GROWING PAINS, SEEING GAINS: IMPROVING YOUR TRANSITIONS

NASHP Presentation



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Disclosures

- No disclosures
- The National Alliance to Advance Adolescent Health operates Got Transition, which is funded by the federal Maternal and Child Health Bureau (U1TMC31756)

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2

Learning Objectives

1. Provide brief overview of HCT state-of-art and Got Transition's program
2. Offer lessons/resources for state policymakers on HCT related to new directions in:
   - Quality improvement examples
   - Public health and preventive care initiatives
   - Measurement and evaluation
   - Managed care contracting and value-based payment

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Transition Goal and Reality

- **Goal**: Health care transition (HCT) should be an integral component of preventive, primary, and chronic care for all adolescents and young adults.
  - 2011 AAP/AAFP/ACP Clinical Report on Transition
  - 2017 PCMH Standards (NCQA)
  - 2015 Federal MCHB Performance Measure on Transition
- **Reality**: Among US adolescents:
  - 83% of YSHCN did **not** receive transition planning guidance from MDs/health care providers
  - 86% of youth without special needs did **not** receive transition planning guidance from MDs/health care providers

Source: 2016 National Survey of Children's Health

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5-year federally funded national resource center, 2018-2023

Goals:

1. Increase adoption of evidence-informed HCT interventions
2. Engage youth/young adults/parents in importance of planned transitions
3. Provide education and training on HCT
4. Strengthen HCT evidence and policy analysis
5. Operate a national clearinghouse on HCT (www.gottransition.org)
6. Establish new network with AAP's Medical Home Center and Boston University's Catalyst Center

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5

HCT Clinical Foundations

- 2011 AAP/AAFP/ACP Clinical Report on HCT (update expected in coming months)
  - Expert opinion/consensus recommendations
  - Algorithm for standardizing HCT process
- Six Core Elements of HCT
  - Aligned with Clinical Report
  - Define basic components of HCT support with linked customizable tools and measurement resources

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6

AAP/AAFP/ACP Clinical Report on HCT

- In 2011, Clinical Report on Transition published as joint policy by AAP/AAFP/ACP
- Targets all youth, beginning at age 12
- Algorithmic structure with:
  - Branching for youth with special health care needs
  - Application to primary and specialty practices
- Extends through transfer and establishment of care to adult medical home and adult specialists
- Clinical Report recently renewed by the AAP

Age 12	Youth and family aware of transition policy
Age 14	Health care transition planning initiated
Age 16	Preparation of youth and parents for adult approach to care and discussion of preferences and timing for transfer to adult health care
Age 18	Transition to adult approach to care
Age 18-22	Transfer of care to adult medical home and specialists with transfer package

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*Supporting the Health Care Transition from Adolescence to Adulthood in the Medical Home (*Pediatrics*, July 2011)

7

Six Core Elements of HCT

- Evidence-informed QI approach for implementing Clinical Report, developed by Got Transition and widely implemented in primary, specialty, managed care, SBHCs, FQHCs, behavioral health
- Tools available in English and Spanish for free
- See handouts (Side by Side with sample tools from pediatric package)
- Easy-to-use measurement options available

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8

Lessons/Resources: Quality Improvement Examples

- Large integrated care/ACOs are forming pediatric/adult QI teams to customize & pilot 6 Core Elements process and tools
- Children's hospitals and many pediatric primary and specialty clinics are establishing structured approaches
- Health plans are adapting the core elements for their enrollees and engaging their contracted providers in providing recommended HCT supports
- SBHCs and mental health programs are selecting specific core elements and customizing for their students and populations with behavioral health needs

Resources: Got Transition's Current Assessment of HCT Activities, Practice Resource Tip Sheets (Starting a HCT Improvement Process, Incorporating Transition into NCQA PCMH Recognition, Coding and Reimbursement Tip Sheet)

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9

Lessons/Resources: Public Health and Preventive Care Initiatives

- State Title V-supported care coordination (CC) programs: Got Transition conducted a baseline assessment of HCT implementation level (in 27 out of 33 states that selected HCT as priority).
  - More than half of state Title V CC programs were at level 1 or 2 (out of 4) for each of the Six Core Elements.
  - To support HCT improvements, Got Transition put together webinar series on putting core HCT elements into CC programs.
  - Follow-up HCT assessments of CC programs in field now.
- GT with UCSF and national advisory group created clinician toolkit, "Incorporating HCT into Preventive Care For Adolescents and Young Adults," can be used as supplement to Bright Futures (same age groups and format, suggested questions and anticipatory guidance, and sample tools). This free toolkit can be used in EPSDT programs (DC example)

Resources: GT Webinar Series on Care Coordination, Report: Baseline Assessment of HT Implementation in Title V Care Coordination Programs, Preventive Care Clinician Toolkit, Youth HCT Quiz

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10

Lessons/Resources: Measurement and Evaluation

- **Population Health Measures and Positive Outcomes**:
  - Adherence to care, self-care skills, disease-specific measures, transitional care process (Current Assessment of HCT Activities)
- **Experience of Care Measures and Positive Outcomes**:
  - Youth/family experience with transition process
  - Youth/young adult experience with care
  - Clinician experience with transition process
- **Utilization/Costs Measures and Positive Outcomes**:
  - Time between last pediatric and first adult visit
  - Use of adult preventive/primary care in adult setting
  - Emergency room visits
  - Hospital admissions
  - Cost of care (few studies)

Resources: Measuring the 'Triple Aim' in Transition Care: A Systematic Review (Prior); Outcome Evidence for Structured Pediatric to Adult HCT Interventions: A Systematic Review (Gabriel)

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11

Lessons/Resources: Managed Care Contracting and Value-Based Payment

- Upcoming effort with NASHP to review Medicaid MC contracts to identify HCT contract requirements and develop options for states to consider (as part of medical home, EPSDT, care coordination…)
- Soon-to-be released Got Transition Report on VBP Payment Options for HCT (Packard-funded)
  - Based on input from key informant interviews with > 50 stakeholders from CMS, state Medicaid agencies, commercial payers, employers, health plans/ACOs, professional organizations, researchers, advocacy groups
  - In-person meeting with 25 leaders
  - Report will contain a prioritized set of VBP options, including examples of ways that plans and payers can structure these innovative payment arrangements and prioritized recommendations for quality performance
  - Critical need for payers to initiate payment pilots to support HCT innovations

Resources: Keep checking www.gottransition.org.

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12

Want more information?
Got Transition: Federally funded resource center on HCT
www.gottransition.org



13

Thank You and Questions



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14