



# Past, Present, and Future

Reflect on the Past Watch the Present Create the Future

Lynn Martin, LMSW
QTIP Project Director
SCDHHS
January 20, 2019

# **Overview**





- Review
  - > DHHS news
  - > National Study
- Data
  - > Structure
  - > Practices
  - > Data
- Future Plans



# Reflecting on the Past

# FUTURE PAST PRESENT

# Within DHHS, QTIP has influenced:

- Mental/Behavioral Health screening policy and reimbursement
- Preventative oral health (in non-dental settings) policy has been updated
- A pediatric quality focus at DHHS
- Bringing pediatricians to the table as partners



# Watching the Present - SCDHHS







#### **EPSDT**

 SCDHHS manual now references
 AAP periodicity schedule

Implemented

#### Ocular Eye Policy

- Policy drafted to cover photo eye screening for 12 mos. – 3 yrs.
- Financial impact being assessed

• In Progress

# Same Day Sick and Well Visits

- Topic presented
- Policy drafted
- Financial impact being studied

• In Progress



# Watching the Present - SCDHHS



# Continuous Glucose Monitoring

- Policy drafted
- Financial impact being studied

In Progress



#### Behavioral Health Index

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

Anticipated 2020 as a withhold



### **MCO Incentives and Withholds**

#### Pediatric Preventative Care

- Well-Child Visits in the first 15 months of Life (6 visits)
- Well Child Visits in the 3<sup>rd</sup>, 4<sup>th</sup> and 5<sup>th</sup> and 6<sup>th</sup> 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

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



# Watching the Present Creating the Future

# **SCDHHS**

# Updating pediatrician reimbursement:

 SCDHHS met with stakeholders/representatives from AAP and Mercer

DHHS' primary goal is to...





# Because of our past...

The Center for the Study of Social Policy (CSSP) conducted a national search of promising initiatives on the social and emotional well-being of young children (0-3) and their families.

# CSSP goals: To learn about work performed to support:

- Social emotional development
- Promoting the parentchild relationship
- Supporting parental mental health



# **Center for the Study of Social Policy**

# "Pediatrics Supporting Parents"

The CSSP team (staff, MD & family representative) visited SC to:

- Interview QTIP team and SCDHHS staff
- Make on-site visits with 3 QTIP practices which included:
  - Interviews with pediatric staff
  - Observations of WCC visits, and
  - Interviews with parents

- 1. What are effective well-child visit strategies?
- 2. What can we learn about what has not been effective?
- 3. What it takes to scale promising strategies?



# CSSP --- Watching the Present Helping Create the FUTURE

#### TODAY:

- The Center for the Study of Social Policy Stephanie Doyle, Senior Associate
- National Institute for Children's Health Quality Elizabeth Cote, MD, MPA Chief Health Officer

#### **FUTURE**

- CSSP's findings will be used to develop recommendations and ideas for action that will be disseminated through reports, briefing and webinars.
- NICHQ is planning to write a case study of what QTIP (you) have done





An Med

Carolina Pediatrics

Center for Pediatric Medicine



# **Overview**



The PAST is where you learned the lesson
The Future is where you apply the lesson
Don't give up in the middle!

- Review
  - > DHHS news
  - > National Study
- Data
  - > Structure
  - > Practices
  - > Data

Future Plans



# **Participation Agreement**



Goal: improving the quality of children's health care in SC by:

- Implementing a physician lead peer-to-peer quality improvement network;
- Introducing and working with select children's core measures;
- Providing the skills and resources for practices to improve mental health outcome.
- Recommitment to QTIP for 2019
  - Learning Collaborative
  - Working on various QI projects and entering data
  - Site visits...



