# ALABAMA CARE NETWORK MID-STATE MEDICAL MANAGEMENT MEETING

SEPTEMBER 13<sup>TH</sup> AND 20<sup>TH</sup>

### WELCOME AND INTRODUCTIONS

### **Presenters**

- Kristin Mizerany, MD Medical Director
  - Pediatrician, Mayfair Medical Group
- Whitney Krutulis— Executive Director, RN, MSN

### **AGENDA**

- Introductions
- Medicaid Updates
- Medical Management Meeting Requirements
- Success Story
- Common Referral Reasons
- Provider Reports
- Sickle Cell Initiative
- Quality Improvement Project Updates
- Provider References
- Human Trafficking



### MEDICAID UPDATES

- Effective June 1<sup>st</sup>, Medicaid resumed the referral requirements for EPSDT visits. Once the child has an EPSDT screening, all subsequent visits to other providers for further diagnosis or treatment must have a written referral (Form 362) from the EPSDT screening provider.
- Effective August 1, 2021, Alabama Medicaid no longer requires PCP referrals to specialists. However, some provider offices may require a referral prior to rendering services to Alabama Medicaid recipients. In this case, the referring provider would need to comply with the rendering provider's request.
- FY 2024 PCMH Attestations due by 10/1/23
- Effective October 1<sup>st</sup>, 2024, Copayments will be reinstated for applicable services and recipients.

### MEDICAID UPDATES

### **Eligibility Redetermination**

Recipients can visit the following link for information on updating contact information to ensure they receive notice from the Agency regarding redeterminations:

#### For Providers:

https://medicaid.alabama.gov/content/7.0\_Providers/7.11\_COVID-19\_Vaccine\_Providers.aspx

### For Recipients:

https://medicaid.alabama.gov/content/11.0\_Recipient/11.8\_COVID-19\_Vaccine\_Info\_for\_Recipients.aspx





#### Step 1: Update Your Address

 Renew your Medicaid every year. Stay up to date about changes that can affect your benefits. Update your mailing address and other personal information with the Alabama Medicaid Agency as soon as possible to get notified.

#### Step 2: Check Your Mail



#### Starting April 1, 2023:

- Medicaid will mail you a letter to let you know it's your time to renew.
- You must fill out and return your form to Medicaid.
- Medicaid coverage will stop if you are not eligible or don't respond.
- Medicaid will mail you a letter letting you know if your benefits change.



#### Step 3: Complete Renewal Form

 If you were not automatically renewed, you will receive a renewal form in the mail. Fill it out and return it to Alabama Medicaid right away so you are not at risk for losing coverage if eligible.



For more information visit: www.medicaid.alabama.gov and click the gray mailbox, or Call the Recipient Call Center: 1.800-362-1504

### MEDICAL MANAGEMENT MEETING REQUIREMENTS

- Reminder
  - A PCP or physician extender (NP or PA) from each contracted clinic must attend 3 of 4 yearly Medical Management Meetings
  - An average of 2-3 meetings are held per quarter

# **SUCCESS STORY**

Mid-State Success Story

### COMMON REFERRAL REASONS

- New Diagnosis Education
- Overweight/Obesity
- Post Hospitalization
- Transportation
- Non-Compliance
- Medication Education
- Mental Health
- Community Resource Assistance

### PROVIDER REPORTS

As ACHN enrolled providers, these reports are available to you for view/download. The scorecards are released on a quarterly basis after the bonus payments are issued (typically towards the end of the month).

- I. Provider Profiler Quality Measure Scorecard: MGD-S362-Q Report (this is a summary level report that illustrates your current scoring)
- 2. Provider Profiler Supplemental Member Summary File Quality Measures: MGD-M362-Q Report (this is a report that reveals how each individual affects your score)
- 3. Provider Profiler Cost Effectiveness Scorecard: MGD-S364-Q Report (this is a summary level report that illustrates your current scoring)
- 4. Provider Profiler Supplemental Member Summary File Cost Effectiveness: MGD-M364-Q Report

### PROVIDER REPORTS- HOW TO ACCESS

- I. Go to Web Portal Link: <a href="https://www.medicaid.alabamaservices.org/ALPortal/">https://www.medicaid.alabamaservices.org/ALPortal/</a>
- 2. Log-in to the portal using your log-in information for your group (If you need assistance with this step, contact the Electronic Media Claims (EMC) at Gainwell Technologies at 1-800-456-1242).
- 3. After logging in, Click on Trade Files Tab and Download Options (example below)
- 4. Select the report that you wish to view/download



### almo\LPOWELL(VM016)

Wednesday, January 15, 2020

You have approximately 18 minutes until your session will expire.

