Please stand by for real time captions.

>> Good morning. My name is Katrina and I will be your conference operator for today. I would like to welcome everyone to the Telligen QPP coffee talk. All participants will be on a listen only mode. I would like to turn the call over to Ms. Temaka Williams. Please go ahead.

>> Thank you, Katrina. Welcome everyone. I am Temaka and I want to thank you for joining us for the QPP coffee talk. This session will be on the transforming clinical practice initiative. A few quick housekeeping items before we get started. This call is operator assisted and being recorded and the call will be posted to our Telligen QIN website. There will be a short survey regarding today's event. We want to thank you in advance for taking the time to complete the survey. We greatly appreciate your feedback and your feedback is always helpful in planning future events and showcasing the benefit of our services to CMS.

>> Your phone lines will be open after the presentation for a Q&A discussion. The chat feature is always available for questions or comments and is being monitored by members of the Telligen QPP team. Again, thank you for joining us, and we are glad to have you here with us today.

>> If by chance this is your first time joining us; let me introduce the Telligen QPP team. We have Courtney Ryan who supports the Colorado practices. Again I am Temaka Williams and along with Linda Brewer we are supporting the Illinois practices. And we have Sandy who supports those practices in Iowa.

>> Just a quick note on how to obtain today's slides. Hopefully the process was easy enough and you are able to download them but if not, refer back to your event reminder email. That email has a link to the webinar. You want to click on the link and when you land on the event page, you will find the event materials at the bottom of the page. You can click on each link to download them. This screenshot here is from a previous presentation but the location of the materials will still be the same. So you will find the PowerPoint presentation and a couple of handouts that will be covered today.

>> So now for the good part, I would like to introduce our two speakers for today. LeeAnn White is a senior quality facilitator with Telligen. She has over 15 years of experience in the medical field serving in the US Army as a healthcare specialist and is a registered nurse specializing in the fields of emergency medicine, cardiac critical care, management and quality improvement. For the past 2 1/2 years, Lee Ann's work has been focused on supporting physician practices, organizations and partners within the transforming clinical practice initiative. We have Jennifer Potempa who is a senior quality improvement facilitator with Telligen. She has worked with physician practices for over two years by providing assistance and lamenting clinical integration and practice transformation. For the past two and half years, Jennifer's work has been focused on implementing quality improvement strategies for cardiovascular care for the federally funded research study which is called healthy hearts in the heartland H3 and supporting physician practices and organizations within the transforming clinical practice initiative. So welcome Leann and Jennifer and I will turn the presentation over to you.

>> Hello. Good morning everyone and thank you, Temaka. This is LeeAnn White and I just want to make sure you can hear me okay.

>> Yes. Sounds good.

>> Okay. Wonderful. I definitely want to thank you again for your time this morning. Jennifer and I are very excited to join this coffee talk. We have both really enjoyed supporting this great initiative over the last few years and we have seen amazing work being done in practice transformation. Let's just go ahead and introduced what he CPI is. It stands for transformative clinical practice initiative. It is a four-year CMS initiative designed to implement practice transformation and physician practices nationwide. It is to prepare and support providers in the change from volume-based care to value-based systems. We have a goal of supporting over 140,000 clinicians nationally with this program. Telligen, the quality improvement organization is collaborating and supporting partnerships within this program for practice transformation efforts. So who do we support? We support practice transformation networks. They are a statewide and national network dedicated to providing that support, the coaching and those resources practices need during their transformation efforts. We also support practices in Illinois, Iowa, Colorado, Virginia and Maryland. We work with practices in rural and urban settings. We work with small independent practitioners and we work with large systems. We also support independent ambulatory centers. Next slide please.

