

CY 2019 Year In Review

The Mission of Children's Mercy Integrated Care Solutions (ICS) is to improve the health and well-being of children through integrated pediatric networks in the Kansas City area that are valued based, community focused, patient centric and accountable for the quality and cost of care.



Integrated Care Solutions (ICS) History

1996

Children's Mercy and Truman Medical Center form Family Health Partners (FHP), a Medicaid Managed Care Organization (MCO).



2002

Children's Mercy acquires Truman's interest and becomes sole owner of FHP.



2011

FHP serves 210,000 Medicaid recipients (adults and children) in Missouri and Kansas -- 85% of FHP enrollment is children.



2012

PCN is formed, an "ACO-like" organization to function as a pediatric network.

In anticipation of health care reform and the changing Medicaid landscape, Children's Mercy sells FHP to Coventry Health Care.

Global capitation agreement is made with Coventry and subsidiaries to medically manage over 112,000 eligible children in Kansas and Missouri.



2015

Children's Health Network, a pediatric clinically integrated network focused on commercial value-based programs, is formed.

CMHN changes name to Physician Business Partners.



2016

Name change from PCN to Children's Mercy Integrated Care Solutions (ICS) to more accurately reflect the portfolio for ICS network and value-based services.

Children's Mercy launches a new community-based primary care integration model known as Children's Mercy Affiliated Practices (CMAPs).

2017

KidCare Anywhere begins operations as a direct-to-consumer virtual health service.

Children's Mercy partners with Blue Valley School District for the provision of school-based social workers.

Children's Mercy Affiliated Practices (CMAPs) adds seven community pediatric practices.

Children's Health Network (CHN) enters into first value-based contract with Blue KC, worth \$3 million annually to the CHN practices.

Care Continuum created to align multi-disciplinary teams supporting care management and population health initiatives for patients and families.



2018

Children's Health Network (CHN) enters into additional value-based contracts with Aetna and Cigna, increasing CHN's attributed population with an additional 20,000 members. (50% increase)

Children's Health Network (CHN) enters into an affiliation agreement with Centrus Health KC, a clinically integrated adult network comprised of KU, Advent Health, North KC Hospital, and KCMHA. This allow CHN to become the pediatric component with potential direct-to-employer contracting and participation in narrow network products.

Children's Mercy Affiliated Practices (CMAPs) adds one additional community pediatric practice.



2019

Children's Mercy Integrated Care Solutions/Pediatric Care Network adds a fourth full-risk delegated contract with Aetna Better Health of Kansas. PCN now contracts with two Medicaid Managed Care Organizations (MCOs) in Kansas. This is the only full-risk contract that includes Behavioral Health.

Children's Mercy Affiliated Practices (CMAPs) adds three more practices, bringing the total to 12 community pediatric practices with a total of 75 physicians.

Children's Health Network is awarded the 2019 Leadership Award in the Kansas Summit on Quality. Children's Health Network quality improvement project/poster is awarded 1st Place at the Children's Mercy 11th National Healthcare Quality Session.

Value-Based Care Model

(Single entity with multiple lines of business/payer sources)



Pediatric Care Network (PCN)

Network for Medicaid Population

The logo for Children's Mercy Pediatric Care Network, featuring the stylized person-and-child icon and the text "Children's Mercy PEDIATRIC CARE NETWORK".

Children's Health Network (CHN)

Clinically Integrated Network for Commercial/Self Funded Employer Populations

The logo for Children's Health Network, featuring the stylized person-and-child icon and the text "Children's Health Network".

Physician Business Partners (PBP)

- Group Purchasing
- Education
- Vaccine Programs
- Business Support Services

The logo for Children's Mercy Physician Business Partners, featuring the stylized person-and-child icon and the text "Children's Mercy PHYSICIAN BUSINESS PARTNERS".

***KidCare Anywhere**

Network of Community-Based and CMH Pediatrics to provide virtual office visits (non-facilitated telehealth)

The logo for KidCare Anywhere, featuring the stylized person-and-child icon and the text "KidCare Anywhere CHILDREN'S MERCY".

***Children's Mercy Affiliated Practices (CMAPs)**

Wholly-Owned CMH Subsidiaries Community-Based Pediatric Group Practices

The logo for Children's Mercy Affiliated Practices, featuring the stylized person-and-child icon and the text "Children's Mercy Affiliated Practices".

***Care Continuum**

Inpatient Care Management
Ambulatory Care Management
Utilization Review
Community & School-based Care
Home Care

The logo for Children's Mercy Kansas City, featuring the stylized person-and-child icon and the text "Children's Mercy KANSAS CITY".

Children's Mercy Payor Relations

Children's Mercy Hospital & Clinics
Payor Contracts Reimbursement
Provider Enrollment

The logo for Children's Mercy Kansas City, featuring the stylized person-and-child icon and the text "Children's Mercy KANSAS CITY".

*ICS has a role in these multidisciplinary hospital-wide initiatives.



Pediatric Care Network (PCN)

Children's Mercy Integrated Care Solutions (ICS) is the organization hierarchy for **Pediatric Care Network (PCN)**.

The Pediatric Care Network (PCN) offers a care integration program that provides comprehensive Case Management (CM)/Care Coordination (CC), Disease Management (DM), and Utilization Management (UM) using population health concepts and tools. The program focuses on preventive health and coordinating a member's care across the continuum through:

- Negotiating, procuring, and coordinating services and resources needed by patients and families with complex needs
- Facilitating care transitions across care settings
- Ensuring and facilitating the achievement of quality, clinical, and cost outcomes

Pediatric Care Network (PCN)

Network for Medicaid Population

Missouri

23 PCP Practices

43 PCP Locations

112 PCPs

750 CM Pediatric Specialists

7 NCQA PCMH (19 locations)

Kansas

10 PCP Practices

15 PCP Locations

48 PCPs

750 CM Pediatrics Specialists

3 NCQA PCMH (7 locations)



Children's Mercy
PEDIATRIC CARE NETWORK

- Assessing patient needs and developing patient-centered care plans and interventions
- Addressing and resolving patterns of issues that have negative quality or cost impact
- Continually evaluating the effectiveness of program interventions to improve quality and outcomes

