



Access LARC

The Road to Implementation

Access LARC Collaborative Webinar

Partnering to Improve Health Care Quality
for Mothers and Babies



Welcome!

- **Please enter your Audio PIN on your phone or we will be unable to un-mute you for discussion**
- If you have a question, please enter it in the Question box or Raise your hand to be unmuted
- This webinar is being recorded
- Please provide feedback on our post-webinar survey

Agenda

11/14/18

- Welcome
- Announcements
- The Road to Implementation: Tampa General Hospital
- Access LARC Data Update
- Medicaid Update
- Questions

Regional Access LARC Training January – March 2019

- 👤 FREE Training for Perinatal Professionals
 - 👤 Orlando, Wednesday, January 30
 - 👤 Miami, Thursday, February 7
 - 👤 Gainesville, Thursday, March 7
- 👤 This half day training is aimed at OB residency training programs as well as hospitals not currently participating in Access LARC

Save the Date: April 4-5, Tampa FPQC 2019 Conference

- 👤 **Racial/ethnic disparities in maternal mortality & morbidity – Elizabeth Howell, MD, MPP**
Professor of Population Health Sciences & Policy, Obstetrics, Gynecology, and Reproductive Science, & Psychiatry, Mount Sinai Health System
- 👤 **Parent topic – Lelis Vernon**
NICU Mom, National Network of Perinatal Quality Collaboratives, Patient and Family Centered Care advocate
- 👤 **Racial/ethnic disparities in NICU care quality – Jochen Profit, MD**
Associate Professor of Pediatrics (Neonatology), Stanford University
- 👤 **Change Management– Bethany Robertson, DNP, CNM**
Assistant Professor Clinical, Emory University



For More Information, go to www.fpqc.org



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Additional Resources

- 👶 Postpartum Contraceptive Choice Infographic
- 👶 Immediate Postpartum Implant patient flyer
- 👶 Immediate Postpartum IUD patient flyer
- 👶 Immediate Postpartum LARC patient flyer
- 👶 Immediate Postpartum Birth Control options patient flyer

<https://health.usf.edu/publichealth/chiles/fpqc/larc/toolbox>

Project Announcements

- 👶 Schedule Access LARC site visit soon
- 👶 IUD Insertion Training is available
- 👶 MamaU training model will be provided to our participating hospitals/residency programs in Florida



Access LARC: The Road to Implementation

November 14, 2018



Speakers

Pat Barry, MSN, CNS

Perinatal Quality Nurse Specialist

Alyssa Brown, MD

Assistant Professor

Department of Obstetrics and Gynecology

University of South Florida



Team Members



Access LARC Initiative Members

- ❖ Nurse Managers
- ❖ Nurse Educators
- ❖ Providers-Attendings and OB Resident
- ❖ Nurse Clinician
- ❖ Finance
- ❖ Coding
- ❖ Billing
- ❖ Contract administrator, Managed care
- ❖ Pharmacy
- ❖ IT invited, but unable to attend due to a IT monthly meeting conflict.



Initial Goal

- ❖ Offer LARC devices to all patients who are candidates
- ❖ Offer 3 products
 - ❖ Liletta
 - ❖ Paragard
 - ❖ Nexplanon
- ❖ Value analysis, business analysis performed
- ❖ Cost of devices could have a huge impact on finances if private insurance did not reimburse
- ❖ Decision made by team to offer only to Medicaid and Medicaid Managed Care insured patients for now

