



**MICHIGAN HEALTH**

**ENDOWMENT FUND**

**Harnessing the Power of Analytics**

**Creating Innovative Solutions for People with Complex Conditions**

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Open Minds Strategy & Innovation Institute



# Today's Discussion

## **National Environment**

Policy Changes, Industry Trends, Future Care Delivery

## **Payer Preference**

Value Based Models, Incentivizing Practice Change

## **Providers**

Data Analytics for Meaningful Strategy

## **Provider Opportunity**

Disruptive Business Models



# National Environment

Policy Changes  
Industry Trends  
Future Care Delivery

# National Environment: Policy, Trends, Behavioral Health (BH) Care Delivery

## Policy

- **Integration:** Problem solving-gaps in service, complex populations
- **Managed Care & Value-Based Purchasing:** Incent change for high-cost or high-risk

## Trends

- **Social Determinant:** impact on physical health (PH) and BH
- **Barrier Removal:** Secure info sharing
- **Structure:** Carve-in, provider risk share, increasing community provider managed care for complex populations

## Care Delivery

- **Workforce:** Demand vs. supply
- **Integration:** Data driven, strategically target problems (for mutual benefit)
- **Health Information Exchange (HIE):** Cross provider “use” driven
- **Analytics:** What do you have? what is missing? Who has it? What mutual problem can be solved if we both share? How much disruption in practice can I tolerate? What disruption in others’ practice do I need? What are the legal boundaries to harnessing and using data?



# Harnessing Data to Inform Policy & Strategy

*Viewpoint: Michigan*

# Informing Policy & Delivery System Strategy

*Michigan's Journey*

## **Provider Information Sharing**

Right Information. Right Time. Clinical Use-Case Driven. Secure. Consent protected.

## **Data Sharing for System Learning & Action**

- Value Based Purchasing (VBP)
- Incentivizing Practice Change
- Purposeful Disruption

**Michigan Non-Profit Tech & Data Advancements** (view from Michigan Health Endowment Fund)

# Health Information Exchange Backbone

*Hub and Spoke Network of Networks*



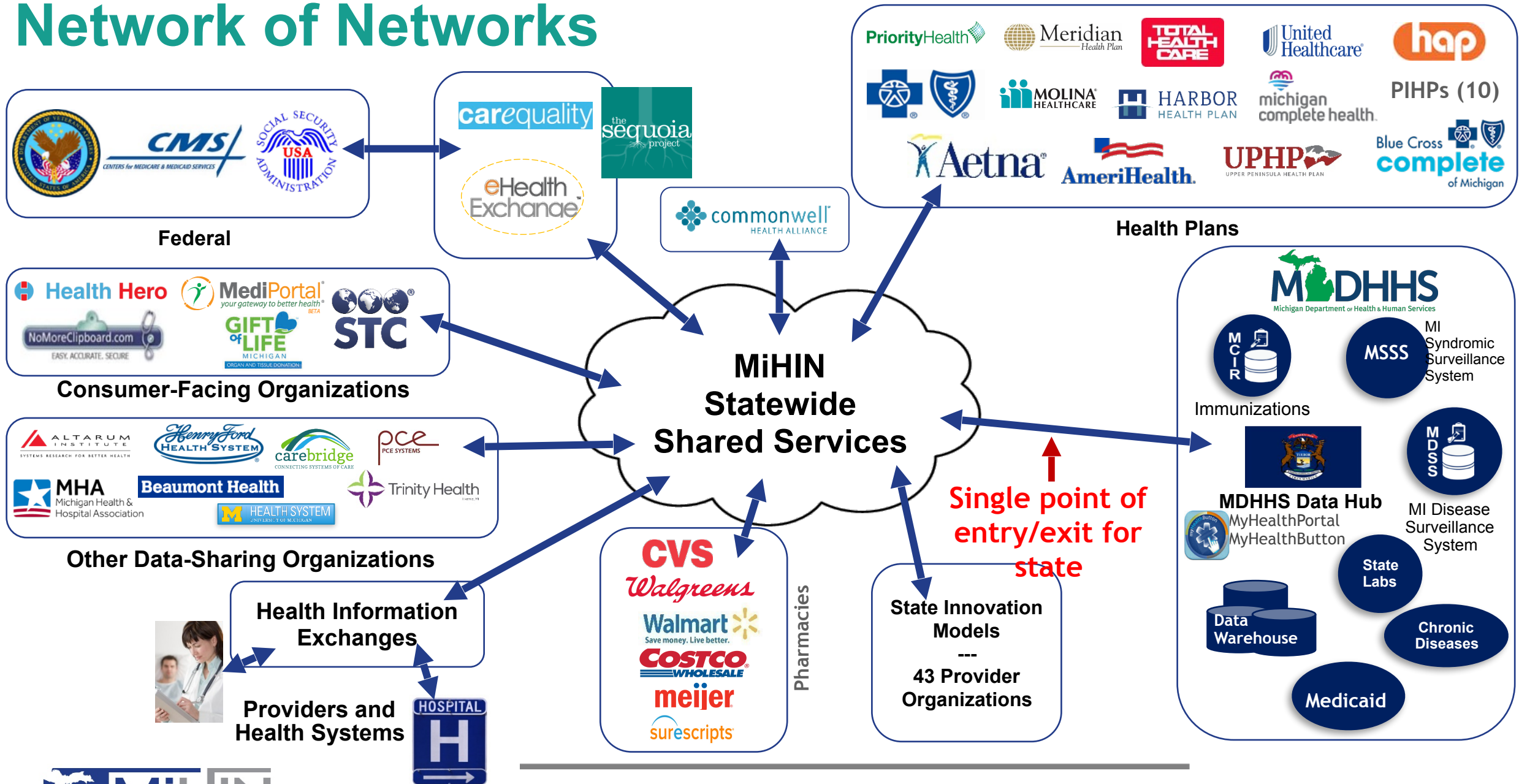
MiHIN is Michigan's **entity** to continuously improve healthcare quality, efficiency, and patient safety by promoting secure, electronic exchange of health information. MiHIN represents a growing network of public and private organizations working to overcome data sharing barriers, reduce costs, and ultimately advance the health of Michigan's population.



