Pediatric Immunization Planning Committee

Minutes

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| Date: 7 28 20 | | |  | | Start/End Time: 12:00 to 1:00 | | | |
| Meeting Location:  +16468769923,,207774386# - Zoom: <https://ctc-ri.zoom.us/j/207774386> | | | | | | |  | |
| MEETING INFORMATION | | | |  | **Attendees noted with \*** | | | |
| Meeting Purpose/Objective/Attachments:   * To plan for assisting primary care practices that participate in Vaccine for Children Program (VFC) with improving immunizations and lead screening   Links to Attachments:   * [Pediatric Immunization Resource Guide](http://r20.rs6.net/tn.jsp?f=0011LolJ40x3fxVxHdzq2YKM_lM5N2htbzaagOK_3Qtqrys_HEfA3XvR40aBtIm7lTu_RpWN7L1dRrg6hQXgAFX1NR2akxPNS6Brlhgbm3nJqwGYST-6H71PRuW-DAuxunybQqiVUM7YjczcfOuKelYcbhY7Eo3f0hQ942wGkFMrIbXoPKPdPJz1l-A4qGb5qRhBWjUqyd_Q4oj845gna5jGzR4CPe1M45qzSD70iBwftWQGBkWOrL97kJ13RR6RXfJlwKfbQTlMgrguRWwjVnaGtL4UfQPR3GPD9ftWzIVNwqxDc0I0BPjJA==&c=Jd2j4rDXMPFVGdqBANT9Un06v-7tgGrF3l7sVrnoRQDXYUxvJvHQxw==&ch=DTDFtzgMMQ4A_vMYuiET0omtY15sQ1Tolw1kc9Yqa7dJVmq06tG4sg==) * [PCHC findings with outreach to parents](https://www.ctc-ri.org/sites/default/files/uploads/PCMH%20Kids%20Family%20Survey%20Summary%20for%20PCHC.docx) | | | |  | Susanne Campbell, CTC \*  Pano Yeracaris, CTC \*  Candice Brown, CTC \*  Sue Dettling, CTC \*  Der Kue, RIHCA \*  Pat Flanagan, Hasbro \*  Beth Lange, Coastal - Waterman \*  Rena Sheehan, BCBSRI  Trish Washburn, RIDOH  Janet Limoges, RIDOH \*  Nancy Silva, RIPIN \*  Jessica Rubinstein, Tufts \*  Mary Ricci, Tufts \*  Kelsey Ryan, Coastal  Christopher Ottiano NHPRI \*  Stacey Aguiar, United Healthcare \* | Carolyn Karner, CTC \*  Suzanne Herzberg, Brown \*  Vicki Crowningshield, HCA \*  Marilyn Boichat, Coastal\*  Elizabeth Caruso, BVCHC  Lauren Piluso, RIDOH  Michelle Kollett, RIDOH  Anne Primeau-Faubert, RIDOH  Lori Clark, RIDOH  Elizabeth Dennigan, Lifespan  Jessica Signore, RIDOH  Sara Remington, RIDOH  Marie Palumbo-Hayes, FSRI  Mike Simoli, RIDOH \*  Ellen Amore, RIDOH \*  Bernadette Parrillo, RIPCPC \*  Cindy Singleton, RIDOH \* | | |
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| Item # | Owner | Topics | | | | | | Action # |
| 1 | Susanne  5 minutes | Welcome: Introductions and Review of agenda   * Invitees include representation from PCMH Kids Leadership & American Academy of Pediatrics: Dr. Pat Flanagan and Dr. Beth Lange, RI Department of Health including KidsNet and Lead Screening, Systems of Care, RI Health Center Assocation, Managed Care Organizations (they are also planning to support children & families with Immunizations & Lead Screening), Practice Facilitators: that work with Practices and Systems of Care | | | | | |  |
| 2 | Pat Flanagan: PCMH Kids  Kids Net  15 minutes | * Pediatric Relief Fund: COVID/Pediatric Advisory Board, OHIC, State Medicaid Office implemented the Pediatric Relief Fund to provide practices with financial support needed for financial stability and to improve Pediatric immunization rates. said Practices needed financial relief, as most did not receive same via the Federal Provider Relief fund (those funds went mainly to Medicare Providers)   + All but 6 Pediatric Practices in the State applied – those 6 were individual Providers or did not have an EHR   + 47 applications (representing 52 practices) and their performance improvement plans were received, and have been reviewed – applications provided consent for CTC to receive performance reports and allow their Practice level data to be followed     - Majority of Practices already use KidsNet     - RIDOH received consent to share data from an additional 93 Practices (some with only a few kids under 18 years old) – RIDOH will be reaching out to them to offer support   + Next steps: Pairing Improvement Plans with Practice’s Actual Immunization Numbers to determine potential themes & common threads that could be used for a Learning Collaborative * [Updated KIDS NET Performance Report](https://www.ctc-ri.org/sites/default/files/uploads/Copy%20of%20COVID%20Preventive%20Care%20changes%207.16.2020.xlsx)    + First round of practice level reporting ran on July 15th – reports will be run on the 1st and 15th of the month     - 73% of kindergarten-eligible (5 years old before August 1st) kids had met their requirements; 80% had their 2 doses of MMR     - 7th Graders – 49% met their immunization school requirements     - 12-24 Months Old (as of December 2019) – 73% had at least one lead screen   + In the 2nd Round of reporting, to be run on August 1st, there will be a comparison to a similar age cohort, detailing where the Practice was last year (12/31/20)   + CTC is generating a spreadsheet that contains the July 15th Practice level reporting data, Performance Improvement Plans, and contact information     - Next steps: convene smaller group of PCMH Kids Leadership, RIDOH/KidsNet, CTC and Practice Facilitators to review spreadsheet data to identify that practices that need support, and determine outreach and communication plans accordingly * MCOs have access to KidsNet – there is a general group administrator; and some Care Managers have access for HEDIS purposes | | | | | | 1  2 |
| 3 | Jessica Rubinstein,  Mary Ricci Tufts  Christopher Ottiano NHPRI  Stacey Aguiar United  15 minutes | Input from MCO’s re: work being done to support patients/families that may need Immunizations and Lead Screening, resources to provide incentives (gift cards, etc.), transportation and/or interpreter services   * Tufts – next week, will send Immunization Reminder text message blasts to all RI Medicaid membership for three cohorts – with a link included to Member Services   + 1) Members under 2 years of age; 2) Members 4-6 years old; 3) Adolescents 11-13     - Texts are in Spanish and English   + Pre-existing rewards program for members under age 2, and 11-13 year olds     - Younger kids’ parents/guardians receive a supermarket gift card; Adolescents receive gift cards from Target   + Re: Transportation, there are referrals to MTM (RI’s Non-Emergency Medical Transportation) or appropriate transport solutions deemed by Care Manager or Community Health Worker pending the patient’s location and access to transportation     - In the past patient’s needed to provide a reason why they did not want to take public transportation – do they need a reason other than “Covid” and not wanting to bring their babies on public transportation? Can this rule be liberalized to allow families to get transportation?   + Child Care – no initiatives currently being developed – was unaware of this barrier     - Practices encourage families to only bring the child that has the appointment to the office   + Gift Card Opportunity for patients that are kindergarten age – Jessica will review with Program Design Team * NHPRI   + Quality Team led by Jay Buechner, are creating gap reports on     - 1 year olds, 2 year olds – these reports are done, but are still being revised to prioritize help to Practices with identifying immunizations that are required for school, quality and member safety       * To be sent to 100 Providers     - 4-6 year olds, and 16 year olds are in progress     - Internally, NHP’s Care Managers will be working the lists to ensure data accuracy – Chris will find out if the Care Managers contact the Practices first to inform them of identified patients with gaps in care vs reaching out directly to the patient – to avoid conflicting outreach * General Planning Committee Reminder: everyone on this call touches a certain aspect Immunization catch up and all should be in constant communication about initiatives being developed, so as not to bombard families with multiple messages * All MCOs – send CTC/PCMH Kids copies of the letters they send out to the Membership to be aware of what families are receiving   + To get vaccines from RIDOH, there is a vaccine Champion assigned – they can be the coordinators of this communication; or for PCMH Kids, use the Physician Champion   + Uniformed, one-page communication would be helpful     - List all Health Plans and related incentives * UnitedHealthcare – does have incentives for Adolescent Well Visits and Lead Screening   + Due do COVID-19, looking to expand Rewards Program and add child immunizations for next year, as the deadline was missed to add immunizations for this year.   + In June, each year, a postcard is sent to noncompliant members to inform them they are eligible to receive a gift card.   + KidsNet sends quarterly data for Immunization, Lead Screening, and Developmental Screenings that is fed into their HEDIS engine     - Captures when a Provider bills a claim, along with supplemental KidsNet data to get robust reports called PCOR – Patient Care Opportunity Reports – that are sent to the provider practices; can be filtered by Member, Provider, and etc.     - UnitedHealthcare meets monthly with ACOs; and a few times a year with high volume provider sites to review PCORs.   + Transportation – use MTM for transportation services for members   + Stacey will ask for approval to share information about UnitedHealthcare initiatives and incentives. | | | | | | 3  4  5  6  7  8  9  10 |
| 4 | Susanne Campbell CTC/PCMH KIDS  Nancy Silva RIPIN  Marie Palumbo-Hayes FSRI  Sara Remington: RI DOH Home Visiting Program  15 minutes | Feedback from RIPIN   * Opportunities for incentives to offset   + babysitting fees, if they can only bring one child to the office   + Transportation * General fears due to exposure and children’s underlying health conditions during the pandemic * Suggestions   + Drive-thru immunization appointments; or just separate from sick child visits in the office   Feedback from Home Visiting Program   * Vulnerable population; families are high risk – their rate of needing immunizations is higher than the statewide average * Special Efforts by MCOs   + United has a Nurse Care Manager working closely with RIDOH Family Visiting Program – and referrals are sent for all high risk members – Stacey will follow up with colleague Sarah, who works with Child Health, for details of specific special supports provided to this population   Feedback from PCHC: Practices in PCMH Cohort 3 are doing to outreach to parents to find out from them what their experiences have been with COVID 19, barriers and solutions. Other practices may also want to use the draft patient questionnaire survey to get parent input as they work to improve performance. Reviewed parent information from PCHC | | | | | | 11 |
| 5 | Systems of Care  Coastal  RIPCPC  Prospect  Lifespan  RI HCA  CTC Practice Facilitators  Group  15 minutes | Input on working with practices   * Coastal – KidsNet data is utilized – there is a lot of outreach and internal reporting done   + Currently using Google Voice for text – much better responses to text vs. phone calls attempts   + Agrees that having Insurers contact Coastal is best, so there can be a coordinated communication to patients * RIPCPC – is encouraging all of their Practices to increase their patient enrollment in the Practice’s portal to electronically communicate with the patients, and send Covid and Office updates   + Ensuring Practices have completed their Covid reopening plans, required by the state to integrate the care teams back into the Practice * CTC/PCMH Kids Practice Facilitators   + PCMH Kids Cohort 3 Practices are confident in their ability to run accurate reports and determine which patients are missing immunizations;   + Practices found the Pediatric Resource Guide to be helpful; * Discussion:   + The same tools we help practices use to improve Immunization rates, can be utilized for improve Lead Screening rates. There will be slightly different workflows for each Practice to improve Lead rates – if kids come in for under two vaccine rates, the lead rates are going to follow   + Kindergarten School Entry Mandate is 2 Lead Screenings – very important for Practices to be running their reports to check this status | | | | | |  |

| Date Added | Action Item # | Assigned to | Action Item | Due  Date | Date  Closed |
| --- | --- | --- | --- | --- | --- |
| 7/28/20 | 1 | CTC/PCMH Kids | Pairing Improvement Plans with Practice’s Actual Immunization Numbers |  |  |
| 7/28/20 | 2 | CTC/PCMH Kids | Convene smaller group of PCMH Kids Leadership, RIDOH/KidsNet, CTC and Practice Facilitators to review spreadsheet data to identify that practices that need support |  |  |
| 7/28/20 | 3 | Mary Ricci | Will find out if relaxing of transportation requirements is at the State level; and what the MTM requirements are to allow the reason of “Covid-19 in the Community” to be sufficient enough reason for not bringing kids on a public bus |  |  |
| 7/28/20 | 4 | Jessica R. | Contact Program Design Team re: ordering rewards for kindergarten age children |  |  |
| 7/28/20 | 5 | Chris Ottiano | Contact Brenda Whittle and Care Management Team for their feedback re: contacting Practices to inform about Gaps in Care vs direct outreach to patients |  |  |
| 7/28/20 | 6 | All | Stay in contact with any initiatives and messaging being developed |  |  |
| 7/28/20 | 7 | CTC/PCMH Kids | Add links to All MCO Incentive documents to the Resource Guide document |  |  |
| 7/28/20 | 8 | All MCOs | Provide links/copies of documentation and incentive initiatives to CTC/PCMH |  |  |
| 7/28/20 | 9 | All MCOs | Follow up re: Lyft transport availability to members |  |  |
| 7/28/20 | 11 | all MCOs | Provide specific details for the supports provided to Family Visiting Program high risk members |  |  |