

Top Takeaways from the June 2017 CHN Committee Meetings

Blue KC 2016 Performance Based Incentive Results – CHN Expected to Receive Annualized Incentive of \$1.5 Million!

2016 Blue KC performance incentive results have been updated. Results are expected to be finalized by mid July.

- 7 practices achieved tier 1 quality performance by exceeding goal in over 80% of applicable quality measures!
- 6 practices achieved tier 2 quality performance by exceeding goal in over 60% of applicable quality measures!
- CHN reviewing with Blue KC the cause of significant shifts in cost tier performance in 2016 versus 2015.

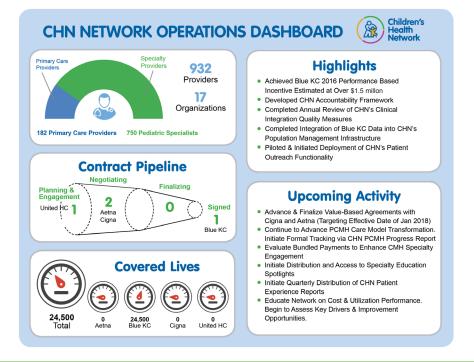
See Appendix A to view your practice's preliminary Blue KC 2016 quality performance results.

CHN's Population Health Technology Platform – Patient Outreach Functionality & Training Now Available

Patient outreach functionality is now available within CHN's population health technology platform (i.e. Evolent Vision). Use the functionality to identify patients with particular gaps in care and support quality improvement efforts within your practice. Target improvement for specific measures or for specific groups of patients (i.e. all patients or Blue KC attributed patients). View Patient Outreach Training Guide to learn more.

CHN Network Operations Dashboard – Thank You!

The following dashboard highlights CHN accomplishments in the past quarter and sets the stage for upcoming activity.



CHN Patient Centered Medical Home Progress Report

CHN began to publish our Patient Centered Medical Home Progress report. As discussed previously:

- The goal is to bring awareness to the <u>"true" implementation and integration</u> of PCMH concepts and competencies.
- Practices <u>do not</u> have to complete 100% of all PCMH principles by end of 2017. However, practices must <u>progress through</u> <u>the journey</u> and demonstrate engagement, improvement, or sustainability.

See Appendix B to see full report.

Click to Access Prior Monthly CHN Committee Takeaways

Questions or Comments? Please ask your Children's Health Network committee member representative or contact Children's Health Network staff at ProviderRelations@cmpcn.org.

Appendix A: Children's Health Network - Blue KC BDTC Quality & Cost Performance (2016 PBI Model - July 2017 to June 2018 Payments)

