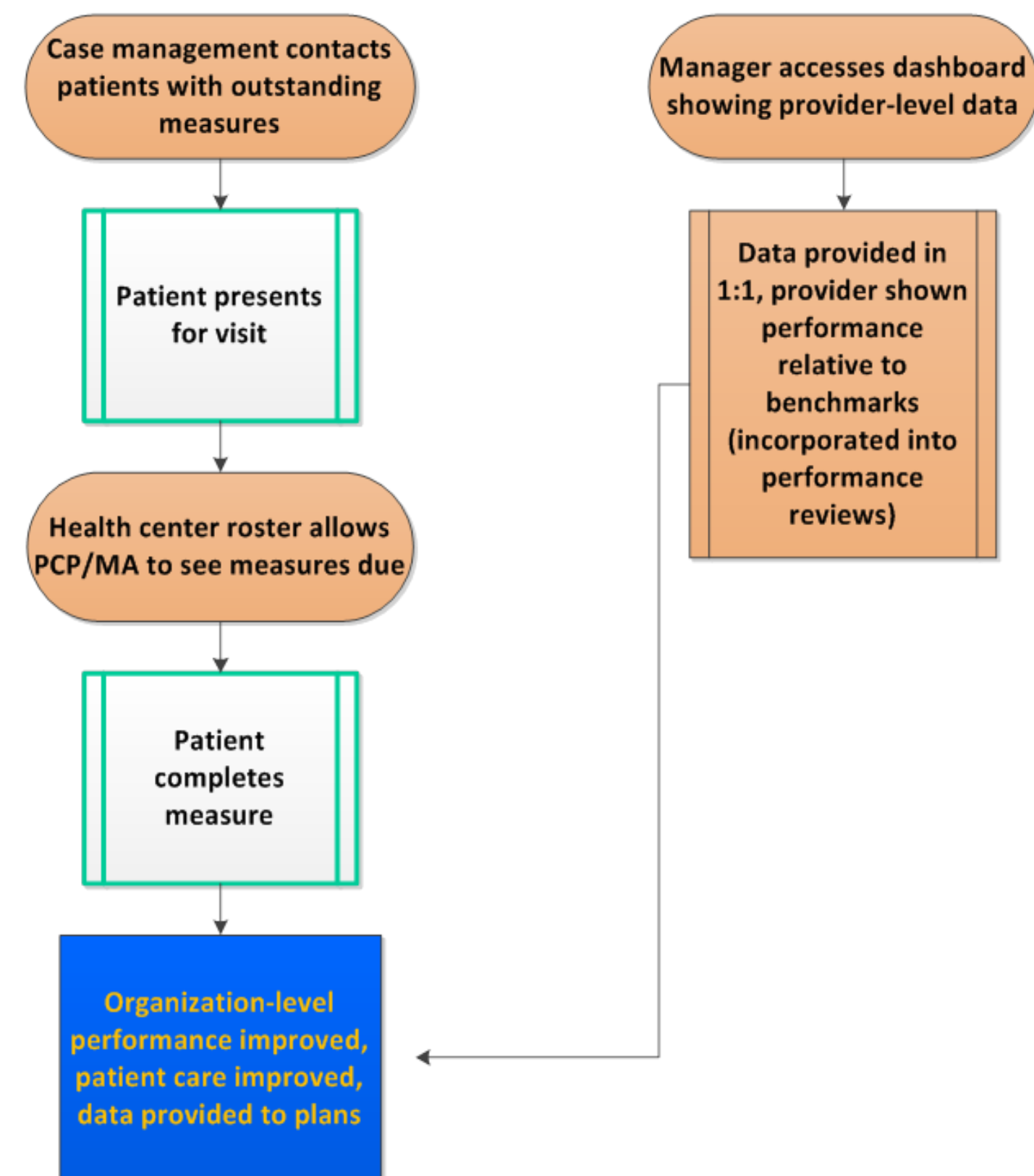


## Problem Statement

Despite receiving regular medical care, women of reproductive age often do not receive evidence-based cervical and breast cancer screening and family planning care, resulting in unplanned pregnancies and poorer health outcomes. A quality improvement tracking system that identifies gaps in care could improve clinician performance and health outcomes.

## Discovery

1. Interviewed 44 subject matter experts on Health Effectiveness Data and Information Set measures. Spoke with health plan clinical leaders.
2. Developed a wish list/desired flow (below) with IT department to create tracking system built on previous reporting infrastructure.
3. **Surprising finding:** Many larger practices and health plans have not developed functional tracking systems for HEDIS, which results in difficulty in meeting measures and improving outcomes. Health plans use claims data, which may be incomplete, to see if measures are met. Few are tracking family planning measures.
4. Many (50-65%) of Melody Medi-Cal patients never establish care.
5. **Outcome of interviews:** As a small, nimble organization we were ideally suited to find and test a technical solution to track, improve, and show performance. Plans may be open to accepting data from our reports.



## Goals and Objectives

**Goal:** To develop an improved tracking system for delivery of high quality health care for women in their reproductive years, and have begun to use data to demonstrate and improve performance.

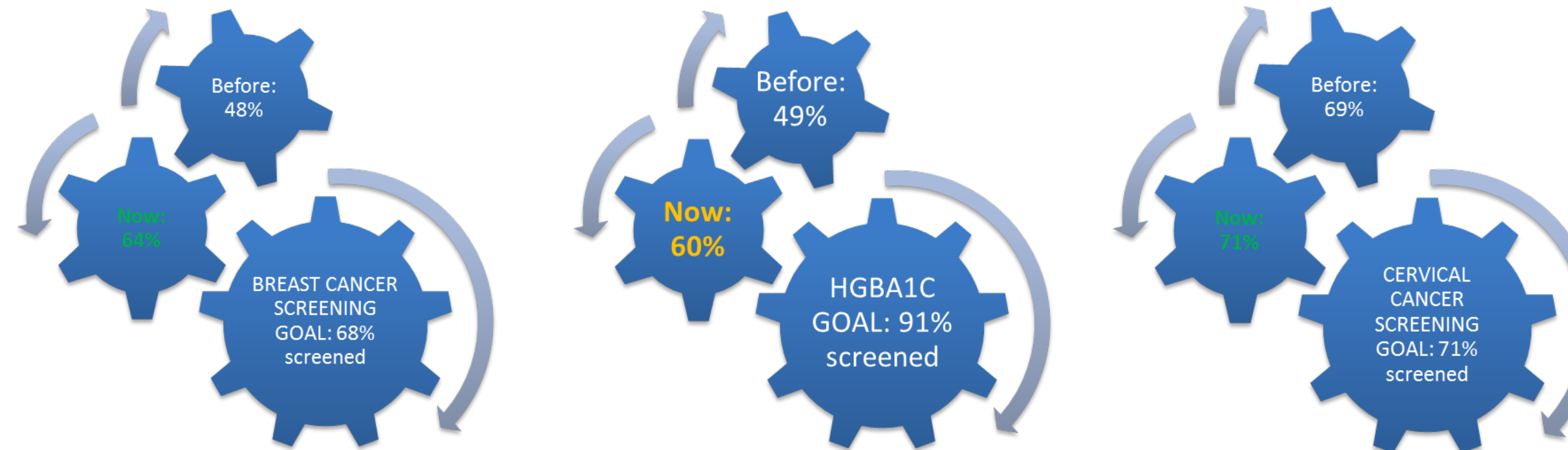
**Outcome-oriented Objective:** **9/2017:** PPOSBC will have a tracking system to enable collection of HEDIS and family planning data. **10/2017:** Provide feedback to providers, using the benchmarks from health plans. **12/2017:** Show improvement in all measures. **3/2018:** Meet all measures.

## Results

### Dashboards complete June 2017 Implementation



### HEDIS impact: Rapid improvement



### Melody most effective birth control use vs US



## Lessons Learned

- PPOSBC has always taken pride in quality/operational performance and has line of sight to many metrics.
- Data gathering on preventive screening metrics challenging due to technological limitations and difficulty gaining insight from plans.
- We could leverage existing reporting applications and staff to expand our data collection. We also had existing feedback infrastructure to allow us to improve provider performance.
- Interviewing subject matter experts was invaluable.
- Melody is not alone in the struggle to gather actionable data.
- Melody has a vision/mission that may be incentive enough for excellent employee performance, based on early data.

### Next Steps:

- Roll out workflow to all centers by July 2017.
- Roll out to include non-primary care patients (all PP patients) within 6 months.
- Use performance results to market to plans by next FY.
- Work with plans to accept data from our reports.

## Mission Model Canvas

|  |  |   |   |  |
|--|--|---|---|--|
| <b>Key Partners</b> <ul style="list-style-type: none"> <li>• Payers</li> <li>• Quality management department</li> <li>• IT department</li> <li>• Clinicians/ clinical leadership</li> <li>• Executive leadership</li> <li>• Board of Directors</li> </ul>  | <b>Key Activities</b> <ul style="list-style-type: none"> <li>• Create dashboard for outstanding measures</li> <li>• Create daily roster to see outstanding measures in real time</li> <li>• Training for all associated staff</li> <li>• Provide performance feedback through 1:1's</li> </ul> | <b>Value Propositions</b> <p><b>Within one year, Melody Women's Health will be exceeding HEDIS metrics for breast and cervical cancer screening, chlamydia screening, and diabetes management, as well as exceeding national metrics for use of most effective birth control. Health plans will then accept and adopt this tracking approach.</b></p> | <b>Buy-in &amp; Support</b> <p>Training, 1:1 feedback, tie into reviews, case manager role</p> <p><b>PPOSBC vision:</b><br/><i>Every individual has the knowledge, freedom, and power to achieve optimal reproductive health.</i></p> | <b>Beneficiaries</b> <p><b>Women in our service areas</b> want quality preventive healthcare and contraceptive care.</p> <p><b>Health plans (CMOs, CEOs)</b> want quality providers for their patients, and they have to be able to demonstrate quality to federal government.</p> |
| <b>Mission Budget/Cost</b> <ul style="list-style-type: none"> <li>• Organization has allocated resources to this project and the development of Melody. Still not showing margin.</li> <li>• Cost slightly offset by pay for performance (P4P).</li> <li>• Costs: 1 FTE and portion of 3 other personnel: approximately \$100k.</li> </ul> |  | <b>Mission Achievement/Impact Factors</b> <p>Improved quality of women's health care. P4P and additional contracts. Decrease health disparities: unintended pregnancy and maternal morbidity.</p> <p><b>Demonstrate the quality/value of Planned Parenthood to patients, providers, community, leaders, country.</b></p>                              |   |  |