

WV Health Innovation Collaborative
Lower Cost Work Group
Meeting Notes
March 18, 2015

People Participating: Jeremiah Samples, DHHR, Secretary's Office
Jeff Wiseman, DHHR Secretary's Office
Brent Tomblin, Partners in Health Network
Barbara McKee, Partners in Health Network
Barbara Wessels, UniCare
John Earles, Logan Healthcare Foundation
Verena Mullins, DHHR, Secretary's Office
Jerry Roueche, Community Care of WV/Southern
Sharon Carte, WV CHIP
Jean Kranz, WV Health Improvement Institute
Rahul Gupta, DHHR, BPH
Anne Williams, DHHR, BPH
Shelly Rouse, The Health Plan
Nancy Sullivan, DHHR, Secretary's Office
Christine Mullins, DHHR, BPH
Penney Hall, DHHR, BMS
John Moore, Bowles Rice
Stacey Shamblin, WV CHIP
Carolyn Charnock, Kanawha County Ambulance
Phil Weikle, WV Health Information Network
Ted Cheatham, PEIA
Tony Atkins, DHHR, BMS
Dave Campbell, WV Health Improvement Institute
Ashley Noland, WV Higher Education Policy Commission - Health
Sciences
Erin Snyder, WV Center on Budget and Policy
Judi Nuckolls, Health Promotion & Chronic Disease
John Wiesendanger, WV Medical Institute
Bob Whitler, Partners in Health Network/CAMC
Phil Shimer, TSG Consulting
Pam King, WV Insurance Commission
Debbie Waller, GOHELP

People Participating by Phone:

Arnie Hassen, WVSOM
Jane Cline, Spilman Law
Chris Budig, WV Telehealth Alliance
Dan Mace, DHHR, BPH
Sarah Chouinard, Community Care of WV
Shannon Parker, WV Primary Care Association
Renate Pore, West Virginians for Affordable Health Care
Carol Haugen, WV Hospital Association

Jeremiah Samples welcomed everyone to the meeting and introductions were made.

Presentations:

ER Use for Ambulatory Visits by Children and Teens (in lieu of Medical Homes)

Jeremiah introduced Sharon Carte, Director of CHIP and Jean Kranz, Project Manager, Tri-State Children's Health Improvement Consortium (T-CHIC) – WV Health Improvement Institute who will be presenting to the group.

- Sharon Carte shared with the group that the Lower Cost Work Group has had several presentations on ER Utilization in Adults and now going to turn the attention and look at pediatrics as well. Very different dimensions in pediatrics.
- Quality Improvement Project to get children to the appropriate primary care setting.
- Jean Kranz presented a powerpoint presentation to the group. This was sent to members in advance of the meeting.
- She shared a chart showing WV Medicaid and WV CHIP HEDIS rates show high utilization of ER services which is reported in C.A.R.T.S. which is CHIP annual reporting tool and Medicaid, PEIA & CHIP data indicate over utilization of ER services.
- Shared WVCHIP Conditions for ER Visit, top 10 presenting conditions ranked in order by cost which showed symptoms abdomen & Pelvis ranking 1 and cough ranking 10.
- There needs to be a behavioral change in parents/guardians' decision to go to the ER or take their children. Some of the problem may be they aren't aware of an after hour clinic and the ER is a default decision. They need to know who to call and to reach the appropriate provider and when to call.
- She shared a slide on tailored care coordination and case management. One size fits all doesn't work with children.
- A task force is being formed and they are getting representation from numerous state agencies, private payers, PCP champions, parents/consumers, mental health providers, Partners in Health Network, etc. Jean asked for assistance from Christina Mullins to help with getting a parent or parents involved in the task force. Renate Pore also recommended checking with Stephen Smith.
- The task force change is to compile and analyze data, identify strategies to reduce overutilization, develop strategies to implement a pilot project and collaborate with the SIM grant.
- She shared potential savings and expected outcomes.
- They looked at over all utilization by CHIP, Medicaid and PEIA on where to start the pilot. Kanawha and Mercer Counties were picked.
- She shared health care facilities in target areas; hospitals, FQHC's and SBHC's and health care workforce in target areas by provider type, PCP-MO-DO's; APRN's, PA's Dentists and Dentist Hygienists.

