

Health Center Program Quality & Data Updates

NACHC Policy and Issues Forum

March 29, 2019

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Bureau of Primary Health Care (BPHC)

Health Resources and Services Administration (HRSA)





Accelerating Value Based Care Delivery

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- 1 Value Based Care Delivery in Health Centers
- 2 Updates
 - FTCA: Patient Safety & Risk Management
 - PCMH & Care Integration
 - HRSA Clinical Priorities
 - UDS Reporting & Modernization
- **3** Building a Learning Health Center System
 - Strategic T/TA
 - Informing Decisions with Data and Research
 - Resources





Advancing Health Center Value

- Compliance with Health Center Program Requirements
- Access to Comprehensive, Integrated, Patient-Centered Care
- Improve Health Outcomes
- Operational Excellence, Innovation and Leadership
- Active Participation in a Learning Health Center System





HRSA Strategic Goals







FTCA Program Updates





Patient Safety Awareness Week 2019



Improving Diagnosis in Primary Care

Webcast available: http://bit.ly/2U0tZfq





FTCA Policy Updates

FTCA Health Center Policy Manual Update

- Coverage for Volunteer Health Professionals (VHPs)
- Notice of proposed update will be published soon including an opportunity for public comments
- Service provided "through offsite programs and events carried out by the entity"

CY 2020 FTCA Health Center Deeming

- Health Center Deeming PAL (https://bphc.hrsa.gov/ftca/healthcenters/healthcenterpolicies.html)
- VHP Deeming PAL (coming soon)
- EHB Deeming Application Module available May 17th
- CY2020 Deeming application deadline July 1st





Health Center FTCA Deeming Updates



1,141 health centers deemed in CY 2019



221 Volunteer Health Professionals deemed

Effective strategies to enhance patient safety and manage clinical risks:

- Focus on creating closed looped procedures for referral tracking, hospitalization tracking, and diagnostic tracking
- Create a Risk Management training plan for all clinical staff
- Complete Quarterly Risk Assessments
- Involve Health Center Governing Board in risk management discussions, including sharing risk management data, trends analysis, and goals

Upcoming Training and Technical Assistance

- Webcasts to introduce the CY 2020 Health Center Deeming PAL and application process
- FTCA University in collaboration with the following PCAs: NJ, LA, OH, PR, MT





OSVs: FTCA Assessment & Monitoring Strategy

OSV/FTCA Process

Operational Site Visits



Corrective Action Plan

Documentation to Support FTCA Compliance

CY2018 OSV/FTCA Results



94% of deemed health centers demonstrated compliance on CY18 Operational Site Visits



37 health centers received FTCA
Corrective Action Plans to resolve
non-compliance findings in the
areas of risk management or
claims management



Health centers resolved findings within 35 days





FTCA Site Visit Protocol

NEW resource for FTCA deemed health centers, includes:

- FTCA site visit process overview
- Document checklist
- Site visit agenda
- Sample report

Federal Tort
Claims Act (FTCA)
Health Center Program
Site Visit Protocol





Clinical Risk Management Resources

- 13,973 individuals from 1,569 organizations were registered for the Clinical Risk Management Program
- 7,415 individuals attended webinars and Virtual Conference in 2018
- New resources/features are added every year:

assessment tools.



Please share ideas for new patient safety/risk management resources that would be helpful



FY 2018

Clinical Risk Management Resources

- 834 registered for Electronic Fetal Monitoring Course includes 18 case studies
- 2,404 individuals registered for Ambulatory Care Risk Management
 Certificate course New! Levels 3 and 4 are now available
- Ongoing Success National Patient Safety Speaker Series
- New! Sexual Harassment and Misconduct Training Series
- Coming soon! Risk Management Manual

For access contact: clinical rm program@ecri.org or (610) 825-6000 ext. 5200





Patient Centered, Comprehensive, Integrated Care



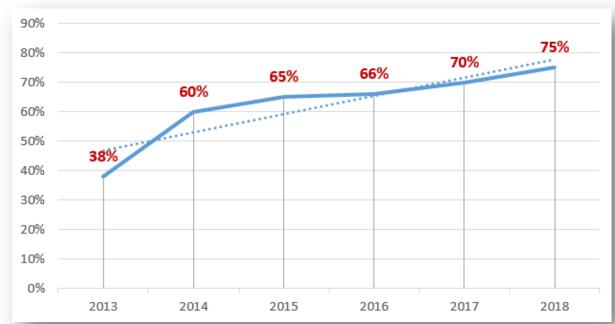


Patient-Centered Medical Home (PCMH)

