



*East Hawaii* IPA

# QUARTERLY SUPER HUDDLE

September 19, 2017

<b>TOPIC</b>	<b>Speaker</b>	<b>Time</b>
<b>East Hawaii IPA Updates</b>	<b>Susan Mochizuki, EHI IPA</b>	<b>15 min</b>
<b>ECO-System Referral &amp; Resources</b> -Ecosystem Resources -Aloha Kidney -Community First Advanced Care Directive Workshops -KTA Diabetic Management Program -Kupu Care	<b>Jane Bontuyan, EHI IPA</b>    <b>Dayna Wong-Otis, KTA</b> <b>Lani Weigert, Kupu Care</b>	<b>20 min</b>
<b>Patient Attribution Under Payment Transformation</b>	<b>Wayne Shishido, HMSA</b>	<b>15 min</b>
<b>IPA Bonus Bucks</b>	<b>Lynda Dolan, MD, VP &amp; Transformation Director</b>	<b>10 min</b>
<b>Announcements</b>	<b>Susan Mochizuki, EHI IPA</b>	<b>5 min</b>

## Welcome New IPA Employees!

- **Gay Mukai, RN, Licensed Care Manager**
- **Marynell Vitales, RN, Patient Services Coordinator**



### FULL-TIME TEAM MEMBERS

- Susan Mochizuki, Administrator
- Joyce Vitales, Executive Assistant
- Jane Bontuyan, Administrative Assistant
- Michael Kurohara, IT Specialist
- Misae Wela, Transitions Coordinator
- Joy Kekua, Patient Navigator
- Gwendelyn Go, Patient Navigator
- Sheri Kang, Patient Navigator

## Welcome NEW IPA MEMBERS

### New Members

- LaRae Barnes, APRN
- Dr. Sarah Howard – Ka‘ū Hospital
- Dr. Dwight Johnson – Ka‘ū Hospital
- Dr. Louis Pau, Anesthesiology/Pain Management
- Dr. Michael Russo, Neurology/Sleep Medicine



### Members Representing EHI IPA in the Community



#### ❖ Community First

Dr. Kevin Kurohara

Dr. Richard Lee-Ching

#### ❖ Community First-Regional Health Improvement Collaborative (RHIC)

Dr. Laurie Hopman

Dr. Peter Matsuura

#### ❖ RHIC-Community Action Network (CAN)

Dr. Michelle Mitchell

**SAVE THE DATE!!!**



## **EHI PROVIDER MEMBER RETREAT**

*Purpose: Decide on the IPA's future*

**Wednesday, November 8, 2017  
3PM – 7PM**

**RSVP Required. Announcement to follow.**

**Must participate in entire session —**

**SAVE THE DATE!!!**



**HILO MEDICAL CENTER  
&  
EHI IPA MIXER**

*Topic: Physician to Physician Communication*



**Tuesday, November 7  
5:30-7:30 PM**



**RSVP Required. Announcement to follow.**

## eClinical Works Go Live — Starting October 2

### Members Participating:

Dr. Daniel Belcher  
Dr. Brenda Camacho  
Dr. Darrett Choy  
Dr. Ty DeSilva  
Dr. Lynda Dolan  
Dr. Laurie Hopman  
Dr. Erin Kalua  
Dr. Kevin Kurohara  
Dr. Richard Lee-Ching  
Dr. Douglas Olsen/Dr. Kara Okahara  
Dr. Craig Shikuma

### Others Members on eClinical Works

Alice Davis, DNP  
Dr. John Dawson  
Dr. Jon Gerdsen  
Dr. Maria-Stella Perlas  
Dr. Sydney Tatsuno

**KICK OFF LUNCH- Tuesday, September 26**

- Direct Reporting to CPC+
- Tablets for Patients to Complete Forms
- Screening Forms & Templates
- Care Coordination Module
- Direct Lab & Radiology Interface
- IPA User Group Meetings
- Connection to EPIC, Meditech



# PCP QUALITY PERFORMANCE MEASURES

June 2017 presentation



Performance Measures

How much money is left on the table

Number of remaining members to achieve max payout

How much each member in the measure is worth

A	B	C	D	E	F	G	H	I	J	K
Measure Name	Denominator	Numerator	Performance Rate	Minimum Threshold	Target Threshold	Payment Earned	Payment not yet earned	Members to achieve max pay out	Payout at Maximum Payout	Payout Per member
Advanced Care Planning	233	106	45.49%	45.00%	65.00%	\$ 1,787.79	\$ (2,953.13)	54	\$ 4,740.92	\$ 29.78
Adolescent Well-Care Visits	4	0	0.00%	45.00%	65.00%	\$ -	\$ (81.39)	3	\$ 81.39	\$ 29.78
Body Mass Index	229	177	77.29%	85.00%	95.00%	\$ -	\$ (1,164.88)	45	\$ 1,164.88	\$ 5.26
Breast Cancer Screening	127	84	66.14%	75.00%	85.00%	\$ -	\$ (2,584.11)	27	\$ 2,584.11	\$ 23.48
Cervical Cancer Screening	114	77	67.54%	75.00%	85.00%	\$ -	\$ (2,319.59)	22	\$ 2,319.59	\$ 23.48
Childhood Immunization Status	0	0	0.00%	85.00%	95.00%	\$ -	\$ -	0	\$ -	\$ -
Colorectal Cancer Screening	245	178	72.65%	65.00%	80.00%	\$ 3,200.08	\$ (1,785.01)	25	\$ 4,985.09	\$ 24.66
Diabetes Care- Blood Pressure Control (<140/90)	67	29	43.28%	75.00%	85.00%	\$ -	\$ (1,363.27)	30	\$ 1,363.27	\$ 23.48
Diabetes Care- eye exam	67	39	58.21%	65.00%	80.00%	\$ -	\$ (1,363.27)	17	\$ 1,363.27	\$ 24.66
Diabetes Care - HbA1c Control (≤9)	67	57	85.07%	75.00%	85.00%	\$ 1,244.88	\$ (118.38)	2	\$ 1,363.27	\$ 23.48
Diabetes Care - Medical Attention for Nephropathy	67	43	64.18%	85.00%	95.00%	\$ -	\$ (1,363.27)	22	\$ 1,363.27	\$ 21.05
Developmental Screening in the First 3 Years of Life	0	0	0.00%	65.00%	80.00%	\$ -	\$ -	0	\$ -	\$ -
ShareCare RealAge Assessment	158	0	0.00%	5.00%	10.00%	\$ -	\$ (921.01)	50	\$ 921.01	\$ 18.78

