What Would QTIP’s Medicaid Data Say?

What Would QTIP’s Medical Director Say?

Lynn Martin, LMSW
QTIP Project Director
SCDHHS

August 10, 2019
Overview

• Review
  ➢ SCDHHS News
  ➢ National Studies/Publications

• Data
  ➢ HEDIS Administrative Results
  ➢ QIDA

• Future Plans
**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

<table>
<thead>
<tr>
<th>*</th>
<th>New Patient</th>
<th>Established Patient</th>
</tr>
</thead>
<tbody>
<tr>
<td>Well-child visit</td>
<td>99381 – 99385</td>
<td>99391 – 99395</td>
</tr>
<tr>
<td>Sick-child visits with modifier 25</td>
<td>99201 – 99205</td>
<td>99211 – 99215</td>
</tr>
<tr>
<td>Continuous Glucose Monitoring</td>
<td></td>
<td></td>
</tr>
<tr>
<td>---------------------------------------------------------------------------------------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Coverage limited to:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Beneficiaries with Type 1 Diabetes (no age limitations)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Insulin-dependent pregnant women (any type diabetes)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Prescribed by board-certified endocrinologist</td>
<td></td>
<td></td>
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<tr>
<td>• Implemented 7/1/2019</td>
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<table>
<thead>
<tr>
<th>Ocular Screening</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Policy drafted to cover photo eye screening for beneficiaries 12 months to 3 years-old</td>
</tr>
<tr>
<td>• In progress</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Behavioral Health Index</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Implemented as informational in 2018</td>
</tr>
<tr>
<td>• Recognized as incentive in 2019</td>
</tr>
<tr>
<td>Autism Spectrum Disorder (ASD)</td>
</tr>
<tr>
<td>-------------------------------</td>
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</tbody>
</table>
| • 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 | • 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
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).


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.
### Profile of QTIP in 2019

<table>
<thead>
<tr>
<th>QTIP practices = 30</th>
</tr>
</thead>
<tbody>
<tr>
<td>- 3 academic</td>
</tr>
<tr>
<td>- 15 private</td>
</tr>
<tr>
<td>- 7 associated with a hospital</td>
</tr>
<tr>
<td>- 5 FQHC</td>
</tr>
</tbody>
</table>

**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
• Review
  ➢ DHHS news
  ➢ National Studies/Publications

• Data
  ➢ Oral Health and MH screening
  ➢ HEDIS Administrative Results
  ➢ QIDA

• Future Plans
<table>
<thead>
<tr>
<th>6-9 months</th>
<th>24 months</th>
<th>3-6 years</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Well child visits</td>
<td>- Well child visit</td>
<td>- Well child visits</td>
</tr>
<tr>
<td>- Vaccinations</td>
<td>- Risk Assessments</td>
<td>- Positive parenting</td>
</tr>
<tr>
<td>- Maternal depression</td>
<td>- Screening Special Health Care Needs</td>
<td>- Vaccines</td>
</tr>
<tr>
<td>- Socio environmental screening</td>
<td>- Family Strengths</td>
<td>- Social-environmental screening</td>
</tr>
<tr>
<td>- Family strengths</td>
<td>- Family Concerns</td>
<td>- BMI</td>
</tr>
<tr>
<td></td>
<td>- Oral Health</td>
<td>- Tobacco Cessation</td>
</tr>
<tr>
<td></td>
<td>- Social Determinates of Health</td>
<td>- Oral Health</td>
</tr>
<tr>
<td></td>
<td>- BMI</td>
<td></td>
</tr>
<tr>
<td><strong>Adolescents</strong></td>
<td><strong>Asthma</strong></td>
<td><strong>SHCN</strong></td>
</tr>
<tr>
<td>- Well child visits</td>
<td>- General Asthma Care</td>
<td>- Assessments/screens</td>
</tr>
<tr>
<td>- Vaccinations</td>
<td>- Well child visits</td>
<td>- Work with subspecialist</td>
</tr>
<tr>
<td>- Mental Health assessments &amp; follow-up</td>
<td>- BMI</td>
<td>- Care plans</td>
</tr>
<tr>
<td>- Assessment for special health care needs (SHCN)</td>
<td>- BMI</td>
<td></td>
</tr>
<tr>
<td>- Family Strengths</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- BMI</td>
<td></td>
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</tbody>
</table>
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
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

