



Innovations in Childhood Obesity Collaborative In-Person Team Meeting

Tuesday, June 7, 2016

10-11:30 AM

MedChi, The Maryland State Medical Society

- I. Welcome and Introductions
- II. Project Plan Partner Updates
 - a. Goal 1: Determine baseline prevalence of obesity and severe obesity in Baltimore City children enrolled in Medicaid using accurate and reliable proxies.
 - b. Goal 2: identify a pool of pediatric and family medicine practices that see a higher volume of MA patients from Baltimore City and Howard County for potential recruitment in AAP learning collaborative.
 - c. Goal 3: Complete a 9 month AAP learning collaborative serving up to 50 high volume Medicaid providers in Baltimore City and Howard County. Purpose of collaborative is to improve prevention, diagnosis and treatment of obesity and related chronic diseases.
 - d. Goal 4: Determine the quality and quantity of childhood obesity services being delivered by Medicaid providers in Baltimore City and Howard County.
 - e. Goal 5: Assess feasibility of a regional Center for Excellence in Prevention, Diagnosis and Treatment of Severe Obesity
 - f. Goal 6: Develop EMR templates for obesity prevention, diagnosis and treatment of childhood obesity and related chronic diseases.
- III. National ICO Collaborative Update
- IV. Future Meetings and New Business

**ICO Collaborative
June In-Person Meeting**

Action Steps

Meeting Date: 6/7/16

	AGENDA	ACTION	RESPONSIBLE PARTY	DUE DATE
1	<p>Attendees -- Paula Minsk, AAP; Meagan Cox, AAP; Maura Rossman, HCHD; Meghan Ames, DHMH-Chronic Disease; Stacey Tuck, BCHD; Kathy Pettway, Priority Partners; Nikki Vernick, HF; Glenn Schneider, HF [Laura Flamm, BCHD wanted to participate by phone but technology glitches prevented her from doing so]</p>			
2	<p>Goal 1 – Determine baseline prevalence of obesity and severe obesity in Baltimore City children enrolled in Medicaid using accurate and reliable proxies.</p>	<p>See updated BCHD obesity prevalence report</p> <p>Work to obtain and analyze Head Start and WIC obesity data as a separate data run.</p> <p>Consider developing a standing MOU to collect data from FQHC/WIC/Head Start on a yearly basis for health planning purposes.</p> <p>Ask epidemiologist to provide N’s for obesity data by grade level and a hypothesis on why BMS data is an outlier.</p> <p>Send Glenn potential July dates/times for when Dr. Wen and Dep. Secretary McMahon are available to meet about data and potential next steps. If possible, we’ll convene the ICO team concurrently to discuss joint response to this data (e.g., media, program, policy, etc.)</p>	<p>Laura Flamm</p> <p>Stacey Tuck</p> <p>Stacey Tuck</p> <p>Stacey Tuck</p> <p>Stacey Tuck (Dr. Wen) and Nikki Vernick (Shannon)</p>	<p>Status Report: July ICO meeting</p> <p>Status Report: July ICO meeting</p> <p>Status Report: July ICO meeting</p> <p>ASAP. Time is of the essence.</p>