Red = High Value

Green = Low Value



# PCP QUALITY PERFORMANCE MEASURES



See COZEVA for \$\$s & Gaps—  
i.e.-- BP Control

Contact Cozeva support to add your EHR to Cozeva's network today.

Apply 3/12 Rule :  Yes  No

HMSA 2017 PT (1,519)

Measure Name	Performance	Dollars Denominator Earned
<b>PCP Performance Measures</b>		
PCP Performance Measure Summary	52%	9088
Breast Cancer Screening	70%	381
Colorectal Cancer Screening	81%	793
Cervical Cancer Screening	76%	451
Influenza Vaccine (Adult)	6%	1516
Diabetes Care-HbA1c In Control (<=9.0)	69%	215
Diabetes Care-Blood Pressure Control (<140/90)	91%	215
Diabetes Care-Medical Attention for Nephropathy	97%	215
Diabetes Care-Eye Exam	69%	215

PCP Performance Measures | Diabetes Care- Blood Pressure Control (<140/90)

**NUMBER OF PATIENT GAPS** 20

**ESTIMATED PAYMENT** \$3,289 of \$3,052

**PERFORMANCE SUMMARY**

Provider	Performance (%)
NETWORK PO	69%
J. GERDSEN	100%
L. BARNES	100%
C. SHIKUMA	98%
A. ICHIRTA	98%
D. NAKAMURA	92%
K. KUOHARA	91%
S. SAKTA	88%
S. TATSUNO	88%
D. KETTLESON	88%
H. RUESING	88%
D. BELCHER	87%
P. CHONDHURY	86%
M. ARAKAKI	86%
D. OLSEN	85%

Live help is online...

# PCP QUALITY PERFORMANCE MEASURES



See COZEVA FOR \$\$s & Gaps  
i.e. Advanced Care Planning

Contact Cozeva support to add your EHR to Cozeva's network today.

Apply 3/12 Rule :  Yes  No

HMSA 2017 PT (1,519)

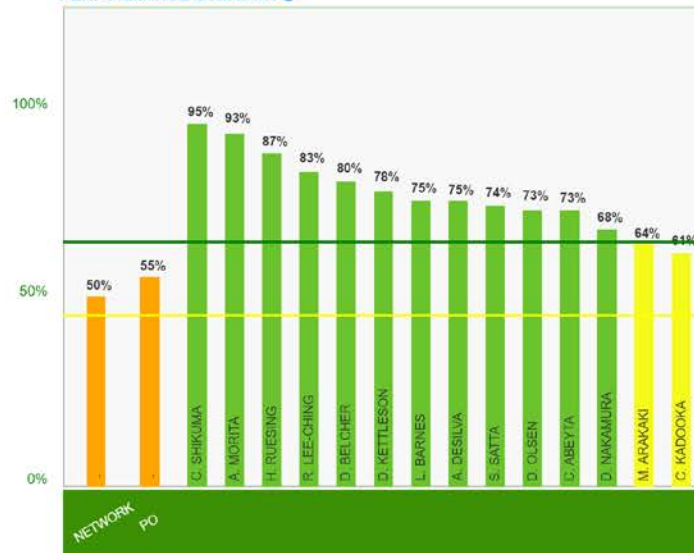
Blood Pressure Control (<140/90)	91%	215
Diabetes Care-Medical Attention for Nephropathy	97%	215
Diabetes Care-Eye Exam	69%	215
Body Mass Index Assessment	85%	991
Sharecare RealAge Assessment	0%	1242
Advance Care Planning	46%	489
Tobacco Screening and Cessation Counseling	77%	1154
Review of Chronic Conditions	71%	275
Review of Suspect Conditions	62%	13
Screening for Symptoms of Clinical Depression and Anxiety	52%	914
Adolescent Well-		

## PCP Performance Measures | Advance Care Planning

**NUMBER OF PATIENT GAPS** 265

**ESTIMATED PAYMENT** \$1,083 of \$7,034

### PERFORMANCE SUMMARY



Live help is online...

# PCP QUALITY PERFORMANCE MEASURES



See COZEVA for \$\$s & Gaps  
i.e. Influenza Vaccine

Contact Cozeva support to add your EHR to Cozeva's network today.