PCN contracts with Medicaid Managed Care Organizations (MCOs) in both Missouri and Kansas. PCN is accountable for the quality and cost of

care for the defined pediatric population under a global capitation amount from the MCO. The global capitation is the amount PCN is paid each month for all individual members and represents the medical portion of the premium that the state Medicaid program pays the MCO. The PCN service area is defined by county designation and category of aid for children defined by each state. PCN currently contracts with:

- **Missouri Care, a WellCare Health Plan:** 48,089 members
- **UnitedHealthcare Community Plan of Missouri:** 30,689 members
- **UnitedHealthcare Community Plan of Kansas:** 28,284 members
- **Aetna Better Health of Kansas:** 20,106 members

PCN: What We Do

Improve Health Care Delivery by Offering:

- **Simplified administration and reduced fragmentation**, including standardized claim submission requirements, payment policies, and credentialing processes
- **Better population-based clinical tools and medical home support tools** such as Health Information Technology and aggregated data for the pediatric population in Kansas City
- **Payment system reform:** “value based” payment, opportunities for at-risk contracting, sharing savings, and other creative payment models

- **Delegated health plan administration**, including medical management, provider credentialing, and disease management programs

PCN employs multiple disciplines for population health management initiatives that are organized into PCP-aligned Care Teams. There are currently four teams that include registered nurses, licensed social workers, community resource specialists, and practice facilitation specialists. Additionally, a fifth team is comprised of behavioral health specialists, care facilitation nurses, and care facilitation coordinators specific to completing intake and behavioral health delegation activities.

The Objectives:

- Assist members in sustaining or achieving an optimal level of wellness and function by facilitating timely and appropriate health care services
- Promote strong PCP and member relationships that include population management and patient-centered medical home tools
- Educate members in self-advocacy

and self-management

- Minimize gaps in care and encourage use of preventive health services
- Achieve cost efficiency in the provision of health services
- Mobilize community resources to meet needs of members

For more information, view the [PCN Annual Report](#) on the Integrated Care Solutions website at www.cmics.org/pcn/.

2019 Overall Highlights Include:

- Effective July 1, 2019, PCN contracted with a fourth full-risk delegation capitation Medicaid Managed Care Plan – Aetna Better Health of Kansas. PCN now provides delegation for two of the three MCOs in Kansas and two of the three MCOs in Missouri.
 - For the first time, the PCN delegated agreement includes Behavioral Health. In preparation, PCN formed a team dedicated to the behavioral health delegation activities made up of care facilitation nurses and care facilitation coordinators focused on behavioral health.



In working with PCN, we partner to provide the best care possible for our mutual patients. By having data, we can efficiently work together to get patients in for check-ups/vaccines as well as maintain a medical home for their well visits.

-- Jennifer Sauer, MD, Lee's Summit Physicians Group



- o PCN engaged the local community mental health centers, acute hospitals, and psychiatric residential treatment facilities to form collaborative partnerships in the administration of the delegated behavioral health activities.
- PCN continues to support and initiate continued education to network providers for the integration of behavioral health into primary care offices.
- PCN continues to support community practices in achieving quality performance metrics. The PCN metric targets are designed to mirror state and health plan quality performance expectations. PCN has distributed over 3 million dollars in incentive and

shared savings to performing network practices.

- o Between the 2018 performance metrics and the 2019 performance metrics, PCN is pleased to report:
 - 8% Percentage Point Increase - Well Child Exams 0-15 months
 - 2% Percentage Point Increase - Well Child Exams 3-6 Years Old
 - 2% Percentage Point Increase - Adolescent Well Child
 - 7% Percentage Point Increase in the medical management of Asthma
 - 10% Decrease in ED Utilization
- Launched PCN Quality & Network Operations Meetings for Kansas PCN providers that are like the already-established Missouri



58 Organizations
750+ Pediatric Specialists
217 Primary Care Providers
 (112 Missouri, 48 Kansas, 57 Children's Mercy)

PCN Covered Lives

Missouri



78,778 Total



48,089
Missouri Care



30,689
UnitedHealthcare
- MO

Kansas



48,390 Total



28,284
UnitedHealthcare
- KS



20,106
Aetna Better
Health of Kansas

as of 12/31/2019

PCN Meetings. The intent is to increase transparency to the network of providers regarding network and practice level performance.

- Expanded the post NICU Home Care Support Program to two additional facilities in the state of Missouri and began process of exploring expansion into Kansas facilities.
- Enhanced partnership with embedded community health worker to further support community resource linkage for families, including beginning onsite support for members at a local high school two days per week.
- PCN staff has totally committed to focused LEAN initiatives to improve process development and service provisions.
- Performed in-depth review of PCN Care Planning tool to align goals and interventions with specific disease states. From this review, PCN staff members

identified areas to gain more knowledge and began staff-led condition specific education series to include, but not limited to, education on Asthma, Diabetes, and Behavioral Health needs.

- PCN Representatives continue engagement with each PCN community provider in Missouri and Kansas to support:
 - Primary Care Medical Home processes
 - Cost/Utilization data management
 - Quality HEDIS Metric management and tools for support continued identification of patients and well child/immunization needs
 - Direction and utilization of the population management tool for practice use.
 - Help to analyze trends and opportunities to increase performance
 - Tri-Annual Data reviews with each PCN Practice including administrative and clinical staff

Kansas Delivery System Reform Incentive Payment (DSRIP)

The Kansas Delivery System Reform Incentive Payment Program (DSRIP) is drawing to a close at the end of 2020 after a two-year extension granted through KanCare 2.0. Children's Mercy is proud to share we have successfully captured an average of 93% of the incentives available per year through performance measures.

The DSRIP program in Kansas includes two major hospitals: Children's Mercy Kansas Hospital and The University of Kansas Hospital. Children's Mercy's projects that were managed in ICS and CM Beacon Clinic include expansion of patient-centered medical homes in the rural areas of the state of Kansas and the implementation of the Beacon Program to improve coordinated care for KS Children with Medical Complexities.

In 2014 the DSRIP pool program was implemented as part of the Kansas Medicaid delivery system overhaul. DSRIP seeks to advance the goals of access to services and healthy living. The DSRIP Program specifically focuses on incentivizing projects that increase access to integrated delivery systems and projects that expand successful models for prevention and management of chronic and complex diseases.



