GPP LEAD MONTHLY WEBINAR

Tuesday, October 22, 2019; 12-1pm

Play recording

Agenda

Time	Topic	Lead(s)
3 min	Welcome & Roll-Call	Kristina Mody
5 min	Program Updates • Reporting Reminders	John Minot
20 min	PY4 Interim Data Q&A	Kristina John Aaron Mendelson
5 min	Encounter Data Review - Update	Kristina Aaron
2 min	Resources & Key Dates	Kristina

Roll-Call & Webinar Reminders

WEBINAR REMINDERS:

Mute Please mute locally

Chat Questions typed here will only be seen by CAPH/SNI Staff, who will repeat question and answer for group

Attendance Designate one person (GPP Lead or project lead) to speak
Contact Abby Gonzalez if you want to add other team members

Post-Webinar Please take our post-event survey!
Recordings of the webinar and slide deck posted on SNI Link

AHS	ARMC	CCRMC	KMC	LACHDS	NMC
Mini Swift	Staci McClane	Shannan Moulton	Tyler Whitezell	Robyn Laigo	Daniel Leon
RUMC	**SCVMC**	**SFHN**	**SJGH**	**SMMC**	**VCMC**
Ana Howe	Gabriela Deeds	Matthew Sur	Alison Shih	Dave McGrew, Isela Montenegro	Erik Cho

PROGRAM UPDATES

Program Updates

Reporting

- PY4 Final Report (Due 3/31/20)

Financing

- DSH FFY2019-2020 estimate from CMS: 30% cut to DSH, leaving GPP at $926m FFP, 23% less than FY18-19

- Q1PY5 (FY19-20) IGTs payments being processed
  - Will include estimated DSH cuts
  - May be possible to include partially or fully restored amounts in Q2 payments if Congress moves forward with a DSH cut delay
  - CAPH is working actively with the State on this issue.

PY4 INTERIM DATA

Program Year (PY) 4 Interim Summary

- County public health care systems (PHS) met between 71% and 135% of their target thresholds
  - 100% collectively

- Continued overall downward trends across all BH services

PY4 Interim Performance

Aggregate PHS Performance	Year
102%	PY 1 (FY 15/16, Final)
97%	PY 2 (FY 16/17, Final)
104%	PY 3 (FY 17/18, Final)
100%	PY 4 (FY 18/19, Interim)

Threshold Range	# of PHS in range, PY4
<75%	1
75%-90%	2
90%-100%	3
100%+	6

GPP Service Mix To Date
PY1-4 (Interim), Physical Health

Physical Health

% Change, GPP
Utilization,
PY1-PY4
(Interim)

|	Outpatient (Non-ER)	Inpatient Med/Surg	Emergency
% Change	12.5%	-7.9%	-4.2%
	✓	✓	✓
# systems trending in the right direction (of 12)	10	5	6
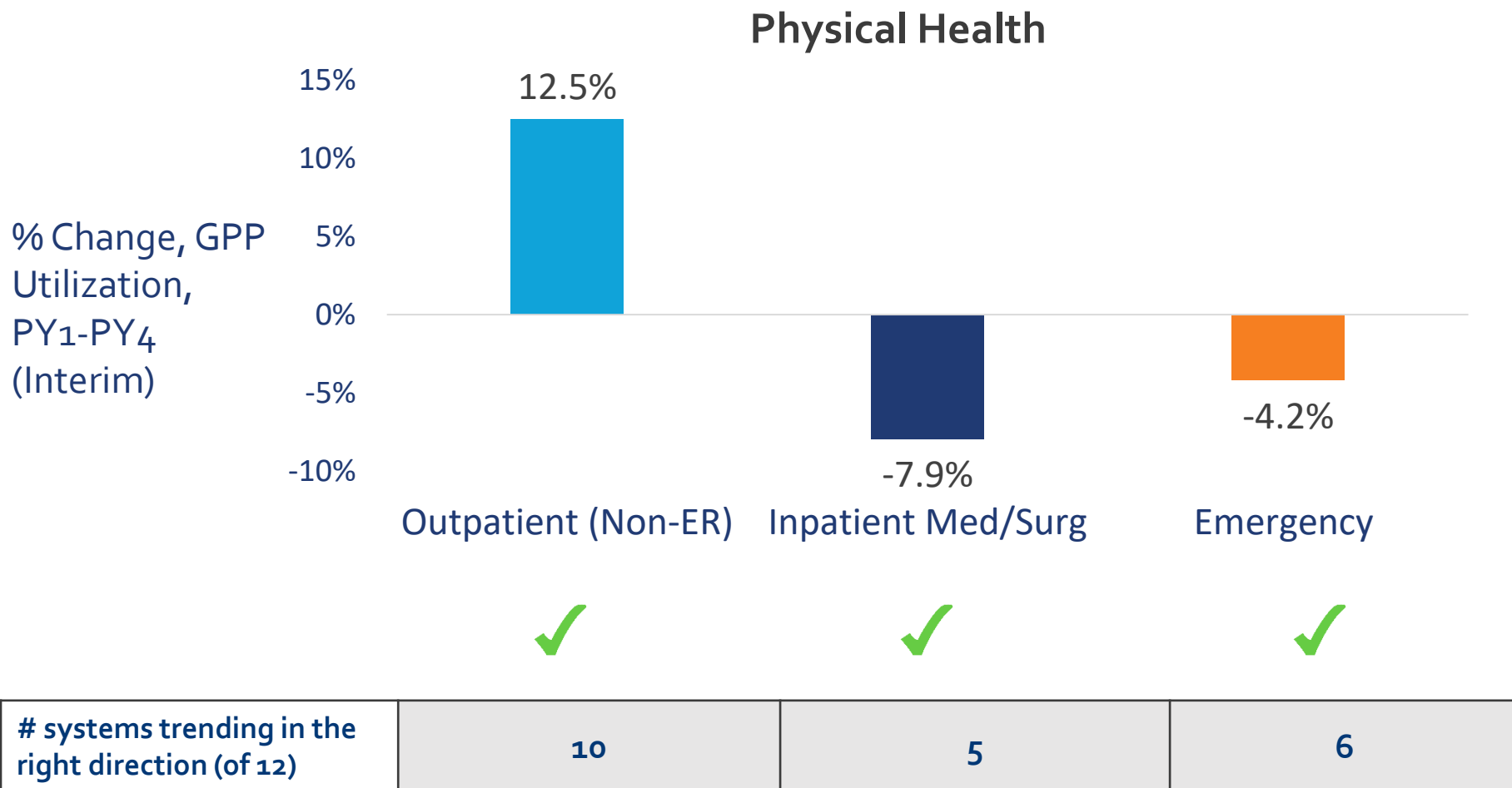
✓ Majority of PHS increased utilization of outpatient services, and ~ half reduced emergency and inpatient services.