Apply 3/12 Rule :  Yes  No

HMSA 2017 PT (1,519)

Measure Name	Performance	Dollars Earned	Denominator
<b>PCP Performance Measures</b>			
PCP Performance Measure Summary	52%		9088
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Diabetes Care-Medical Attention for Nephropathy	97%		215
Diabetes Care-Eye Exam	69%		215

**NUMBER OF PATIENT GAPS** 1419

**ESTIMATED PAYMENT** \$861 of \$5,342

**PERFORMANCE SUMMARY**

Provider	Performance (%)
NETWORK PO	4%
PO	3%
YOU	6%
BRITA	17%
SHIKUMA	11%
HOY	8%
UESING	7%
BARNES	6%
KUROHARA	6%
KADOOKA	5%
KETTLESON	4%
NAKAMURA	4%
FESTERLING	4%
PERLAS	4%
DESILVA	4%
BEUCHER	3%

Live help is online...

3:47 PM 9/15/2017

# EHI IPA 2017 SYMPOSIUM GOLDEN NUGGETS



## 21ST ANNUAL Healthcare Symposium

AUGUST 18, 19 & 20, 2017 | FAIRMONT ORCHID HOTEL | WAIKOLOA | HAWAII ISLAND | HAWAII

**TEAMWORK**  
The Key to Healthcare Innovation & Improvement



Please contact Joyce Vitales @ [jvitaless@ehiipa.com](mailto:jvitaless@ehiipa.com) if you would like copies of any Symposium presentation



# Characteristics of a Good Team

- Aligned goals
- Defined roles and responsibilities
- Trust and respect
- Communicate constructively
- Actively listen
- Complimentary skills
- Everyone contributes
- Have fun

# Team Culture:

## *How is my team doing?*

- My co-workers are committed to doing quality work.
- There is someone at work who encourages my development.
- I have had opportunities at work to learn and grow.
- **I have a best friend at work.**
- Someone at work has talked to me about my progress in the last 6 months.
- **I have the opportunity to do what I do best at work.**
- The mission or purpose of our clinic makes me feel my job is important.
- At work, my opinions seem to count.
- **In the last week, I have received recognition or praise for doing good work.**

# How to create team culture?

- **Mastery** – Share the Care, don't delegate tasks – delegate responsibilities
- **Trust** – Combined trainings, co-location, communication
- **Shared Purpose** – Data-driven improvement (celebrate small and large victories); create team sense of accomplishment.

# What do we start Wednesday?

- 1. Start huddles**, mini-huddles, and/or meetings (good meetings).
- 2. Assess your team culture** – where are your best areas? Which could use the most improvement?
- 3. Share the Care/Shared Purpose**: Set team goals, either around quality or culture.



# ECOSystem RESOURCES



Weekly Strengths Sound Organizer

Pages Final Tiffany Pa Cozeva ... Recycle Bin

Dropbox Summer Jm **ECOSystem Resources**

ECOWEB-FINAL Tasks

DSME Resources

to sort 401 K meeting

Website Binder

Section 1: EMERGENCY SERVICES

- ES1. Hawaii County Urgent Services Directory\*
- ES3. Emergency Services
- ES4. Helpful Numbers

Section 2: ADVANCED CARE PLANNING

- ACP1. Conversation Starter Kit\*
- ACP2. Hawaii Health Care Directive\*\*
- ACP3. Kupu Care\*\*
- ACP4. Hospice of Hilo\*\*
- ACP5. Community First\*

## ECOSystem RESOURCES

EAST HAWAII IPA

### Table of Contents

 Section 1: EMERGENCY SERVICES

- ES1. [Hawaii County Urgent Services Directory\\*](#)
- ES2. **Emergency Shelters**
  - ES2.1. [Emergency Shelters Directory\\*](#)
  - ES2.2. [Salvation Army Emergency Shelter: Hilo\\*](#)
  - ES2.3. [Child & Family Services: East Hawai'i Domestic Abuse Shelter\\*](#)
  - ES2.4. [Catholic Charities Hawai'i Island Community Office](#)
- ES3. **Emergency**
  - ES3.1. [Alum...](#)

# ECOSystem RESOURCES

## ECOSystem RESOURCES

### Categories

- Section 1: EMERGENCY SERVICES
- Section 2: ADVANCED CARE PLANNING
- Section 3: ELDERLY
- Section 4: GENERAL BEHAVIORAL HEALTH
- Section 5: ADULT BEHAVIORAL HEALTH
- Section 6: CHILD BEHAVIORAL HEALTH
- Section 7: MENTAL DISABILITIES
- Section 8: CHRONIC / ACUTE ILLNESS
- Section 9: FOOD RESOURCES
- Section 10: HEALTH & WELLNESS
- Section 12: MEDICAL
- Section 13: OBSTETRICS/GYNECOLOGY
- Section 14: PATIENT & FAMILY SOCIAL SERVICES
- Section 15: PEDIATRICS
- Section 16: SUBSTANCE ABUSE
- Section 17: TRANSPORTATION

### Table of Contents



#### Section 1: EMERGENCY SERVICES

- ES1. [Hawaii County Urgent Services Directory\\*](#)
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  - ES2.3. [Child & Family Services: East Hawai'i Domestic Abuse Shelter\\*](#)
  - ES2.4. [Catholic Charities Hawai'i Island Community Office](#)
- ES3. [Emergency Services](#)
  - ES3.1. [Aloha United Way - Health and Human Services Hotline\\*](#)
  - ES3.2. [Hawaii Community Paramedicine Program\\*](#)
  - ES3.3. [A Safe Place to get help. Call...\\*](#)
- ES4. [Helpful Numbers](#)
  - [ACCESS LINE \(Crisis Line of Hawaii\)\\*](#)
  - 24-HR Sexual Assault Line
  - Suicide Hotline
  - Catholic Charities Helpline



