Pii Newsletter
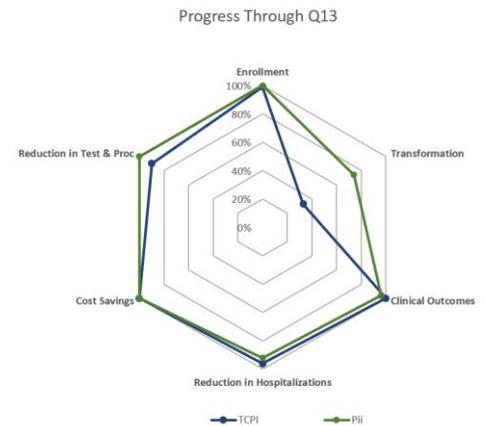
Progress Towards Our Commitments

As of the end of the 13th quarter of CMS' Transforming Clinical Practice Initiative (TCPI), we are very excited about our progress towards our commitments!

- **AIM 1 (Enrollment)** - we committed to enrolling 2,500 clinicians in Pii and we have exceeded this by enrolling over 2,600 clinicians
- **AIM 2 (Improve Health Outcomes)** - we committed to improve the health outcomes of over 19K and we are at 96% of our goal
- **AIM 3 (Reduce Unnecessary Hospital Use)** - we committed to reducing unnecessary hospital and emergency department use by nearly 66K and we are at 92% of our goal
- **AIM 4 (Reduce Costs)** - we have far exceeded our commitment and have currently saved well over $141M (which is 174% of our goal)!!!!
- **AIM 5 (Reduce Unnecessary Tests & Procedures)** - we have reduced unnecessary tests and procedures by nearly 4K (144% of our commitment)!!!
- **AIM 6 (Transformation)** - We are well underway in working with our clinicians to assist them with their transformation and as of the end of Q13 we have assisted nearly 1,500 clinicians with either transitioning to an alternative payment model or enhancing their performance with existing value-based relationships.

The radar diagram above represents Pii's progress towards our commitments (green) in comparison to the current progress for all Transforming Clinical Practice Initiative (TPCI) PTNs (blue).   Thanks to all the hard work by all that are part of Pii, we are well on our way to meeting (and exceeding!) our commitments!

CMS Quality Conference

Members of the Pii team attended the Centers for Medicare & Medicaid Services (CMS) Quality Conference which was held January 29 – 31, 2019 in Baltimore, MD. Joining the team was Amy Pugsley, Chief Administrative Officer, from RI International and Megan Lipman, Director of Quality Management, of Jewish Family & Children's Service. Amy and Megan did a GREAT job representing Pii and sharing their organization's success stories!

Thank you Amy and Megan!!!

The well attended conference focused on putting the patient first, promoting health care choice, and driving value-based care.

More information about the conference can be found HERE including downloads from the plenary sessions and a write-up on the conference under the "About" section.

"The secret to improving healthcare…… Listen to the patient"
-- Dr. Paul Rosen, CMS Medical Officer

Fighting the Opioid Epidemic

Access to real-time statewide opioid epidemic information is available. The Arizona Department of Health Services has a real-time opioid epidemic interactive dashboard on their website based on information that has been accumulated since June of 2017. The site also is a wealth of related information.

Free Opioid Related Trainings for Medical Professionals

Opioid Prescribing CME Courses: Responding to the Public Health Emergency
A joint venture between U of A College of Public Health and College of Medicine, AZDHS, and CMS has led to the development of a Video Lecture Hall that includes 4 free opioid-specific courses offering a total of 6 CMEs. One of these courses offers 3 CMEs and three courses offer 1 CME each. With 6 CMEs to offer, these resources satisfy two years-worth of the Arizona licensing requirements of completing 3 credits/hours of opioid, substance use, or addiction-related continuing medical education each licensing cycle. Upon registering, the medical professional will have a deposit of $150 in certificate funds placed into their VLH account to pay for the CMEs obtained.