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GPP PY4 Interim: Member-level Physical Health
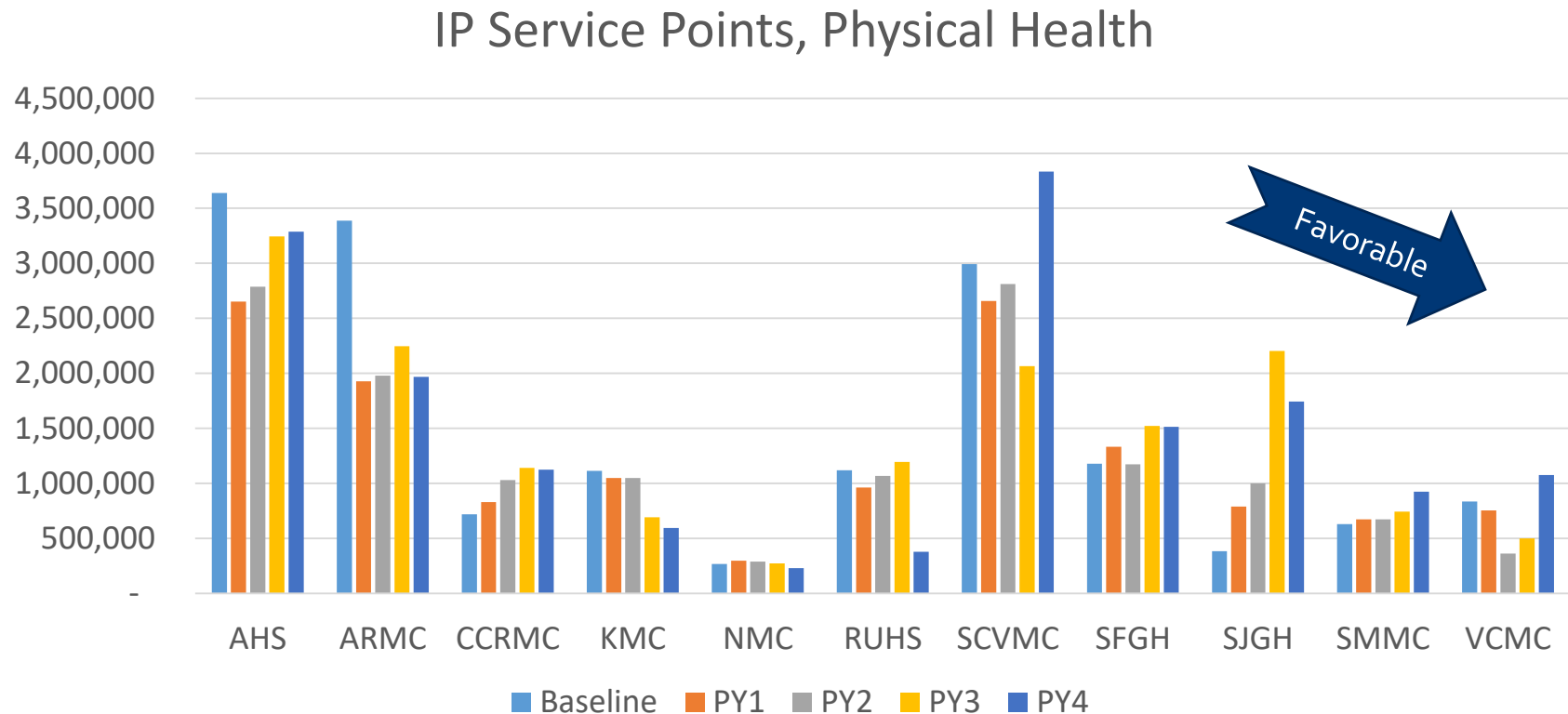## PY1-PY4 Trends *as of 8/15/19*