## **Michigan Health Information Network Shared Services (MiHIN)**

A network for sharing health information statewide for Michigan

# Network of Networks

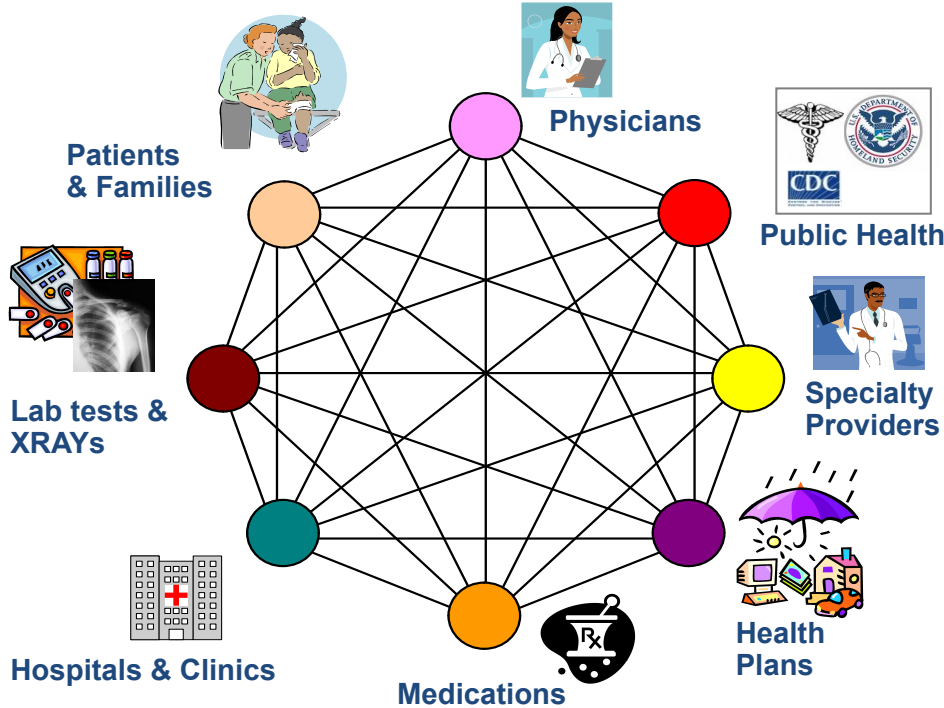




# Statewide Health Information Exchange Creates Efficiency

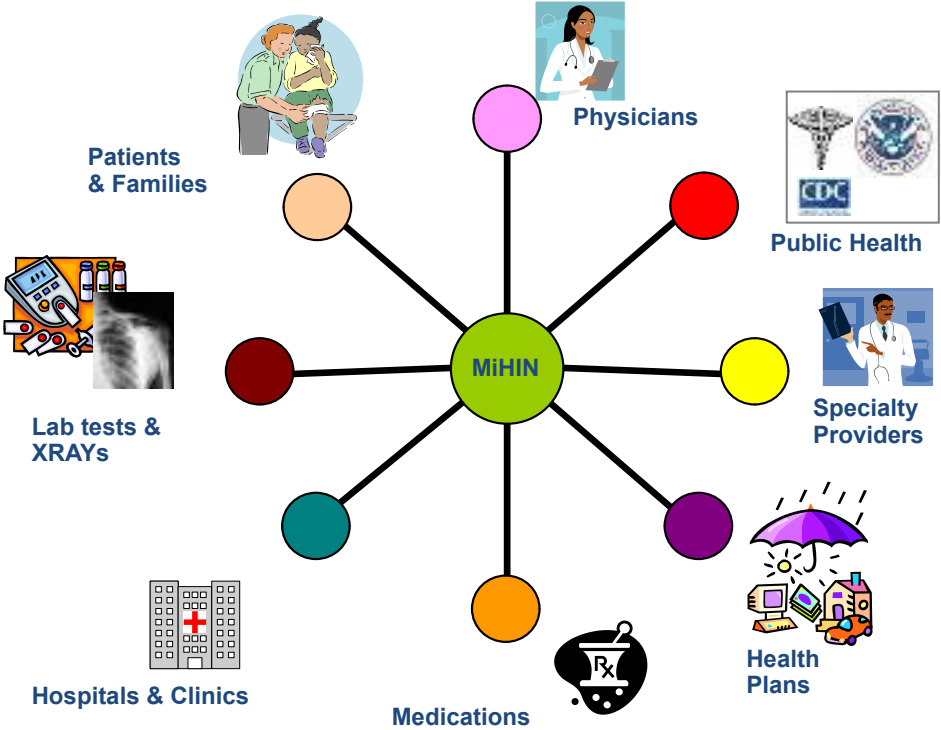
## BEFORE

Duplication of effort,  
waste and expense



## NOW

Connect once to access  
shared services



# Example Today: Admission, Discharge, Transfer Notifications

Keeping care team members informed on a patient's major health events

1

When Tricia goes to the hospital an ADT Notification is sent to a TDSO and then to MiHIN

2

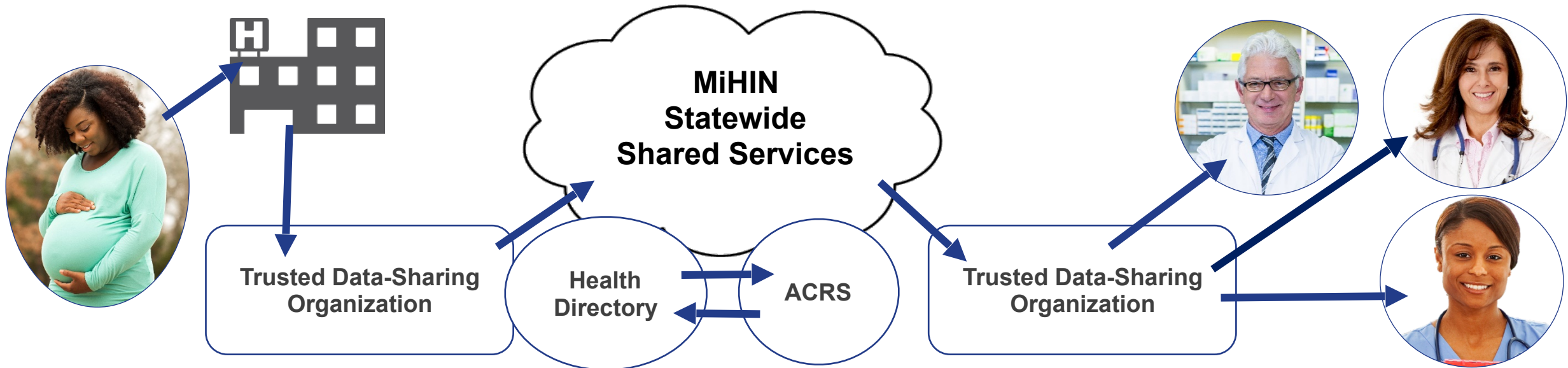
MiHIN checks ACRS and identifies Tricia's Care Team

3

MiHIN retrieves contact and delivery preferences for Tricia's Care Team from the Health Directory

4

ADT Notifications are sent to the Care Team based on electronic addresses and preferences



ACRS® = Active Care Relationship Service®

## FUTURE Example: Electronic Consent Management Service (eCMS)

The Electronic Consent Management Service (eCMS) allows patients to update their consent preferences electronically. eCMS also builds a statewide solution for managing consent preferences to ensure the appropriate consent is in place before specially protected information is routed to its destination.