These free courses can be accessed at the following link: http://www.vlh.com/azprescribing/

Interactive Training Series – Applying CDC's Guideline for Prescribing Opioids
The *CDC Guideline for Prescribing Opioids for Chronic Pain* provides recommendations for safer and more effective prescribing of opioids for chronic pain in patients 18 and older in outpatient settings outside of active cancer treatment, palliative care, and end-of-life care.

This interactive online training series aims to help healthcare providers apply CDC's recommendations in clinical settings through patient scenarios, videos, knowledge checks, tips, and resources. Providers can gain a better understanding of the recommendations, the risks and benefits of prescription opioids, nonopioid treatment options, patient communication, and risk mitigation. Each stand-alone module is self-paced and **offers free continuing education credit**.

Module 1 - Addressing the Opioid Epidemic: Recommendations from CDC
Module 2 - Treating Chronic Pain Without Opioids
Module 3 - Commuicating with Patients
Module 4 - Reducing the Risks of Opioids
Module 5 - Assessing and Addressing Opioid Use Disorder
Module 6 - Dosing and Titration of Opioids: How Much, How Long, and How and When to Stop
Module 7 - Determining Whether to Initiate Opioids for Chronic Pain
Module 8 - Implementing CDC's Opioid Prescribing Guideline into Clinical Practice
Module 9 - Opioid Use and Pregnancy
Module 10 - Motivational Interviewing
Module 11 - Collaborative Patient-Provider Relationship in Opioid Clinical Decision Making

Physicians, nurses, and other health professionals can receive free continuing education for each training by registering on CDC Training and Continuing Education (TCE) Online, searching for the corresponding course number, and completing the evaluation.

Important Update Regarding Electronic Prescribing of Controlled Substances (EPCS)

Governor Ducey signed HB 2075 today that **extends the requirement of electronic prescribing of opioids to January 1, 2020 for all Arizona counties.** The bill also eliminates language from the Arizona Opioid Epidemic Act allowing the Arizona Board of Pharmacy to grant a waiver for the electronic prescribing requirement.

In a letter announcing the signing, Governor Ducey reaffirmed Arizona's commitment to combating the opioid epidemic and stressed a firm deadline for compliance with the electronic prescribing of opioids. "This bill removes a cumbersome waiver process which many providers opted for and replaces it with a clean and firm deadline for all providers – January 1, 2020."

The Arizona Board of Pharmacy received and granted more than 40,000 waivers to the electronic prescribing requirement. The removal of the waiver sets a level playing field for all Arizona providers, according to Connie Ihde, Health Current's Director of Programs who has led Health Current's *Click for Control* campaign aimed at assisting Arizona providers in becoming ready for electronic prescribing of controlled substances (EPCS). "All Arizona providers face a firm deadline of January 1, 2020 for becoming EPCS-ready. This means that all providers will need to work with their electronic health records (EHR) vendors to put in place a plan that will allow their practice to be EPCS-ready by next January," Ihde said.

More information on HB 2075 is available here. Information on Health Current's *Click for Control* campaign is available here.

Naloxone Update

Between June 15, 2017 and December 6, 2018, there were 16,870 suspected opioid overdoses and 2,547 suspected opioid deaths in Arizona and more than two Arizonans die every day due to opioid-related overdoses.
Naloxone, also known by the brand name, Narcan, is an important tool in preventing overdose fatality by reversing the effects of an opioid overdose. Naloxone is available with or without a prescription in Arizona.
Arizona law allows prescribers to prescribe and distribute naloxone to an individual potentially at risk of an overdose, their friends, and their family. Both the prescribers and the person who administers the medication are protected from certain liabilities.

In order to support increased use of naloxone to save lives in Arizona, the Arizona Department of Health Services (AZDHS) Director, Dr. Cara Christ signed standing orders that allow pharmacists to dispense naloxone to any individual in the state and allow ancillary law enforcement, correctional officers, and EMS to administer naloxone for suspected opioid overdoses. A naloxone pamphlet was developed in both English and Spanish to assist in public education of opioid safety and naloxone use.