Health Centers with PCMH Recognition

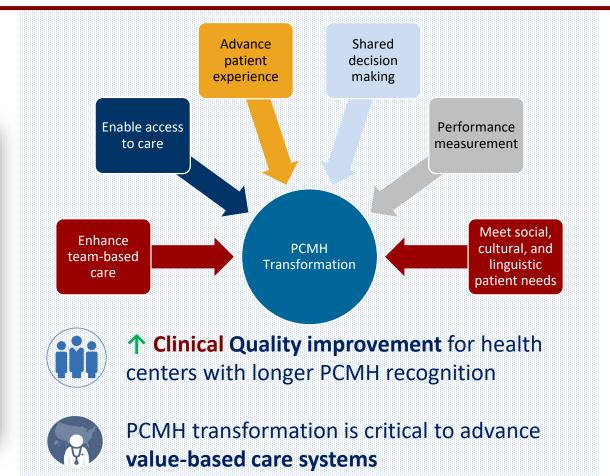


↑ #PCMH Health Centers from **38% in 2013** to **75%** in 2018



Source: HRSA Accreditation and Patient-Centered Medical Home

Report, 2013-2018





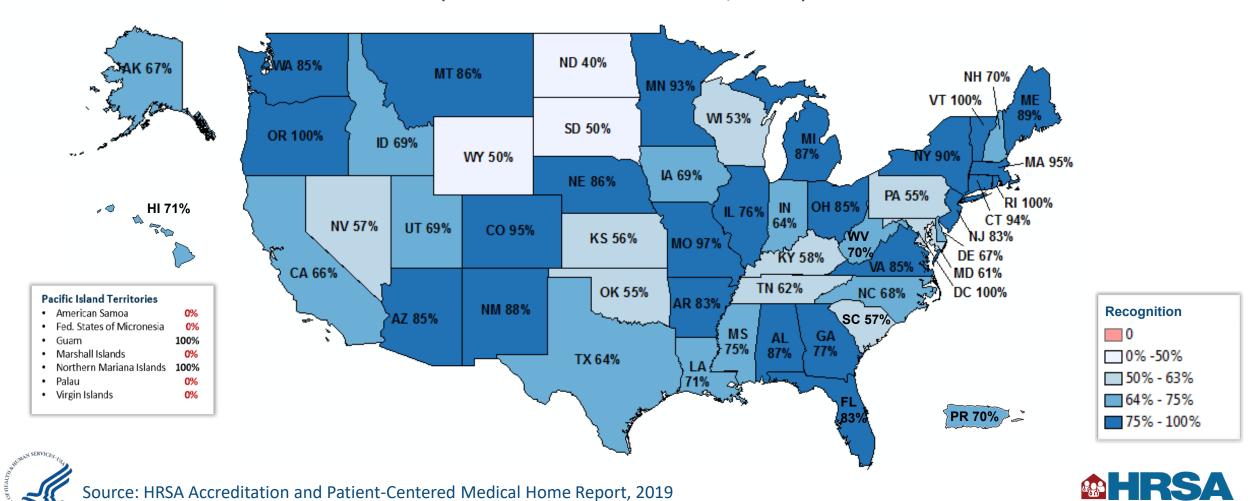
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Submit your **Notice of Intent (NOI)** in EHB to seek participation in the HRSA Accreditation and PCMH Initiative https://bphc.hrsa.gov/qualityimprovement/clinicalquality/accreditation-pcmh/index.html



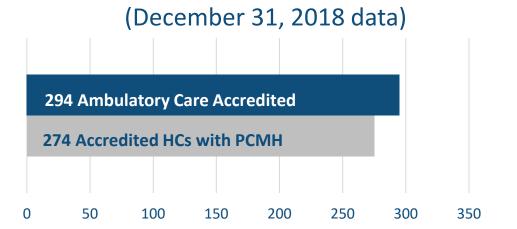
National PCMH Recognition in Health Centers

(75% as of December 31, 2018)



Ambulatory Care Accreditation

Number of National Ambulatory Care Accreditation in Health Centers



HRSA contracts with nationally recognized accrediting organizations to provide technical assistance and training to health centers for their respective recognition processes.

Training and technical assistance (T/TA) for health centers include:

High-Level Disinfection and Sterilization BoosterPak

Infection Control and Patient Safety TA

<u>Teleconference Recordings</u>

Infection Prevention and Control Portal

General Infection Prevention and Control Toolkit

<u>Guide to Infection Prevention for Outpatient</u> <u>Settings</u>

<u>Infection Prevention & Control in Dental Settings</u>

Training and Technical Assistance Resources

Submit your **Notice of Intent (NOI)** in EHB to seek participation in the HRSA Accreditation and PCMH Initiative https://bphc.hrsa.gov/qualityimprovement/clinicalquality/accreditation-pcmh/index.html

Source: HRSA Accreditation and PCMH Report, 2018

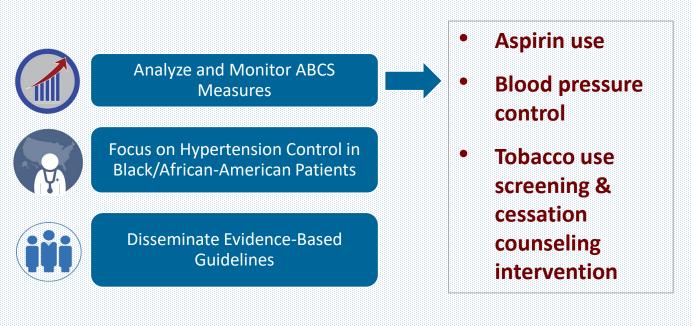


Million Hearts® 2022



In 2018, five HRSA health centers were recognized as Million Hearts[®] Hypertension Control Champions





