

# Celebrating Successes, Further Tips

### **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

3/13/19

- Welcome
- Announcements
- Final Team Report Outs
- Access LARC Data Summary
- Sustainability What PCAI Can Do For You
- Medicaid Update
- Final Comments



April 4-5, 2019

### Florida Perinatal Quality Collaborative

## ANNUAL CONFERENCE

Holiday Inn Tampa Westshore Tampa, FL





### **Session Topics**

- State of the FPQC
- Racial Disparity in Maternal Health
   Care
- Physicians Coaching Physicians to Reduce Cesareans
- Maternal Mental Health
- Antibiotic Stewardship

- Family Involvement in QI
- Racial and Ethnic Disparity in NICU Care Quality
- Change Management in QI
- Maternal Opioid Use Disorder
- Neonatal Abstinence Syndrome
- Medicaid's Quality Improvement Efforts



## Online Discussion Forums





Visit us @theFPQC on Facebook and find our "Groups"

### **Groups by This Page**

@TheFPQC



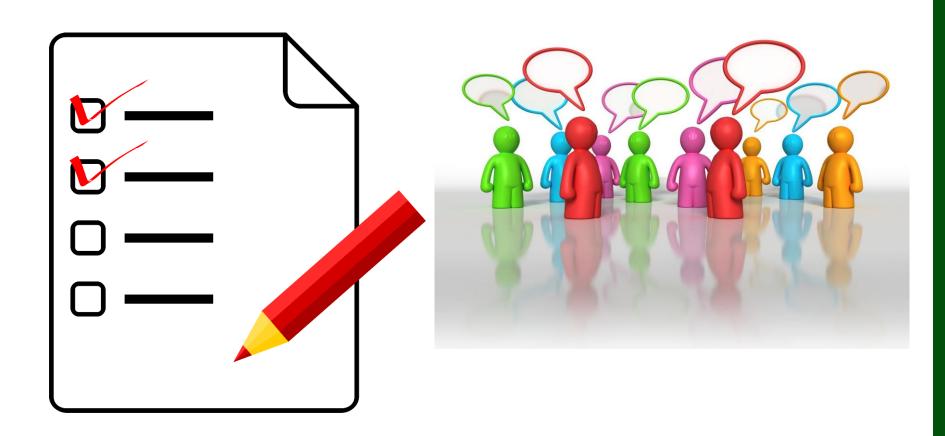
FPQC Maternal Health Discussion Forum Closed group



