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Feature Article: HHP to Offer Members CPC+ Support

CMS's Comprehensive Primary Care Plus (CPC+) program will allow up to 5,000 primary care practices in 14 regions to participate in a new care delivery and payment redesign model. Hawai'i has been selected as one of the regions, and PCPs can now apply to the program. The goal of CPC+ is to improve the quality of patient care, improve patients' health and spend health care dollars more wisely. With HMSA's support as a private insurer willing to partner with CMS, HHP is working alongside PCP members to provide the support they need to be successful under the new program.

Practices in both available tracks will make changes in the way they deliver care, focusing on:

- Access and continuity.
- Care management.
- Comprehensiveness and coordination.
- Patient and caregiver engagement.
- Planned care and population health.

HHP provides the services and support to ensure your success under CPC+, including:

- **Clinical Integration**
By participating in Hawai'i's high-performing physician network, you are able to take advantage of value-based contracts that reward you for achieving higher quality and managing cost.
- **Quality Improvement**
Your patients will receive better care – HHP members work together to meet quality standards, measure their effectiveness, improve outcomes and earn the financial rewards of doing so.
- **Delivery System Reform**
With an increased focus on quality and team-based care, you need the right partner to help you maximize efficiencies and minimize disruptions.



- **Care Coordination**
HHP care coordinators will help your patients get the care they need and help you appropriately code and bill for that care.
- **Data and Analytics**
Our analytics team provides timely and accurate data gathering, analysis and reporting to support the business and clinical management of our patient population.
- **Administrative Services**
We'll guide you through the CPC+ application process and beyond, decreasing administrative burden and allowing you to focus on practicing medicine.
- **Training & Education**
Stay up-to-date on evidence-based medicine, supporting improved population health while earning continuing medical education (CME) credits.

Member Spotlight: Roshni Koli, MD

Roshni L. Koli, MD, is a child, adolescent and adult psychiatrist, assistant professor for the department of psychiatry at the University of Hawai'i John A. Burns School of Medicine and co-division head for Kapiolani Behavioral Health Services. She earned her MD from St. George's University School of Medicine in Grenada and completed her residency at the University of Illinois at Chicago. Dr. Koli is currently a member of HHP's recruiting subcommittee.

HHP: How long have you been a member of HHP?

Koli: I have been a member since HHP's inception and have been with Kapiolani Medical Specialists since July 2011.

HHP: Why do you think some physicians are still reluctant to join an ACO?

Koli: I think there's still some reluctance to join due to lack of understanding – of both what HHP is and does, and how payment transformation is going to impact the way physicians practice.

There are greater expectations for physicians around things beyond clinical medicine – payment transformation, preventing readmissions, reducing unnecessary spending, and communications outside of the office setting. Physicians also need to address socioeconomic issues, like lack of access, housing and family, and have to address related obstacles.

I support the ACO because it is taking health care transformation in the right direction. We have to make providing high-quality care easier.

HHP: Do you have an example of one way HHP is doing this?

Koli: Both HHP and HPH have recognized that behavioral health needs to be addressed. There's a shortage of behavioral health specialists everywhere, but especially for pediatrics. There are currently approximately 8,300 child psychiatrists in the country, with some estimates identifying a need of 20,000 specialists by 2020. We have to partner with the PCP to make addressing common behavioral health issues less daunting. We have to empower them and help them know when to refer.

One way we're doing that is through our new HHP/Kapiolani Behavioral Health Child Psychiatry Access Project. It's a telephone consult line that we just launched about a month ago. It recognizes the shortage and lack of related education and training and provides a "warm line" that helps increase the PCPs' comfort level and provides access to specialists. We modeled the project after the [Massachusetts Child Psychiatry Access Project](#).

Kapi'olani Behavioral Health Services

GENERAL RESOURCES

Parents Med Guide

www.parentmedguide.org

American Academy of Child & Adolescent Psychiatry (AACAP) Facts for Families

www.aacap.org/AACAP/Families_and_Youth/Facts_for_Families/FFF_Guide/FFF_Guide_Table_of_Contents.aspx

Guidelines for Treating Adolescent Depression in Primary Care (SLAD-PC)

www.glad-pc.org

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CREATING A HEALTHIER HAWAII

We decided that phone access would be most effective and created a small pilot with a group of HHP pediatricians at Kapiolani Medical Center for Women & Children. The pilot will last six to nine months, and we will then assess its effectiveness and needs for growth. This pilot should also help us learn how to address other specialty shortages.

Measure of the Month: Cervical Cancer Screening

Description:

The percentage of women 24–64 years of age who were screened for cervical cancer using cervical cytology during the measurement year or the two years prior. If women are age 30–64, a cervical cytology and a human papillomavirus (HPV) test with service dates four or fewer days apart during the measurement period or the four prior measurement periods are also accepted.

Why This Measure Matters:

About 12,990 new cases of invasive cervical cancer will be diagnosed in 2016, with approximately 4,120 women dying from cervical cancer during that same time. However, the death rate for cervical cancer has decreased by more than 50 percent due to increased testing.

The American College of Obstetricians and Gynecologists recommends women start having cervical screenings at age 21. Screenings should occur every three years for women ages 21-29. Women ages 30-65 should have a Pap test and an HPV test (co-testing) every five years. It is acceptable to have a Pap test alone every three years.

Best Practice:

Take a team approach to all of the screening measures, says Bradley Lee, MD, a family medicine physician located in Kapolei. For Lee, that team includes his staff, two HHP care coordinators and a Straub nurse practitioner (one day per week).