### Electronic Consent Management Service Value

- Use of consumer portal to update consent preferences electronically
  - Ease of access allows for greater patient autonomy
  - Ability to save consent preferences in real time
  - Ability to store multiple consent forms in one location
- Provides a practical solution to sharing specially protected information
  - Create provider and state based functionality to manage consent preferences
  - Inclusion of privacy tags to ensure consent is checked for SPI
  - Increase in care coordination by sending previously withheld info
- Removes the burden of paper-based consent processes such as duplication and disorganization

### FY19 Milestones:

- Refine the desktop consumer portal, where healthcare consumers can search for and add providers to standard consent forms in real-time
- Create a mobile application that will have the same capabilities as the desktop application
- Build provider and statewide eCMS infrastructure where providers can ensure adequate consent is on file before routing specially protected information
- Secure a pilot participant to test the solution in real world environment

# Michigan Department of Health and Human Services (MDHHS) Tool for Problem Solving

- **MDHHS “Care Connect 360”**: Homegrown. Started Small. Purpose Driven Expansion. Powered by Data Warehouse. Health AND Human Services Data.
- **Original Goal**: Improve Care Coordination for Medicaid beneficiaries
- **Access to Data**: – common need across several MDHHS initiatives
- Single solution to address needs across initiatives
- MDHHS decision to leverage existing tools rather than purchasing new ones
- Developed for and owned by Michigan Department of Health and Human Services

# What is CareConnect 360?

- Statewide Care Management Web Portal
- Comprehensive view of individuals and populations across programs making it possible to:
  - effectively assess and analyze program data
  - make better and faster decisions
  - manage and measure programs
  - reduce costs
  - improve outcomes
- Facilitates sharing of critical cross-system information
  - Behavioral health
  - Physical health
  - Assistance and support services
- Backbone is Michigan's Enterprise Data Warehouse

# Enterprise Data Warehouse – DHHS Data Sets

## ✓ Health Data

- Breast and Cervical Cancer
- Community Mental Health
- Community Mental Health
- Children’s Special Health Care Services
- Early & Periodic Screening, Diagnostic, and Treatment (EPSDT)
- Health Risk Assessments
- Home Help Payments, Assessments
- Lead Screening
- Long Term Care
  - Home Care
  - Nursing Home
  - OASIS
- Maternal & Infant Health Program (MIHP)
- Michigan Care Improvement Registry (MCIR)
- Medicaid Beneficiary Eligibility
- Medicaid Fee-for-Service
- Medicaid Managed Care
  - Payments
  - Encounters
- Medicaid Provider
  - Eligibility
  - License
  - Network
  - DEA/CLIA
- Medicaid MI Choice Minimum Data Set
- Medicare

## ✓ Health Data (cont’d)

- MIChild
- Pharmacy (Claims, NDC, MAC, CMS rebate)
- Substance Use Disorder
- Third Party Liability
- Vital Records - Death/Birth/Paternity
- Waivers
  - Habilitation Support
  - Children’s
  - Serious Emotional Disturbance
  - Autism
  - ICO (Dual Eligibles)
  - Health Home
- Women Infants and Children

## ✓ Human Services Data

- Public Assistance Payment History
- Public Assistance Eligibility & History
- Child Development and Care & Payment History
- Electronic Benefit Transfer
- Child & Family Services
- Services Provider
- Foster Care & Adoption
- Child & Adult Protective Services
- Adoption Subsidy
- Child Support

# Enterprise Data Warehouse – Non-DHHS Data Sets

- **Department of Corrections**
  - Prisoner, Probationer, Parolee demographics
- **State Police**
  - Personal Protection Orders
- **State Court Administrative Office**  
(Circuit, District, Probate, Criminal, Juvenile, Civil & Traffic Courts)
  - Demographics
  - Cases
  - Offenses
  - Sentencing
  - Financial
- **Department of Licensing and Regulatory Affairs**
  - Worker's Compensation
  - Unemployment
  - Quarterly Wages
  - MI State Housing Authority Clients
  - Professional License
- **Department of Natural Resources**
  - Hunting License
  - Campground Reservations
- **Secretary of State**
  - Driver's License
- **Department of Treasury**
  - New Hire
  - MI & Federal Individual Tax
  - MI & Federal Business Tax
- **Federal**
  - SSI and RSDI Claims & Payments
  - Census
  - Federal Case Registry (Child Support)
  - U.S. Customs
  - Financial Institution Data Match
  - Social Security Demographics

## CareConnect360 - Current Users

- **Medicaid Health Plans (PH Medicaid) – 154 users**
- **PIHPs (BH Carve Out Medicaid) and CMHs – 301 users**
- **SUD Provider Organizations – 8 users**
- **ICOs (Integrated Care Organizations) – 94 users**
- **FQHCs (Federal Qualified Health Centers) – 26 users**
- **Local Health Departments – 17 users**
- **MDHHS (includes state Foster Care workers and Health Liaison Officers, Juvenile Justice workers, Medicaid) – 243 users**
- **Private Agency Foster Care Workers – 92 users**
- **Coordination of Care and services for Medicaid beneficiaries across plans**
- **Identification of high risk/high cost individuals**



# CareConnect360 - Current Functions

## Individual perspective – Beneficiary Lookup Tool

- Client Summary
- ADT Messages
- Client Profile
- Claims
- Notify
- Interactive Care Plan

## Population perspective

- Quick Analysis
- List Analysis
- Population Analysis

# Demographic Information and Client Summary Tab-CC 360

Putting people first, with the goal of helping all Michiganders lead healthier and more productive lives, no matter their stage in life.

Michigan.gov   Application Home   Beneficiary Lookup   Features   ▶ Training   ▶ My Profile   ▶ Contact   Exit

**Care Coordination**

<b>Medicaid ID:</b> XXXX	<b>Name:</b> XXXX	<b>Birth Date:</b> XXXX (XX)	<a href="#">Hide More Info</a>
<b>Address:</b> XXXX		<b>Death Date:</b> XXXX	
<b>Contact No:</b> (XXX)-XXX-XXXX		<b>County of Residence:</b> XXXX(XX)	
<b>Race:</b> XXXX		<b>Ethnicity:</b> XXXX	
<b>Medicaid Health Plan:</b> Harbor Health		<b>Gender:</b> XXXX	
<b>Assigned PIHP:</b> Detroit Wayne Mental Hlth Authority		<b>Dual:</b> NO	
<b>Primary Care Provider:</b> <a href="#">HERNDON KATRICE I (1407969827)</a>		<b>MAGI Indicator:</b>	
<b>Last MD/DO Claim:</b> <a href="#">MEHTA MANISHA (XX/XX/XXXX)</a>		<b>Current Benefit Plans:</b> <a href="#">Click to view all plans</a>	
<b>Last Care Mgmt Visit:</b> <a href="#">LINCOLN BEHAVIORAL SERVICES MAIN OFFICE (XX/XX/XXXX)</a>		<b>Current BMP Assigned Providers:</b> None	
<b>Last Dental Visit:</b> <a href="#">None</a>		<b>Nursing Facility:</b> <a href="#">None</a>	
<b>Home Help Case Worker:</b> <a href="#">None</a>			

Client Summary	ADT Messages	Client Profile	Claims	Notify	Interactive Care Plan
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**Add a new Tile:**

✓ **ED Visits - Most Recent 3**
□ ×

Visit Date	Facility
XX/XX/XXXX	1619289998 - DMC DETROIT RECEIVING HOSPITAL
XX/XX/XXXX	1134144801 - HENRY FORD HOSPITAL

⚡ **Chronic Conditions - Top 3**
□ ×

Conditions	Current Count
CHRONIC OBSTRUCTIVE PULMONARY DISEASE	63
SLEEP WAKE	51
ESSENTIAL HYPERTENSION	50


⚡ **Pharmacy - Top 3**
□ ×

Generic Drug Name	Number Of Fills	Most Recent Fill
BUDESONIDE/FORMOTEROL FUMARATE	9	XX/XX/XXXX
DILTIAZEM HCL	8	XX/XX/XXXX
DOXAZOSIN MESYLATE	8	XX/XX/XXXX