FPQC Infant Health Discussion Forum Closed group



# Final Team Report Out







# Access LARC Initiative-Wide Score Card

Estefania Rubio, MD, MPH, CPH

Partnering to Improve Health Care Quality for Mothers and Babies



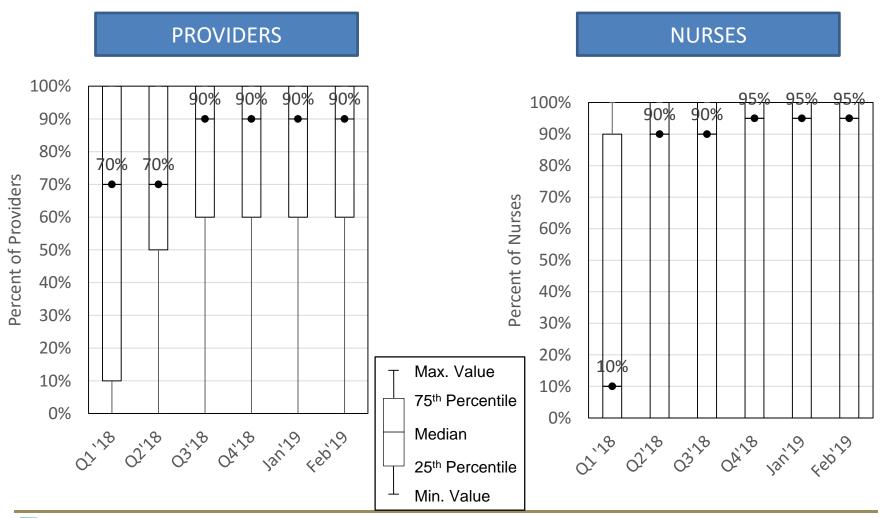




# Pre-Implementation

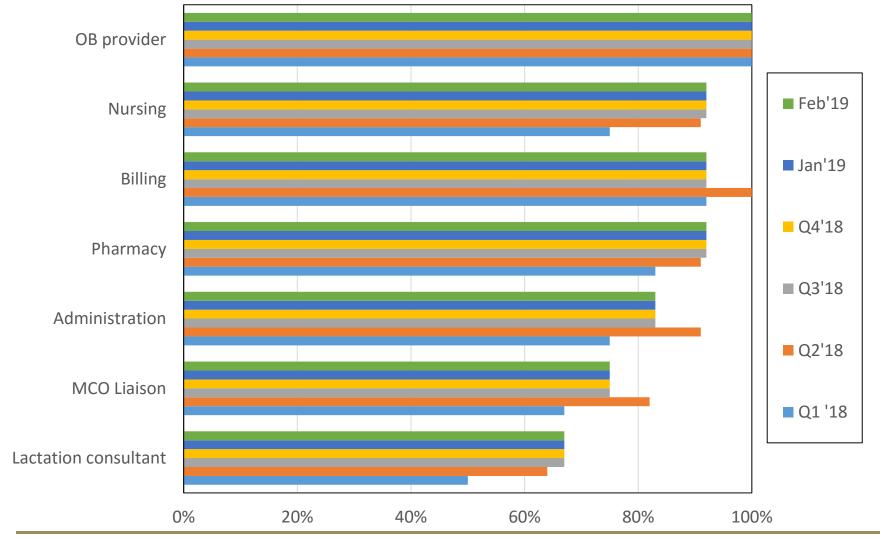


# Cumulative Percent of staff educated on the importance of offering immediate postpartum LARC





# Percent of multidisciplinary and multidepartment teams currently engaged in Access LARC





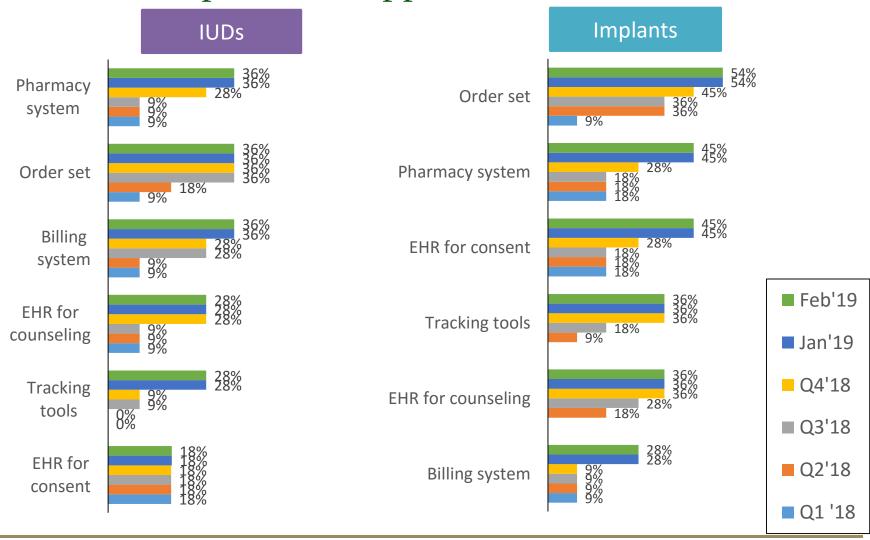
# Structural Measures

Percent of hospitals that:	January 2018	February 2019
added LARC devices to the <b>hospital formulary</b>	45%	83%
have LARC devices and ancillary equipment available at all delivery sites	28%	54%
are modifying policies, procedures and guidelines to support placement of ippLARC	54%	73%
have <b>established and tested billing codes</b> for LARC devices	28%	54%





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



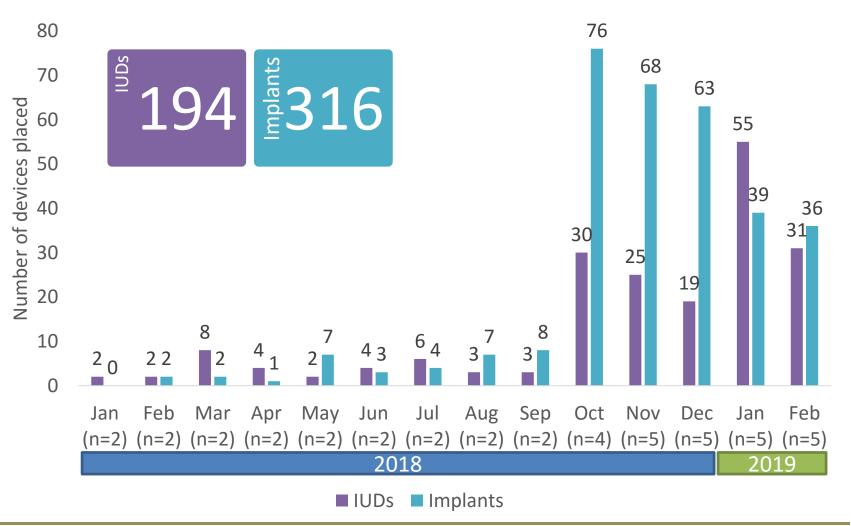








# Number of LARC devices placed





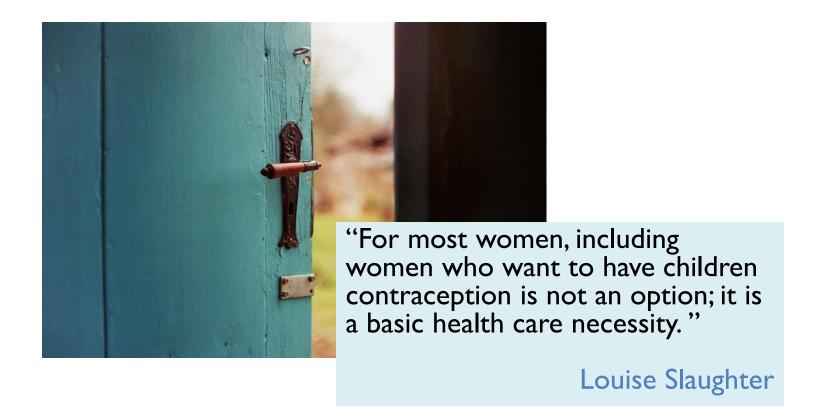


## Structural Measures

- All hospitals in the implementation phase have:
  - Educational efforts with community prenatal care providers to promote postpartum contraceptive choice counseling
  - Policies to assure that contraceptive choice counseling is provided prior to delivery and discharge
  - IT revisions for adequate data collection, tracking and documentation for IUDs and Implants
  - trained over 90% of physicians and midwives ipp insertion of IUDs and Implants
  - trained over 90% of physicians and midwives in updated LARC counseling and consent processes for IUDs and Implants













Mica Bumpus
ACOG LARC Program Director
FPQC
March 13<sup>th</sup>, 2019



The American College of Obstetricians and Gynecologists

WOMEN'S HEALTH CARE PHYSICIANS



## Roadmap: How can we support your work?

- Technical assistance
- Resources
- Training

... all for free! ©







**Postpartum Contraceptive Access Initiative** 

Our mission is to ensure women have access to the full range of contraceptive methods after delivery before leaving the hospital

