

Care Transformation Collaborative of Rhode Island

2018 Practice Transformation Report

CTC Oversight of Practice Performance

CTC primary care practices that participate in the multi-payer initiative enter into a common contract that includes adult and pediatric service delivery requirements developed and approved by the CTC Contract Committee (see [2017 Service Delivery Requirements](#)). The Service Delivery Requirements provide practices with stepped direction that will enable them to successfully transform into patient-centered medical homes, achieve NCQA recognition and meet OHIC cost management strategy expectations.

CTC provides adult and pediatric practices with a number of resources to successfully build internal capacity including:

- a) Onsite practice facilitation services for adult, pediatric and integrated behavioral health;
- b) Monthly “best practice sharing” committee meetings including: Nurse Care Manager, Practice Reporting, Practice Transformation and Breakfast of Champions; the “best practice sharing” committee meetings focus on the upcoming service delivery requirements (See [Service Delivery Requirement/Education Calendar](#));
- c) Large learning collaborative which brings together the larger primary care community and features national, regional and local experts;
- d) Standardized statewide online core curriculum training program for nurse care managers and care coordinators funded by UnitedHealthcare; CTC has trained 7 NCM/CC to be faculty who are assigned to facilitate weekly NCM/CC coaching calls to assist them with applying care management strategies using Rhode Island resources;
- e) Focused Learning Network opportunities with subject matter experts; practices develop skills and improve performance in important clinical areas such as: Screening for Postpartum Depression; Treatment of Children and Adolescents with ADHD; Screening Adolescents for Substance Use Disorders; Treatment of Patients with Major Depressive Disorders; and Nurse Care Manager Training to Assist Providers and Patients with Medication Assisted Treatment.

Practice Facilitators: CTC contracts for practice facilitation services with Healthcentric Advisors, Brown University and Blue Cross and Blue Shield of Rhode Island and staff are required to be NCQA PCMH content experts (or be supervised by PCMH content experts). CTC contracts with Nelly Burdette, Psy.D for practice facilitation services for the Integrated Behavioral Health program.

Practice facilitators (both primary care and integrated behavioral health) are required to submit monthly practice facilitation reports that address practice performance on CTC deliverables (quality, customer experience and utilization, reporting on high risk patients, NCQA recognition), action plans when practices are underperforming and outcomes from practice facilitation site visits (see : [Sample Practice Facilitation Monthly Report](#)).

CTC project management staff review the monthly reports and provide practice facilitators with feedback and direction based on submitted reports; training is provided at monthly practice facilitation meetings. CTC makes joint practice site visits with the practice facilitator on a regular basis.

CTC project management staff monitors practice performance via a monthly performance dashboard (see [Practice Performance Dashboard](#)).

Quality, CAHPS and Utilization Measures

All practices have been reporting on the OHIC-aligned quality measures which have been developed and approved by the CTC Data and Evaluation Committee OHIC-Alignment Work Group. All practices submitted their patient panel reports needed to obtain customer experience surveys. CTC contracts with a certified vender who is fielding the CAHP PCMH survey (version 3) with performance results expected in March 2018.

Utilization performance information is derived from All-Payer Claims Database. CTC contracts with Onpoint Health Data for information aggregation, analysis and display. Practices have access through an online portal to their risk-adjusted performance data and includes information on total cost of care, emergency department and inpatient utilization, pharmacy costs, use of specialists and quality performance on select measures.

Service Deliverables

All CTC practices current to 2017 have achieved NCQA Level 3 recognition and met service delivery requirements. All CTC practices submitted OHIC quality measure information and cost management strategy attestations. Practices that entered CTC in 2017 have submitted service delivery requirements per timeline and working on achieving NCQA recognition, OHIC cost management strategies, and improving quality metrics.

Community Health Teams: With funding from the State Innovation Model (SIM), BHDDH and UnitedHealthcare, CTC expanded its CHT program to include 6 teams that now use a centralized management and data management structure. All teams have integrated patient navigators,

behavioral health clinicians and SBIRT screeners who function as extensions of primary care practices. CTC hosts quarterly meetings with the health plans to provide program updates and opportunities for health plan input.

Focus on Obtaining and Using Patient Social Determinant of Health Information: CTC is working with Rhode Island Quality Institute to help inform the development of a proposed platform that is intended to advance the SIM Operational and Population Health Plan goals to 1) Address the social and environmental determinants that affect the overall health of individuals; and 2) Empower consumers to assume greater control over the own healthcare.

The platform will enable two new consumer capabilities: 1) the ability to upload advance directives into a registry for access by the RI provider community; 2) the ability for consumers to provide health status, social determinants of health information for inclusion in options such as CurrentCare/HIE/practice electronic health record. CTC is conducting practice/CHT interviews to obtain input on obtaining and using patient social needs information. CTC is assisting practices with hosting patient focus groups to obtain patient feedback on primary care practices obtaining and using their social needs information.

New Directions: CTC 2018 Strategic Plan

CTC is seeking input from key stakeholders to develop a responsive five-year strategic plan. Health plans will be invited to provide input and direction on how CTC can provide added value to practice transformation in Rhode Island.

- How can CTC through its transformation program provide value based on health plan assessment of quality and health care costs?
- How can CTC, through its multi-payer platform, help health plans to better address workforce development needs?
- What are ways that CTC can partner with health plans and systems of care to augment not duplicate primary care practice transformation?