Home Noc Look Up Information Account Claims Eligibility (Frade Files Prior Authorization Providers Provider Look Up

### PROVIDER SCORECARDS- QUALITY

Report : MGD-8362-Q Process : MGDS3620 Location: MGDS3620

ALABAMA MEDICAID AGENCY MEDICAID MANAGEMENT INFORMATION SYSTEM PROVIDER PROFILER QUALITY MEASURE SCORECARD REPORT PERIOD: 01/01/2020 - 03/31/2020

Run Date: Run Time: Page:

PROVIDER (NPI:MCD:NAME): 009999999

1 999999900 | ABC PROVIDERS PC

The ACTUAL bonus payments for this guarter are based solely on provider attribution. The CALCULATED Provider Quality bonus payments begin in July 2021. The ESTIMATED bonus payment shown in the scorecard below is projected based on Quality Measures for this guarter and are shared for illustrative purposes only. This dashboard is designed to provide guidance for attainment of future bonus calculations. Quality Measure scores are based on attributed recipients for this quarter and calculated using calendar year 2018 as the measurement period.

Total Number of Attributed ACHN Members: 497.211 Attributed Members in Groups Meeting Quality Score Minimum: 287,046 Members Attributed to PCP Group in Quarter: 769 Quarterly Bonus Amount: \$5,249,59

#### PCP OUALITY BONUS PAYMENT SCORECARD

	Measure	Numerator	Denominator	Quality	Baseline	Benchmark	Improvement	Meets
				Score			Needed	Target
PEDIATRIC MEASURES	W34-CH	51	65	78.5%	61.1%	66.7%	-11.8%	Yes
	AWC-CH	21	31	67.78	43.0%	45.0%	-22.7%	Yes
	CIS-CH	12	25	48.0%	70.5%	74.0%	26.0%	No
	IMA-CH	2	6	33.3%	20.4%	24.6%	-8.7%	Yes
ADULT MEASURES	AMM-AD	0	0	0.0%	29.6%	37.1%	0.0%	N/A
	HA1C-AD	0	0	0.0%	73.4%	83.3%	0.0%	N/A
	FUA_AD	0	0	0.0%	11.4%	12.4%	0.0%	N/A
	CHL-AD	0	0	0.0%	9.7%	54.3%	0.0%	N/A

### PROVIDER SCORECARDS- COST EFFECTIVENESS

Report : MCD-S364-0 ALABAMA MEDICAID AGENCY Run Date: 01/21/2020 Run Time: Process : MGDS3640 MEDICALD MANAGEMENT INFORMATION SYSTEM 08:33:03 Location: MGDS3640 PROVIDER PROFILER COST EFFECTIVENESS SCORECARD Pager REPORT PERIOD: 01/01/2020 - 03/31/2020

PROVIDER (NPI:MCD:NAME): 0099999999 : ABC PROVIDERS PC . 999999900

The ACTUAL bonus payments for this guarter are based solely on provider attribution. The CALCULATED Provider Cost Effectiveness bonus payments begin in January 2021. The ESTIMATED bonus payment shown in the scorecard below is projected based on Cost Effectiveness Measures for this quarter and are shared for illustrative purposes only. This dashboard is designed to provide quidance for attainment of future bonus calculations. Cost Effectiveness scores are based on attributed recipients for this quart and calculated using claims data from 10/01/2018 to 09/30/2019 as the measurement period.

TOTAL NUMBER OF ATTRIBUTED ACHN MEMBERS: 497.211ATTRIBUTED MEMBERS IN GROUPS AT OR BELON MEDIAN THRESHHOLD: 180.048 MEMBERS ATTRIBUTED TO PCP GROUP IN QUARTER: 769 COST EFFECTIVENESS BONUS: \$7,207,45

PCP Cost Effectiveness Bonus Payment Scorecard - Cost Effectiveness Metrics

Service Type	PMPM	State-wide PMPM		
Inpatient	\$24	\$70	Practice Risk Score	1.56
Outpatient	\$2	\$15	Expected PMPM	\$448
Mental Health	\$13	\$12	Cost Effectiveness Score	0.37
Pharmacy	\$31	\$81	Median Threshold	0.58
Physician	\$44	\$51	Below Median	Yes
Other	\$50	\$55		
TOTAL	\$166	\$287		

