

CREATING A HEALTHIER HAWAI'I

# **MEMBER NEWSLETTER**

## 4th Quarter 2019

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# **Annual Meeting Recap**

Thank you to everyone who attended the Hawai'i Health Partners (HHP) 6th Annual Membership Meeting. With an attendance of more than 400, this year's meeting marked a lot of "firsts" for HHP. This was our first full-day meeting and the first time bringing together O'ahu, Kaua'i and Big Island provider members in one location; highlights included the first specialty and location based speed networking session, the first mobile based scavenger hunt, and the first offering of CME credit/MOC points for an HHP annual meeting.

Throughout the day, attendees caught up with friends and networked with new colleagues, listened to presentations from their peers, and administrative and clinical leaders. We received an abundance of feedback from you. Here are just a few of the comments shared by participants.

"Good way to learn about the ACO and meet colleagues we usually just refer to."





"I appreciate HPH involving many of our most intelligent, well respected, innovative physician colleagues at various levels to make systematic improvements for patient care and physician work life satisfaction. Practicing physicians have significant insight as to what can improve our care of patients so it is refreshing to see an administration that values physician insight and recommendations. Also seeing how physician guidance is applied is incredible to see. I appreciated meeting with many HPH physicians that I don't always meet in person. The meeting created a fun environment to get to know each other and to gain trust in each other."

continued

# Annual meeting continued

"Topics were interesting and pertinent to both primary care and specialty. Great to network with so many other providers. One of the best meetings I have attended in a long time."

"I am glad to have attended will continue to attend in the future and would recommend that others do so. HPH/HHP seem to be more concerned about providing excellent care than just cutting costs and have done an excellent job in encouraging MDs to lead the charge instead of having it done by nonmedical entities."

"I liked hearing from the physicians and their work [...]."

A lot of voices were heard in this year's Q&A. While we covered a few during the meeting, there were many others we didn't get to. Due to the large number of questions submitted, we consolidated multiple questions on the same topic and are providing a summarized response below. In addition, please note that we have removed comments and statements (positive or negative) where no actual questions were asked. Please see page 8 for answers to this year's questions.









# Post-Discharge Care Coordination

Hawai'i Health Partners is piloting a new service for Post-Discharge Care Coordination for HHP patients that are admitted at Pali Momi Medical Center, Straub Medical Center and Wilcox Medical Center. The HHP Complex Care team will coordinate outreach to patients at high risk for readmission to provide post-discharge home visits and care coordination. Watch your inbox for an email with more information on this service in the coming weeks.

## Coming Soon: Hawai'i Pacific Health Medical Group

On December 15, 2019 the Hawai'i Pacific Health Medical Group (HPH) will be officially be formed, bringing all HPH employed physicians together under one operational structure. The new structure will allow for better communication, collaboration, and coordination among physicians and across specialties in the HHP network.

Dr. Leslie Chun has been named Chief Executive Officer of HPH Medical Group and will work in close concert with existing HPH leadership and physicians to deliver a consistent, high quality patient experience across the organization. The formation of the HPH Medical Group is part of HPH's evolution to become an integrated provider, improving our standard of care and access for patients.

## Update: NIA and Prior Authorization – A New Approach

To recap what was discussed during the HHP 6th Annual Membership Meeting, HHP's partnership with HMSA, NIA/Magellan Health, and Stanson Health allows us to reduce inefficiency and waste created by prior authorization protocols and improve patient care and provider workflows. DecisionPoint, a decision support software built into Epic, automatically searches a patient's chart for clinical data to support the appropriateness of the diagnostic imaging (DI) order. This tool streamlines the process for ordering advanced diagnostic imaging through automated prior authorizations at the point-ofcare and the elimination of peer-to-peer conversations. This opportunity is unique to HHP in Hawai'i and will be possible if the collective group of HHP providers earns an NIA/Magellan 'Fast Pass.'

### 'Fast Pass' Requirements

NIA/Magellan Health gives automatic prior authorizations for all advanced DI orders to individual providers who have earned a Fast Pass. To earn a Fast Pass, NIA/ Magellan requires providers have at least 50 cases and a 97% approval rate (as determined by the most recent Magellan Clinical Guidelines for Medical Necessity Review); currently, no Group Fast Pass option exists. Through HHP's partnership with HMSA, NIA/Magellan Health, and Stanson Health have reduced requirements for HHP from a minimum of 50 cases to > 25, which means HHP provider members can earn an individual Fast Pass if they have a minimum of 25 cases and a 95% approval rate.

HHP has also arranged an exclusive opportunity to earn the first Group Fast Pass offered by NIA/Magellan Health. HHP provider members can earn a Group Fast Pass for all advanced DI orders on HHP-attributed patients if HHP providers achieve an overall group approval rate of 95% or greater during a six month period. The measurement period will begin by the end of the 2019 calendar year.

