AHCCCS Targeted Investments Program

Adult Quality Improvement Collaborative

Dr. Sara Salek

Dr. William Riley

TIP Year 5: Session #9

August 10, 2021









Disclosures

Dr. Sara Salek is Chief Medical Officer at AHCCCS



Agenda

TIME	TOPIC	PRESENTER
11:30 AM – 11:45 AM	Introduction & Updates	Kailey Love
11:45 AM – 11:55 AM	Diabetes Screening Overview	Dr. Sara Salek
11:55 AM – 12:40 PM	 Diabetes Screening Provider Best Practices Discussion Questions: Please briefly describe your organization. Please describe briefly your current process for the diabetes screening measure. Please identify the three major reasons why the diabetes screening measure is not completed. Please identify the most important lesson(s) from your counterpart presentation. 	 Facilitator: Dr. William Riley Copa Health: Jacqueline Webster, Michael Franczak, Aaron Scrignar Intermountain Centers: Kyle Lininger, Sarah Germain
12:40 PM to 12:55 PM	Discussion	All
12:55 PM to 1:00 PM	Next Steps	Kailey

Update: TI Year 4 Milestone Results

- Final TI Year 4 performance distributed via email in July 2021
- AHCCCS and ASU applied a "COVID adjustment" to the original Year 4 targets
 - Blinded process
 - Details sent via email
- Adjusted targets shown on dashboard for TI Year 4

Learning Objectives

- 1. Identify failure modes for diabetes screening
- 2. Describe different approaches to accomplishing diabetes screening
- 3. Discuss alternative strategies for how to overcome barriers to the diabetes screening measure



Diabetes Screening Overview

- Atypical antipsychotics are commonly and increasingly prescribed in the United States as first line treatment for psychotic disorders, bipolar disorder and nonpsychotic conditions
- Cardiometabolic effects of atypical antipsychotics have been associated with several side effects:
 - Weight gain and obesity
 - Hypertension, lipid, and glucose abnormalities
 - Long-term impact include adult obesity, metabolic syndrome, cardiovascular morbidity

American Diabetes Association/ American Psychiatric Association Consensus Guidelines

Table 1 - Metabolic monitoring parameters based on American Diabetes Association/ American Psychiatric Association consensus guidelines⁴

	Baseline	Week 4	Week 8	Week 12	Every 3 months thereafter	Annually
Medical history ^a	X			X		Х
Weight (BMI)	X	X	Х	X	X	X
Waist circumference	X			X		X
Blood pressure	X			х		X
Fasting glucose/hemoglobin A _{sc}	X			X		X
Fasting lipids	X			X		Χ

Personal and family history of obesity, diabetes, hypertension, and cardiovascular disease.

Metabolic Monitoring of Antipsychotic Medications: What Psychiatrists Need to Know

TABLE 1. After baseline metabolic parameters are obtained, suggested frequency of metabolic monitoring for patients who take antipsychotic medications^a

Parameter	Adult patients	Pediatric patients ^b
Personal and family history ^c	Annually	Annually
Lifestyle behaviors ^d	N/A	Each visit
Height, weight, BMI	Every 4 weeks for the first 12 weeks, then every 3 months	Each visit
Waist circumference	Annually	N/A
Blood pressure, pulse; fasting blood glucose; lipids	12 weeks, then annually	3 months, then every 6 months
Electrocardiography	Not specified	N/A

^a May be conducted more frequently, as indicated.

N/A, not available; the guidelines do not specifically address these items.

^b Other parameters, including thyroid-stimulating hormone, prolactin, and sexual/reproductive dysfunction are also recommended in pediatric patients.

[°] For example, obesity, diabetes, dyslipidemia, hypertension, coronary heart disease.

^d For example, exercise, diet, smoking.



Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD-AD)

- CMS Adult Core Set
 - -CMS Core Specifications
- NCQA National Results (Medicaid HMO)

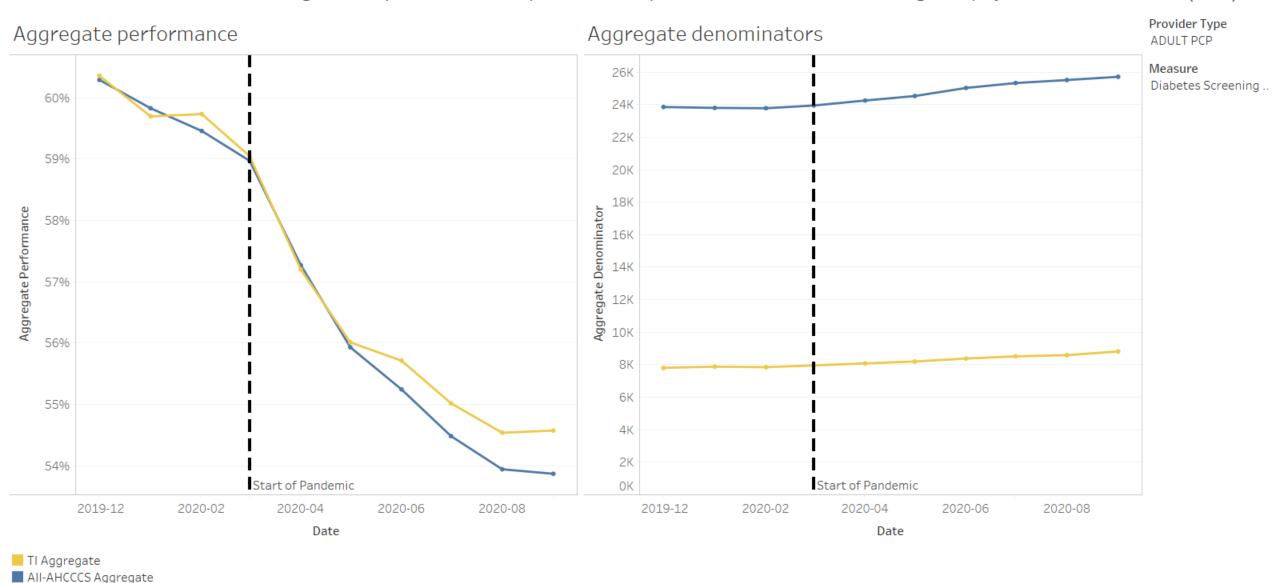
Core Set Specifications: SSD-AD

- Percentage of beneficiaries ages 18 to 64 with schizophrenia, schizoaffective disorder, or bipolar disorder, who were dispensed an antipsychotic medication and had a diabetes screening test during the measurement year
- Diabetes screening test is defined as a glucose or an HbA1c test

Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD-AD): NCQA Mean

MEASURE YEAR	MEDICAID HMO
2019	81.7
2018	80.6
2017	80.8

ADULT PCP - Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD)







Copa Health

Dr. Jacqueline Webster
Aaron Scrignar
Dr. Michael Franczak

Copa Health:
Population Health and IT



Copa Health Services

I. Integrated Health Solutions

- I. Serves over 9,000 members with SMI diagnosis
- II. 5 integrated care clinics and 1 nonintegrated clinic
- III. Care teams: BHMP's, PCPs, nurses, medical assistants, partnerships with pharmacies
- IV. Offerings: Case management, health and wellness, primary care, psychiatry, Applied Behavioral Analysis, peer support/family support





Collaboration Between IT and Clinical Services

II. Population Health and IT Collaboration

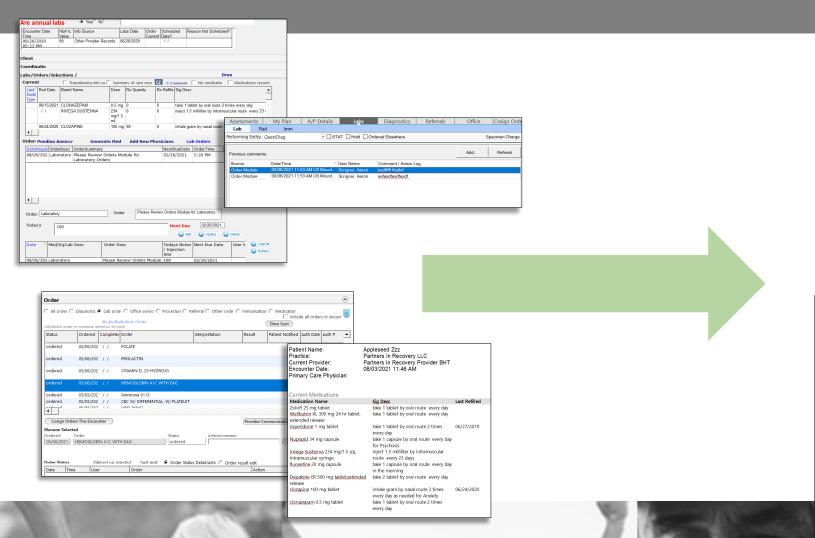
- I. Enhance member engagement, improve member outcomes, and lower healthcare costs
- II. Support evidence-based practice and data driven decision making
- III. Utilization of AHCCCS and Copa data to drive clinical initiatives
 - I. 7 and 30 day follow up after hospitalization for mental illness
 - II. Diabetes screening for individuals using antipsychotic medications.

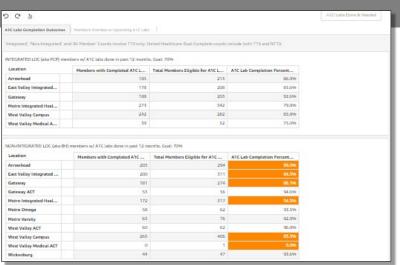


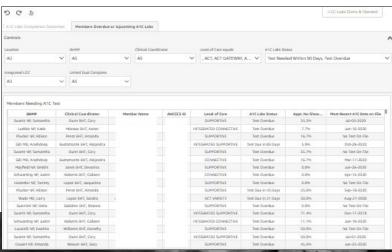




Making Data Actionable









Data Workflow

Data Sources

Labs Ordered by Copa Health Providers

3rd-Party Lab Results (HIE, Hospital Records, Shared Charts)

EHR Suite

Copa Health-originated labs are native to EHR

3rd-party results are documented by staff into EHR

Data exported daily into Analytics App

Analytics App

Calculations:

- Cohort members
- Last lab date
- Next lab due date
- Days till lab is due
- Appt. no-show rates
- Total completion rates by Clinic

Dashboard

Lab completion stats by clinic and member category (PCP, BH)

List of members with upcoming and due labs, with last lab date, days till lab due, and no-show rate



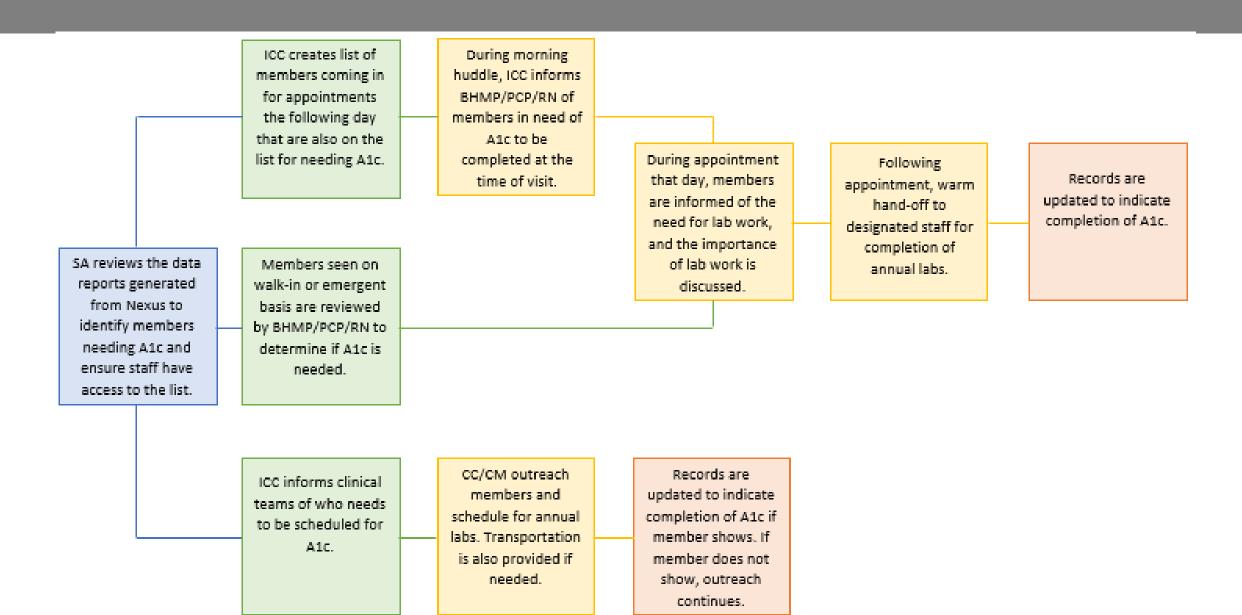








Clinical Workflow





A1c Testing Issues

- I. Factors leading to low A1c testing rates
 - I. System Issues
 - I. Staff Notifications
 - **II.** Gamblers fallacy
 - III. Staff Skill Set
 - **IV.** Off Site Testing
 - II. Member Issues
 - I. No Show Rate
 - **II.** Blood Test Refusals
 - **III. Health Literacy**







