



QUALITY CONNECTIONS

University of Maryland Quality Care Network Newsletter



MAKING A DIFFERENCE

"Case Management Team Goes Above and Beyond for Their Patients"



The Patient Story: Meet Mr. Taylor

Mr. Taylor is a 51 year old male patient of the University of Maryland Quality Care Network (UM QCN). He has a medical history of prediabetes, hypocholesteremia, hypertension, coronary artery disease, and obesity. Mr. Taylor was referred to the QCN Transition of Care Program for Case Management through the Health Information Exchange (CRISP). He was recently hospitalized at a local hospital for STEMI s/p cardiac catheterization with successful stenting of the ramus intermedius.

Patient Goal (Post Discharge)

Patient states he would like to make dietary and lifestyle changes to help him lose weight and to become healthier.

Interventions

Case Management (CM) to assist patient with referral to UM QCN Health Coach, provide heart healthy nutrition information/education and support the patient with working towards desired goal.

The Outcomes

CM made referrals to UM QCN health coach and pharmacist for medication reconciliation and recommendations which were sent to PCP. CM provided education on heart healthy diet and encouraged follow through with obtaining glucometer and checking blood sugar at home. CM sent care management notes and discussed case with PCP. During the 30 day program, the health coach communicated with patient and provided educational material on heart healthy and diabetic diets, activity tracker, as well as follow up with patient to review progress and continue education. Patient reported to CM that he was able to lose 18 lbs. due to dietary changes and has started exercising. Mr. Taylor improved his nutrition and overall health during the 30-day transition period and is now regularly engaged with his PCP.

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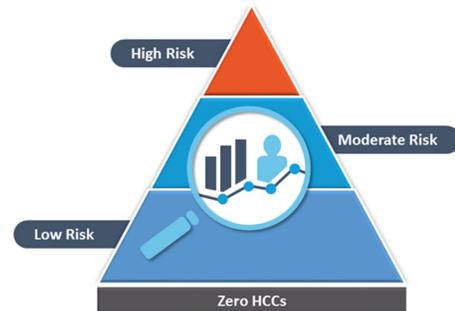
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COVER STORY

RISK ADJUSTMENT



What is Risk Adjustment?

Risk adjustment is a statistical process; it takes into account underlying health status and health expenditures of individuals to predict health care outcomes and costs. Risk adjustment is a modified version of the traditional capitation system, which is fairly limited in its ability to differentiate payment for the healthy person who rarely sees a physician vs. the person with multiple comorbid conditions who requires complex management. There are several risk adjustment models in place by government and commercial payers.

Centers for Medicare and Medicaid Services (CMS) risk adjust to appropriately pay for the risk of the beneficiaries they enroll, instead of calculating an average amount of cost for Medicare/Medicare Advantage (MA) beneficiaries.

Why is risk adjustment Important?

The CMS-HCC risk adjustment model is prospective: it uses health status in a “base year” to predict costs in the following year. In addition to diagnoses, base year factors include Medicaid status (defined as having at least one month of Medicaid eligibility during the base year), as well as gender, aged/disabled status, and whether a beneficiary lives in the community or in an institution. For MA plans, higher risk scores translate into higher PMPM payments, and lower risk scores translate into lower PMPM payments. MA programs may suffer financial losses if their HCC scores underestimate the degree of illness within their beneficiary population. For MSSP ACOs, higher risk scores for a population translate into a higher benchmark for expenditures, while lower risk scores translate into a lower benchmark. **Having an accurate benchmark is vital in achieving shared savings.** A benchmark that inadequately reflects the underlying health status of a population will be too low and will lead to expenditures that are higher than expected.

How risk adjustment translates into risk adjustment factors (RAF)?

CMS calculates a risk score, or “risk adjustment factor” (RAF) score, for each individual beneficiary and provides this information to each ACO and health plans quarterly. Deriving these scores from HCCs is relatively straightforward. Each demographic adjustment and HCC carries a score/weight within the model. Adding the weights together produces a risk score for that beneficiary.