>> So for the program, there are seven aims for TCPI and we do strive to achieve these aims within the program. The seven aims of the program really focus on improving quality of care and health outcomes for patients, Medicare, Medicaid and chip beneficiaries as well as other patients. We support cost savings. We work on reducing hospital readmission rates, unnecessary ER visits and also looking at testing and procedures. Where can we save costs and reduce the necessary and or repeat testing? We prepare practices for value-based models and with the ultimate goal of transitioning 75% of those practices into alternative payment models. We do have the slides and the resources within our presentation for your reference if you would like to reference those after the coffee talk. Next slide please.

>> So how do we capture and how do we show progression within the five phases of transformation in TCPI with practices? There is a practice assessment tool that we use . We have a primary tool that we use with family practice, internal medicine, geriatrics and pediatricians and we also have a specialty practice tool that we use for specialists. This is a self rated scoring tool if you can see this on your screen. We meet with practices and their advisors when they initially enter the program and then every six months, we review the same assessment tool to show and capture progression within the five phases. The practice assessment tool, you can see consists of milestones. So these are the aims of the program and they support the drivers of the program. And then the scoring that is self-reported by the practice is like a roadmap to show where they are currently at and where they hope to achieve the milestones. It is a great roadmap for practice transformation. These are resources that are available to you after the presentation. Next slide please.

>> Now I'm going to hand it over to Jennifer. Jennifer is going to discuss the primary drivers of TCPI and how they support the aims of the program. So Jennifer, here you go.

>> Thank you much, LeeAnn. Shown are the TCPI drivers. To help provide clinicians and practices with interventions to meet the goals, the TCPI was created. So this change package describes the changes needed to transform clinical practice and meet the TCPI aim as LeeAnn showed earlier. The primary drivers contribute to achieving the goals of TCPI and then the secondary drivers are other factors that are necessary to achieve the primary drivers. The change package is a combination of the interventions developed by others which is attached in your resources for this coffee talk. LeeAnn and I will cover these three drivers by providing examples including the milestones for achieving goals of the TCPI program which helps build confidence when joining our participating and alternative payment models. Next slide please.

>> The first primary drivers seen on the slide is patient and family centered care design which focuses on performance by allowing practices to meet the needs of individual patients and the population they serve. Next slide.

>> The next two slides provide the TCPI milestones related to patient and family centered design which are examples for clinical practice transformation. So some of these milestones include strongly encouraging patients and families to become the active participants with their care team on decision-making, self-management and goal setting, creating stronger relationships between providers, care teams and patients, by promoting continuity of care and also reviewing roles within the team-based care model to help the [Indiscernible] and skill sets. Some other metrics related to patient and family centered design is really enhancing patient family enhancement. These include understanding health literacy, implementing advisory groups. So this would be involving patients or families to really provide feedback regarding governance or operational decision-making of practices, creating patient portals. So having patients have the access to medical information and to be able to communicate to patients, to physicians or staff through technology. Understanding patient activation and providing medication management. And as you see on the slide commit some other processes that would be beneficial to patient family centered design is really implementing a way to obtain patient family feedback and also identifying different risk levels of patients to ensure patients receive appropriate care that should be given to them. Next slide please.

>> So to continue with this first driver, these are some other milestones that help implement patient family centered design. So some of these include identifying the medical neighborhood to develop roles and expectations for collaboration, identifying care gaps and following up on those care gaps to reduce them. Referring patients to community resources and following up and reducing duplicate and unnecessary testing. This driver also focuses on implementing care management to really reduce hospitalization and following up with patients with an appropriate time frames who have visited the ER or have been discharged from the hospital. Next slide.

>> So second primary drivers seen on the slide is continuous data-driven quality improvement. This driver really reflects quality which includes the use of technology and performance monitoring to

empower all individuals in the practice to innovate and improve. Next slide. So within this driver, the milestone focuses on building quality improvement knowledge and understanding with all levels of staff in the practice or organization. So different quality improvement projects or activities could be implemented by identifying opportunities for improvement. So some of these opportunities for improvement can be identified by reviewing and ensuring reports such as provider and care team performance or even patient and family feedback, transparently within the organization. I will now hand this off to LeeAnn who will discuss the third primary driver in TCPI. Next slide please.