	LAC	AHS	ARMC	CCRMC	KMC	NMC	RUHS	SCVMC	SFGH	SJGH	SMMC	VCMC
Out patient	11.5%	14.2%	-34.9%	16.5%	193.8%	38.4%	109.4%	1.8%	0.4%	-35.1%	6.1%	7.5%
Med/ Surg	-18.5%	31.5%	-41.8%	25.5%	-71.5%	-13.8%	-66.9%	51.4%	65.7%	215.6%	6.1%	8.2%
Emer- gency	-10.6%	-17.5%	35.0%	14.5%	-3.0%	4.1%	-14.7%	51.5%	1.8%	-6.6%	3.6%	-27.7%

PY4 Interim Physical Health Outpatient Service Trend
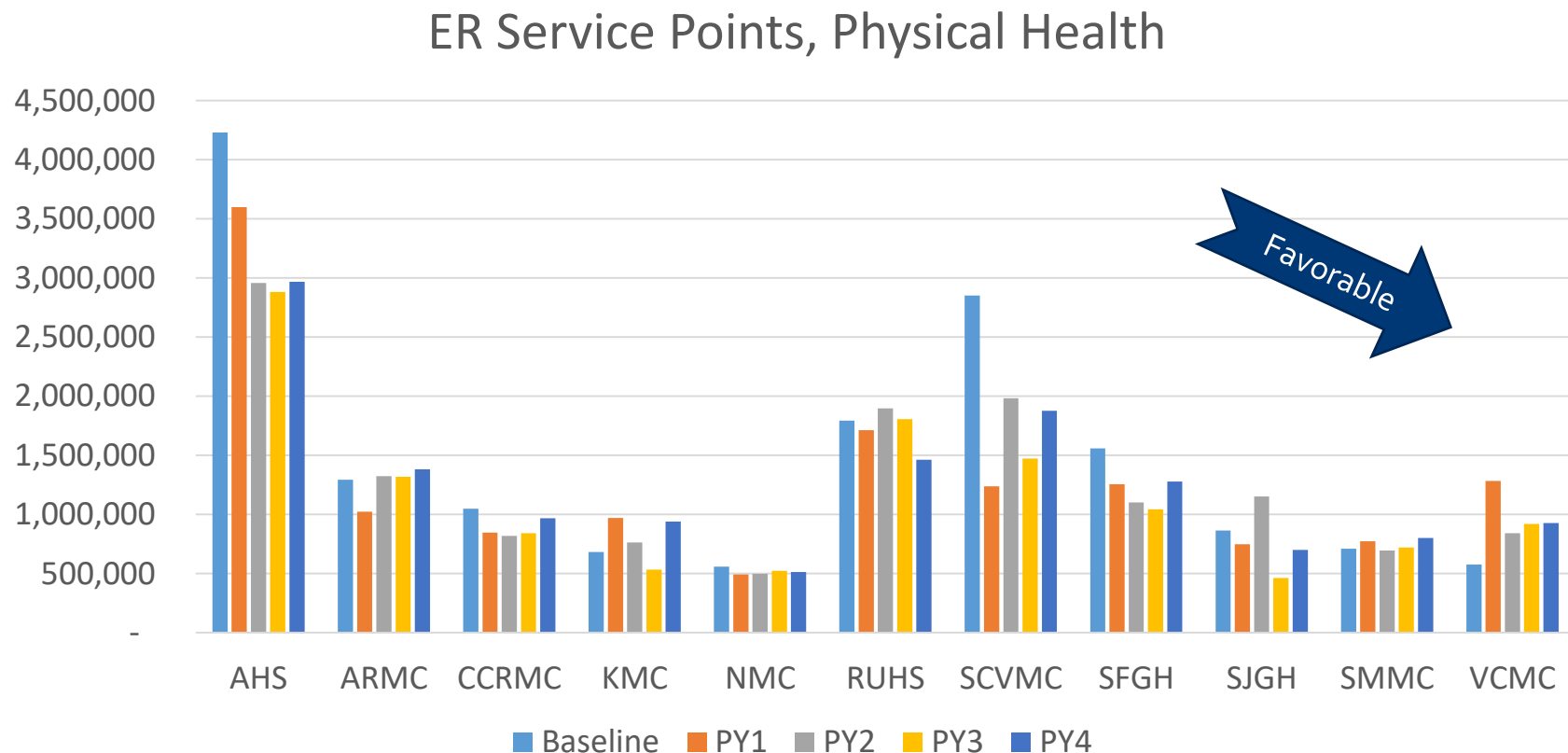