2019 MH Hypertension Control Champion Applications Due April 1, 2019

Health Center Program

Cervical Cancer Screening



Served ~ 7 million female patients age 23-64

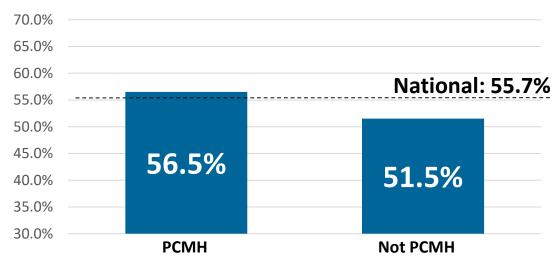


Screened 3.9 million female patients



55.7% patients screened nationally

Cervical Cancer Screening Rates by PCMH Recognition



State-wide Efforts

7 Primary Care Associations focused on cervical cancer screening QI efforts in their states

Cancer Prevention and Screening T/TA Resources

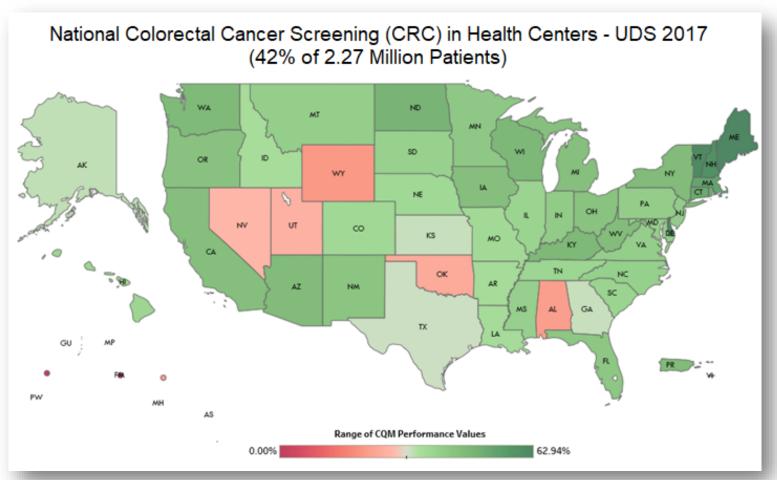
<u>January 2019 Data Speaker Series</u> featuring a health center and a Health Center Controlled Network (HCCN) on sharing successes, challenges, and recommendations to improve cervical cancer screening Rates

Educational Webinar highlighting promising practices from two Primary Care Associations (PCA) on quality improvement strategies to enhance cervical and colorectal cancer screening rates in health centers



Source: Uniform Data System, 2017

Colorectal Cancer (CRC) Screening: 80% in Every Community



22 Health Centers have reached 80%

30 PCAs focused on CRC Screening QI Efforts

National Partnership:

National Colorectal Cancer Roundtable (NCCRT), American Cancer Society, CDC

March CRC Awareness Month:

New! 80% in Every Community Campaign

Promising Practice TA Webinar





Mental Health Integration



In 2017, 66% of patients received depression screening and follow-up

† by 6%

Nearly 90% of Health Centers provided mental health services ↑ by 2%

Over 2 million mental health patients served

↑ by 15%

Mental health workforce of over 10,000 FTEs ↑ by **16%**



Improving Care

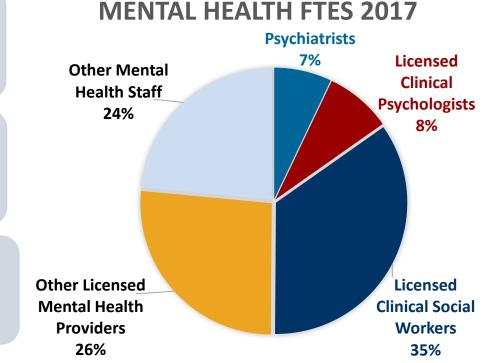
- Universal, evidence-based screening & follow-up
- Two-generation approaches & trauma-informed care
- Spotlight on pregnant/parenting women and families

Expanding Services

- Promising practice in recruitment and retention of providers
- Use of tele-health for direct services and support functions (e.g., coaching, consultation, supervision)

Resources

- Technical Assistance: https://bphc.hrsa.gov/quality
 https://bphc.hrsa.gov/quality
- HRSA's Health Workforce Connector: https://connector.hrsa.gov/