>> Thank you. Our last driver is all about sustaining business operations and providing providers practices and systems and infrastructure to really support efficiency and provide a high-value product to their customers. So this is done through our sustainable business operation. Next slide please.

>> So if you examples of how we discuss and how we implement sustainable business operations would be through using techniques such as supplementing strategies to cultivate joy in the workplace. So practices that celebrate their successes, provide opportunities for professional growth, personal growth, teambuilding and really focus on the health and well-being of their staff and providers, seeing an increase in the retention rates and their employee job satisfaction. We also talk about analyzing alternative payment models and the value that their practice would bring to those value-based team arrangements. So it could be done through celebrating more successes by sharing stories of performance and really demonstrating how they are providing that high quality care at that lower cost. And then another great example would be using an approach to eliminate waste in the workplace. So looking at lien and efficiency, having a way to review work processes, definitely including staff and providers as well in this process and finding those opportunities to really improve efficiencies, finding those areas of maybe some waste and rework or maybe some double steps that you could eliminate to really increase the value of that patient visit and that efficiency within the practice. Next slide please. We are already at our question screen. So here we are going to go ahead and open this up for questions about the program and Jennifer and I are standing on the line. We would be happy to answer any questions you have, whether it is about the practice assessment tool, the program as a whole. We do have these resources available to you. We would be more than happy to answer any questions at this time. So Temaka, we can open that up for any questions.

>> Thank you. Katrina, can you open the lines of please?

>> Yes ma'am. If anyone would like to ask a question, please press*one on your telephone keypad. Again, that is*one on your telephone keypad. We will give a moment to file the Q&A roster. Again, if anyone would like to ask a question, please press*one on your telephone keypad. There are no questions at this time. Oh we do have one now. From Catherine. Your line is open.

>> Thank you. Ladies, I am interested to have you express how after TCPI ends in August, how will Telligen be able to support practices going forward? Many of them are a little nervous if they are not starting a value-based team or a model like Inacio until the first of the year. So that gap and there is concerning them. Can you speak to that?

>> Hello. Absolutely. Catherine is a great coach for practice transformation in the state of Colorado. We really encourage practices to utilize and root reference. The change package which we do provide in our resources, it does provide strategies on how they can achieve these milestones within the program. Reaching out to the resources and the networking that they had created throughout the program, I have really seen some great networking from a great collaboration between providers. There are communities that are available to reference for certain quality improvement at work and to prepare for value-based payments. We are hoping that this continues on and that this work is never done so we are here at the quality improvement organization to definitely support practices and quality work, sustaining that work and definitely, being that resource and that link if that support is needed. So I'm not sure if that answers your question, Catherine but we definitely feel like this is going to be continued and that practice transformation is so vitally important to healthcare and to the practice as a whole.

>> Thank you. The only other thing I would ask is what about the actual reporting. When it comes time to report at the end of the year and TCPI , beginning of 20 and the practices really do not have contact with the cheetah anymore and they are kind of on their own, what resources would Telligen have for them? To help in that process. There was kind of some handholding in many cases. What might that look like?

>> Yes. Absolutely. That is a great question. We do have at this time, we have the support in the relationship with our partners. I know that the quality payment program team, if you want to join in, if you have any resources or suggestions for after the program, the program ends, that would be available to those practices that we could provide to them.

>> Hello everybody. This is Courtney in Colorado and thank you, Catherine, for your question and for joining. I can share with you that we will certainly be able to continue to provide support to the practices. For some of the states, Telligen provides support for the larger practices so we will continue to do that and help them and help you guys as well . Then if it is a situation where it is a smaller practice, if it is appropriate for us to refer that over to the contractors that support the smaller practices, then we can kind of help with facilitating a warm handoff. So for you guys here in Colorado, if it is a larger practice, please just reach out to me and I'm happy to help with that and if it is one of the smaller practices that I have specifically not been working with through any of the other Telligen initiatives, them -- that I am happy to do that warm handoff. For any of the folks in the states, just reach out to anyone on the second or third slide from our Telligen team. So Sandy, Temaka, Linda, or myself here in Colorado and we can help you get connected with who you need to. Just know that there will continue to be support for you guys as best as we can.

