Houston Methodist

Houston Methodist

Profile

Our Hospital Facilities

Houston Methodist is a leading academic medical center in the Texas Medical Center with six community hospitals serving the Greater Houston area. Each hospital is staffed by committed personnel who exemplify I CARE values: integrity, compassion, accountability, respect and excellence. Patient safety, quality and service are the highest priorities.

Houston Methodist Hospital, the system's flagship, is consistently listed among U.S. News & World Report's best hospitals and extends that same level of quality care across the system. Other available centers include Houston Methodist Emergency Care Centers, Houston Methodist Imaging Center, Houston Methodist Breast Care Center and Houston Methodist Outpatient Center.

Houston Methodist Specialty Physician Group (HMSPG)

Doctors in Houston Methodist Specialty Physician Group are employed by Houston Methodist and have offices located on Houston Methodist campuses. These physicians are deeply rooted in an academic and research environment where teaching, continuing education and collaboration are strongly encouraged. Membership in the organization provides an affiliation with Houston Methodist Research Institute and opportunities for Weill Cornell Medicine faculty appointments.

Houston Methodist Primary Care Group (HMPCG)

With locations throughout the Greater Houston area, Houston Methodist Primary Care Group is dedicated to providing quality, compassionate care for the entire family. Houston Methodist Primary Care Group is proud to be a part of Houston Methodist and its family of hospitals, ensuring efficient access to specialty and hospital services whenever the need arises.

Houston Methodist Coordinated Care (HMCC)

Houston Methodist Coordinated Care (HMCC) is a Track 3 Medicare Shared Savings Program (MSSP) with significant downside financial risk. HMCC is a key element of Houston Methodist's value-based care strategy. HMCC is in its third year and has 28,000 Medicare Fee for Service (MFFS) beneficiaries attributed to 183 providers in the Greater Houston area. HMCC is comprised of 60 percent primary care physicians employed by HMPCG and 40 percent private primary care physicians. In HMCC's first year of taking financial risk in a Centers for Medicare & Medicaid Services (CMS) value-based payment model, HMCC was 1 of 4 first time MSSP Track 3 organizations who received shared savings nationally. HMCC also demonstrated improvement in quality metrics to reach the 90th percentile in quality performance nationally.

Date Stage 7 was achieved: October 15th, 2019

The Challenge

Houston Methodist Coordinated Care (HMCC) began in January 2017 with the 16,500 MSSP attributed patient population after electing to apply for a Track 3 MSSP. HMCC derived quantitative risk scores in their predictive analytics tool by leveraging electronic health records (EHR), CMS claims, social determinants of health and lab data. These risk scores help predict responses to the questions below, driving significant improvement in clinical outcomes through proactive outreach and intervention.

- Which patients will be readmitted in the future?
- Which patients, who appear well today, are at risk for change in their health status?
- Which patients have gaps in care?
- Which patients have not filled their prescriptions?
- Which patients are most likely to be non-adherent to their care plan?

As a result of the quantitative risk scores in their predictive analytics, HMCC identified that only 21 percent of the attributed population of MSSP patients had their HbA1c under control. As a primary quality metric of value-based care model success, HMCC implemented technology changes and integrated patient engagement and outreach activities to eliminate the care gap and improve overall outcomes.

Implementation Overview

To address operational challenges, Houston Methodist made Epic enhancements, increasing awareness and visibility of MSSP patients at the point of care. These enhancements include a "flag" on the inpatient, outpatient and emergency department (ED) patient header, as well as unique designation on the ED Track Board. Visual enhancements include a color-coded risk-life banner. The risk-life banner classifies patients based on predictive analytics into high, medium and low risk groups for three unique risk categories: complex care, ED utilization and re-admission. The risk-life banner is displayed in Snapshot, Chart Review and a printed census.

Additionally; through analytics of the attributed population, HMCC worked with the Houston Methodist Specialty Physician Group (HMSPG) and Primary Care Group (HMPCG) to identify clinic locations and offices with high populations of patients at risk for uncontrolled HbA1c. By creating a metric scorecard within the EHR to identify "Needs Attention" metrics, the Specialty Physician Group and Primary Care Group were able to implement the Afinion HbA1c assay point of care solution, increasing opportunities to educate and partner with patients to drive medical decision making by having HbA1c values at the time of visit or obtain values if they are unavailable.