### Dual Opportunities – Medicare's Protecting Access to Medicare Act (PAMA)

Starting January 1, 2020, the Protecting Access to Medicare Act (PAMA) will require ordering providers to consult appropriate use criteria (AUC) at the time of ordering for Medicare fee-for-service patients with advanced imaging orders. This decision support software will help you to satisfy the new Medicare requirements for DI orders. More updates to come.

# New & Noteworthy continued

#### **Next Steps**

An HHP learning module will be made available in the coming months to teach you how to use the decision support software in Epic. Be on the lookout for an email from Info@hawaiihealthpartners.org to complete it when it is released.

Because earning the Group Fast Pass is so important to improving patient care and reducing administrative burden for HHP providers, a new measure has been added to the 2020 HHP Shared Savings Program (SSP). During the HHP 6th Annual Membership Meeting, many HHP providers received their individual NIA reports showing their current approval rate. Those who were unable to attend the meeting with receive their reports via email. If you did not receive your NIA report or if you have questions about your report, please contact Janelle Papin, Project Manager, at janelle.papin@hawaiihealthpartners.org.

## **TOP 20 ADVANCED DIAGNOSTIC IMAGING ORDERS**

During the measurement period, the decision support software built into Epic will address the top 20 advanced DI orders, covering 85% of all advanced DI orders by HHP providers.

- 1. MRI Brain
- 2. CT Abdomen and Pelvis
- 3. CT Chest
- 4. MRI Knee
- 5. MRI Upper Extremity
- 6. MRI Lumbar Spine
- 7. MRI Cervical Spine

- 8. MRI Lower Extremity (Ankle, Foot, Hip, Leg)
- 9. CT Head/Brain
- 10. MRI Abdomen
- 11. CT Soft Tissue Neck
- 12. CT Abdomen
- 13. Maxillofacial/Sinus CT
- 14. MR Angiography Head/Brain

- 15. MRI Pelvis
- 16. PET Imaging for CT Attenuation (Whole Body)
- 17. MRI Thoracic Spine
- 18. CT Lower Extremity (Ankle, Foot, Hip, or Knee)
- 19. MRI Orbit
- 20. CT Lumbar Spine



# HHP At-A-Glance

# **MCT Update**

In the past year we've introduced and covered what the Medical Cost Trend MCT is, why it matters for patients, the role of HHP and providers, and current efforts to reduce it. The goal is to reduce MCT to 3 percent. In January, our webinar 'Momentum Rising'<sup>1</sup> introduced the new, risk-sharing, three-year Accountable Care Agreement (ACA) between Hawai'i Pacific Health, Hawai'i Health Partners, and HMSA with the ultimate goal of achieving a MCT of three percent. Our <u>2nd quarter newsletter</u> revisited the basics and shared the 2018 MCT. In the 3rd quarter we released a Learning Module titled 'Understanding Cost in Capitation,' containing information on managing the total cost of care in capitation.

This quarter, we are sharing the ongoing system-wide initiatives in place and concurrent with provider efforts to deliver high-quality and appropriate care:

- Complex Care expansion
- Accelerated Ambulatory Pathways
- HHP Clinical Workgroups
- Ambulatory Surgical Centers
- Skilled Nursing Facilities / Post-Discharge Care
- Decreasing utilization
  - Alternatives to ED
- Improving network utilization

We'll continue to share updates about the HHP MCT to help provider members with MCT overview and in their daily practice.

1 Available behind the 'Physician Login' area under Presentations.

# At-A-Glance continued

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## Coming Soon: The 2020 HHP Quality Performance and Shared Savings Programs

The HHP Program Guide details the Quality Performance and Shared Savings Programs (QPP/SSP) and from the <u>2019 Member Satisfaction Survey</u>, we heard from you that some measures may not accurately reflect your practice. The 2020 proposed measures seek to respond to your feedback.

#### Methodology

All QPP/SSP measures are created, selected, and approved by provider members; clinical leaders who are part of the HHP Board of Managers and the Quality & Clinical Integration Committee. The input of HHP provider members is critical to the success of this program. Earlier this month we sent out our annual 'Proposed QPP/SSP Measures' survey to give you the opportunity to provide additional comments on the measures proposed for 2020 QPP/SSP.

In December, the 2020 Program Guide will be finalized and available on the HHP website as a soft copy. Hard copies will be distributed.