⚡ **I/P Admissions - Most Recent 3**
□ ×

Admit Date	Facility Name
XX/XX/XXXX	1740230119 - OAKWOOD HOSPITAL MEDICAL CENTE
XX/XX/XXXX	1043625940 - PRIME HEALTHCARE SERVICES-GARDEN CIT

# Client Profile Tab –CC360


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Michigan.gov Application Home Beneficiary Lookup Features ▶ Training ▶ My Profile ▶ Contact Exit

**Care Coordination**

Medicaid ID: XXXX      Name: XXXX      Birth Date: XXXX (XX)      [Show More Info](#)

Client Summary ADT Messages Client Profile Claims Notify Interactive Care Plan

**Client Profile**

<p><a href="#">Adult Foster Care:</a> No</p> <p><a href="#">PIHP OP/Community Based Service:</a> <span style="border: 1px solid red; border-radius: 50%; padding: 2px;">Yes</span></p> <p><a href="#">Psychiatric IP Service:</a> No</p> <p><a href="#">Enrolled in Health Home:</a> No</p> <p><a href="#">Youth Foster Care:</a> No</p> <p><a href="#">PIHP Service (last 6 months):</a> Yes</p> <p><a href="#">Current or Past CSHCS:</a> No</p> <p><a href="#">Healthy Michigan Plan:</a> No</p> <p><a href="#">Well Child History:</a> No</p> <p><a href="#">Hospice:</a> No</p> <p><a href="#">PACE:</a> No</p> <p><a href="#">Healthy Behaviors - Wellness Services:</a> No</p>	<p><a href="#">Home Help:</a> No</p> <p><a href="#">PIHP Supports Coordinator/Care Management:</a> Yes</p> <p><a href="#">PIHP Treatment Episode:</a> Yes</p> <p><a href="#">Health Risk Assessment/Survey:</a> Yes</p> <p><a href="#">Home Health:</a> Yes</p> <p><a href="#">PIHP Service (last 12 months):</a> Yes</p> <p><a href="#">Dental Claims:</a> No</p> <p><a href="#">Flint Waiver Population:</a> No</p> <p><a href="#">MI Choice:</a> No</p> <p><a href="#">Nursing Facility:</a> No</p> <p><a href="#">Healthy Behaviors - Preventive Services (last 12 months):</a> No</p>
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**PIHP OP/Community Based Service Details**

Export to Excel    Clear Filters

PIHP ID	PIHP	CMHSP ID	CMHSP	From Date	Procedure	Procedure Code	Place Of Se
2813568	Detroit Wayne Mental Hlth Authority	1183310	Carelink Network GEN FUND	XX/XX/XXXX	Targeted case management	T1017	Office
2813568	Detroit Wayne Mental Hlth Authority	1183310	Carelink Network GEN FUND	XX/XX/XXXX	Targeted case management	T1017	Office
2813568	Detroit Wayne Mental Hlth Authority	1183310	Carelink Network GEN FUND	XX/XX/XXXX	Targeted case management	T1017	Inpatient Hc

Page size: 20
3 items in 1 pages

# Client Summary Tab – Pharmacy Tile Detail-CC 360

**Tile Details**


**Client Summary Details - Pharmacy**

Export to Excel Clear Filters

Fill Date	Generic Name	Brand Name	Prescribing Provider	Quantity Dispensed	Days Supply	Daily Do
XX/XX/XXXX	TRAZODONE HCL	TRAZODONE HCL	SHABANA AHMED	15.00	15	1.00
XX/XX/XXXX	ARIPIPIRAZOLE	ARIPIPIRAZOLE	SHABANA AHMED	15.00	15	1.00
XX/XX/XXXX	BUPROPION HCL	BUPROPION HCL	SHABANA AHMED	15.00	15	1.00
XX/XX/XXXX	OXCARBAZEPINE	OXCARBAZEPINE	SHABANA AHMED	30.00	15	2.00
XX/XX/XXXX	HYDROCODONE/ACET	HYDROCODONE- ACETAMINOPHEN	ALFRED M FAULKNER	60.00	15	4.00
XX/XX/XXXX	BUMETANIDE	BUMETANIDE	KATRICE L HERNDON	30.00	30	1.00
XX/XX/XXXX	DILTIAZEM HCL	DILTIAZEM 24HR ER	KATRICE L HERNDON	30.00	30	1.00
XX/XX/XXXX	TRAMADOL HCL	TRAMADOL HCL	KATRICE L HERNDON	90.00	23	3.91
XX/XX/XXXX	OMEPRAZOLE	OMEPRAZOLE	KATRICE L HERNDON	30.00	30	1.00
XX/XX/XXXX	DOXAZOSIN MESYLATE	DOXAZOSIN MESYLATE	KATRICE L HERNDON	30.00	30	1.00

Page size: 10 142 items in 15 pages

# ADT Messages Tab-CC 360


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Michigan.gov
Application Home
Beneficiary Lookup
Features
▶ Training
▶ My Profile
▶ Contact
Exit

**Care Coordination**

**Medicaid ID:** XXXX    **Name:** XXXX    **Birth Date:** XXXX (XX)    [Show More Info](#)

Client Summary
ADT Messages
Client Profile
Claims
Notify
Interactive Care Plan

**ADT Messages**


Drag a column header and drop it here to group by that column

Export to Excel 
Clear Filters

Event Type	Event Date	Hospital System	Hospital Name	Admission Date	Patient Class	Admission Type
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
A02:Transfer	XX/XX/XXXX	Garden City	Garden City Hospital	XX/XX/XXXX	Inpatient	Emergency
A06:Change OP to IP	XX/XX/XXXX	Garden City	Garden City Hospital	XX/XX/XXXX	Inpatient	Emergency
A04:Register a Patient	XX/XX/XXXX	Garden City	Garden City Hospital	XX/XX/XXXX	Outpatient	Emergency
A04:Register a Patient	XX/XX/XXXX	Detroit Medical Center	DMC Detroit Receiving Hospital	XX/XX/XXXX	Outpatient	Routine
A04:Register a Patient	XX/XX/XXXX	Detroit Medical Center	DMC Detroit Receiving Hospital	XX/XX/XXXX	Outpatient	Routine
A03:Discharge	XX/XX/XXXX	Detroit Medical Center	DMC Harper University Hospital/DMC Hutzel Women's Hospital	XX/XX/XXXX	Outpatient	Routine
A03:Discharge	XX/XX/XXXX	Detroit Medical Center	DMC Harper University Hospital/DMC Hutzel	XX/XX/XXXX	Outpatient	Routine

◀
▶
15 items in 1 pages

# List Analysis Result - Emergency Department High Utilizers- CC 360


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**List Analysis** This page creates custom beneficiary lists based on selected criteria.