Houston Methodist Coordinated Care also implemented three of Evolent Health's clinical programs developed to achieve focused outcomes utilizing predictive analytics. One of those programs — Complex Care — is designed to identify high-risk, impactable patients with multiple chronic conditions. Patients with uncontrolled HbA1c fall into this group and are assigned to Care Coordinators who improve outcomes through proactive patient outreach and engagement.

Key participants involved in the process: Dr. Julia Andrieni, Megan Harkey, Robert Malone, Erika Guzman

Resulting Value / ROI

From the baseline of attributed MSSP patients with a controlled HbA1c at 21 percent in December 2017, HMCC realized significant improvements across the HMSPG/HMPCG with the implementation of technical and operational changes. By December 2018, that percentage improved to 80.1 percent with continued improvement in 2019 — by November 2019 the percentage improved to more than 85 percent. Year-over-year improvements are attributed to the continued education, engagement and partnerships between providers and patients.

Year-Over-Year HBA1C Control Completion Rate for Attributed Patients
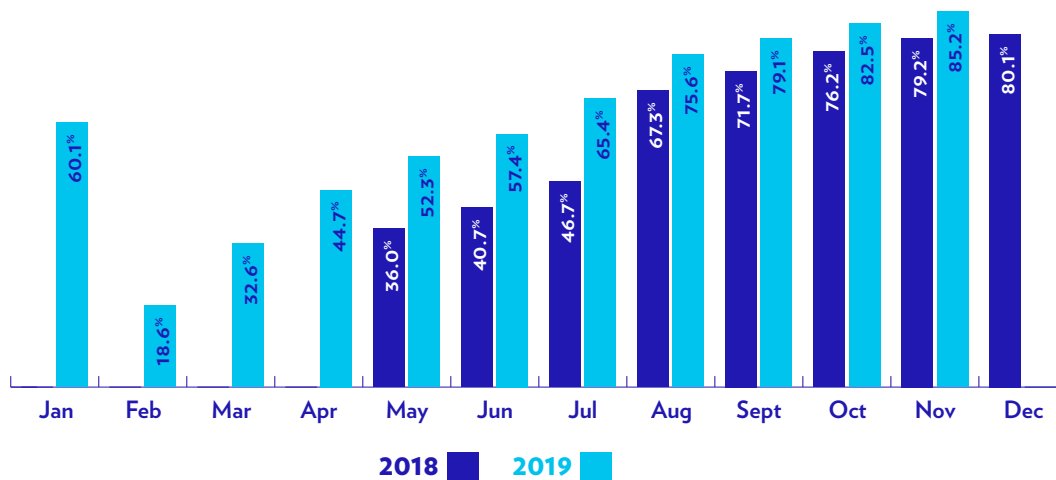
The significant improvements to the HbA1c quality metric realized in 2017 and 2018 were integral to HMCC receiving 100 percent credit on the CMS Quality Score for 2017, resulting in the $1.25 million CMS settlement for 2017 and the $1.28 million CMS settlement for 2018.

Lessons Learned

1. Focus on educating providers and their staff to capture patient complexity through improved documentation in the EHR.

2. Educate providers and staff to utilize predictive analytics as a clinical decision-making tool at critical points of care.

3. Identify and flag MSSP population and their attributed provider in the EHR as early as possible.

4. Implement a strategic plan to monitor and close quality gaps of care in real time at the point of care.

5. Provide EHR based quality and claims based financial feedback to providers aligned to MSSP goals.

6. Improve data interoperability with different EHRs.

One sentence that encapsulates the experience as a whole: HMCC uses data analytics to identify high-risk diabetic patients to operationalize patient education and practice resources to improve a population's health.

"

Data analytics drive outcomes by identifying and engaging patients at risk.

–Dr. Julia Andrieni, president and chief executive officer, Houston Methodist Coordinated Care

Produced by

HIMSS