Metabolic

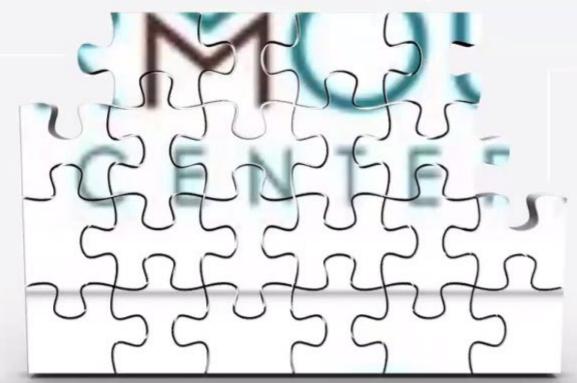


Monitoring

















Today's Agenda

Describe

Briefly describe your organization.

And

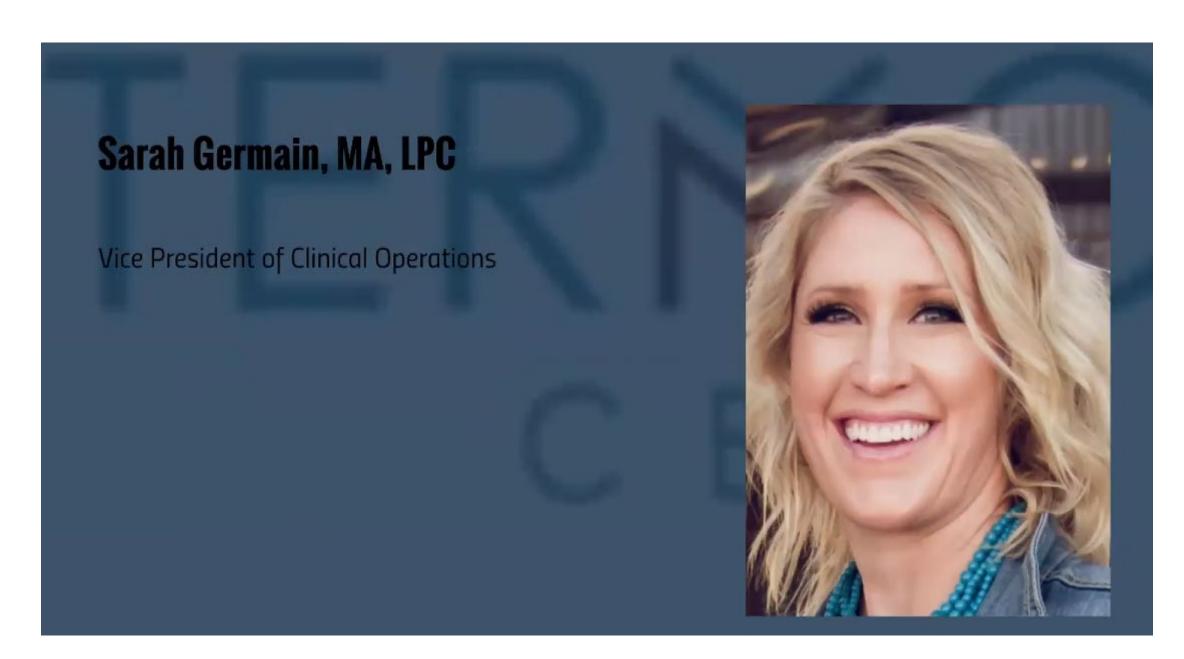
Describe your current process for the metabolic monitoring measure.

Identify

Identify the three major reasons why the metabolic monitoring measure is not completed.

Lessons

Identify the most important lesson(s) from your counterpart's presentation.