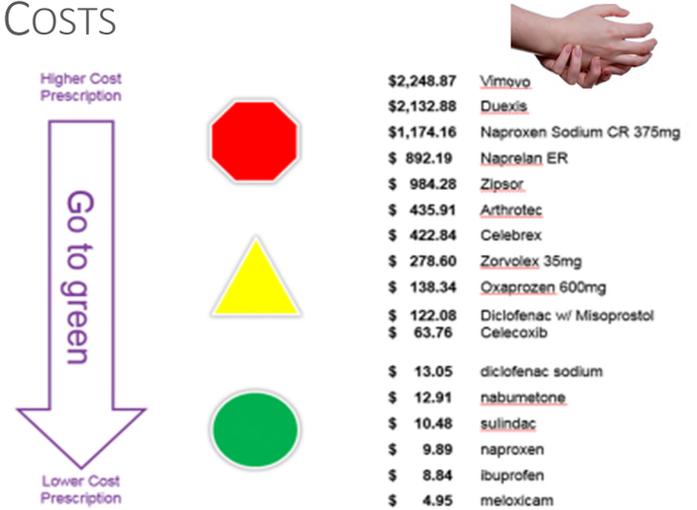
Why is documentation & coding important relative to risk adjustment?

All risk adjustment models depend on complete and accurate reporting of patient data. CMS requires that a provider identify all chronic conditions and severe diagnoses for each patient, to substantiate a “base year” health profile for those individuals. Documentation in the medical record must support the presence of the condition and indicate the provider’s assessment and plan for management of the condition. This must occur at least once each calendar year for CMS to recognize that the individual continues to have the condition. This information is used to predict costs in the following year. As such, incorrect or non-specific diagnoses can affect not only patient care and outcomes, but also reimbursement for that care, going forward.



COST & UTILIZATION

NONSTEROIDAL ANTI-INFLAMMATORY DRUGS (NSAID) PRESCRIPTION DRUG COSTS



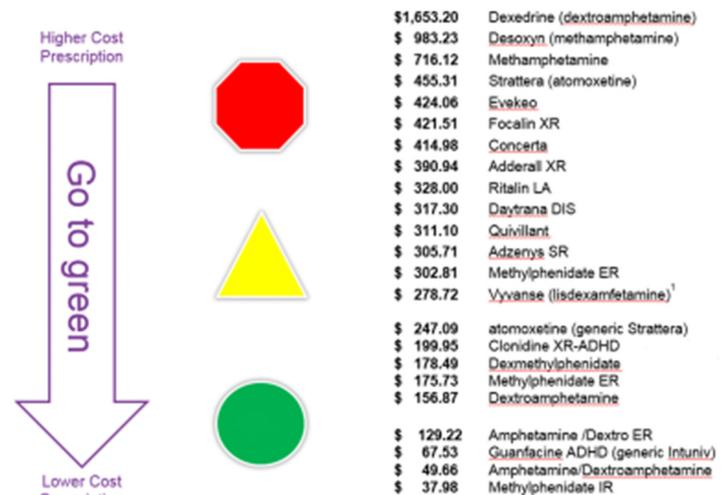
PRACTICE TRANSFORMATION

PRACTICE LUNCH & LEARNS ARE SCHEDULED

The Practice Lunch & Learns have been sent to providers and practices. The chart below displays the topic, the presenter, and the date of each Practice Lunch & Learn. If you have not had the opportunity to register, please reach out to [Alisha Bethouille](#) and identify the desired session(s). Past recordings are available to those upon request. All groups are encouraged to participate!

TOPIC	PRESENTER	DATE
PACK HEALTH FOR CC MANAGEMENT GAPS IN CARE	Brett Wisse Amber Dickerson	5/17/2018 5/31/2018
UMHP BEHAVIORAL HEALTH	Auric Zygala Kelly Coble	6/14/2018 6/28/2018
CARE MANAGEMENT/SOCIAL WORK SMOKING CESSATION	Felicia Dortch Alana Zagarino	7/12/2018 7/26/2018
MD PRIMARY CARE MODEL 2017 QCN PERFORMANCE	Patti Wilemon Patrick Dooley	8/9/2018 8/23/2018
HEALTH POLICIES TELEMEDICINE/TELEHEALTH	Laura Russell Patti Wilemon	9/6/2018 9/20/2018
COPD PHARMACY/MEDICINE MANAGEMENT	Felicia Dortch Danielle Keeley	10/4/2018 10/18/2018

ADHD PRESCRIPTION DRUG COSTS



SERVICES

DIAL-A-DIETITIAN PROGRAM

The University of Maryland Quality Care Network (UM QCN) has recently partnered with Abbott Nutrition to offer the complimentary Dial-a-Dietitian resource. Dial-a-Dietitian is a customized 800 number for dedicated telephonic dietitian support operated by Abbott Dial-a-Dietitian connects patients directly to a Registered Dietitian.