Substance Use Disorder Services



In 2017, there were over **1.2 million** Substance Use Disorder (SUD) visits

of patients receiving SUD services

↑ by 19% to 168,508 patients



IMPACT

22%

increase in SUD services staff to 1,426 FTEs

75%

increase to 2,973 DATA- waivered providers

65%

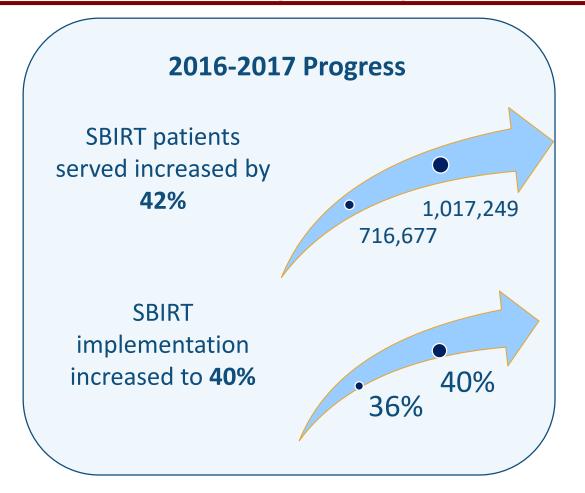
increase to 64,597 patients receiving MAT services

2019 Training/Technical Assistance (T/TA):

- Share promising practices on trauma-informed care, treating pregnant women, clinical workflow and practice transformation, community-based partnerships/systems coordination and evidence-based, integrated care models
- Disseminate resources on SUD/MAT treatment stigma, pain management, Health IT enhancements, and reimbursement
- Substance Use Warmline: The Clinician Consultation Center offers free, real-time clinician-to-clinician telephone consultation focusing on substance use disorder evaluation & management for primary care clinicians.



Screening, Brief Intervention, and Referral to Treatment (SBIRT)



SBIRT Key Components:

- Screening using standardized tools to assess risk level
- Brief Interventions to help patients understand their substance use and health impact
- Referral to Treatment

2019 Strategies to increase SBIRT implementation:

- Share resources on SBIRT screening tools, approach to referrals, and reimbursement
- Conduct webinars on:
 - ✓ SBIRT promising practices
 - ✓ Using Health Information Technology to Facilitate SBIRT Service Delivery in Health Centers
 - ✓ Opioid Use Disorder: The Role of Adverse Childhood Events and Motivational Interviewing *Coming soon!*



For more information on Behavioral Health Integration and SBIRT, please visit:

HRSA Health Center Program's Behavioral Health and Primary Care Integration Website.



Oral Health Integration



In 2017, over **266,000 children** 6-9 years of age at elevated caries risk had dental sealants placed



6.1 million dental patients were served



4,882 dentists (FTE) & 2,498 dental hygienists (FTE) worked at health centers

IMPACT

52%

increase in the number of dental patients served since 2010

8.3

percentage point increase in the number of children 6-9 years of age at elevated risk who received a dental sealant from 2015 to 2017

10%

increase in the dental workforce since last year

Training/Technical Assistance (T/TA)

- Oral Health and Primary Care Integration Webpage
 - Oral Health Integration Webinars: Cardiovascular, Diabetes, People Living with HIV
 - Infection Control and Prevention in the Dental Setting Webinar (in partnership with CDC)
- National Network for Oral Health Access (NNOHA)
 - Three Learning Collaboratives focused on:
 - 1. Dashboard of oral health metrics (37 health centers)
 - 2. Improving the UDS dental sealants measure with PCAs (LA & PA)
 - 3. Integrating oral health and primary care practice with PCAs (MI & IL)
 - Webinars: Dental Payment Innovation, Integration of Oral Health and Primary Care Practice, Infection Control and Prevention, Oral Health Integration in Medication Assisted Treatment of SUD
- Coming Soon Oral Health Expansion Toolkit (in partnership with NNOHA)
 - Informed by OHSE Listening Sessions in 2018
 - Focus on enhancing oral health infrastructure
 - Compilation of resources, tools, and promising practices





HIV Care Integration



Linked 84.5% of HIV patients to care

↑ HIV testing by 27% to 1.8 million patients

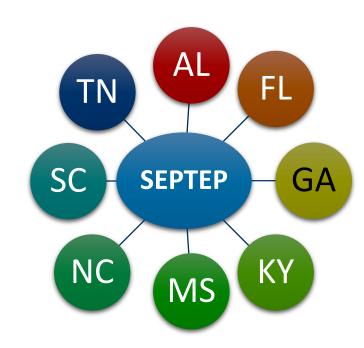
↑ the number of HIV patients served by 5% to 165,745



Southeast Practice Transformation Expansion Project (SEPTEP), 2018-2019

HRSA's BPHC and HIV/AIDS Bureau collaborated through the Southeast AIDS Education and Training Center (AETC) to support **16 health centers in 8 states** by:

- Providing one-on-one, Practice Transformation coaching on HIV testing and treatment clinical guidance
- Implementing a Community of Practice on Culture Change
- Discussing relevant topics with HIV specialists and diverse primary care teams on Opt-Out testing, Motivational Interviewing, PrEP implementation and prescribing, and taking Sexual Histories
- Conducting training on cultural humility and delivering a positive HIV test result





HIV and Primary Care Integration Webpage:

https://bphc.hrsa.gov/qualityimprovement/clinicalquality/hivprimarycare.html



Ending the HIV Epidemic: A Plan for America

75% reduction in new HIV diagnoses in 5 years and a 90% reduction in 10 years.