#### Section 2: ADVANCED CARE PLANNING

- ACP1. [Conversation Starter Kit\\*](#)
- ACP2. [Hawaii Health Care Directive\\*\\*](#)
- ACP3. [Kupu Care\\*\\*](#)
- ACP4. [Hospice of Hilo\\*\\*](#)
- ACP5. [Community First\\*](#)

# ECOSystem RESOURCES

File of Contents.pdf - Adobe Acrobat Standard DC

Edit View Window Help

File Tools Document

Attachments

Name

- ACP1. Conversation Starter Kit.pdf
- ACP2.a. Hawaii Health Care Directive
- ACP2.b. Hawaii Health Care Directive
- ACP3. Kupu Care.pdf**
- ACP4. Hospice of Hilo.pdf
- ACP5. Community First.pdf
- ACP6. Provider Orders for Life-Sustaining Treatment
- ES1. Urgent Services Directory.pdf
- ES2.1. Public Emergency Shelters.pdf
- ES2.2. Salvation Army.pdf
- ES2.3. Child & Family Services East Hawaii.pdf
- ES3.1. Aloha United Way (211)- Health Services.pdf
- ES3.2. Hawaii Community Paramedicine.pdf
- ES3.3. A Safe Place to get help, Call...pdf
- ES4. ACCESS LINE (Crisis Line of Hawaii).pdf
- ES4. Crisis Line Hawaii.pdf
- GB2. IPA Behavioral Health Brochure.pdf
- GB3. ACCESS LINE.pdf
- GB5.1. Lokahi Treatment Center.pdf
- GB5.1.a. Lokahi Center Referral Form.pdf
- GB5.2. Big Island Substance Abuse Treatment Center.pdf
- GB5.2a. BISAC Referral Form.pdf
- GB5.2b. BISAC Health & Wellness Checklist.pdf

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- Section 1: EMERGENCY SERVICES**
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- ACP5. [Community First\\*](#)

1 / 20






**Lani Weigert**  
Clinical Relations Manager  
590 Kapi'olani Street  
Hilo, HI 96720  
Office: 808-934-2913  
Direct: 808-283-3777  
Fax: 808-935-2189  
lanie@kupucare.org

*Aloha,*

Welcome and Mahalo for allowing our Kupu Care Team the opportunity to walk with you and your family.

5 / 20

	Speech, Physical, and Occupational Therapists, if needed	Not Included	Yes
	KUPU CARE 590 Kapi'olani St. Hilo, HI 96720 Office: 808-934-2913 Fax: 808-935-2189 www.kupucare.org		
			HOSPICE OF HILO 1011 Wai'anuanue Ave. Hilo, HI 96720 Office: 808-969-1733 Fax: 808-961-7396 www.hospiceofhilo.org

**KUPU CARE**  
Together... Supporting Lives

**Referral for Consult/ Admission Order**  
590 Kapiolani Street, Hilo, Hawaii 96720 | Phone (808) 934-2913 | Fax # 808-935-2189

PATIENT INFORMATION	
Last Name	First Name
Date of Birth	Social Security #
	Phone

\*My patient \_\_\_\_\_ has the following diagnosis  
 Congestive Heart Failure (NYHA Class III-IV)  Cancer, and is appropriate for the Kupu Care program.

\*Reason(s) for Referral: (Please check all that apply):  
 Goals of Care/Advance Care Planning  
 Symptom Management  
 Care Coordination

\*I have discussed this referral with my patient/family:  Yes  No



## Aloha Kidney

### September 2017 class series

With	Ramona Wong MD Kidney doctor - retired	What	6 weekly classes, 2 ½ hours each
Where	East Hawai'i IPA Ka Waena Lapa'au Bldg. LOWER LEVEL 670 Ponahawai St#117 Hilo, HI 96720	When	1 – 3:30 pm Thursday afternoons
Who	Anyone interested in, at risk for, or with CKD, GFR less than 60, or excess protein in urine	Bring	Pen, a family or friend who loves you (one who buys/cooks the food)
		Cost	No cost

### What we talk about

- 9/21/17 – You and your kidneys: What kidneys do, what happens when they fail
- 9/28/17–Aloha kidney:How to prevent or slow loss of kidney function, protect what's left
- 10/5/17 - Kidney, heart, brain connection: Why at risk and what to do about it
- 10/12/17- Options if kidneys fail: Dialysis, transplant, natural life options
- 10/19/17– Food, labs, meds . . . help?! Understand what matters with CKD
- 10/26/17– Choices: Others share their journey with dialysis, transplant, natural life

Come and see if these classes can help you and your family.

Call to register: (808) 585-8404

### CLASS DATES:

(THURSDAYS)

SEPT 21

SEPT 28

OCT 5

OCT 12

OCT 19

OCT 26

### TIME:

1 – 3:30 PM

### LOCATION:

EAST HAWAII IPA

“NEW” OFFICE

**REFER YOUR PATIENTS!**



## Free Advance Health Care Directive Classes

- Referral forms available (contact Tony Kent: [akent@communityfirst.co](mailto:akent@communityfirst.co))
- Community resource referral
- **Patient returns to you with a COMPLETE AHCD**

### Dates

November 7, 2017

January 10, 2017

February 13, 2017

March 10, 2017

April 11, 2017

May 8, 2017

# A Resource For Your Patients

- Regularly Scheduled AHCD classes at the Aging and Disability Resource Center (Every month starting in 2018. Weekend and evening classes are scheduled)
- Patients attend the first class. The committee offers the follow up in two weeks to answer additional questions and witness AHCDs for patients.
- Over 300 AHCDs Completed in East Hawaii
- Approximately 50% completion rate!  
20+ patients attending each class.
- Flyers with current dates available with EHI Office or from Community First