Discussion:

- Availability of urgent care centers
- On-line access to health care
- Telehealth/remote access
- Look at study done by Bob Walker 5 or 6 years ago on base-line data availability

- Next Steps:
 - ☞ Direction from the taskforce
 - ☞ Data requested for a drill down in the two counties, Kanawha and Mercer.

The first meeting of the task force is set for Friday, March 20 at 1:00 p.m. at the CHIP office. If anyone is interested in joining the task force, you can email Jean Kranz at Jean.Kranz@wvhii.org Chris Budig is interested in joining the task force.

Discussion followed.

Jeremiah thanked Sharon and Jean for a great presentation and great discussion. He introduced Christina Mullins, Director of the Office of Maternal, Child and Family Health, Bureau for Public Health. Ms. Mullins will be sharing her powerpoint presentation on Home Visitation Services with the group. The presentation was sent to the work group prior to the meeting.

- Maternal, Infant and Early Childhood Home Visiting (MIECHV) is a federal program that supports pregnant women and families and helps parents of children from birth to kindergarten entry, tap the resources and hone the skills they need to raise healthy children. The programs help to prevent child abuse and neglect, encourage positive parenting and promote child development and school readiness.
- HRSA funds states to develop and implement voluntary, evidence-based home visiting programs. West Virginia's Title V Agency, the Office of Maternal, Child and Family Health administers these funds on behalf of WV.
- Each state chooses the home visiting models that best meet the needs of its own at-risk communities and supports local agencies in providing the home visiting services to families in their own communities. Families choose to participate and can leave at any time.
- The total budget for Home Visitation Services in WV totals nearly \$17 million in federal funds per year.
- Ms. Mullins shared location of services in WV counties and also shared a chart of families served in FY12-FY14. Numbers will change dramatically over the next few years.
- She shared federal data requirements and key benchmarks/outcomes with the group. WV has done an excellent job meeting their benchmarks and has continued to receive funding.
- Shared some percentages with the group on prenatal care, breastfeeding, well-child visits. Information shared shows success rates in these areas.
- Shared information on visits to emergency departments and pregnant women/mother ED visits. There was a big decrease in the percentage of enrolled pregnant women and mothers who visited the ED from all causes but a small increase in the percentage of enrolled children who visited the ED from all causes.

If you have additional questions for Christina, you can email her at Christina.R.Mullins@wv.gov

Discussion followed. Jeremiah thanked Christina and expressed appreciation for all the good work they are doing.

Other Topics for Discussion

- Two items that were discussed at the last Lower Cost Work Group Meeting was 1) EMS and ER, and 2) ER information to Primary Care Physicians

☞ Ted Cheatham will be meeting with EMS folks on Monday at 1:30 in his office. If anyone is interested in participating in this meeting, you can contact Ted at Ted.M.Cheatham@wv.gov

☞ ER Information to Primary Care Physician – Dave Campbell and Phil Weikle are meeting on this.

☞ Work Group members were encouraged to share any thoughts on the above two items. Send them to Debbie Waller at deborah.k.waller@wv.gov

More discussion followed:

- Excess testing was discussed, over use of CT Scans, Standard of Care
- Suggestion to put together a task force to get hospital's views on these issues.
- Suggestion was to expand the task force on ER Use by Children and Teens and collect adult and child at the same time.
- Discussion regarding NEMT.
- Jeremiah will work on getting a presentation set up regarding NEMT to be presented at one of the Lower Cost Work Group meetings.

Next Meeting

April 15, 2015
1:00 – 3:00 p.m.
One Davis Square, Suite 100 East
Conference Room 134