Happy New Year from HHP

Welcome to a new year and a new decade. We ended 2019 with record level provider engagement and satisfaction. Thank you for getting on board the journey of transforming health care in Hawai‘i. Your engagement was very clear from the growing participation in clinical workgroups, increased provider participation in the Quality Performance and Shared Savings Programs (QPP/SSP), webinar attendance, and levels of response surveys of member satisfaction and QPP/SSP input – all of which peaked at the 2019 Annual Membership Meeting. We will continue in our commitment to provide you with opportunities to engage across specialties and look forward to applauding your success in 2020.

2019 Results

Last year was characterized by cross-specialty successes and ongoing progress in preparing our systems for value-based contracting. Although pilots were clearly successful in reducing cost and improving quality, the result was a subtle change in the overall Medical Cost Trend (MCT). We’re confident that scaling up these accomplishments will achieve the impact needed in 2020.

Outlook

Our HHP Value-based Care Model improves clinical decision making across Hawai‘i Health Partners. We continue to expand the breadth of activities to streamline care and improve appropriateness, particularly in clinical integration and prior authorization. The challenge for 2020 is to see that expansion move the needle on MCT.

Operationally, we’re focused on specific steps in the patient care continuum, including but not limited to:

- Post-discharge care
- Accelerated ambulatory care pathways
- Network utilization in care coordination

Additionally, this year we are broadening our scope with specialty episode projects that span the HHP network. We look forward to sharing more information with you very soon. Longer term, Hawai‘i Health Partners will continue to support the ongoing Hawai‘i Pacific Health system MCT projects, and actively connect those with the specialty driven projects and workgroups. You are at the forefront of this mission.

Thank you to each and every one of you for your dedication to your patients, for your leadership and for your partnership with us. Engaged and motivated providers are the foundation for our ability to change health care in Hawai‘i for the better.

Gerard Livaudais, MD, MPH, FACP
Executive Vice President

Andy Lee, MD
Medical Director

Melanie Nordgran, MBA
Director of Operation
New! HHP Central Support

Hawai‘i Health Partners is excited to offer a new service line via Epic to support providers in the areas of Behavioral Health (BH) care coordination, DME/Supply Orders & HHP Network Access. This service is currently available to HHP independent aka non-HPH employed Primary Care Providers on O‘ahu with long-term plans to expand similar services to other specialties and applies only to HHP attributed patients with a HMSA health plan. Independent Primary Care Providers on O‘ahu can contact HHP Central Support using an Epic Order. Non-Epic users should call (808) 462-5104. More information will be distributed to applicable providers through HHP PRN Bulletins via Info@hawaiihealthpartners.org and will be available on the HHP website in the ‘Physician Login’ under ‘Provider Resources.’ on this service in the coming weeks.

3 Things You Need to Know

1. Requesting providers are responsible for placing orders and referral in accordance with their standard practice workflow.
2. Non-Urgent requests only.
3. Follow the Epic order prompt. For those without Epic, have the following information ready:
   a. Behavioral Health:
      i. Type of BH provider/therapist patient needs
      ii. Diagnosis
      iii. Reason for needed referral
      iv. Point of contact
      v. Demographics
      vi. Provider gender preference
   b. DME
      i. Type of DME being ordered
      ii. Diagnosis
      iii. Point of contact
   c. Network Access
      i. Type of in-network specialist referring patient to
      ii. Diagnosis
      iii. Reason for support
      iv. Point of Contact
      v. Demographics

• Behavioral Health care coordination:
  ▶ Assistance with finding an appropriate provider as well as outreach to patients with the provider information and resources needed to schedule an appointment.

• DME/Supply Orders:
  ▶ Assistance with locating the appropriate DME company and coordinating the necessary information required.¹

• Network Access
  ▶ Assistance with facilitating referrals to a HHP Network provider and/or services; includes outreach to connect providers and patients with information needed to schedule an appointment.

