

CREATING A HEALTHIER HAWAI'I

MEMBER NEWSLETTER

2nd Ouarter 2019

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Talking Points for HPV Vaccinations

The human papillomavirus (HPV) vaccine is the only vaccine to prevent cancer. Why aren't more of our patients getting it?

We have an opportunity within our Hawai'i Health Partners (HHP) provider network to improve immunizations for adolescents, and in particular, administering the HPV vaccine series (two-dose or three-dose schedule between an adolescent's seventh and 13th birthdays).

Success with adolescent care is challenging to begin with, and the HPV vaccine can add to that challenge as a potentially contentious topic due to cultural stigmas surrounding it because of its association with a sexually transmitted disease.

To overcome patient barriers requires understanding them. A 2016 Hawai'i survey identified common patient and parent concerns regarding the administering of the HPV vaccine:

- Parent's belief that their child is not at risk
- Lack of parent and/or patient education/understanding of HPV
- · Parent refusal of vaccine
- Parent reluctance to discuss sexuality or sexually transmitted infections
- Loss of patient follow up (failure to complete 3-dose schedule)



Some of our HHP providers have been remarkably successful with administering the HPV vaccine. Here are some examples of how HHP providers have developed effective vaccine practices.

On the Same Page

Dr. Brent Tamamoto,
Pediatrician | Aiea Pediatrics:



I'm a believer in preventative medicine. As a pediatrician, there is nothing more important that I can do than immunize my patients. Before accepting new

patients our staff makes sure to let the parents know vaccinations are a standard-of-care in my practice. At every patient visit, from minor injuries to rashes and flu symptoms, our staff check to verify they are up-to-date on their immunizations.

continued

¹Tom, A., Robinett, H., Buenconsejo-Lum, L., Soon, R., Hamilton, M., Francisco-Natanauan, P., . . . Hernandez, B. Y. (2016, October). Promoting and Providing HPV Vaccination in Hawai'i: Barriers Faced by Health Providers. Retrieved from https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5659340/

Talking Points continued

Dr. Derek Flores, Pediatrician | Straub Clinic at Mililani:



To make sure our patients complete the vaccination series, it's routine for our staff to follow up with reminder calls. Everyone on my staff does this and can speak to the importance of immunizations; our messaging is consistent from start to end. When our

staff checks patients in, they're already going through the vaccination checklist.

Talk About it Early & Often

Dr. Derek Flores, Pediatrician | Straub Clinic at Mililani:

Communicating with parents about immunizations is important and necessary. Starting the conversation early and at each vaccination schedule is crucial to how parents will view the HPV vaccine when it's time. Vaccinations are a routine part of preventative care. At the 4 to 6-year-old visit, I proactively inform parents that the HPV vaccine is coming up in their child's immunization schedule.

Dr. Brent Tamamoto, Pediatrician | Aiea Pediatrics:

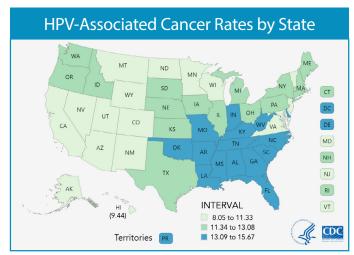
Everyone on our team is comfortable talking about vaccines and stressing to our patients the importance of the timing and early cancer prevention. As soon as we establish care, I talk to the parents about vaccinations and why we recommend them.

Dr. Wesley Sugai, Pediatrician, Kealakekua | Hawai'i:



I tell patients I'll see them every year after their birthdate. Even on the odd years I'll make sure to see them for a well-child exam, during which time we'll check their vaccinations. It can be a little out of sync, however, I want to make it as easy as possible for

parents to immunize their child even during a sick visit. With some parents coming to see me from the opposite side of the island, (that's a one way, 100 plus mile drive) this suggestion appeals to convenience and ease of care.



Rates are 100,000 people who developed cancer each year.
Centers for Disease Control and Prevention. (2018). HPV-Associated Cancer Rates by
State during 2011-2015. [Map Image] Retreieved from https://www.cdc.gov/cancer/hpv/statistics/state/

It's Not About Sex, It's About Cancer Prevention

Dr. Brent Tamamoto, Pediatrician | Aiea Pediatrics:

The HPV vaccine is not about sex. I don't bring up sex when I talk about the HPV vaccine. I'm happy and comfortable addressing a parent's concerns about any vaccine I recommend, from conspiracy theories to social and cultural perceptions. If a parent asks me about the sexual stigmas associated with the HPV vaccine I have that conversation with both the parent(s) and their child, which might sound something like this, "This vaccine protects you (the child) against cancer. What it doesn't do is give you a license to engage in unprotected, risky, sexual activities."