# HHP Department Highlight: Otolaryngology

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: 1) identify HHP patients and 2) identify who and what specialties are available for their patients. The HHP department highlight features 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 Directory is now available in soft copy and hard copy versions.
    - Soft copy behind the 'Physician Login' under Annual Meeting
    - Hard copy call (808) 587-5808 or email <u>Info@hawaiihealthpartners.org</u>
  - ▶ HHP Network Resource List
    - In Epic "Links,"
    - In the HPH Intranet Groups & Projects > Physician Resources under 'Quick Links'
- How to identify HHP patients: The HHP 'green bubble' in the Epic header in outpatient settings, available in the Provider (home and schedule view), PSR (appointment desk and report view).



**PEDIATRIC / ADULT ENT** 

#### Patrick O'Donnell, MD

Office Location: Kapi'olani Medical Center for Women & Children (1319 Punahou St., Suite 1120); Pali Momi Medical Center (98-1079 Moanalua Rd., Suite 660 | Tel 808-983-6447

Special Interests: General otolaryngology, thyroid and parathyroid surgery, sinus surgery, nasal obstruction, surgical management of sleep apnea, salivary gland surgery, voice and swallowing disorders.



#### Susan Tan, MD

**Office Location:** Kapi'olani Medical Center for Women & Children (1319 Punahou St., Suite 1120); Pali Momi Medical Center (98-1079 Moanalua Rd., Suite 660 | Tel 808-983-6447

**Special Interests:** General otolaryngology (thyroid, sinus and sleep surgery, tonsillectomy and tube insertion, hearing and balance disorders), facial reconstruction for head and neck skin cancer, functional and cosmetic rhinoplasty, aesthetic surgery of the face.



#### Lenhanh Tran, MD

Office Location: 1229 Young St. | Tel 808-591-7702

**Special Interests:** Ear disorders, hearing loss, congenital / acquired airway disorder, sinonasal disorder, congenital / acquired head and neck mass, speech and swallowing disorder, endocrine disorder, salivary disorder.

**Surgical interests:** Mastoidectomy, cochlear implant, bone conduction implant and device, laryngotracheal reconstruction, complex endoscopic sinus surgeries, endocrine surgery.

continued

# At-A-Glance continued

#### ADULT ENT



#### John Cho, MD

Office Location: Straub Medical Center (888 South King St.) | Tel 808-522-4530

Special Interests: General ENT, sinus surgery, paranasal disease, management of diseases and disorders of the ear,

surgical management of sleep disorder breathing, skull base surgery, head and neck tumors, salivary disease & disorder of the voice box.



#### Wilson Murakami, MD

Office Location: 98-1247 Kaahumanu St., Suite 319 | Tel 808-488-7197

Special Interests: General otolaryngology.



#### Jay Murphy, MD

Office Location: Kaua'i Medical Clinic/ Wilcox Medical Center (3-3420 Kuhio Hwy. Suite B) | Tel 808-245-1529

**Special Interests:** Medical and surgical management of diseases of the head and

neck of both pediatric and adult populations.

**Specialty interests:** Nasal and sinus disease, head and neck tumors including throat, neck, salivary gland, thyroid and parathyroid glands, ear disease and hearing loss, disorders of the voice box.



#### Harold Netzer, MD

Office Location: Wilcox Medical Center (3-3420 Kuhio Hwy. Suite B) | Tel 808-245-1529

Special Interests: General otolaryngology.



#### Christopher Regala, MD

Office Location: 302 California Ave., Suite 216, Wahiawa, HI 96786; 98-1079 Moanalua Rd., Suite 660, Aiea, HI 96701 | Tel 808-622-2626, Fax 808-622-0066

Special Interests: General otolaryngology, sinus surgery, allergic and paranasal sinus disease, management of diseases and disorders of the ear, surgical management of sleep disorder breathing, head and neck tumors, thyroid tumors, salivary disease & disorder of the voice box.



### Timothy Stoddard, MD

Office Location: Straub Medical Center (888 South King St.) | Tel 808-522-4530

**Special Interests:** Thyroid and parathyroid surgery, sinus surgery, nasal obstruction, surgical management of

sleep apnea, salivary gland surgery, voice and swallowing disorders, general ENT.



#### Lenhanh Tran, MD

Office Location: 1229 Young St. | Tel 808-591-7702

**Special Interests:** Ear disorders, hearing loss, congenital / acquired airway disorder, sinonasal disorder, congenital

/ acquired head and neck mass, speech and swallowing disorder, endocrine disorder, salivary disorder.

**Surgical interests:** Mastoidectomy, cochlear implant, bone conduction implant and device, laryngotracheal reconstruction, complex endoscopic sinus surgeries, endocrine surgery.



#### Mary Worthen, MD

Office Location: Straub Medical Center (888 South King St.) | Tel 808-522-4530

Special Interests: General otolaryngology.