# Schedule

## Scheduled ADRC Information Sessions

Tue. -Nov. 7, 2017 9a – 10:30a (Follow up: Nov. 21, 9a – 10:30a)

Wed. - Jan. 10, 2018 9a – 10:30a (Follow up: Jan. 24, 9a – 10:30a)

Tue. - Feb. 13, 2018 5p – 6:30p (Follow up: Feb. 27, 5p – 6:30p)

Sat. - Mar. 10, 2018 9a – 10:30a (Follow up: Mar. 24, 9a – 10:30a)


Wed. – Apr. 11, 2018 9a – 10:30a (Follow up: Apr. 25, 9a – 10:30a)

Wed. May 9, 2018 5p – 6:30p (Follow up: May 23, 5p – 6:30p)

<http://www.CommunityFirstHawaii.org/registration>

OR [akent@communityfirst.co](mailto:akent@communityfirst.co) or 464-2800.





KTA Pharmacy  
Diabetes Self-Management  
Education (DSME)  
in **HILO**

Dayna Wong-Otis, Pharm. D.

# KTA Pharmacy DSME

- Who is eligible?
  - Patients with a diagnosis of **diabetes**
  - Does NOT include pre-diabetes
- Topics Covered:
  - The Essentials of Living with Diabetes
  - Healthy Eating
  - Preventing Complications
  - Medications and more

# KTA Pharmacy DSME

- Accepted insurances: Medicare, HMSA, UHA, AlohaCare (soon), United Health Care (soon)

- Cost to Patient

100% Covered (not including tax)	Co-pay or Co-insurance required
<ul style="list-style-type: none"><li>• United Health Care</li><li>• AlohaCare</li><li>• UHA</li></ul>	<ul style="list-style-type: none"><li>• Medicare</li><li>• HMSA</li></ul>

- Plan Limitation

– Medicare: 10 hours of initial DSME, then 2 hours follow-up every year after

# KTA Pharmacy DSME

- Referring Patients – Send all documents to East Hawaii IPA
  - Referral form
  - Demographic Sheet
  - Medication List
  - Labs
  - Most Recent Notes on Diabetes Consultation
- East Hawaii IPA will schedule patient for next available session

# KTA Pharmacy DSME

- Kick-Off Event: Wednesday, October 11, 2017
  - East Hawaii IPA Office
  - 4:00 pm to 4:30 pm
  - Interested patients should RSVP to East Hawaii IPA
- Program begins Monday, October 16, 2017

# Why Palliative Care Matters?

*Understanding Kupu & Hospice  
Care*



**The Goal of Palliative Care is  
to provide Relief & Comfort  
from Pain & Symptoms  
caused by serious illness**



# Who Needs Palliative Care?

Those challenged with:

- Frequent ER or Hospital Visits
- Frequent Calls or Visits to Your Office
- Diminished Independent activities





# Qualifying for Kupu Care

Patients of “any age” diagnosed with:

☞ **Congestive Heart  
Failure 3 & 4**

☞ **Cancer – Any Type,  
Any Stage**



# Who Needs Comfort Care

## Patient who:

- Frequent visits to ER or calls/visit to your office
- Shortness of Breath
- Fallen several times
- Sleeping or lying in bed most of day



- Needs Oxygen
- Loss of appetite
- No Curative Treatments
- 6 month prognosis





# Kupu Care vs. Hospice Care

## Kupu Care

- Palliative, Care Coordination
- Seeking a cure
- Live for years
- Relief Focus

## Hospice Care

- End of Life, Skilled Nursing Care
- 6-month life expectancy
- Not seeking a cure.
- Meds/Equipment
- Comfort Focus





# Questions?



***Mahalo!***





# *Patient Attribution under Payment Transformation*

## *East Hawaii IPA*



# Māhie 2020

ADVANCING THE HEALTH OF HAWAII

## *September 2017*



An Independent Licensee of the Blue Cross and Blue Shield Association

# Agenda – Patient Attribution

- Importance of PCP Selection and Attribution
- Current Process
  - PCP Selection Upon Enrollment/ Member Selection (HMO, QUEST Integration, Akamai Advantage®)
  - Attribution Process (PPO & Akamai Advantage)
  - Adding patient to panel
  - Scenarios/Issues
- Future Process
  - Timeline
  - New workflows – Adding Patient to Panel
  - Solutions
- Payment Transformation Resources:
  - Payment Transformation Program Guide
  - PCP Toolkit
  - Recorded webinars

# Importance of Patient Attribution

- Patient attribution part of Pay for Quality and Patient-Centered Medical Home from the beginning
- Greater importance
  - Monthly Payment Transformation payment = Base PMPM Rate X **Attributed Members**
  - Performance (quality) max potential = Performance PMPM X **Attributed Members** each month (or “member-months”)
- Reminder: Payment Transformation global payment is paid based on Member Attribution from one month earlier. (July 2017 payment is based on June 2017 member attribution)

# Current Process – Attribution

## PCP Selection Upon Enrollment

### HMO, QUEST Integration, Akamai Advantage

HMO	QUEST Integration	Akamai Advantage
Member selects HMO health center and a PCP within the health center*	Member selects PCP/clinic or is auto-assigned to a PCP/clinic	Member selects PCP*
PCP's name stored in HMSA's member data base and printed on ID card	PCP/Clinic's name stored in HMSA's member data base and printed on ID card	PCP's name stored in HMSA's member data base and printed on ID card

*\*HMO and Akamai Advantage members who do not select a PCP are currently attributed via claims history logic if a PCP did not add the member via Cozeva*



# Current Process – Attribution using Claims History

## Claims History Logic:

- PCP they've seen most frequently in the last 16 months
- In the event of a tie, PCP seen most recently - **unless PCP has added the member to their panel on Cozeva.**
- HMO and Akamai Advantage members who have not selected a PCP upon enrollment or updated their information with HMSA membership, are attributed based on claims history logic.\*
- PPO members are attributed based upon the claims history logic.\*
- QUEST Integration members are attributed based on claims history logic, only when a PCP removes the member from their panel via Cozeva.