While the nurse practitioner assists with the screenings, and Lee's team handles scheduling and follow-up, the care coordinators play a vital role in identifying and addressing gaps in care, he says. "They help get the team in line and onboard." The two coordinators who work with his practice – Aileen Crisostomo and Eleanor Naone – have helped him score in the 90th percentile for breast, cervical, colorectal and chlamydia screening.

"I give huge credit to (HHP Care Coordinators) Aileen and Eleanor," says Lee. "They are our leaders, keeping everyone up-to-date on reports and performance. They're a huge part of our success. I just want to go in a room and see patients. I don't want to worry about dotting the i's and crossing the t's, and they help me do that." According to Lee, the care coordinators provide the focus and guidance, and his team then executes. "The team is a lot more cognizant now of patients failing to show up and the need to follow up to reschedule."

DID YOU KNOW?

- About 12,990 new cases of invasive cervical cancer will be diagnosed in 2016.
- About 4,120 women will die from cervical cancer this year.

Source: American Cancer Society

The death rate for cervical cancer has decreased by more than 50 percent due to increased testing.

A Pap test is a screening procedure that can find changes in the cervix before cancer develops, or in its early, most curable stage.

Screenings are also offered at the following locations:

- Kauai Medical Clinic, 808-245-1511
- Straub Hawai'i Kai Family Health Center
- Straub Kailua Family Health Center
- Straub Kaneohe Family Health Center
- Straub Pearlridge Clinic
- Straub Medical Center
- Straub Mililani Family Health Center, 522-4777

For more information about how to achieve points on this HHP measure, see p. 26 in [HHP's 2016 Program Guide for Physicians](#).

Questions or comments about these measures? Email HHP Marketing Manager Brian Driscoll at brian.driscoll@hawaiihealthpartners.org to share with the HHP team.

Be on the Lookout!

Proposed 2017 Hawai'i Health Partners QPP/SPP Measures

- **Domain:** Engagement
- **Measure:** Use of HHP Dashboard
- **Description:** Access and use of the HHP Dashboard for Population Health Management
- **Points:** 1
- **Program:** SSP
- **Inclusion:** All primary care providers with an active HHP Dashboard account at the start of the measurement year
- **Exclusion:** N/A
- **Measurement period:** January 1, 2017 – December 31, 2017
- **Performance Target:** Physicians must log in to dashboard at least once per month for at least 10 months (of the measurement year)

We will be sending a short survey next month with draft language for the 2017 Quality Performance and Shared Savings Program measures. Your feedback will be crucial in helping to shape the programs for 2017. Thanks in advance for your feedback!

Reminder: Register Now for the Kaua'i Annual Meeting!



HAWAII' I PACIFIC HEALTH | **HAWAII' I HEALTH PARTNERS**
CREATING A HEALTHIER HAWAII

**HAWAII' I HEALTH PARTNERS
THIRD ANNUAL MEMBERSHIP MEETING**

TUESDAY, AUGUST 30, 2016, 5:30-8 P.M.
on O'ahu at the Hawai'i Prince Hotel Waikiki
OR
TUESDAY, SEPTEMBER 13, 2016, 5:30-8 P.M.
on Kaua'i at Wilcox Medical Center

**JOIN US TO HEAR FROM YOUR PEERS
ABOUT THE WORK BEING DONE:**

WHERE WE ARE TODAY

- State of the ACO
- Primary Care Redesign: Progress to Date
- Diagnostic Imaging Workgroup Update: Managing Appropriate Testing
- Chronic Kidney Disease Workgroup Update: Identifying and Treating High-risk Patients

THE ROAD AHEAD

- Payment Transformation
- Patients as Purchasers
- 2017 Measure Development: Working Toward One "Playbook"
- What's Next?

QUESTION AND ANSWER SESSION

Register now by going to <http://bit.do/hhpmeeting>, calling Conference Services at 808-522-3469 or emailing conference@hawaiiipacifichealth.org

The next Hawai'i Health Partners Third Annual Membership Meeting is on Tuesday, September 13, 2016, 5:30-8:00 p.m. on Kaua'i at Wilcox Medical Center

Register now by clicking [here](#), calling Conference Services at 808-522-3469 or by emailing conference@hawaiiipacifichealth.org.

HHP Welcomes New Members

Hawai'i Health Partners would like to welcome the following individuals who were recently appointed by the HHP board of managers as new members to the organization:

- Megumi Akiyama, MD, OB-GYN, UCERA
- Eric A. Crawley, MD, Critical Care, Straub Medical Center
- Irina Crook, MD, Hospitalist, Straub Medical Center
- Richard A. Jack, MD, Neonatology, Kapiolani Medical Specialists
- So-Jin Lee, MD, Family Medicine, Straub Medical Center
- Anna-Lena Lueker, MD, Pediatrics, Kapiolani Medical Specialists
- Kyle A. Mitsunaga, MD, Orthopedic Surgery, Bone & Joint Clinic of Hawai'i
- Ghazaleh K. Moayed, DO, OB-GYN, UCERA
- Karen Soules, MD, Gynecology, UCERA
- Lisa S. Splittstoesser, MD, Internal Medicine, Kauai Medical Clinic
- Andrew M. Summersgill, MD, Emergency Medicine, Emergency Medicine Physicians

Questions? Contact us at info@hawaiihealthpartners.org

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