MCIP AGENDA
2022 DIABETES CQI WORKSHOP
MARCH 30, 2022
(VIA ZOOM: 2:00PM)

TIME	PRESENTER
1:45 – 2:00	• ***Login (including technical troubleshooting)***
2:00 – 2:10	• ***Welcome and Introductions*** o Jake Chapman, Executive Director Quality and Outcome Improvement Network, Inc.

OVERALL PROJECT GOALS AND PROGRESS

2:10 – 2:25	• ***2021 Year in Review and Expectations for 2022*** o Nicole Martinez, Gjerset & Lorenz, LLP

PART I: ADDRESSING BARRIERS TO CARE

2:25 – 2:30	• ***Ochsner Lafayette General: Efforts to Address Patient Barriers to Care*** o Tena Turnage, RN, Manager Clinic Operations Ochsner Abrom Kaplan Memorial Hospital Ochsner Acadia General Hospital Ochsner Lafayette General Ochsner St. Martin Hospital Ochsner University Hospital and Clinics
2:30 – 2:35	• ***Opelousas Efforts to Address Patient Barriers to Care*** o Marsha Gauthier, RN, Population Health o Tim Marks, Chief Population Health & Clinical Integration Officer Opelousas General
2:35 – 2:40	• ***Pointe Coupee's Efforts to Address Patient Barriers to Care*** o Jeanine Thibodeaux, RN, Administrator Pointe Coupee General Hospital

PART II: ACTIVITY IMPROVEMENT

2:40 – 2:45	• ***Iberia's Experience Improving Diabetes Activities*** o Meagan Trahan, RN, Care Manager Iberia Medical Center
2:45 – 2:50	• ***North Caddo's Diabetes Activity Improvements*** o Michele Heflin, LPN, Clinical Integration Specialist North Caddo Medical Center
2:50 – 2:55	• ***Allen Parish's Diabetes Activity Improvements*** o Kandace Fontenot, MHA, Director of Clinical Informatics and Information Systems Allen Parish Hospital
2:55 – 3:00	• ***HCA's Experience Improving Diabetes Activities*** o Penny Hutson, CFO, HCA MidAmerica Division Rapides Regional Medical Center Tulane University Hospital and Clinic
3:00 – 3:05	• ***Break***

TIME	PRESENTER

PART III: REGISTRY IMPROVEMENTS MADE AND IDEAS FOR FUTURE IMPROVEMENTS

3:05 – 3:25
- ***Ochsner's Diabetes Registry Improvements***
  - o Susan Montz, AVP – OHN Performance Improvement
    Ochsner LSU Health Monroe
    Ochsner LSU Health Shreveport
    Ochsner Medical Center
    Ochsner Medical Center - Kenner
    Ochsner Medical Center - North Shore
    Ochsner Medical Center - Baton Rouge
    Ochsner St. Anne General Hospital
    Ochsner St. Mary
    Slidell Memorial Hospital
    Southern Regional Medical Corporation
    St. Bernard Parish Hospital
    St. Charles Parish Hospital
    Terrebonne General Medical Center

3:25 – 3:30
- ***St. Tammany's Diabetes Registry Improvements***
  - o Cameron Jenkins, MBA, Clinical Quality Coordinator
    St. Tammany Parish Hospital

3:30 – 3:35
- ***Baton Rouge General: Registry Improvements Made***
  - o Shelly Martinez, Administrative Director - Clinical Quality
    Baton Rouge General Medical Center
    The General Hospital
- ***CHRISTUS Health: Ideas for Diabetes Project Improvements***

3:35 – 3:40
  - o Nathan Kawamura, Data Analytics Engineer
    CHRISTUS Coushatta Health Care Center
    CHRISTUS Health Shreveport-Bossier
    CHRISTUS Ochsner Lake Area Hospital
    CHRISTUS Ochsner St. Patrick Hospital
    CHRISTUS St. Frances Cabrini Hospital
    Savoy Medical Center

PART IV: MEASURING EFFECTIVENESS OF THE DIABETES PROJECT

3:40 – 3:45
- ***Abbeville General: Measuring Project Effectiveness***
  - o Tina Faulk, RN, MCIPs/Diabetes Program Coordinator
    Abbeville General Hospital

PART V: CONCLUSION

3:45 – 3:55
- ***Group Discussion: Q & A Session***
  - o All Network Providers

3:55 – 4:00
- ***Closing Remarks***
  - o Nicole Martinez, Gjerset & Lorenz, LLP

Please note: the next Diabetes CQI meeting is scheduled for June 2, 2022 at 2 p.m.