The Program provides tools that assist with identifying at-risk patients as well as petite support materials. With the increased focus on obesity and chronic diseases, impacted by poor diet, comes a growing demand for these services. Many of our patients are in need of nutrition education, but lack insurance reimbursement for nutrition consultative services. **The Dial-a-Dietitian is a free benefit to your patients with nutrition education needs.**

The program provides basic diet information on the key topics such as: weight loss tips, condition specific meal plans, low fat, low sodium, etc. In addition to telephone instruction, handouts are mailed to the patient upon request and available in English and Spanish.



- 1** HCP selects pertinent nutrition topics(s) on *Dial a Dietitian* card and gives to patient
- 2** Patient calls customized 800 number for dedicated dietitian support operated by Abbott Nutrition
- 3** Patient and dietitian discuss selected nutrition topics
Meal plans, grocery lists and tips for healthy eating are sent to patient upon request

- Low Fat
- Low Sodium
- Low Protein
- Low Potassium
- Low Phosphorus
- High Protein
- Healthy Carbohydrates
- Healthy Snacking Tips
- Weight Loss Tips
- Condition-specific Meal Plans



Call Abbott Nutrition at (800) 858-8386 and enter the QCN code 041 when prompted.

Services are available Monday through Friday from 9:00 a.m. to 5:00 p.m. EST

QUALITY

UM QCN NOT SELECTED FOR CMS QUALITY AUDIT

Per ACO and MIPS program rules, CMS must conduct stringent annual audits of the quality data submitted. Due to outstanding data integrity and completeness, CMS did not select UM QCN for a quality audit in 2017.

CMS estimates approximately 70% of ACOs across the country were selected for audit. Audit pass rates must exceed 80%, otherwise ACOs risk a decrease in their original quality score. Thank you to all our practices whose efforts directly contributed to this successful outcome!

PRIMARY CARE

MARYLAND PRIMARY CARE PROGRAM (MDPCP) INITIATIVE

The State of Maryland recently received approval from the Centers for Medicare and Medicaid Innovations (CMMI) for the Maryland Primary Care Program (MDPCP). MDPCP offers financial incentives to primary care providers to offer care management and other supportive resources for Medicare beneficiaries; with the goal of increasing quality and reducing unnecessary utilization. A key component of the program is the creation of Care Transformation Organizations (CTO) to assist practices with providing services to patients and meeting the requirements of the program. The University of Maryland Medical System, leveraging the resources and expertise of the UM QCN, intends to apply to be a CTO. We anticipate applications will be posted in early June, with a start date of January 1, 2019. The UM QCN encourages practices to apply and will provide updates throughout the process.

COMMUNITY HEALTH EVENTS

UNIVERSITY OF MARYLAND 2018 COMMUNITY HEALTH EVENTS

Below is a list of the community health events that are being offered by UMMS. If you would like to participate, please register by calling the phone number provided or by visiting the University of Maryland website. Health screenings, smoking cessation, support groups, and family programs are currently available for registration.

Living Well with Chronic Health Conditions

A self-management program for coping with chronic conditions such as diabetes, heart disease, COPD, arthritis and stroke. Topics include proper nutrition and exercise, communication with physicians and family, and relaxation techniques.

- Available at the UM Rehabilitation & Orthopedic Institute. Call 410-328-8402 for more details and registration.

National Diabetes Prevention Program (NDPP)

Tuesday and Wednesday meetings are located in Midtown at Forest Park from 11 a.m. - 12 p.m. Call 410-328-8402 to register or email gethealthy@umm.edu.

Heart Healthy Eating and Weight Management

The bi-monthly meetings are offered at the UM Charles Regional Medical Center. Call 301-609-4391 for information or visit umcharlesregional/healthy.

- Friday, August 10; 11 a.m.

Thriving and Surviving (for Cancer Survivors)

The quarterly (6 times per year) meetings are located at the UM Upper Chesapeake Kaufman Cancer Center. Call 443-643-3460 to register or email ufoundation@uchs.org.

Stepping On

A free evidence-based fall prevention program. The workshop focuses on how strength and balancing exercises, medication management, home safety, footwear, vision and mobility are important in preventing falls.

- Monthly, day varies; mornings and evenings at Anne Arundel County Department of Aging and Disabilities or call 410-222-4257.

Living Well with Chronic Conditions

A self-management program for coping with chronic conditions such as diabetes, heart disease, COPD, arthritis and stroke.

- Monthly, day varies; mornings and evenings at Anne Arundel County Department of Aging and Disabilities or call 410-222-4257.