#### COST EFFECTIVENESS BONUS PAYMENT CALCULATION METHODOLOGY STEPS

```
Quarterly Cost Effectiveness Bonus Payment
$1,687,500
           Median Threshold (a)
      0.58
           Members Attributed (b)
     0.15% Distribution of Attributed Members (c)
     0.43% Distribution of Attributed Members for Groups below Median Threshold (d)
     0.37 Cost Effectiveness Score (e )
     0.43% Bonus Distribution Rate (f)
  $7,207,45 Cost Effectiveness Bonus Distribution (g)
```

### SICKLE CELL INITIATIVE

Effective January 1st, 2023, all ACHNs will provide focused, intense, Care Coordination for all recipients with Sickle Cell Disease.

- Over 1,900 recipients in Alabama were diagnosed with Sickle Cell Disease with over 450 of those in Jefferson and Shelby Counties
- Only 20% had received Care Coordination services
- The ACHNs must attempt management with 100% of recipients with Sickle Cell Disease in their regions
- All recipients must be stratified as "High" which allows for more intensive Care Coordination Services
- All recipients must receive a Multi-Disciplinary Care Team Conference which includes both the provider and recipient
- The following items must be addressed with all recipients that accept services: disease education, resource identification, symptom management, and crisis prevention.
- All recipients must be managed for a minimum of 6 months.

### **Quality Improvement Projects**

### **Childhood Obesity**

- Providing proactive outreach to patients past due for EPSDT screenings with BMI of 85% or greater
- Healthy Lifestyle Challenge

#### Healthy Lifestyle Kit including:

- Educational Materials
- Activity tracker (similar to fitbit)
- Daily Healthy Lifestyle Log (includes steps, nutrition, water intake)
- Portion Control Plate (3-11) /Portion Control Containers (12-18)
- Exercise Bands (12-18)
- Coloring Book, Crayons, and Stickers (3-11)
- Video Series available on ACHN website to further support healthy living

### Infant Mortality

#### Hypertension education

- Video series available on ACHN website to support healthy pregnancy
- How to Count the Kicks
- Count the Kicks App
- Benefits of Breastfeeding
- · Safe Sleep for Babies
- · Family Planning
- Els who complete video series will receive an incentive
- Full time Family Planning Coordinator and 4 multi-program care coordinators

#### Substance Use Disorder

- Targeting patients with a SUD diagnosis with a new MAT prescription in the last 60 days and providing proactive outreach by Care Coordination staff with experience in SUD
- Partnered with the Crisis Center to provide dedicated Peer Support Specialist
- Partnered with UAB to develop CME modules for providers which focus on stigma in working with SUD. CME is now live on ACHN website.
- Implementation of the Positive Action school-based program (includes three Jefferson County Middle Schools and training began in February

# INFANT MORTALITY- JANUARY- JUNE STATISTICS

- Hypertension self-monitoring program -89 participants
- Diabetes self-monitoring program begins next quarter,

#### 1,369 Deliveries

- 159 patients delivered a low birth weight baby
- 56 completed a social determinants of health screening at delivery
- Only 3 patients identified with needs from screening

### 1,260 maternity assessments completed

- 99% of those completed social determinants of health screening at assessment
- 134 were identified with needs from screening
- 52 agreed to additional assistance from our general care coordination team
- 69% of mothers allowed screening for family planning services, 47% mothers enrolled in family planning services

### 294 pregnant patients watched our video series and received an incentive

## HEALTHY LIFESTYLE CHALLENGE KITS

Age 3-11



Age 12-18



# CHILDHOOD OBESITY- JANUARY- JUNE STATISTICS

### Top 5 clinics

- 9,005 patients without a well visit and BMI>85%, 2,555 attended well visits during first 2 quarters of the year
- 355 participated in care coordination services
- 81 participated in the healthy lifestyle challenge
- 41 completed the challenge and received an incentive

### Other clinics

- 165 patients participated in care coordination
- 37 participated in healthy lifestyle challenge
- 17 completed the challenge and received an incentive

