#### MCIP AGENDA 2022 Hypertension CQI Workshop April 20, 2022 (via ZOOM: 2:00-4:00pm)

TIME	PRESENTER
1:45 - 2:00	Login (including technical troubleshooting)
2:00 - 2:05	• Quality and Outcome Improvement Network, Inc.
	• Welcome and Introductions
	ON CQI PROJECT UPDATES
2:05 - 2:20	Lillian Spuria, Gjerset & Lorenz, LLP
	<ul> <li>2021 Performance &amp; 2022 Activities</li> </ul>
	AND REVIEW OF 2021 PERFORMANCE
2:20 - 2:25	Kandace Fontenot, Director of Clinical Informatics and
	Information Systems
	Allen Parish Community Healthcare
2:25 - 2:30	• Tina Faulk, BSN, RN, CDCES, Diabetes Education Program
	Coordinator
	Abbeville General Hospital
2:30 - 2:50	• Candi Meridith, MPH, Director Value Based Performance and ACO
	Operations MCIP Program
	Ochsner Medical Center
	Ochsner Medical Center – Kenner
	Ochsner Medical Center – Baton Rouge
	Ochsner Medical Center – North Shore
	Ochsner LSU Health Monroe
	Ochsner LSU Health Shreveport
	Slidell Memorial Hospital
	Southern Regional Medical Corporation
	St. Bernard Parish Hospital
	St. Charles Parish Hospital
	Ochsner St. Anne General Hospital
	Ochsner St. Mary
2:50 - 2:55	• Tabitha Brown, Clinical Navigator and Data Analyst, Quality and
	Patient Safety
	Terrebonne General Medical Center
2:55 - 3:00	BREAK
PART III: PATIENT TE	REATMENT GAPS
3:00 - 3:05	Penny Hutson, CFO, HCA MidAmerica Division
	Rapides Regional Medical Center
	Tulane University Hospital and Clinic

TIME	PRESENTER
3:05 - 3:10	<ul> <li>Tena Turnage, RN, Manager - Clinic Operations, Population Health         <ul> <li>Ochsner Abrom Kaplan Memorial Hospital</li> <li>Ochsner Acadia General Hospital</li> <li>Ochsner Lafayette General</li> <li>Ochsner St. Martin Hospital</li> <li>Ochsner University Hospital and Clinics</li> </ul> </li> </ul>
3:10 - 3:15	Marsha Gauthier, RN, Population Health     Opelousas General
PART IV: 2022 IMPRO	VEMENT ACTIVITIES
3:15 - 3:20	• Shelly Martinez, RN, Administrative Director - Clinical Quality Baton Rouge General The General Hospital
3:20 - 3:25	Michele Heflin, Clinical Integration Specialist     North Caddo Medical Center
3:25 – 3:30	• Tonya Corley, Office Manager, Group Operations 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
3:30 - 3:35	Cameron Jenkins, Clinical Quality Coordinator     St. Tammany Parish Hospital
PART V: LESSONS LEA	ARNED
3:35 - 3:40	Meagan Trahan, RN, Care Manager     Iberia Medical Center
3:40 - 3:45	Jeanine Thibodeaux, RN, Administrator     Pointe Coupee General Hospital
PART VI: CONCLUSION	N
3:45 - 3:55	Group Discussion/Questions & Answer Session     All Network Providers
3:55 - 4:00	Closing Remarks     Lillian Spuria, Gjerset & Lorenz, LLP

221341

## LOUISIANA MCIP Hypertension Project

CONTINUOUS QUALITY IMPROVEMENT ("CQI") WORKSHOP

April 20, 2022

GOALS FOR TODAY'S HYPERTENSION CQI WORKSHOP

### **Goals for Today's CQI Workshop:**

### **CQI** Project Update

- > CQI Overview
- CY2021 Performance
- > 2021 Data Analyses
- > 2022 Activities
- Network Providers to discuss the following components of the CQI plan:
  - 2021 Performance
  - Patient Treatment Gaps
  - 2022 Improvement Activities
  - Lessons Learned
- Collaborative discussions for all attendees regarding any hypertension project questions.

### PART I: HYPERTENSION CQI PROJECT UPDATES

LILLIAN SPURIA, GJERSET & LORENZ, LLP

## CQI OVERVIEW

## HYPERTENSION CQI PLAN

To ensure the Hypertension Project success, the Network researched and developed a continuous quality improvement ("CQI") plan. The CQI plan will help the Network to identify:

- Project impacts
- Lessons learned
- Plans for future activities
- > Key challenges with ongoing and future program projects
- > Barriers and areas of improvement

## HYPERTENSION CQI ACTIVITIES

#### In 2020, Network Providers:

- Enrolled Members into the Hypertension Registry
- Measured baselines
- Conducted ongoing training and education for providers
- Created action items to address treatment gaps and root causes for uncontrolled blood pressure
- Created a continuous quality improvement plan

2020

#### In 2021, Network Providers:

- Continued to enroll Members into the Hypertension Registry
- Measured performance
- Conducted ongoing training and education for providers
- Selected and implemented activities designed to address treatment gaps and root causes for uncontrolled blood pressure
- Conducted continuous quality improvement activities

2021

#### In 2022, Network Providers will:

- Continue to enroll Members into the Hypertension Registry
- Measure performance
- Conduct ongoing training and education for providers
- Continue activities designed to improve blood pressure control for Registry Members
- Conduct continuous quality improvement activities

2022

# $\begin{array}{l} Hypertension \ CQI \ Plan: \\ Plan - Do - Study - Act \ (``PDSA'') \ Model \end{array}$



PROJECT GOALS

- ➢ Goal #1: Increase number of members ages 18-85 with hypertension enrolled in a registry
- Goal #2: Increase members ages 18-59 who had a diagnosis of hypertension and whose blood pressure (BP) was adequately controlled (<140/90)</p>
- Goal #3: Increase members ages 60-85 who had a diagnosis of hypertension and whose BP was adequately controlled (<150/90)</p>

HYPERTENSION PROJECT: MEASURE CALCULATIONS

### **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 PERFORMANCE

## CY2021 Milestone Results

### Members enrolled in the Hypertension Registry: 100% Achievement

- CY2020 Network Baseline: 83,218
- > CY2021 Network Goal: 87,379
- > CY2021 Network Performance: 92,619

## CY2021 Milestone Results

Percentage of Members enrolled in the registry whose BP was adequately controlled (<140/90 ages 18-59): 89.05% Achievement

- > CY2020 Network Baseline: 56.64%
- > CY2021 Network Goal: 59.47%
- > CY2021 Network Performance: 59.16%

## CY2021 Milestone Results

Percentage of Members enrolled in the registry whose BP was adequately controlled (<150/90 ages 60-85): 58.81% Achievement

- CY2020 Network Baseline: 77.21%
- > CY2021 Network Goal: 81.07%
- CY2021 Network Performance: 79.48%

CY2021 MEMBER PARTICIPATION BASELINES

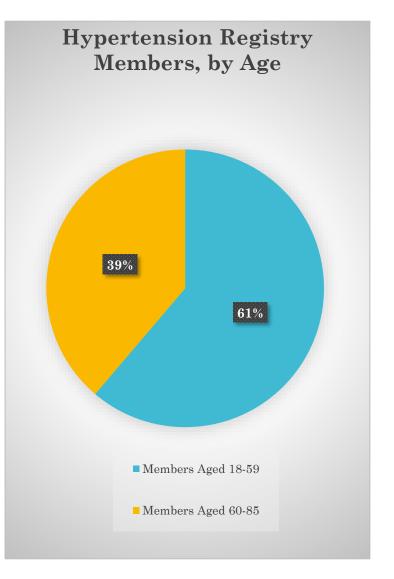
### <u>Member participation in activities designed to increase</u> <u>number of registry members with adequate BP control</u>

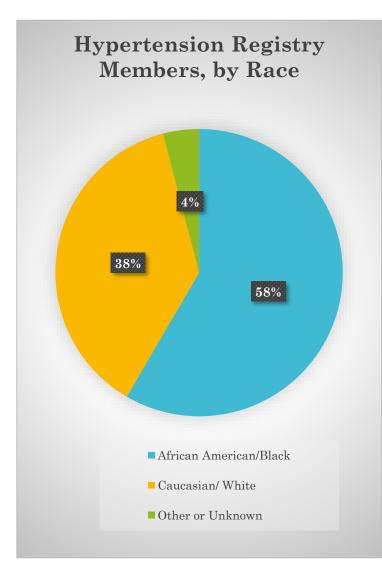
Providers chose the following activities:

- Ask members about their tobacco use at each visit and track data in the member's medical record.
- Educate providers on transportation services within the community to refer to members with transportation issues.
- Incorporate flexible scheduling (i.e., same day appointments, walk-ins, evening or weekend appointments).
- CY2021 Baseline: 37,570

## DATA ANALYSES

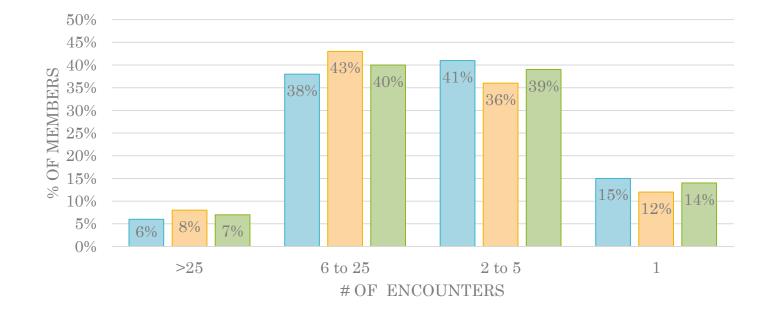
Profile of Hypertension Registry Members





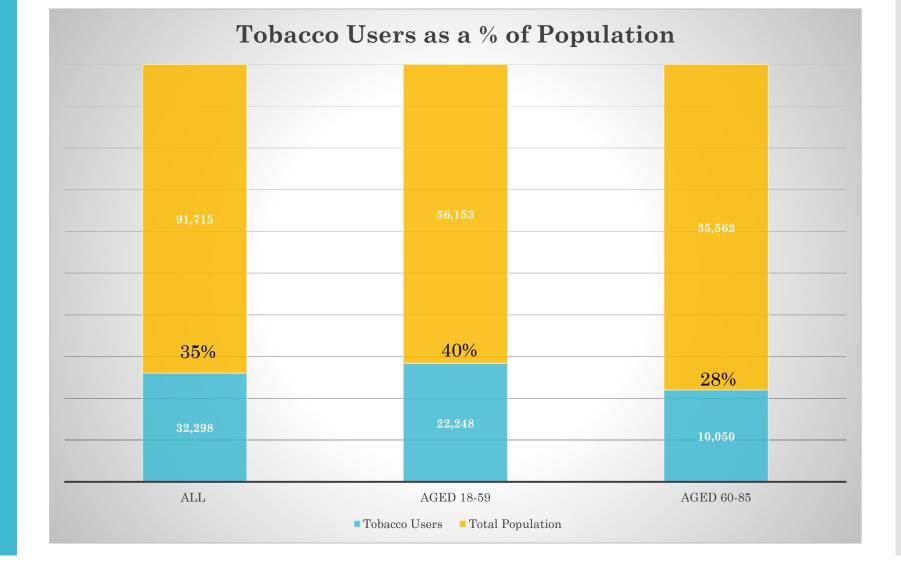
## 2021 Encounters

### Number of Visits per Year by Hypertension Registry Members



■ Members Aged 18-59 ■ Members Aged 60-85 ■ All

Tobacco Use Among Hypertension Registry Members



### <u>Members enrolled in the registry whose BP was adequately</u> <u>controlled, by race</u>

## CONTROLLED BLOOD PRESSURE

Age	All Registry Members	African American/ Black	Caucasian/ White	Other*
18-59	59%	55%	66%	63%
Total Members (Aged 18-59)	56,163	33,758	20,281	2,114
60-85	79%	76%	83%	82%
Total Members (Aged 60-85)	35,562	19,811	14,153	1,598

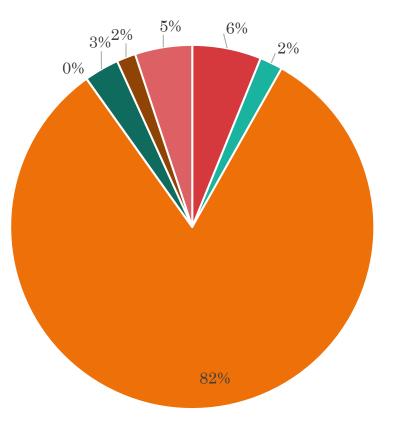
\*Other includes Asians, American Indians/Native Alaskans, and Other Individuals.

### CONTROLLED BLOOD PRESSURE

### <u>Members enrolled in the registry whose BP was adequately</u> <u>controlled, by tobacco use and activity participation</u>

Age	All Registry Members	Tobacco Users	Participate in Activities
18-59	59%	58%	59%
Total Members (Aged 18-59)	56,163	22,248	23,970
60-85	79%	78%	74%
Total Members (Aged 60-85)	35,562	10,050	13,312

### 2021 Hypertension Root Causes



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

Behavioral factors (e.g., Diet, Exercise, Alcohol, Tobacco, or Drug use)	5,672
Communication	1,884
Co-morbidity (e.g. Obesity, Diabetes, etc.)	75,828
Lack of Transportation	9
Linkages to Care Management	2,858
Low Levels Health Literacy	1,559
Lower Socioeconomic Status	4,703
Grand Total	92,513

## 2022 ACTIVITIES

2022 Performance Milestones

- ➤ 4.1 Increase in percentage of registry members that are participating in activities designed to increase adequate BP control.
- > 4.2 Additional increase in number of members ages 18-85 with hypertension enrolled in the registry.
- ➤ 4.3 Additional increase in percentage of members enrolled in the registry whose BP was adequately controlled (<140/90 ages 18-59).</p>
- 4.4 Additional increase in percentage of members enrolled in the registry whose BP was adequately controlled (<150/90 ages 60-85).</p>

## Continue Activity in 2022

2021 Activities designed to increase registry members with hypertension whose BP was adequately controlled	2021 Number of Network Providers	
Ask members about their tobacco use at each visit and track data in the member's medical record.	32	
Educate providers on transportation services within the community to refer to members with transportation issues.	1	
Incorporate flexible scheduling (i.e., same day appointments, walk-ins, evening or weekend appointments).	2	
Total:	35	
Activity Documentation is due 8/15/22		

CY2022 REGISTRY MODIFICATIONS

### <u>Race Drop Down</u>

• The drop-down menu in the "Race" data field has been removed to make the template more user-friendly. Network providers must still complete this field.

### Table Format & Primary Root Cause

- 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.

### Short Date' Format

• All data fields containing dates will be placed in 'Short Date' format (ex. MM/DD/YYYY).

2022 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 II: EVALUATION AND REVIEW OF 2021 PERFORMANCE

Allen Parish: 2021 performance in improving blood pressure control for registry members and findings for each age cohort 18-59 years old and 60-85 years old

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

On behalf of

Allen Parish Hospital

Abbeville: 2021 performance in improving blood pressure control for registry members and findings for each age cohort 18-59 years old and 60-85 years old

Tina Faulk, BSN, RN, CDCES, Diabetes Education Program Coordinator

On behalf of

Abbeville General Hospital

Ochsner: 2021 performance in improving blood pressure control for registry members and findings for each age cohort 18-59 years old and aged 60-85 years old

### Candi Meridith, MPH, Director Value Based Performance and ACO Operations MCIP Program

On behalf of

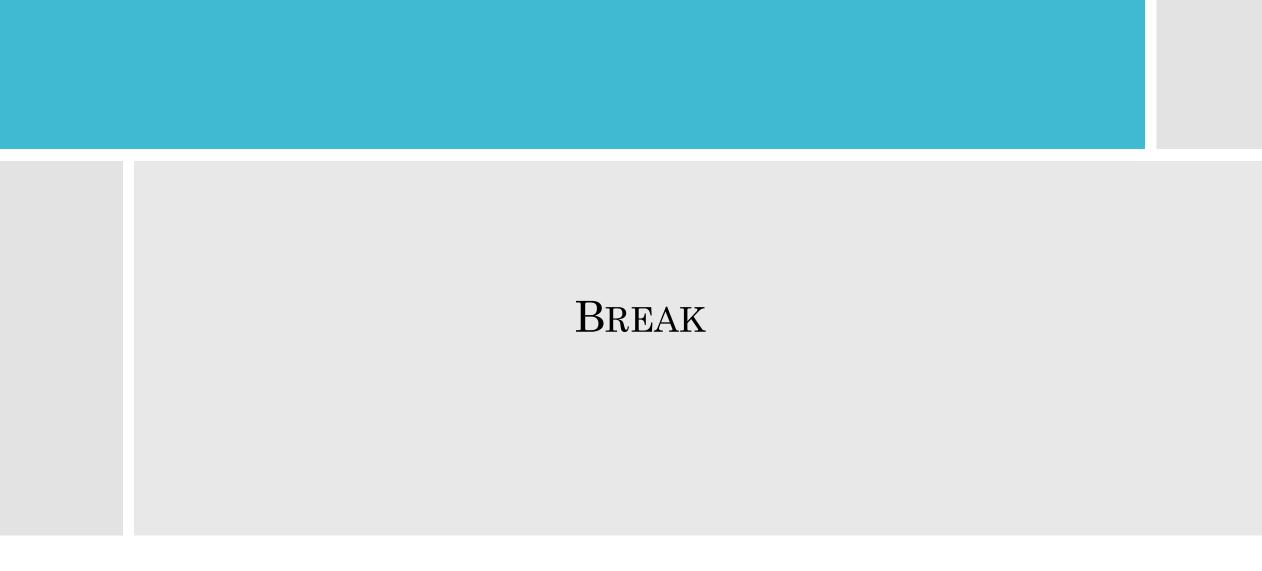
Ochsner LSU Health Monroe Ochsner LSU Health Shreveport Ochsner Medical Center Ochsner Medical Center – Baton Rouge Ochsner Medical Center – Kenner Ochsner Medical Center – North Shore Ochsner St. Anne General Hospital Ochsner St. Mary Slidell Memorial Hospital Southern Regional Medical Corporation St.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

Terrebonne: 2021 performance in improving blood pressure control for registry members and findings for each age cohort 18-59 years old and aged 60-85 years old

Tabitha Brown, Clinical Navigator and Data Analyst, Quality and Patient Safety

On behalf of

Terrebonne General Medical Center



### PART III: PATIENT TREATMENT GAPS

PATIENT TREATMENT GAPS HCA: Addressing patient treatment gaps Penny Hutson, CFO, HCA MidAmerica Division On behalf of Rapides Regional Medical Center Tulane University Hospital and Clinic PATIENT TREATMENT GAPS

#### Ochsner Lafayette General: Addressing patient treatment gaps

Tena Turnage, RN, Manager – Clinic Operations, Population Health

On behalf of

Ochsner Abrom Kaplan Memorial Hospital Ochsner Acadia General Hospital Ochsner Lafayette General Ochsner St. Martin Hospital Ochsner University Hospital and Clinics PATIENT TREATMENT GAPS Opelousas: Addressing patient treatment gaps Marsha Gauthier, RN, Population Health

On behalf of

**Opelousas** General

# PART IV: 2022 IMPROVEMENT ACTIVITIES

Baton Rouge General: Challenges and Approaches to increase participation in 2022 improvement activities

Shelly Martinez, RN, Administrative Director – Clinical Quality

On behalf of

Baton Rouge General Medical Center

The General Hospital

North Caddo: Challenges and approaches to increase participation in 2022 improvement activities

Michele Heflin, LPN, Clinical Integration Specialist

On behalf of

North Caddo Medical Center

CHRISTUS Health: Challenges and approaches to increase participation in 2022 improvement activities

**Tonya Corley, Office Manager, Group Operations** 

On behalf of

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

St. Tammany: 2021 Hypertension registry enrollment performance: challenges and areas of improvement Cameron Jenkins, MBA, Clinical Quality Coordinator On behalf of

St. Tammany Parish Hospital

## PART V: LESSONS LEARNED

## LESSONS LEARNED

Iberia: Incorporating lessons learned through the CQI workshops to improve the hypertension project Meagan Trahan, RN, Care Manager On behalf of Iberia Medical Center

## LESSONS LEARNED

Pointe Coupee: Incorporating lessons learned through the CQI workshops to improve the hypertension project Jeanine Thibodeaux, RN, Administrator On behalf of Pointe Coupee General Hospital

# PART VI: CONCLUSION

# CONCLUSION

#### Group Discussion / Q & A Session

All Network Providers

# CONCLUSION

#### Lillian Spuria, Gjerset & Lorenz, LLP

**Closing Remarks** 

# QUESTIONS?

Please direct any additional questions to QIN at <u>reporting@lamcip.org</u>