# Participation Agreement – ACTIVE

- All Children's Pediatrics
- An Med Children's Healthcare
- Ballentine Pediatrics
- Beaufort Pediatrics
- Beaufort Jasper Hampton
   Comprehensive Healthcare Services
- Carolina Pediatrics
- Center of Pediatric Medicine
- Charles Towne Pediatrics
- Children's Hospital Outpatient Center
- Children's Medical Center
- Coastal Pediatrics Associates
- Eastern Carolina Pediatric Associates
- Georgetown Pediatrics

- Grand Strand Pediatrics & Adolescent Medicine
- Hope Health
- MUSC Pediatric Primary Care
- Palmetto Pediatric & Adolescent Clinic
- Parkside Pediatrics
- Pediatric Associates of Greer
- Pelican Pediatrics
- Riverside Pediatrics
- Rock Hill/Fort Mill Pediatrics
- Salerno Pediatric Care
- Sandhills
- The Children's Center of Carolina Health Centers



# Participation Agreement – Sabbatical

- Barnwell Pediatrics (2011)
- Inlet Pediatrics (2016)
- McLeod Pediatrics of Florence (2015)
- Little River Medical Center (2011)
- Medical Park Pediatrics & Adolescents (2017)

Southside Pediatrics of Aiken
 (2015)







**Barnwell Pediatrics** 







# Welcoming





Spartanburg Pediatrics Health Center





# Profile of



#### QTIP practices = 30

- 3 academics
- 15 Private
- 7 associated with a hospital
- 5 FQHC

#### Size:

- 13 Small (1-4 practitioners)
- 7 Medium (5-9)
- 11 Large (10 +)

