

ASTHMA MANAGEMENT QUALITY IMPROVEMENT REVIEW

- **Asthma Clinical Performance Report**
- **Objective:** More Broadly Evaluate Asthma Management Performance to Evaluate Variation & Collaborate on Clinical Best Practices
- **Eligible Asthma Population**
 - Broader Population: CIN Asthma Management (2+ Office Visits) OR HEDIS Asthma Medication Management Measure
 - Patients Must Be Included In Existing CHN Agreement
- **Four Performance Areas**
 - Uncontrolled Asthma (% Uncontrolled, # Uncontrolled & No Controller)
 - Outpatient Asthma Management (2+ Asthma Visits, Annual Inhalation, Annual Spirometry) *Annual Spirometry Added for Learning*
 - Asthma Prescription Management (Asthma Medication Management)
 - Asthma Outcomes (Asthma ED Visits / 1000, Asthma IP Visits / 1000)

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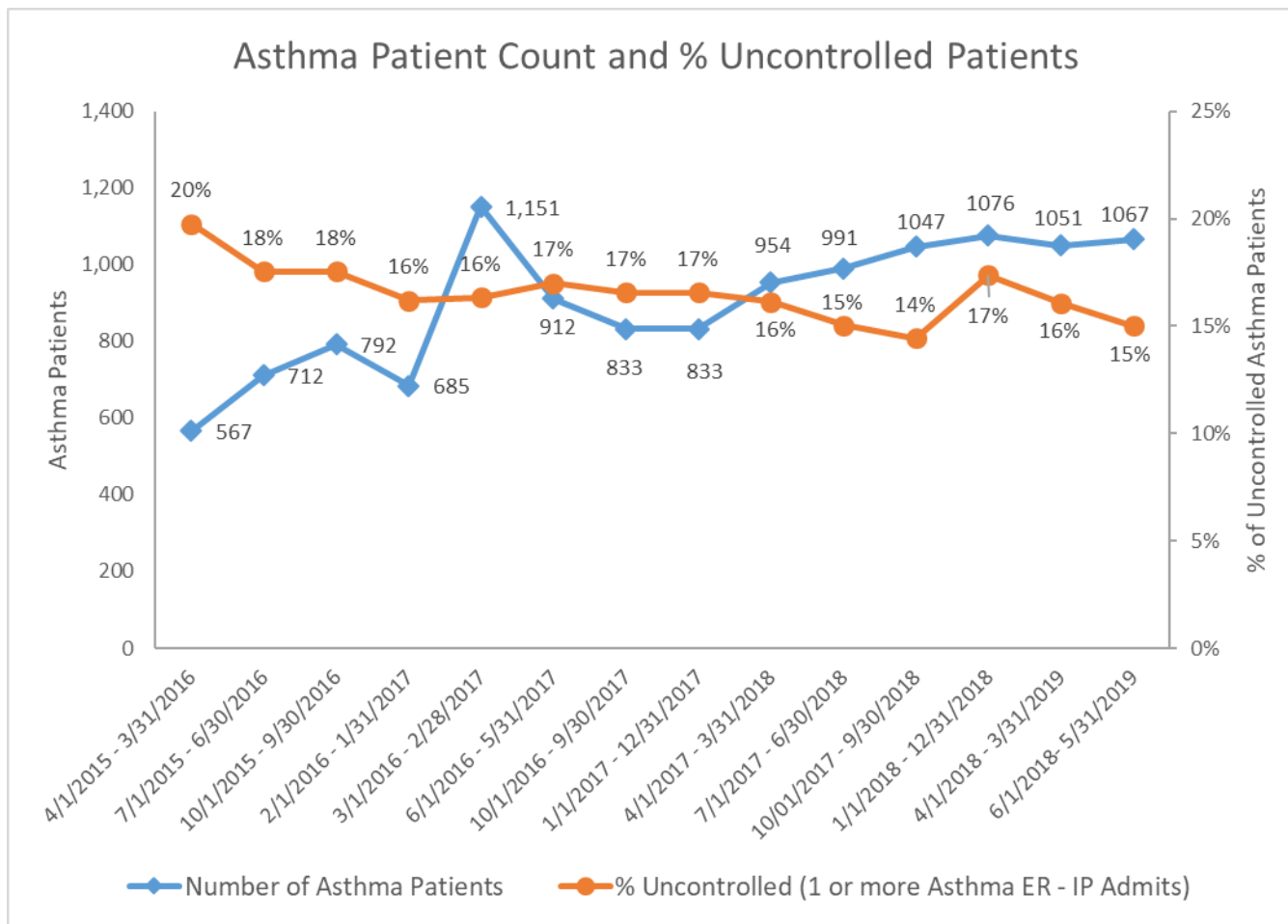
• Asthma Clinical Performance Report