OP Service Points, Physical Health
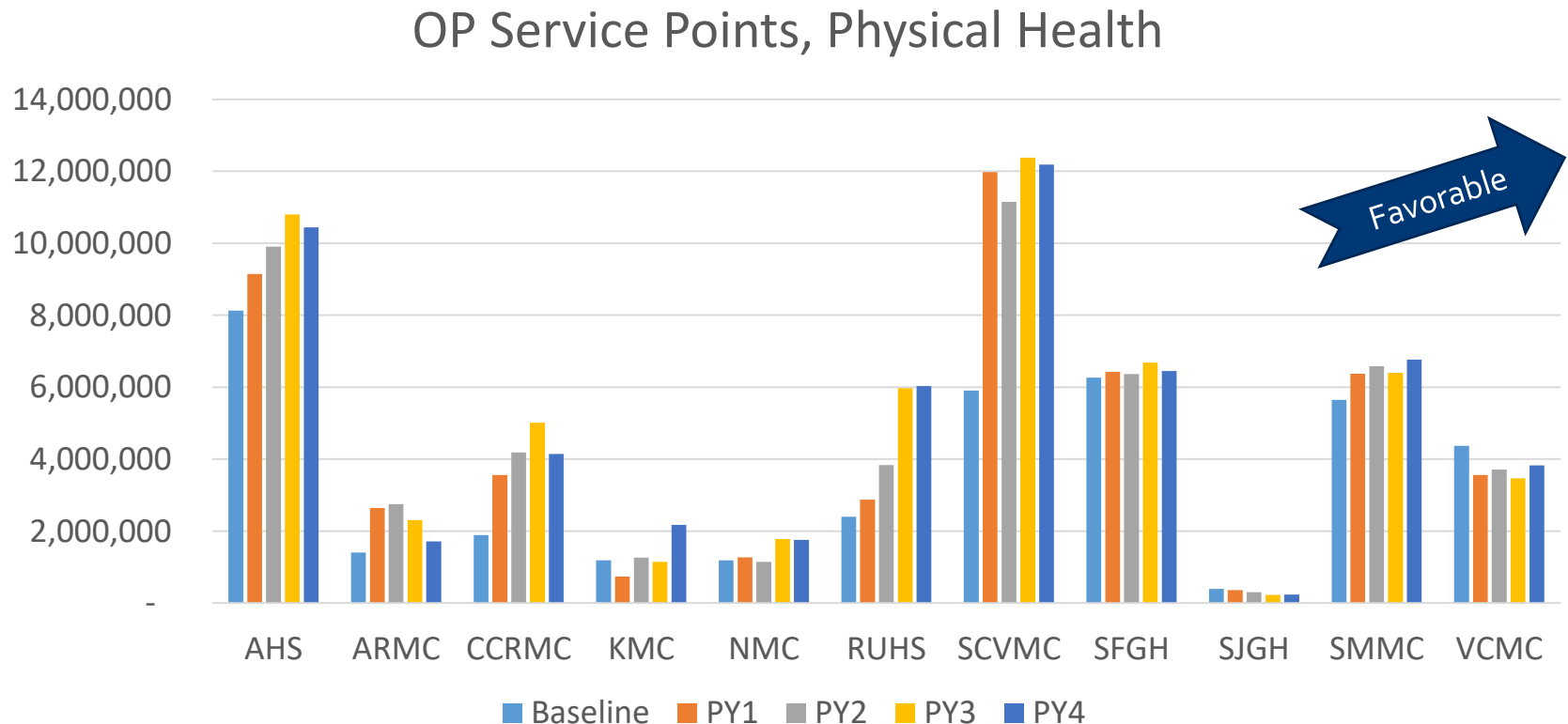
From baseline to PY4, Los Angeles County increased OP Physical Health Services overall.