*\* If no claims history, patient is not attributed to any PCP*

# Current Process – Add Patient to Panel

## ■ **HMO, QUEST Integration, and Akamai Advantage members**

- Members may call HMSA directly, to update their PCP selection
- Members sign the PCP Selection Form\*, PCP faxes form to HMSA, PCP adds the patient via Cozeva, and files the form in the member's medical record.

## ■ **PPO members**

- Members sign the PCP Selection Form\*, PCP adds the patient via Cozeva, and files the form in the member's medical record.


*\* Note: Pediatricians – A new form is available to indicate multiple children on one form*

# Changing PCPs

## PCP uses the PCP Selection Form

This form is sometimes called the **Attestation Form**

- Available at:  
[https://hmsa.com/portal/provider/zav\\_pel.aa.PAY.100.htm](https://hmsa.com/portal/provider/zav_pel.aa.PAY.100.htm)
- Available in several languages: English, Chinese, Japanese, Korean, Ilocano, Vietnamese

**hmsa** |   
An Independent Licensee of the Blue Cross and Blue Shield Association

**Primary Care Provider Selection Form  
for HMSA Members**

*Please complete this form to select or confirm your or your child's primary care provider (PCP). Completed forms should be returned to your/your child's PCP.*

**PCP Selection for Self**

I, \_\_\_\_\_, select / confirm that \_\_\_\_\_  
(Patient's full name) (Provider's full name)

is my PCP.

**PCP Selection for Child under 18 Years Old by Parent/Legal Guardian**

I, \_\_\_\_\_, select / confirm that \_\_\_\_\_  
(HMSA subscriber or authorized representative's full name) (Provider's full name)

is the PCP for my child, \_\_\_\_\_.  
(Child's full name)

By completing and signing this form, I attest to the following:

1. I understand that my or my child's PCP is a health care provider I select who is part of HMSA's network, and who provides routine health and well-being care and coordinates other specialized care.
2. If I am or my child is an **HMSA preferred provider organization (PPO) member, or a Fed 87 member**, I understand that I have a choice of PCPs who are contracted with HMSA, and that I may change PCPs at any time.

# Changing PCPs

## PCP uses the PCP Selection Form

- Ensure patients are informed and **agree** they want you as their primary care provider.
- Explain your role as their PCP and the significance of the PCP Selection Form.
- Member completes form and signs.
- Provider keeps the form on file.

# How to Add a Patient Using Cozeva

Add Patient

There is a medical need to add the following patient to my medical panel.

First Name Middle Initial Last Name Birthdate

Female HMSA

Search Result:

- [Member Name]

For all providers:

I confirm that there is a medical need to access this patient's information.

Primary Care Providers must also complete the section below.

Add patient to p4q program or Payment Transformation program.

Sign by typing in your full name as "[Redacted]" \*

Date \* 05/02/2016

Add

E.g., 05/02/2016

**1. Complete necessary information and click "Search"**

**2. Click the circle next to the member's name to confirm member**

**3. Click the first box to confirm the medical need to access the member's information**

**4. Click second box, "Add patient to P4Q or Payment Transformation program"**

# Current Scenarios/ Issues

Line of Business	Scenario	Likely Cause
<b>HMO, QUEST Integration, Akamai Advantage</b>	HHIN shows member is enrolled to PCP A. Cozeva shows member is attributed to PCP B.	PCP B added the member in Cozeva without submitting the patient attestation to HMSA, so HHIN was not updated.  Attribution is with PCP B.
	HHIN shows member is enrolled to PCP A. Cozeva shows member has NO PCP.	PCP A “declined” the member and removed the patient from his panel at some point in the past, and never added them back via Cozeva.
<b>PPO</b>	Member had one office visit per year and was attributed to PCP A, then attribution changed to PCP B this month.	PCP B added the member in Cozeva;  Or:  The visit with PCP B tied the number of visits and was also the most recent. Claims history logic was applied in this case, because no PCP had ever added the member to their panel in Cozeva. Attribution is with PCP B.
	PCP A adds the patient to his panel for the month. PCP B tries to add the patient to his panel in Cozeva, but receives a “block” message from Cozeva.	Only one PCP can add a patient during the month. The second PCP will receive the “block” message.

# Future Process – Timeline

## Mid-August 2017 and beyond

**Mid- August  
to end of  
September**

**HMO, QUEST  
Integration, Akamai  
Advantage:**

Discrepancies between HHIN and Cozeva will be updated, based on member preference, or PCP in HHIN

**Early  
October**

**PPO:**

Systematically add PPO member to a PCP's panel based on claims history logic or a Cozeva add request in September to stabilize panels

**Mid-  
October**

**HMO, Akamai  
Advantage, QUEST  
Integration:**

Attributed to a PCP either via PCP Selection Form faxed to HMSA or member calls HMSA to change

**PPO:**

Attributed to a PCP who has affirmatively added them on Cozeva

# Future Process – Add Patient to Panel Beginning Mid-October

HMO, QUEST Integration and Akamai Advantage members

1.