#### 2011-2019:

- Total practices: 44 practices
- Lead Practitioners: 70+

### 2019

#### Active practices:

2011 practices: 11

2015 practices: 6

2016 practices: 4

2017 practices: 4

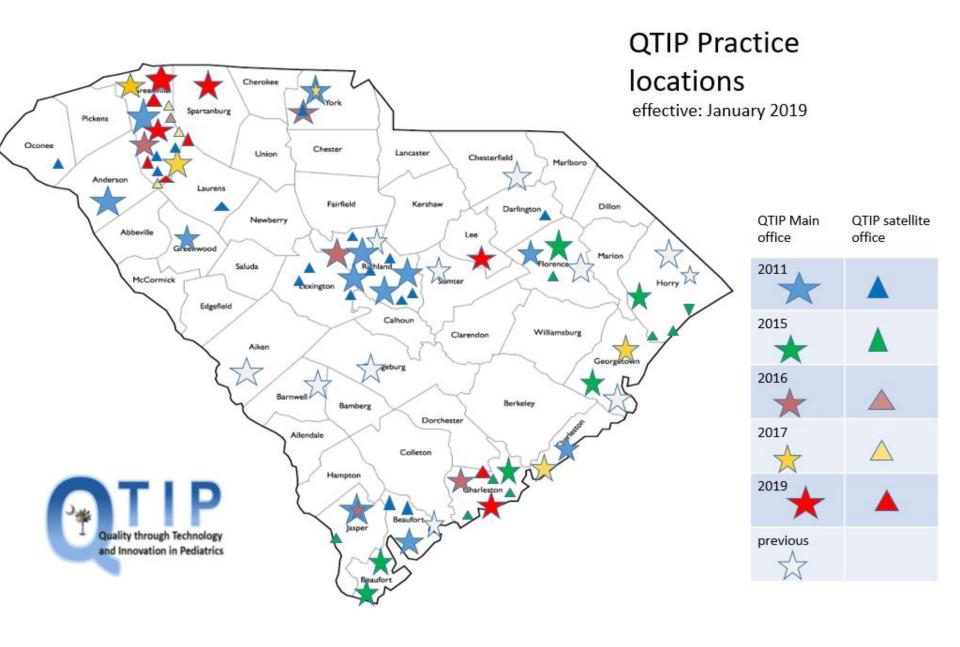
2019 practices: 5

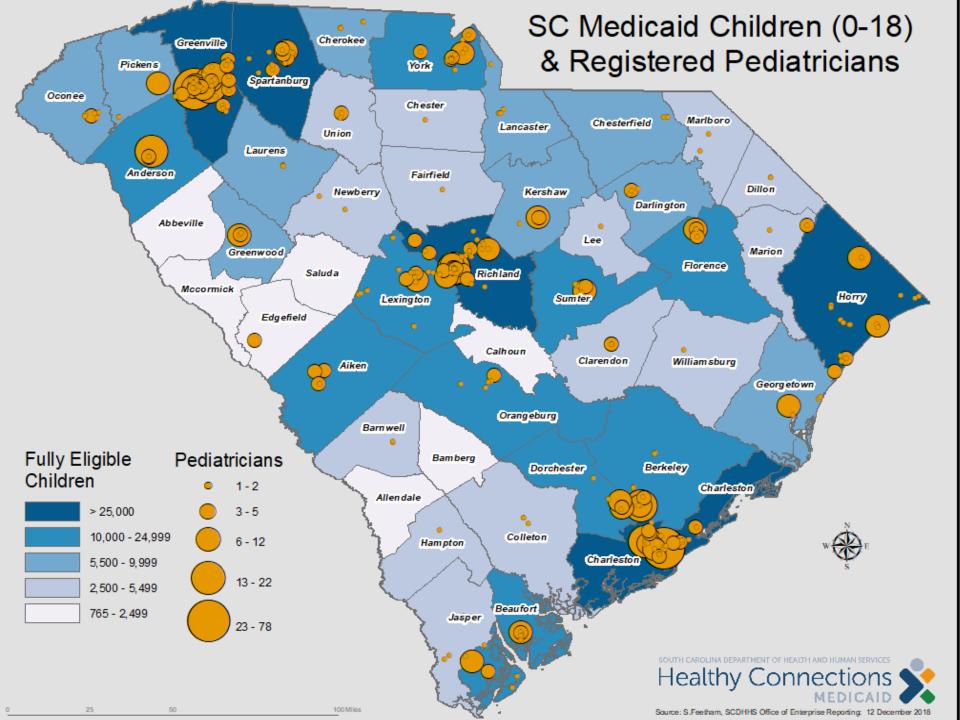
#### **PCMH** 1/2019

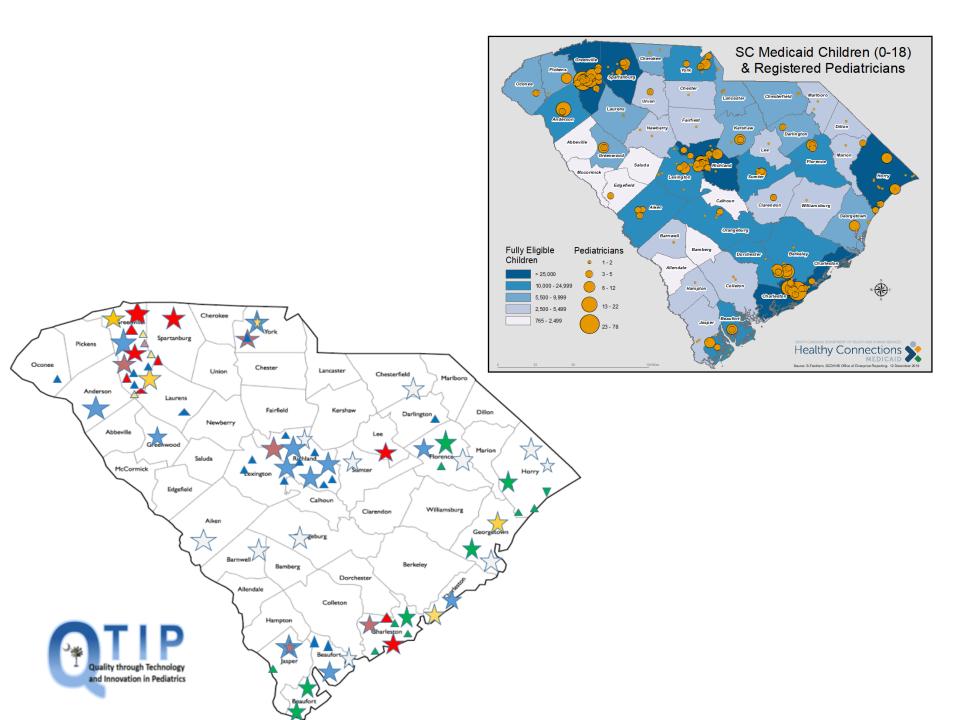
- 21 QTIP practices are NCQA PCMH recognized
- > 1 JCAHO