>> Okay. Thank you. I would like to develop something for my people before I exit to give them a parting gift. If find farewell. I really think they are going to need that.

>> Yes. Absolutely. We can talk off-line also but just feel free to give them my information and I am happy to connect them appropriately.

>> Okay. Thank you. That will help.

>> Sure.

>> Again, if anyone would like to ask a question, please press*one on your telephone keypad. Again, that is*one on your telephone keypad. There are no further questions. Please continue. I'm sorry.

>> This is LeeAnn. I just wanted to pose a question to the group. If anyone on the coffee talk today has participated in a practice transformation program, whether it is TCPI or another type of program or has done the work within their practice and would like to share some of their experiences with practice transformation, that is always greatly appreciated as well. So I just wanted to put that out there. It is always great to hear on the front lines. Their experiences with practice transformation and how that has impacted their practice and their care. So I just wanted to put that out there.

>> LeeAnn and Jennifer, this is Linda from Telligen Illinois and I have a question for you if you don't mind. Can you kind of give us an idea of what were some of the biggest gaps or problem areas that were identified with practices through this journey that they took in the transformation doing the assessment. Were they able to identify those problem areas and repair them quickly? What were some of the challenges?

>> That is a great question. Thank you for asking. So I know one of the biggest challenges that we see is the specialists that are enrolled in the program. For one, the practice assessment tool is a generalized tool. So that was one of our challenges at the very beginning is how do we apply these practice assessment tools or the roadmap to a variety of specialists? We had cardiology gaps. We had behavioral health, medical metabolic practices. There are so many specialists that are enrolled in this program especially in the state of Colorado. I believe and Catherine, correct me if I am wrong, I believe 27 different specialists in the state of Colorado. So we definitely had to really look at each practices individual situation and their specialty and look at how do we apply these milestones and these concepts to these specialists appropriately and really work with them with the resources they have. Some of these practices are one provider and that is all that is in their practice and some of them are part of a larger system. Some of them are located in very rural areas. With different types of patient population. So that was a really big challenge or gap that we incurred at the beginning. There is a workgroup that was created to take a look at the specialist tool and really develop these translations. So one of the translations we have would be for behavioral health. So how do we reduce unnecessary testing as it pertains to behavioral health? How do we coordinate care as it pertains to behavioral health? So we have about 13 translations of that practice assessment tool that have been designed and utilized within the TCPI community to really capture that progression for those specialists. So I know that was definitely one of those challenges or gaps that we saw early on and it was a workgroup that really embraced that and those differences and creating those translations. Jennifer, do you have anything?

>> Yes. I wanted to add on, it goes hand-in-hand with what LeeAnn mentioned but overall, the tool could be interpreted differently by many different people. So really, I think challenging but it is a good way to do it is really working and talking with the practices and understanding how their practice really flows. I know sometimes, some practices might be really small so they don't have as much capability as

big larger practices when they work with TCPI so really understanding how they work and really relating the milestones to them. I know especially with the specialty like LeeAnn mentioned, some of them, you have to definitely interpret it a little different when scoring it. Some individuals might get a little turned off or unsure about the assessment tool if they look at it and not understand we do have those translations to help out and really provide them with some details regarding their specialty.

>> And this is LeeAnn again. I also want to mention, we definitely embraced this early on is the relationships we have with our practice transformation networks. They do an incredible job, an amazing job working with these practices, coaching them and really aiding them in these efforts and we just think that the work that they do with these practices has really just been amazing to watch over the last few years. And really collaborating with them and definitely getting to know how they are working with their practices, how they are achieving these milestones has really been very successful with these practice assessments moving forward. So we have really embraced that and collaborated and really networked closely with our partners in the states.