220818

Louisiana MCIP Diabetes Project

Continuous Quality Improvement ("CQI") Workshop

March 30, 2022

YEAR IN REVIEW AND EXPECTATIONS FOR 2022

Diabetes Project

➤ In 2021, the Network Providers continued to utilize the diabetes project to identify members with diabetes, enroll these members in the diabetes registry, and assist these members in more effectively managing their diabetes.

Project Goals:

➤ Increase Hemoglobin A1c (HbA1c) tests for members ages 18-75 with diabetes.

➤ Decrease HbA1c poor control (>9.0%) for members ages 18-75 with diabetes.

➤ Increase HbA1c control (<8.0%) for members ages 18-75 with diabetes.

➤ Increase diabetic members (type 1 and type 2) ages 18-75 whose blood pressure (BP) was adequately controlled (<140/90).

Goals for Today's Diabetes CQI Workshop

Goals for Today's CQI Workshop:

- Discuss CY2021 results for diabetes milestones
- Discuss root causes for CY2021 encounters
- Outline CY2022 Registry Modifications
- Network Providers to discuss the following components of the CQI plan:
  - Addressing patient barriers to care
  - Activity improvement
  - Registry improvements
  - Ideas for future project improvements
  - Measuring the effectiveness of the diabetes project
- Collaborative discussions for all attendees regarding any diabetes project questions.

Diabetes Project: CQI Plan

Process to Calculate Milestone Performance

- Network Provider Data Submission

- Work individually with each Network Provider to correct errors and finalize the data submitted

- Consolidate data for each Network Provider and use milestone specifications to calculate rates for each milestone

- The rates are calculated for the entire Network in order to report to LDH. However, the Network also provided each of the Network Providers with individual performance calculations in order for the Network Providers to evaluate individual performance.

CY2021 Milestone Results

The Network achieved each of the 13 project milestones in 2021. Highlights included:

➢ Create, implement, and measure baseline for activities to address treatment gaps.
➢ Implement and measure baseline for activities to reduce registry members with HbA1c control
➢ Implement and measure baseline for activities designed to reduce registry members with poor BP control
➢ Review and modify registry data fields.
➢ Conduct continuous education of providers regarding use and modification of registry.

CY2021 Milestone Results

Members Enrolled in the Diabetes Registry: **100% Achievement**

- CY2020 Network Baseline: 34,714
- CY2021 Network Goal: 36,450
- CY2021 Network Performance: 38,966

CY2021 Milestone Results

Number of HbA1c Tests Performed: **100% Achievement**

- CY2020 Network Baseline: 19,680 Tests
- CY2021 Network Goal: 20,664 Tests
- CY2021 Network Performance: 52,328 Tests

CY2021 Milestone Results

<u>Members enrolled in the registry with HbA1c poor control (>9.0%):</u> **100% Achievement**

- CY2020 Network Baseline: 32.21%
- CY2021 Network Goal: 30.60%
- CY2021 Network Performance: 25.92%

CY2021 Milestone Results

Members enrolled in registry with HbA1c control (<8.0%): 100% Achievement

- CY2020 Network Baseline: 54.81%
- CY2021 Network Goal: 57.55%
- CY2021 Network Performance: 61.83%

CY2021 Milestone Results

<u>Members enrolled in the registry with poor BP control (>140/90):</u>
100% Achievement

- CY2020 Network Baseline: 34.85%
- CY2021 Network Goal: 33.11%
- CY2021 Network Performance: 31.86%

CY2021 Member Participation Baselines

- **<u>Member Participation in Activities designed to reduce diabetic members with HbA1c poor control</u>**

