


Healthy Connections
WISCONSIN

The QI Initiative That Could...

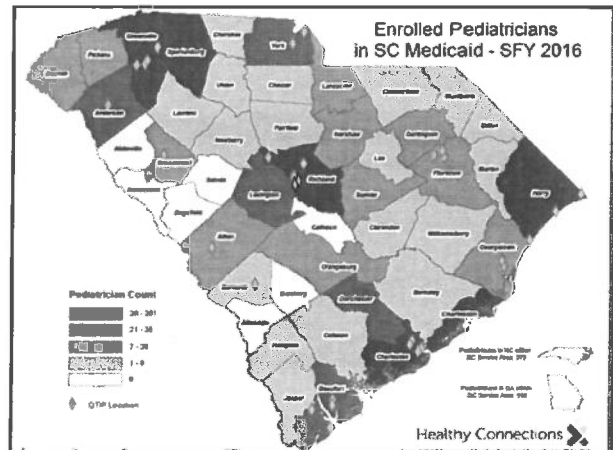
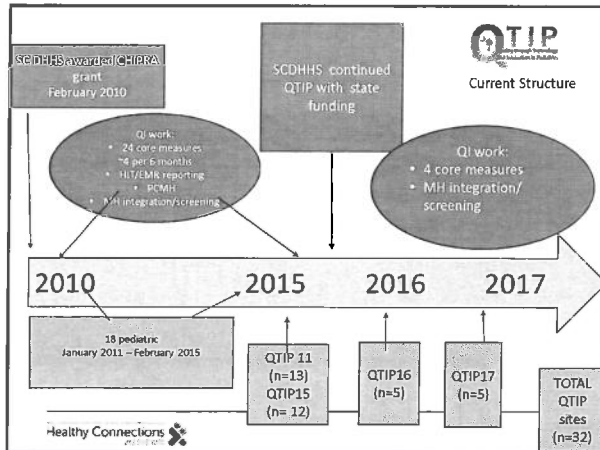
Lynn Martin, LMSW
QTIP Project Director
SCDHHS
August 12, 2017

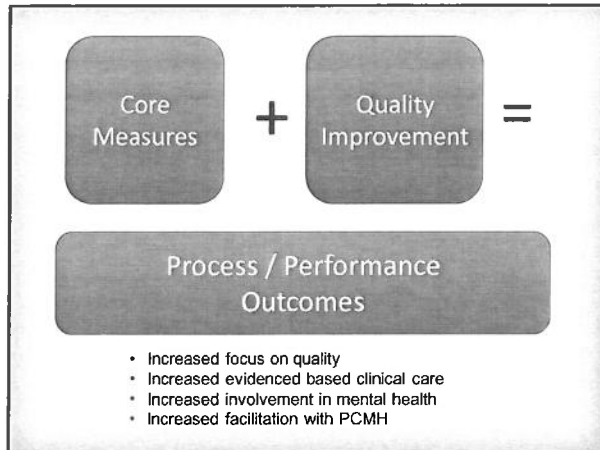
Overview



- History/Information
- Data
 - HEDIS
 - QIDA summary
- Focus 2017
- Focus 2018
- Summary

Healthy Connections
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Quality Pays

Core measures + QI = Increased Performance and Outcomes

- Linking QI initiatives to PCMH survey
- NCQA PCMH - Payments
- Developmental and Mental Health Screenings and Fluoride Varnishing
- HEDIS:
 - Well child visits*
 - ADHD management*
 - Chlamydia*
 - BMI
 - Diabetic Care*
 - Immunizations ...

*Quality Index Measures

MCO Incentives and Withholds 2017

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 Active for children/adolescents: BMI percentile total.

