PHMI All RAC Meeting

October 24, 2022

Agenda

01	**Overview of Today's Agenda**	**5 mins** *Elise*
02	**Baseline Measurement Tool** - *Tool Overview, Process and Feedback* - *Spec Update*	**30 mins** *Maggie/Michele*
03	**Proof of Concept (POC)**	**15 mins** *Aisha*
04	**Next Steps**	**5 mins** *Elise*

Baseline Measurement Tool

Baseline Measurement Update

- Overview of reporting tool (screen share Excel document)
- Proposed process & timeline:
  - Pilot test tool by Oct 31 *(Q: is it possible to get volunteers to test in the next week?)*
  - PHMI team to distribute final tool to RACs by Nov 4 (will provide Excel tool & sample email language)
  - RACs distribute tool to participating CHCs the week of Nov 7 (copying Maggie on emails)
    - PHMI team available to answer questions & provide TA/support to CHCs or RACs
  - CHCs send completed spreadsheet back to RACs in December (date TBD)
  - RACs batch CHC spreadsheets and submit to Maggie via email by 12/31
  - PHMI team will do data review/validation in January
- Specs Update
- *Discussion:*
  - *Feedback on reporting tool (introductions, formatting)?*
  - *Determining the number of sites each CHC will be reporting on?*
  - *Feedback on reporting process?*
  - *Usefulness of data reports back to RACs? CHCs?*

Proof of Concept (POCs)

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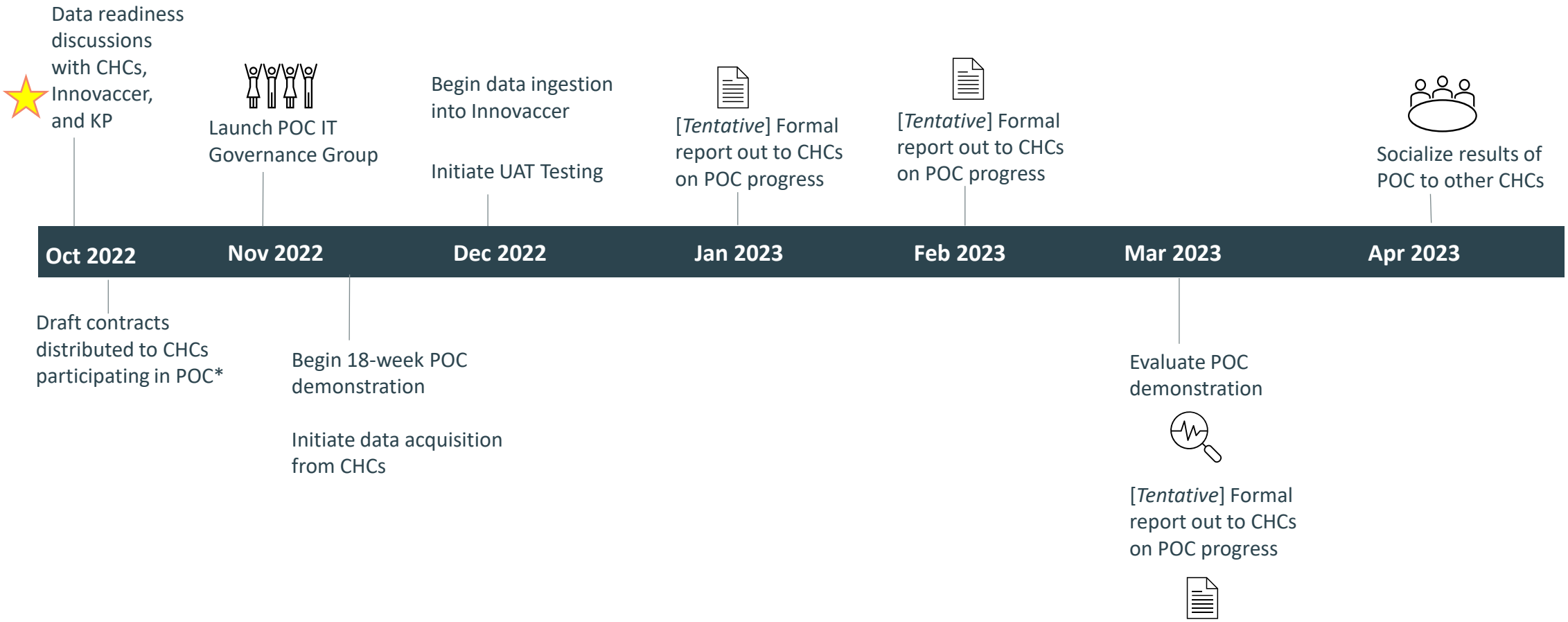
PHMI Proof-of-Concept (POC) Milestones