Children's
Health
Network



Children's Health Network (CHN)

Children's Mercy Integrated Care Solutions (ICS) is the organization hierarchy for **Children's Health Network (CHN)**.

Children's Health Network (CHN) is a clinically integrated network of pediatric providers that includes independent community pediatric providers and providers who are employed or contracted with Children's Mercy in the Kansas City and surrounding area. The objective of the clinically integrated network is to deliver high value care that meets the Triple Aim for all children, specifically better care, smarter spending, and healthier children. CHN believes value-based payment contracts and clinical integration between community and health system providers are necessary to align incentives and create an integrated and coordinated care management approach for children.

Children's Health Network (CHN)

Clinically Integrated Network
for Commercial/Self Funded
Employer Populations

24 Independent Pediatric
PCP Practices

199 Pediatric PCPs

63 CM Pediatric PCPs

750 CM Pediatric Specialists

10 NCQA PCMH (13 locations)



Children's
Health
Network

In 2015, recruitment began for like-minded community pediatricians committed to population management and the highest quality outcomes for their patients. There are now 23 participating practices in and around the Kansas City area! CHN providers are motivated to be part of CHN by the opportunity to enhance the quality of care provided to all their patients, to collectively build and obtain access to information technology necessary to practice population health, and to build a network of providers to market to payers and employers on the basis of quality and cost efficiency.

Physician leadership, provider participation and professional management are the keys to the success of CHN. Participating providers have developed a common set of clinical practice guidelines, quality goals, and performance measures for CHN to focus on. CHN has a governing structure that is led by the community practices and supported by CHN. As members, Children's Mercy providers are also represented in each of the decision-making committees.

Want to learn more about Children's Health Network? Please visit www.cmics.org/chn.

CHN developed an educational webinar in 2018 on what value-based care means and how it impacts providers and teams delivering care. Check out the webinar at <https://www.cmics.org/Education/Education/ModulesPublic?EducationID=13>

2019 CHN Highlights

- CHN presentation on Improving Chronic Care & Outcomes Using an Operations Framework within a Pediatric Clinically Integrated Network at the Children's Hospital Association Annual Leadership Conference in November 2019.
- CHN's quality improvement poster on "Improving Pneumococcal Vaccination Rates in High Risk Patients Across Multiple Specialty

Improving Pneumococcal Vaccination Rates in High Risk Patients Across Multiple Specialty Divisions

Rachel Moran; Julia Harris, MD; Claire Olsen, PharmD; Rana El Feghaly, MD, MSCI; Liset Olarte, MD; Doug Blowey, MD; Luke Harris

Children's Mercy Kansas City, Kansas City, Mo

Introduction

- Pediatric patients with deficient immune systems or certain chronic medical conditions have an increased risk of acquiring invasive pneumococcal disease.
- The 23-valent pneumococcal (PPSV23) vaccine provides protection against 23 pneumococcal serotypes and is recommended for patients aged 2 years or older who are high-risk for invasive pneumococcal diseases.
- Unfortunately, many high-risk patients are not properly vaccinated due to lack of provider knowledge or understanding of accountability between primary care and specialty providers.
- The goal of this project was to improve PPSV23 vaccination rates by 10-20% points across multiple Children's Mercy Kansas City specialty divisions.

Methods

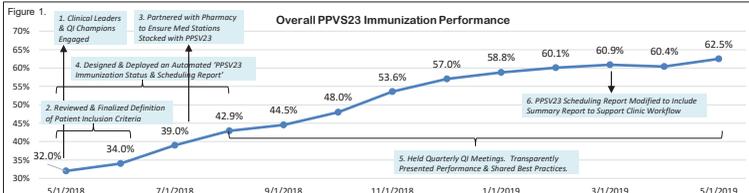
Several improvement interventions between May 2018 and May 2019 (Figure 1)

1. Engaged clinical leaders and quality improvement champions in infectious diseases, pulmonology, and rheumatology
2. Reviewed and finalized definition of patient inclusion criteria for high risk pneumococcal vaccination in alignment with CDC/ACIP immunization recommendations.¹ Confirmed PCPs not administering or stocking PPSV23
3. Partnered with pharmacy to ensure med stations adequately stocked with PPSV23
4. Designed and deployed an automated weekly 'PPSV23 Immunization Status & Scheduling' report to inform pre-visit planning
5. Quarterly quality improvement meetings held to review performance, share best practices, and share lessons learned
6. 'PPSV23 Immunization Status & Scheduling Report' modified to include summary page to more effectively integrate information into specialty clinic workflow

References

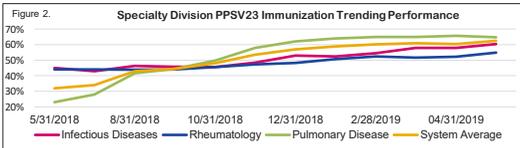
¹ CDC. 2019. Recommended Child and Adolescent Immunization Schedule for Ages 18 Years or Younger.

Methods



Results

- PPSV23 immunization rates increased by over 30 percentage points from 32.0% to 62.5% [Figure 1]
- Rheumatology improved by 25%, infectious diseases by 34%, and pulmonology by 181% [Figure 2]



Conclusions

- In 1 year, PPSV23 vaccination rates almost doubled!
- Best practices will continue to be identified, refined, and integrated across specialty divisions.
- With proven PPSV23 vaccination improvement methods, additional specialty divisions will be recruited.
- To support engagement, team will add opportunity for specialists to receive American Board of Pediatrics Maintenance of Certification Part 4 credit for project participation.
- Initiative will have opportunity to reach more than 10,000 additional high-risk patients in need of protection from invasive pneumococcal disease.



Children's Mercy
KANSAS CITY



CHN presented an award-winning Quality Improvement poster regarding Pneumococcal vaccination improvements within Children's Mercy specialty divisions in October 2019.

