

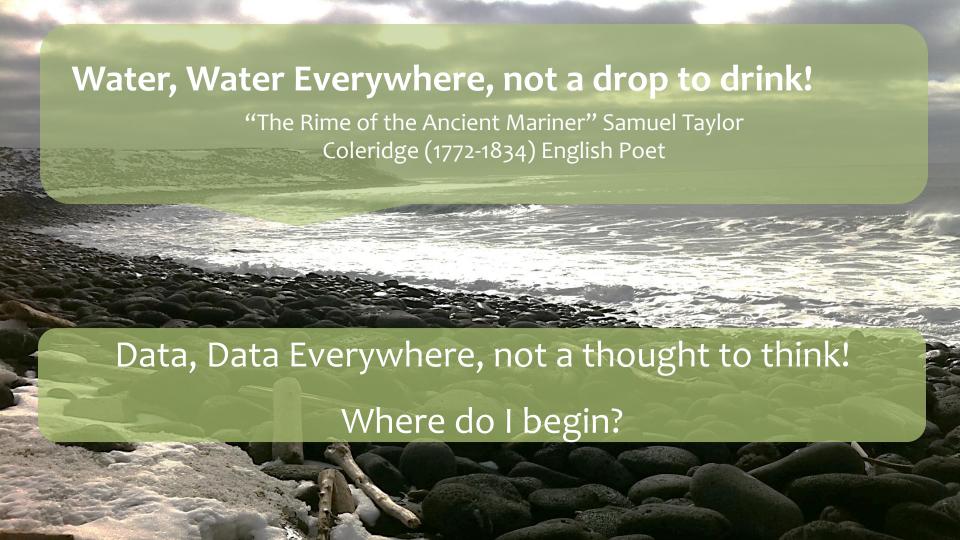
Objectives

- Apply Baldrige learning to data and population health
- Define the 4 layers of data interoperability
- Examine key factors that contribute to a successful population health data platform
- Evaluate and assess your organization's current capabilities and discuss your challenges

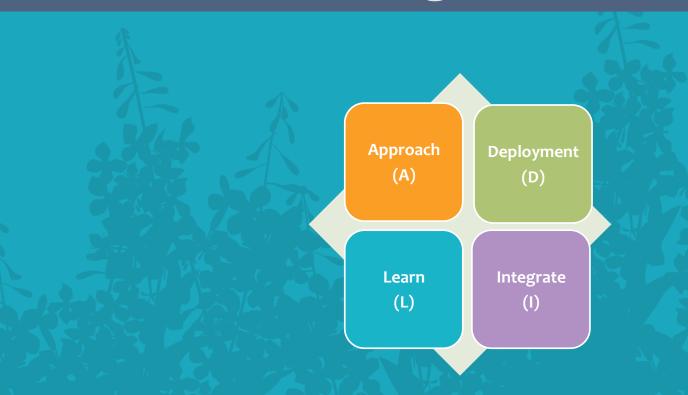
Popular Population Health Tools

- HealtheIntent Registries and EDW
 - Tableau
 - Business Objects
- Health Catalyst
 - Qlik
- i2i Tracks
 - Application Reports
- Azara DRVS
 - Application Reports

No solution will be successful without a sound approach to data strategy, planning and data governance.



Baldrige A-D-L-I



Data Management (ADLI)

- Approach
 - What is your organization's approach to data collection and reporting?
- Deployment
 - How do you deploy that approach to ensure it happens?
- Learning
 - How is your information structured and displayed to facilitate learning?
- Integration
 - How is information you are collecting integrated into the healthcare system?

Population Health Approach:

Transforming Research into Action



Organizational Objectives & Initiatives

Organizational Score

Clinic Score

Team Score Individual Score

Action Lists **Evaluations** Empanelment **Work Plans** Compensation

Data Services Approach **Action Improvement** Knowledge Information Plan Study **Data**

Deploying Interoperability



Technology Layer





User Layer



Organization Layer

Technology Layer



(Goal: Send/Receive/Store Data)

- Exchanging Data & Maintaining Interfaces
 - APIs, HL7, Data On-boarding
- No SQL Databases
 - Key Value Pair (Hadoop), Document (Mongo Db), Graphing (Neo4J),
 Columnar (HP Vertica)
- Changes to EHR
 - Change Management, Version Control
- External Technology, Equipment, Telehealth
 - Security, CommonWell Health Alliance HIE, transmission standards
- Master Data Management
 - Multiple Person IDs

Data Layer



(Goal: Data Standardization)