Diagnose

All people living with HIV (PLWH) as early as possible after transmission



Treat

HIV rapidly and effectively to achieve sustained viral suppression



Prevent

People at highest risk of HIV with PrEP and prevention education



Respond

Rapidly and effectively to clusters and outbreaks of new HIV infections

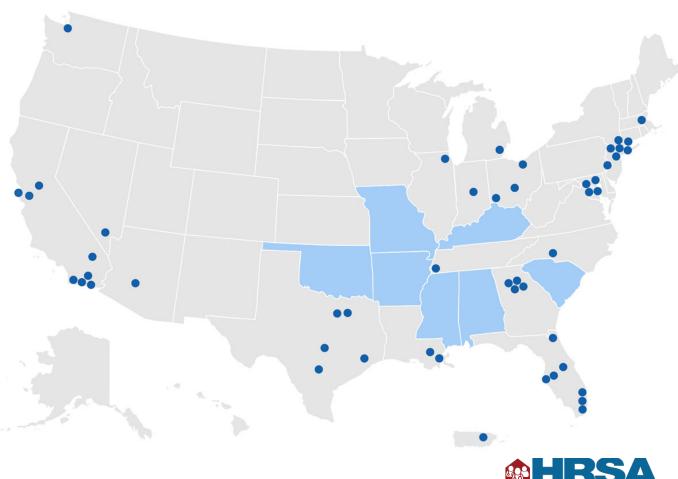




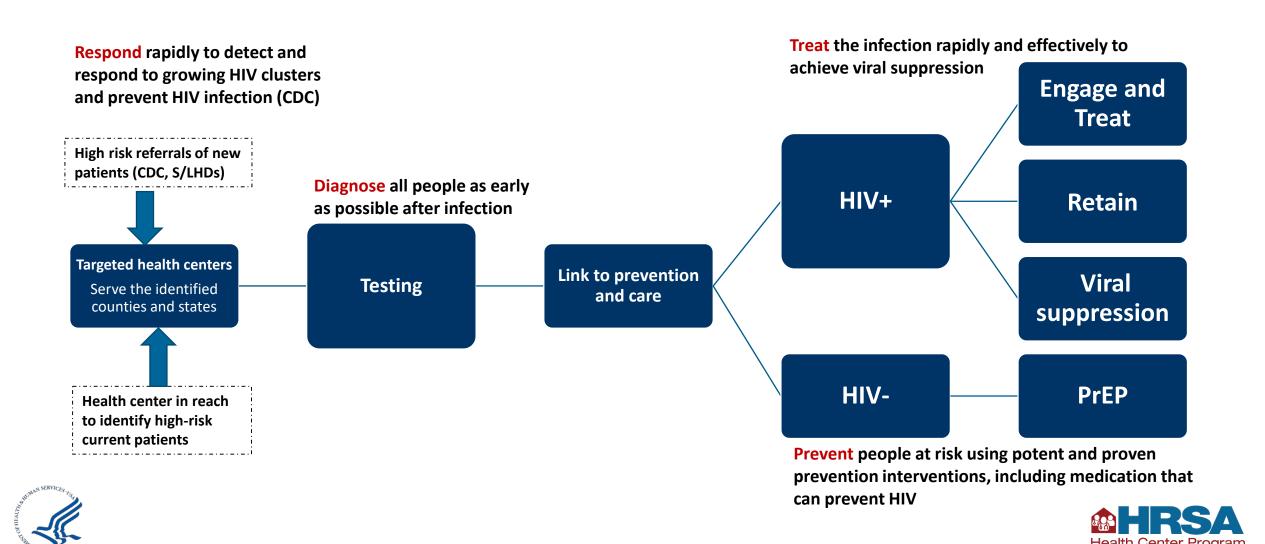
Ending the HIV Epidemic: Health Center Program

- Nearly 2 million HIV tests conducted annually
- More than 165,000 patients with HIV receive medical care services at health centers, including many sites co-funded by the Ryan White HIV/AIDS Program
- More than 600 health centers purchase Pre-Exposure Prophylaxis (PrEP) through the 340B Program
- FY 2020: \$50 million to support increased outreach, testing, care coordination, and HIV prevention services, including PrEP, in targeted counties/cities and States.