Behavioral Health Index (informational 2017)

- Antidepressant medication management
- Follow-up care for children prescribed ADHD medication (Initiation)**
- Follow-up after hospitalization for Mental Illness
- Use of first-line psychosocial care for children and adolescents on antipsychotics **
- Metabolic monitoring of children and adolescents on antipsychotics **
- Initiation and engagement of alcohol and other drug dependence treatment

** pediatric related

Changes at SCDHHS

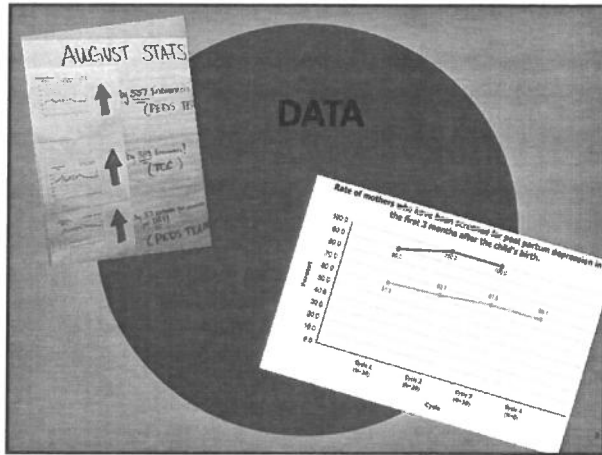
Staffing/Programming:

- Deirdra Singleton, Acting Agency Director
- Bryan Amick, Acting Director of Health Services
- Baby Net was officially incorporated in SCDHHS

Policy changes - July 2017

- A new **ASD benefit** was implemented that will provide care for children with autism without the constraints of the current waiver program.
- PRTF benefit** for children under 21 was transitioned into the managed care contracts.
- Expansion of **tobacco cessation, immunization, and substance use disorder benefits**.
- Elimination of the monthly **prescription limit was implemented** for adults.

Healthy Connections



Quality Measure focus - timeline	Focus date													
	Jan 2013	July 2013	Jan 2014	July 2014	Jan 2015	July 2015	Jan 2016	July 2016	Jan 2017	July 2017	Jan 2018	July 2018	Jan 2019	July 2019
Emergency Department Visits	X													
Well-Child Visits (First 15 Months)	X										X	X	X	
Developmental Screenings in the First Three Years of Life	X				X						X	X	X	
Follow-up care for children prescribed ADHD medication	X									X				
Children and adolescents' access to primary care practitioners		X												
preventative dental services (Dental treatment)		X			X		(X)				X	X		
CAHPS		X												
Low birth weight			X											
Cesarean rate			X											
Frequency of ongoing prenatal care			X											
Asthma		X			X					X				X
BMI Assessment				X	X						X	X	X	
HbA1c Testing and Control				X										
NCOA - PCMH	X	X	X	X				X	X					

Quality Measure focus - timeline	Focus date													
	Jan 2013	July 2013	Jan 2014	July 2014	Jan 2015	July 2015	Jan 2016	July 2016	Jan 2017	July 2017	Jan 2018	July 2018	Jan 2019	July 2019
Follow up after All hospitalization				X										
Mental Health screening			X	X	X	X	X	X	X	X	X	X	X	X
Adolescent Well-Care Visits					X							X	X	
Timeline of Prenatal Care				X										
Immunizations for adolescents				X		X				X	X	X		
Chlamydia Screening				X										
Appropriate testing for pharyngitis					X									
Orbits Media with Effusion					X									
Pediatric Central-Line Associated Bloodstream Infections					X									
Childhood Immunization status						X					X	X		
Well-Child Visits (3rd, 4th, 5th & 6th yrs)						X								
Children w/Special Health Care Needs											X	X		
Family friendly offices	X			X						X	X	X		