>> Thank you, LeeAnn and Jennifer. Katrina, are there any more questions?

>> Again, if you would like to ask a question. Please press*one on your telephone keypad. There are no questions at this time. Please continue.

>> Thank you.

>> I'm sorry. This is Linda. I have one more question. Would it be useful for just any practice to download that tool and tried to implement it in their own practice without the coaching of the TCPI program? Could they do that independently ? Do you think it would be useful?

>> Thank you, Linda, for that question. This is Jennifer. It definitely would be great value to look into those resources. I know LeeAnn mentioned, she did one of those slides showing the primary assessment tool to use. So that could be a self-assessment if practices were interested in that to really review and kind of score themselves and see where they could improve on. I know I did highlight on the TCPI change package, that change package I think will be very valuable to the practices and to you guys. That is one of the resources when you register. So that actually provides some examples related to the milestones. So it is very, I think there is about 20 pages or so. It is kind of lengthy, but it definitely provides good examples related to all of these milestones. If the practice decides they want to self assess them, then I would refer to those Excel, the primary or specialty assessment tools.

>> Thank you, Jennifer. Are there any other questions in chat, Linda?

>> Nothing in chat.

>> Okay. LeeAnn, do you want to provide the participants with your contact information?

>> Absolutely. So on the next slide, we have our email addresses. Please feel free to reach out to either Jennifer or myself. If you have any questions or if you are unable to download our access those documents, we would be happy to send those to you. We really do appreciate your time. We really have

enjoyed working on this initiative. We really have seen some great successes with this initiative and it has been a pleasure to really share those and celebrate those wins for hard-working practices in the program. They have done an amazing job and we are so proud of them and the work they are doing to improve care of quality. So with that being said, thank you again so much for your time. We really have enjoyed meeting with you all and please feel free to reach out.

>> Yes, thank you everyone.

>> Thank you, Jennifer and LeeAnn. Thank you again for the great information. We really appreciate you sharing the TCPI framework and how practices have been able to achieve large scale health transformations. So thank you for sharing with us today. Here are a couple of quick reminders for Telligen upcoming events. On June 13, please join us for the June coffee talk. Registration is now available for June's event. A couple days after the June coffee talk, you can join us on June 19 for part three of the moving from [Indiscernible] to [Indiscernible] series. Parts one and two of that series have been recorded and can be found on the Telligen website . And speaking of the Telligen QPP website, check out the 2019 QPP toolkit which has the Telligen staff handpicked resources to help you in your 2019 QPP journey . You'll also find a new resource entitled QPP quick bites on demand. The slides are coming soon but I am happy to announce, there are two sessions that are posted to the Telligen [Indiscernible] website. These quick bites are visual presentation with a PowerPoint component and are great resources for QPP topics. The most recent QPP quick bites is focused on the factors used in the risk adjustment methodology. It will give you a better understanding of why and how what you code is crucial to the financial impact and success of your organization in this time of payment reform. We will also have the QPP podcast series entitled speaking out on QPP and those can be downloaded and played on the go. Telligen is pleased to announce the new secure portal which is going to be our centralized hub for the work that you do, that we do together with Telligen. If you are already part of our task work, you may have received a link to log into the portal. The resources are available 24 seven three your web browser and you will begin to see a lot more about this as time goes on. And lastly, Telligen can be found on social media sites . That includes Facebook, twitter, Apple podcast. We also have listed here are the two QPP team members contact information. If you have any questions about any QPP topics or QPP policy questions, you can reach out to someone in your state. Then lastly, as a last reminder, please complete the survey when you exit this presentation. We would love to hear back from you. Again, thank you for joining us today and we look forward to you joining us for future coffee talks. Thank you. Thank you, Katrina.

>> You are very much welcome.

>> Ladies and gentlemen, this concludes today's conference call. Thank you for participating. You may now disconnect.

>> [Event concluded]