Health Centers: Ending the HIV Epidemic Flowchart

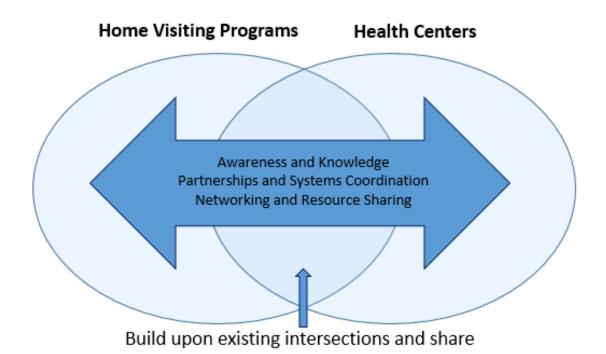


Health Center and Home Visiting Program Collaboration

In 2017, health center providers delivered nearly **300,000** babies

74% of prenatal care patients entered prenatal care during their first trimester

8% of newborns had Low Birth Weight (< 2,500 grams)



best practices from dually funded grantees

2019 Training/Technical Assistance (T/TA):

Strategies to enhance collaboration and integration:

- Improve awareness and knowledge on evidencebased home visiting programs
- Share promising practices for home visiting integration and partnership
- Develop resources that promote community-level engagement
- Connecting Home Visiting Programs to Health Center Behavioral Health and SUD programs
- Overall Goal: Improve pregnancy, child health and development and other health outcomes throughout the lifespan

Resources: HRSA's Maternal and Child Health Bureau's Home Visiting website

UDS Reporting & Modernization





UDS Modernization Initiative



Reduce Reporting Burden

Automate data submission, provide enhanced UDS reporting capabilities, promote transparency and integrate stakeholder feedback.



Measure Impact

Improve the quality of UDS data to reflect improvements in patient-centered care and an evolving primary health care setting.



Promote Transparency

Provide an open transparent decision-making process on UDS changes such as measure selection, information technology, and reporting improvements.





UDS Modernization Progress Completed and Planned

Develop **Implement Preliminary Reporting Enhanced Governance** "Routine Patients" "Routine Patients" **Environment** Solution Solution **Refine Patient-level Data Pilot Patient-level Data Standard Report Earlier Release of UDS Reporting Submission File UDS Reporting Reporting Requirements** Requirements Pilot Encounter-based **Study Encounter-based Exposure of Validation UDS Form Modernization Reporting for UDS** Reporting Rules **Identify Solution to Pilot Financial Reporting** Streamline Financial **Reports Modernization** Solution Reporting **Off Line Report Establish UDS Test Update eCQMs Compilation & Validation** Cooperative 2017 2018 2019 2020 **UDS Reporting Year (CY)**

Changes to Reduce Burden for 2018 UDS

Enhancements to the Electronic Handbooks (EHBs)

Preliminary Reporting **Environment (PRE)**

- Access EHBs before January 1st
- Begin entering and validating data early

HTML Tool Features (Offline)

- Download one or more UDS tables
- Validate real-time
- Team-based data entry

Excel Tool Features (Offline)

- Download UDS tables
- Validate the data in **EHBs**
- Team-based data entry
- Mapping tool for increased EHR automation

CY 2018 UDS Reporting Results

- Over 600 health centers used the PRE between November 2nd and December 31st
- Over 250 health centers have utilized the data comparison tool
- Nearly 150 health centers have used the offline reporting features

Check it out!







2019 UDS Reporting Changes

Update Quality Measures to Maintain Alignment with eCQMs

Addition of Behavioral Health Tables by Provider

Addition of Column in Table 5 to Capture Virtual Visits

Removal of Table 5A: Tenure for Health Center Staff

Replacement of Coronary
Artery Disease (CAD)
Measure with CMS347
Statin Therapy for the
Prevention and Treatment
of Cardiovascular Disease

Revision of Appendix D

Addition of Appendix F: Workforce

Health Center Program

Program Quality
Requirements Improvement

Uniform Data System (UDS) Program
Assistance Letters

Program

Opportunitie

Proposed Reporting Changes to the Health Center Program

Uniform Data System (UDS) Changes for Calendar Year (CY) 2019

ealth Resources & Services Administration

The <u>Program Assistance Letter (PAL) 2018-03</u> (PDF – 355 KB) provides an overview of proposed changes to the Health Resources and Services Administration's CY 2019 UDS that is reported by Health Center Program awardees and look-alikes by February 15, 2020. Detailed information regarding these changes will be included in the 2019 UDS Manual.

Approved Reporting Changes

Approved UDS Changes for Calendar Year 2018

<u>Program Assistance Letter (PAL) 2017-08</u> (PDF - 1,013 KB) provides an overview of approved changes to the Health Resources and Services Administration's (HRSA) calendar year (CY) 2018 Uniform Data System (UDS) to be reported by Health Center Program grantees and look-alikes in February 2019, The forthcoming 2018 UDS Manual will include additional details regarding these Changes.

Federal Tort About the Health Claims Act Center Program

What are PALs?

Program Assistance Letters (PALs) summarize and explain items of spinificance for health centers.

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including, for example, HRSA program implementation activities, recently enacted laws, final regulations, and/or new HHS initiatives.