Approaches and Sharing

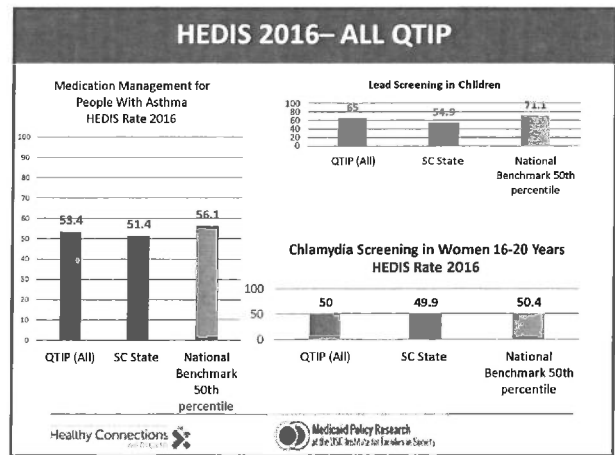
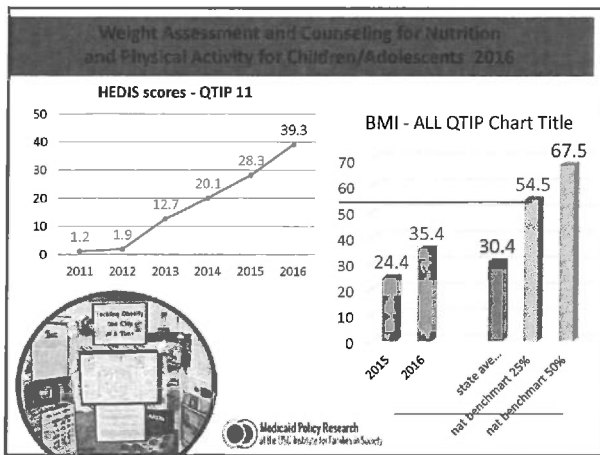
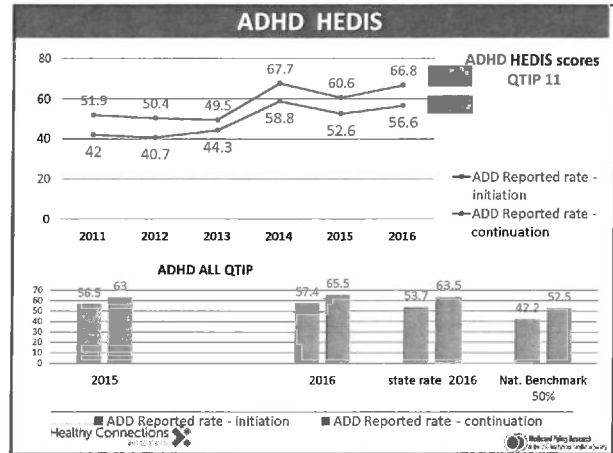
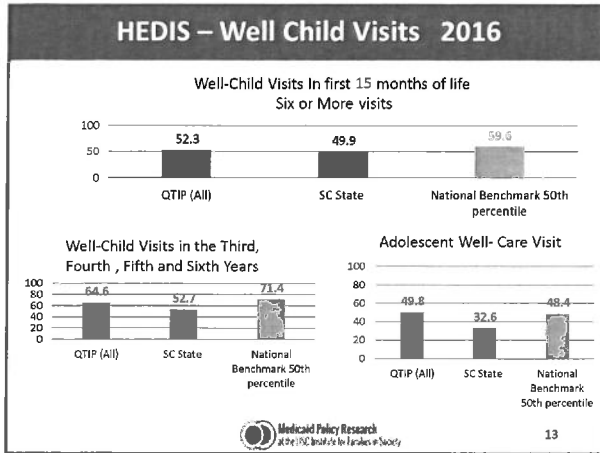
For example--

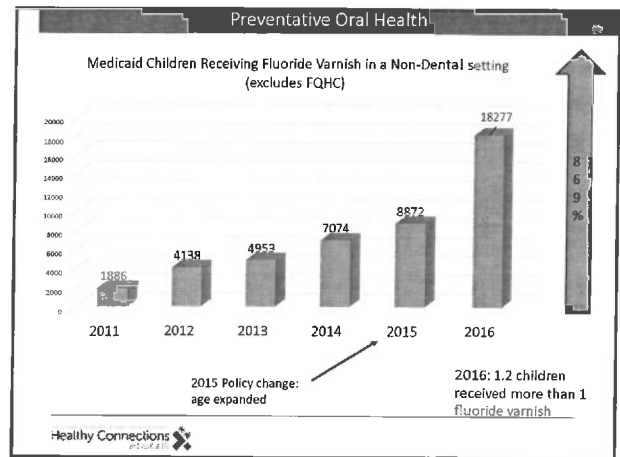
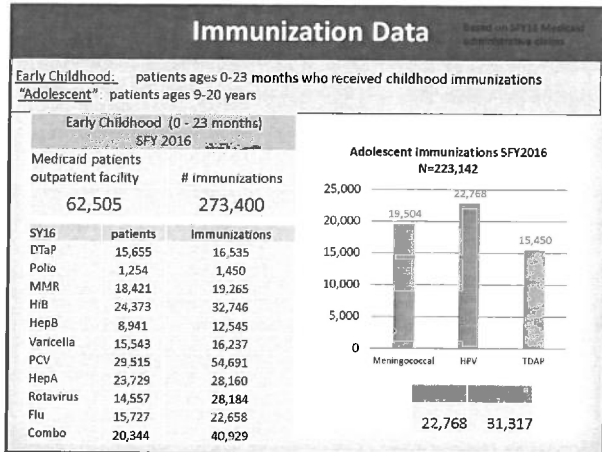
Social Determinates of Health