Here are two additional resources to help access naloxone:
1. *Sonoran Prevention Works* has an online search tool that can be filtered by city or zip code for non-pharmacy locations that may have naloxone available near you.
2. Naloxone availability from many nationwide pharmacies via *Good Rx*: Link

Did You Know…..

Participants of Health Current have access to Direct Email? Direct Email is a HIPAA compliant, secure email account that provides the means for registered users to exchange patient protected health information with other DirectTrust-certified email accounts. This service is **included** with participation Health Current and there is **no cost** for Pii organizations to join Health Current.

Secure method to exchange patient information

To learn more, please contact your Health Current Account Manager. If you are not already a participant, complete a HIE Interest Form or contact Recruitment at 602-688-7200.

Pii Clinical Advisory Council Corner

The Pii Clinical Advisory Council has been meeting and one topic that has been a key focus is **How to Reduce Unnecessary Hospital Inpatient and Emergency Department Use**. Some tips/suggestions that have come from the discussions included:

- Identify patients with chronic medical issues/high-risk patients (HRM)/"familiar faces"
- Provide care coordination through designated staff
- Have a mindset that clinic visits are a "diversion from hospitalization"
- Make the (RM report review process part of the daily work flow and morning huddles
- Use available tools such health plan portals to identify primary care providers and HIE to identify other providers seen
- Identify top diagnoses for hospital ED use
- Identify top Social Determinants of Health (SDOH) issues for ED use
- Use batch alerts from HIE
- Educate patients on urgent care use and proper use of ED and hospital care
- Consider telehealth/telemedicine options and/or extended clinic hours
- Continuum of Care – track your patients over time and adjust processes as needed

Some organizations have hired new staff members specific for working with the high-risk patients by reviewing admission/discharge notifications, gaps in care and patient paneled to their organization. Prompt identification of missed appointments, patients never seen in the clinics and those that have not followed up after hospital discharge is imperative. By creating a "familiar faces"/high risk report from your own records and having the proper staff members responsible for review and outreach, each organization should be able to have an impact on reducing hospital and ED use.

Remember to track your patients over time to identify if the efforts you have implemented are having a positive impact or not. Then adjust workflows and processes as needed. Keep in mind that your best resources are each other. Do not hesitate to reach out to other care providers around you. Together we can continue to make a huge impact with and for the patients and families you serve.

To learn more about implementing interventions in your practice, please contact your Pii Practice Transformation Consultant.

Mini "Pii" Sessions

Opportunities for all Pii Participants to share 'slices of information'

These WebEx sessions hosted by Pii occur on **Wednesdays from 12:00pm to 12:45pm**. The sessions will allow the sharing of experiences to build collaboration amongst our Practice Transformation Network. Each session will focus on a selected topic where practices will be encouraged to ask questions, share their experiences, provide feedback, and share useful best practices such as desktop procedures, policies, and/or procedures that have been effective within their organization.

March 6th – *Clinical Documentation*   [Register Here](#)

March 20th – *Workflow Process Effecting Clinical Measures*   [Register Here](#)

April 10th – *Healthcare Team Integration Closing Care Gaps*   [Register Here](#)

April 24th – *Crisis Intervention Program in a PCP Practice*   [Register Here](#)

May 8th - *Closing Care Gaps*   [Register Here](#)

May 22nd – *Caring for ASD Kids with Sensory Issues*   [Register Here](#)

For the complete list of planned sessions, please visit our website at [Pii Events](#)

Joy in the Workplace

The Research, Data, and Metrics Working Group of the National Academy of Medicine Action Collaborative on Clinician Well-Being and Resilience provides valuable information on their website. A key organization strategy to improving clinician well-being is to measure it, develop and implement interventions, and then re-measure it. A variety of dimensions of clinician well-being can be measured including burnout, engagement, and professional satisfaction. Their website includes a summary of established tools to measure work-related dimensions of well-being. Each tool has advantages and disadvantages, and some are more appropriate for specific populations or settings.

An overview of each validated instrument to assess work-related dimensions of well-being can be found on their [Website](#).

Pii Exemplary Practices

The following Pii organizations have practices that have been certified to have met Pii's definition of an Exemplary Practice.

A New Leaf
Arizona's Children Association
Bayless Healthcare Group
Chandler Pediatrics
Children's Clinics for Rehabilitative Services
Community Bridges, Inc.
Community Partners Inc
Desert Senita Community Health Center
Desert Valley Pediatrics
District Medical Group
GB Family Care
Gilbert Pediatrics
Horizon Health and Wellness
Jewish Family and Children's Services
La Frontera EMPACT
Lifewell Behavioral Wellness
Marc Community Resources
Maricopa County Department of Corrections
Mesa Pediatrics Professional Association
Moon Valley Pediatrics
Mountain Park Health Center
MVP Kids Care
Native Health
North Country HealthCare
North Valley Peds
Paradise Pediatrics
Partners in Recovery
Pendleton Pediatrics
Phoenix Children's Medical Group - PCMG
Phoenix Medical Group
Piller Child Development
Pulmonary Consultants
RI International

Southwest Behavioral & Health Services
St. Elizabeth's Health Center
Sun Life Family Health Center
Sunset Community Health Center
Terros Behavioral Health Services
True Care, MD
Valle Del Sol
Wesley Community and Health Centers

A **Pii Exemplary Practice** is one that meets the following criteria:

- Practice has met Phase 3 and/or above
- Practice has implemented one of the six PFE metrics
- Practices are performing on one or more of the following TCPI service delivery aims:
    - Health outcomes at benchmark standards
    - Reduction in unnecessary hospitalizations
    - Cost savings to payers
    - Reduction in unnecessary tests and procedures

March 14ᵗʰ | 11:00am – 12:00pm
Discussing Overuse with Caregivers
Webinar

Patient-Centered Primary Care Collaborative (PCPCC), in partnership with the American Board of Internal Medication (ABIM) foundation, is hosting a discussion to share insights and tools to empower caregivers and clinicians working with caregivers.

Webinar objectives:
- Better understand the additional factors which impact types of conversations and how tools can improve conversation skills
- Familiarize yourself with a podcast tool demonstrating different types of conversations between clinicians and caregivers, and discuss the decision points and tactics of both parties
- Learn about a workshop model for coaching caregivers to have overuse conversations with their friends or family members

Registration: LINK

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March 21ˢᵗ | 8:00am – 4:15pm
Opioids: The Painful Truth
Desert Williow Conference Center | 4340 E Cotton Center Blvd | Phoenix, AZ 85040

Health Services Advisory Group (HSAG) is hosting a day of learning and exploration on opioid disorders.

- Understand the opioid use disorder disease process, its natural course, and how treatment alters it.
- Explore the National and Arizona landscapes of the opioid crisis.
- Identify challenges and misperceptions about opioid use and treatment.
- Discover interventions, resources, and clinical practices to improve person-centered care.
- Share success stories and reinforce continued efforts to find solutions.

Leaders and clinicians from acute care, rural and behavioral health hospitals, post-acute care, and community-based organizations are invited to attend. Note that there is a limit of up to five people per facility or organization.

Registration: LINK
There is a $25 registration fee to cover the cost of food and beverages

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Make sure to check out the information about our Mini "Pii" Sessions!

March 27th | 8:30am – 3:00pm
At the Intersection of Aging and Transportation – Creating Healthy Communities Conference
Phoenix Airport Marriott | 1101 North 44th Street | Phoenix, AZ 85008

Join Age Friendly Arizona, AARP Arizona, the Federal Highway Administration and Vitalyst at this free conference which will explore how to make a difference in the lives of those who are losing their capacity to connect with their medical care, their communities and their well-being.

A variety of national and statewide experts will come together to share data and dialogue on the impact of aging and access to transportation. Topics will include transportation's role in keeping communities healthy, options for meeting mobility needs, strategies for improving access in underserved communities, the potential of technology, and a focus on what can be done now.

Register: Here
There is no cost for registering

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March 28th | 8:00am – 4:00pm
2019 Arizona Healthy Communities Conference - Connecting the Dots: Moving to Action
Phoenix Airport Marriot | 1101 North 44th Street | Phoenix, AZ 85008

The 6th Arizona Healthy Communities Conference will continue its tradition of bringing national expert keynotes and Arizona-focused panel dialogues together to move Arizona deeper into the work of multi-sectoral collaborations that improve community health and well-being.

Register: LINK
Cost is $90 per person through February 28th; $120 per person starting March 1st

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March 29th | 8:00am – 5:00pm
Any Positive Change – AZ Harm Reduction Conference
Black Canyon Conference Center | 9440 North 25th Avenue | Phoenix, AZ 85021

This is the only multidisciplinary conference in the state focused on improving the health of people who use drugs or other bodies deemed "criminal". This conference will serve as a space to bring together local and national experts, community members, health and treatment professionals, and those directly impacted by substance use to hold conversations about harm reduction at every level. Speakers will ask participants to critically examine the systems and institutions connected to illness, chaotic drug use, poverty, and isolation. We will envision together a future Arizona where every person has access to the tools and care they need in order to be physically well, emotionally supported and spiritually buoyed. The theme of this year's conference is "Any Positive Change." This sentiment emphasizes the need to be relentless in improving the everyday lives of our community members while demanding systemic change to national, state and local policies.

Conference topics include HIV and HCV, The Recovery Spectrum, Nothing About Us Without Us, Harm Reduction in the Family, Harm Reduction at the Border, Rural Arizona: Beyond Opioids, and more.

Register: Link
Cost is $100 if you haven't already registered

Information from TCPI:

New innovations in technology promote patient access and could make health data exchange a reality for millions

On Monday, February 11, 2019, the Centers for Medicare & Medicaid Services (CMS) and the Office of the National Coordinator (ONC) released proposed rules to support seamless and secure access, exchange, and use of electronic health information. The rules would increase choice and competition while fostering innovation that promotes patient access to and control over their health information.

CMS's proposed changes to the healthcare system support the goals of the MyHealthEData initiative, and would increase the seamless flow of health information, reduce burden on patients and providers, and foster innovation by unleashing data for researchers and innovators.

- To view the CMS proposed rule (CMS-9115-P), please visit: Link
- For a fact sheet on the CMS proposed rule (CMS-9115-P), please visit: Link
- For a fact sheet on the ONC proposed rule, please visit: Link
- To receive more information about CMS's interoperability efforts, sign-up for listserv notifications, here: Link
- For further information on the aligned ONC proposed rule "21st Century Cures Act: Interoperability, Information Blocking, and the ONC Health IT Certification Program Proposed Rule" please visit: Link

News from CMS:

Appropriate Use Criteria Program

The Protecting Access to Medicare Act (PAMA) of 2014, Section 218(b), established a new program to increase the rate of appropriate advanced diagnostic imaging services provided to **Medicare beneficiaries**. Examples of such advanced imaging services include:

- computed tomography (CT)
- positron emission tomography (PET)
- nuclear medicine, and
- magnetic resonance imaging (MRI)

Under this program, **at the time a practitioner orders an advanced diagnostic imaging service for a Medicare beneficiary, he/she, or clinical staff acting under his/her direction, will be required to consult a qualified Clinical Decision Support Mechanism (CDSM)**. CDSMs are electronic portals through which appropriate use criteria (AUC) is accessed. The CDSM provides a determination of whether the order adheres to AUC, or if the AUC consulted was not applicable (e.g., no AUC is available to address the patient's clinical condition). A consultation must take place at the time of the order for imaging services that will be furnished in one of the below settings and paid for under one of the below payment systems. Ultimately, practitioners whose ordering patterns are considered outliers will be subject to prior authorization. Information on outlier methodology and prior authorization is not yet available.

This program impacts all physicians and practitioners (as defined in 1861(r) or described in 1842(b)(18)(C)), that order advanced diagnostic imaging services and physicians, practitioners and facilities that furnish advanced diagnostic imaging services in a physician's office, hospital outpatient department (including the emergency

department), an ambulatory surgical center or an independent diagnostic testing facility (IDTF) and whose claims are paid under the physician fee schedule, hospital outpatient prospective payment system or ambulatory surgical center payment system.

Program Timeline

Currently, **the program is set to be fully implemented on January 1, 2021** which means AUC consultations with qualified CDSMs are required to occur along with reporting of consultation information on the furnishing professional and furnishing facility claim for the advanced diagnostic imaging service. Claims that fail to append this information will not be paid. Prior to this date the program will operate in an Education and Operations Testing Period starting January 1, 2020 during which claims will not be denied for failing to include proper AUC consultation information. Beginning July 1, 2018 the program is operating under a voluntary participation period during which time consultations with AUC may occur and may be reported on furnishing professional and facility claims using HCPCS modifier QQ.

Rules and Regulations

These policies are codified in our regulations at 42 CFR 414.94.

The CY 2016 Physician Fee Schedule (PFS) Final Rule with Comment Period introduced this program (pages 71102-71116 and pages 71380-71382).

Additional policies related to this program are included in the CY 2017 PFS Final Rule (pages 80403-80428 and pages 80554-80555).

The CY 2018 PFS Final Rule includes requirements for consulting and reporting under the Medicare AUC program (pages 53187-53201 and page 53363).

Further updates to the AUC program are included in the CY 2019 PFS Final Rule (pages 59688-59701 and page 60074).

Questions regarding this program may be submitted to the CMS Imaging AUC resource box: ImagingAUC@cms.hhs.gov.

Program Data

The Shared Savings Program (SSP) provides data on Accountable Care Organizations

On the CMS.gov website (LINK), key resources are available including an ACO national map and ACO Public Use File which includes financial and quality performance data for de-identified ACOs by performance year.

Additionally, webinars related to alternative payment models (APMs) is available on the Webinars and Forums page (LINK).

❧❧Pii Honor Roll❧❧

The following Pii Practices have completed all 5 Phases of Transformation
as part of the CMS Transforming Clinical Practice Initiative:

- A New Leaf
- Arizona's Children Association
- Bayless Integrated Healthcare
- Biltmore Ear Nose & Throat
- Comprehensive Health Center
- ConnectionsAZ
- Crazy About Kids Pulmonary Services
- Crisis Preparation and Recovery
- GB Family Care
- Horizon Health and Wellness
- Jewish Family & Children's Service
- La Frontera EMPACT
- Lifewell
- Marc Community Resources
- Maricopa County Correctional Health Service
- MomDoc

- Mountain Park Health Center
- MVP Kids Care
- Native Health
- Neuromuscular Clinic and Research Center
- North Country HealthCare
- Open Hearts Family Wellness
- OrthoArizona
- Pendleton Pediatrics
- Phoenix Children's Medical Group
- Pulmonary Consultants
- Pulmonary Institute of Arizona
- Relieve Allergy Asthma & Hives
- RI International
- San Tan Allergy & Asthma
- Southwest Behavioral Health & Services

Congratulations!

Healthcare Communities

Healthcare Communities is a collection of nearly 70 virtual communities, including CMS' Transforming Clinical Practice Initiative, allowing individuals in different healthcare-related organizations to work together on shared interests and goals, regardless of location.

This site is an excellent source of information!

Registration Link: LINK

Check out our website where you will find success stories, events,
and other information www.piiaz.org

Have an idea for a future Pii Newsletter?
Have any questions?   Email us at info@piiaz.org

Practice Innovation Institute
Engage. Transform. Reward.