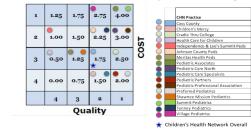


							PCMH / Patient Experience Measures (8)																	
CHN Practice	15 Mo Well	3-6 Well	12-18 Well	вмі	HPV	URI	CHN Att	Meetings	PCMH- Care Plans	Referrals	Patient Experience		% Quality Score	Quality Tier	Quality Tier Change (vs. May '17 Report)		Risk Score	Total Risk Adjusted PMPM	Cost Tier	Cost Tier Change (vs. 2015 Performance)	PBI Multiplier	# of Blue KC Att. Patients	Estimated	Estimated Annualized M PBI \$
Cass County	NA	829	6 74%	6 889	6 NA	NA	81%	No (1)	Yes (1)	No (2)	Yes (4)	9/12	75%	Tier 2	Down 1 Tier	\$ 295.00	0.92	\$ 319.76	Tier 3	Up 1 Tier	1.75	530	\$ 13,097	\$ 29
Children's Mercy	NA	779	6 56%	6 329	6 21%	NA	88%	NA	NA	NA	NA	3/5	60%	Tier 2	Same Tier	\$ 566.66	1.45	\$ 385.20	Tier 4	Same Tier	1.50	1,401	\$ 28,864	\$ 7
Cradle Thru College	NA	839	6 72%	6 749	6 9%	10%	94%	NA	NA	NA	NA	5/6	83%	Tier 1	Up 1 Tier	\$ 231.46	0.75	\$ 310.40	Tier 3	Down 2 Tiers	2.50	1,530	\$ 61,416	\$ 9
lealth Care for Children	879	6 739	6 47%	6 249	6 2%	22%	81%	NA	NA	NA	NA	2/7	29%	Tier 4	Down 1 Tier	\$ 281.58	0.89	\$ 315.96	Tier 3	Up 1 Tier	0.50	2,167	\$ 16,282	\$ 13
ndependence & Lee's Summit Peds	539	6 749	6 53%	6 229	6 9%	15%	100%	NA	NA	NA	NA	2/7	29%	Tier 4	Same Tier	\$ 189.41	0.67	\$ 282.09	Tier 2	Same Tier	1.00	1,390	\$ 17,205	\$ 6
hnson County Peds	889	6 939	6 82%	6 859	6 11%	14%	100%	NA	NA	NA	NA	5/7	71%	Tier 2	Same Tier	\$ 275.31	1.00	\$ 274.26	Tier 2	Down 1 Tier	2.25	3,265	\$ 144,525	\$ 2
leritas Health Pediatrics **	799	6 799	6 71%	6 319	6 5%	8%	81%	NA	NA	NA	NA	3/7	43%	Tier 3	New Data	\$ 256.32	0.81	\$ 316.44	Tier 3	Same Tier	1.25	1,414	\$ 28,952	\$
ediatric Associates	90%	6 869	6 75%	6 719	6%	7%	94%	NA	NA	NA	NA	6/7	86%	Tier 1	Up 1 Tier	\$ 224.66	0.92	\$ 243.23	Tier 1	Up 1 Tier	4.00	5,780	\$ 416,536	\$ 4
ediatric Care North	919	6 879	6 78%	6 70%	6 14%	6%	88%	NA	NA	NA	NA	6/7	86%	Tier 1	Up 1 Tier	\$ 232.99	0.79	\$ 296.17	Tier 2	Same Tier	3.00	3,675	\$ 177,304	\$ 2
ediatric Care Specialists	92%	6 90%	6 79%	65%	6 2%	9%	75%	NA	NA	NA	NA	5/7	71%	Tier 2	Same Tier	\$ 291.85	0.80	\$ 364.47	Tier 4	Down 3 Tiers	1.50	4,053	\$ 91,407	\$ 2
ediatric Partners	98%	6 929	6 82%	66%	6 18%	5 7%	100%	NA	NA	NA	NA	7/7	100%	Tier 1	Same Tier	\$ 302.16	0.84	\$ 358.15	Tier 4	Down 3 Tiers	2.00	2,281	\$ 71,844	\$ 1
ediatric Professional Association	919	6 939	6 84%	6 849	6 13%	8%	100%	NA	NA	NA	NA	6/7	86%	Tier 1	Up 1 Tier	\$ 228.99	0.77	\$ 295.95	Tier 2	Down 1 Tier	3.00	2,504	\$ 123,273	\$ 1
referred Pediatrics	NA	66%	6 50%	6 949	6 NA	NA	94%	No (1)	Yes (1)	Yes (2)	Yes (4)	10 / 12	83%	Tier 1	Up 1 Tier	\$ 257.30	0.75	\$ 342.68	Tier 4	Down 1 Tier	2.00	169	\$ 5,006	\$
hawnee Mission Pediatrics	94%	6 919	6 77%	6 539	6 0%	14%	88%	NA	NA	NA	NA	4/7	57%	Tier 3	Same Tier	\$ 250.00	0.79	\$ 314.83	Tier 3	Down 2 Tiers	1.25	3,171	\$ 55,445	\$ 1
ummit Pediatrics	90%	6 799	60%	6 96%	6 19%	NA	81%	NA	NA	NA	NA	5/6	83%	Tier 1	Same Tier	\$ 268.47	1.09	\$ 246.89	Tier 1	Same Tier	4.00	1,450	\$ 119,184	\$ 1
enney Pediatrics	NA	679	6 57%	6 39	6 NA	NA	55%	No (1)	Yes (1)	Yes (2)	Yes (4)	8/12	67%	Tier 2	Same Tier	\$ 179.90	0.64	\$ 279.02	Tier 2	Same Tier	2.25	599	\$ 15,188	\$
illage Pediatrics	919	6 889	6 77%	679	6%	14%	100%	NA	NA	NA	NA	5/7	71%	Tier 2	Up 1 Tier	\$ 238.11	0.94	\$ 252.64	Tier 1	Up 3 Tiers	2.75	2,868	\$ 151,196	\$ 2
Measure Goal Thresh	old 84.05	6 79.69	6 47.69	65.09	6 14.0%	5 < 10%	75.0%																	
ggregate	889	6 869	6 73%	649	6 8%	9%	88%	NA	NA	NA	NA	5/7	71%	Tier 2	N/A	\$ 259.46	0.87	\$ 297.33	Tier 3	Same Tier	1.75	38.247	Ś 1.536.725	Ś 2.5