Dr. Derek Flores, Pediatrician | Straub Clinic at Mililani:

I explain to parents that administering this vaccine does not mean their child is going to be sexually active, it means they are being protected against cancer. I want them to have the vaccination before sexual activity is even a thought.

There are parents who are unsure about giving their child the vaccine at a young age.² For parents that are hesitant about giving the vaccine to their child at 11-years-old due to sexual-related concerns, I explain it's about protecting them before any exposure as opposed to not protecting them early and potentially missing the boat.

continued

²The Centers for Disease Control and Prevention recommends children 11 or 12 years old to get two shots of the HPV vaccine six to twelve months apart.

Talking Points continued

Dr. Wesley Sugai, Pediatrician, Kealakekua | Hawai'i:

This vaccine is about preventing cancer. I work closely with the parents to help them understand that the HPV vaccine is an anti-cancer vaccine.

Final Thoughts

Dr. Derek Flores, Pediatrician | Straub Clinic at Mililani:

I have children, this commonality helps to create a conversation flow around the HPV vaccine. When parents start to focus solely on the scenario of, 'this vaccine means my child is going to have sex,' I ask parents to consider a different scenario; one where their child is grown, with a family of their own and facing the threat of a cancer that could've been prevented.

Dr. Brent Tamamoto, Pediatrician | Aiea Pediatrics:

I have children of my own, and when parents ask me if I would recommend the HPV vaccine for my child the answer is 'yes.' There can't be a different standard for what I would recommend for a patient versus my own child. If I did not believe these vaccines were making my patients' healthier I would not be recommending them.

It's my job to know about immunizations. I encourage parents to come to me with any questions or articles they find on the internet. I need to feel that I did my absolute best to educate and communicate with parents on what I think is the best thing for their children.

Dr. Wesley Sugai, Pediatrician, Kealakekua | Hawai'i:

I find it important to help parents differentiate what's fact and what's fiction, especially in this internet/social media era. It's not difficult to make the HPV vaccine part of a regular routine patient visit.

n January 2019, West Hawai'i Today reported that the HPV vaccine is among the proposed vaccines being reviewed by the Hawai'i's Department of Health to be included in the updated immunization requirements for schools and expected to go into effect in time for the 2020-21 school year.³ This is positive forward movement in government policy for public health benefit. If approved, this will move the conversation around the HPV vaccine towards standardized acceptance.

Meanwhile, let's strive to eradicate HPV causing cervical, head and neck and other cancers by employing the best practices we can find.

(Have a best practice? Let us know and we'll try to pass it along for everyone's benefit!)

Register Your Interest!

'HPV Cancer Prevention' presentation presented by The American Cancer Society Mid-June @ Kapi'olani Medical Center for Women & Children

³ Cameron Miculka West Hawai'i Today. (2019, February 01). Hawai'i would be 3rd state to require HPV vaccine. Retrieved from https://www.westHawaiiitoday.com/2019/02/01/Hawaiii-news/Hawaiii-would-be-3rd-state-to-require-hpv-vaccine

- 80% of people will get an HPV infection in their lifetime
 - ▶ HPV can cause cancers of the: cervix, vagina, and vulva in women
 - ▶ Penis in men
 - ▶ Anus, and back of the throat, including the oropharynx in both women and men
- HPV vaccination prevents cancer-causing infections and precancers
- HPV causes over 33,700 cases of cancer in men and women every year in the U.S.
- HPV vaccination can prevent 31,200 of these cancers from ever developing by preventing the infections that cause those cancers

The American Cancer Society's estimates for cervical cancer in the United States for 2019 are:

- About 13,170 new cases of invasive cervical cancer will be diagnosed.
- About 4,250 women will die from cervical cancer.

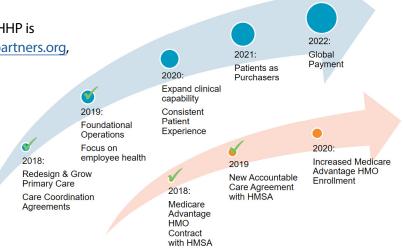
Source: The Centers for Disease Control and Prevention

Getting Ready for Capitation

It is a Hawai'i Pacific Health (HPH) system goal to "jump" to global capitation by 2022. This "jump" to global capitation started in 2014 and is perhaps better stated as a series of attainable goals with coordinated, incremental, system-wide "hops."