<table>
<thead>
<tr>
<th>Age Group</th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>ages 0-4</td>
<td>1.25</td>
<td>1.21</td>
<td>1.24</td>
</tr>
<tr>
<td>ages 5-12</td>
<td>1.08</td>
<td>1.06</td>
<td>1.04</td>
</tr>
<tr>
<td>ages 13-18</td>
<td>1.10</td>
<td>1.00</td>
<td>1.03</td>
</tr>
</tbody>
</table>
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*

# Medicaid Children ages 0 -18 per screening

- **2013**: Introduction of health risk screening and mental health screening
- **2015**: Introduction of emotional/behavioral screening

Introduction of developmental screening to QTIP practices

- **2011**: 1103
- **2015**: 50,019
- **2016**: 49,206
- **2017**: 51,620
- **2018**: 53,361

Jan 1, 2017, CMS closed 99420 and replaced with: 96160 and 96161

* Administrative claims only
WOW - LOOK AT YOUR SCREENING RESULTS
Kristine’s Mental Health Survey

2019 All QTIP Respondents - Routine Screening Protocols, n = 30

- ANY DEV SCREENING (NOT MCHAT): 80%
- MCHAT/AUTISM: 100%
- POSTPARTUM DEPRESSON: 97%
- HEALTH RISK AND POSTPARTUM DEPRESSION: 57%
- CRAFT: 17%
- ANY BEHAVIORAL HEALTH SCREEN: 93%
- ROUTINE TRAUMA SCREEN: 10%
**QTIP HEDIS Information**

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

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

  **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
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:** 50\(^{th}\) - 74\(^{th}\) percentile

Non-QTIP: < 10\(^{th}\) percentile

SC: < 10\(^{th}\) 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

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

Initiation 39% increase
Continuation: 49.5% increase
Administrative Claims Data - 2018

Developmental Screenings

- Screened by 12 months:
  - QTIP: 59
  - NON-QTIP: 31.7
  - STATE: 19.7

- Screened by 24 months:
  - QTIP: 68.8
  - NON-QTIP: 37.3
  - STATE: 26

- Screened by 36 months:
  - QTIP: 34
  - NON-QTIP: 8.6

Chlamydia 16 - 20 year olds

- QTIP: 58.2
- Non QTIP: 51.6
- Overall state: 52.7
- National 50%

HPV 2 doses 9 – 13 yr.

- QTIP: 15.9
- Non QTIP: 9.3
- Overall: 10.7
- National 50%: 33.8

* Considered an unstable measure
Summary

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)

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

Why did the upward trend stop?
<table>
<thead>
<tr>
<th>QIDA</th>
<th>QTIP HEDIS</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Gathered and entered by YOU using your medical records</td>
<td>• Provided by IFS and based on Medicaid administrative claims</td>
</tr>
<tr>
<td>• Real-time data – current patients</td>
<td>• Based on 2018 data and “assignment”</td>
</tr>
<tr>
<td>• Medicaid and private pay... ALL patients</td>
<td>• Medicaid patients only</td>
</tr>
<tr>
<td>• You determine the focus and what you gather</td>
<td>• Based on HEDIS specifications</td>
</tr>
</tbody>
</table>
QIDA: Breastfeeding – 1 month
(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%)
## QIDA: ADHD
(based on June entries)

**Consistently 85% +**
- Well visits up-to date
- Weight counseling
- Use of standardized instrument
- 3 with co-morbidities: identified, documented and discussed

**Improvements Noted**
- Social determinates of health screening
- Follow-up in 30 days
- Teacher screen completed
- Co-morbidities identified and documented

<table>
<thead>
<tr>
<th>Range</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>45%-100%</td>
<td>57 aver</td>
</tr>
<tr>
<td>71% – 94%</td>
<td>83%-100%</td>
</tr>
<tr>
<td>74% - 100%</td>
<td>91%-100%</td>
</tr>
</tbody>
</table>

**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

• 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.
Overview

• 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

Mental Health
• QTIP staff

Areas of Focus/Measures
• Breastfeeding – 6 months
• ADHD

Quality Improvement
• QTIP staff
• Workshops/calls

Data Collection
• QIDA
• QI and PDSA documentation instruments
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

• QIDA breastfeeding 6 months (enter for July)

• Hire new QI staff

• Back to Basics with QI and PDSAs

• New QTIP Medical Director

Being Considered For 2020

• 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

“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.
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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Quality Improvement Coordinator: