

Quality Presentation: ACHN QIPs



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ACHN Quality Improvement Projects (QIPs)

Purpose:

To ensure quality service delivery and improved health outcomes to Medicaid recipients in targeted, low stat areas of concern

Types of QIPs - Region wide:

- Childhood Obesity
- Infant Mortality
- Substance Use Disorder (SUD)

Quality Evaluation:

Agency partnering with IPRO for approval of quality plans and evaluation





My Care Alabama ACHNs

QIP Type	My Care AL - Northwest	My Care AL - Central	My Care AL – East
Childhood Obesity	<ul style="list-style-type: none"> • Auburn Cooperative Extension Office Partnership - portion control education, healthy meal prep and exercise, and healthy eating education • Registered Dietician/Nutritionists - assist recipients in decreasing BMI, resource education to recipients, and provider education on BMI coding • Incentivizing EIs for Completion of Health Education Courses 	<ul style="list-style-type: none"> • Network’s QIP Nurse – meet with expecting mothers early in pregnancy and monthly through pregnancy and the child’s first year of life • Promote Evidence Based Practices for Prevention of Obesity - promote and educate on breast feeding throughout pregnancy, promote early entry to WIC, and adherence to AAP guidelines for feeding infants and children • Target Maternal and Fetal Health – promote and educate on maternal nutrition and treatment of comorbidities • Post Delivery Assistance - well child visits and adherence to breast feeding 	<ul style="list-style-type: none"> • Incentivizing Well Child Visits with nutritional and physical activity counseling • Partnering with Regional Head Start offering nutrition education and healthy meal prep classes to parents • Diabetic Prevention Program (DPP) - targeted in Talladega County, education on healthy lifestyle for pre-diabetics and incentives for weight loss and program completion
Infant Mortality	<ul style="list-style-type: none"> • Partner with Nurse Family Partnership and Easter Seals – prenatal care education, birth spacing, birth control methods, incentivizing for active participation, and completing 1st trimester visit and post-partum visit • Home Visits – through 2nd year of life 	<ul style="list-style-type: none"> • Local High School Collaboration to Reduce Infant Mortality by the Reduction of Unintended Pregnancies and Better Preconception Health and Education – evidenced based sex education curriculum • College Partnership and Local Community Partnerships – provide reproductive wellness and family planning through wellness events and small groups 	<ul style="list-style-type: none"> • Incentivizing prenatal and post-partum visits • Focusing on cognitive behavioral therapy via the smoking cessation app <i>Quit Genius</i>.
Substance Abuse Disorder	<ul style="list-style-type: none"> • Peer Support Specialists – ROSS Partnership – hire five Peer Support Specialists • MSW Adult Placement Assessment 	<ul style="list-style-type: none"> • Master level Counselors to conduct Placement Assessment • Peer Support Specialists – ROSS Partnership 	<ul style="list-style-type: none"> • Peer Support Specialists - ROSS Partnership covering a 12 county region • Master’s Level SWs – Certified to complete Adult Placement Assessments • Substance Use Disorder Taskforce - community collaboration with leaders impacting substance use • ER Department/Hospital Partnership – Master’s level SW assess and/or refer newly diagnosed patients with substance use diagnosis



Gulf Coast Total Care / North Alabama Community Care

QIP Type	Gulf Coast TotalCare	North Alabama Community Care
Childhood Obesity	<ul style="list-style-type: none"> • Body Quest Warriors – group of animated characters targets 3rd graders/parents to make healthier choices. Partnership AL Extension Service/ Auburn University • AL Extension Service – SNAP Educator deliver and expand Body Quest curriculum • Recreational/Nutritional Programming - PCP practice pilot, pay for recreational/nutritional programming • Access to Care – network to assist and support PCPs in contacting and scheduling EIs ages 7-11 due and past due for annual PCP visits 	<ul style="list-style-type: none"> • Case Management - EIs ages 3-6 with BMI 85% to 94% • Dietician Managed Group Sessions • Community Health Workers and Extension Service - focusing on child nutrition, encouraging physical activity and reducing screen time • Maternity Care Coordination – breastfeeding education focusing on the benefits of breastfeeding • Provider Education – educate physicians on the importance of completing referrals to North Alabama Community Care on EIs ages 3-6 with a BMI greater than 85% for case management • Promote Interception Care by providing education to Plan First providers
Infant Mortality	<ul style="list-style-type: none"> • Critical Risk Bio-Monitoring – hired LPNs to provide weekly telephonic bio-monitoring for Critical Risk EIs • Timely Initiation to Prenatal Care – marketing on Facebook and other social media, health fairs, ect., provide incentives, train staff as Application Assisters, maintain list of local providers with free pregnancy test 	<ul style="list-style-type: none"> • Manage Maternal Obesity During Pregnancy • Increase Number of EIs who receive nutritional and healthy lifestyle counseling during their pregnancy • Use Historical Data to identify and provide counsel to EIs with gestational diabetes, EIs with previous gestational diabetes, and EIs that gained forty or more pounds in a previous pregnancy
Substance Abuse Disorder	<ul style="list-style-type: none"> • Emergency Department Partnership – evaluate and refer EIs with substance use diagnosis • Peer Support Specialists 	<ul style="list-style-type: none"> • Substance Use Education – educate providers on how to identify EIs with substance use disorder and incentivize providers to become MAT certified • Peer Support Specialists for EIs with substance use disorders