Related

Health Center Adjusted Quartile





2020 UDS Changes Under Consideration

Diabetes Clinical Quality Measures

• CMS131: Diabetes: Eye Exam

• CMS123: Diabetes: Foot Exam

• CMS134: Diabetes: Medical Attention for Nephropathy

Mental Health Clinical Quality Measure

• CMS159: Depression Remission at 12 Months (outcome measure to be reported by race/ethnicity)

Preventative Clinical Quality Measures

- CMS125: Breast Cancer Screening
- CMS74: Primary Caries Prevention Intervention as Offered by Primary Care Providers, including Dentists (Replaces CMS277: Oral Health Sealant for Children between 6 9 years)

Removal of Asthma Clinical Quality Measure

• Retire CMS126: Use of Appropriate Medications for Asthma

Public Health Priorities & Social Determinant of Health

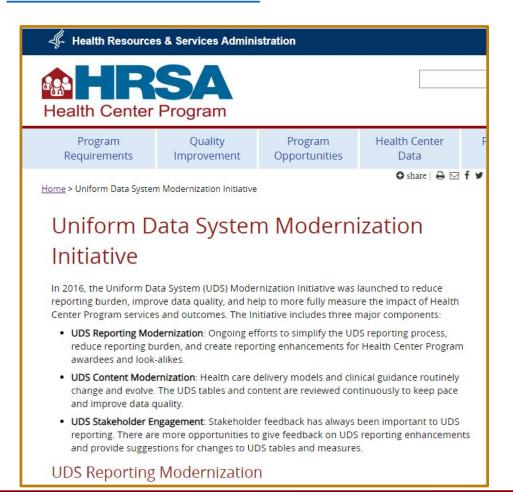
- CMS349: Percentage of patients 15-65 years of age who have been tested for HIV
- Collecting housing status data for all patients



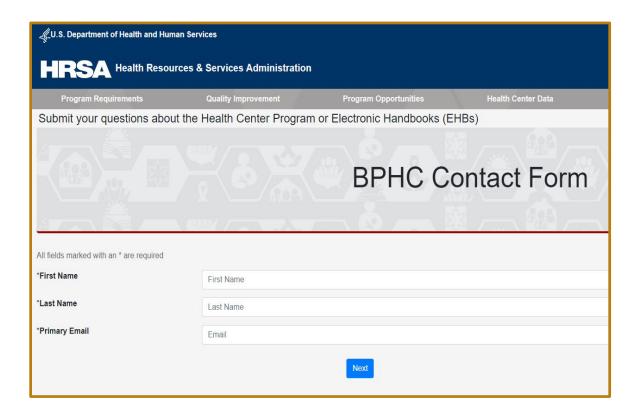


Provide Feedback on UDS Modernization

https://bphc.hrsa.gov/datareporting/reporting/udsmodernization.html



https://bphccommunications.secure.force.com/ ContactBPHC/BPHC_Contact_Form







UDS Data Technical Assistance Visits (TAV)

Pilot Visits

- Five awardees participated, three volunteers and two selected by HRSA
- Two day on-site visit with either 1 or 2 consultants
- Conducted between October 2018-January 2019 in five different states

Results

- All awardees reported a positive experience and appreciated the interactive, low burden design
- Visits uncovered reporting issues unknown to HRSA, giving HRSA the opportunity to address and resolve them

Next Steps

- Integrate feedback into the design of the TAV
- Determine feasibility of scaling up the TAV





Strategic Transformation Support





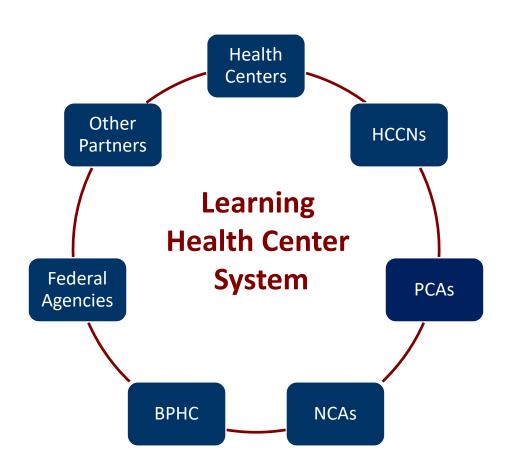
BPHC 2022: Strategic Shifts

Compliance-oriented grant maker **Primary health care leader** Health Centers as independent entities **Health Centers as interconnected entities** Interventions that address immediate medical needs Continuous community-oriented, comprehensive care Siloed functions Collaborative model Separate data tools Integrated systems that inform decision-making





Building A Learning Health Center System



Learning Health System Attributes

- Science and Informatics
 - Real time access to knowledge
 - Digital capture of the care experience
- Patient-Clinician Relationships
 - Engaged, empowered patients
- Incentives
 - Incentives aligned for value
 - Full transparency
- Culture
 - Leadership instilled culture of learning
 - Supportive system competencies

Best Care at Lower Cost: The Path to Continuously Learning Health Care in America

http://www.nationalacademies.org/hmd/Reports/2012/Best-Care-at-Lower-Cost-The-Path-to-Continuously-Learning-Health-Care-in-