### We provide:

- Technical assistance
- Onsite, individualized training
- Implementation support & resources

www.pcainitiative.org





# Immediate Postpartum LARC Data: What do we know?



Clinical Safety & Effectiveness



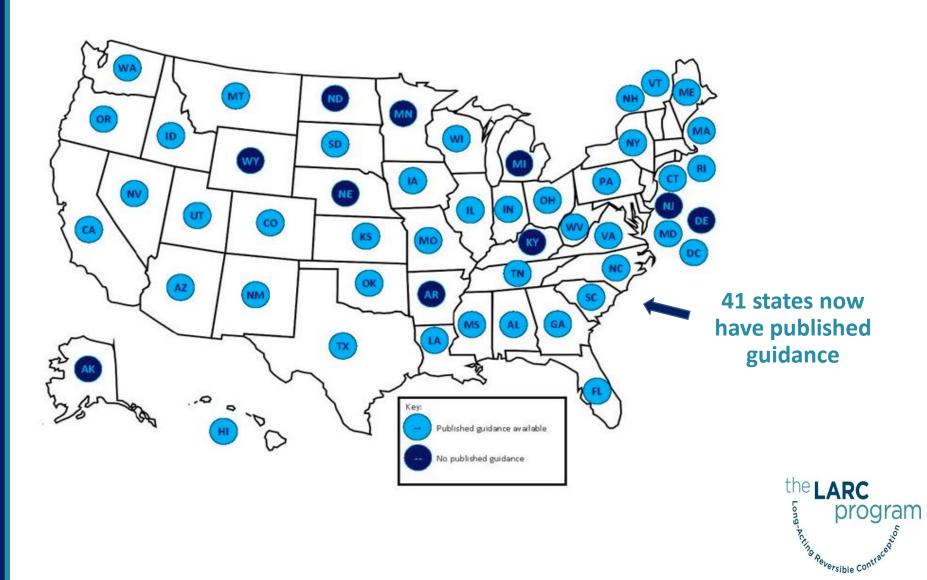
Cost Outcomes



Implementation

Images courtesy of Michelle Moniz, MD, MSc, FACOG





## 1. How can we support your work? **Technical assistance.**

- Submit LARC-related questions at this free, online technical assistance platform
- Free and open to all
- Access a knowledge base of resources



LARC Help Desk: www.acog.org/larc



## 2. How can we support your work? Training.



### **Clinical & Operational Support Training**

On-site, hands-on IPP LARC training for clinicians & operational systems support



### **Hands-On Clinical Training**

- Menu of 6 training options:
  - Capacity building
  - Clinical skills
  - Contraceptive Counseling
- Role of Nurses
- Breastfeeding
- Billing, coding & payment
- •Worked with hospitals, health systems, residency programs, perinatal quality collaboratives, and other professional organizations









3. How can we support your work? Resources.





HOME ABOUTUS WHAT WE DO CONTACT US QUICK NOTES SEARCH POSTPARTUM CONTRACEPTION V CLINICAL CONSIDERATIONS V CONTRACEPTIVE COUNSELING V IMPLEMENTATION NEARLY HALF OF ALL PREGNANCIES IN THE UNITED STATES ARE UNINTENDED. **LEARN MORE** 

The **Postpartum Contraceptive Access Initiative** prepares obstetrician—gynecologists and other health care providers to offer the full range of contraceptive methods to women after delivery through comprehensive, individualized trainings.

Expanding access to postpartum initiation of effective contraception, including LARC methods, can empower women to choose a method right for them, and can reduce rapid repeat and unintended pregnancies.

MORE INFORMATION





POSTPARTUM CONTRACEPTION >

CLINICAL CONSIDERATIONS >

CONTRACEPTIVE COUNSELING >

IMPLEMENTATION

DESCRIBE LIBRARY

### **ACOG RESOURCES**

CLINICAL GUIDANCE CONTRACEPTIVE COUNSELING PATIENT EDUCATION IMPLEMENTATION, PAYMENT & POLICY TRAINING

#### Clinical Guidance

- ACOG Practice Bulletin #186: Long-Acting Reversible Contraception: Implants and Intrauterine Devices
- ACOG Committee Opinion #670: Immediate Postpartum Long-Acting Reversible Contraception
- ACOG Committee Opinion #672: Clinical Challenges of Long-Acting Reversible Contraceptive Methods
- ACOG Committee Opinion #642: Increasing Access to Contraception
- ACOG Committee Opinion #615: Access to Contraception
- ACOG Committee Opinion #735: Adolescents and Long-Acting Reversible Contraception: Implants and Intrauterine Devices
- ACOG Committee Opinion #710: Counseling Adolescents About Contraception
- ACOG Committee Opinion #699: Adolescent Pregnancy, Contraception, and Sexual Activity
- ACOG Committee Opinion #736: Optimizing Postpartum Care

Learn more about immediate postpartum LARC clinical considerations here





### **Training**

### **PowerPoints**

Coming Soon!

- Immediate Postpartum LARC for Clinicians Doing Deliveries
- The Role of Nursing in Immediate Postpartum LARC Implementation
- Contraceptive Counselling for the Immediate Postpartum Period
- Immediate Postpartum Contraception and Breastfeeding

### **Webinars**

- Immediate Postpartum LARC for Clinicians Doing Deliveries
- ☑ The Role of Nursing in Immediate Postpartum LARC Implementation
- Contraceptive Counselling for the Immediate Postpartum Period
- Immediate Postpartum Contraception and Breastfeeding

#### **Videos**

- ACOG LARC Program LARC Video Series
- ACOG District II LARC: Hospital-Based Physician Initiative Video Series
- Immediate Postpartum IUD Insertion Videos



HOME ABOUTUS WHAT WE DO CONTACT US QUICK NOTES

POSTPARTUM CONTRACEPTION ✓ CLINICAL CONSIDERATIONS ✓

CONTRACEPTIVE COUNSELING >

IMPLEMENTATION

### **OTHER RESOURCES**

ADVOCACY & POLICY CONTRACEPTIVE COUNSELING PAYMENT TOOLKITS

### **Advocacy & Policy**

Association of State and Territorial Health Officials

- Increasing Access to Contraception
- LARC Learning Community
- LARC FACT Sheet

Centers for Disease Control and Prevention

- Medicaid Contraception Return on Investment Tool Coming Soon!
- Report: Working with State Health Departments on Emerging Issues in Maternal and Child Health Immediate Postpartum Long-Acting Reversible Contraception
- 6 | 18 Initiative: Prevent Unintended Pregnancy

Guttmacher Institute Fact Sheets:

- Contraceptive Use in the United States
- Unintended Pregnancy in the United States

Implementing Immediate Postpartum Long-Acting Reversible Contraception Programs





The **Postpartum Contraceptive Access Initiative** prepares obstetrician—gynecologists and other health care providers to offer the full range of contraceptive methods to women after delivery through comprehensive, individualized trainings.

Expanding access to postpartum initiation of effective contraception, including LARC methods, can empower women to choose a method right for them, and can reduce rapid repeat and unintended pregnancies.

MORE INFORMATION



# How can we help?

- Technical assistance
- Resources
- Training

... all for free! ©



## Questions?

Mica Bumpus
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More information: www.pcainitiative.org

www.acog.org/LARC



# Statewide Medicaid Managed Care (SMMC) Quality Initiatives – Birth Outcomes

# Florida Perinatal Quality Collaborative Webinar

March 13, 2019

**Medicaid Quality** 



# Goals for Today's meeting

- 1. Share the most common interventions submitted by the health plans for improving birth outcomes
- 2. Share Agency's stakeholder outreach efforts



## **New SMMC Program Goals**

The Agency is committed to ensure continuous quality improvement by working to:



### REDUCE POTENTIALLY PREVENTABLE EVENTS

- Admissions
- Readmissions
- Emergency department visits



### **IMPROVE BIRTH OUTCOMES**

- Reduce Primary Cesarean Section (C-section) Rate
- Reduce Pre-term Birth Rate
- Reduce Rate of Neonatal Abstinence Syndrome (NAS)