You had to decide:

- **If** it was something you wanted to do.
- **When, how and who** (staff within office)
- Which **Instrument**:
 - » SEEK or make your own
- **What** do you do with the positive results
- Available **resources**

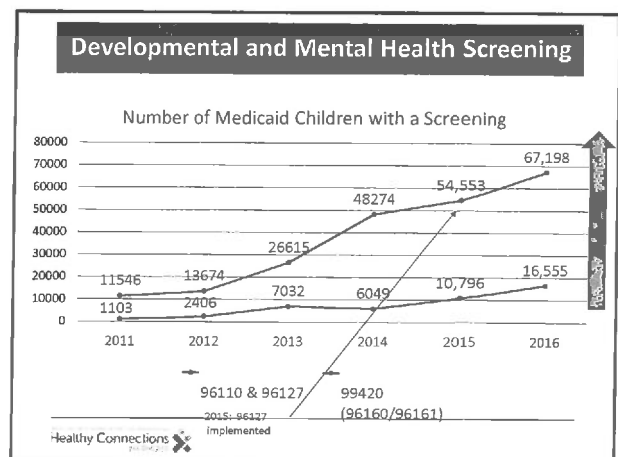






Screening Recommendations

Bright Futures Recommendations	SC QTIP Recommended Routine Screening Protocol		
	Babies and Preschoolers	Elementary School	Adolescents
<ul style="list-style-type: none"> Maternal Depression Screening Parent and Family Assessment Developmental Screening Psychological and Behavioral Assessment Autism-Spectrum Screening Oral Health Screening Substance Use Screening 	<p>Developmental Screening ALL: ASQ-3 or PEDS MCHAT</p> <p>SWYC</p> <p>Psychosocial, Environmental Risk Factors – Post-Partum depression screen SEEK-PSQ</p>	<p>All: PSC – parent report</p> <p>If indicated: SCARED – 8+ Vanderbilt</p>	<p>All: PSC-Y 11+</p> <p>If indicated or desired: Modified PHQ-9 CRAFT SCARED Vanderbilt</p>



Medicaid \$

Quality Pays

Screenings (2016):
\$7.11 x ~67,000
screenings = \$476,370


\$8.14 X ~ 16,500
screenings = \$134,270

Fluoride Varnish (2016)
\$15.89 x 18,270
applications =

\$ 610,680
\$ 290,310

Healthy Connections

QIDA/SC QIDA




- Standardized data
- Freedom to select what to work on – “not practice priority” option
- Develop run charts, examine data and develop quality projects
- Not designed for you to always make a 100%


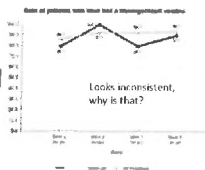
Laura Brandon is your QIDA contact

QIDA and HEDIS data differ...

Using QIDA to develop a QI project

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 isn't a competition or an exam, it is a tool to let you see where you can make big strides.