One big part of getting ready for capitation is being able to identify sub-populations with specific needs that impact outcomes.

In support of population health management, HHP is distributing, via email from Info@hawaiihealthpartners.org, two statements calling out specific, in this case, pediatric subpopulations. We expect to publish more as we improve subgroup analysis (there are three additional statements in development now on Use of High Risk Medications in the Elderly and Appropriate treatment for Children Frimary Car Gare Goordi Agreements in children with Pharyngitis).



1. CMS-75 Children Who Have Dental Decay or Cavities

Children who have dental decay or cavities are less likely to be in very good or excellent overall health than children without decay or cavities. Children with decay are also more likely to have other oral health problems such as toothaches, broken teeth, and bleeding gums.⁴

Hawai'i Health Partners encourages provider members to promote the application of fluoride varnish by either directly administering it, encouraging your patients to ask their dentist, or, if not available, sending them to a pediatric dentist who does.

2. Patient Transition to Adult Care

Health transitions between the age of 12 and 29 are critical to young adult development, with or without chronic conditions.⁵

Hawai'i Health Partners encourages provider members to proactively transition of young adults from pediatric to adult health care at 18 years or older, depending upon the patient's readiness.

For more information contact us at Info@hawaiihealthpartners.org

 $^{^{4}\,}Children\,Who\,Have\,Dental\,Decay\,or\,Cavities.\,(n.d.).\,Retrieved\,from\,\underline{https://ecqi.healthit.gov/ecqm/measures/cms075v5}$

⁵ McManus, M., MHS, White, P., MD, MA, & Schmidt, A., MPH. (2018, September 27). Recommendations for Value-Based Transition Payment for Pediatric and Adult Health Care Systems: A Leadership Roundtable Report. Retrieved from <a href="https://www.thenationalalliance.org/publications/2018/9/27/recommendations-for-value-based-transition-payment-for-pediatric-and-adult-health-care-systems-a-leadership-roundta-ble-report

New & Noteworthy

More Patient Access with New Urgent Care Clinics and Services

Our network is expanding - convenient access to care is now more available with the opening of three new walk-in clinic and urgent care centers.

Opening May 13, 2019

- Pediatric After-Hours Walk-in Clinic at Kapi'olani Medical Center
 - Diamond Head Tower, 3rd Floor
 - Hours of Operation: 5:00 p.m. 8:00 p.m. (Monday Thursday), Noon 7:00 p.m. (Sundays)

Opening July 2019

- Straub Clinic and Urgent Care at Ward Village
 - Urgent Care Hours of Operation: 10:00 a.m. 8:00 p.m. (Daily)
 - Primary Clinic Hours: 8:00 a.m. 6:00 p.m. (Monday Saturday)

Clinic Services: Primary Care

- Straub Clinic and Urgent Care at Ka Makana Ali'i
 - Urgent Care Hours of Operation: 10:00 a.m. 8:00 p.m. (Daily)
 - Primary Clinic Hours: 8:00 a.m. 4:00 p.m. (Monday Saturday)

Clinic Services: Primary Care, Gynecology, and Pediatric Sports Medicine

As of April 1, 2019, urgent care services are available at the Straub Doctors on Call at the Sheraton Waikiki.

Straub Doctors on Call Sheraton Waikiki 2255 Kalakaua Avenue Lower Level, Manor Wing #1 Honolulu, HI 96815

Phone: (808) 971-6000 Fax: (808) 971-6041

Hours of Operation: 7:00 a.m. - 11:00 p.m. (7 days a week, 365 days a year)

No Emergency Services

New & Noteworthy

Updates for the HHP 2019 Quality Performance and Shared Savings Programs (QPP/SSP)

The following changes have been made to the QPP/SSP programs to improve clarity, broaden participation, and improve clinical appropriateness.