  - Providers chose the following activities:
    - The provider asks patients about their tobacco use at every patient visit and tracks the data in the patient's medical record.
    - The provider measures blood pressure at all patient visits.
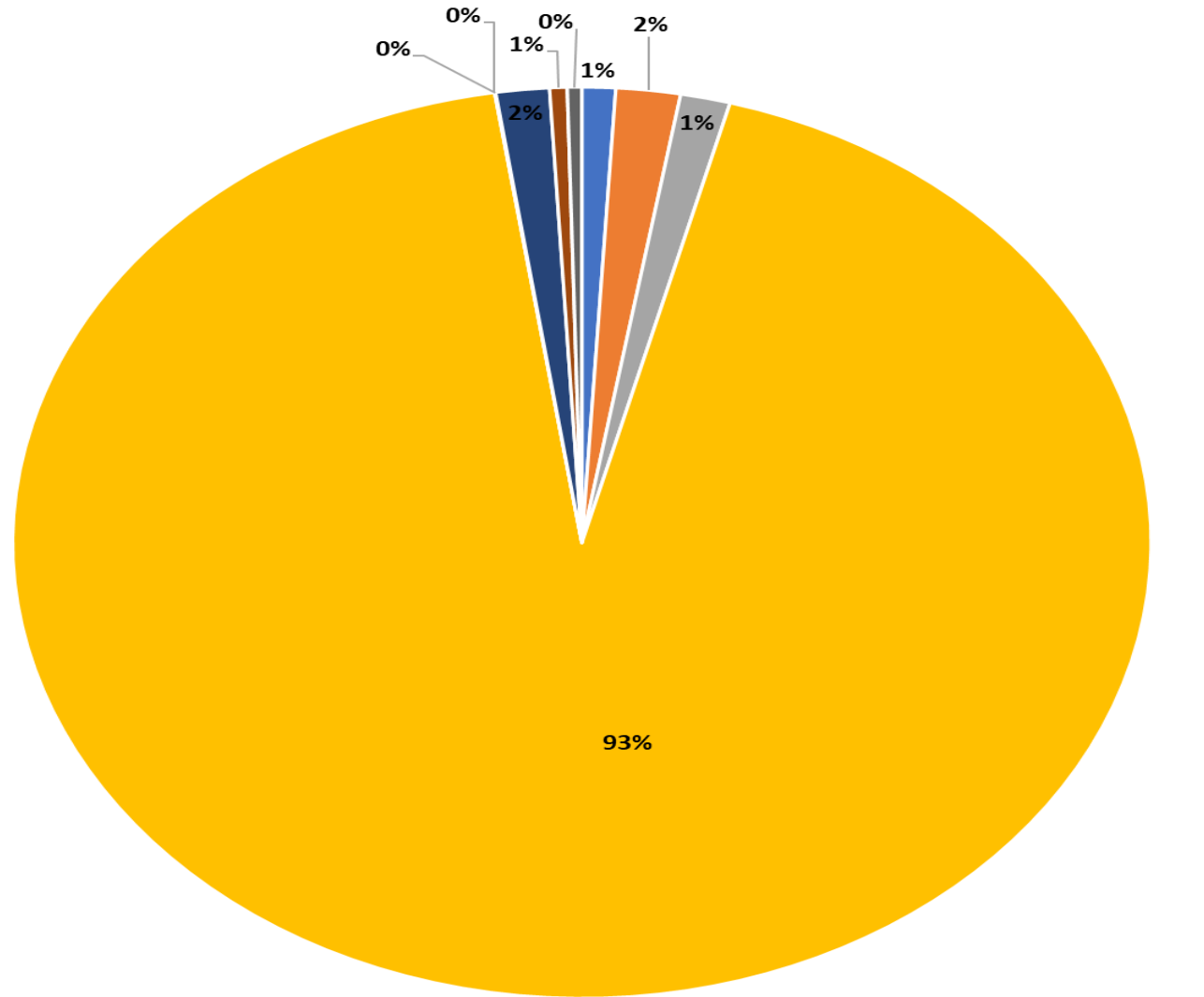 - CY2021 Baseline: 12,497

CY2021 Member Participation Baselines

- **<u>Member Participation in activities designed to reduce diabetic members with poor BP control</u>**

  - Providers chose the following activities:
    - Conduct follow-up calls with members after each office visit to discuss treatment plan.
    - Conduct outreach to members due for a follow-up visit but with no visit scheduled.
    - Disseminate materials to educate members on managing chronic illness.
    - Increase appointment reminders and notifications for members prior to appointment date.
    - Perform foot exams during each member visit.
  - CY2021 Baseline: 11,567

2021 Diabetes Root Causes (excluding blanks)

Root Causes	Members
Co-morbidity (e.g. Obesity, Diabetes, etc.)	390,901
Behavioral factors (e.g, Diet, Exercise, Alcohol, Tobacco, or Drug use)	7,660
Linkages to Care Management	6,341
Communication	5,917
Access to Self Management Education	3,982
Low Levels Health Literacy	2,086
Lower Socioeconomic Status	1,709
Lack of Transportation	106
Cultural Awareness	25
Grand Total	**418,727**

Legend:
- Access to Self Management Education
- Behavioral factors (e.g, Diet, Exercise, Alcohol, Tobacco, or Drug use)
- Communication
- Co-morbidity (e.g. Obesity, Diabetes, etc)
- Cultural Awareness
- Lack of Transportation
- Linkages to Care Management
- Low Levels Health Literacy
- Lower Socioeconomic Status

2022: Next Steps

CY2022 Registry Modifications

- **<u>Race Drop Down</u>**
  - The drop-down menu in the "Race" data field has been removed for make the template more user-friendly. Network providers must still complete this field.
- **<u>Table Format & Primary Root Cause</u>**
  - The registry will now be a standard Excel worksheet. The table format has been removed.
  - The "Primary Root Cause" data field has also been removed from the registry.
- **<u>'Short Date' Format</u>**
  - All data fields containing dates will be placed in 'Short Date' format (ex. MM/DD/YYYY).

Evaluate Effectiveness of Activities Implemented

➢ Review CY21 data submissions to determine member participation in activities

➢ Review individual member outcomes to determine whether participation in activities improved member health

Continuation of Current CQI Activities

➢ Continued collaboration with MCOs

➢ Monthly group discussions

➢ Improvements/revisions to the Network Provider timeline

➢ CQI workshops

➢ QIN website

➢ Solicitation of Network Provider feedback

➢ Network Provider training and education (submissions due May 16)

Part I: Addressing Barriers to Care

Addressing Barriers to Care

Ochsner Lafayette General: Efforts to Address Patient Barriers to Care

Tena Turnage, RN, Manager Clinic Operations

On behalf of

Ochsner Abrom Kaplan Memorial Hospital
Ochsner Acadia General Hospital
Ochsner Lafayette General
Ochsner St. Martin Hospital
Ochsner University Hospital and Clinics

Addressing Barriers to Care

Opelousas' Efforts to Address Patient Barriers to Care

Tim Marks, Chief Population Health &
Clinical Integration Officer

Marsha Gauthier, RN, Population Health

On behalf of Opelousas General

Addressing Barriers to Care

Pointe Coupee's Efforts to Address Patient Barriers to Care

Jeanine Thibodeaux, RN, Administrator

On behalf of Pointe Coupee General Hospital

PART II: ACTIVITY IMPROVEMENT

Activity Improvement

Iberia's Experience Improving Diabetes Activities

Meagan Trahan, RN, Care Manager

On behalf of Iberia Medical Center

Activity Improvement

North Caddo's Diabetes Activity Improvements

Michele Heflin, LPN, Clinical Integration Specialist

On behalf of North Caddo Medical Center

Activity Improvement

Allen Parish's Diabetes Activity Improvements

Kandace Fontenot, MHA, Director of Clinical Informatics and Information Systems

On behalf of Allen Parish Hospital

Activity Improvement

HCA's Experience Improving Diabetes Activities

Penny Hutson, CFO, HCA MidAmerica Division

On behalf of

Rapides Regional Medical Center

Tulane University Hospital and Clinic

Diabetes CQI Workshop

BREAK

Part III: Registry Improvements Made and Ideas for Future Improvements

Registry Improvements

Ochsner's Diabetes Registry Improvements

Susan Montz, AVP Performance Improvement, Care Management

On behalf of

Ochsner LSU Health Monroe
Ochsner LSU Health Shreveport
Ochsner Medical Center
Ochsner Medical Center – Baton Rouge
Ochsner Medical Center – Kenner
Ochsner Medical Center – North Shore
Ochsner St. Anne General Hospital
Ochsner St. Mary
Slidell Memorial Hospital
Southern Regional Medical Corporation
St. Bernard Parish Hospital
St. Charles Parish Hospital

Registry Improvements

St. Tammany's Diabetes Registry Improvements

Cameron Jenkins, MBA, Clinical Quality Coordinator

On behalf of St. Tammany Parish Hospital

Registry Improvements

Baton Rouge General: Registry Improvements Made

Shelly Martinez, Administrative Director – Clinical Quality

On behalf of

Baton Rouge General Medical Center

The General Hospital

Registry Improvements

CHRISTUS Health: Ideas for Diabetes Project Improvements

Nathan Kawamura, Data Analytics Engineer

On behalf of

CHRISTUS Coushatta Health Care Center

CHRISTUS Health Shreveport-Bossier

CHRISTUS Ochsner Lake Area Hospital

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CHRISTUS St. Frances Cabrini Hospital

Savoy Medical Center

Part IV: Measuring Effectiveness of the Diabetes Project

Effectiveness of Diabetes Project

Abbeville General: Measuring Project Effectiveness

Kelly Hair, MBA-HCA, MA, CRHCP

Director of Rural Health Clinics/Urgent Care/ Specialty Clinic

On behalf of Abbeville General Hospital

Diabetes Project:
CQI Plan

Part V: Group Discussion: Q & A Session

Questions?

Please direct any additional questions to QIN at
reporting@lamcip.org