### **IMPROVE CARE TRANSITIONS**

 Increase the percentage of enrollees receiving long-term care services in their own home or the community instead of a nursing facility



### IMPROVE ACCESS TO DENTAL CARE

- Increase the percentage of children receiving preventive dental services
- Reducing potentially preventable dental related emergency department visits

# Birth Outcomes: Common Interventions



# Reducing Primary C-sections: Common Intervention Themes (14 plans)

### Provider and Member Engagement (100%)

Provider and member education on the appropriateness of C-section delivery

### Value-Based/Incentive Programs (93%)

 Adopt value-based payment strategies for non-medically necessary Csections at the normal delivery rate

### Community Partnerships (53%)

 Establish and maintain stakeholder partnerships for effective collective impact to support quality improvement efforts.

## Expand Access to Services (43%)

 Expand use and integration of midwives or doula services for pregnancy management and reproductive life planning



# Reducing Pre-term Deliveries: Common Health Plan Interventions (14 plans)

### Healthy Behaviors Programs (100%)

- Conduct member education, screening, and outreach initiatives
- Pre-term birth prevention education and family planning options
- Incentivize members for enrollee compliance and prenatal care visit milestones

### Progesterone Treatment Initiatives (79%)

- Ensure availability of 17 alpha-hydroxyprogesterone caproate (17P)/Makena
- Coordinate referrals to 17P/Makena in office or home setting

### Value-Based Purchasing (57%)

Employ obstetrician payment model for improved maternity care practices

### Reproductive Life Planning (50%)

AHCA.MyFlorida.com

- Increase access to a variety of contraceptive options
- Ensure process for immediate postpartum and inter-conception care

# Reducing NAS: Common Health Plan Interventions (14 plans)

### Healthy Behavior Substance Use Programs (100%)

 Inclusion of interventions and incentives to reward members for meeting medication and substance abuse treatment milestones

### Substance Abuse Treatment Programs (86%)

- Early identification of pregnant women using opioids
- Increase access and referrals to Medication Assisted Treatment (MAT) Programs

## Provider Engagement (50%)

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- Provider education on early identification of substance use in pregnant enrollees, referral, and treatment
- Train obstetrical providers on SBIRT screenings and other key assessments

### Value-Based Payment/OB Incentive Programs (36%)

 Develop value-based arrangements with the inclusion of telehealth services to increase quality providers that treat pregnant women using opioids.

## **Outreach Efforts**

- Conducted the following outreach and research activities:
  - SMMC pre-meeting
  - Stakeholder public meeting
  - Key informant interviews:
    - Florida March of Dimes 17P Team three (3) plans
    - Access LARC Initiative five (5) plans



## **Access LARC – Interview Findings**

### **ACCOMPLISHMENTS**

Access to Services

Unbundled LARC device and insertion from L&D DRG payment (inpatient) - MMA

Note: 2 plans shared that they offer providers a reimbursement rate ↑ FFS rate.

### LESSONS LEARNED

Provider Engagement

Effective communication and collaboration with hospital facilities in service areas is vital.

### **IMPROVEMENT OPPORTUNITIES**

Communication

Inform hospitals of unbundled services for MMA recipients who choose to receive LARC services in an inpatient setting.

Provider Billing

Educate providers on billing steps for IPP (inpatient).

Reproductive Ethics

Focus on encouraging member autonomy, promoting contraceptive counseling and education during prenatal visits.

100

%

of health plans





Partnering to Improve Health Care Quality for Mothers and Babies

# Q & A

If you have a question, please enter it in the Question box or Raise your hand to be un-muted.

We can only unmute you if you have dialed your Audio PIN (shown on the GoToWebinar side bar).















# THANK YOU!







Partnering to Improve Health Care Quality for Mothers and Babies

We are always here for you!



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@TheFPQC



Join our mailing list at FPQC.org



E-mail: FPQC@health.usf.edu