PY4 Interim Physical Health Inpatient Service Trend

IP Service Points, Physical Health

Los Angeles County decreased IP Physical Health Services for all years except PY3 to PY4.
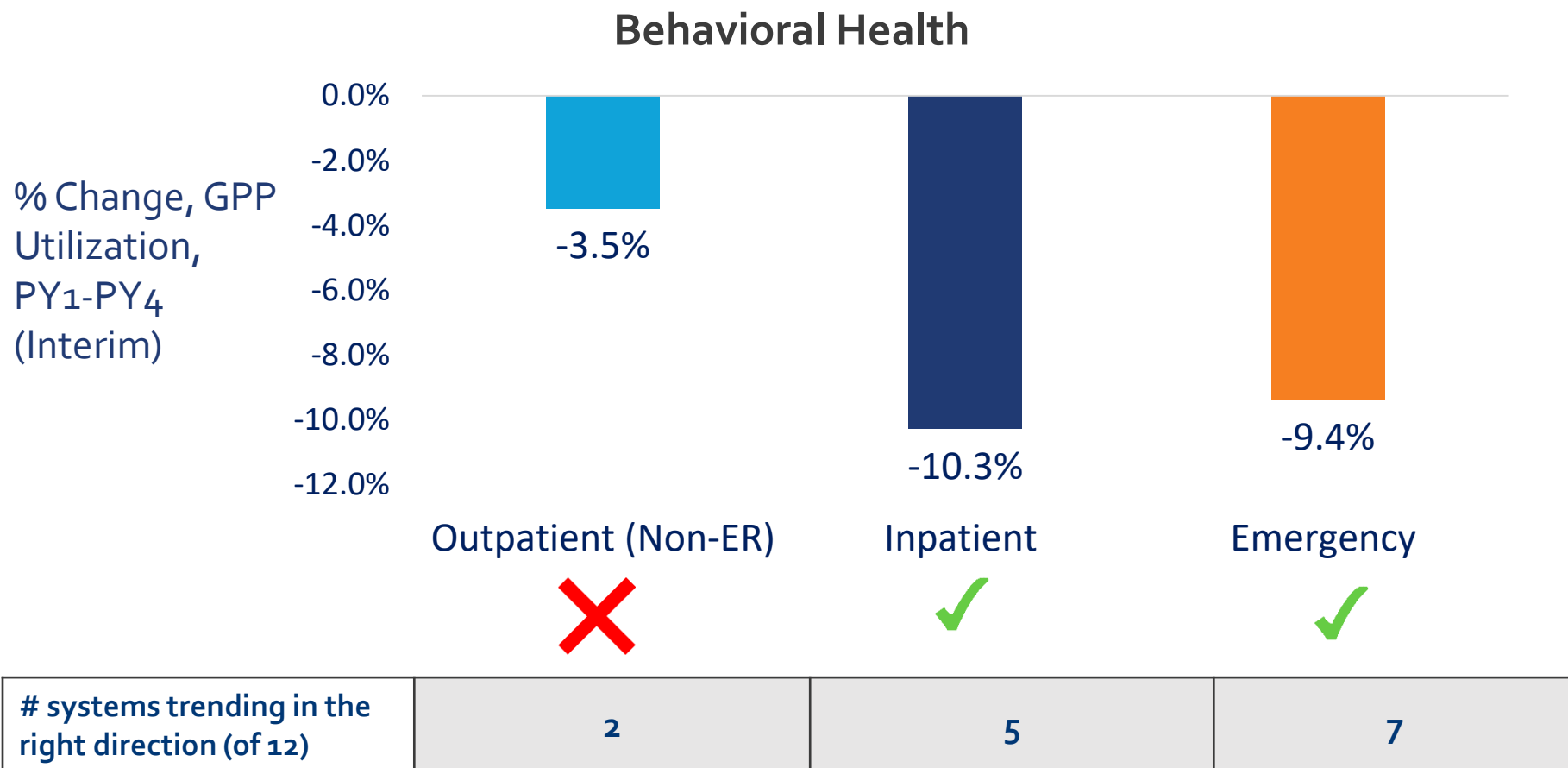
PY4 Interim Physical Health Emergency Service Trend

ER Service Points, Physical Health

From baseline to PY4, Los Angeles County decreased ER Physical Health Services overall.

GPP Service Mix To Date
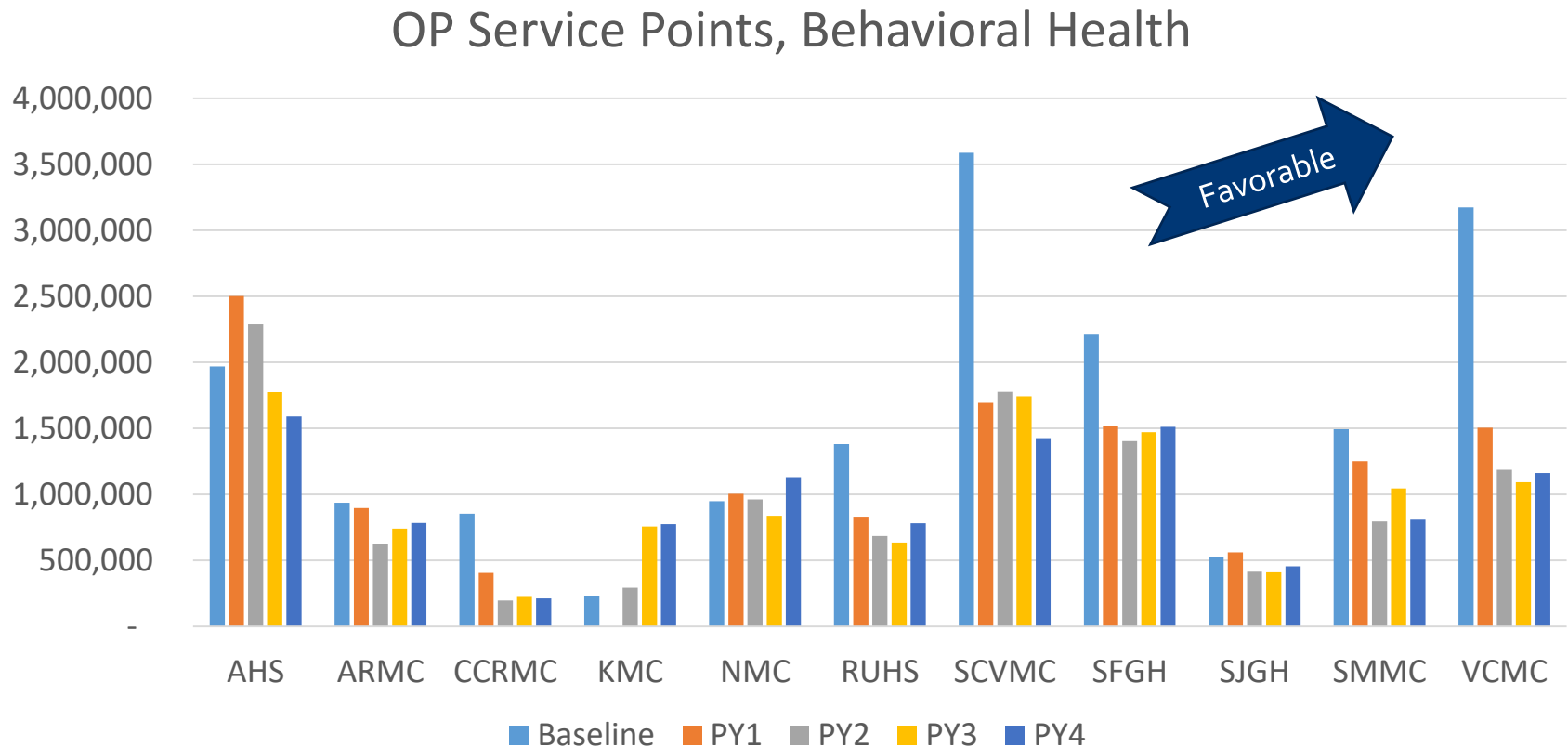## PY1-4 (Interim), Behavioral Health