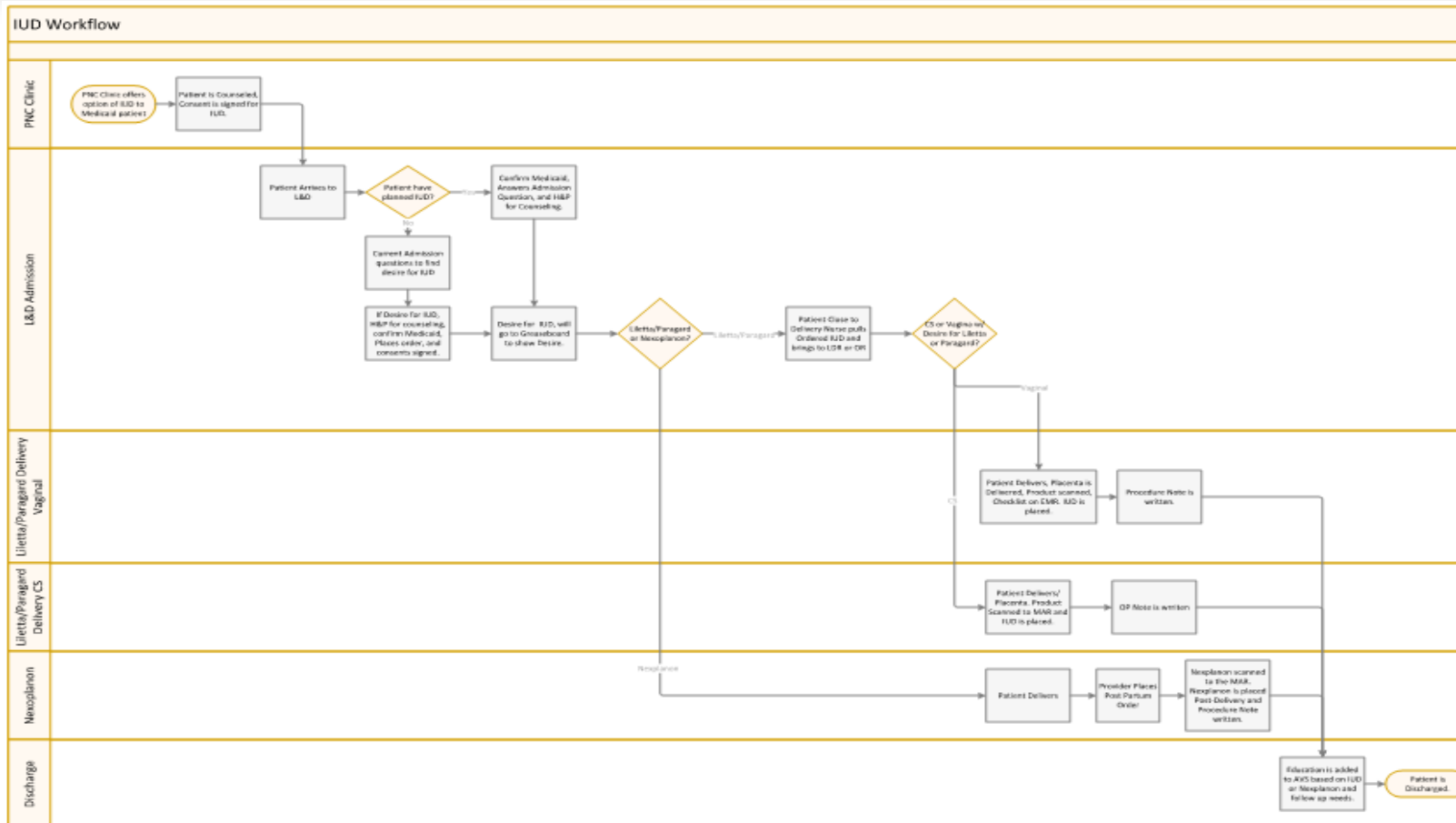


IT Representative Unable to Attend Monthly Meetings

- ❖ Impacted ability to move forward
- ❖ Decision made to have the Initiative Quality Lead meet with the IT Team Leader to discuss needs
- ❖ Epic Stork Team Lead set up every 2 week meeting to plan and review progress
- ❖ Critical to the process was the development of the expected workflow related to LARCs



LARC Workflow



How do we ensure that only Medicaid Insured patients are offered Postpartum LARC option?

- ❖ Worked with Pharmacy IT Representative
- ❖ Modified order set to link the LARC orders to the Insurance on the patient face sheet
- ❖ If the patient is not Medicaid, the provider is not able to see the LARC product on the order set.
- ❖ LARC Orders have to be ordered in the specific Order Sets-can not be ordered as a stand alone order



LARC Products Ordered in Order Sets

Alternative Selection

Alternative Required

You selected:
copper (PARAGARD) 380 square mm intrauterine contraceptive 1 each: 1 each, Intrauterine, ONCE PRN, Insert within 10 minutes of placenta delivery, 1 dose starting Today at 0957 Until Discontinued

Details

This agent is restricted to the following criteria:

1. Medicaid Insurance
2. Medicaid Managed Care Insurance

If patient meets criteria, proceed with ordering from options below. If patient does not meet criteria, you will not be able to proceed with ordering.

Alternatives *If patient has Medicaid or Medicaid Managed Care, this section will appear for providers to continue with ordering*

Alternative	Details	Cost
<input type="radio"/> levonorgestrel (LILETTA) intrauterine contraceptive	52 mg, Intrauterine, ONCE PRN, Insert within 10 minutes of pla...	\$2,000/day
<input type="radio"/> copper (PARAGARD) intrauterine contraceptive	1 each, Intrauterine, ONCE PRN, Insert within 10 minutes of pla...	\$2,300/day



How do we document and charge for the device?

- ❖ Decision made to have Pharmacy stock products
- ❖ Product will be ordered in revised order sets
 - ❖ Liletta and Paragard
 - ❖ Preop CS
 - ❖ Labor and Delivery Admission Orders
 - ❖ Nexplanon
 - ❖ Postpartum CS Order Set
 - ❖ Postpartum Vaginal Delivery Order Set
- ❖ Product scanned into Medication Administration Record (MAR)
- ❖ Device is charged through the MAR entry



Once the product is documented in the MAR- how do we address during the hospitalization?

- ❖ Communication with Nurses at handoff or transfer of patient that LARC is in place
- ❖ Documentation if a post-placental IUD was expelled
- ❖ Assessments of site after Nexplanon insertion









Decision made to add a “LARC LDA”

- ❖ LDA stands for Lines Drains and Airways
- ❖ Used for IV sites, implants, packing etc. to allow for ongoing documentation
- ❖ Once the LDA is added, the nurse can document to the LARC every shift.
- ❖ The LARC LDA would not be completed at discharge (such as would be done when an IV is removed), so that an outpatient EPIC user could view that the LARC had been placed



LARC LDA

LARC Implant/IUD

Placement Date	<input type="text" value=""/>  
Placement Time	<input type="text" value=""/>  
Timeout performed?	<input type="text" value="Yes"/>
Inserted by	<input type="text" value=""/> <input type="checkbox"/> Present on hospital admission
Location?	<input type="text" value="Right Arm"/> <input type="text" value="Left Arm"/> <input type="text" value="Intrauterine"/>
Removal Date	<input type="text" value=""/> 
Removal Time	<input type="text" value=""/> 

Assessment Rows

\$ Implant/IUD Type	<input type="text" value="Liletta"/> <input type="text" value="Paragard"/> <input type="text" value="Nexplanon"/> Select the LARC type that was implanted. Only needs to be documented once.
Expelled?	<input type="text" value="Yes"/> <input type="text" value="No"/> <input type="text" value="Expulsion Reported by Patient"/> <input type="text" value="Not sure"/>
Dressing Appearance	<input type="text" value=""/> <input type="checkbox"/> WDL (Clean/Dry/L... <input type="checkbox"/> Dried Drainage <input type="checkbox"/> Moist Drainage <input type="checkbox"/> Copious Drainage <input type="checkbox"/> Bloody <input type="checkbox"/> Serous <input type="checkbox"/> Dry <input type="checkbox"/> Intact <input type="checkbox"/> No Drainage <input type="checkbox"/> Other (comment)
Appearance (After Pressure Dressing Removed)	<input type="text" value=""/> <input type="checkbox"/> WDL (No Drainag... <input type="checkbox"/> Drainage <input type="checkbox"/> Redness <input type="checkbox"/> Swelling <input type="checkbox"/> Tenderness <input type="checkbox"/> Warmth <input type="checkbox"/> Steri-Strips Intact <input type="checkbox"/> Other (comment)
Dressing	<input type="checkbox"/> Pressure Dressing Intact <input type="checkbox"/> Pressure Dressing Removed <input type="checkbox"/> Open to Air



Provider Documentation

- ❖ Providers developed Procedure note for LARC insertion
 - ❖ This was made into a “smart text”
 - ❖ Note includes Product Name, Lot number and Expiration, counseling of patient, and procedure

SmartText

- Procedure note for IUD – “TGH IP POST PLACENTAL IUD” – SmartText
- Procedure not for Implant – “TGH IP NEXPLANON NOTE” – SmartText
- Patient Instructions – “TGH IP OB IUD INSTRUCTIONS” - SmartText

Dot Phrase

- IUD Counseling for H&P Vaginal – “.ppiud” – Dot Phrase
- C Section IUD H&P Counseling – “.csiud” – Dot Phrase
- Post-Partum H&P Counseling – “.ppni” – Dot Phrase