#### Mental Health 12/2018

- > 32/32 QTIP practices are providing screening
- > 18 mental health on-site







# What people are saying

"QTIP is a shining star"

~ DHHS Director Josh Baker

OTIP providers are the Vind of providers we kind of providers to see want our kids to see our kids to see want our kids to see our kids to see

SC is above 50<sup>th</sup>
percentile on 10/12
Medicaid Quality
metrics... especially the
Well Child Visits (15
months and adolescent)
rates

~ Bryan Amick, SCDHHS Deputy Director of Health Programs

# What data is saying

SC Vaccination Rates improving... (2017 rates) ≥ 1 HPV increased to 59.6% ≥ 1 Tdap: 89.4% (was 77.5%) (was 44.2%) ≥ 1 Men ACWY now 78.6% (was 68.9%) ~DHEC Report to the Adolescent Immunization Committee

SC QIDA data on Mental Health: 20/20 rule

QTIP matches "20/20 rule" where 20% have a MH need.

EXCEED in the # of teens referred for services. SC QTIP practices are at the 20/80.

~ SC QIDA data





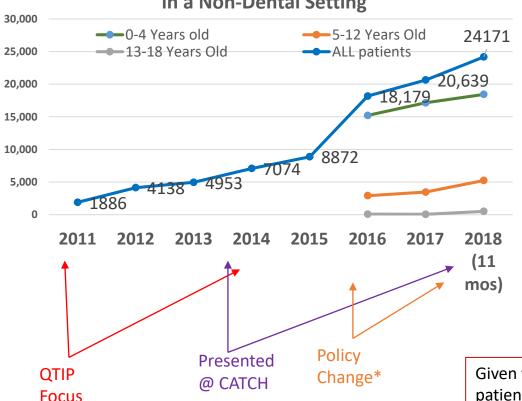
Show and Tell #bulletinboards #sharing



**Grand Strand** 

#### Fluoride Varnish





Applications Per Patient - ratio					
	2016	2017	2018		
0-4 years	1.25	1.21	1.20		
5 to 12 years	1.08	1.06	1.04		

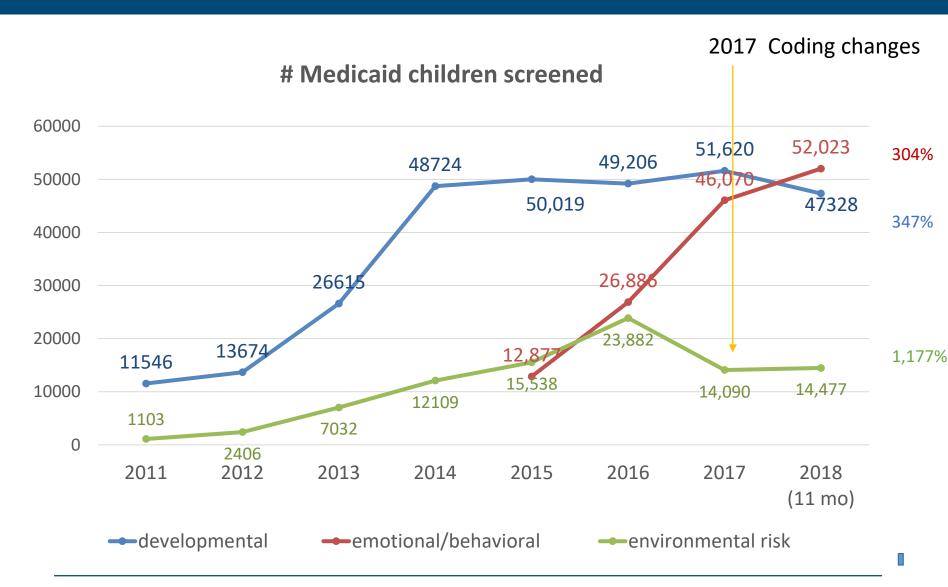
- 2016 Policy change to include fluoride varnish at well AND sick visits, from 0-12 years of age.
- 2018 Policy change to allow up to 4 applications a year in a non-dental setting.