Behavioral Health

% Change, GPP Utilization, PY1-PY4 (Interim)

Category	-3.5%	-10.3%	-9.4%
	Outpatient (Non-ER)	Inpatient	Emergency
	✗	✓	✓

# systems trending in the right direction (of 12)	2	5	7

✗ Nearly all systems saw decreases in outpatient BH services.

✓ Approximately half decreased their BH Emergency and IP services.
(Significant variation among systems)

GPP PY4 Interim: Member-level Behavioral Health
PY1-PY4 Trends *as of 8/15/19*

	LAC	AHS	ARMC	CCRMC	KMC	NMC	RUHS	SCVMC	SFGH	SJGH	SMMC	VCMC
Out-patient	15.4%	-36.4%	-12.5%	-47.6%	-	12.4%	-6.1%	-15.7%	-0.4%	-18.7%	-35.4%	-22.8%
In-patient	-16.3%	34.9%	0.3%	-62.7%	10.6%	192.6%	-13.7%	-41.1%	240.0%	28.1%	37.2%	-46.5%
Emer-gency	-25.6%	-49.2%	217.5%	-7.7%	-6.9%	105.8%	-25.3%	103.6%	-10.1%	36.9%	42.5%	-59.6%

PY4 Interim Behavioral Health Outpatient Service Trend

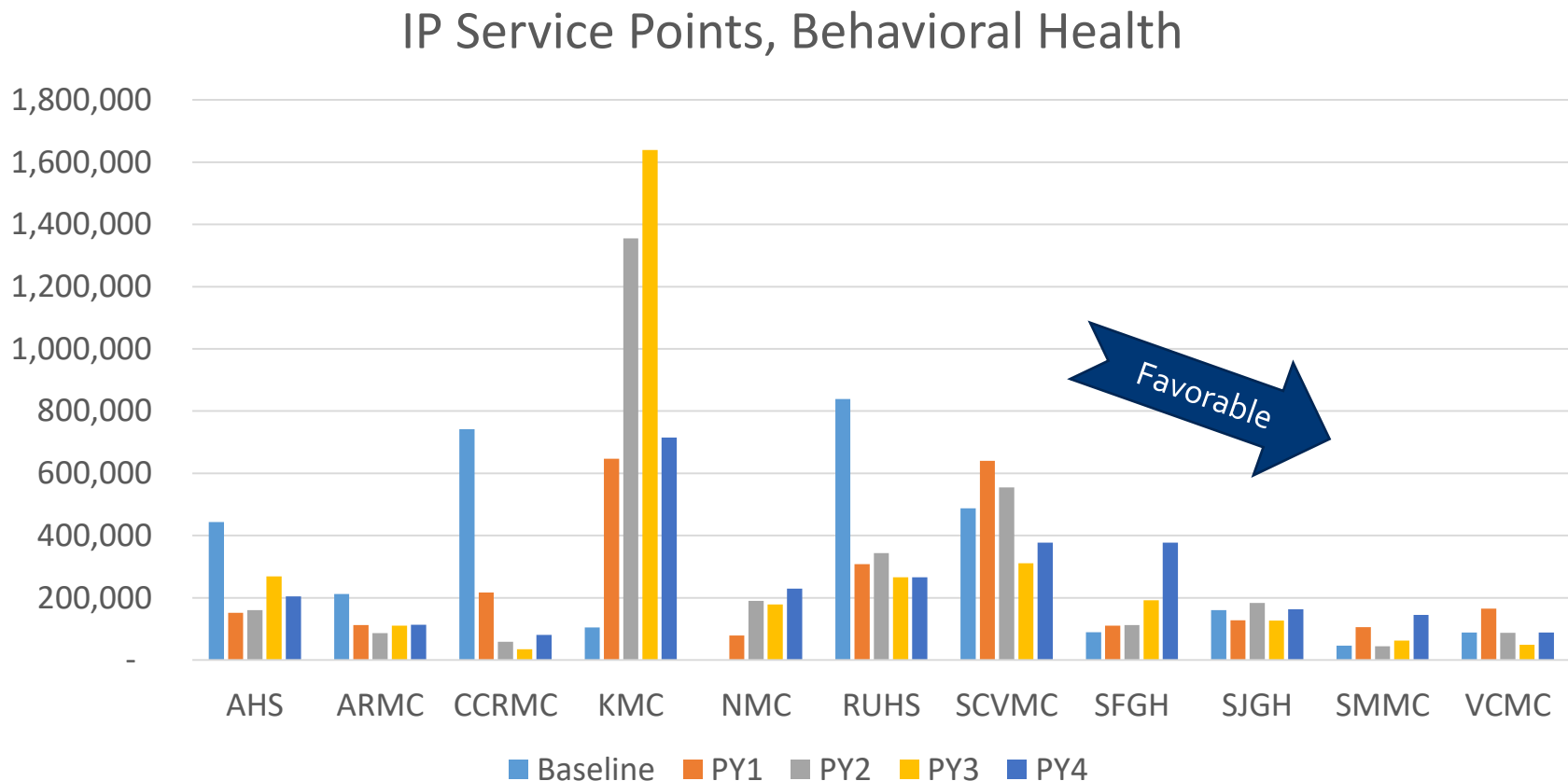## OP Service Points, Behavioral Health

From baseline to PY4, Los Angeles County increased OP Behavioral Health Services (except PY1 to PY2).

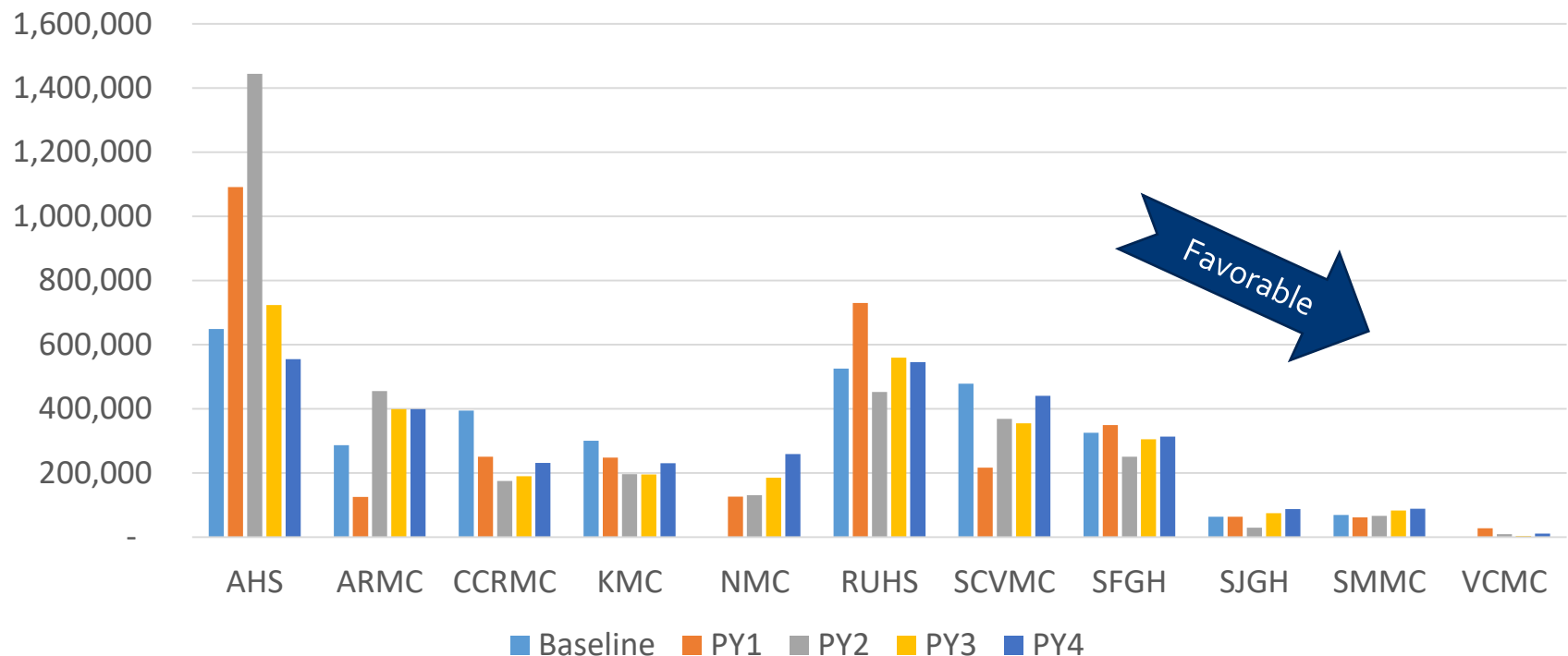# PY4 Interim Behavioral Health Inpatient Service Trend

IP Service Points, Behavioral Health

Los Angeles County decreased IP Behavioral Health Services overall from PY1 to PY4, except for PY2 to PY3.