**Program:** ED Utilization-High      **Saved Lists:** Select List

**Date Range :** 12/20/2016 To 06/20/2018      **PIHP Service(last 6 months):**       Run

[Export to Excel](#)

Beneficiary Name	Medicaid ID	Six Month Count	Age	MHP ID	PIHP ID	CMH ID	ICO ID
<u>First Name</u> , <u>Last Name</u>	XXXXXXXXXX	13	26	4151587	0000000	2813568	0000000
<u>First Name</u> , <u>Last Name</u>	XXXXXXXXXX	32	63	4318627	2813568	2813568	0000000
<u>First Name</u> , <u>Last Name</u>	XXXXXXXXXX	16	30	0000000	2813568	2813568	0000000
<u>First Name</u> , <u>Last Name</u>	XXXXXXXXXX	13	37	3293040	2813568	2813568	0000000
<u>First Name</u> , <u>Last Name</u>	XXXXXXXXXX	27	55	4318627	2813568	2813568	0000000
<u>First Name</u> , <u>Last Name</u>	XXXXXXXXXX	25	23	3293040	2813568	2813568	0000000
<u>First Name</u> , <u>Last Name</u>	XXXXXXXXXX	17	51	4151587	0000000	2813568	0000000

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# Population Analysis – County Analytics-CC 360

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Michigan Department of Health and Human Services

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Population Analysis

Plan Analytics   County Analytics   Performance Measures

**County Analytics**   Calculates cumulative count of beneficiaries with chronic conditions per each county..

**Chronic Condition:**   BREAST CANCER    **PIHP Service(last 6 months)**

**Analysis Type:**   County   Run   Export All to Excel

Clear Selected [6] Regions
Export Map to Excel

**Kent County:**  
 Number of beneficiaries : 116678  
 Number of beneficiaries with selected criteria : 550  
 Percentage of beneficiaries with selected criteria : 0.47%

**Ottawa County:**  
 Number of beneficiaries : 29949  
 Number of beneficiaries with selected criteria : 129  
 Percentage of beneficiaries with selected criteria : 0.43%

**Muskegon County:**  
 Number of beneficiaries : 46519  
 Number of beneficiaries with selected criteria : 208  
 Percentage of beneficiaries with selected criteria : 0.45%

**Allegan County:**  
 Number of beneficiaries : 19474  
 Number of beneficiaries with selected criteria : 85  
 Percentage of beneficiaries with selected criteria : 0.44%

**Barry County:**  
 Number of beneficiaries : 9009  
 Number of beneficiaries with selected criteria : 38  
 Percentage of beneficiaries with selected criteria : 0.42%

**Ionia County:**  
 Number of beneficiaries : 11415  
 Number of beneficiaries with selected criteria : 64  
 Percentage of beneficiaries with selected criteria : 0.56%

**Percentile Rank Among Counties**

	80-100th (0.77-0.89 %)
	60-80th (0.64-0.77 %)
	40-60th (0.52-0.64 %)
	20-40th (0.39-0.52 %)
	0-20th (0.27-0.39 %)



# Harnessing & Analyzing Data

**Building Meaningful Strategy – Informed by Analytics**  
**Preparing & Promoting Service Delivery Disruption**



# Complex Population – MDHHS Housing and Health Care Initiative

- Identify homeless Medicaid population with high ED utilization and inpatient costs and pilot a housing intervention and supportive services
- Determine if the homeless population was a more expensive population
- Understand the homeless populations utilization of other safety net programs (SNAP, TANF, etc.)
- Use real time healthcare data to inform prioritization of housing resources
- Share data across housing and healthcare sectors to reduce service redundancy and improve care coordination
- Improve the local homeless response system so those needing housing can get assistance
- Build the capacity of housing providers

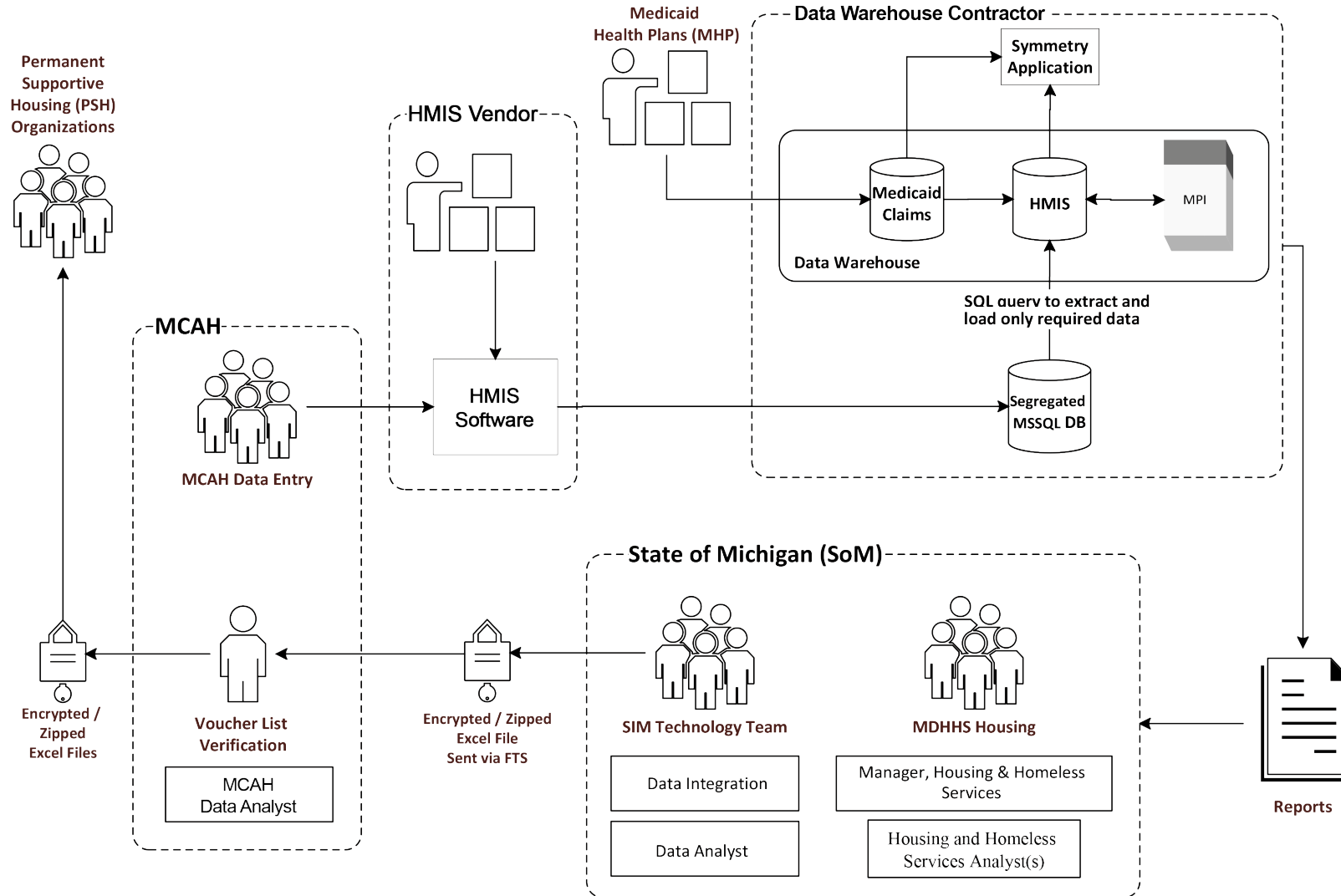
## Data Harnessing:

Secure. Consented. Purposeful. Collaborative.