Up in Smoke! Smoking Cessation Class

Program for patients and primary care physicians to develop a "stop smoking plan" that meets specific needs and manages withdrawal symptoms and lifestyle changes. Call 410-337-1337 for more details and registration.

- Tuesdays, September 18 through October 16; 6 p.m. - 7 p.m. at CV Fitness Classroom, UM St. Joseph Medical Center, next to the Gift Shop

Diabetes Self-Management Program (DSMP)

A self-management training program that covers the many aspects of diabetes self-management and glycemic control. To identify your unique body make-up and associated health risks.

- Wednesday, October 10 to Wednesday, November 14; 9 - 11:20 a.m.

Overdose Response Program

Visit <https://overdoseresponseprogram.eventbrite.com>



HEALTH & WELLNESS

UM QCN OFFERS QUITTER'S CIRCLE FOR SMOKING CESSATION

To support our patients in your quit-smoking journey, the University of Maryland Quality Care Network is pleased to inform you about Quitter's Circle®, brought to you by Pfizer in collaboration with the American Lung Association. Quitter's Circle is free and includes digital resources, education, and support for your quit-smoking journey.

Our Health Coach has provided pamphlets and other patient facing materials to all practice locations; if you are in need of additional items, please let your Care Manager know.

To download the mobile app, visit the Quitter's Circle website, and follow Quitter's Circle on Twitter and Facebook to find information and support.

Mobile App

Download on any Apple or Android mobile phone so you can:

- Develop and follow a customized Quit Plan, which tracks and updates content based on your progress, including cigarette use and money saved from quitting smoking.
- Create a Quit Team of supporters, including friends and family, who can monitor your progress and receive alerts when you might need some additional motivation.
- Achieve badges and certificates for key milestones.
- Receive alerts on your smartwatch.

Use the University of Maryland Quality Care Network's code when downloading the app to see our customized "splash screen" and message.

The code is: UMQCN.

Social Media

Follow Quitter's Circle on Facebook and Twitter

- Read inspirational, practical quit tips and stories each day.
- Share your progress with fellow quitters.
- Swap quit tips and encouragement through a digital support community.

For additional information and instructions for using the mobile app, please see the attached information sheet. To learn more about Quitter's Circle or about our coverage for smoking cessation interventions, please contact the University of Maryland Quality Care Network at 833-UMMS-QCN (833-866-7726).



Congratulations on deciding to quit smoking!

Quitter's Circle is for smokers who want to make a quit attempt. It includes a mobile app, a website, and Twitter and Facebook pages. We hope that Quitter's Circle's support, information, and tips will help you throughout your quit-smoking journey.



- 1 Download the Quitter's Circle app from the App Store (for Apple devices) or Google play (for Android devices).
- 2 When prompted, enter: **UMQCN**.
- 3 Respond to all start-up questions. Accurate responses will enable the app to send you the most relevant quit content based on your current progress.

Make the most out of your Quitter's Circle journey.

Ensure you get the best possible experience using the Quitter's Circle app by doing the following:



- 1 Log your smoking information (whether you smoked any cigarettes, what your triggers were, etc) each day and respond to questions when prompted. This information will help ensure you are provided with the most relevant content based on your progress.
- 2 Invite family and friends to download the app and join your Quit Team as supporters. Supporters can send you motivational messages when you need some extra help, and can stay current on your quit progress.
- 3 Visit Quitter's Circle online and on Twitter and Facebook to receive the latest tips, connect with fellow quitters, and share your successes and challenges.

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October 2016

BROUGHT TO YOU BY


GRANTS

UM QCN AWARDED THE MHCC MEDICATION MANAGEMENT AND RECONCILIATION GRANT

The Maryland Health Care Commission (MHCC) has awarded the University of Maryland Quality Care Network (UM QCN) a telehealth grant for approximately \$150,000. The goal of the program is to demonstrate the value of using telehealth in optimizing medication-related services. The grant seeks new and innovative care delivery models, leveraging key patient information through Maryland's Health Information Exchange (HIE), Chesapeake Regional Information System for our Patients (CRISP).

The UM QCN proposal and associated work efforts are focused on demonstrating the value of using telehealth technology to pharmacists, as they assist primary care providers to better manage high risk patients with chronic obstructive pulmonary disease (COPD) with their medication regimens. Medication adherence and patient monitoring & engagement are key areas of focus.

Telehealth can enhance care delivery and support care teams to reduce utilization including inpatient admissions, emergency room visits, and readmissions through enabling the early provision of appropriate treatment, increasing cost savings to patients and providers and patient health literacy and awareness for Maryland residents with COPD on the Eastern Shore.