PY4 Interim Behavioral Health Emergency Service Trend

ER Service Points, Behavioral Health

Overall Los Angeles County decreased Emergency Behavioral Health Services from PY1-PY4. However, services increased from PY 3 to PY 4.

PY4 Non-traditional services

Average of 9.9% points achieved through non-traditional (NT) services in PY4, down from 10.7% in PY3 (8% total NT point decline from PY3 to PY4)

4 systems have 10% of points due to NT services

1 system over 25%

PY4 Interim
Top 9 Reported NT Services

Who is reporting which non-traditional services?

Type	LAC	AHS	ARMC	CCRMC	KMC	NMC	RUHS	SCVMC	SFGH	SJGH	SMMC	VCMC	Total
RN-only visit	X	X	X	X		X	X	X	X	X	X	X	**11**
Case management	X			X	X	X		X	X	X	X	X	9
PharmD visit	X	X	X		X		X	X	X		X		8
Health education		X		X			X	X	X	X	X	X	8
Nutrition education	X			X	X		X	X	X			X	7
Community health worker		X		X				X	X	X		X	6
Home nursing visit	X						X	X	X		X	X	6
Telehealth (provider - provider) – eConsult / eReferral	X	X		X			X	X	X				6
Telephone consultation with PCP		X		X			X	X	X		X		6
Total	6	6	2	7	3	2	7	9	9	4	6	6	67

What Will Be Included in Your PY4 Interim Data Packet

Will be sent to members by 11/1/19

Includes

1. Data service trends

2. Non-traditional services provided in PY4

Q&A

ENCOUNTER DATA REVIEW

PY3 Encounter Data Validation

CAPH is assessing PY3 GPP encounter data against PY3 aggregate reports for

- Variances between the two data sources

- Completeness of fields in the encounter data

What's next:

CAPH/SNI

✓ **Reviewed** PY3 encounter data for quality, matches with encounter submission

- **Week of 10/28**: Kristina Mody to send GPP leads email to identify team leads for 45 minute call

- **This fall**: Will schedule individual meetings with each member to discuss system's encounter data

- **By 1 week before meeting**: Will send data issue summaries to each system

Members

- **Before meeting:**
  - Review reports as data team
  - Discuss local remediation options

RESOURCES & KEY DATES

Key Dates: At a Glance

Jan	✓ Wed 1/9 (12-1) GPP Webinar ✓ **1/30:** PY final aggregate report & aggregate data	**July**	
Feb	✓ Wed 2/6 (12-1): GPP Webinar ✓ **2/15:** GPP Survey due	**Aug 1**	▪ Thurs 8/1 (12-1): GPP Webinar ▪ **8/15:** Interim PY4 YE aggregate report
Mar	▪ Thur 3/7 (12-1): GPP Webinar	**Sept**	
Apr	▪ **4/2:** PY3 aggregate report revisions ▪ ~~Thurs 4/4 (12-1): GPP Webinar~~	**Oct**	▪ Tues 10/22 (12-1): GPP Webinar
May		**Nov**	
Jun	▪ Thurs 6/6 (12-1): GPP Webinar ▪ 6/30 Final evaluation due to CMS	**Dec**	▪ 12/4-12/6: CAPH/SNI Annual conference ▪ Dec 12/12 (12-1): GPP Webinar

Webinar series:
Clinical Documentation Improvement

This fall, SNI is partnering with the American Health Information Management Association (AHIMA) to present three webinars on improving clinical documentation. Click each webinar to read a description and register, or find full information here. Webinars will be available on SNI Link/Data.

Webinar 1: Essential Elements of a Successful Clinical Documentation Improvement (CDI) Program
Tuesday 11/5 11-12 PST; Registration Link

Webinar 2: Deep Dive into Inpatient and Outpatient CDI Wednesday 11/20 11-12 PST; Registration Link

Webinar 3: Key Takeaways for Continual CDI Success Thursday 12/12 1-2pm PST; Registration Link

Register Now!

Member early bird rate until Nov 8!

CAPH SNI

DESIGNING THE FUTURE
Annual Conference 2019

SAVE THE DATE!
December 4-6 | Paradise Point Resort, San Diego, California

Registration open now!

Nadine Burke Harris, MD
Surgeon General of California

Adam Schickedanz
Pediatrician & researcher, UCLA

Michelle Rhone-Collins
Founding LIFT-Los Angeles Executive Director

Len Nichols
Policy professor, George Mason University

Ai-Jen Poo
ED, National Domestic Workers Alliance

Celinda Lake
Pollster & political strategist

Stacey Chang
Founder & ED, Design Institute of Health

Robin Wittenstein
CEO, Denver Health

William York
Executive VP, 211 San Diego