The PHMI Technology Team anticipates starting the POC demonstration in mid-November 2022. With an 18-week duration, the POC will likely conclude in February 2023.



Note: Innovaccer to provide more detailed implementation timeline

**contingent on negotiation of KP – Innovaccer agreement*

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PHMI Technology POC with Innovaccer

The PHMI Technology Team is proceeding with a POC with Innovaccer to validate preliminary assumptions regarding Innovaccer's ability to meet Medi-Cal needs and identify implications for the broader PHMI tech implementation.

Proof-of-Concept (POC) Overview

During the POC exercise, Innovaccer will:

- Implement defined platform functionality with **2-4 Community Health Centers (CHCs)**
- Focus on **a few specific use cases,** testing functionality in relation to a subset of components from **5 design elements** (Data Driven Improvement & Analytics, Empanelment, Model of Care, Patient Engagement, Social Health)
- Ingest and process data for a **limited volume of patients at CHCs**
- Deliver POC within an **~10+ week timeframe** including **monitoring of key outcomes, gathering CHC feedback** and **assessing platform adoption**

Why is the Proof-of-Concept (POC) Important?

The POC will:

- **Test Innovaccer's ability** to deliver in relation to the co-designed PHMI solution set and initiative goals
- Demonstrate how Innovaccer can use **real CHC data** to illustrate **platform functionality**
- Connect to **existing CHC data sources** to understand how Innovaccer aggregates and harmonizes data
- Evaluate Innovaccer's ability to **collaborate with other program stakeholders**
- Test the **program's implementation approach / structure** across stakeholder groups

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Background on POC Data Readiness

In order to deliver on the POC scope, the PHMI Technology Team needed to better understand current state of data at CHCs. Through ongoing engagement with Innovaccer, CHCs, RACs, and MCPs, the team aligned on approach to this conversation.

Where we were

Innovaccer

Limited claims/encounters and eligibility data may affect the quality measure and quality gap outputs for the POC. There will be no validation of Innovaccer analytics outputs against payer reports.

Managed Care Plans (MCPs)

Initial engagement held to discuss access claims/encounters and eligibility data.

CHCs

Working sessions over the summer to complete the K03 template, which enumerates external and internal data sources.

RACs

Ongoing engagement and updates.

Where we are now

Innovaccer

Ongoing contract negotiations and initial data acquisition discussions.

Managed Care Plans (MCPs)

Paused engagement to accommodate deeper understanding of data elements needed for POC.

CHCs

Continue conversation around POC readiness, focusing on current state of data.

RACs

Ongoing engagement and updates.

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Proof of Concept Community Health Centers

The PHMI Technology Team met with the 4 CHCs participating in the Proof of Concept to assess data being received from the contracted Managed Care Plans (MCPs) and Independent Practitioner Associations (IPAs).

Northeast Valley

MCPs: Anthem, Blue Shield-Promise, HealthNet, LA Care, Molina, Imperial Health, Covered CA, Beacon, MHN

IPA: Healthcare LA

Data: **COZEVA**, Collective Medical, LANES, NextGen, Quarterly Care Gaps Report from LA Care

Empanelment: 4-cut methodology, 18-month retrospect, Excel, Empanel – Peds, Adult MD, Mid-level

Open Door

MCPs: Anthem, Blue Shield-Promise, United Health, Partnership Health

IPA: ?