Quality Performance Period Reported: January 2016 to December 2016 | Cost Performance Period Reported: January 2016 to December 2016

** Meritas Health Pediatrics CY2016 Performance is Evaluated within North Kansas City's Blue KC Program





Important Disclaimer: The results presented above are based on available data and CHN's application of the PBI incentive framework. Estimates are not guaranteed and are presented for evaluation purposes. As such, results are subject to change.

Blue KC PCMH Standard Deviation = \$32.59

Final CY2016 Quality and Cost Performance Targeted to be Available in July 2017

Appendix B: CHN Clinical Integration Quality & Engagement Report



		PCMH Concepts												
	TC	KM	AC	СМ	CC	QI								
Children's Health Network Practice	Team-Based Care	Know & Manage Patients	Access & Continuity	Care Management & Support	Care Coordination & Care Transitions	Measure & Improve	Overall % of Competencies Fully Integrated							
Cass County Pediatrics	80%	0%	50%	0%	0%	0%	25%							
Children's Mercy	40%	20%	50%	50%	0%	0%	25%							
Cradle Through College	0%	0%	0%	0%	0%	0%	0%							
Health Care for Children	0%	0%	0%	0%	0%	0%	0%							
Independence & Lee's Summit Pediatrics	0%	0%	0%	0%	0%	0%	0%							
Johnson County Pediatrics	0%	0%	100%	0%	0%	0%	10%							
Meritas Health Pediatrics	0%	20%	0%	0%	0%	0%	5%							
Pediatric Associates	40%	0%	50%	0%	0%	0%	15%							
Pediatric Care North	20%	0%	0%	0%	0%	0%	5%							
Pediatric Care Specialists	20%	0%	100%	0%	33%	0%	20%							
Pediatric Partners	100%	100%	100%	0%	0%	0%	60%							
Pediatric Professional Association	0%	0%	0%	0%	0%	0%	0%							
Preferred Pediatrics	60%	80%	100%	50%	100%	0%	65%							
Shawnee Mission Pediatrics	0%	0%	0%	0%	0%	0%	0%							
Summit Pediatrics	40%	0%	0%	0%	0%	0%	10%							
Tenney Pediatrics	0%	0%	0%	0%	0%	0%	0%							
Village Pediatrics	40%	0%	50%	0%	0%	0%	15%							

Last Updated 6/20/2017

Patient-Centered Medical Home Concepts Summary

Team-Based Care [TC]	Continuity, medical home responsibilities, team-based care
Knowing & Managing Your Patients [KM]	Same day appointments, 24/7 access to clinical advice, electronic access, medication management, use of community resources
Access & Continuity [AC]	Same day appointments, 24/7 access to clinical advice, electronic access, empanelment management
Care Management & Support [CM]	Care management identification, care planning & self-care support, joint care plans,
Care Coordination & Care Transitions [CC]	Coordinate care transitions (IP discharges, ED visits), test tracking & follow up, referral tracking & follow up
Measure & Improve [QI]	Measure clinical quality performance, measure patient/family experience, measure resource use & care coordination, prioritize continuous quality improvement using benchmarks,

100% of core competencies are implemented and <u>fully</u> integrated into clinic workflow and operations.

>=50% of core competencies are implemented and <u>fully</u> integrated into clinic workflow and operations.

1-49% of the core competencies are implemented and <u>fully</u> integrated into clinic workflow and operations.