Michigan's HMIS permitted use within an integration environment:

- Record matching-using client identifiers. Then, de-identified. Reflected analysis aggregate only
- Specific PH conditions sharing permitted for eligibility for housing services.
  - Medicaid—Homeless data match—potential housing eligible?
    - First/Last name released for outreach
    - Client release of information obtained for housing provider
- Carefully constructed permitted use: Integrated data shows a person reaches a certain level of acuity, without disclosing specifics about their conditions.
- Result: Protected confidentiality and use of health information as a driver in the housing services eligibility process. High medical acuity persons prioritized for housing services. Gain for both housing and behavioral health providers.

# Housing Management Information System (HMIS) & Medicaid



## **Inpatient Utilization – Inpatient Stays per 1000 member months**

- Homeless - combined Medicaid and fee for service – 29.08
- State total - combined Medicaid and fee for service – 8.17

## **Treat and Release ED Visits**

- Homeless - combined Medicaid and fee for service – 297.24
- State total - combined Medicaid and fee for service – 70.8

## **All Cause Readmission**

- Homeless - combined Medicaid and fee for service – 25.75
- State total - combined Medicaid and fee for service – 17.43

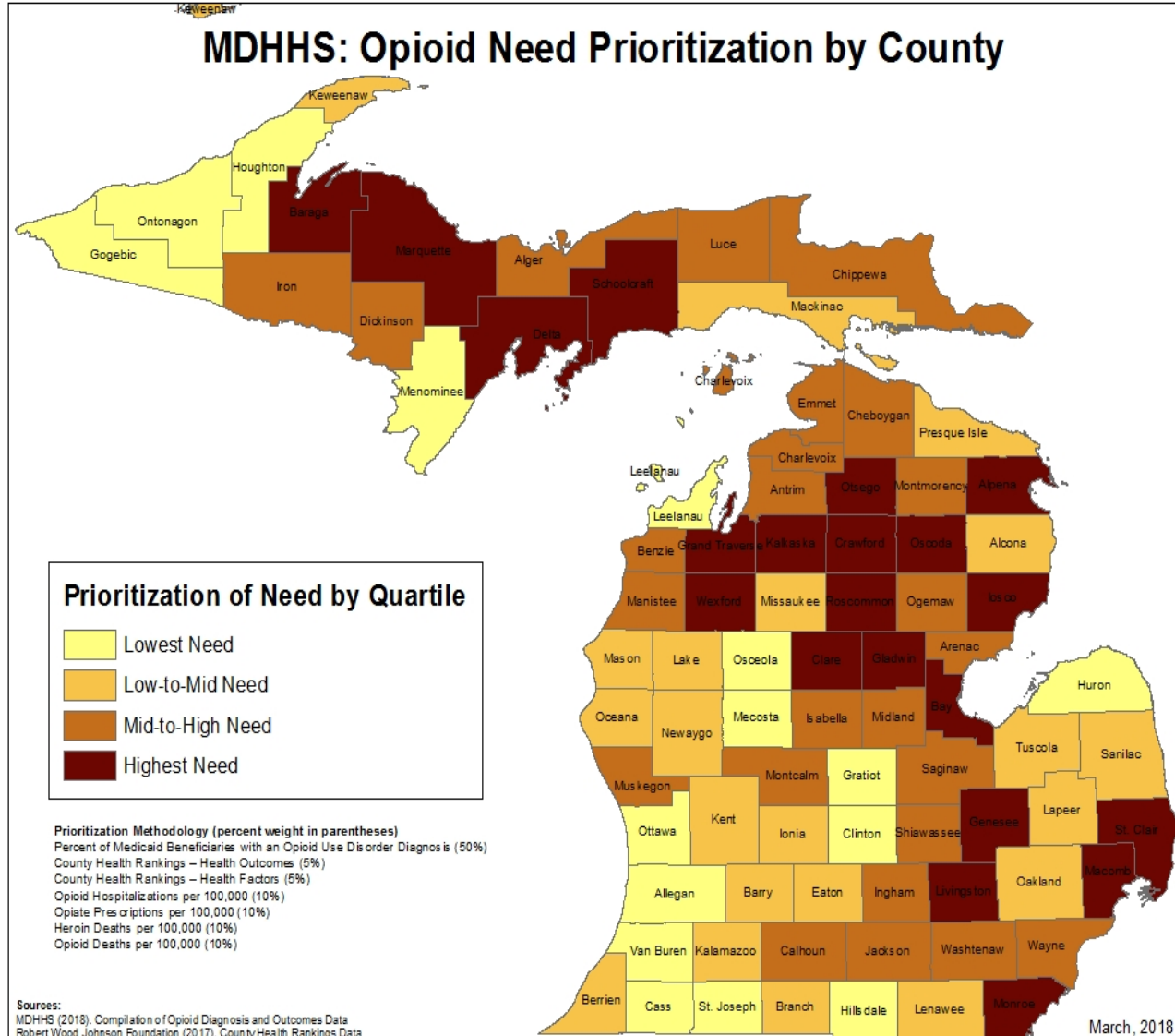
## **Prevention Quality Indicator**

- Homeless - combined Medicaid and fee for service – 321.31
- State total - combined Medicaid and fee for service – 123.11

# Data Informed Opportunity-Complex Conditions

- Utilization measures show a significant increase in utilization for the HMIS population in the Inpatient and Emergency Department setting
- With average cost of \$22,000 per inpatient visit and \$1,233 per ED visit, even a 30 per cent reduction in utilization would save \$138,000 and \$84,000 per 1000 members respectively.
- Behavioral Health Provider Opportunity! Payer partnership Value Based Purchasing? Housing policy priority for BH clients? Much more!

# Complex Population- Data Informed Targeting: Opioid Health Homes



## Michigan Opioid Health Home Program:

- [Michigan's OHH Website](#)
- [Approved OHH State Plan Amendment \(MI-18-5000\)](#)
- [OHH Handbook](#)
- [Map of OHH Provider Sites](#)
- [MSA Policy Bulletin 18-27](#)
- [Overview PPT of OHH](#)
- [Brochure](#)

# Population Analysis – Performance Measures- CC 360

**Performance Measure:  
(follow up after hospitalization  
for mental illness)**

MDHHS current cross-system  
quality incentive (both PH and  
MH carve out).

Future provider Value Based  
Purchasing negotiation  
opportunity?

Future provider(s) practice(s)  
disruption advisable or  
advantageous?

Putting people first, with the goal of helping all Michiganders lead healthier and more productive lives, no matter their stage in life.

**MDHHS Michigan Department of Health and Human Services**

Michigan.gov Application Home Beneficiary Lookup Features Training My Profile Contact Exit

**Population Analysis**

Plan Analytics County Analytics Performance Measures

**Follow-Up after Hospitalization for Mental Illness (30 days)** : Percentage of discharges for enrollees age six and older who are hospitalized for treatment of a selected mental illness diagnosis, and who had an outpatient visit, an intensive outpatient encounter, or partial hospitalization with a mental health practitioner within 30 days of discharge. The data source is the MDHHS data warehouse. For this measure, the Event Date is the Discharge Date. MHP/PIHP pairs with a denominator of less than 30 are not counted in the final rate.