Given the policy changes, the ratio of application to patients should be going up, not down.

Based on Medicaid administrative claims

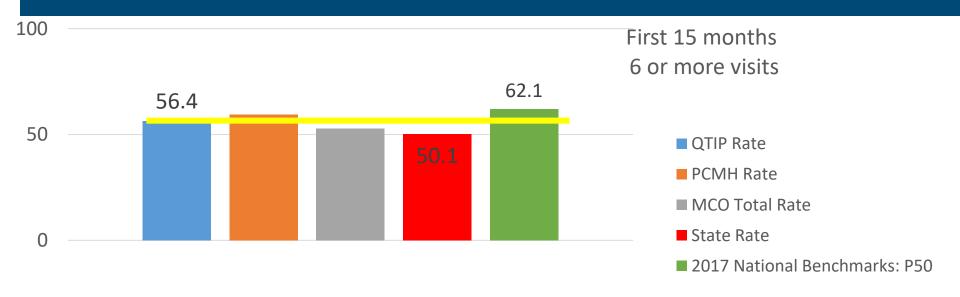


# Screenings





# HEDIS – Administrative Claims Data - 2017 Well Child Visits

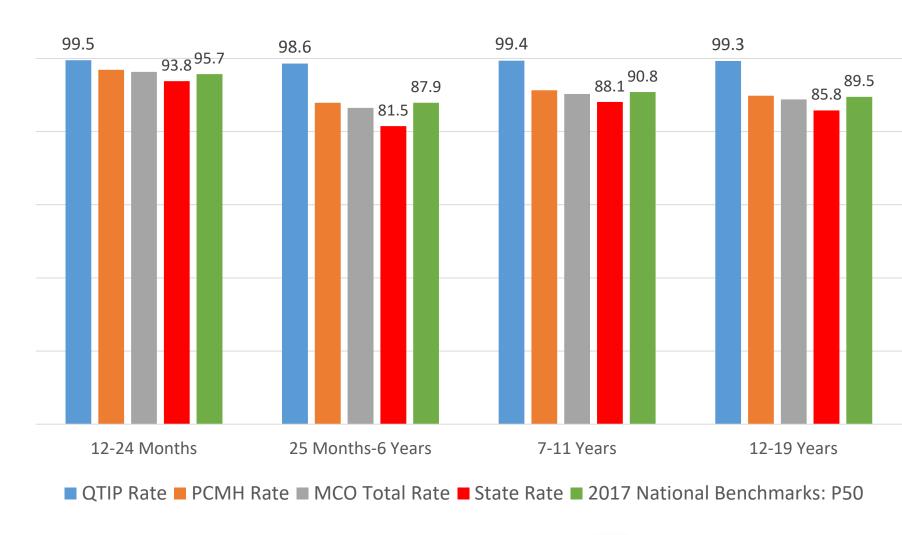




Life (W34)

# **HEDIS – Administrative Claims Data - 2017**

Children & Adolescent's Access to Primary Care Practitioners (CAP)