Kyle Lininger, MPA, LBA

Vice President of Clinical Integration



A Story of Coming Together

Intermountain Centers for Human Development
Community Partners Integrated Health
Pinal Hispanic Council
Behavior Consultation Services



A Little More About Who We Are

- One of AZ's largest NP
- We serve 16,000 members annually
- Our HQ is in Tucson but we have locations in most counties
- · Most of our services are provided in rural regions
- We are primarily AHCCCS funded but we do have commercial and Medicare contracts
- For today we will focus on TI which impact roughly:
 - 4 Integrated Sites
 - 15 Outpatient BH Facilities
- We have spent the past three years coming together. It was only the past August that we began to share the same EHR



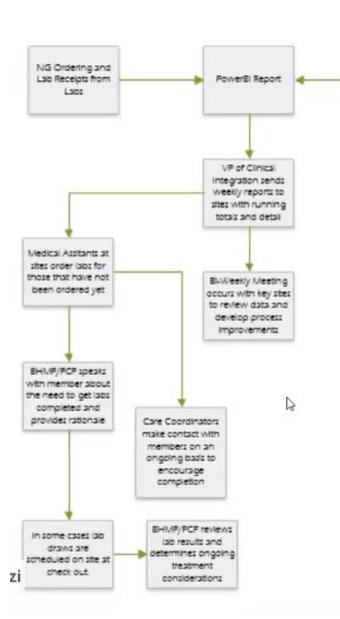
Our Core Services

- 1 Outpatient Behavioral Health
- 2 Integrated Primary Care
- 3 Residential Services
- 4 Foster Care
- 5 Housing
- 6 ABA Services
- 7 Education Services
- 8 MAT Services

Intermountain Centers "IS" Process for Metabolic Monitoring

HIE Lab

Results



TI MEASURES

- 1) The first initiative involves all members ages 18 and up. The performance measure requires an annual Diabetes Screening for all qualifying members 18 and up that meet the criteria below:
- A diagnosis of Schizophrenia, Schizoaffective disorder, or Bipolar Disorder, AND
- Prescribed any antipsychotic medication
- 2) The second initiative involves all members 18 and under. This performance measure requires an annual metabolic monitoring for all qualifying members ages 18 and under that meet the criterial below:
- Prescribed any antipsychotic medication.

Referenced TI Codes for Labs

ADULTS

Glucose Test PT: 80047, 80048, 80050, 80053, 80069, 82947, 82950, 82951 <u>HbA1C Test CPT: 83036, 83037, 3044F-3046F</u>

PEDS

Glucose Test CPT: 80047, 80048, 80050, 80053, 80069, 82947, 82950, 82951

HbA1C Test CPT: 83036, 83037, 3044F-3046F, 3051-52F

LDL -C test CPT: 80061, 83700, 83701, 83704, 83721, 3048F-3050F

Cholesterol tests other than LDL CPT: 82465, 83718, 84478

Three Reason We Haven't Succeeded

On Site Lab Draws



Social Determinants



Motivation/Education

#1: Lab Draws

	ADULTS - # No Labs Completed	Total Eligible	Percent Completed	
Yuma	89	202	56%	
Phoenix	110	554	80%	
Park	64	213	70%	
IHC Broadway	3	5	40%	
TOTALS	266	974	73%	
SITE	KIDS - # No Labs Completed	Total Eligible	Percent Completed	
Yuma	32	56	43%	
IHC Broadway	116	164	29%	
TOTALS	148	220	33%	

PHX and Park

Onsite Lab Draw Capacity

Action Item: New policy defining who can do lab draws with training and supervision guidance

#2: SDOH



Data: Anecdotal

Action Item: Considering engaging mobile lab orgs and/ or having staff make home visits for lab draws

#3: Motivation

Lab Ordering Project February to June

- 60% reduction in lab orders needed
- N=1727

Action Item:

- -Automate ordering for individuals that are taking anti-psychotics
- -Formally educate docs
- -Provide informational handouts to be shared with members

Lessons Learned from Counterpart's Presentation

Intervention Strategies worth Considering

- 2 Week Refill
- Mobile draws both internally and externally



Discussion

Any questions?



Next Steps

- Post-Event Survey: 2 Parts
 - General Feedback
 - Continuing Education Evaluation
- Continuing Education for 2021 will be awarded post all 2021 QIC sessions (December 2021)
- Questions or concerns?
 - Please contact ASU QIC team at <u>TIPQIC@asu.edu</u> if questions or concerns

Thank you!

TIPQIC@asu.edu