CHN Asthma Clinical Performance Report

Measurement Period: 06/01/2018 - 05/31/2019

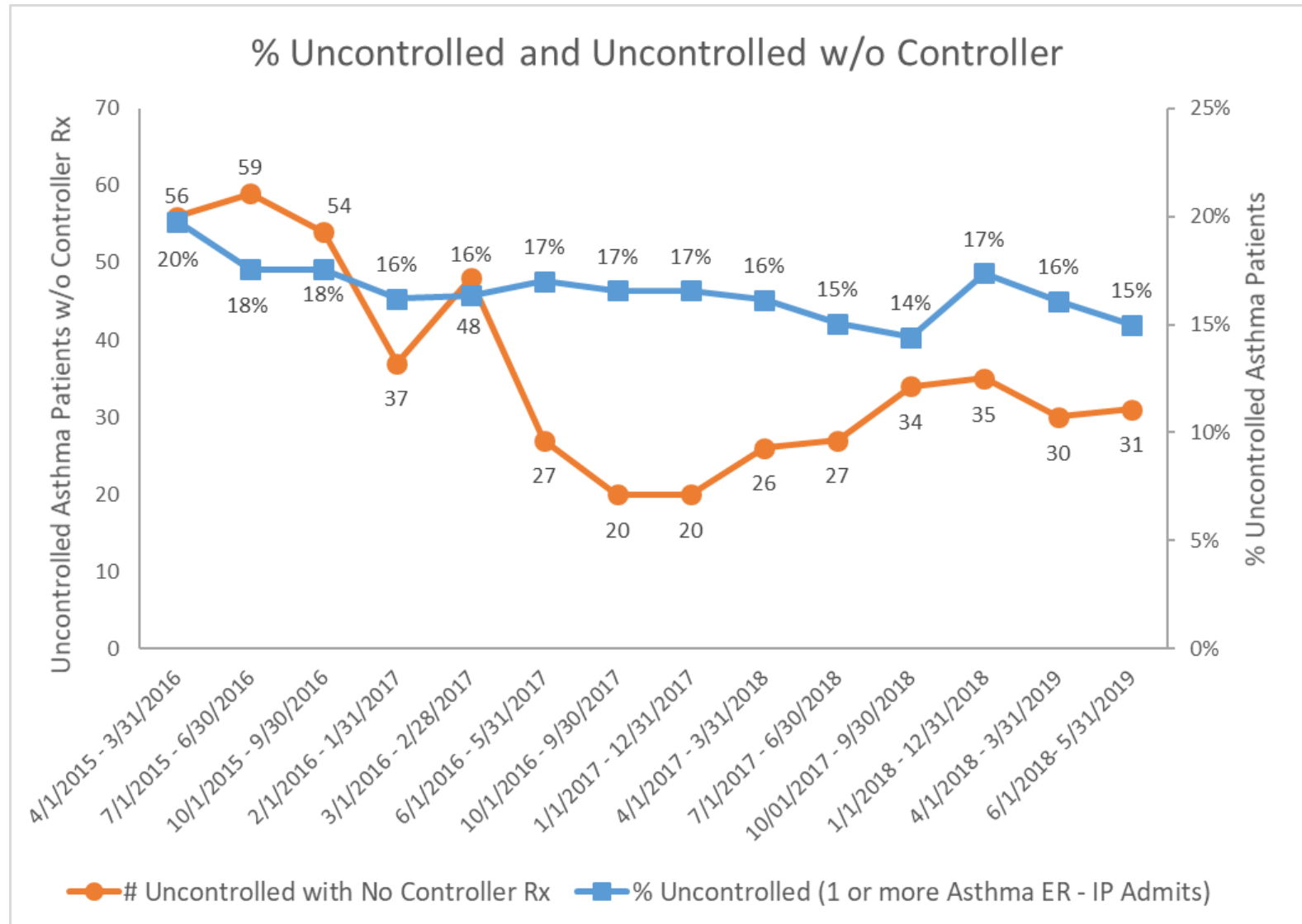
CHN Practice	Number of Asthma Patients	Uncontrolled		Outpatient Management			Prescription Management		Outcome	
		% Uncontrolled (1 or more Asthma ER / IP Admits)	# Uncontrolled with No Controller Rx	% with 2+ Annual Outpatient Asthma Visits	% with Annual Inhaler Demo / Evaluation	% with Annual Spirometry Evaluation	Number of HEDIS Asthma Patients	Asthma Medication Mgmt (>75% Days Supply)	Asthma ER Visits / 1000	Asthma IP Visits / 1000
CASS COUNTY PEDIATRICS	32	9%	0	44%	3%	75%	12	25%	148	0
CHILDREN'S MERCY HOSPITALS AND CLINICS	64	31%	8	55%	56%	58%	27	33%	324	229
COCKERELL AND MCINTOSH PEDIATRICS	33	15%	0	58%	30%	52%	7	57%	70	0
CRADLE THRU COLLEGE CARE	24	17%	1	67%	25%	50%	13	46%	90	0
HEALTH CARE FOR CHILDREN	44	20%	0	48%	5%	34%	35	66%	0	0
INDEPENDENCE PEDIATRICS	26	19%	0	65%	12%	23%	19	42%	153	0
JOHNSON COUNTY PEDIATRICS	83	7%	0	58%	2%	63%	42	57%	25	0