¹In terms of prevalence, quality & cost
**Coming Soon! PCPs “Now Accepting New Patients”**

In support of the proactive transition of young adults from pediatric to adult health care at 18 years or older and timely access to care, a roster of HHP Primary Care Providers accepting new patients will be available on the HHP website behind the ‘Physician Login’ under ‘Provider Resources.’ This feature is also accessible in Epic under “Links,” and in the ‘HHP Network Resource List’ via the HPH Intranet under Groups & Projects > Physician Resources under ‘Quick Links.’

**Update: NIA and Prior Authorization – Clinical Decision Support**

As is the nature of most software development projects, DecisionPoint has encountered challenges resulting in delays of the software go-live and the ‘FastPass’ measurement period. Based on our most recent findings, go-live should occur before the end of the first quarter. More updates to come via email from Info@hawaiihealthpartners.org.

**‘Fast Pass’ Requirements**

NIA/Magellan Health gives automatic prior authorizations for all advanced DI orders to individual providers who have earned a ‘Fast Pass.’

**Individual ‘Fast Pass’**

HHP provider members can earn an individual ‘Fast Pass’ if they have a minimum of 25 cases and a 95% approval rate.

**Group ‘Fast Pass’**

HHP provider members earn a group ‘Fast Pass’ if they achieve an overall group approval rate of 95% or greater during a six month period.

**For Radiology Departments:** The first phase of the pilot will begin in the next few weeks. Please be on the lookout for information about the upcoming pilot in the Epic Radiant bulletin from IT on February 5.

**Provider-level NIA Reports:** By now you should have received your individual NIA report showing your current approval rate, either during the HHP 6th Annual Membership Meeting on September 28th or via email from Info@hawaiihealthpartners.org. 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.

**Medicare’s Protecting Access to Medicare Act (PAMA)**

The Protecting Access to Medicare Act (PAMA) has started and is currently operating in an “Educational and Operations Testing Period” during which ‘Appropriate Use Criteria’ (AUC) consultation must occur at the time of ordering for Medicare fee-for-service patients with advanced imaging orders. Starting in 2021, physicians will be responsible for correct reporting.
Less Time in Epic, More Time with Patients

Health systems recognize the relationship between physicians’ well-being and “desktop medicine”; and in collaboration with Kaiser Permanente and the Queen’s Medical Center, HPH is pleased to announce the **E-HUG (Epic Hawai‘i User Group) Conference** from March 30 to March 31, 2020 at the Queen’s Conference Center.

The conference will feature a CME course series of eight “Physician Power User Classes,” and special sessions including Epic’s most popular courses as well as a new class on Mobile Devices. Each session will end with a Q&A with Epic’s Physician Informaticist present, as well as a ‘Smart Bar’ with drop-in hours for providers to stop by at their own convenience.

Course registration ends on March 1, 2020. [Click here to register.](#)


Clinical Integration: ‘Specialty Episodes’ and the HHP Care Model

The HHP operating agreement describing our purpose states “[…] develop and operate a clinically and financially integrated physician-hospital organization that will enable the hospitals and physicians of the Hawai‘i Pacific Health system and independent community physicians to work together to monitor and improve the utilization, cost, and quality of the health care services they provide to patients […]”

As shared during the “HHP 2020 Webinar – The Year Ahead”, achieving clinical integration will rely on creating and implementing care models for specialty episodes. Specialty episodes are a similar concept to medical bundles; we’ve identified the top major clinical diagnoses managed primarily by a single specialty. Using claims data, the flow of care in the care continuum, as well as interventions and cost drivers for the duration of their treatment are displayed.