# Annual meeting – Your Questions Answered

# • NIA/Prior Authorization

Questions about NIA/Prior Authorization fell into one category of "Timeline and program details."

DecisionPoint is the new software for CT/MRI prior authorization; pilots are expected to begin in the 4th quarter of this year (2019). We will monitor and evaluate the technical aspects of DecisionPoint. Clinical appropriateness for prior authorizations will be rely on the most recent Magellan Clinical Guidelines for Medical Necessity Review.

## eConsults /eVisits

Questions about eConsults could be placed into the following buckets: Implementation structure; Provider access and resources; How to use eConsults; QPP/SSP credit.

An efficient, effective network takes full advantage of available technology and tools, especially telehealth services such as eConsults and eVisits which improve patient experience and access to care. eConsults efficiently shares specialist knowledge across referring specialties, and encourages use of correct pre-referral guidelines/workups – expediting appropriate consults

and reducing unnecessary face-to-face referrals.

While there's still development work needed for eConsults, such as the implementation of supporting policies, there is a definite, expanding need and an inevitability for this activity. Both eConsult and eVisit activity is captured in Epic.

# For HPH employed providers:

A current compensation model exists for eConsults. Please refer to your Provider Compensation Model guide or ask your section chief/provider leadership for more information.

## **HELPFUL HINTS:**

#### Accessing eConsults -

When eConsults are sent, the recipient will have generated an "eConsult" folder signifying receipt of this specific request versus having to search through their Epic inbasket.

#### How to receive "credit" for an eConsult -

Providers receive automatic "credit" by:

- 1) Opening an eConsult (versus through an inbasket message or other means).
- 2) Responding as a specialist
- 3) Selecting a disposition
- 4) Closing the encounter

Early adoption by providers (e.g. Urology, certain Primary Care offices) has shown benefits to both patients and practices. Generic workflows for eVisits exist and can be tailored to individual practices. Specialties responding to eConsults have the option to design their workflows. Relative to "curbside consults," eConsults provide more consistent and complete information to all involved with better supporting documentation. Similar to <u>care</u> <u>management and referral guidelines</u>, eConsults do not supersede clinical judgement about when to do a regular or expedited referral or consultation.

Part of the roadmap to eConsults is HHPs role in the expansion of non-traditional and technology based services, and how we can support and help provider members succeed with them. As such, the 2020 Quality Performance and Share Savings Programs (QPP/SSP) features the new SSP measure, "Provider use of Epic eConsults," available to providers for whom it's opened by Epic. See below for details.

**Eligible Members:** All participating providers **Description:** Provider-to-provider consults completed via Epic

**Measure Objective:** To encourage the use of technology to support provider-to-provider communication via Epic **Program:** SSP

Points: 1

**Performance Target:** 10 provider-to-provider consults completed via Epic

# eConsults /eVisits...

## **NEXT STEPS:**

- Now available for the following PCPs:
  - All Hawai'i Pacific Health (HPH) internal medicine, family medicine, geriatrics and general pediatrics.
- Specialists
  - Sign up to be a listed participant
    - General questions?
      - Bennett Loui, MD | Bloui@straub.net
    - Technical questions?
      - Kapi'olani Center for Women & Children and Pali Momi Medical Center
        - ▶ Call (808) 535-7010, select option 2
      - Straub Medical Center
        - Call (808) 522-2688, select option 2
      - Wilcox Medical Center
        - ▶ Call (808) 245-1212, select option 2
      - Health Advantage Connect for non-HPH providers
        - ▶ Call (808) 522-4343
    - Training?
      - Jamie Pacello Paraz | Jamie.PacelloParaz@straub.net

Now Available on the HHP Website in the 'Physician Login' area:

- eConsult Pilot Instructions
- eConsult Participant List

## • MCT

"What can we do to decrease the medical cost trend?"

## **HHP-Sourced Opportunities**

The <u>HHP QPP/SSP measures</u> are designed for providers as a guide to delivering both high-quality and high-value care (high quality at a lower cost) to their patients. For example, the 'Avoidable ED Utilization' SSP measure addresses the costly trend of ED visits while simultaneously improving patient care and ongoing care management – resulting in better outcomes.

Similarly, the application of the HHP <u>care management</u> referral guidelines (CM/RGs) and use of emerging technologies such as eVisits and eConsults result in with improved health outcomes via more timely access to specialty care, while also reducing unnecessary referrals and costs for patients. We continue to offer opportunities for providers to get involved and/or learn more about reducing the medical cost trend (MCT) through initiatives such as:

- Clinical workgroups (see page 13 for the current list of pathways)
- Accelerated ambulatory pathways to help avert hospitalization (see page 13 for the current list of pathways)
- <u>Use of HHP support services</u> Population Health for Primary Care Providers, Managed Care, and Complex Care.
- NIA and Prior Authorization reducing clinical practice variation (see page 8 for an update)

#### **Everyday Opportunities**

Starting with engagement in HHP initiatives and usage of supporting services, identifying areas of overuse, misuse or underuse of care in your daily practice – any small

change you and your team can make in the daily practice to reduce waste is an investment in making sure patients have a workable plan to manage their care issue (this applies to the right care; different than seeking over-, mis- and under-use of care).