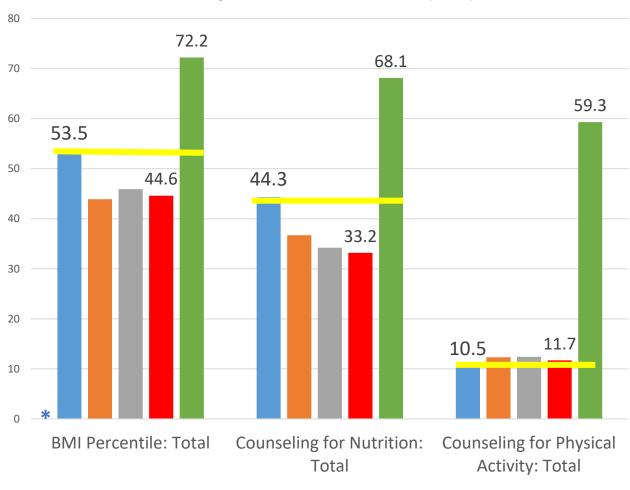




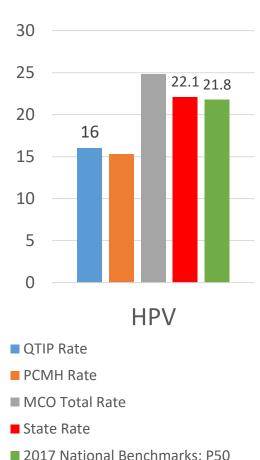


# **HEDIS – Administrative Claims Data - 2017**





# Immunizations for Adolescents - HPV

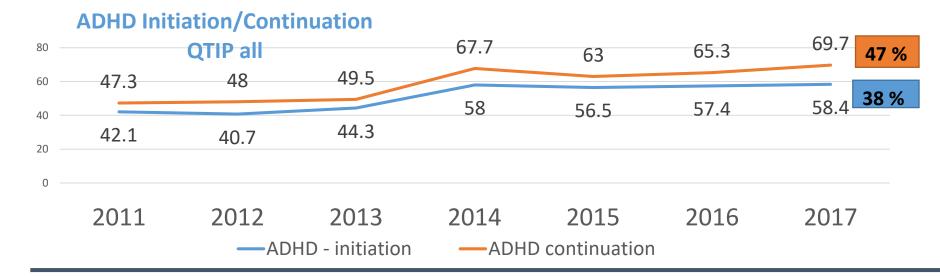




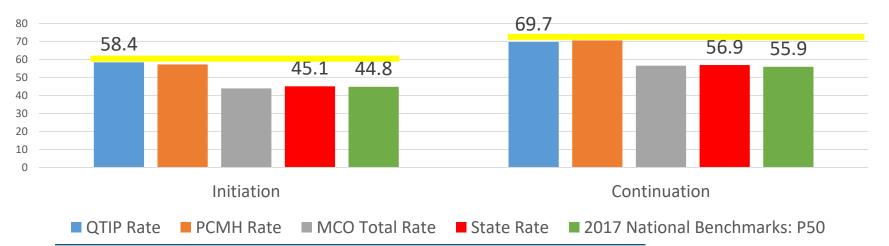


#### Children's Core – ADHD 2017

Administrative claims ONLY



#### Follow Up Care for Children Prescribed ADHD Medication







# **QTIP Award**

"Royal Sharing"
#qtipdataqueen
#lynnsharinghercrown



Mariah Cameron Charles Towne Pediatrics

# Past focal topics 2017

#### 2018

#### 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

#### 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



QTIP AWARD
Complete QIDA audits
at ALL offices!
#overachievers
#trending
# QI and Data

Coastal
Pediatrics
Associates

Parkside Pediatrics



# QIDA: 3 – 6

tobacco

#### CONSISTENTLY 85% +

- Well Child Visits
- Vaccination completion rate
- Bright Futures priority documentation
- Screening for tobacco use
- Oral Health anticipatory guidance