- Divisions" was awarded first place at Children's Mercy's 11th National Healthcare Quality Week Poster Session in October 2019.
- CHN continued to increase quality performance across 10+ primary care quality measures. Since network formation, the network has seen:
 - 52-64% point increases across 4 screening Measures (Counseling for Nutrition, BMI Percentile Screening, Depression Screening, Tobacco Use Screening)
 - 8-26% point increases across 4 immunization

- measures (Age 2 Immunization Combo, Age 6 Immunization Combo, Age 13 Immunization Combo, HPV Immunization for Adolescents)
 - 5-19% point increases across 3 well visit measures (15 months, 3-6 Years, 12-18 Years)
 - 17% point increase in asthma management office visits (i.e. 2+ asthma visits per year)
- The network held our second annual Children's Health Network All Provider Luncheon during the 2019 Children's Mercy Clinical Advanced in Pediatrics Symposium (CAPS)

on September 27th. This is CHN's only all-provider event to discuss the network, performance results, network achievements, and strategic priorities.

- Launched an initiative to evaluate and more effectively integrate behavioral health services within primary care practices.
- Continued to partner and develop the affiliation agreement with Centrus Health KC, a local adult clinically integrated network inclusive of North Kansas City, Advent Health, the University of Kansas Health System, and independent physicians included in the Kansas City Metropolitan Physician Association. Most notably, Centrus/CHN finalized a "direct-to-employer" value-based agreement with Cerner's self-insured health plan.
- Continue to advance network's understanding of cost & utilization performance, highlighted by the development of an avoidable ED visit tool kit and resources to support practices efforts to reduce ED visits for non-emergent issues.
- Network continues to monitor and evaluate chlamydia screening quality improvement efforts. Historically, CHN has struggled to drive improvement. Through detailed review and committee discussion/feedback, the network identified

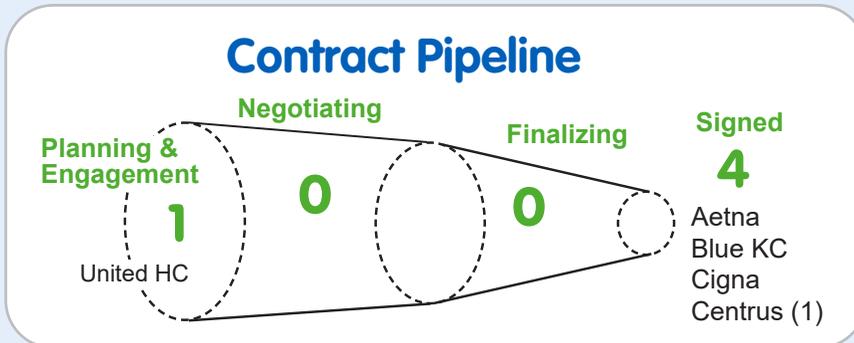
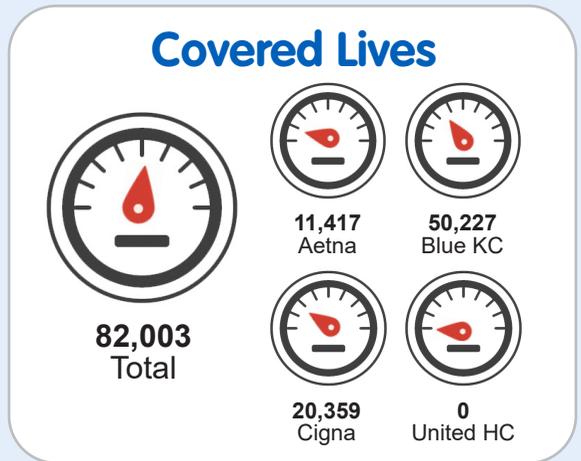
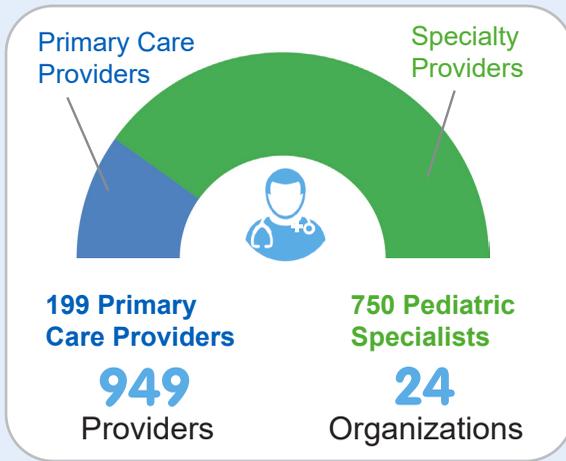
key quality improvement tactics (i.e. pre-visit planning, use of standard scripting, managing test process in-house, and using CHN population health platform) that have supported a 30% performance increase across the network.

- CHN exceeded 2018 targets for all 10 quality incentive measures across all CHN value-based agreements. Performance in 4 of 10 measures exceeded HEDIS national 90th percentile.
- CHN earned approximately 92% of 2018 Blue KC value-based incentives based on both quality (100%) and cost (82%) outcomes, resulting in estimated annual incentives of approximately \$3.6M.
- CHN awarded "2019 Leadership in Quality Award" at the 2019 Kansas Summit on Quality. Award honored CHN for leadership in improving quality, safety, and value for children.
- CHN poster and presentation on "Systematically Improving Quality within a Pediatric Clinically Integrated Network" featured at 2019 Kansas Summit on Quality & CHA 2019 Quality & Safety Conference.
- Finalized contract with new population health technology platform vendor (Innovaccer) in May 2019 and have nearly completed effort to replicate CHN's existing claims-based

- data infrastructure.
- CHN launched effort to implement comprehensive EMR data feeds with Innovaccer. Implementation in progress with target completion by end of Q2 2020.

- Launched new process for all CHN physicians to receive Maintenance of Certification (MOC) Credit for CHN quality improvement efforts (Two 2017/2018 historical projects & two 2018/2019 projects)!