Physician Specialties	Section in 2019 Program Guide	Proposed Changes		Page(s) in 2019 Program Guide
Internal Medicine (non-PCP)	Possible Points by Specialty (QPP/ SSP)	"Internal Medicine (non-PCP)" specialties now eligible for the sameasures and points as "General Practice (non-PCP)" Measures HHP Learning Modules (pts per completed module) Participation in HHP Clinical Workgroups (pts per workgroup) Avoidable ED Utilization Falls Risk Assessment NSAID Utilization in CKD Patients Screening for Depression Attendance at the HHP Annual Membership Meeting Total Points Possible	Points Possible 0.5 2 1 1 1 1 1 7.5	pp. 4, 7
Gynecology	SSP – Care Delivery	Eligible for 1 point for the 'Screening for Depression' measure		p. 8, 56
Primary Care: Internal Medicine, General Practice, Family Medicine, and APRNs carrying a primary care panel of attributed lives (including walk-in clinic and urgent care) Specialists: Geriatrics, Obstetrics/Gynecology	SSP – Care Delivery	'Screening for Depression' measure: The following tools have been approved for provider use in patients 18 years of age and older to meet the measure: • Patient Health Questionnaire-2 (PHQ-2) • Patient Health Questionnaire-9 (PHQ-9) Note: Patient Health Questionnaire-4 (PHQ-4) still approved tool.		p. 56

HHP At-A-Glance

2019 HHP Member Satisfaction Survey

The Annual Member Satisfaction Survey was distributed on April 2nd and closed April 30th. We would like to thank everyone who took part in the survey and look forward to sharing with you the results in our 3rd quarter newsletter in July.

HHP Department Highlight: Dermatology

We are best able to deliver appropriate, quality care to our HHP attributed patients when they stay within our network. To do so, provider members need to be able to do two things, identify HHP patients and identify who and what specialties are available for their patients. The HHP department highlight feature a different department every issue and serves to expand awareness of the various specialties and providers within the HHP network.

Additional Resources:

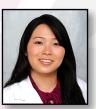
- How to identify HHP providers: The HHP Network Resource list (updated monthly) available in the Epic homepage
 "Links," or download the file from the 'Physician Login' area at hawaiihealthpartners.org.
 Forget your login? Contact lnfo@hawaiihealthpartners.org,
- How to identify HHP patients: The HHP 'green ID bubble' functionality in Epic, available in the Provider header (home and schedule view), PSR header (appointment desk and report view).



Yun Sun Lee, MD

Office Location: Straub King Street (888 South King Street) and Mililani (95-1249 Meheula Pkwy Unit 187) Dermatology

Special Interests: General dermatology, skin cancers, pediatric dermatology



Mika Yamazaki, MD

Office Location: Straub King Street, 888 South King Street, Palma 6th Floor Honolulu, HI 96813 | 808-522-4360 Straub Hawai'i Kai, 7192 Kalaniana'ole

Highway, A-200, Honolulu, HI 96825 | 808-396-6321

Special interests: Skin cancers, pigmented lesions, acne, eczema, psoriasis, and warts



Roman Glamb, MD

Office Location: Straub King Street, 888 South King Street, Palma 6th Floor Hono<mark>lulu, HI 9681</mark>3 | 808-522-4360

Special Interests: General Dermatology



Spring Golden, MD

Office Location: Golden Dermatology
2226 Liliha Street, Suite 302
Honolulu, HI 96817 | phone number: 808-585-8008, fax: 808-585-7007

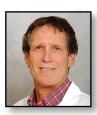
Special interests: Skin Mohs Micrographic Surgery (Skin Cancer Surgery) and General Dermatology, Skin Cancer, Melanoma, Reconstructive Surgery



Jenifer Fong, MD

Office Location: 98-151 Pali Momi St., Aiea, HI 96701 | 808-483-6400/ Fax 808-483-6473

Special interests: Skin cancer, Psoriasis, Atopic Dermatitis, Acne, Lumps and Bumps



Jay Grekin, MD

Office Location: Straub King Street, 888 South King Street, Palma 6th Floor Honolulu, HI 96813 | 808-522-4360 Special Interests: General Dermatology

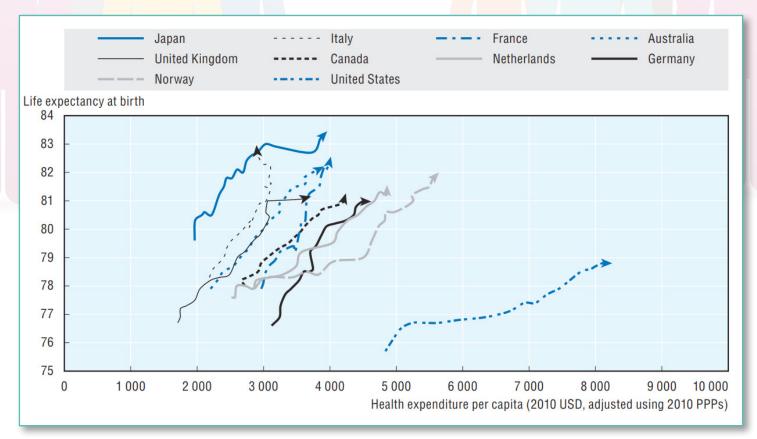
At-A-Glance continued

Behind the Medical Cost Trend: What Now and What Next?