QTIP	QIDA	Consistently High
6 – 9 Months		
• Well Child Visits		89%
• Vaccination completion rate		90%
• Screening for tobacco use		87-92%
24 Months		
• PCP documented		90%
• 18 – 24 mo. well visits		81%
• Autism screening		95%
• Documenting family concerns		90%
Teens		
• PCP documented		91%
• Vaccinations (Meningococcal and TDAP)		93- 94%
Asthma		
• Rate of patients on a Controller		90%
• PCP documented		93%

QTIP QIDA Most improvement	
6 – 9 Months	
• Post Partum Screening	From 61% to 71%
• Reach out and Read	From 45 to 65%
24 Months	
• Application of Fluoride Varnish	From 45 to 65%
• Reach out and Read	From 57 to 75%
Teens	
• Behavioral Health Screening Performed	From 57 to 70%
• Positive Behavioral Health screening result with a documented plan for addressing	From 35 to 60%
• BMI counseling	From 65 to 82%
Asthma	
• Asthma patients with a well child visit within the past 12 months	From 66 to 78%
• BMI counseling	From 50 to 62%

QTIP QIDA Not Practice Priority:			
9 months	24 Months	Teens	Asthma
Post Partum Screening	Plan developed for Children w/ Special Health Care Needs	Behavioral Screen	Functional assessment
4/32	5/32	4/32	3/32
Family Strengths	Family strengths	Strengths	
9/32	6/32	3/32	
Reach out & Read	5/32		
Socio-environmental			
6/32			

QTIP QIDA Challenge you to continue working on	
24 Months	
• Global Developmental Screens	Stagnant at 64%
• Screening for special health care needs – care plans	Below 50%
• Fluoride Varnishing	Inconsistent 60%
• Referral to a Dental Home	Stagnant at 60%
• Screening for Social Determinates of Health	Stagnant at 72%
Teens	
• HPV	Stagnant 74%
• Developing a plan to address positive results on a Behavioral Health screens	Averaging 60%
• Screening for special health care needs	Mid 40%
Asthma	
• Asthma action plans documented	Mid 50%
• Functional status check	Stagnant at 45%

QTIP QIDA Changes 2017	
April 2017	
• ASTHMA – children with Moderate / Severe changed to children with Persistent Asthma	
September 2017:	
New questions will be added to all QIDA groups	
• Was the family/patient screened for tobacco use including cigarettes, e-cigarettes or other tobacco products?	
• Was the screen positive for tobacco use?	
• Was the family/patient given advise to quit?	
• Were cessation strategies discussed (i.e. Quit line)?	

QIDA – Future 2018

DRAFT

Focus: 3- 6 years Mandatory

- Well child visits
- Oral Health
- Screening
- Vaccinations
- BMI

Optional -- MUST choose at least 1 or 2


- Teen – Mandatory?
- Children with Special Health Care Needs
- Asthma

EXPLORING – pulling same data every month.

- Goal 10 charts/focus
- less than 20 questions/focus

Feedback...

- Frequency of topics
- Mandatory vs optional

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QTIP
2017 Components:

Learning Collaborative

Technical Assistance:

- On-Site Visits
- Skill Building
- Communication
- ABP MOC Part IV

Areas of Focus/Measures

- Adolescent Health
- Children with Special Health Care Needs

Quality Improvement

- QTIP Staff
- Workshops/calls

Mental Health

- QTIP staff
- Summer Series (Dr. Khetpal)
 - August 28th Suicide Risk Assessment and Safety Planning


Data collection

- QIDA
- QI and PDSA documentation instruments

Benefits


QTIP hopes you have received benefits from our working relationship

- Ongoing support
- Avenues of communication
- Educational opportunities (Learning Collaborative, workshops, ABP MOC IV, etc.)
- Mechanisms to promote preventive services while generating revenue
- Increased QI skills and
- Increased focus on quality and health outcomes

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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



QTIP wants your Feedback

- Small groups
- Story Boards
- Dr. Khetpal “Summer Series”
- Ways to keep QTIP interesting
- Timing of Learning Collaborative – within AAP meeting...
- QI workshop topics
- QIDA changes


Evaluations

REMINDER:
QI and MH staff
meeting Sunday from
10:00 – 11:30

QTIP is the Little Engine that Could....

- Perseverance
- Knowledge
- Strength
- Rising to the challenge

I KNOW WE CAN





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