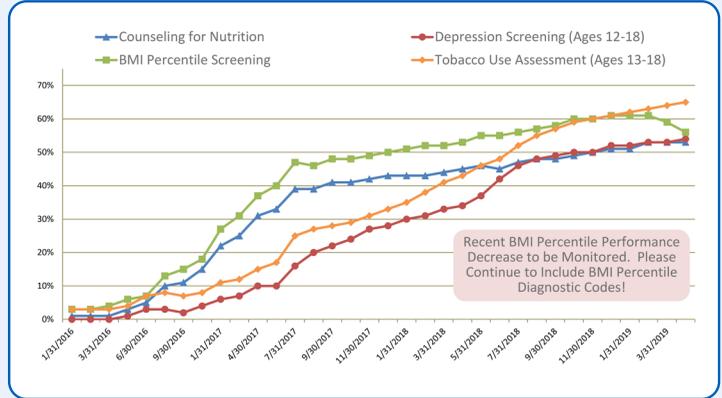
CHN Network Operations Dashboard



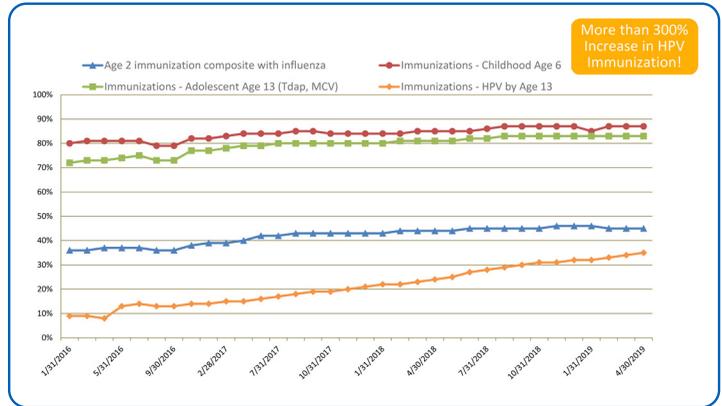
as of 12/31/2019

- CHN continued to increase quality performance across 10+ primary care quality measures in 2019!

- 34-51% point increases across 4 screening measures (Counseling for Nutrition, BMI Percentile Screening, Depression Screening, Tobacco Use Screening)



- 4-24% point increases across 4 immunization measures (Age 2 Immunization Combo, Age 6 Immunization Combo, Age 13 Immunization Combo, HPV Immunization for Adolescents)



- 5-14% point increases in 3 screening well visit measures (Well Child Visits – 15 Months, Well Child Visits – 3-6 Years, Adolescent Well Care Visits)





Physician Business Partners (PBP)

Children's Mercy Integrated Care Solutions (ICS) is the organization hierarchy for **Physician Business Partners (PBP)**.

Physician Business Partners (PBP) was formed in 1995. It was originally established in response to the changing healthcare environment, typified by the conversion of Medicaid to managed care. Community providers formed the first pediatric focused purchasing organization in the area. Since the original founding, the mission of this organization has evolved to become a more consultative organization focused on group purchasing opportunities, discounts with premier business partners, and educational opportunities for members.

Physician Business Partners (PBP)

- Group Purchasing
- Education
- Vaccine Programs
- Business Support Services

40 Practices
187 PCPs (127 KC Area,
60 Outside KC Area)



PBP was the first and still the only pediatric group purchasing organization in the region and provides valuable educational opportunities to member practice staff and physicians.

PBP has **187** physician members representing **40** practices.

PBP members have an opportunity to purchase services/supplies from various vendors that include, but are not limited to:

- Child Health Advantage vaccine program
 - GlaxoSmithKline vaccines
 - Medimmune vaccines
- Provista GPO
- Group mobile phone discounts
- Office supplies, office furniture and equipment
- Practice support resources

PBP member physicians and office staff can attend educational events that included the following in 2019:

- Quarterly Networking Meetings
- FCRA, EEOC & Criminal Records: The Best Practices for Compliance
- Provider and Staff Burnout
- A Call Away – Telephone Triage
- Evaluate, Elevate & Ensure: A How to Presentation on Employee Morale Financial Reporting
- Children and Electronics, The Challenge
- Making the Right Hiring Decisions

MISSION: To support the continuum of pediatric and adolescent healthcare in the region. Our member physicians are supported through ongoing communication, educational programs and other services offered through network membership enabling them to provide quality health services to their patients.

- Documentation Best Practices
- Membership also entitles them to participate, without additional cost, in the Children's Mercy Clinical Advances in Pediatrics Symposium.

The 2020 topics will include a discussion about Pediatric Office Designs and Coding.

2019 Overall Highlights

- Business support services provided to 40 practices (25 in KC Area/15 outside of the KC area)
- Worked with Provista (GPO) to align accounts and PBP
- Ten PBP educational programs
- Eleven new GSK accounts were added to the vaccine contract
- Monthly newsletters



[Click to view](#) the latest issue of the PBP Insider newsletter.

2020 PBP Educational Events (Tentative Schedule)

January 28
Quarterly Office Manager Networking Breakfast
 9:00 – 10:30am

February 11
Pediatric Office Designs
 Jessica Morrow
 Healthcare Practice Leader
 Dimensional Innovations
 9:00 – 10:30am

March
 Cancelled

April 23
A Call Away! Telephone Triage
 8:00am – 5:00pm
 Multiple Speakers

May 7
 Chip Hart
 Director, Pediatric Solutions
 Consulting Group
 Physicians Computer
 Company
 9:00 – Noon

June 11
 TBD

July
Quarterly Office Manager Networking Breakfast
 9:00 – 10:30am

August
Coding, Coding, Coding and More in 2020
 Donelle Holle
 President & CEO
 Peds Coding, Inc.
 9:00am – Noon

September
Clinical Advances in Pediatrics
 8am – 5pm
 Children's Mercy Park

October
Quarterly Office Manager Networking Breakfast
 9:00 – 10:30am

November
 TBD

December
 No Meeting

*All events scheduled for Kauffman Foundation Conference Center unless otherwise noted



KidCare Anywhere
CHILDREN'S MERCY



KidCare Anywhere

KidCare Anywhere is Children's Mercy's direct-to-consumer virtual health service that offers access to a Children's Mercy pediatric provider in minutes via smartphone, tablet, or computer to help treat a child's non-emergency conditions. Patients access KidCare Anywhere via an app available for Android and Apple. Providers can discuss, provide guidance, and often treat children's minor ailments and illnesses while the patient is in the comfort of their own home -- or anywhere.