#### **IMPROVEMENTS NOTED**

<ul> <li>Developmental Screen (since 30 mos.)</li> </ul>	50% - 70%
<ul> <li>Social Connectedness</li> </ul>	53% - 83%
<ul> <li>Early Literacy Discussion</li> </ul>	70% - 90%
<ul> <li>Screen Exposure Discussion</li> </ul>	61% - 85%
<ul> <li>Social Determinants of Health</li> </ul>	53% - 75%
Screening	
<ul> <li>Complex Needs Assessment</li> </ul>	60% - 88%
<ul> <li>Families given advice to quit</li> </ul>	45% - 77%

#### **ROOM FOR CONTINUED IMPROVEMENT**

- Fluoride varnish (Hovering at 50%)
- Care plans for complex needs





# **QIDA: TEENS**

CONSISTENTLY 85% +	IMPROVEMENTS NOTED - TEENS	
<ul> <li>Well visits (almost)</li> <li>Up to date on vaccines</li> <li>Tobacco exposure screening</li> </ul>	<ul> <li>Completed HPV series</li> <li>Weigh counseling</li> <li>Families given advice to quit</li> <li>Families given cessation strategies</li> <li>Teens given a behavioral health screen</li> <li>Behavioral Health Planning</li> </ul>	64%- 80% 60% - 97% 25% - 100% 8% - 100% 50%-78%

#### **ROOM FOR CONTINUED IMPROVEMENT**

- Medical record continuity
- HPV completion





# **QIDA: ASTHMA**

CONSISTENTLY 85% +	IMPROVEMENTS NOTED – ASTHMA	
<ul> <li>Patients on a controller</li> </ul>	<ul> <li>Patients with asthma action plans</li> </ul>	47%- 73%
<ul> <li>Tobacco exposure</li> </ul>	• Flu shots	38% - 75%
screening	<ul> <li>Families given advice to quit tobacco</li> </ul>	10% -100%
	<ul> <li>Families given cessation strategies</li> </ul>	10% - 85%
	<ul> <li>Up to date on well visits</li> </ul>	70% - 90%
	<ul> <li>Weight counseling</li> </ul>	58% - 87%

#### ROOM FOR CONTINUED IMPROVEMENT

- ER visits for asthma: first half of the year trended down, now trending back up
- Scheduled asthma visits: stagnate around 70%
- Functional status check: stagnant around 60%



# What people are saying

"The QTIP program has longstanding success linking children and adolescents [with behavioral health] in pediatric offices"

SC Statewide Behavioral Health
Coalition meeting

"QTIP keeps me from getting burned out... I also see the potential for impact."

~ D. Clark, MD

QTIP makes you measure, helps you collaborate ... ~ P. Mubarak, MD



# **Overview**





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# 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
- ADHD

#### **Data collection**

- QIDA
- QI and PDSA documentation instruments



# 2019 QIDA – Future

# Breastfeeding

- 1 month olds
   February July
- 6 month olds
   August December
- 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 5-18**

- Follow-up visit performed 30 days
- Standardized screen
- Identify co-morbidities, teacher
- Social Determinates of Health
- Well child visit in past
- BMI
- HPV

HEDIS Specs: (6-12 year olds) The percentage of children newly prescribed (ADHD) medication who had at least three follow-up care visits within a 10-month period, one of which was within 30 days of when the first ADHD medication was dispensed.