In the upcoming months leaders across HHP, including HPHMG and independent practices, will gather for constructive dialogue across specialty members to determine the ideal care path (a.k.a. Care Model) that maximizes outcomes, and minimizes waste and avoidable costs. More information will be distributed to providers in the applicable specialties via Info@hawaiihealthpartners.org in the coming months.
HHP At-A-Glance

New! Updates from HHP Clinical Workgroups

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

<table>
<thead>
<tr>
<th>Pathway</th>
<th>Status</th>
<th>SMC</th>
<th>PMMC</th>
<th>KMCWC</th>
<th>WMC</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Atrial Fibrillation</td>
<td>Live &amp; Running</td>
<td>√</td>
<td>√</td>
<td>√</td>
<td>√</td>
<td>4</td>
</tr>
<tr>
<td>Chest Pain</td>
<td>Live &amp; Running</td>
<td>√</td>
<td>√</td>
<td>√</td>
<td></td>
<td>3</td>
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<tr>
<td>GI Bleed</td>
<td>Live &amp; Running</td>
<td>√</td>
<td>√</td>
<td>√</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>Preeclampsia</td>
<td>Planning</td>
<td></td>
<td>√</td>
<td></td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>Preterm Labor</td>
<td>Live &amp; Running</td>
<td></td>
<td></td>
<td>√</td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>Pulmonary Embolism</td>
<td>Live &amp; Running</td>
<td></td>
<td>√</td>
<td></td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>Renal Stone (Nephrolithiasis)</td>
<td>Live &amp; Running</td>
<td></td>
<td>√</td>
<td></td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>TIA</td>
<td>Live &amp; Running</td>
<td></td>
<td>√</td>
<td></td>
<td></td>
<td>1</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
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<td>3</td>
<td>6</td>
<td>5</td>
<td>1</td>
<td>15</td>
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</table>

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.

<table>
<thead>
<tr>
<th>Workgroup</th>
<th>Running</th>
<th>Planning</th>
</tr>
</thead>
<tbody>
<tr>
<td>ENT Transition to ASC</td>
<td>√</td>
<td></td>
</tr>
<tr>
<td>HHP Surgery</td>
<td>√</td>
<td></td>
</tr>
<tr>
<td>Pediatric Splinting</td>
<td></td>
<td>√</td>
</tr>
<tr>
<td>Straub Diabetes</td>
<td>√</td>
<td></td>
</tr>
<tr>
<td>Straub Hypertension</td>
<td>√</td>
<td></td>
</tr>
<tr>
<td>Urinary Retention</td>
<td></td>
<td>√</td>
</tr>
<tr>
<td>Sleep Medicine</td>
<td>√</td>
<td></td>
</tr>
<tr>
<td>Pediatrics Bone &amp; Joint/Sports Medicine</td>
<td>√</td>
<td></td>
</tr>
<tr>
<td>Pediatric Head Trauma</td>
<td>√</td>
<td></td>
</tr>
<tr>
<td>Leukemia Maintenance Chemotherapy</td>
<td>√</td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>4</td>
<td>6</td>
</tr>
</tbody>
</table>

continued
Several workgroups have been discontinued because they reached their goal of positively impacting quality, utilization and cost. HHP recognizes and appreciates the innovative work done by the following workgroups in 2019.

<table>
<thead>
<tr>
<th>Workgroup</th>
<th>Chairperson</th>
</tr>
</thead>
<tbody>
<tr>
<td>Viscosupplementation Options (SMC)</td>
<td>Kiran Vadada, MD</td>
</tr>
<tr>
<td>RVP Testing (KMCWC)</td>
<td>Travis Hong, MD</td>
</tr>
<tr>
<td>Chest Pain Ambulatory Pathway (SMC)</td>
<td>Lisa Tan, MD</td>
</tr>
<tr>
<td>Atrial Fibrillation Ambulatory Pathway (SMC)</td>
<td>Lisa Tan, MD</td>
</tr>
<tr>
<td>Chest Pain Ambulatory Pathway (PMMC)</td>
<td>Jon Aki, MD</td>
</tr>
<tr>
<td>Atrial Fibrillation Ambulatory Pathway (PMMC)</td>
<td>Cyrus Szeto-Wong, MD</td>
</tr>
<tr>
<td>Renal Stone Pathway (PMMC)</td>
<td>Franklin Lee, MD</td>
</tr>
</tbody>
</table>

**Key Accomplishments of these Workgroups:**

- Reduced viscosupplementation options (a single-dose and a multi-dose treatment option) for treatment of osteoarthritis at Straub Medical Center
- Reduced ordering of RVP tests at Kapi‘olani Medical Center for Women & Children
- Developed protocols to improve patient care and access for patients presenting with chest pain, allowing them to be discharged from the ED with timely follow-up by primary care or specialty clinics at Straub Medical Center and Pali Momi Medical Center
- Developed protocols to improve patient care and access for patients presenting with Afib, allowing them to be discharged from the ED with timely follow-up by primary care or specialty clinics at Straub Medical Center and Pali Momi Medical Center
- Developed protocols to improve patient care and access for patients presenting with nephrolithiasis, allowing them to be discharged from the ED with timely outpatient follow-up Pali Momi Medical Center

**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 | janelle.papin@hawaiihealthpartners.org.
Referrals and Authorizations for Essential Advantage (HMO) Patients

The Essential Advantage (HMO) plan is a partnership between HMSA and Hawai‘i Pacific Health, with the exclusive use of the Hawai‘i Health Partners network aka Essential Advantage network. Now that the Medicare Annual Enrollment Period is over you may have new patients in your panel with the HMSA Medicare Advantage plan – “Essential Advantage (HMO) [EA].”

5 Things You Need Know
1. You and your staff can identify EA patients in Epic.
   • If you don’t have Epic access:
     i. PCPs can contact their Population Health practice care liaisons for a current list. Specialists without Epic access should email Info@hawaiihealthpartners.org for assistance with EA patient identification.
     a. A “How-to” guide is available behind the ‘Physician Login,’ under ‘Provider Resources.’
2. Essential Advantage (HMO) has the same HMSA pre-certification (medical necessity) requirements and process as other HMSA Akamai Advantage PPO plans.
3. Essential Advantage (HMO) members must utilize services from within the HHP network of providers and facilities.
   • Unless the service is not available and/or is clinically indicated, all out-of-network services require review and determination from HMSA medical management.
4. Out-of-network services without an approved referral will result in non-reimbursement to the service provider and a bill to the patient.
   • Engaged patients make informed decisions, which improves health outcomes. Encourage your patient(s) to contact you first with their health concerns and this will set them up for success for receiving the maximum insurance coverage.

PCPS Only
4 Ways to Improve Patient Experience
1. Identify EA patients in your panel

2. Complete an Annual Wellness Visit (AWV) for your EA patients
3. Make sure their Hierarchical Condition Categories (HCC) are accurate and current.
   • Review their chronic conditions in the visit diagnoses
4. Identify the patients’ health care team
   • Ask your patients if they are in need of specialty care and identify the right EA network specialist for them.
   i. Engage your patient via pre-visit preparations or during the visit by asking them about their team of specialists and medical services.

For Specialists
Referral Management
Essential Advantage (HMO) members must utilize services from within the HHP network of providers and facilities. Ask your EA patients about their current care team.

How to Identify HHP Providers:
• The 2019 HHP Provider Directory is available in soft copy and hard copy versions.
   Soft copy – behind the ‘Physician Login’ under ‘Provider Resources’
   Hard copy – call (808) 587-5808 or email Info@hawaiihealthpartners.org
• HHP Network Resource List
   In Epic “Links,”
   In the HPH Intranet - Groups & Projects > Physician Resources under ‘Quick Links’

Additional Resources
1. HMSA FAQs for Providers
2. Services that require Prior Authorization/ Precertification

1 Except Urgent Care and ER services. Other Exceptions: All lab services, ordered by in-network providers, do not require referral. Dialysis services while out of coverage area.
2 A referral is required for patients to see specialists outside of the Essential Advantage network.
QPP/SSP Program Update: How to Improve Your Performance

Hawai‘i Health Partners makes it easy to improve your performance in the QPP/SSP by emailing you quarterly interim reports with your current performance data. In addition to these reports we are also emailing eligible providers 2019 personal utilization data for the following measures: *NSAID Utilization in CKD Patients* (p. 59) and *Use of High Risk Medications in the Elderly* (p. 67) on or around February 7th.