### CHILDHOOD OBESITY- KID ONE WICTRANSPORT

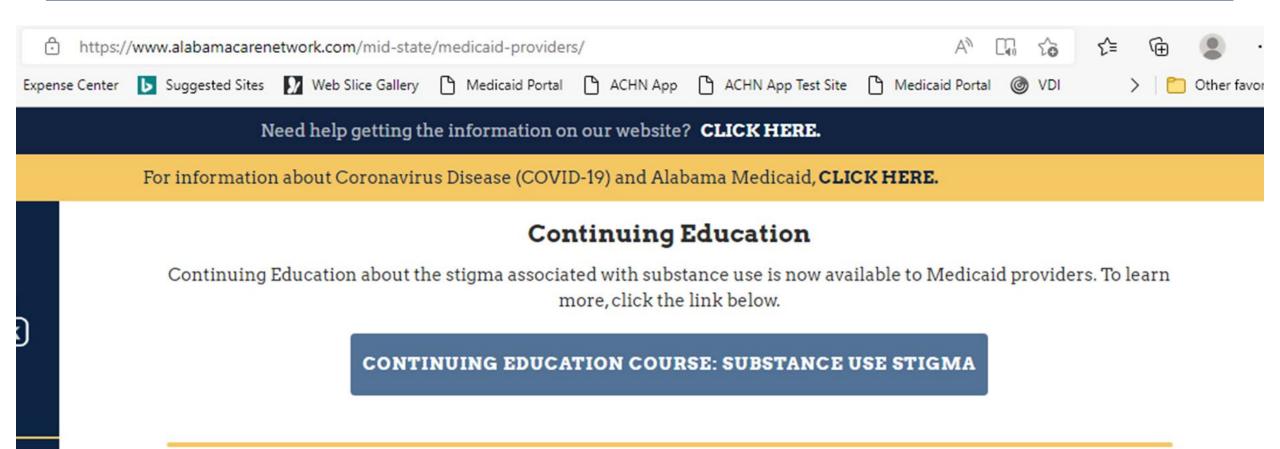
### WIC Transportation Benefit

- Transportation to WIC appointments is now available in Jefferson County through Kid One Transport.
- This is a benefit for any expectant mother or child (newborn 5 years old) that is eligible for and currently on Medicaid. Kid One Transport will pick them up and take them to and from WIC appointments.
- 84 recipients received transportation from Kid One for WIC services from January-June

# SUBSTANCE USE DISORDER- JANUARY-JUNE STATISTICS

- 314 patients with new medication-assisted treatment (MAT) prescription
  - Reached 66, 17 agreed to services
- Positive Action program will be implemented in fall with upcoming 6<sup>th</sup> graders for 611 students in 3 school systems
  - 283 took initial survey revealing that students in 5<sup>th</sup> and 6<sup>th</sup> grades have experimented with alcohol and drugs
    - 50 had experimented with marijuana or chose not to answer
    - 50 had experimented with prescription drugs and other drugs
    - > 50 had experimented with tobacco
    - ~ 100 had experimented w/alcohol or chose not to answer
- Continuing Medical Education (CME)
  - 42 people completed our SUD CME, including 19 MDs or treating physicians

### CME AVAILABLE- STIGMA ASSOCIATED WITH SUBSTANCE USE



### PROVIDER REFERENCES

Gainwell Technologies provider representatives are available to assist Medicaid providers with claims submission
and in the resolution of claims processing concerns. Representatives are also available to conduct workshops, onsite billing seminars and to answer questions about electronic billing.

To reach a Provider Representative, dial 1-855-523-9170 then the six digit extension below, or use their e-mail

address

Amber Smith	Ext. 121163 - Click here to e-mail
Emily Morrison	Ext. 121067 - Click here to e-mail
Lauryn Morgan	Ext. 121048 - Click here to e-mail
Emily Cook	Ext. 121047 - Click here to e-mail
Suzi Fortney	Ext. 121110 - Click here to e-mail
Jessica Strickland	Ext. 121019 - Click here to e-mail
Krysta Cook	Ext. 121058 - Click here to e-mail
Jacquelyn Thomas	Ext. 121077 - Click here to e-mail
Brittany Mann	Ext. 121025 - Click here to e-mail
Tori Nix, Supervisor	(334) 215-4247 - Click here to e-mail

### PROVIDER REFERENCES

- Kepro is honored to serve as Alabama Medicaid's Medical and Quality Review Services contractor!
- Since October 1, 2021, Kepro has been performing high quality reviews with low turnaround times for:
  - Prior Authorization Requests
- Please note: Kepro's updated toll-free numbers: (800) 426-7259 and (833) 928-4489 for both Providers and Recipients.