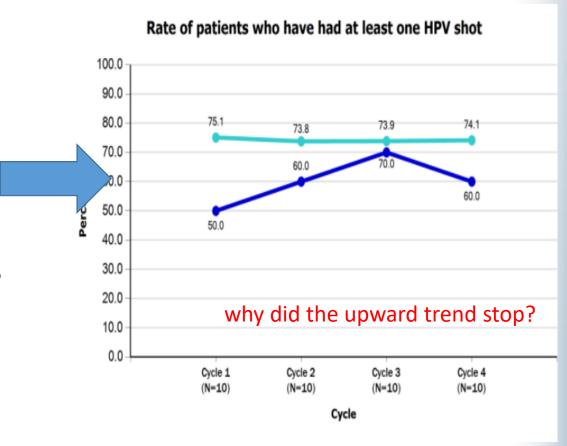
# **QIDA** - Remember

Standardized data

 Freedom to select what to work on

 Develop run charts, examine data and develop quality projects

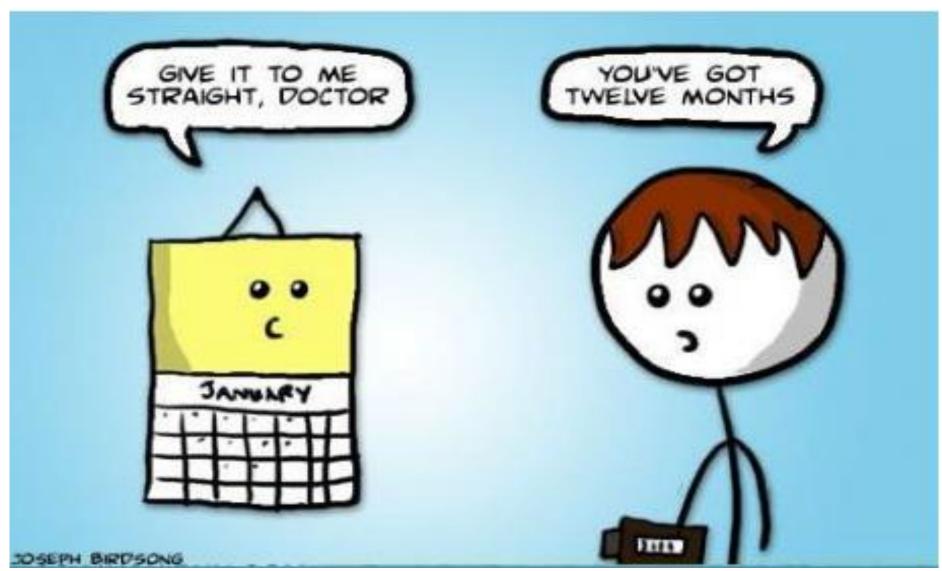
 "Real time" data pulled by you (10 charts/topic)



QIDA and HEDIS data differ...

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.

# You don't have to do it right now....





# **News ... Future Projects**





Making RO&R more available

- Expanding criteria for QTIP practices eligibility
- Tutorials/training
- Expansion of topics (math)
- Wants QTIP to help them scale



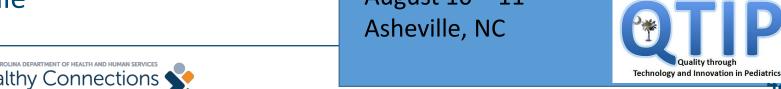


DSS working to develop an intensive plan to insure foster children's health care needs get addressed.

Initial discussions to expand Healthy Steps program

#### **SAVE THE DATE:**

Next Learning Collaborative August 10 – 11





What is available for you?

# **QTIP** blog

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

QTIP Website https://msp.scdhhs.gov/qtip/

**ABP MOC Part 4 Credits** 

**Monthly Calls** 

**Site visits** 

# **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





QTIP = Quality

"The future depends on what we do in the present."

~Mahatma Gandhi

Quality is never an accident. It is always the result of intelligent effort.

~ John Ruskin

QTIP Project Director: **Lynn Martin, LMSW 803-898-0093** martinly@scdhhs.gov

Mental Health Coordinator: **Kristine Hobbs, LMSW 803-898-2719** <a href="mailto:hobbs@scdhhs.gov">hobbs@scdhhs.gov</a>

Technical Support:
Liz Parham
803-898-3727
Parham@scdhhs.gov



Medical Director:
Francis Rushton, MD
frushton@aap.net

Quality Improvement
Coordinator:
Laura Brandon, MHP
803-898-2128
laura.brandon@scdhhs.gov