**NSAID Utilization in CKD Patients**
All ordering physicians (includes all specialties other than those excluded below) and APRNs carrying a primary care panel of attributed lives with a minimum of five Epic encounters with a CKD patient meeting the criteria in the performance measurement.

*Excludes Diagnostic Radiology, Interventional Radiology, Medical Genetics, Neuroradiology, Nuclear Medicine, and Pathology.*

**Use of High Risk Medications in the Elderly**
All ordering physicians (includes all specialties other than those excluded below) and APRNs carrying a primary care panel of attributed lives.

*Excludes Diagnostic Radiology, Interventional Radiology, Maternal & Fetal Medicine, Medical Genetics, Neuroradiology, Nuclear Medicine, Pathology, and Repro Endocrin/Infertility.*

*Excludes non-Epic providers.*

**Available in February**
Last year we created learning modules tailored specifically to your specialty, summarizing the 2019 QPP/SSP measures under which you were eligible to earn points. We’ve created new learning modules for you for the 2020 Program Guide. You will receive an alert via info@hawaiihealthpartners.org and Healthstream once they are available.

The 2020 Program Guide containing the details of the HHP Quality Performance and Shared Savings Programs (QPP/SSP) and their specialty corresponding pocket guides were mailed out to HHP members in December 2019.

If you have not received the Program Guide or if you have questions about the QPP/SSP, please contact Janelle Papin, Project Manager, at janelle.papin@hawaiihealthpartners.org.
HHP Department Highlight: Cardiology

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 2019 HHP Provider Directory is now available in soft copy and hard copy versions.
  - Soft copy – [HHP website](http://www.hawaiihealthpartners.org), behind the ‘Physician Login’ under ‘Provider Resources’
  - Hard copy – call (808) 587-5808 or email Info@hawaiihealthpartners.org
- 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).

### CARDIOLOGY

**Jeffrey M. Bender, M.D.**  
**Office Location:** Pali Momi Medical Center (98-1079 Moanalua Road, Suite 680) | Tel (808) 485-4553  
**Special Interests:** Noninvasive cardiology, advanced cardiac imaging (coronary CTA and cardiovascular MRI).

**Chari Y T Hart, M.D.**  
**Office Location:** Straub Clinic & Hospital (888 South King Street) | (808) 522-4222  
**Special Interests:** Valve and Structural Heart Disease, Transesophageal Echocardiography and Interventional Echocardiography.

**Edwin Kirk Huang, M.D.**  
**Office Location:** Straub Clinic & Hospital (888 South King Street) | (808) 522-4222  
**Special Interests:** Cardiovascular Disease, Internal Medicine.

**Brandon J. Kai, M.D.**  
**Office Location:** Straub Clinic & Hospital (888 South King Street) | (808) 522-4222  
**Special Interests:** Cardiovascular Disease, Internal Medicine, Interventional Cardiology.

**Se Kon Won, M.D.**  
**Office Location:** Straub Clinic & Hospital (888 South King Street) | (808) 522-4222  
**Special Interests:** Cardiovascular Disease, Interventional Cardiology.