Medical Cost Trend (MCT) is the change in the cost of treating patients from one year to the next – which insurance companies use to calculate health plan premiums for the coming year.⁶

One theory suggests increasing health care expenditure will increase life expectancy. A cross-country analysis done by the Organization for Economic Cooperation and Development (OECD) shows a correlation between health care spending and life expectancy in countries such as Japan, Italy, and Canada, however, not in the United States.⁷

Notwithstanding the complexity of the economics of the health care industry, one takeaway is that spending more on health care does not necessarily equate to better outcomes. Being smart about managing the costs of care is a way for us to address the imbalance between care costs and patient health outcomes.



Organization for Economic Co-operation and Development. (2017). Life Expectancy gains and increase health spending, selected high-income countries, 1995-2015. [Graph] Retreieved from https://doi.org/10.1787/health_glance-2017-graph5-en

⁶ PricewaterhouseCoopers. (2018, June). Medical cost trend: Behind the numbers 2019. Retrieved from https://www.pwc.com/us/en/health-industries/health-research-institute/assets/pdf/hri-behind-the-numbers-2019.pdf

At-A-Glance continued

What About Us?

There are some common factors that shape MCT; specific to health care – medical technology and innovation, drug spending, government regulation, payment models.⁷ For HHP, our MCT is determined by utilization and costs and historically, has been between seven and eight percent. As of this month, the preliminary non-risk adjusted MCT for 2018 is approximately 10%. Some of this increase can be attributed to external factors such as increased access to care via out-of-network urgent care/walk-in clinics and the impact of the 2017-2018 flu season, however, majority of the costs are under our control as providers.

Next Steps

Nothing changes, if we don't change. This year we made progress in building our relationship with HMSA. Our efforts resulted in the new three-year Accountable Care Agreement (ACA) between Hawai'i Pacific Health, Hawai'i Health Partners, and HMSA. Critical to this new, equal accountability, risk-sharing agreement is achieving a MCT at least lower than six percent, and ideally lower than three percent.

We can acheive an MCT of 3% by focusing on how to consistently deliver appropriate care. There is a misconception that appropriate care means less care, or non-comprehensive care. The truth is that you can deliver both high-quality and high-value care (high quality at a lower cost) to your patients. This is already being demonstrated by HHP members via a number of new initiatives:

- Clinical workgroups
- Accelerated ambulatory pathways to help avert hospitalization
- Care and management referral guidelines (CM/RGS)
- Discussions around reducing clinical practice variation

It's not the End, it's a Start

The new Agreement with HMSA means we are all in this together, and a preliminary 2018 MCT of 10% is a strong prompt to start looking at ways we can all do better. Our goal is to lower the MCT by helping you do what you do best; especially improving the appropriateness of care wherever possible. At the same time we'll continue to work on reducing the administrative burdens like prior authorization,

This is how we succeed, together.

⁷ OECD (2017), "Life expectancy gains and increased health spending, selected high-income countries, 1995-2015", in Health at a Glance 2017: OECD Indicators, OECD Publishing, Paris, https://doi.org/10.1787/health_glance-2017-graph5-en.

At-A-Glance continued

Clinical Workgroups Update

HHP-chartered clinical workgroups are physician-led workgroups developing and implementing clinical projects to help improve the quality of care and reduce costs.