- Member signs PCP Selection Form

2.

- PCP adds member to panel on Cozeva

3.

- PCP faxes form to Attn: HMSA Membership Services  
948-8235 (Oahu)  
1-800-540-1668 (Neighbor Islands)

4.

- PCP files form in the member's medical record

5.

- Member is attributed to the PCP in HMSA's enrollment database as of the end of the month



# Future Process – Add Patient to Panel Beginning Mid-October

HMO, QUEST Integration and Akamai Advantage members

## **Special notes:**

- Fax the PCP Selection Form at least 2 weeks prior to end of the month to assure HMSA assigns the member to that PCP for that month's count for PMPM payment
- PCP will still be able to add member(s) in Cozeva for purposes of accessing the member's profile. However, the member will not be added to the panel for PMPM payment unless the Selection Form is submitted and processed by HMSA.

# Future Process – Add Patient to Panel Beginning Mid-October

## PPO members

1.

- Member signs PCP Selection Form

2.

- PCP adds member in Cozeva

3.

- PCP files form in the member's medical record

*Note: Members will no longer be attributed to a PCP via the claims attribution process. PCPs will only be able to add PPO members via Cozeva*

# Solutions – Stabilization is the goal

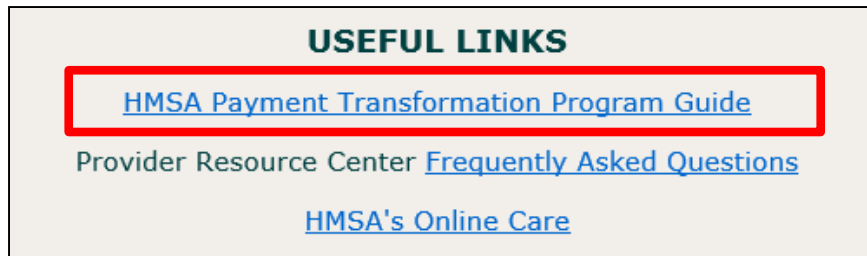
Line of Business	Current Scenario(s)	Future Process/ Resolution
<b>HMO, QUEST Integration, Akamai Advantage</b>	1. HHIN shows member is enrolled to PCP A. Cozeva shows member is attributed to PCP B.  OR 2. HHIN shows member is enrolled to PCP A. Cozeva shows member has NO PCP.	<p><u>Mid-August – end of September:</u>            HMSA mailing letters to members, asking the member to confirm who they want as their PCP            *If member does not respond, attribution will revert to PCP selection on HHIN. QUEST Integration members may be auto-assigned a PCP.</p> <p><u>Beginning mid-October:</u>            Any changes to PCP selection can be made by:</p> <ol style="list-style-type: none"> <li>1. PCP faxing a Patient Attestation Form to HMSA</li> </ol> OR <ol style="list-style-type: none"> <li>2. Member calls HMSA to update their PCP selection</li> </ol>
<b>PPO</b>	Member had office visit(s) in the past and was attributed to PCP A, then attribution changed to PCP B this month.	<p><u>Early October:</u>            Cozeva will systematically “add” all PPO members to your panel</p> <ol style="list-style-type: none"> <li>1. Members who were attributed to you via claims history logic</li> </ol> OR <ol style="list-style-type: none"> <li>2. Members you added in Cozeva in the month of September</li> </ol> <p><u>Beginning mid-October:</u>            Members are attributed to a PCP who has affirmatively added them on Cozeva. The PCP Selection Form should be retained in the medical record. HMSA will no longer be using claims history logic to attribute members to a PCP’s panel.</p>



# RESOURCES

# Payment Transformation Program Guide

- Accessible via HHIN. Login with Username and Password.
- Scroll down to “Useful Links”
- Click on “HMSA Payment Transformation Program Guide”



*To request HHIN access, call 948-6255 on Oahu or 1 (800) 603-4672, ext. 6255 toll-free Neighbor Islands*

# PCP Toolkit

- Available in HMSA's Provider Portal - <https://hmsa.com/providers/>
- Scroll down to "Reference Information" section
- Under "Programs," click on "Payment Transformation"



**Reference Information**

**Provider Library**  
Contains HMSA's **medical policies**, **formulary** information, **claims filing** guidelines, **payment and appeals** processes, **behavioral health** policies, and other important information

**Programs**  
Learn about incentive programs offered by HMSA, such as **Payment Transformation**, **Pay for Quality**, & **PCMH**

# Payment Transformation – Recorded Webinars



- Available in HMSA’s Provider Portal - **<https://hmsa.com/providers/>**
- Scroll down to “Reference Information”
- Click on “Training”

## Reference Information

### Provider Library

Contains HMSA’s **medical policies**, **formulary** information, **claims filing** guidelines, **payment and appeals** processes, **behavioral health** policies, and other important information

### Programs

Learn about incentive programs offered by HMSA, such as **Payment Transformation**, **Pay for Quality**, & **PCMH**

### Plan Libraries

View specific policies and processes associated with our **QUEST Integrated** (Medicaid) and **Akamai** (Medicare) programs

### Training

View webinars and materials on Payment Transformation, Pay for Quality, ICD-10, QUEST Integration, Akamai Advantage, and other topics