Data: eReports, PHC Online Services, CAIR, ADT feed, OCHIIN/EPIC, HIE, Quality gap list from Partnership Health

Empanelment: Internal process, weigh with panels, OCHIIN provider dashboards, BI tool-SRSS SQL server custom report

OMNI

MCP: Kern Health System, HealthNet, Dignity Health

IPAs: n/a

Data: **COZEVA**, CareQaulity, Carebridge eMedApps, NextGen, Innovaccer

Empanelment: SQL script- uses EHR patient history to populate EHR PCP field, periodic continuity reporting, no risk scoring

East Valley

MCPs: HealthNet, Beacon, MHN

IPAs: Healthcare LA

Data: **COZEVA**, MedPoint Management, Provider Roster, ADT Feed, CAIR, Unit US, NextGen

Empanelment: 4-cut methodology, pending recommendations from PDSA

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PHMI POC Next Steps

Below are next steps to prepare for the PHM Platform POC:

1. Finalize contract for PHMI Platform
2. Begin to form IT POC Governance Committee
3. Data Collection – Part 1: Continue to discover CHC IPA/MCP data gaps from 4 POC CHC discussions
4. Data Collection – Part 2: Collaborate with RAC's to begin discussions with IPAs/MCPs on POC data gaps and needs

Next Steps

- Other
- Next Meeting: Monday November 14th 2:00 pm

Appendix

DRAFT PHMI Quality Measure Set

PHMI Category	Measure	Alternative Payment Methodology (APM)	DHCS Gate and Ladder	Program Freq	# of ethnic groups with disparity*	2020 Aggregate CHC Performance **	State Medi-Cal 2020 Performance*
Core Measures (Seven Total)							
Prevention - Peds	Child Immunization Status (CIS 10)	Required		9	2	40.1%	39.8%
	Well Child Visits in first 30 months of life- first 15 months	Required	Gate	5	n/a	n/a	37.7%
Maternity Care	Prenatal and Postpartum Care (Postpartum)	Required		7	1	n/a	80.5%
Behavioral Health	Depression Screening and Follow-Up for Adolescents and Adults	Required		5	n/a	59.3%	18.3 (adol.) / 11.5% (adult)
Prevention - Adult	Colorectal Cancer Screening	Required		6	n/a	37.1%	n/a
Chronic Care	Comprehensive Diabetes Care: HbA1c Poor Control (>9%)	Required		7	6	37.0%	40.9%
	Controlling High Blood Pressure	Required		9	n/a	56.4%	56.6%
Supplemental Measures (Twelve Total)							
Prevention - Peds	Child/Adolescent Well Care Visits	Supplemental	Gate	7	n/a	n/a	41.1%
	Immunization for Adolescents (Combo 2)	Supplemental		8	2	n/a	41.1%
	Well Child Visits in first 30 months of life-15-30 months	Supplemental	Gate	4	n/a	n/a	66.4%
Maternity Care	Postpartum Depression Screening and Follow Up	Supplemental		4	n/a	n/a	n/a
	Prenatal and Postpartum Care (Timeliness of Prenatal Care)	Supplemental		6	3	n/a	87.6%
	Prenatal Depression Screening and Follow Up	Supplemental		4	n/a	n/a	n/a
Behavioral Health	Depression Remission or Response for Adolescents and Adults	Supplemental		3	n/a	11.3%	n/a
Prevention - Adult	Breast Cancer Screening	Supplemental		7	5	46.5%	57.1%
	Cervical Cancer Screening	Supplemental		6	5	52.5%	58.1%
Patient Experience of Access and Care	Adults' Access to Preventive / Ambulatory Health Services	Supplemental	Gate	1	n/a	n/a	n/a
	CG-CAHPS: Getting Needed Care	Supplemental[(a)]		1	n/a	n/a	n/a
	CG-CAHPS: Getting Care Quickly	Supplemental[(a)]		1	n/a	n/a	n/a

Sources: * Per 2020 HSAG Report https://www.dhcs.ca.gov/Documents/MCQMD/CA2020-21-Health-Disparities-Report.pdf
** https://data.hrsa.gov/tools/data-reporting/program-data/state/CA

Note: (a) FQHC able to substitute with alternate tool if CG-CAHPS not available