KU PEDIATRICS	14	7%	0	64%	0%	64%	4	0%	0	0
LEAWOOD PEDIATRICS	38	8%	0	58%	8%	45%	21	43%	85	85
LEE'S SUMMIT PHYSICIANS GROUP	59	15%	5	64%	8%	46%	23	39%	126	90
MERITAS HEALTH PEDIATRICS	28	21%	1	61%	14%	36%	17	35%	158	277
OLATHE HEALTH PEDIATRICS	3	33%	0	67%	33%	67%	0	0%	0	0
PEDIATRIC ASSOCIATES	126	18%	6	52%	27%	30%	45	27%	99	17
PEDIATRIC CARE NORTH	63	10%	3	48%	6%	38%	39	44%	50	83
PEDIATRIC CARE SPECIALISTS	75	5%	1	57%	5%	60%	41	51%	41	0
PEDIATRIC PARTNERS	58	7%	0	60%	9%	69%	26	23%	74	37
PEDIATRIC PROFESSIONAL ASSOCIATION	70	14%	1	73%	1%	56%	42	45%	47	109
PREFERRED PEDIATRICS	14	14%	0	57%	7%	43%	10	60%	160	80
REDWOOD PEDIATRICS, INC.	4	0%	0	75%	25%	50%	2	50%	0	0
SHAWNEE MISSION PEDIATRICS	62	16%	3	56%	6%	47%	37	49%	210	194
SUMMIT PEDIATRICS	52	29%	1	60%	15%	27%	30	43%	121	61
TENNEY PEDIATRICS	20	40%	0	50%	20%	40%	15	0%	529	0
VILLAGE PEDIATRICS	66	6%	1	48%	5%	68%	43	40%	0	32
Network Overall	1067	15%	31	57%	13%	49%	553	42%	104	61