Measures Type:  Measures Date:

**Summary**

\*Select Measures Type

Measure	Medicaid Program	Numerator	Denominator	Rate	Report Ending Date
FUH-30AD	MICHIGAN MEDICAID TOTAL	6404	10259	62.42	XX/XX/XXXX
FUH-30AD	MICHIGAN MEDICAID TOTAL	8166	12499	65.33	XX/XX/XXXX
FUH-30AD	MEDICAID MANAGED CARE	4564	7090	64.37	XX/XX/XXXX
FUH-30AD	MEDICAID MANAGED	5500	8869	62.01	XX/XX/XXXX

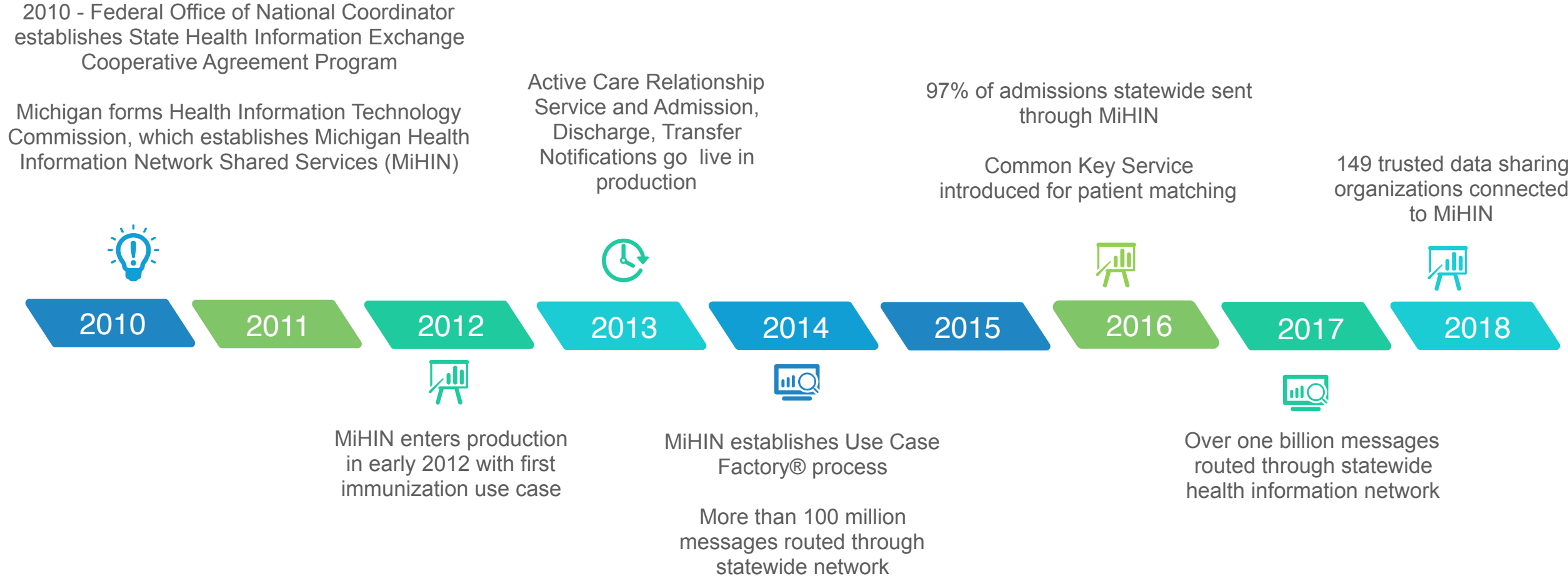
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**Details**

Measure	Health Plan	Numerator	Denominator	Rate	Report Ending Date
FUH-30AD	BLUE CROSS COMPLETE	302	552	54.71	XX/XX/XXXX
FUH-30AD	BLUE CROSS COMPLETE	287	481	59.67	XX/XX/XXXX
FUH-30AD	COVENTRY CARE	320	511	62.62	XX/XX/XXXX
FUH-30AD	MOLINA HEALTH CARE	621	1074	57.82	XX/XX/XXXX
FUH-30AD	MOLINA HEALTH CARE	617	1017	60.67	XX/XX/XXXX
FUH-30AD	PRIORITY HEALTH	0	1	0.00	XX/XX/XXXX

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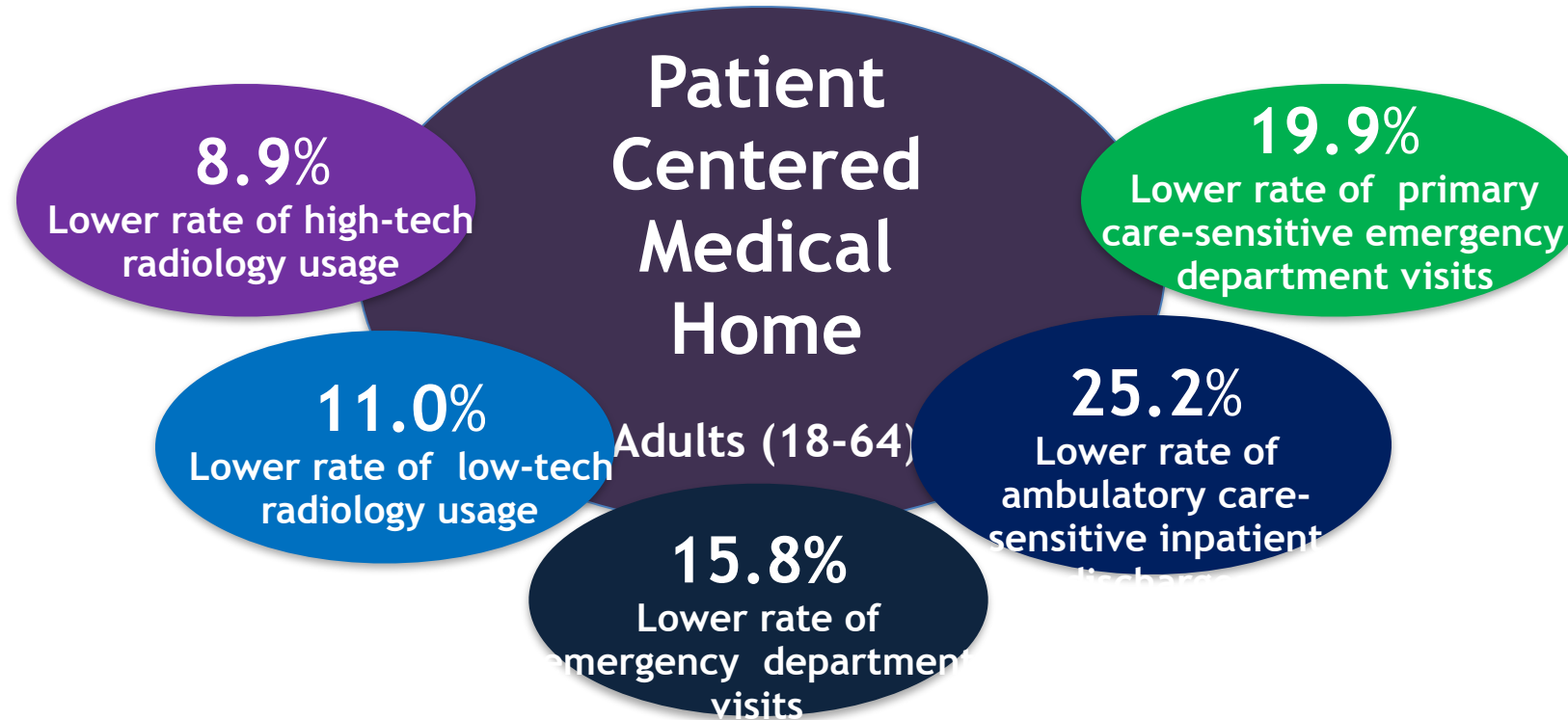
# Brief History: Michigan Health Information Network Shared Services