UM QCN has partnered with the e-Health Center at the University of Maryland School of Pharmacy, the University of Maryland Medical System Telemedicine Program, and the University of Maryland Community Medical Group of the Eastern Shore for the effort.

The telehealth project will launch in May 2018.

Source: [MHCC UMMS Press Release](#)

To learn more about the Grant: http://mhcc.maryland.gov/mhcc/pages/hit/hit_telemedicine/hit_telemedicine_grants.aspx



Lower Back Pain

Lower back pain is one of the most common complaints that leads patients to see their primary care doctors. It also happens to be one of the most commonly over imaged conditions in the United States. The Maryland Healthcare Commission (MHCC) has developed an online, on-demand, no cost [continuing medical education](#) program to share best practices in patient-physician dialogue regarding low back pain. Select the link above to register for this free CME training.

NEW STAFF



Kimberly Taylor, PMP, CSM
Population Health Project Manager

Kimberly Taylor joined the UMMS team as IT Project Manager II. Kim will be involved with technology and operations projects within the QCN. She will also act as the technology point of contact for vendors and other departments within UMMS. Previously, Kim worked for Tantus Technologies as a Project Manager, where she oversaw the Center for Medicare & Medicaid Services (CMS) Hospital Quality Reporting and Public Reporting releases. In addition, she assisted with the transition of moving the programs from a waterfall to an agile project methodology. She also has extensive account management and marketing experience from prior positions. Kim received her Bachelor of Science in Marketing from York College of Pennsylvania. She is very excited to be a part of the UM QCN team!



Cheryl Swift
Senior Project Manager

Cheryl Swift has spent over 20 years as a healthcare information technology specialist. Prior to coming to the University of Maryland Medical System in 2017, she spent 12 years working as a Systems Consultant/Project Manager for ACS, a Xerox Company, and HealthTek Solutions where she served as Director of Business Development. Her background also includes work experience as a Millennium Core Analyst for Truman Medical Center in Kansas City, Missouri and as a Certification Analyst and Product Specialist for the Cerner Corporation. In addition to her healthcare IT experience, Ms. Swift has worked for over 20 years in the Banking industry, serving as an Internal Auditor at the First National Bank in Syracuse, Nebraska.



Reza Hosseinian
Population Health Data Analyst

Reza Hosseinian is a new Data Analyst in Population Health. He got his Bachelor's Degree in Statistics in 2006 and worked as a Data Analyst for more than 9 years in his home country. He came back to graduate school after ten years off to continue his degree in Industrial Engineering in System Informatics at Texas A&M University. While attending graduate school, he got involved in different projects within the healthcare area (such as predictive modeling for length of stay in hospital) and found this area very appealing for him. He likes to help people live better and thinks working in healthcare provides this opportunity for him. When he's not glued to a computer screen, he spends time with his family, playing soccer and fishing.

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Marianne Berger
Practice Transformation Specialist

Marianne has over 30 years of clinical and management experience in healthcare as a nurse, care manager, and clinical informaticist. Marianne's current role is to identify opportunities for cost and utilization reduction and develop, implement, and optimize training materials used to facilitate practice transformation. She works as part of the larger Practice Transformation Team to create and deliver products and services including project plans and tool kits. Marianne is committed to leveraging her clinical expertise and Health Information Technology for quality improvement, research, and practice transformation.



Shaniqua Addison, BSN, RN
Nurse Case Manager

Shaniqua possesses a Bachelor of Science in Nursing from Coppin State University. Some positions she has held includes Clinical RN at several local hospitals in different specialties, School Nurse for Baltimore City Health Department, RN Manager in a Federally Qualified Health Center, RN Case Manager with HealthCare Access Maryland Foster Care Division, RN Care Coordinator with HealthCare Access Maryland for the state Administrative Care Coordination Unit (ACCU), Program Manager HealthCare Access Maryland Care Coordination Unit and RN Case Manager and RN Utilization Review Nurse for Evergreen Health.



Adrienne Kowcz
Pharmacist

Adrienne is a new pharmacist in the UM QCN and is so excited to join the team! She completed her pharmacy residency with the University of Maryland School of Pharmacy in 2015 and then moved back to work at Massachusetts General Hospital in Boston. Adrienne loved Maryland so much that she came back to stay, and can't wait for the opportunities with UM QCN! She loves to travel, watches as many sunsets as she can, improving her cooking skills, and plays tennis. She is passionate about empowering people to take control of their health and finding a cure for type 1 diabetes, as she has been raising money for research since she was young.

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