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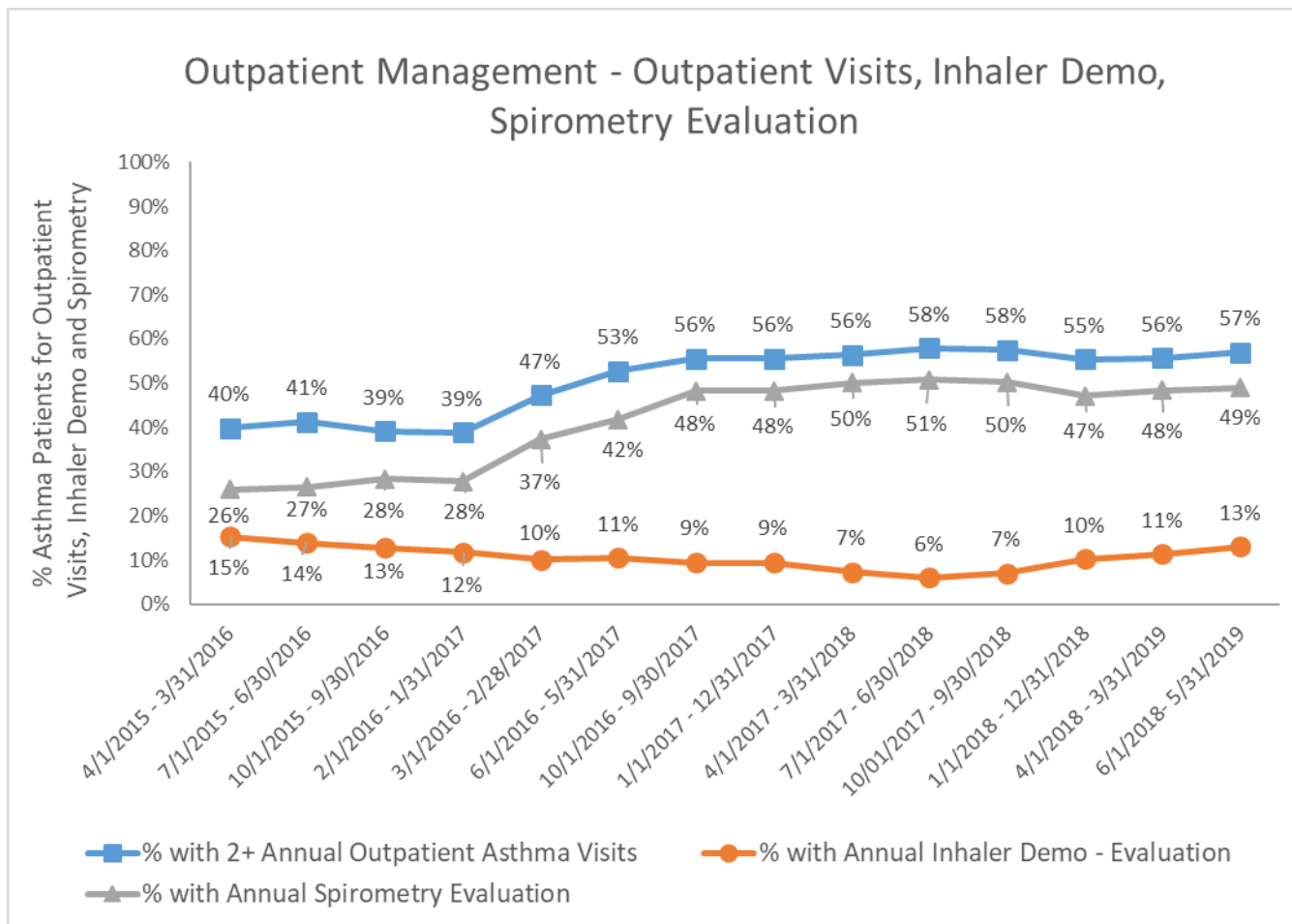