# Payment Transformation – Recorded Webinars (cont.)

## • Payment Transformation

- **Important Announcements for PCPs about 2017:** If you are a PCP explicitly affected by global payment and new quality metrics, depending on when the announcement is made, you may be impacted.
  - [Important Announcements for PCPs about 2017 \(video\)](#)
  - [Important Announcements for PCPs about 2017 \(PDF\)](#)
- **Payment Transformation Learning Modules:** We are presenting concise learning modules for 2017. We suggest that you watch the modules as a team.
  - **Module 1: Understanding the PMPM Band:** In preparation for global payment, we have assigned to for each line of business. View this module to understand the PMPM Band.
    - [Understanding the PMPM Band \(video\)](#)
    - [Understanding the PMPM Band \(PDF\)](#)
  - **Module 2: A Quick Intro to Payment Transformation:** In this short video, we provide a quick overview of the new payment model. It's only 10 minutes long, and will give you and your staff a good understanding of the new model.
    - [Quick Intro to Payment Transformation \(video\)](#)
    - [Quick Intro to Payment Transformation \(PDF\)](#)
  - **Module 3: Overview of the Primary Care Model:** This is a deeper dive into the Primary Care Model, covering Payment; Engagement; Performance and Total Cost of Care in just the time it takes to get a coffee.
    - [Overview of the Primary Care Payment Model \(video\)](#)
    - [Overview of the Primary Care Payment Model \(PDF\)](#)
  - **Module 4: Patient Attribution:** Member attribution takes on greater importance in the new payment model.

- Scroll down to “Payment Transformation”
- Click on the link to view a webinar
- Presentation slides are available as a PDF and may be downloaded



A large, lush green tree in a park with a rainbow in the sky. The tree is the central focus, with a tall palm tree to its left. The sky is filled with grey clouds, and a vibrant rainbow arches across it. The word "QUESTIONS?" is written in large, white, serif capital letters across the middle of the image.

# QUESTIONS?

# HMSA

## East Hawaii Provider Engagement Health Services Division Representatives

Tiffany Pa– [Tiffany\\_Pa@hmsa.com](mailto:Tiffany_Pa@hmsa.com)

808-630-5020

Nahea Brenneman- [Nahea\\_Brenneman@hmsa.com](mailto:Nahea_Brenneman@hmsa.com)

808-494-2069

## ❖ WHY???

- ❖ **IPA is projected to have positive fund balance in 2017**
- ❖ **Independent providers work hard with limited resources to follow best practices and document & report**
- ❖ **Offices need to continuously improve and train and empower staff**
- ❖ **Offices who perform well should be rewarded.**
- ❖ **IPA (PO) receives 90% of current funding from HMSA based on engagement and performance measures under Payment Transformation contract**



## **WHO???**

**Primary Care HMSA Payment Transformation Providers  
as of December 1, 2017**

## **WHEN?**

**Bonuses granted December 2017  
Based on 2017 Performance**

## **WHAT?**

**Selected PO (IPA) Engagement & Quality Performance Measure**

## **HOW??**

**Bonus Points Assigned to Selected Measures**

## Points System Basis

Meeting attendance (includes webinars) & in-office meetings

24/7 Access - Complete attestation form - Secret Shopper to Sample

Contact Patient After ER Visit

Complete IPA Communication Survey



**All PCPs have 24/7 coverage using AT LEAST ONE OF THE FOLLOWING:**

Able to access 24/7:

- (1) PCP directly via phone
- (2) Another provider in group or designee directly via phone
- (3) Via Live Answering Service in timely manner
- (4) Through an online platform when care isn't accessible in person or By phone (HMSA online care)

**MUST ATTEST TO IPA BY SEPTEMBER 25, 2017**

***75% of patients asked must answer 2, 3, or 4***

**➤ *IPA Must Attest***



## IPA Recommendations:

**Must have 24/7 access to provider or provider's delegate**

### Options:

- Use LIVE answering service
- Forward calls to your back-up provider's office
- Refer to Urgent Care – provide numbers?
- Refer to HMSA On-line care
- Forward to provider's cell phone

**Please complete attestation form to qualify for points**



## PO Measure – Emergency Room Utilization

### Best Practice – Follow-up with Patient In-Person, By Phone, Email AFTER ER Visit

Since 3/29/17 – Called patients to facilitate follow-up appointment/touch base

1,582 patients – showed up at ER to-date (includes frequent fliers)

#s patients per provider ranged from 1 to 117 patients

147 of these were frequent fliers – 2, 3, & 4 ER visits

251 touched by HMSA Patient Navigator

15 Payment Transformation Physicians HAVE BEEN REFUSING to follow up



# PO Quality Performance Measures - Answer Survey



## PO (IPA) Communication

Earn points TODAY!!

PLEASE COMPLETE QUESTIONNAIRE FOR BONUS POINTS



PCP Name \_\_\_\_\_

Please circle:

1. Does EHI IPA regularly inform you of educational workshops and training?  
Yes / No
2. Have you participated in EHI IPA meetings, workshops and/or webinars?  
Yes / No
3. Has the IPA shown a willingness to answer or find answers to your questions?  
Yes /No
4. Has the IPA provided you with information on Ecosystem (Community) Resources?  
Yes /No



## WE'VE MOVED!!!!

### NEW ADDRESS:

Ka Waena Lapa'au Building  
**670 PONAHAHAWAI ST., STE. 117**  
**HILO, HI 96720**





- Tuesday, September 26 eClinical Works Kick-Off Lunch
- Thursday, October 12 Pediatrician Huddle
- Tuesday, November 7 Hilo Medical Center - EHI IPA Physician Mixer
- Wednesday, November 8 EHI Member Retreat
- **Tuesday, December 12 Super Huddle**

Visit our calendar of events at [www.ehiipa.com](http://www.ehiipa.com)

Download RSVP forms for:

- Super Huddles
- Pediatrician Meetings
- Symposium
- Workshops
- Special Events