### HUMAN TRAFFICKING, MODERN DAY SLAVERY

- The International Labour Organization estimates  $\rightarrow$  20.9 million victims of human trafficking globally,
- The US Trafficking Victims Protection Act of 2000 define a human trafficking victim
  - a person induced to perform labor or a commercial sex act through force, fraud, or coercion.
  - any person younger than 18 years who performs a commercial sex act is considered a trafficking victim
- Nearly 88% of sex trafficking victims had contact with a health care professional at some point while being held against their will, according to a 2014 report in the Annals of Health Law.

https://physicians.dukehealth.org/articles/recognizing-human-trafficking-health-caresetting#:~:text=Appearing%20to%20be%20under%20the,forced%20sex%20and%20facial%20injuries.

# THE PROBLEM: HUMAN TRAFFICKING (EXPLOITATION)

- "The U.S. Department of State estimates hundreds of thousands of people may be trafficked annually worldwide, the majority being women and children.
  - One U.S. <u>study on sex trafficking</u> found that more than 85 percent of survivors had contact with a health care professional while being trafficked.
- Among survivors, more than 60 percent reported going to a hospital or emergency department at some point. Survivors also reported visiting family physicians, internists and obstetrician-gynecologists in traditional physician offices, urgent care clinics, neighborhood clinics and women's health clinics."

https://www.ama-assn.org/delivering-care/public-health/how-physicians-can-identify-assist-human-trafficking-victims

### **HUMAN TRAFFICKING**

"A 15-year-old male presents to the urgent care clinic for evaluation of a fall. He states he fell off his bike earlier today onto his right arm. He is unaccompanied on today's visit. When questioned about his parents and living situation, he states he lives with his mother but fights with her frequently, and is currently staying with a friend. His vitals are normal for his age. On examination you note tenderness to the distal radius. The extremity is neurovascularly intact and no other signs of injury are noted. Away from the room, the nurse notifies you they were able to obtain consent to treat from the patient's mother over the phone, and notes his mother seemed concerned that he had not been home for several days. X-rays of the right upper extremity reveal a nondisplaced buckle fracture of the distal radius. After a splint is placed, you talk to the patient about his discharge disposition. On further questioning, he reveals his friend is an older man who is known to his family, and that he would like to return to the man's home upon discharge. He also requests no paperwork be given to him documenting his urgent care visit today. When discussing outpatient medical follow-up for his injury, he states that it will be difficult for him to make the appointment and asks if it is absolutely necessary. After leaving the room, you feel uneasy about your patient's social situation, and suspect there is more to the story. At this time, it feels unsafe to discharge your patient to his friend, but the next steps are unclear."

Citation: Panda P. Human trafficking in the urgent care setting: recognizing and referring vulnerable patients. *J Urgent Care Med*. 2023;17(6):13-22.

### HUMAN TRAFFICKING INDICATORS/RED FLAGS

- Living with employer
- Poor living conditions
- Multiple people in cramped space
- Inability to speak to individual alone
- Answers appear to be scripted and rehearsed
- Employer is holding identity documents
- Signs of physical abuse
- Submissive or fearful
- Unpaid or paid very little
- Under 18 and in prostitution

- Experiences repeated STDs and/or pregnancies
- Has bruises, scars, burns and cuts—especially ones that are hidden
- Appears fearful, anxious or depressed
- Pays cash and has no health insurance
- Looks malnourished
- Brings a third party who speaks for them
- Shows signs of substance addiction or withdrawal
- Lies about his or her age, or says they are visiting or passing through
- Is tattooed with what may be the mark of a pimp or trafficker

### MNEMONIC SOAR

- Stop: Become familiar with the nature of human trafficking
- Observe: Understand verbal and nonverbal indicators
- Ask: Engage with a possible victim using a trauma-informed approach
- Respond to Human Trafficking: Identify patient needs and secure available resources to provide support

### SCREENING QUESTIONS



https://www.jucm.com/human-trafficking-in-the-urgent-caresetting-recognizing-and-referring-vulnerable-patients/

#### Table 3. Sample Screening Questions and Validated Screening Tools<sup>27,30,40</sup>

#### Safety Questions

- Do you feel safe?
- Have you been physically harmed at home or work?
- Are you currently experiencing physical or sexual abuse at home or at work?
- Have you had any thoughts of hurting yourself?