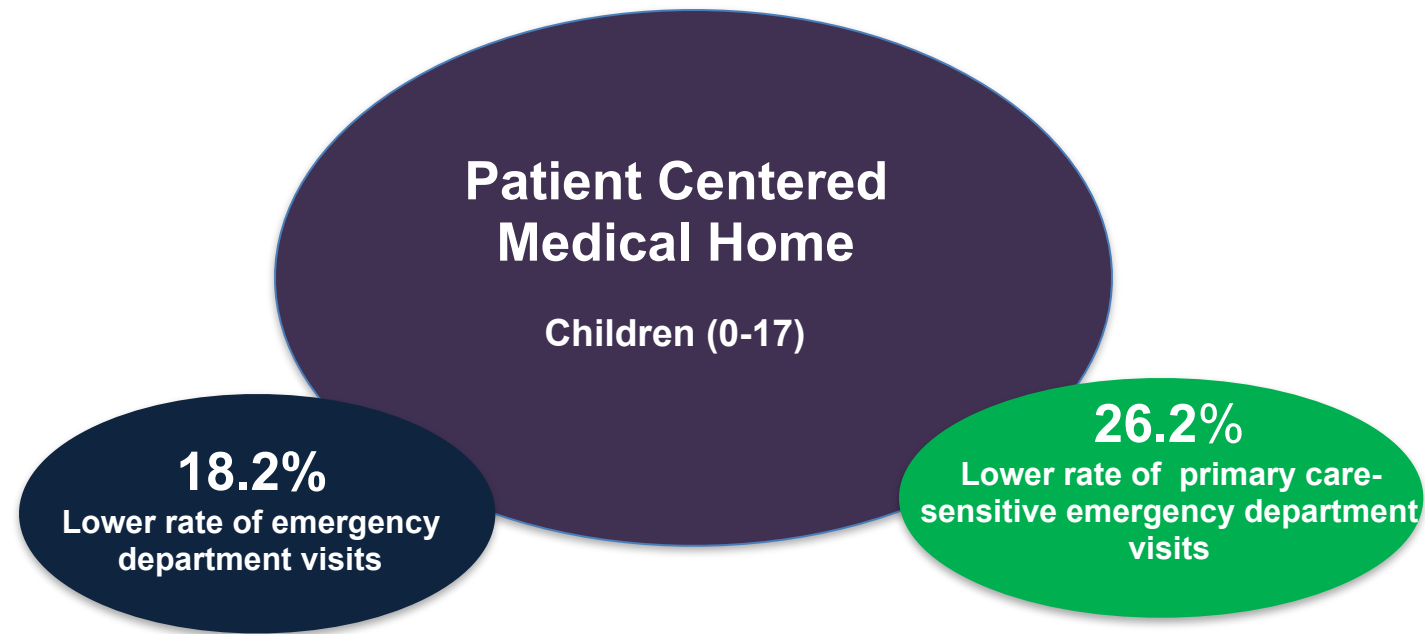
## 2018 Performance, for PCMH-designated practices compared to non-PCMH designated PGIIP practices

**Discussion opportunity:**  
How can BH providers help primary care practices perform better where incentives exist?



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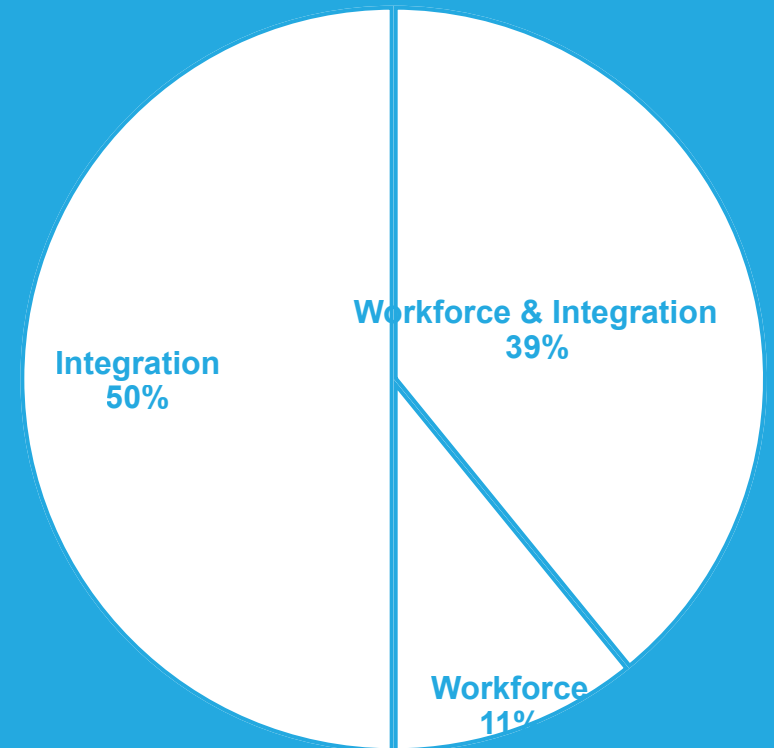


# Individual Non-Profit Projects

Supported by Michigan Health Endowment Fund

- **46 total grants | 29 completed** as of 4/30/19
- **Amount invested:** \$12,835,798
- **Categories of Technology/Data Work:**
  - Client Education and Behavior Change Communication
  - Provider Training and Education
  - Telemedicine
  - Resource Coordination
  - Data Interchange, Interoperability and Accessibility
  - Provider-to-Provider Communication
  - Sensors and Point-of-Care Diagnostics
  - Data Collection and Reporting

MHEF Cross-Cutting Goals



# Technology and Data Innovation Examples – Health Fund Grantees

## **PACE Southeast MI – Remote Care Management Platform Program**

- Telehealth approach to remotely monitoring patient health
- Screening process being replicated at PACEs statewide
- Improved coordination of care, less burden on caregivers

## **University of Michigan – Home-Based Transitional Telecare for Older Veterans**

- Telehealth-enabled tablets send information directly to clinicians
- Investigates how wearable sensors can support post-discharge care
- Evaluated standard consumer wearables vs. more sensitive devices for the target population

# Personal learning...

## **Data Strategy and Analytic Projects**

- Start small. Use what I have. Seek little things from others for big impact.
- Think big. Persons with complex conditions, shared across systems
- Target strategically. Where small change could make notable gain.

## **Value-Based Purchasing and Practice Change Incentives**

- Learn where practice incentives and VBP exist (hospitals and primary care, commercial and public). Problem solve for mutual success.
- Stay open to disrupting my practice process and my interface with others
- There is plenty of opportunity to harness and analyze data for good regardless of structure (carve in, carve out, fee for service, primary care).

Thank you! Lynda Zeller, [Lynda@mihealthfund.org](mailto:Lynda@mihealthfund.org)