**Available 5 p.m. to 10 p.m.,
seven days a week**

The Children's Mercy (CM) Department of Telemedicine oversees the operations of this service. Since the inception of KidCare Anywhere, Telemedicine has been working with Children's

KidCare Anywhere

CMH Pediatricians
Providing Virtual
Office Visits
(Non-Facilitated Telehealth)



KidCare Anywhere
CHILDREN'S MERCY

Mercy Integrated Care Solutions (ICS) to promote the service and assist families in the registration process. ICS identified eligible pediatric patients who are enrolled in its Pediatric Care Network (PCN). These patients are members of Medicaid Managed Care Organizations (MCO) that contract with PCN under a global capitation agreement, wherein ICS assumes accountability for the care and cost of eligible pediatric patients.





Children's Mercy Affiliated Practices (CMAPs)

As the U.S. healthcare delivery system moves from fee-based healthcare services to value-based population health management, hospitals, physicians, and other providers are exploring ways to better manage the care of patient populations.

In the spring of 2016, Children's Mercy (CM) began the development of a new community-based primary care integration model. This unique model, known as the Children's Mercy Affiliated Practice model or "CMAP" integrates community pediatric practices with CM while allowing the community practices and physicians to maintain their independence. CM does not purchase the practices but does create a new wholly-owned subsidiary for each CMAP that employs the physicians and staff.



Once we partnered with CMAPs, it has been very beneficial to us with the quality of care we give to our patients."

-- Chuck Moylan, MD
Pediatric Associates



Children's Mercy Affiliated Practices (CMAPs)

Wholly-Owned CMH Subsidiaries
Community-Based
Pediatric Group Practices



Children's Mercy
Affiliated Practices

Each CMAP has its own unique tax ID number, a physician-led board of directors, and budget. The physicians in the CMAP continue to maintain responsibility for the day-to-day operations and may choose to access some of the hospital resources, including employee benefits. Although CM owns the subsidiary or “affiliate”, CM does not subsidize the CMAP financially.

CMAPs are committed to working together for healthier kids, sharing best practices and collaborating with like-minded pediatricians to improve how care is delivered.

The integration and affiliation of the CMAPs with CM results in the following benefits:

- Better coordination of care
- Improved outcomes for quality performance and efficiencies
- Gives CM a community-based physician network of affiliated primary care pediatricians
- CMAPs and CM meet regularly to collaborate on CM strategic objectives and CMAP operational efficiencies
- Enables better collaboration for population health management and alternative payment models
- Improves operating results for the CMAP by participating in the CM payer contracts
- Allows CMAPs early opportunities to participate in innovative CM pilot initiatives around improving quality, safety, sharing of data, and improving communication.

As of December 31, 2019, there are 12 CMAPs operating in 13 locations with 72 physicians in the Kansas City area.



We are all happy to be a part of the group. The leadership is outstanding and the interaction between the members, providing great feedback has helped us to better understand our practice as it relates to other pediatric offices. We look forward to learning/sharing more in the years to come.

-- Dave Johnson, Practice Manager
Cradle Thru College Care





Being a member of CMAPs has been invaluable to our practice. Obtaining higher reimbursements through contracting relationships with insurance companies has been seamless. Our affiliation with CMAPs has decreased the burden on non-patient care duties for our doctors and administrative staff. In turn, we are able to focus more on providing high-quality patient care and other practice improvements, such as remodeling our office and hiring new physicians.



-- Ermalyn Kubart, MD, Pediatric Care North

Timeline

June 2016 CMH Board Approves CMAP Model

December 2016 Children's Mercy – Johnson County Pediatrics, Inc.
Becomes First CMAP



Johnson county **pediatrics**
An Affiliate of Children's Mercy

March 2017 Children's Mercy – Pediatric Care Specialists, Inc.



Pediatric Care Specialists
An Affiliate of Children's Mercy

May 2017 Children's Mercy – Pediatric Associates, Inc.



Children's Mercy – Pediatric Care North, Inc.



July 2017 Children's Mercy – Cass County Pediatrics & Adolescents, Inc.



Cass County Pediatrics & Adolescents
An Affiliate of Children's Mercy

Aug. 2017 Children's Mercy – Preferred Pediatrics, Inc.



Oct. 2017 Children's Mercy – Redwood Pediatrics, Inc.



Dec. 2017 Children's Mercy – Cradle Thru College Care, Inc.



Cradle thru College Care
An Affiliate of Children's Mercy

Aug. 2018 Children's Mercy – Summit Pediatrics and Adolescent Medicine, Inc.



Summit Pediatrics
And
Adolescent Medicine
An Affiliate of Children's Mercy

July 2019 Children's Mercy – Shawnee Mission Pediatrics, Inc.



Shawnee Mission Pediatrics
An Affiliate of Children's Mercy

Aug. 2019 Children's Mercy – Health Care for Children, Inc.



Health Care for Children
An Affiliate of Children's Mercy

Sept. 2019 Children's Mercy – Leawood Pediatrics, Inc.



Children's Mercy Affiliated Practice Locations



- 1** Cass County Pediatrics & Adolescents – an Affiliate of Children's Mercy
- 2** Cradle Thru College Care – an Affiliate of Children's Mercy
- 3** Health Care for Children – an Affiliate of Children's Mercy
- 4** Johnson County Pediatrics – an Affiliate of Children's Mercy
- 5** Leawood Pediatrics – an Affiliate of Children's Mercy
- 6** Pediatric Associates (Lee's Summit) – an Affiliate of Children's Mercy
- 7** Pediatric Associates (Plaza Office) – an Affiliate of Children's Mercy
- 8** Pediatric Care North – an Affiliate of Children's Mercy
- 9** Pediatric Care Specialists – an Affiliate of Children's Mercy
- 10** Preferred Pediatrics – an Affiliate of Children's Mercy
- 11** Redwood Pediatrics – an Affiliate of Children's Mercy
- 12** Shawnee Mission Pediatrics – an Affiliate of Children's Mercy
- 13** Summit Pediatrics and Adolescent Medicine – an Affiliate of Children's Mercy



Care Continuum

The Department of Care Continuum incorporates system-wide, multi-disciplinary teams providing care management and population health initiatives for patients and families across settings of care. The Department aligns the following areas under centralized leadership to optimize patient transitions and outcomes: inpatient care management; ambulatory nurse care management; utilization review; payer delegated medical management/population health; school based social work; and Home Care.

These areas work together to provide a seamless healthcare journey for patients. Success is measured by decreased readmission rates and appropriate emergency room utilization rates.

To align with the hospital stewardship goal for FY2020, the Care Continuum set a goal to decrease 7-Day readmission rates for patients followed by the Care Continuum.

Care Continuum

Inpatient Care Management

Ambulatory Care Management

Utilization Review

Community &
School-based Care

Home Care



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Stewardship:

Decrease 7-Day readmission rate for CMH Risk population by additional 1% from February 2017 baseline of 3.33%.

Target: 8% decrease from Feb 2017 baseline or a 3.07% 7-day readmission rate.

Stretch: 9% decrease from Feb 2017 baseline or a 3.03% 7-day readmission rate.

In February 2020, we were meeting our stretch target with a (rolling 12-month) 7-day readmission rate of 3.03% for the Care Continuum population.

9% decrease in 7-day readmission rates over 2017 baseline.

ER Utilization continues to trend flatly, with a combined 66% of visits for the Care Continuum population falling into “semi-urgent” and “non-urgent” categories.

Each area in the Care Continuum contributes to both the patient experience and the hospital’s overall success. For example, the Utilization Review department does not interface directly with patients but advocates for them and the hospital with payers to prevent denials, which decrease hospital revenues and can place financial strain on patients and families.

Care Continuum participated in a rapid process improvement workshop in April 2019 with the goal of developing a process to reduce gaps in care and improve the patient experience across settings. The result of the improvement workshop was the Care Navigation process, which was launched in the PCC clinics in summer 2019. Care Navigation provides a single point of contact to patients and families to remove barriers to care, coordinate across settings, and assist families in self-determined goals.

Other highlights for the Care Continuum department in 2019 included reorganization leadership and team structure to reduce redundancies and improve collaboration between care team members.

Home Care

Children's Mercy Home Care is a department of highly trained specialists focused on assisting patients and families with their medical needs as they transition to their home environment.

The staff consists of more than 20 certified pediatric professionals, nurse managers, physical, occupational, speech and clinical respiratory therapists, as well as experts in pharmacy, medical social work and durable medical equipment and supplies. The team actively coordinates with area pediatricians, hospitals and schools to ensure patients and families receive the home care services they need to prevent hospital readmissions and to assure the best possible outcomes.

Home Care services are provided in 21 counties in Missouri and Kansas.

Home Care has 18 certified pediatric nurses on staff.

Home Care serviced 1,136 PCN patients in 2019.



Because we live about 45 minutes from Children's Mercy, Home Care saves us two trips to the hospital each week. Plus, home visits limit Lucas' exposure to outside germs, and make therapy a much more comfortable experience for him.

-- Shannon Whitacre, Lucas' Mother



I was never so happy to see the home care nurse at my door the next day after our 4-month stay in the NICU.

-- Mother of Former NICU Patient



Home Care experienced significant growth across all service lines in 2019.

49% increase in revenue over 2018.

28% increase in reimbursement over 2018.

26% increase in service volumes over 2018.

Children's Mercy is the only full-service pediatric Home Care agency in the region.

School-Based Services Program

The Children's Mercy School-Based Services Program is designed to offer clinical services in a school setting. An example of the type of services offered is behavioral health services for students dealing with emotional and behavioral challenges. Children's Mercy, in partnership with the Blue Valley School District (BVSD), began a relationship in 2017 that seeks to reduce non-academic barriers to learning.

In the BVSD partnership, 20 Children's Mercy social workers have been placed in 36 schools. The social workers provide varied and tailored services to meet the

unique needs of each of the school's students, their families, and the staff. Since inception, the school-based social workers have engaged with nearly 900 students and have had over 4,300 interactions with those students and their families.

The social workers provide support in the form of one-on-one interventions,

support groups, goal setting and goal-progress support, community referrals, and advocacy. The social workers not only provide support for the students, but also work with families, teachers and community resources to remove barriers to personal and academic success. Social work interventions are recorded in the table below.

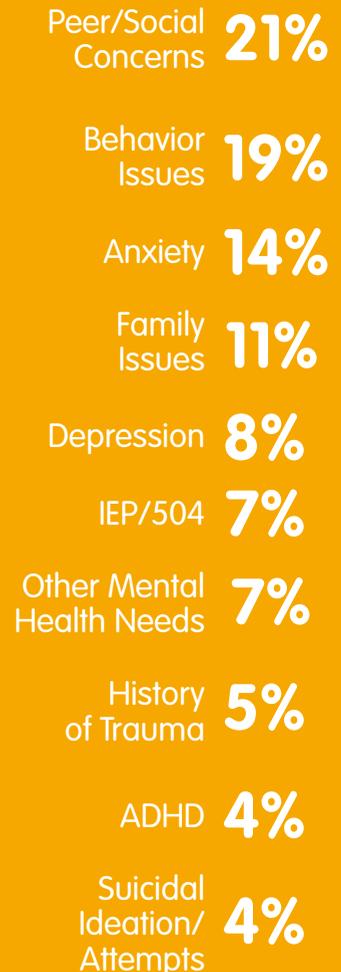
Beginning in 2017, Children's Mercy Hospital and Blue Valley School District partnered to place



Issues addressed include:

- Crisis Intervention ● Emotional Support
- Goal Setting & Achievement
- Advocacy ● Resources & Referrals ● Support Groups

Students Referred For:



Methods and Reasons for Referral to Social Work

Behavior and mental health needs, including anxiety, were the top reasons for referral to social work. “Other” reasons included family issues, social concerns, self-harm, and gender identity issues. Tracking mechanisms have been adapted to collect many of these reasons moving forward, although early data will not reflect these updates.

Students weren't the only beneficiary of the program. Blue Valley School District Staff also received direct and indirect support from the social workers.

“It is impossible to limit our social worker's impact to just one particular instance. Upon her arrival to our school, she made an immediate impact and has been an absolute asset to our team. She has worked directly with many of our most struggling students, and is not only a phenomenal resource, but she is a trusted and caring advocate for those students. Her positive attitude and caring demeanor have undoubtedly made our school a happier place this year.”

“We have some parents who seem overwhelmed by the process of seeking professional counseling for their family, and our social worker is great at connecting them with resources for that process.”

“Our school social worker is an invaluable member of our staff. Her professionalism and sense of calm in crisis situations helps us tremendously. She has made a world of difference in the lives of our students and staff; and honestly I am not sure what we did before she joined us. There was an at risk student with whom the school social worker was able to form a relationship with, and through her work she saved the student's academic career and probably saved the student's life.”

In an end of the year survey of Blue Valley faculty and staff, staff reported:

90%

Would call the social worker in a crisis situation with a student



"In any situation that requires additional adult support, our social worker is my first point of contact. She takes time to check in on my students and get to know them outside of crisis situations, which makes it much easier for all of us when it comes time for her to offer support within a crisis situation. When we had a student who needed to be assessed for suicide risk, the social worker was there in minutes. It would be hard to do my job successfully without the help of the social worker in our building!"

85%

Social worker provided them with strategies, resources or other support



"We have learned so much from our school social worker. The social workers in our schools are necessary to ensure the safety and security of our students. The social worker has been an advocate for students and for the teachers. She is willing to think outside the box and give resources to families."

"The social worker has been invaluable in mental health crises and with supporting the ongoing emotional needs for individual students. She is helpful in supporting parents with their understanding of their children's mental health issues, in helping teachers understand mental health, and in connecting families in need to available and appropriate resources."

83%

More able to focus on their scope of practice due to social worker support



"More than once, the social worker was able to reach and support a student with a situation that was beyond my scope. Our social worker was an integral part of our whole school, but in particular, she was major support for the kids in our special education programs. I couldn't do my job effectively without her. She is amazing and brings so much to the table."

96% Overall Satisfaction



Children's Mercy Payor Relations

The Children's Mercy Payor Relations team is responsible for the negotiation and procurement of new and renegotiated managed care agreements with all payor sources – commercial, ACA exchange, Medicaid, TriCare, Medicare, and direct employer agreements – through favorable contracts that exceed our cost to provide care, as well as capture maximum referral volume and decrease out-of-network experience whenever feasible. Payor Relations also serves as primary relationship manager between payors and Children's Mercy to leverage issues that aid in promoting Children's Mercy, increase cash flow, decrease administrative burden, and remove barriers.

Payor Relations: What We Do

- Analyze, plan and develop payor strategies to ensure optimal contracting and operational performance
- Ensure appropriate and efficient communication and timely issue resolution between Children's Mercy business office and payors in areas of claims payment disputes, contract compliance, service complaints, and prior authorization/concurrent review processes
- Act as liaison between payors and Children's Mercy to analyze and communicate rate changes and provide updates regarding payor policies, bulletins, or procedures

Children's Mercy Payor Relations

Children's Mercy Hospital & Clinics

Payor Contracts
Reimbursement

Provider Enrollment



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- Provide education to Children's Mercy regarding contractual nuances and language interpretation
- Evaluate new program development through payor contract and policy review and analysis to recommend course of action to maximize payor reimbursement
- Maintain awareness and stay abreast of changes within payor policy, laws, and regulations as well as current and evolving payment structures
- Influence payor policy decisions
- Negotiation of single case agreements with out-of-network payors

Children's Mercy Provider Enrollment

The Children's Mercy Provider Enrollment team maintains enrollment for 1,200+ Children's Mercy billable providers with each of our contracted payor sources and ensures Children's

Mercy services and providers are enrolled timely, accurately identified, and reflected appropriately on all in-network payor websites.

Provider Enrollment: What We Do

- Maintains provider numbers and National Provider Identifiers (NPI) on behalf of Children's Mercy for all payor sources
- Ensures timely submission and accuracy of all provider additions, deletions, and demographic changes with all payor sources
- Serves as primary point of contact and subject matter expert for provider enrollment inquiries and ensure issues are escalated and resolved timely
- Maintains compliance with all contractual obligations, state regulations and NCQA standards
- Ensures compliance with all Medicaid and Medicare enrollment and participation regulations and guidelines

2019 Overall Highlights

- Successfully negotiated amendment with United HealthCare to carve-in high cost drugs to allow Children's Mercy to "buy and bill" for these services and eliminate payor steerage to free standing infusion centers or specialty pharmacies
- Completed contract amendments for Humana and United

- HealthCare for all-inclusive urgent care reimbursement to minimize patient out-of-pocket and secure reimbursement for both professional and facility services
- Incorporated all Children's Mercy Affiliated Practices (CMAPs) into Children's Mercy United HealthCare professional agreement
- Completed contract amendment with Aetna to recognize Children's Mercy pediatric heart transplant program as Institute of Excellence (IOE)
- Negotiated single case agreements for new SMA therapy, Zolgensma, for all 2019 cases to secure reimbursement at or above cost
- Developed standardized payor policy notification template for purposes of monthly communications

to key Children's Mercy stakeholders regarding changes to payor policies and processes

- Created quarterly *Children's Mercy Milestones* newsletter to share key updates with payor partners regarding depth and breadth of services, as well as unique programs available at Children's Mercy
- Transitioned both Arkansas Medicaid and Oklahoma Medicaid to in-network payors and initiated process to ensure all Children's Mercy billable providers were enrolled with both Medicaid entities
- Secured annual, supplemental payment from Oklahoma Medicaid to ensure reimbursement covers cost to provide care

Managed Care Agreements

30 Hospital

18 Professional

4 Transplant

5 Retail Pharmacy

18 Allied

11 Delegated Credentialing

Managed Care Enrollment for Children's Mercy Billable Providers

135

PCPs

- Advanced Practice Professionals: **20**
- Physicians: **114**
 - Exclusively Employed: **43**
 - Contracted: **1**
 - Children's Mercy Affiliated Practice (CMAP): **70**

1,203

Specialists

- Physicians: **680**
 - Exclusively Employed: **537**
 - Contracted: **143**
- Advanced Practice Professionals: **361**
- Allied Health: **162**

14 **18** Children's Mercy Locations
Children's Mercy Affiliated Practice Locations



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