The HHP Quality and Clinical Integration (Q/CI) Committee chartered the following clinical workgroups in 2018 through the beginning of 2019:

- Atrial Fibrillation (SMC, PMMC, Wilcox)
- Chest Pain (SMC, PMMC)
- · Diabetes (SMC)
- HHP Surgical Measures
- Pediatric Asthma (KMCWC)
- Pediatric Splinting (KMCWC)
- Respiratory Viral Panel Testing (KMCWC)
- Viscosupplementation (SMC)

Benefits of Participation

- Earn points under HHP QPP/SSP programs (Total of 4 points annually, pp. 13-14 of the HHP 2019 Program Guide)
- · Share in financial incentives and rewards
- Grow physician engagement and expand physician leadership in key areas
- Drive clinical integration
- Develop, improve, measure, and implement evidence-based practice guidelines and clinical protocols
- Discover a common purpose, take ownership, and share accountability to a given population of patients
- Create a culture of performance and service excellence for the organization and patients we serve

Results Update

After the launch of the Gastrointestinal accelerated ambulatory pathway, Straub Medical Center (clinics and hospital) and Pali Momi Medical Center saw more than 50 patients through the new pathway. As well as a successfully reducing their hospitalization rate by 15.4% between July 2017 and October 2017, and 12.2% between January 2018 and December 2018. Similarly, Wilcox Memorial Hospital use of the atrial fibrillation accelerated ambulatory pathway for reduced hospitalizations by 6.6% between June 2018 and February 2019. Average Cardiology and PCP follow up occurred at three days following cardioversion in the ED for atrial fibrillation.

 Accelerated Ambulatory Pathways aimed at providing high-quality care in the appropriate setting

Facility	Running	Planning					
HPH System-wide							
TIA		х					
Straub							
GI Bleed	х						
Chest Pain	х						
Atrial Fibrillation	Х						
Pali Momi							
GI Bleed	х						
Chest Pain		х					
Atrial Fibrillation	х						
Kapi'olani							
Preterm Labor	Х						
Preeclampsia		Х					
Wilcox							
Atrial Fibrillation	х						

Update: A previous version of this article stated SMC Atrial Fibrillation and KMCWC Preterm Labor in the planning stage, and KMCWC Preeclampsia is the running stage.

How to Get Started

If you are interested in chartering a clinical project or participating in one of the many innovative workgroups, please contact Sally Belles, Clinical Project Manager | <u>sally.belles@hawaiihealthpartners.org</u>.

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:

MEMBER	SPECIALTY	LOCATIONS	CLINIC LOCATION	CONTACT NO.
Bridget C. Allard, D.O.	Pediatrics	Oʻahu, Honolulu	Kapiolani Medical Center for Women & Children 1319 Punahou Street	(808) 983-600
Megan M. Doty, M.D.	Neonatology	Oʻahu, Honolulu	Kapiolani Medical Center for Women & Children 1319 Punahou Street	(808) 983-5670
Leah K. Dowsett, M.D.	Medical Genetics	Oʻahu, Honolulu	1401 S. Beretania Street Suite 950	(808) 373-7555
Robert M. Easton, III M.D.	Anesthesiology	Oʻahu, Honolulu	321 N. Kuakini Street Suite 306	(808) 792-9884
Edwin Kirk Huang, M.D.	Cardiology	Oʻahu, Honolulu	Straub Medical Center 888 S King St	(808) 522-4222
Kasey R. Kajiwara, M.D.	Obstetrics & Gynecology	Oʻahu, Aiea/ Honolulu	98-1005 Moanalua Road Suite 3010 Kapiolani Medical Center for Women & Children 1319 Punahou Street Suite 801	(808) 671-0090
Jason T.P. Lam, M.D.	Family Medicine	Oʻahu, Wahiawa	302 California Avenue Suite 103	(808) 621-7733
Jon Y. Narimasu, M.D.	Anesthesiology	Oʻahu, Honolulu	321 Kuakini Street Suite 306	(808) 792-9884
David J. Picken, M.D.	Family Medicine	Oʻahu, Honolulu	500 Ala Moana Boulevard Building 7, Suite 230	(808) 536-9367
Sasha L.T. Raymond, M.D.	Pathology	Oʻahu, Honolulu	Kapiolani Medical Center for Women & Children 1319 Punahou Street	(808) 983-8581
Bradley D. Reber, M.D.	Anesthesiology	Oʻahu, Honolulu	Straub Medical Center 888 S King St	(808) 522-4622
Jessica M.J. Rhee, M.D.	Hematology/ Oncology	Oʻahu, Aiea/ Honolulu	701 Ilalo Street Suite B325	(808) 564-3999

For more information on our new members or the credentialing process, please contact Jeruzel Gonzales, Network Coordinator | <u>Jeruzel.Gonzales@hawaiihealthpartners.org</u>



CREATING A HEALTHIER HAWAI'I

Questions? Contact us at Info@hawaiihealthpartners.org

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Info@hawaiihealthpartners.org