% of Uncontrolled Asthma Patients (i.e. 1 or more Asthma ED/IP Visits) Decreasing While Number of Asthma Patients Increasing

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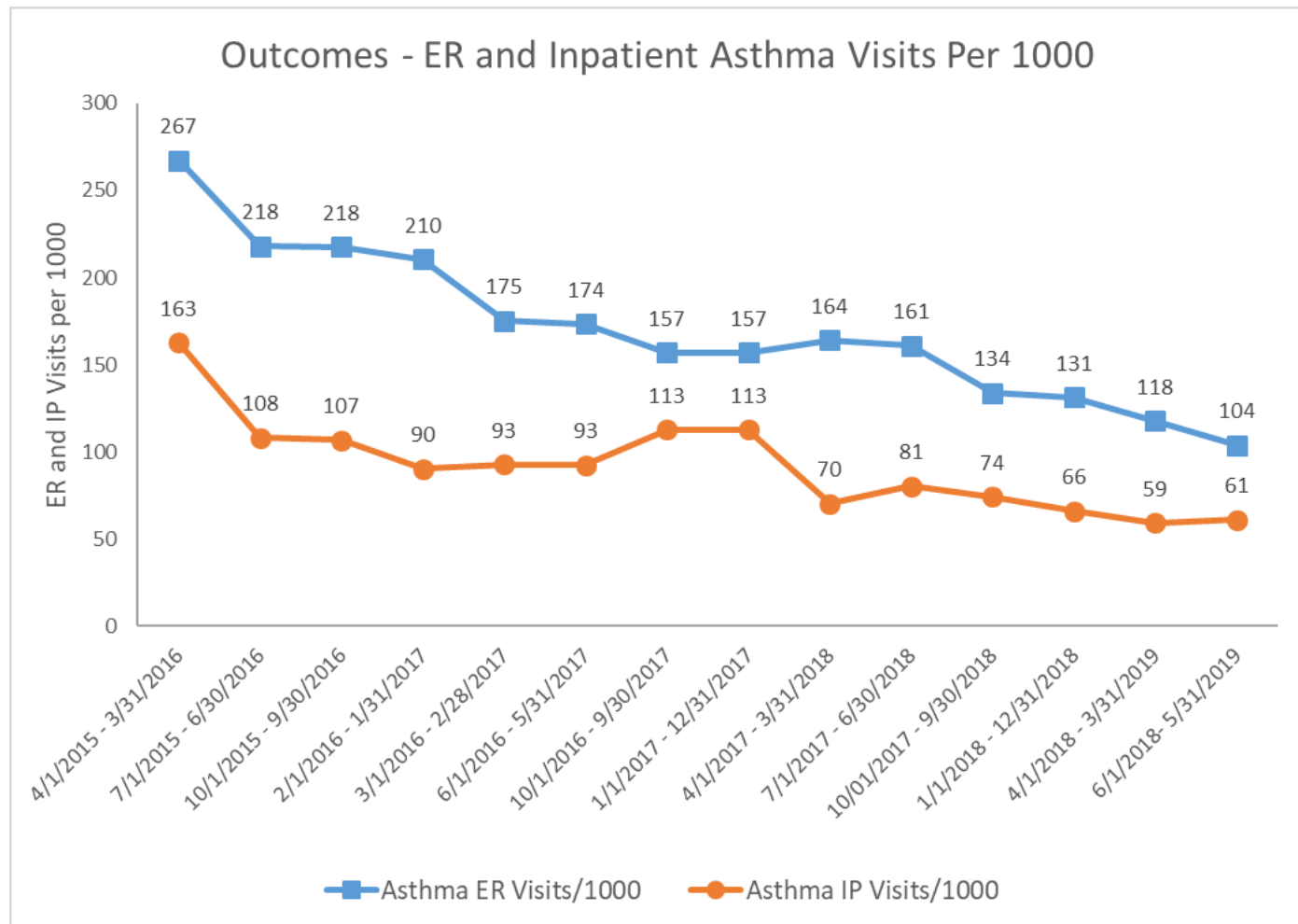


ASTHMA MANAGEMENT QUALITY IMPROVEMENT REVIEW



- Increasing Rates of 2+ Outpatient Asthma Visits (+17% Points!)
- Increasing Rates of Annual Spirometry Evaluation (+23% Points!)
- Annual Inhalation Demonstration Up 6% points since Measurement Year Ending September 2018

ASTHMA MANAGEMENT QUALITY IMPROVEMENT REVIEW



Improved Asthma Outcomes Based on Decreasing
Asthma ED Visits / 1000 and Asthma IP Visits / 1000!

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- **Next Steps**

- CMHN to Develop a Report to Help CHN Practices Identify What Patients are Persistent Asthma Patients (as Defined by HEDIS)
- CMHN to Make Asthma Clinical Performance Report Detail Available on CMHN Portal.
- Reminder: Asthma Management MOC to be Available Early 2020

CMHN Will Measure Inhalation Instruction in 3 Ways

1. Inhalation Instruction At Every Asthma Visit (2+ times per year)
2. Inhalation Instruction At Least Once Per Year
3. Inhalation Instruction for Uncontrolled (1+ ED, 1+ IP Admit) Patients

CMHN to Determine Which Is Most Strongly Correlated to Improved Asthma Outcomes (i.e. Reduced Rate of Asthma ED and Inpatient Visits)

Why is this Important?: Our Ability to Manage Asthma Will Help to Increase CMHN Shared Savings & Incentives