PIP Year End Update January 17, 2018

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## **Behavioral Health – ED Follow-Up**

FUM 2017							
	Q1	Q2	Q3	Q4			
7 Day	65.37%	64.39%	65.10%	63.65%			
30 Day	y 77.43% 76.94%		78.22%	77.58%			
		FUA 2017					
	Q1	Q2	Q3	Q4			
7 Day Total	24.56%	24.75%	27.81%	24.87%			
30 Day Total	26.32%	27.72%	31.79%	29.02%			



## **17-P for Pre-term Delivery**



17-P						
Q1	Q2	Q3	Q4			
O%	17.5%	20.3%	24.3%			

\*Calculated using final measure specifications and assumes continuous enrollment. Data is cumulative.

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# **Tdap during Pregnancy**



Tdap							
Q1 Q2 Q3 Q4							
<b>Indicator 1 -</b> Member received Tdap anytime during pregnancy	62.90%	64.39%	63.76%	63.40%			
<b>Indicator 2</b> – Member received Tdap during 27-36 weeks gestation	54.30%	57.56%	56.27%	56.18%			

\*Calculated using final measure specifications and assumes continuous enrollment. Data is cumulative.

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### **Tdap Interventions**



- Increase member education & awareness of Tdap immunization during pregnancy.
- Provide outreach to pregnant members and case management for all high risk OB patients.
- Increase onsite encounters with providers to offer educational information on Tdap immunization.



# **PIP Year End Update**

## January 17,2018

1/17/2018



# Behavioral Health – ED Follow-up



FUM 2017							
Q1 Q2 Q3 Q4							
7 Day	1.56%	26.22%	44.65%	44.64			
30 Day	3.91%	45.55%	63.26%	63.72			

FUA 2017							
Q1 Q2 Q3 Q4							
7 Day	4.55%	4.60%	4.20%	4.62			
30 Day	9.09%	9.20%	5.73%	6.65			
	-						

**Based on HEDIS** 







### 17P Between 16 – 26 weeks Gestation, Continuous Eligibility

17- P						
QI	Q2	Q3	Q4			
5%	15.38%	19.6%	20.6%			

\*Calculated using final measure specifications and assumes continuous enrollment. Data is cumulative.



# Tdap During Pregnancy

Tdap								
	Q1	Q2	Q3	Q4				
Indicator 1 Member receives Tdap anytime during pregnancy	48.3%	57.40%	50.60%	52.40%				
<b>Indicator 2</b> Member receives Tdap 27-36 wks gestation	44.9%	49.20%	42.10%	45.40%				



# **17P Interventions**



- Provider Education
  - ONAF / Notification of Pregnancy Submissions
  - Evidence Base Practice Recommendations
  - Access to Drug
    - Removal of Prior Authorizations
    - Addition to PDL
    - Drug Access / Administration
  - Financial Resources
    - Makena Care Connections
    - Presumptive Eligibility



# **17P Interventions**



- Member Education
  - Pre Conception
  - Post Conception
- Case Management
  - Outreach to members at risk & on 17P
  - Outreach to providers





### **Performance Improvement Projects**



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- 17-OH Progesterone In Eligible Pregnant Women
- 2017 Rates:

	17р						
Baseline	Q1	Q2	Q3	Q4			
24.00%	24.36%	24.73%	25.47%	26.23%			

### **Performance Improvement Projects (cont)**



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• 2017 Rates:

Tdap: Indicator 1							
Baseline	Q1	Q2	Q3	Q4			
64.30%	65.26%	66.24%	68.23%	70.28%			

Tdap: Indicator 2							
Baseline Q1 Q2 Q3 Q4							
12.97%	13.16%	13.36%	13.76%	14.18%			

### **Performance Improvement Projects (cont)**

• Follow-up After Emergency Room Visit With a Diagnosis of Mental Health Illness or Substance Use Disorder

WellCare HERITAGE

• 2017 Rates:

ED: FUM 7 day					ED	: FUM 30 d	lay		
Baseline	Q1	Q2	Q3	Q4	Baseline	Q1	Q2	Q3	Q4
34.00%	34.51%	35.03%	36.08%	37.16%	53.80%	54.61%	55.43%	57.09%	58.80%
ED: FUA 7 day total (13-17 y/o)			ED: FUA 30 day total (13-17 y/o)						
Baseline	Q1	Q2	Q3	Q4	Baseline	Q1	Q2	Q3	Q4
4.35%	5.85%	7.35%	8.85%	10.35%	13.04%	14.54%	16.04%	16.54%	17.04%
ED: FUA 7 day total (>18 y/o)				ED: I	FUA 30 day	<b>/ total (&gt;1</b> 8	3 y/o)		
Baseline	Q1	Q2	Q3	Q4	Baseline	Q1	Q2	Q3	Q4
6.15%	8.65%	11.15%	13.65%	15.15%	9.23%	10.73%	12.23%	13.73%	15.23%

#### **Performance Improvement Project - Intervention**

• Follow-up After Emergency Room Visit With a Diagnosis of Mental Health Illness or Substance Use Disorder

WellCare HEALTH

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• Intervention:

Description of Barrier	Method and Source of Barrier Identification	Description of Intervention Designed to Overcome Barrier	Intervention Timeframe
Timely Identification of ED visits for SUD and mental illness	Review of claims data	1a. Improve current data streams through integration of Nebraska Health Information Initiative (NeHII)	Start: 1/1/2018 End: Ongoing
		1b. Improve current data streams through data exchange agreements with targeted high-volume facilities	