**John T. Funai, M.D.**  
**Office Location:** Kaua’i Medical Clinic (3-3420 Kuhio Highway, Suite B, Lihue, HI 96766) | Tel (808) 245-1548; Kapa’a Clinic (4-831 Kuhio Hwy, Suite 332, Kapa’a Shopping Center) | Tel (808) 245-1548; The Clinic at Waimea (4643A Waimea Canyon Drive, Waimea) | Tel (808) 245-1548  
**Special Interests:** Noninvasive cardiology, coronary artery disease, congestive heart failure, valvular heart disease,
At-A-Glance continued

CARDIOLOGY (continued)

hypertension, hyperlipidemia, atrial fibrillation and cardiac arrhythmias, pacemakers, defibrillators, echocardiography, cardiac stress testing, cardiac CT scan, nuclear stress test, congenital heart disease, heart transplantation, preventive cardiology.

Andrew So, M.D.
Office Location: Kaua‘i Medical Clinic (3-3420 Kuhio Highway, Suite B, Lihue, HI 96766) | Tel (808) 245-1548
Special Interests: Preventative cardiology, cardiac imaging, echocardiography, cardiac computed tomography, and nuclear imaging.

John Kao, M.D.
Office Location: Pali Momi Medical Center (98-1079 Moanalua Road, Suite 680) | Tel (808) 485-4553; Cell (808) 781-7014
Special Interests: General Cardiology and Interventional Cardiology performing high risk coronary interventions, use of percutaneous LVAD – Impella and TandemHeart, ASD and PFO closure and Left Atrial Appendage Closure for stroke prevention in afib.

INTERVENTIONAL CARDIOLOGY

Brandon Itagaki, M.D.
Office Location: Straub Clinic & Hospital (888 South King Street) | (808) 522-4222
Special Interests: Treatment strategies for coronary artery disease, coronary physiology and heart disease in the elderly.

Wesley Kai, M.D.
Office Location: Straub Clinic & Hospital (888 South King Street) | (808) 522-4222
Special Interests: Diagnostic cardiac catheterization, coronary angioplasty and stent placement.

Jared Oyama, M.D.
Office Location: Straub Clinic & Hospital (888 South King Street) | (808) 522-4222
Special Interests: Minimally invasive treatments for heart valve disease including transcatheter aortic valve replacement and transcatheter mitral valve repair. Complex coronary stenting.

PEDIATRIC CARDIOLOGY

Sanah Christopher, M.D.
Office Location: Pali Momi Medical Center (98-1079 Moanalua Road, Suite 680) | Tel (808) 485-4553
Special Interests: Complex PCI, Peripheral arterial disease, Preventative Cardiology, Women’s Cardiovascular health.

Jen-Cheng Chen, M.D.
Office Location: Straub Clinic & Hospital (888 South King Street) | (808) 522-4222
Special Interests: Diagnostic cardiac catheterization, coronary angioplasty and stent placement.

Andras Bratincsak, M.D.
Office Location: Kapi‘olani Medical Specialists (1319 Punahou Street, Suite 520) | Tel (808) 983-8933
Special Interests: Heart rhythm problems and interventional cardiac procedures in children and adults with congenital heart disease.

Melissa Yamauchi, M.D.
Office Location: Kapi‘olani Medical Specialists (1319 Punahou Street, Suite 520) | Tel (808) 983-8933
Special Interests: Non-invasive imaging, general pediatric cardiology.
We’re introducing a new section to keep you updated on the Medical Cost Trend (MCT), current efforts to reduce it as it relates to HHP initiatives, HPH system projects, and information on other ways providers can directly impact the MCT.

Each of the system MCT projects has specific goals, in aggregate amounting to a $6.00 per-member-per-month (pmpm) impact on the MCT; translating to an approximate $7.2million in medical costs avoided by improved efficiency, reduced waste and tighter appropriateness. We look forward to sharing this progress throughout the year, along with opportunities for your leadership, input and active participation where these projects apply to your practice.