America.aspx



HCCNs: Supporting Technology Enabled Improvement

1. Enhance the Patient and Provider Experience

- Patient Access
- Patient Engagement
- Provider Support

2. Advance Interoperability

- Data Protection
- Health Information Exchange
- Data Integration

3. Use Data to Enhance Value

- Data Analysis
- Social Risk Factor Intervention





PCAs: Supporting State/Regional Value Transformation

- 1. Accelerate Value-Based Care Delivery
- 2. Increase Access to Comprehensive Primary Health Care
- 3. Strengthen the Health Center Workforce
- 4. Enhance Health Center **Emergency Preparedness**
- 5. Advance Health Center Clinical Quality and Performance





Provider and Staff Satisfaction Survey

- High and increasing rates of burnout among clinicians and trainees
 - ½ of physicians and nurses¹
 - Highest among rural clinicians²
- Related Factors
 - Workload/job demands
 - Efficiency and resources
 - Meaning of work
 - Culture and values
 - Control and flexibility
 - Social support/community
 - Work life integration

Provider/staff satisfaction affects their well-being, quality of care, patient safety, and satisfaction

- Medical errors
- Suboptimal patient outcomes
- Provider/staff turnover
- Recruitment/retention
- Productivity loss





¹ https://nam.edu/initiatives/clinician-resilience-and-well-being/

² https://www.ahrq.gov/professionals/clinicians-providers/ahrq-works/burnout/index.html

Closing the Gap Between Research and Implementation

- Improving the integrity, quality, and analytical capability of health center data
 - UDS Modernization Initiative
 - 2019 Health Center Patient Survey
 - Technical Assistance Visits
- Enhancing and supporting health center analytical capacity for quality improvement
 - Visualizing data with Tableau dashboards
 - UDS Mapper
- Rapid dissemination of research and best practices
 - HRSA National Program Performance Analysis
 - Financial Analysis and Research Agenda



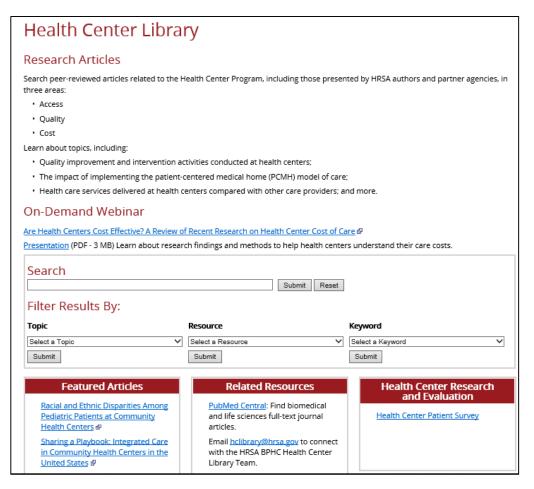




Health Center Program Research

The Health Center Library

- Features peer-reviewed articles that focus on quality improvement, access to health care, and cost efficiency in health centers.
- Access the Health Center Library at: <u>https://bphc.hrsa.gov/healthcenterlibrary/library.aspx</u>



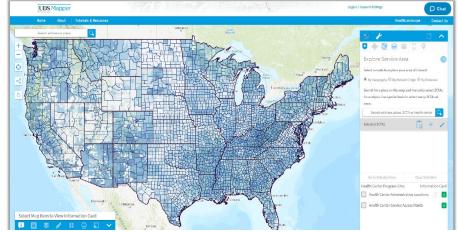




UDS Mapper Tool: What's New in the UDS Mapper?

- An online mapping tool developed to provide access to maps, data, and analysis using Uniform Data System (UDS) and other relevant data to visualize service area information for Health Center Program (HCP) awardees and look-alikes
- Compares HCP awardees and look-alike data to community/ population data and shows spatial relationships between the program, community attributes, and other resources
- Register at: www.udsmapper.org
- What's New in the UDS Mapper?
 - New Population Indicators Data (e.g., binge drinking, smoking, drug poisoning mortality)
 - Updated UDS Data
 - Adjusted Quartile Rankings for quality measures
 - Mapping Areas of Priority for Medication Assisted Treatment (MAP for MAT)
 - Drawing Tool Enhancements









Health Center Program Resources

- Website: <u>bphc.hrsa.gov</u>
 - Includes many Technical Assistance (TA) resources
- Weekly E-Newsletter: Primary Health Care Digest
 - Sign up online to receive up-to-date information on the Health Center Program
- BPHC Helpline: hrsa.gov/about/contact/bphc
 - EHBs questions/issues
 - FTCA inquiries
- FTCA Resources: https://bphc.hrsa.gov/ftca/index.html
- UDS Resources: https://bphc.hrsa.gov/datareporting/reporting/
- National Cooperative Agreements & Primary Care Associations:
 <u>bphc.hrsa.gov/qualityimprovement/strategicpartnerships</u>
- Quality Improvement Resources: https://bphc.hrsa.gov/qualityimprovement/index.html





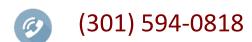
Thank You!

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