# • Administrative Burden

"What changes are being made to decrease physician burnout aka reducing administrative burden?"

Provider well-being is a high priority for HHP. Since provider satisfaction is multifactorial, many different interventions are possibly necessary. In HPH, there are interventions for personal finance, physical health, mindfulness and stress management, social activities, Epic optimization, team-based care and others. Included in the contributing factors is the burden of administrative tasks. HHP is actively at work on initiatives to remove administrative tasks arising from HMSA contracts.

The most recent example was the HHP announcement of an exclusive Participation Agreement within the HMSA Payment Transformation Program (PT Program) for the 2019 and 2020 performance years, designated specifically for Primary Care Providers (PCPs). The Participation Agreement modified the existing PT Program by eliminating certain measures and simplifying others. These moves address PCP administrative burden and are significant steps towards achieving effectively addressing the administrative complexities in HMSA's Payment Transformation Program that play a factor in provider burnout.

HHP actively supports several system initiatives focusing on improving provider well-being through more efficient and effective use of time and resources (e.g. eConsults, eVisits via MyChart). In addition, HHP support services such as Complex Care, Population Health and Managed Care are plugged in to ways to help providers in their daily practice.

Every initiative and program follows these foci:

• Providing patients the right care, at the right time, in the right place

- Facilitating opportunities for providers to have more control over change in health care driving change, not driven by change
- Communication and collaboration of the bright spots in health care

## • About HHP

Questions about HHP could be placed into the following buckets: What is HHP? Future goals and changes; Expansion of services for patients on O'ahu and the Neighbor Islands.

Hawai'i Health Partners is the state's first Accountable Care Organization (ACO). Our goal is to improve health care in Hawai'i by focusing on value, increasing efficiency, and providing optimal patient health outcomes. We are a physician-led ACO, stewarding the integration and alignment of a high-performing network of providers, facilities, and hospitals to deliver high-quality, coordinated, patient-centered care.

We share the HPH mission of creating a healthier Hawai'i, this includes Maui county and the Big Island. Our goal is to have a large enough statewide enrollment and provider network to succeed with a global risk contract, positively impact the health of the state and help provide more affordable care. There is work going on now with local providers on Maui and the Big Island to understand the specific needs, and how they can be addressed. We hope to increase our presence on Maui and the Big Island in the coming year.

Looking ahead for HHP, one of the next big steps will be having each specialty take ownership of a clinical condition that is both common and substantial in their specialty. The point of "taking ownership" is for that set of specialists to dissect the care of that condition from start to finish, in order to maximize effective, efficient care (similar to bundle payments). This is team based, networked-based coordination of care at its finest – taking care of the patient through the highest level of continuum of care.

continued

# Specialist Access for Patients

Questions about HHP were primarily concerning increasing access for patients on O'ahu and the Neighbor Islands.

A complete network is fundamental to providing great care for our population. Addressing shortages in specific areas are acknowledged and continue to be addressed at medical schools, the state and HPH system level. Hawai'i Health Partners is always actively recruiting for new members and HPH has resources dedicated to doing so. Independently practicing Nurse Practitioners with a primary care panel are eligible and encouraged to join HHP. Ultimately, the decisions on how to address the physician shortage are coordinated with HHP members to achieve the right demand/capacity balance.

## Patient Care

"What are plans to try and decrease opioid prescribing practices?"

Each facility has their own current system for OPPE. Please refer to your clinical leadership for more information. Hawai'i Health Partners continues to be invested in appropriate opioid prescription through HPH initiatives.

# • Other "How....?" Questions

1. "How will competing priorities be handled in the ACO?"

In the transition from fee-for-service to prepaid care, there are many potential conflicting incentives. Our hope and expectation is that providers will first look for the most effective, efficient solution in caring for the patient. It is extremely likely that even with an all-out pursuit of costeffective care there remains a large and growing demand for care.

2. "How can HHP support providers in HMSA policy disagreements?"

HHP is actively involved, on almost a daily basis, in supporting HHP members' concerns and interests with HMSA, and will do the same with other insurers as those contracts are signed.

#### 3. How can we get patients on MyChart in Office?

In collaboration with Medical Informatics, HHP released the "2019 HHP Learning Module: MyChart for Health Care Providers" in June 2019 and is available for completion until December 31, 2019. This learning module details MyChart functionalities and how to use the 'Instant Activation' feature in Epic to enroll patients. For more information, contact the clinician Epic support line:

- Kapi'olani Center for Women & Children (KMCWC) and Pali Momi Medical Center (PMMC)
  - o Call (808) 535-7010, select option 2
- Straub Medical Center (SMC)

   o Call (808) 522-2688, select option 2
- Wilcox Medical Center (WMC) o Call (808) 245-1212, select option 2
- Health Advantage Connect for non-HPH employed providers
  - o Call (808) 522-4343
- "How will HPH increase the number of Primary Care Providers (PCPs)?"

Primary care capacity can be increased by more PCPs, more patients per panel or both. HHP actively supports both by recruiting PCPs, providing them with support services and data, and working on their behalf with insurers. In addition, pushing care coordination across specialties with triage and work redistribution will improve access and reduce waste, duplication and backlogs.

 "How does HHP plan to address social determinants such as the ongoing drug addiction and homelessness to meet the goal of reducing unnecessary ED admissions and achieve a healthier Hawaii?"

The critical importance of social determinants of health are recognized and are starting to be addressed by HPH. Clearly this is a huge, sweeping problem that can only be improved by thoughtful, coordinated action involving multiple parties. There are major projects underway to quantify and expand community partnerships<sup>2</sup> that address social determinants.

Our Complex Care services are available to assist providers with patients experiencing social determinants

<sup>2</sup> For more information, contact Michael Robinson, Exec Dir, Philanthropy & Gov Affairs at michael.robinson@hawaiipacifichealth.org.

of health. Their 'Community Resource Quick Guide' for providers is available behind the 'Physician Login' under *Annual Meeting*. For more information about their services, contact Laura Pladson, RN, Complex Care Manager at Laura.Pladson@hawaiihealthpartners.org.

6. "How do we get medical and surgical specialists to become comfortable taking care of pregnant women in collaboration with specialists (e.g. Ob/Gyn and maternal-fetal medicine)? "

Changing established patterns of care is always difficult, and all of our projects are asking for change in one form or another. One advantage of HHP projects is that all of our clinical initiatives are driven by physician colleagues – and therefore should be true to "patientfirst, evidence-based" principles. HHP has influence via the performance programs (i.e., QPP and SSP) but not compensation. Nevertheless, it's our expectation that existing compensation models should acknowledge these changes, it is HHP's role to ensure this is brought to the attention of the appropriate entity.

 "How can HHP facilitate transition of care from Pediatricians to Adult Care? How soon can specialist services be available?"

Most recently, in May 2019, we distributed a clinical bulletin to all members titled 'Transitioning Young Adults from Pediatric Care to Adult Care.' HHP has and will continue to make known which primary care practices are accepting new patients – especially pediatrics/FP for newborns, FP/IM for patients aging out of pediatrics. These specific types of communications are shared via email through PRN bulletins, the quarterly <u>newsletters</u>, and <u>clinical bulletins</u> – all available on the <u>HHP website</u> and distributed to providers via email. The HPH call center is also available to assist in helping patients to establish care with an adult care PCP (643-4DOC).

8. "Does HHP have any strategies to avoid physician attrition?"

Although HHP does not employ providers and is not a medical group, we are highly motivated to avoid physician attrition. We believe providers should feel professional satisfaction and be fairly compensated based on national benchmarks. We see our role as working to transform health care delivery with provider members' leadership, and are therefore concerned that providers have viable, sustainable practices. To help this, we create initiatives to:

- Give providers more control over system design,
- Reduce administrative burden,
- Align incentives in payment models.

Success with these initiatives help retain providers while defining a successful, affordable health care system.

# Compensation / Reimbursement

1. "What changes are expected in reimbursement for inpatient services with payment transformation?"

Over time, inpatient services will almost certainly be included under a prepaid model such as PMPM or global hospital budget. This national trend has some local facilities experimenting with bundled payment for certain conditions (e.g. joint replacement) and exploring global budgets (e.g. Hilo Medical Center). The work being done today with HHP accelerated ambulatory pathways is good preparation to succeed with these payment models.

2. "How much is a respiratory panel?"

Just under \$5,000/panel – Dr. Travis Hong covered the cost of Respiratory Virus Panel Tests in his presentation at this year's Annual Membership Meeting. To learn more about Respiratory Virus Panel Test Utilization visit: www.cvent.com/d/v6q6qb



# New Updates from HHP Clinical Workgroups

Accelerated Ambulatory Pathways						
Pathway	Status	SMC	PMMC	KMCWC	WMC	TOTAL
Atrial Fibrillation	Live & Running	$\checkmark$	$\checkmark$	$\checkmark$	$\checkmark$	4
Chest Pain	Live & Running	$\checkmark$	$\checkmark$	$\checkmark$		2
GI Bleed	Live & Running			$\checkmark$		3
Preeclampsia	Planning			$\checkmark$		1
Preterm Labor	Live & Running			$\checkmark$		1
Pulmonary Embolism	Live & Running		$\checkmark$			1
Renal Stone (Nephrolithiasis)	Live & Running					1
TIA	Live & Running					1
	TOTAL	3	6	5	1	15

Currently there are 8 accelerated ambulatory pathways and related workgroups at our HPH facilities.

# **Quality & Process Improvement Projects**

Hawai'i Health Partners has also initiated Quality & Process Improvement focused workgroups. These workgroups offer a creative and innovative approach to population management tailored to specific areas of clinical practice such as diabetes and support best practices with reduction in practice variation.

Workgroup	Running	Planning
HHP Surgical Measures	$\checkmark$	
Kapi'olani Respiratory Viral Panel Testing	$\checkmark$	
Pediatric Splinting	$\checkmark$	
Straub Diabetes		
Straub Hypertension	$\checkmark$	
Straub Ophthalmology pre-op procedures		$\checkmark$
Straub Viscosupplementation	$\checkmark$	
TOTAL	6	1

Key accomplishments of workgroups with the potential to positively impact quality, utilization and costs include:

- Development of a registry for diabetic patients.
- Reduction in ordering of RVP tests at KMCWC.
- Reduction in variation of viscosupplementation products utilized at Straub for treatment of osteoarthritis.
- Transition of care improvements following ED visit and/or hospitalization.
- Epic optimization through the development of smart phrases and best practice alerts (BPAs).

Note: The majority of HHP Clinical Workgroups are HHPchartered clinical workgroups (with the exception of the GI bleed pathway workgroups, the Afib pathway workgroup at Wilcox, and the Preeclampsia & Preterm Labor workgroups at Kapi'olani). Hawai'i Health Partners clinical workgroups provide a great opportunity to connect and collaborate with your colleagues. For those of you who attended the HHP 6th Annual Membership Meeting, you saw poster boards and heard presentations from your peers who created their own HHP clinical workgroups focused on:

- Developing or implementing standards of care to improve quality and efficiency
- Demonstrating a positive impact on population health outcomes
- Achieving system-wide consistency
- Improving coordination of care
- Maintaining or improving quality while reducing total cost of care (TCOC)

## **Accelerated Ambulatory Pathway Projects**

Accelerated Ambulatory Pathways improve quality and appropriateness of patient care by providing an efficient, effective alternative to hospitalization. These workgroups collaborated to create condition specific algorithms/ pathways for the referral of low-risk patients to specialty departments for timely follow up post ED discharge.

## How to Get Started

If you are interested in chartering a clinical project or participating in an existing workgroup, please contact Janelle Papin, Project Manager I janelle.papin@hawaiihealthpartners.org

# **HHP Welcomes New Members**

Hawai iHealth Partners would like to welcome the following individuals who were recently appointed by the HHP Board of Managers as new members to the organization:

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

Member	Specialty	Facility	Clinic Location	Contact No.
Celeste Adrian, MD	Obstetrics/ Gynecology	Kapi'olani Medical Center for Women and Children	82 Puuhonu Place Suite 205 Hilo, HI 96720	(808) 961-6608
January An <mark>daya,</mark> MD	Family Medicine	Straub Medical Center	98-151 Pali Momi Street Suite 142 Aiea, HI 96701	(808) 483-6400
Katsiaryna Bellaousov, MD	Anesthesiology	Pali Momi Medical Center	321 N. Kuakini Street Suite 306 Honolulu, HI 96817	(808) 792-9884
Christopher Brown, MD	Pediatric Neurology	Kapi'olani Medical Center for Women and Children	1401 S. Beretania Street Suite 950 Honolulu, HI 96814	(808) 983-6676
Sanah Christopher, MD	Cardiology	Pali Momi Medical Center	Pali Momi Heart Center 98-1079 Moanalua Road Suite 680 Aiea, HI 96701	(808) 485-4553
Anthony Clark, MD	Anesthesiology	Wilcox Medical Center	3-3420 Kuhio Highway Suite B Lihue, HI 96766	(808) 245-1020
Pattaraporn T. Chun, MD	Neonatology	Kapi'olani Medical Center for Women and Children	1319 Punahou Street Honolulu, HI 96826	(808) 983-8670
Kristin Brooke Hallet, MD	Pediatrics	Kapi'olani Medical Center for Women and Children	1319 Punahou Street Honolulu, HI 96826	(808) 983-8641
Kristopher G. Hooten, MD	Neurosurgery	Kapi'olani Medical Center for Women and Children	1319 Punahou Street Suite 600 Honolulu, HI 96826	(808) 983-6676
Jon Ishii, MD	Pediatrics	Kapi'olani Medical Center for Women and Children	1319 Punahou Street Honolulu, HI 96826	(808) 983-6000
David Yutaka Johnson, MD	Diagnostic Radiology	Straub Medical Center	888 South King Street Honolulu, HI 96813	(808) 522-4000
Joyce Pilar Johnson, MD	Family Medicine	Straub Medical Center	Straub Kapolei Clinic 91-5431 Kapolei Parkway Suite 1706 Kapolei, HI 96707	(808) 426-9300
Jordan M. Kono MD	Pediatrics	Kapi'olani Medical Center for Women and Children	1319 Punahou Street Honolulu, HI 96826	(808) 983-6107

# New Members continued

Member	Specialty	Locations	Clinic Location	Contact No.
Jatinder Lachar, MD	Hospitalist - Internal Medicine	Straub Medical Center	888 South King Street Honolulu, HI 96813	(808) 522-4000
Bryan J. Liming, MD	Pediatric Otolaryngology	Kapi'olani Medical Center for Women and Children	1319 Punahou Street Suite 1120 Honolulu, HI 96826	(808) 983-6447
Matthew C. Linden, MD	Hospitalist - Family Medicine	Pali Momi Medical Center	98-1079 Moanalua Road Aiea, HI 96701	(808) 486-6000
Sally K. Markee, MD	Obstetrics and Gynecology	Kapi'olani Medical Center for Women and Children	1319 Punahou Street Suite 500 Honolulu, HI 96826	(808) 946-4066
Robert Millard, MD	Anesthesiology	Wilcox Medical Center	3-3420 Kuhio Hwy Lihue HI, 96766	(808) 245-1020
Mary Rose Nino, MD	Pediatrics	Straub Medical Center	1100 Ward Avenue Suite 1065 Honolulu, HI 96814	(808) 599-4004
Anjali Ohri, MD	Family Medicine	Straub Medical Center	Walk-In Clinic 888 S. King Street Honolulu, HI 96813	(808) 522-4000
Amanda V.S. O'Kelly, MD	Pediatric Psychiatry	Kapiolani Medical Center for Women and Children	Hale Pawa'a Building 1401 South Beretania Street Suite 920 Honolulu, HI	(808) 983-6100
Mary G. Pixler, MD	Internal Medicine	Wilcox Memorial Hospital Kaua'i Medical Clinic	3-3420 Kuhio Highway Suite B Lihue, HI 96766	(808) 245-1504
Rajiv G. Rao, M.D.	Diagnostic Radiology	Pali Momi Medical Center	321 North Kuakini Street Suite 405 Honolulu, HI 96817	(808) 522-0190
Kelsey L. Rhodes, D.O.	Pediatrics	Kapi'olani Medical Center for Women and Children	1319 Punahou Street Honolulu, HI 96826	(808) 983-6107
Alexander Richardson, MD	Diagnostic Radiology	Pali Momi Medical Center	321 N. Kuakini Street Suite 405 Honolulu, HI 96817	(808) 522-0190
Marissa Takase, MD	Internal Medicine	Pali Momi Medical Center	98-1079 Moanalua Road Suite 500 Aiea, HI 96701	(808) 488-0990
Edgar A. Trevino, MD	Hospitalist - Family Medicine	Wilcox Medical Center	3-3420 Kuhio Highway Suite B Lihue, HI 96766	(808) 245-1100
Michael Charles Roach, MD	Radiation Oncology	Pacific Radiation Oncology, LLC	2226 Liliha Street Suite 210 Honolulu,HI 96817	(808) 744-6187
Ryan R. Roth, MD	Hospitalist - Internal Medicine	Straub Medical Center	888 S. King Street Honolulu,HI 96813	(808) 522-4000

# New Members continued

Member	Specialty	Locations	Clinic Location	Contact No.
Christopher A. Tokin, MD	General Surgery	Pali Momi Medical Center	98-1079 Moanalua Road Suite 630 Aiea, HI 96701	(808) 485-5414
Mary L. Worthen, MD	Otolaryngology	Straub Medical Center	888 S. King Street Honolulu,HI 96813	(808) 522-4530
Brooke T. Yorita, MD	Hospitalist - Family Medicine	Pali Momi Medical Center	98-1079 Moanalua Road Aiea, HI 96701	(808) 486-6000



CREATING A HEALTHIER HAWAI'I

Questions? Contact us at Info@hawaiihealthpartners.org

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