Current System MCT Initiatives

- Accelerated Ambulatory Pathways
- Ambulatory Surgery Center movement
- Complex Care and Transitional Care
- Skilled Nursing Facilities and Rehab
- Lab & Pathology
- Network Use & Coordination
- Referral Guidelines & eConsults
- Specialty Pharmacy
- ED Utilization
Annual Webinar Recap

"HHP 2020 – The Year Ahead"

On Tuesday, January 28th, HHP provider members from O‘ahu and Kaua‘i, across four facilities and both employed and independent practices, attended the 2nd Annual HHP webinar, "HHP 2020 – The Year Ahead." Many of you enjoyed the opportunity to network with your colleagues as well as the opportunity to engage directly with HHP and HPH leadership during the Q&A session. Early feedback from you has been very helpful and positive, with statements such as:

- “Excellent summary with easy to understand graphics about the future path and the services that separate HHP from other POs.”
- “[…] have physicians from all different sites at one meeting for potential different views/contribution.”
- “Need more time to discuss specifics of how to decrease (medical) cost trend.”
- “It would be beneficial for front […] providers to have access to high cost trends to brainstorm ideas on how to reduce MCT.”
- “[…] liked the discussion about managing ‘specialty episodes’ to target the MCT. We should be getting workgroups to work on each of the top 10 episodes by cost.”

Even with the 7:00 a.m. start, many of you expressed a wish for more time for discussion. We look forward to continuing to provide members with the annual kickoff webinar and hope to see you all at the end-of-year membership meeting. This year’s Q&A session was very lively and there were a few questions submitted via Skype and at Straub Medical Center we were unable to get to. Here are answers to those questions.

1. The HHP support services for behavioral health referrals is excellent. The whole loop is in place so that the PCP knows when the referral is completed. How far are we at getting this type of electronic “closure of the loop” confirmation on Epic with referrals to other in-network specialists?

There is currently an Epic reporting tool called ‘Referral Reports’ that can be set up by the referring provider. This will allow the referring provider to run a report on the status of the referral. For more information please contact your Epic support team at itclinicianepicsupport@hawaiipacifichealth.org.

2. Are employed PCPs able to access the HHP support services?

In the current pilot, the HHP Central Support is a support service for Oahu HHP independent practice PCPs only. This pilot will provide valuable insights into the further development, and assess the scope for expanding this service to other specialties and providers.

3. If HHP builds an in-network wound care center, how will they get information/notified that this service is up and running?

We are actively looking to recruit member partners who provide wound care and bringing these providers into HHPs network. Any updates regarding this service and other important news, events, and changes will be emailed to you via Info@hawaiihealthpartners.org. It is our policy to use the email addresses of providers listed in Echo. If you would like to confirm or change your preferred email address, please email Info@hawaiihealthpartners.org.

SAVE THE DATE!

Hawai‘i Health Partners 7th Annual Membership Meeting
November 7, 2020
Hilton Hawaiian Village
Waikiki Beach Resort
8:00 a.m. to 1:30 p.m.
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:

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

<table>
<thead>
<tr>
<th>Member</th>
<th>Specialty</th>
<th>Facility</th>
<th>Clinic Location</th>
<th>Contact Number</th>
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</thead>
<tbody>
<tr>
<td>Beverly S.Y.M. Shieh, PsyD</td>
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<td>Kapi‘olani Behavioral Health Service 1401 South Beretania Street Suite 920 Honolulu, HI 96814</td>
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<tr>
<td>Anne M. Asam, MD</td>
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<tr>
<td>Anand C. Patel, MD</td>
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<tr>
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<tr>
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# New Members continued

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<tr>
<th>Member</th>
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<tbody>
<tr>
<td>Brian D. Sindelar, MD</td>
<td>Neurosurgery</td>
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<tr>
<td>Saki Onda, MD</td>
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<tr>
<td>Melissa Faith Q. Natavio, MD</td>
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<tr>
<td>James M. DiMarchi, MD</td>
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<tr>
<td>Mayuko Imai, MD</td>
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<td>John R. Mills, MD</td>
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<tr>
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