#### **Trafficking-Specific Questions**

- Have you been forced to do anything you do not want to do?
- Has anyone asked you to do a job without getting paid, or being minimally paid?
- Have you been threatened if you try to leave, or has anyone threatened your family?
- Has anyone ever asked you to have sex or sell anything in exchange for something you wanted or needed (money, food, shelter, or other items)?
- Has anyone taken sexual/revealing pictures or videos of you and sold or shared them?
- Where do you eat and sleep? When was the last time you ate or slept?
- Have you been denied food, water, sleep, or medical care?
- Has your ID or documentation been taken from you?
- Tell me about your tattoos/scars/jewelry

### VALIDATED SCREENING TOOLS

Table 4. Validated Screening Tools					
Screening Tool Name	Target Population	Screening Tool Length	Source		
Short Screening Tool for Child Sex Trafficking	Child sex trafficking	6 questions	Kaltiso et al <sup>41</sup>		
Quick Youth Indicators for Trafficking (QYIT)	Trafficking amongst homeless young adults	4 questions	Chisolm-Straker et al42		
Rapid Appraisal for Trafficking (RAFT)	Adult sex and labor trafficking	4 questions	Chisolm-Straker et al <sup>43</sup>		

https://www.jucm.com/human-trafficking-in-the-urgent-caresetting-recognizing-and-referring-vulnerable-patients/

### **QUESTIONS TO ASK**

- Are you comfortable? Are you hungry?
- Where are you living? Who are you living with?
- Do you feel safe?
- Has anyone ever hit you or forced you to do something you didn't want to do?
- Do you live, work and sleep in the same place?
- Have you ever traded anything for sex?

https://www.ama-assn.org/delivering-care/public-health/how-physicians-can-identify-assist-human-trafficking-victims

### PHYSICAL EXAM FINDINGS

### Potential Indicators of Human Trafficking on Physical Exam

- Poor hygiene or, in contrast, expensive possessions (designer items, large amounts of cash and hotel keys) despite history of homelessness or running away
- Tattoos or branding (may represent money, a person's name, or the sign of a gang or organization)
- Signs of physical abuse, including cigarette burns, old bruises, scars
- Fearful or combative demeanor
- Discomfort with undressing or cooperating with physical exam (which may be secondary to prior trauma or presence of trafficker at the health encounter)

### SAFE REFERRALS

- I. Health System Protocol
- 2. Community Agencies
- 3. National Human Trafficking Hotline (NHTH)
- 4. State-Mandated Reporting Laws

https://www.jucm.com/human-trafficking-in-the-urgent-caresetting-recognizing-and-referring-vulnerable-patients/

### CASE REPORT FOLLOW

- "The patient's buckle fracture seems consistent with the mechanism of injury you obtained from the history. A fall off a bike may truly be the reason he sustained the injury, but other red flags during the encounter (unstable home situation, running away, older adult "friend," wary about paperwork, and not wanting medical follow-up) prompted further investigation into whether he was being exploited.
- You have established rapport with the patient, and state that you would like to ask additional questions regarding his social situation. You disclose that you can keep the conversation confidential unless someone is harming him, exploiting him, or if he has thoughts of harming himself. With his permission, you begin to ask him screening questions.
- At first he states he feels safe at home with his mother and his friend. When asked if anyone has made him do something he
  does not want to do, or if he has exchanged sex for anything of value, he is initially quiet.
- On further questioning, he tells you his friend sometimes asks him for sexual favors in exchange for food and a place to sleep. He starts to share more but then states he is not ready to talk about it. He says he does want help and agrees to talk to the human trafficking hotline. You notify your nurse that you are boarding the patient for 1-2 hours while you figure out disposition.
- After calling the hotline with the patient present, the agent facilitates connection to the local human trafficking task force and child protective services agency for mandated reporting. Safe transport is arranged for the patient to the local pediatric emergency room, where the task force and protective services will perform a comprehensive assessment and determine safe patient placement. Prior to transport, you provide a confidential verbal handoff to the receiving physician at the pediatric emergency department."

Citation: Panda P. Human trafficking in the urgent care setting: recognizing and referring vulnerable patients. *J Urgent Care Med*. 2023;17(6):13-22.

### THANK YOU FOR PARTICIPATING

Questions?