Alabama Care Network Southeast / Alabama Care Network Mid-State



QIP Type	Alabama Care Network Southeast	Alabama Care Network Mid-State
Childhood Obesity	<ul style="list-style-type: none"> • Distribution of My Plate Educational Handouts – children ages 3 to 6 with BMI in 85th percentile • Distribution of Physical Activity Education to EIs (same age group) • School System Partnership – vegetable gardens at school, rollout Auburn Early Education After School Program and Head Start Programs in Lee and Houston counties. • Development of Referral Process for Care Coordination of EIs ages 3 to 6 who meet BMI standards 	<ul style="list-style-type: none"> • Partner with the Alabama Extension Service to expand the Grow It, Try It, Like it Program to more preschoolers & implement the Technology Enhancing Exercise and Nutrition (TEEN) program to engage older children • Partner with Primary Care Providers to refer EIs 3-19 diagnosed with overweight or obesity in a nutrition and/or physical activity class or program • Provide education to parents of EIs to increase well visits for EIs age 3–11
Infant Mortality	<ul style="list-style-type: none"> • Work with DHCP in scheduling 1st trimester visit • Develop Incentive Package for EIs completing recommended pre/post natal visits • Distribute Safe Sleep Information to Caregivers 	<ul style="list-style-type: none"> • Implement Healthy Start Connect (HSC) - program to provide wrap around services to reduce low birth weight and smoking cessation • Outreach to connect EI to community resources, family planning • Incentives to promote smoking cessation and safe sleep and provide safe sleep education
Substance Abuse Disorder	<ul style="list-style-type: none"> • Collaborate with Substance Treatment Programs that currently do not provide medication assisted treatment to add MAT to standard treatment program • Track EIs treated at non-billing SUD programs • Coordinate transportation to treatment programs • EI SUD Assessment when unavailable within 3 days at mental health facility • Development of Referral Process from ED to PCP upon discharge. 	<ul style="list-style-type: none"> • Embed a Full-time Licensed Social Worker in the Emergency Department to support patients with opioid use disorders to obtain treatment and referral • Connection to Peer Support Specialists

Alabama Coordinated Health Network – Regional Contacts for Providers



Region	ACHN	Phone Number (Recipients)	Phone Number (Providers)	Contact Name	Email Address
Central	My Care Alabama Central	1-855-288-8360	1-855-288-8361	Casey Wylie	casey_wylie@MyCareAlabama.org
East	My Care Alabama East	1-855-288-8364	1-855-288-8366	Donna Oliver	donna.oliver@MyCareAlabama.org
Jefferson/Shelby	Alabama Care Network Mid-State	1-833-296-5245	1-833-296-5245	Michael Battle	mbattle@uabmc.edu
Northeast	North Alabama Community Care	1-855-640-8827	1-855-640-8827	Dana Garrard Stout	dana.garrard@alabamacomunitycare.org
Northwest	My Care Alabama Northwest	1-855-200-9471	1-855-500-9470	Stacey Copeland	stacy.copeland@MyCareAlabama.org
Southeast	Alabama Care Network Southeast	1-833-296-5246	1-833-296-5246	Kim Eason	keason@uabmc.edu
Southwest	Gulf Coast Total Care	1-833-296-5247	1-833-296-5247	Sylvia Brown	sbrown@uabmc.edu

Region	Counties
Central	Autauga, Butler, Chilton, Crenshaw, Dallas, Elmore, Lowndes, Marengo, Montgomery, Perry, and Wilcox counties
East	Blount, Calhoun, Cherokee, Clay, Cleburne, Coosa, DeKalb, Etowah, Randolph, Talladega, Tallapoosa, and St. Clair counties
Jefferson/Shelby	Jefferson, and Shelby counties
Northeast	Cullman, Jackson, Limestone, Madison, Marshall, and Morgan counties
Northwest	Bibb, Colbert, Fayette, Franklin, Greene, Hale, Lamar, Lauderdale, Lawrence, Marion, Pickens, Sumter, Tuscaloosa, Walker, and Winston counties
Southeast	Barbour, Bullock, Chambers, Coffee, Covington, Dale, Geneva, Henry, Houston, Lee, Macon, Pike, and Russell counties
Southwest	Baldwin, Choctaw, Clarke, Conecuh, Escambia, Mobile, Monroe, and Washington counties



- Alabama Medicaid Agency contracted, through competitive procurement, with Island Peer Review Organization (IPRO) to be the Agency's External Quality Review Organization.
- IPRO has worked with each ACHN to help ensure their QIPs are designed to meet CMS standards.
- IPRO will provide quarterly check-ins to validate the implementation of the QIPs.
- At the end of the contract year IPRO will provide an independent, third-party evaluation of the QIPs to confirm any findings or results the ACHNs were able to achieve.