow

Extra precautions

Think

and increased

outside the

CHAOS

sanitization

box 28

# AAP Mounts E-cigarettes Initiative

Dr. Austin Raunikar (Pediatric Cardiology) and Dr. Lochrane Grant (General Pediatrics) completed national AAP training and will be serving as the 2021 E-cig Champions for South Carolina.

Their goal is to share information and work with SC physicians and advocates to help combat the vaping epidemic in children and youth!



Information will be available for a clinical and community settings:

- **Clinical setting** - Support strategies to address e-cigs; Through prevention, assessment of dependence, and cessation.
- **Community setting** – Networking with stakeholders using media, legislative efforts, schools, and parents

**On February 10, 2021, during the QTIP monthly call, they will share resources on clinical tools and community advocacy.**

# NEXT

- New Blog – sign up
- Virtual site visits
  - Schedule
  - Peer reviewer
- Collaborations with SC AAP on two projects:
  - Project First Line – January 27<sup>th</sup>
  - Smoking Cessation February 10<sup>th</sup>
- Monthly Calls (2<sup>nd</sup> Wednesday @ 12:30)
- QIDA
- Next Steps form (hint - prizes)

# WORDS

What are your words for  
2021?

HOPEFUL

BACK to NORMAL

ENGAGING

Your words have power. Speak words that are kind, loving, positive, uplifting, encouraging and life-giving.  
~ unknown



**OF AWESOME**



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