Provider Education

- ❖ Access LARC Provider leads set up hands-on education
 - ❖ Offered during Wednesday Academic schedule
 - ❖ Offered to Residents, Attending, and CNM Providers
- ❖ Mama U model used for demonstration/return demonstration
- ❖ Process reviewed at OB meetings
- ❖ Email sent to all OB providers with Smart Text etc. to facilitate documentation of counseling and procedures in EPIC

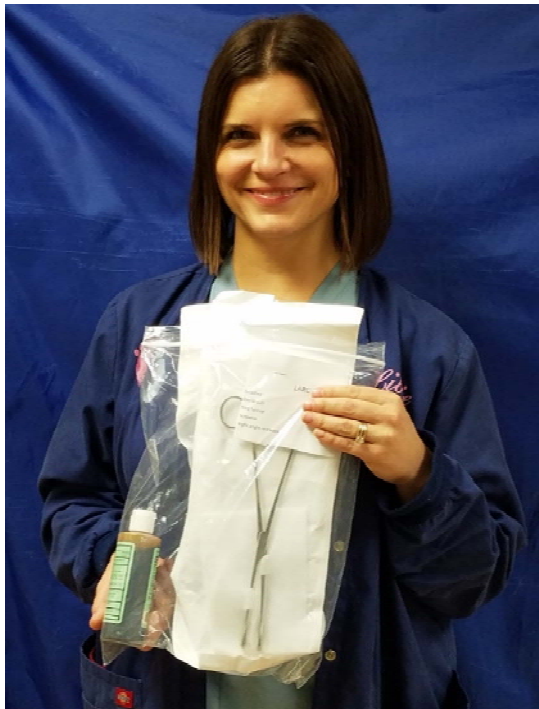


Nurse and Scrub Tech Education

- ❖ Workflow reviewed with Nurses and Scrub Techs in L&D, Antepartum Postpartum, and Mother Baby Units during Education Block Time
- ❖ ACOG Video shown during Education Block
- ❖ Staff Nurses provided in-service on LARC Insertion Process and Documentation
- ❖ Nurse Educators and Clinicians organized supplies in a packet so that it was easy to gather supplies prior to the procedure



IUD and Nexplanon Kits Made



Go Live October 1st!

- ❖ First Insertion on October 4th
- ❖ October utilization
 - ❖ 42 Devices inserted
 - ❖ Ordering system worked without problems
 - ❖ Waiting on reimbursement
- ❖ Tracking system
 - ❖ Report created based on LARC LDA
 - ❖ Coding and Billing have access to the report so that they can track submissions and reimbursement
 - ❖ New process-LDA not always added
 - ❖ Additional report being developed that will track devices based on MAR



Lessons Learned

- ❖ Have IT Lead Team Member be part of Initiative Kick-Off
- ❖ Once we receive information about reimbursement, we may have additional input or need for changes
- ❖ Frequent team communication and input is critical, especially related to Coding, Billing issues
- ❖ Ongoing Feedback to providers and nurses on process changes important
- ❖ Tracking of device insertions necessary to make sure we are completing all the steps properly





Access LARC Initiative-Wide Score Card

Estefania Rubio, MD, MPH, CPH

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Hospitals in each Phase

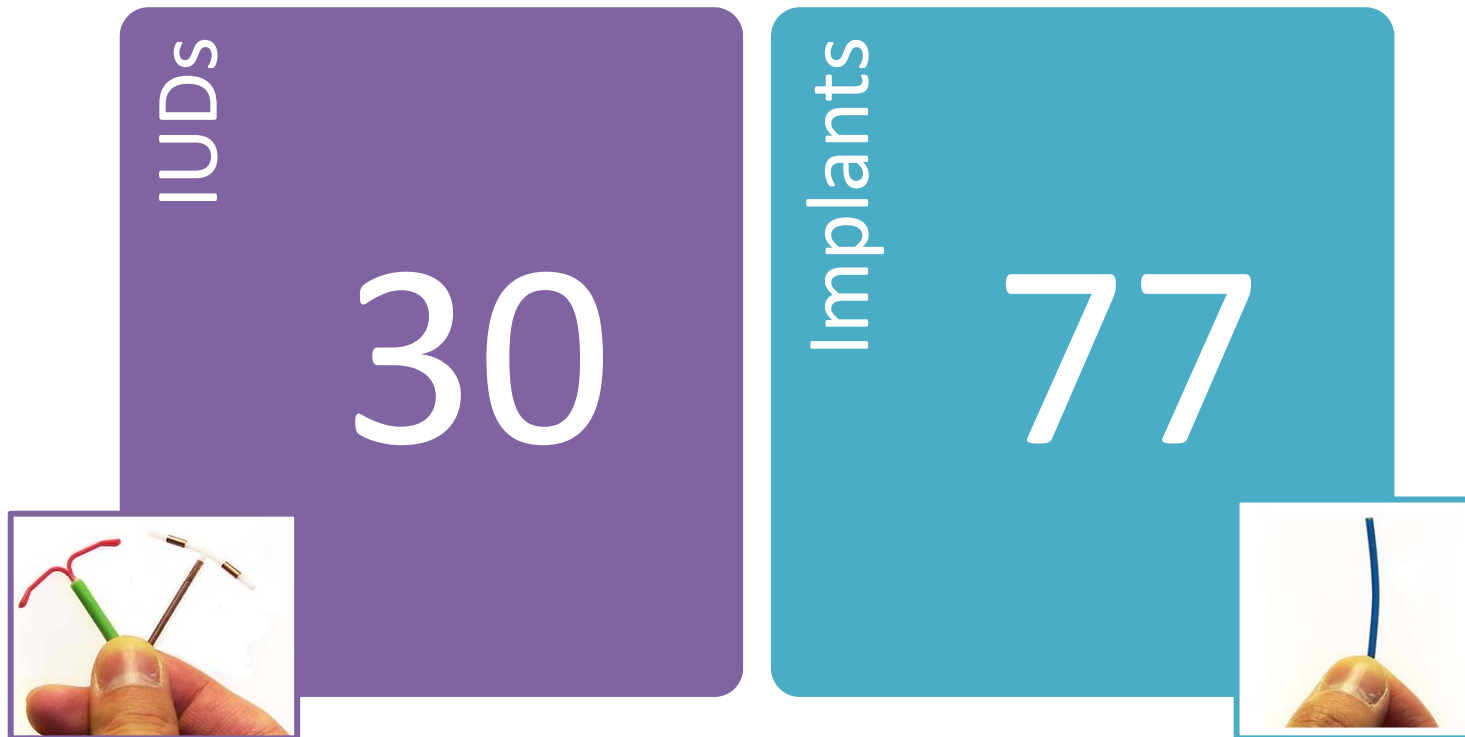
Pre-Implementation

5

Implementation

6

★ Devices placed ★



Data Tools for Implementation

Data Collection Sheet

ACCESS LARC: Implementation Phase Monthly Data Collection Form

Structural Measures	
Select the LARC device your hospital is implementing	<input type="radio"/> IUD <input type="radio"/> Implant <input type="radio"/> Both <input type="radio"/> None
Select the delivery sites where IUDs and ancillary equipment are available	<input type="radio"/> Vaginal delivery sites <input type="radio"/> Cesarean sites <input type="radio"/> Both <input type="radio"/> None
Are implants and ancillary equipment available on the postpartum unit?	<input type="radio"/> Yes <input type="radio"/> No
Select the LARC device(s) for which partnerships or educational efforts have been established with community prenatal care providers to promote postpartum contraceptive choice counseling for all appropriate women	<input type="radio"/> IUD <input type="radio"/> Implant <input type="radio"/> Both <input type="radio"/> None
Select the LARC device(s) for which policies have been developed to assure that contraceptive choice counseling is provided to women prior to delivery	<input type="radio"/> IUD <input type="radio"/> Implant <input type="radio"/> Both <input type="radio"/> None
Select the LARC device(s) for which policies have been developed to assure that contraceptive choice counseling is provided to women prior to discharge	<input type="radio"/> IUD <input type="radio"/> Implant <input type="radio"/> Both <input type="radio"/> None
Select the IT revisions that have been completed to assure adequate data collection, tracking and documentation for IUDs	<input type="checkbox"/> EHR for consent <input type="checkbox"/> Tracking tools <input type="checkbox"/> EHR for contraceptive choice counseling <input type="checkbox"/> All of the above <input type="checkbox"/> Order sets <input type="checkbox"/> None of the above
Select the IT revisions that have been completed to assure adequate data collection, tracking and documentation for implants	<input type="checkbox"/> EHR for consent <input type="checkbox"/> Tracking tools <input type="checkbox"/> EHR for contraceptive choice counseling <input type="checkbox"/> All of the above <input type="checkbox"/> Order sets <input type="checkbox"/> None of the above
Process Measures	
Cumulative percentage of physicians and midwives trained in immediate postpartum LARC insertion over initiative period	IUD % _____ Implant % _____
Cumulative percentage of delivering physicians and midwives trained in updated LARC counseling and consent process over initiative period	IUD % _____ Implant % _____
Cumulative percentage of OB nurses trained in updated LARC counseling and consent process over initiative period	IUD % _____ Implant % _____
Outcome Measures	
Number of LARC devices placed in the immediate postpartum period this month	_____ IUD(s) _____ Implant(s)

Questions? Please contact FPQC@health.usf.edu

Data Portal

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Access LARC: Implementation

Please complete the survey below based on the delivery of immediate postpartum LARC at your hospital. All questions are required. Thank you!

Hospital Information

Which hospital are you reporting for?

Which month are you reporting for?

Which year are you reporting for?

Structural Measures

Select the LARC device your hospital is implementing IUD Implant Both None

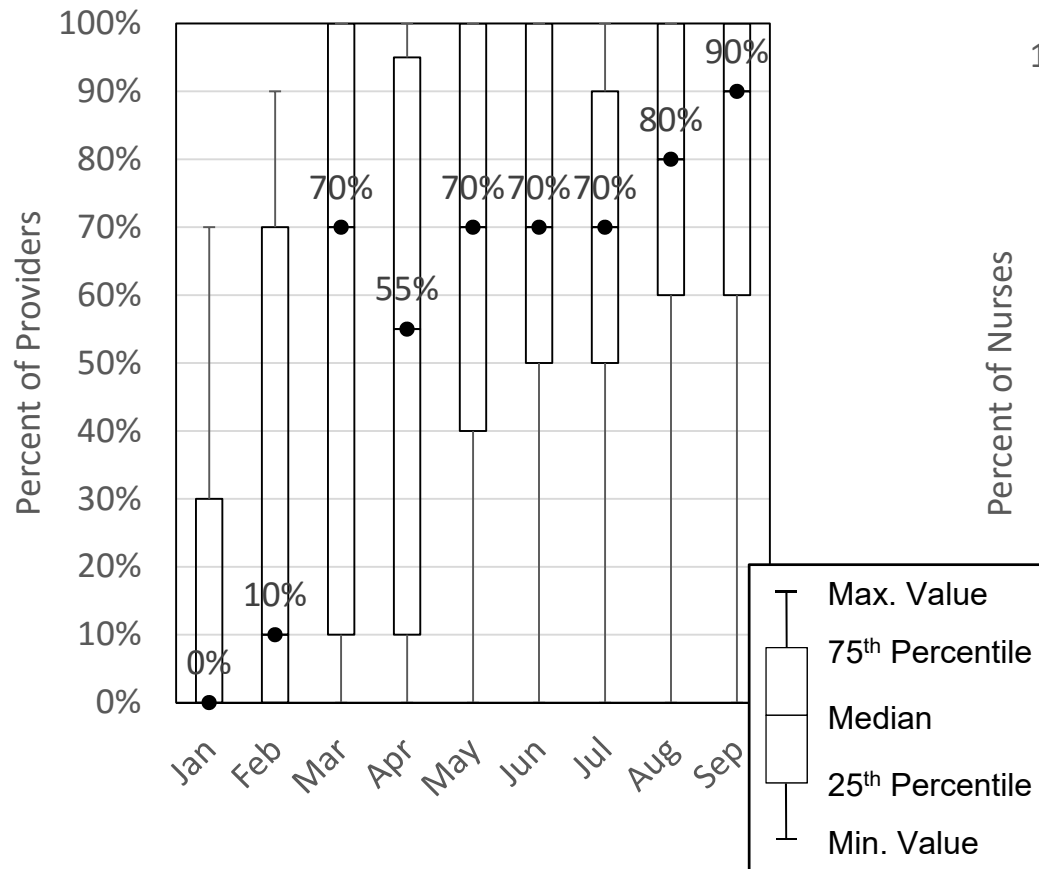
Select the LARC device(s) for which partnerships or educational efforts have been established with community prenatal care providers to promote postpartum contraceptive choice counseling for all appropriate women IUD Implant Both None

Select the LARC device(s) for which policies have been developed to assure that contraceptive choice counseling is provided for appropriate delivering women prior to delivery IUD Implant Both None

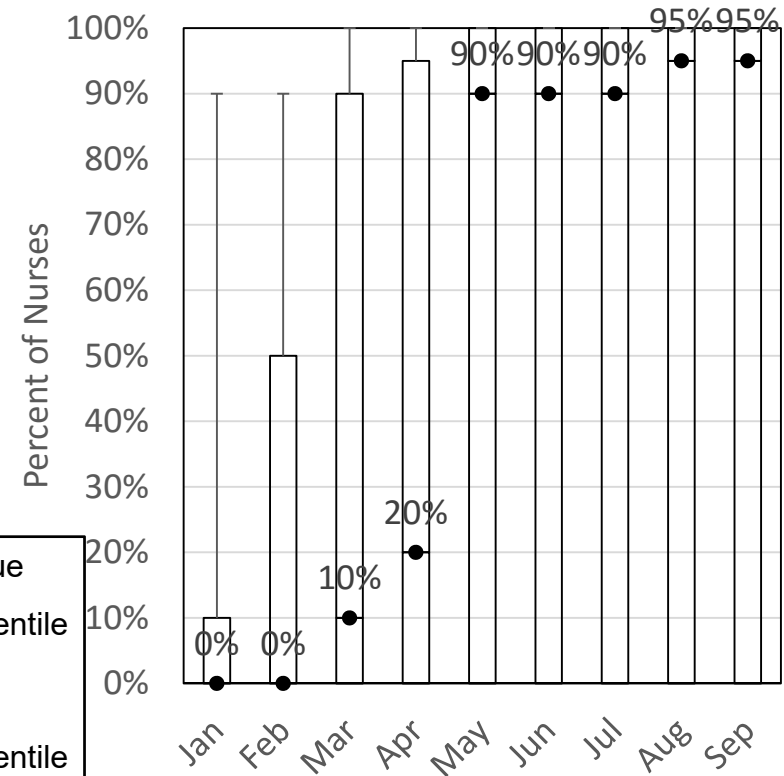
LINK TO DATA LEAD

Cumulative Percent of staff educated on the importance of offering immediate postpartum LARC

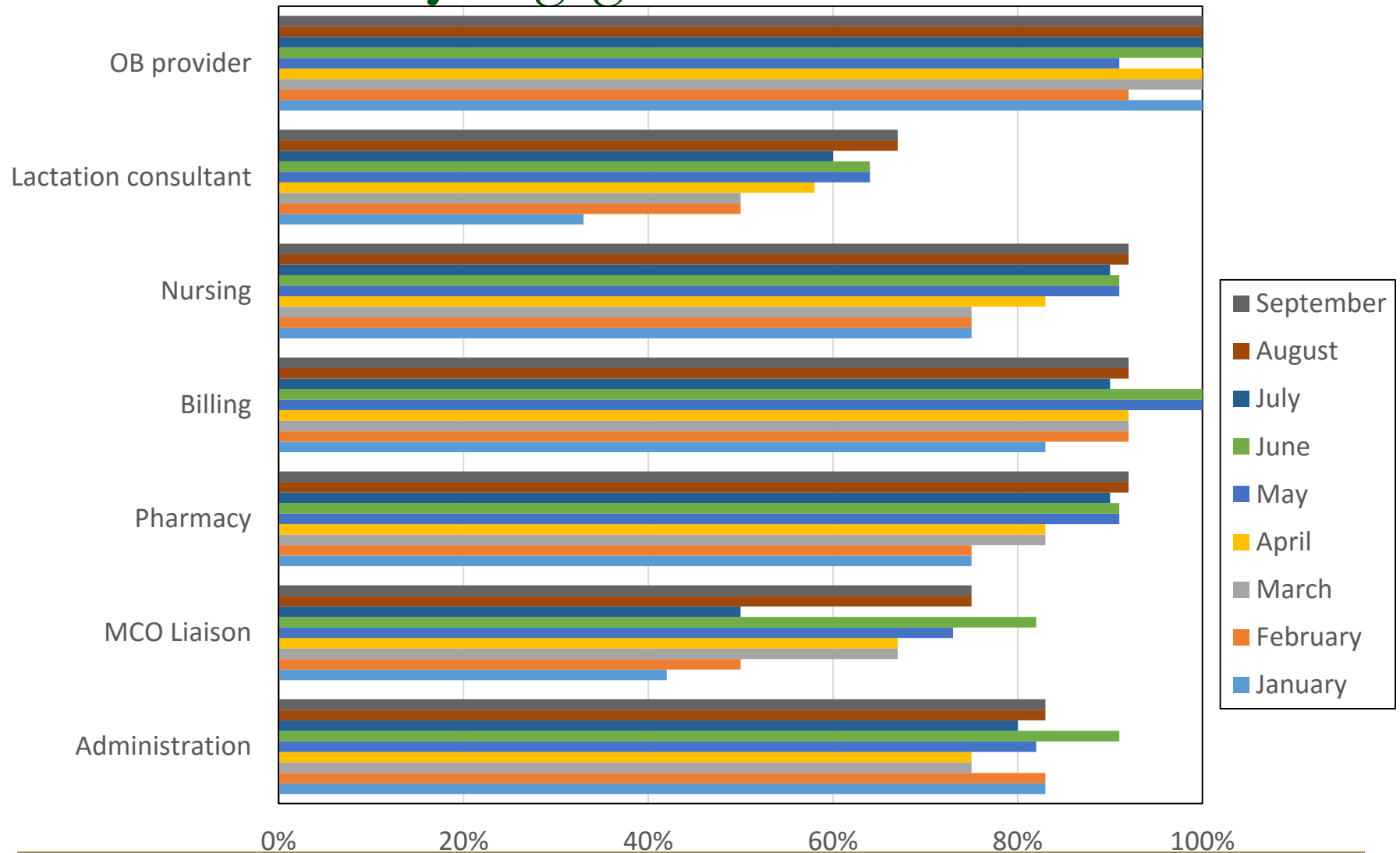
PROVIDERS



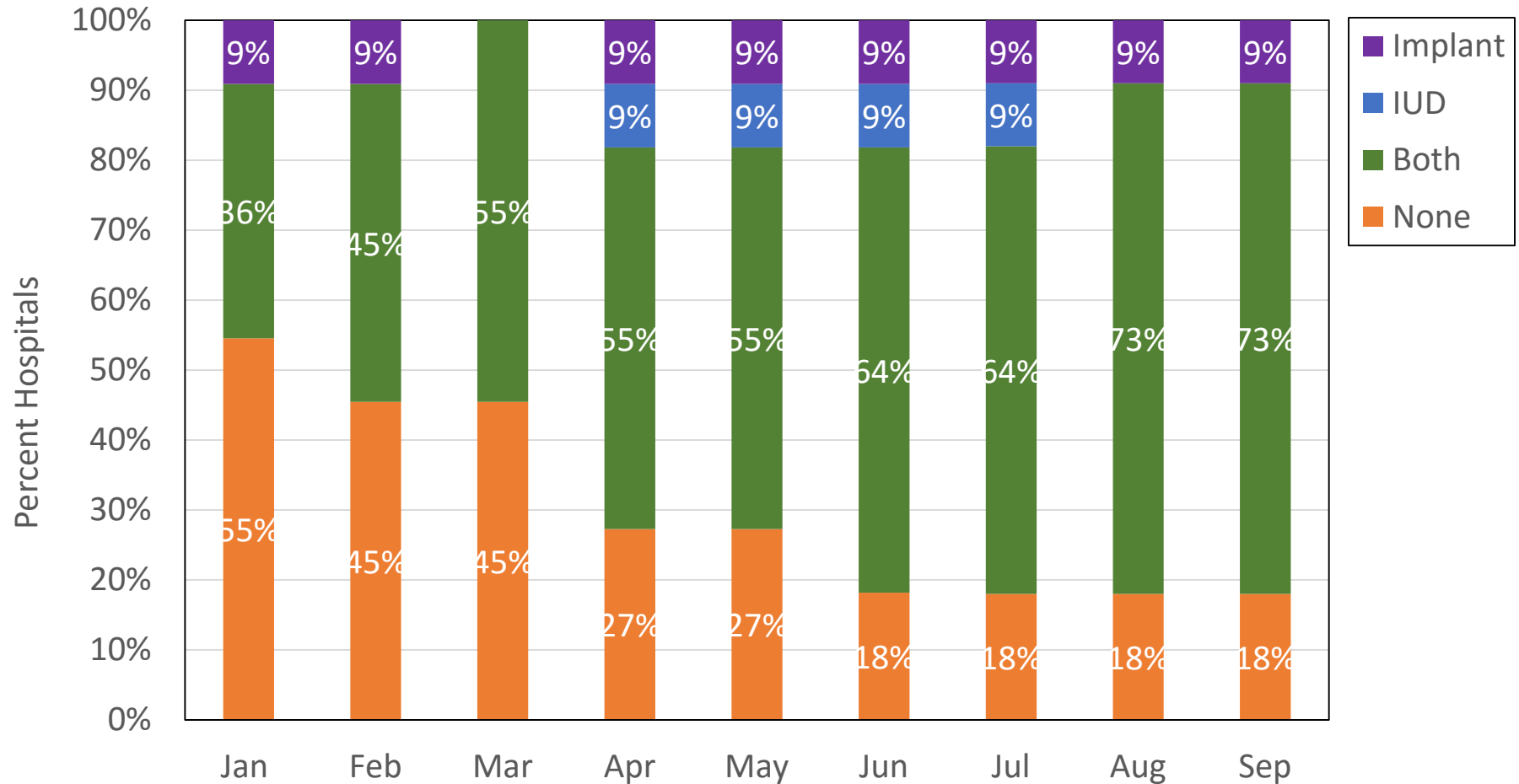
NURSES



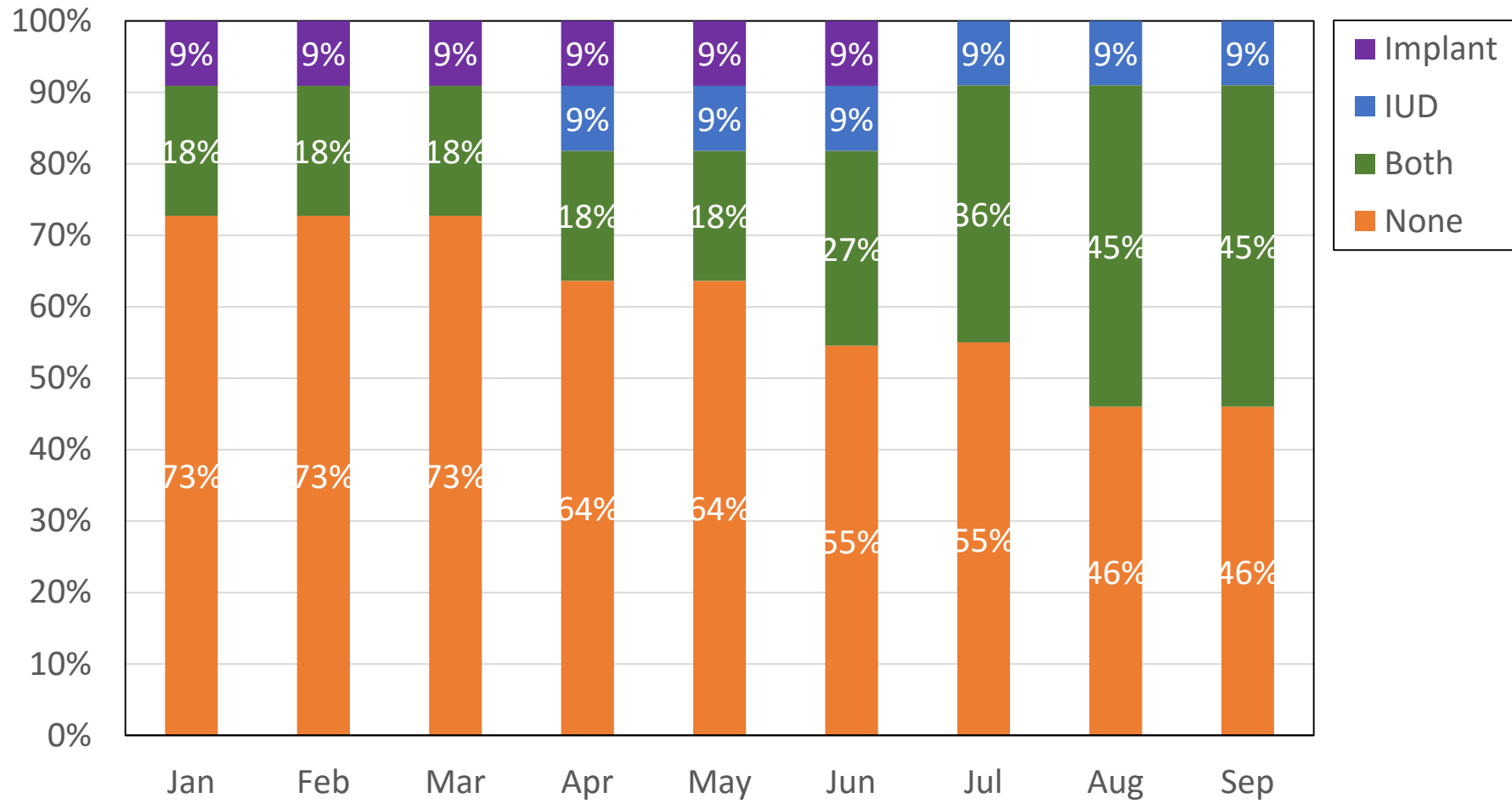
Percent of multidisciplinary and multidepartment teams **currently** engaged for Access LARC*



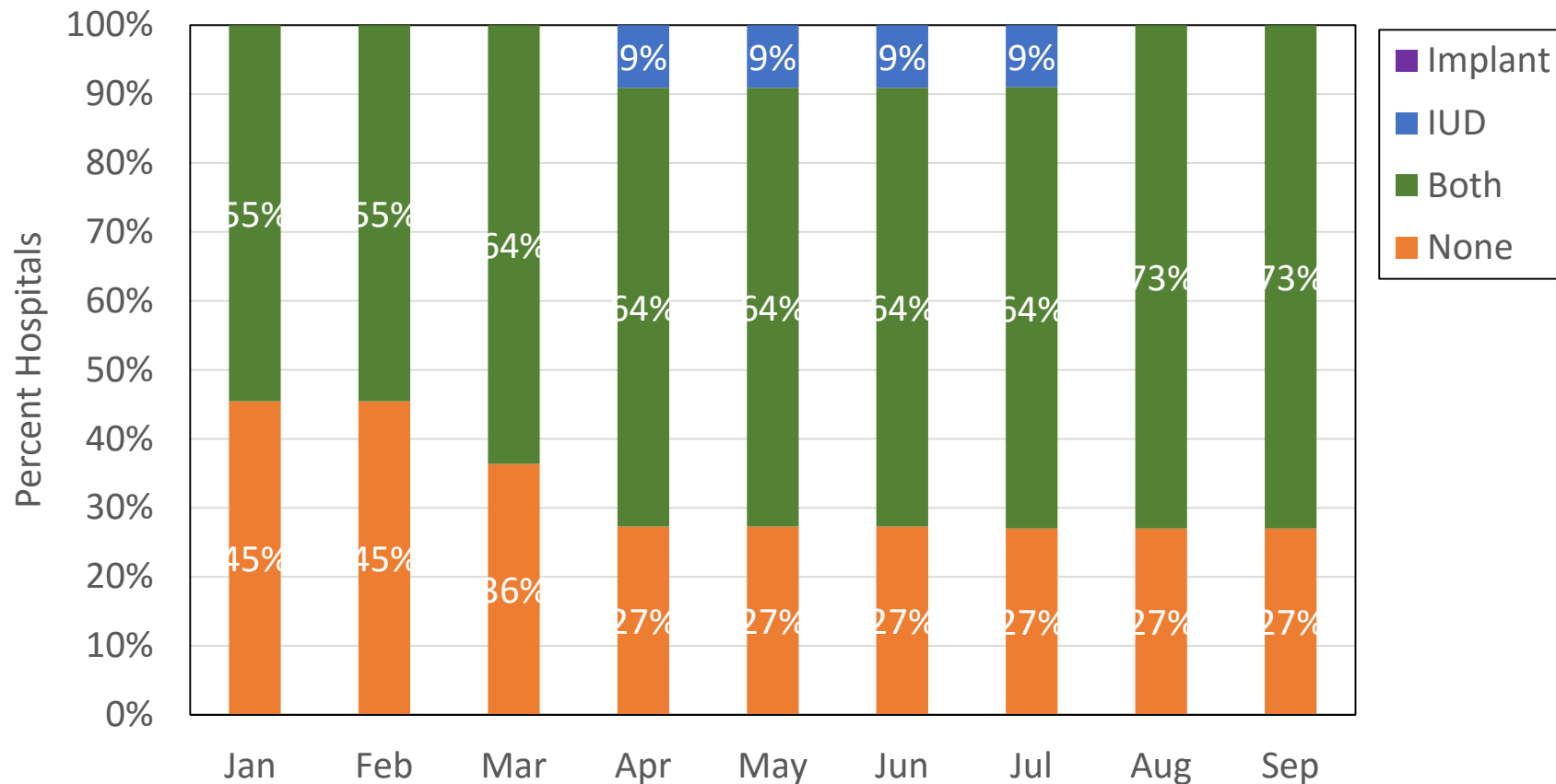
Percent of hospitals that have added LARC devices to the hospital formulary



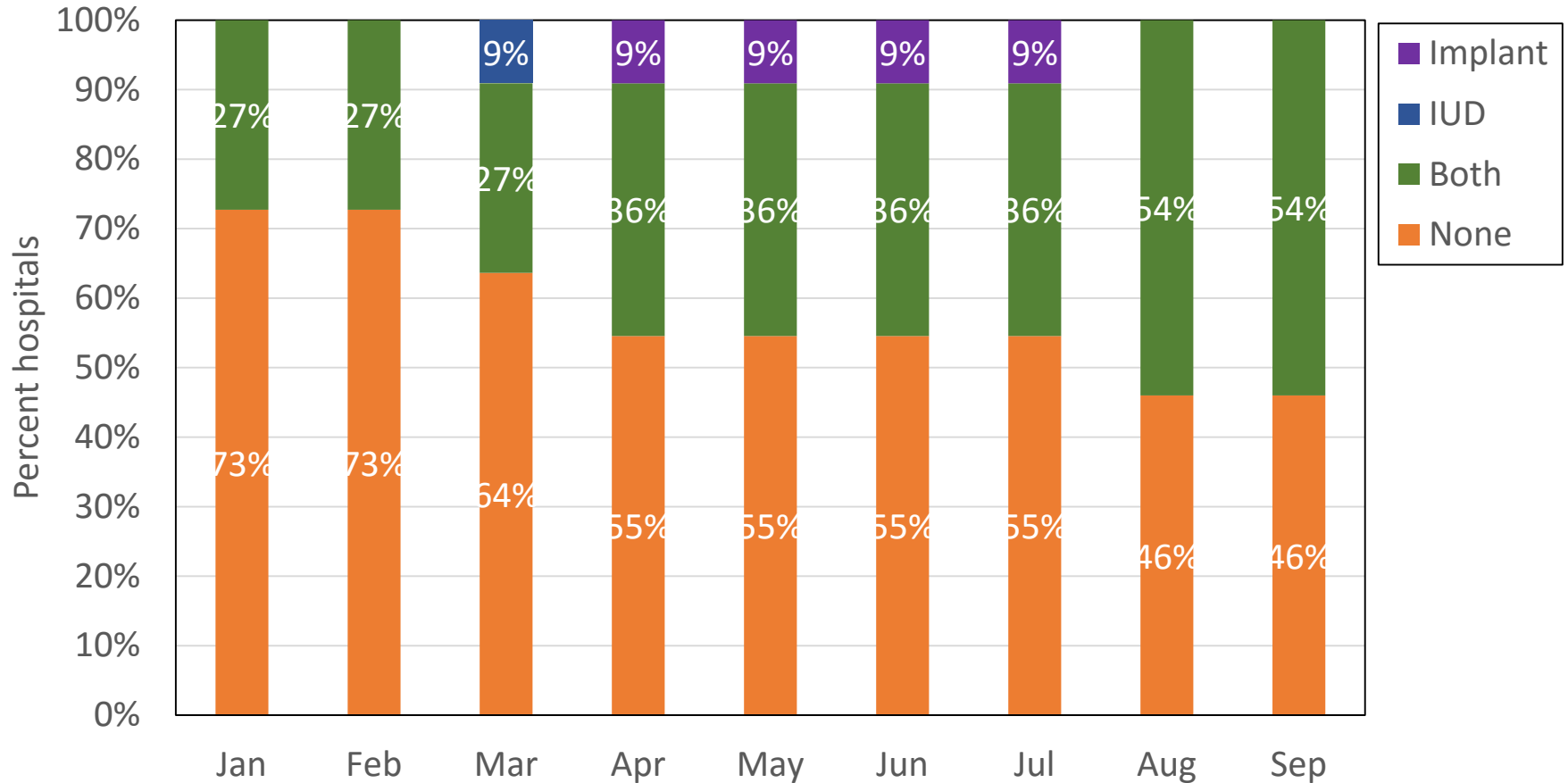
Percent of hospitals that have LARC devices and ancillary equipment available at all delivery sites



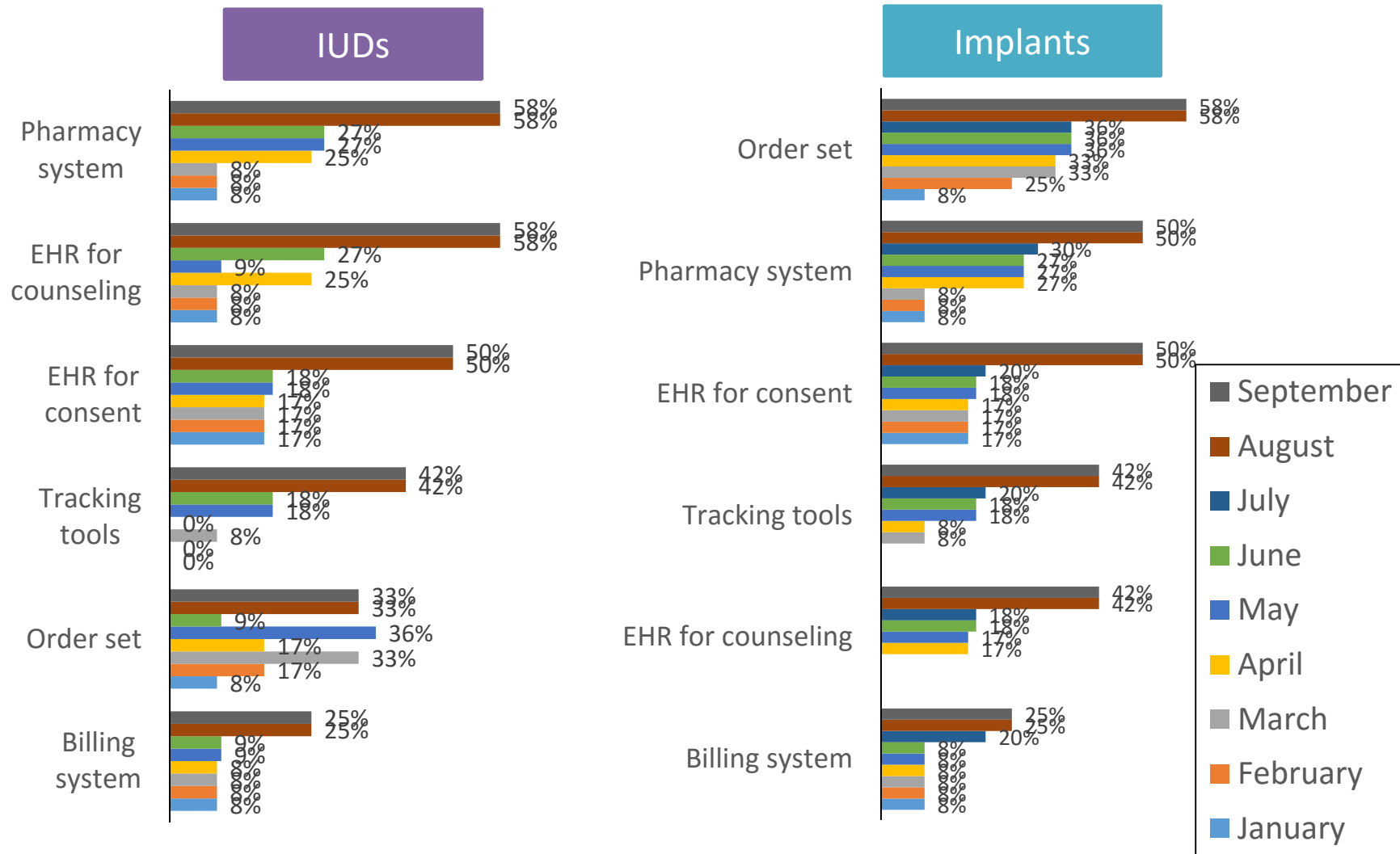
Percent of hospitals that are modifying policies, procedures and guidelines to support postpartum placement of LARC



Percent of hospitals that have established and tested billing codes for LARC devices



Percent of IT revisions that have been completed to support Access LARC





THANK YOU!

Technical Assistance:
erubio1@health.usf.edu

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Medicaid Updates

Janicka Harris, MPH
Bureau of Medicaid Quality
Agency for Health Care Administration



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Q & A

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HAPPY THANKSGIVING!

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