0% of the core competencies are implemented and <u>fully</u> integrated into clinic workflow and operations.

CHN Patient-Centered Medical Home Detailed Report

	Cass County	Children's Mercy	Cradle-College	HC for Children	Indep. & LS Peds	Johnson Cty Peds	Meritas Peds	Peds Associates	Ped Care North	Ped Care Spec	Ped Partners	Ped Prof. Assoc	Preferred Peds	Shawnee Mission	Summit Peds	Tenney Peds	Village Peds
Patient Centered Medical Home Competencies		γ	•	ſ	ls	ds		S	ר			5	S	on			
Team-Based Care and Practice Organization [TC]																	
Designate PCMH team members/roles and accountability [A]																	
Huddles, pre-visit planning, &/or individual patient communication [B1]																	
Regular care team quality improvement meetings [B2]																	
Process to inform patients and family about role of medical home [C]																	
Standing orders available & used by care team [CHN]																	
Team Based Care: Overall	80%	40%	0%	0%	0%	0%	0%	40%	20%	20%	100%	0%	60%	0%	40%	0%	40%
Knowing and Managing Your Patients [KM]																	
Problem Lists, comp. health assessments, depression screening [A]																	
Proactively identify, outreach, and remind patients of needed care [C]																	1
Rx management (reconciliation after ED/IP visit, up-to-date rx lists)																	
Clinical decision support following evidence-based care [E]																	
Prioritize needed community resources for patients [F]																	1
Knowing & Managing Your Patient: Overall	0%	20%	0%	0%	0%	0%	20%	0%	0%	0%	100%	0%	80%	0%	0%	0%	0%
Patient-Centered Access and Continuity [AC]																	
Enhance access based on patient needs [A]																	
Empanelment management (patient PCP assignment) [B]																	
Patient-Centered Access & Continuity: Overall	50%	50%	0%	0%	0%	100%	0%	50%	0%	100%	100%	0%	100%	0%	0%	0%	50%
Care Management and Support [CM]				1													
Identify patients that benefit most from CM (Behavior Health , Complex, Chronic) [A]																	
Develop care plan jointly based on patient goals [B]																	
Care Management & Support: Overall	0%	50%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	50%	0%	0%	0%	0%
Care Coordination and Care Transitions [CC]																	
Active closed-loop process for lab and imaging tests [A]																	
Active closed-loop process for specialty referrals [B]																	
Coordinates transitions of care for IP discharges and ED visits [C]																	
Care Coordination & Care Transitions: Overall	0%	0%	0%	0%	0%	0%	0%	0%	0%	33%	0%	0%	100%	0%	0%	0%	0%
Performance Measurement and Quality Improvement																	
Identifies opp. for improvement (quality, cost, access, experience) [A]																	
Sets goals and acts to improve (quality, cost, access, exp.) based on benchmarks [B]																	
Reports practice- and provider-level performance within practice [C]																	
Performance Measurement & Quality Improvement: Overall	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Overall																	
% of Core Competencies Implemented & Fully Integrated	25%	25%	0%	0%	0%	10%	5%	15%	5%	20%	60%	0%	65%	0%	10%	0%	15%
Jost Lindeted 6/20/2017	23/3	2373	070	070	070	10/0	370	13/3	370	20/0	00/3	0/0	0375	070	10/3	070	13/0

Last Updated 6/20/2017

Key - Competency Status

Competency is implemented and fully integrated into clinic workflow & operations

Competency is implemented and partially integrated.

Competency is implemented on a limited scale.

Competency has been reviewed. Competency will not be implemented due to resource and/or work flow constraints. Competency is being reviewed and in process of being integrated. [In Development / Implementation In Progress] Key - Overall Concept Status

100% of core competencies are implemented and <u>fully</u> integrated into clinic workflow and operations.

>=50% of core competencies are implemented and <u>fully</u> integrated into clinic workflow and operations.

1-49% of the core competencies are implemented and $\frac{fully}{fully}$ integrated into clinic workflow and operations.

0% of the core competencies are implemented and <u>fully</u> integrated into clinic workflow and operations.

Competency has not been evaluated/reviewed (may or may not be occurring)