<p>3</p>	<p>Goal 2 and 3 – Identify a pool of pediatric and family medicine practices that see a higher volume of MA patients from Baltimore City and Howard County for potential recruitment in AAP learning collaborative. [COMPLETE]</p> <p>Complete a 9 month AAP learning collaborative serving up to 50 high volume Medicaid providers in Baltimore City and Howard County. Purpose of collaborative is to improve prevention, diagnosis and treatment of obesity and related chronic diseases. Include module on trauma informed care and provide community referral resources to participating physicians. [Launched May 25, 2016]</p>	<p>Ask Commissioner Wen to contact BMS CEO. Try to get BMS to participate in the pediatric learning collaborative. [Reaction to data]</p> <p>Ask Dep. Secretary McMahon to contact BMS CEO. Try to get BMS to participate in the pediatric learning collaborative. [Reaction to data]</p> <p>Help Paula secure an ACES/Trauma Informed Care Expert to deliver a talk to pediatric learning collaborative members. Looking for someone who can give these practices practical advice on what assessments to use and what to do treatment wise if trauma is a factor.</p> <p>Investigate whether collaborative didactic session and content calls can be shared with non-participating practices and ICO Team Members.</p> <p>Consider how a non-MOC credit learning collaborative might work and whether/if this model should be available to pediatricians or tried?</p> <p>Report on community referral system procurement process (e.g., Healthify and other vendors of similar programs). Pros/Cons of systems evaluated, etc.</p> <p>Determine if Medicaid can draw 90% Federal IT match if it bought and purchased Healthify for use by Medicaid providers.</p> <p>Write an article for AAP newsletter about severe obesity project designed to recruit more practices in already active jurisdictions.</p>	<p>Stacey Tuck</p> <p>Nikki Vernick</p> <p>Nikki Vernick, Stacey Tuck, Glenn Schneider</p> <p>Paula Minsk</p> <p>Paula Minsk and Meghan Ames</p> <p>Maura Rossman</p> <p>Erin McMullen</p> <p>Meghan Ames</p>	<p>ASAP. Time is of the essence.</p> <p>ASAP. Time is of the essence.</p> <p>ASAP. Time is of the essence.</p> <p>Status Report: July ICO meeting</p> <p>Status Report: July ICO meeting</p> <p>Status Report: July ICO meeting</p> <p>Status Report: July ICO meeting</p> <p>Status Report: July ICO meeting</p> <p>Status Report: July ICO meeting</p>
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4	<p>Goal 4 – Determine the quality and quantity of childhood obesity services being delivered by Medicaid providers in Baltimore City and Howard County.</p>	<p>Continue to determine whether low rate of BMI screening claims submission is due to 1) lack of coding knowledge; 2) learned helplessness (e.g., coding without reimbursement); or 3) services are not being provided.</p> <p>Continue to answer questions to Health Plans from virtual May meeting.</p> <p>Work with MD-Medicaid and MCOs to make BMI measure more robust (i.e., BMI value based services measure)</p> <p>Develop a MD-Medicaid provider communication that clearly lists what childhood obesity related services are available under EPDST. How many visits, what kind of services, what kind of coding is necessary, any limitations.</p> <p>Get an invitation to present at a future MCO Liaison Meeting to present the work of the collaborative and get feedback.</p> <p>Run an MCO specific claims analysis (i.e., similar to Hilltop study) looking at percentage of claims with BMI indicators.</p>	<p>Erin McMullen, Kathy Pettway, James Davis</p> <p>Kathy Pettway, James Davis</p> <p>Nikki Vernick, Erin McMullen, Kathy Pettway, James Davis</p> <p>Erin McMullen, Kathy Pettway, James Davis</p> <p>Erin McMullen, Kathy Pettway</p> <p>Kathy Pettway with help from Erin McMullen</p>	<p>Status Report: July ICO meeting</p> <p>Status Report: July ICO meeting</p> <p>Status Report: July ICO meeting</p> <p>Status Report: July ICO meeting</p> <p>Status Report: July ICO meeting</p> <p>Status Report: July ICO meeting</p>
5	<p>Goal 5 – Assess feasibility of a regional Center for Excellence in Prevention, Diagnosis and Treatment of Severe Obesity</p>	<p>Doodle will be sent out for a meeting in July with Mt. Washington Pediatric Hospital (MWPH) to explore current model and begin exploring need for additional services.</p> <p>Help connect us to MWPH</p>	<p>Glenn Schneider</p> <p>Paula Minsk</p>	<p>ASAP. Time is of the essence.</p> <p>ASAP. Time is of the essence.</p>

6	<p>Goal 6 – Develop EMR templates for obesity prevention, diagnosis and treatment of childhood obesity and related chronic diseases.</p>	<p>Maryland Health Care Commission will determine whether identified high volume Medicaid practices have an EMR and if so, the provider.</p> <p>AAP will ask all future CME participants about the office EMR currently being used by their practices. AAP already determined which office EMRs are being used by pediatric collaborative participants.</p>	<p>Glenn Schneider</p> <p>Paula Minsk</p>	<p>Status Report: July ICO meeting</p> <p>Status Report: July ICO meeting</p>
7	<p>Meeting Schedules</p>	<p>Doodle to be sent out to schedule next several monthly meetings. CHCS call dates will be communicated to ICO team members in case you can free your schedule to participate.</p>	<p>Glenn Schneider</p>	<p>ASAP</p>