- Standard Nomenclature
 - ICD-10, SNOMED, CPT, LOINC
 - Selection, curation, maintenance, updates
- Data Standardization
 - Mapping non-standard data to standard data
 - ETL processes
- Tags
 - Used for quick reference, approved standardized list
- Naming Conventions
 - Approved naming formats for data warehousing schema

User Layer



(Goal: Data Models/ Visualizations)

- Data Warehousing, Data Modeling, Data Marts, Applications
 - Clinical, Operational, Financial, Customer-Focus
- Templates
 - All possible Diabetes codes across all nomenclatures (ICD-10, CPT, RxNorm)
- Concepts
 - Type 1 Diabetes, Type 2 Diabetes
- Context
 - HEDIS, UDS, Local
- Machine Learning & Discovery
- Reporting Tools / Data Modeling
 - Tableau, Business Objects, R, SAS, SPSS

Organization Layer

(Goal: Integration/Sustainability)

- Workflows
 - Support Data Entry
 - Model Implementation back into source system
- Data Governance (Policies & Procedures)
- Security (HIPAA)
- Regulations (Medicare, Medicaid)
- Staff Education & Training
- Leadership Support and Funding

Key Factors for Success



Build Relationships

- Understand who your key stakeholders are and build working relationships with them
 - Value the differences and strengths each of your voices bring
- Who are the "Data Stewards" in your organization?
 - How do you communicate with them and build relationships?
- Integrated Information Teams
 - Information support is aligned with and an extension of the product line
 - Medical services, Behavioral Health, Finance, Human Resources

Understand Stakeholder Needs

Executive staff

- How well are we doing with corporate objectives?
- Are we meeting our targets?

Front line staff

- Do I have the information tools I need to proactively do my work?
- Do the information tools save me time?

Managers

 Are there variations occurring in our processes and how can I identify them?

Customers

- I want to take a more active role in my health and wellness
- I'm in control of my healthcare
 - Shared decision making is between me and my healthcare team
- I want tools that give me access to my information

Get Leadership Buy-In

- Have an approach and be able to communicate that to leadership
- Demonstrate and communicate efficiency and value
 - Automate and standardize processes that required individual effort
 - Project Management 101 (Scope, Resources, Time)
 - Keep scope limited to what you have resources and time for
- Align with your corporate goals and objectives

Data Governance

- Establish a Data Governance Committee
 - Organization wide representation
- Version Control
- Change Management
- Enterprise Naming Methods
 - Standard Tags
- Tool and Report Platform Selection
- Metadata
 - Business user friendly methods
 - Technical data dictionaries and models
 - Process volume metrics, logs, process times
- Data Lifecycle

- Historical Data Decisions
- Standardization (concepts/context)
- Access and Security (active directory)
- Large Project Planning and Timelines
- Priority Setting / Request Tool & Process
- Resource Allocation (tools vs people)
- Alignment with Corporate Goals and Objectives
- Benchmarking
 - HEDIS, MGMA, Local, Similar Facilities
- Policies and Procedures

Determining Data Collection Cost

- "Where" does the data reside?
- "Who" is going to collect it?
- "How" are they going to collect it?
- "How frequently" should it be collected?
- "How much" is needed to answer questions?
- "How should it be stored"? Sensitivity (PHI)?
- "Who has access" and how?
- What is the "lifecycle" of the data?
- "Cost" of Collection (human/other resources)?

Workforce Development

Checklist Categories

- General Skills
- Metadata Knowledge
- Querying Tools
- Data Sources and Databases
- Reporting Tools
- Coding Vocabularies and Nomenclatures
- Regulatory MeasurementRequirements

- Information Security
- Querying Skills
- Chart/Graphing SkillsRelated to Improvement
- Statistical Skills
- Population Health and Patient Centered Medical Home
- ETL Tools

List skills in each category then score skills accordingly:

1= Little to No Experience

2= Theoretical Knowledge

3= Perform with Assistance

4= Perform Independently

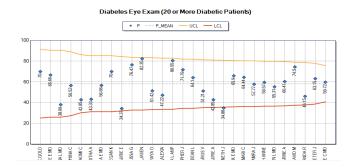
5= Expert, Can Teach

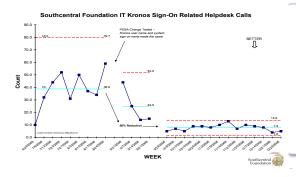
Workforce Progression

	Hire Date:											
	Last Promotion Date: N/A											
4												
5	Data Analyst											
6	0= Not applicable											
7	1= Little or No Experience											
8	2= Theroretical Knowledge											
9	3= Perform with Assistance											
10	4= Perform Independently											
	5= Expert can teach											
12 13 14		6	-			6		Report Writer	Analyst	Senior Business Analyst	Data Arch &	DDA
	Skills & Knowledge Career Progression Checklist Eval	Date	Eval	Date	Eval	Date	Eval	Level 1	Level 2	Level 3	ETL Prog.	DBA
115												
	7 ICD-9 Codes	1						X	X	X		
	B ICD-10 Codes 9 CPT Codes	1						X	X	X		
	D HCPCS Codes	1						X	X	X		
	1 LOINC Codes	1							X	X		
	2 DRG Codes	1										
		•							X	X		
	3 Dental CDT Codes	1							X	X		
	4 SNOMED	1						. v	X	X		
	5 Cerner Code Values	1						X	X	X		
	6 Rx Norm	1								X		
	7 RPMS Codes	1						X	X	X		
	RVUs	1								X		
129	Principle Types/ Cerner Code Sets related to Vocab. Ref. (Code Sets 400, 401, 12100)	1								X		
	Code Set Hierarchies	1								X		
	1 Works with Cerner Core Personnel to Define User Defined Code Sets	1								X		
132		15 Apr-1	5 0		0		0					
	4 Healthcare Performance Measurement Methods 5 HEDIS	1							X	Х		
	GPRA/CRS	1							X	X		
	7 UDS	1							X	X		
138	Meaningful Use Functional Measures	1							X	X		
139	Meaningful Use Clinical Quality Measures	1							X	X		
	Acountable Care Organization Measures (ACO)	1							X	X		
	1 TCHIC	1							X	X		
	PQRS (GPRO Submission)	1							X	X		
	Balanced Scorecard	1						X	X	X		
144	SUBTOTAL:	9 Apr-1	5 0		0		0					
145												
146	Information Security											
147	7 Annual HIPPA Training	1						X	X	X	X	X
											1	

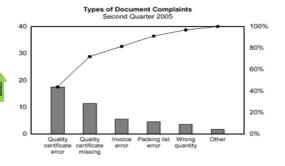
Visual Learning

Team	Provider	Numerator	Denominator	% Screened
		696	1194	58.3 %
		660	1104	59.8 %
⊞ 1 East		79	157	50.3 %
1 West		89	160	55.6 %
⊞ 2 East		123	210	58.6 %
⊞ 2 West		111	176	63.1 %
⊞ 3 East		134	207	64.7 %
∃ 3 West		124	194	63.9 %
	JAMES, DAVID M	38	51	74.5 %
	KANTOR, LINDA L ANP	29	36	80.6 %
	LINFIELD, JANA L	16	19	84.2 %
	NORRIS,KENNETH J	15	43	34.9 %
	WRIGHT, TAMRA J	26	45	57.8 %









Segmentation



HEDIS Breast Cancer Screening Scores

Breast Cancer Screening Rates as of: 5/16/2015

2014 HEDIS Medicaid Benchmark 75th Percentile = 65.12%

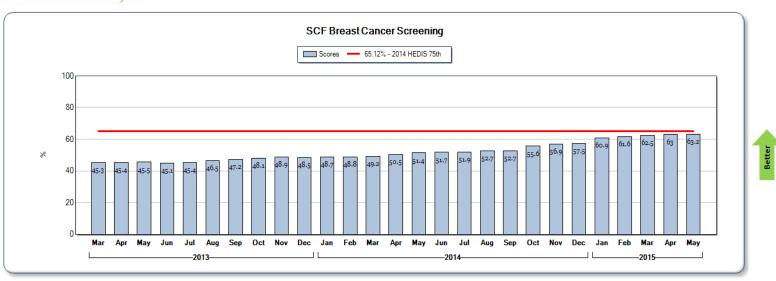
Methodology

Organization	Clinic	Provider	Numerator	Denominator	% Screened
SCF			2738	4332	63.2
	□ 1 East		398	625	63.7
		Carrick, Erin P, PA-C	44	78	56.4
		Heggen, Leslie N, PA	60	117	51.3
		Leoncio, Ferritha A, MD	81	111	73.0
		Mcwilliams, Ryan T, MD	70	114	61.4
		Ott, Laurie A, PA-C	76	118	64.4
		Zimmer, Laurie E, MD	67	87	77.0
	1 West		412	683	60.3
	2 East		372	574	64.8
	2 West		329	572	57.5
	3 East		388	598	64.9
	3 West		347	540	64.3
	⊞ Life House Rural CHC		2	7	28.6
	Milavena		52	71	73.2
	⊞ Pediatrics				
	⊞ Quyana Clubhouse		3	5	60.0
	⊞ St. Paul Health Center		11	14	78.6
	⊞ Upper Kuskokwim		38	61	62.3
	■ VNPCC East		171	285	60.0
	■ VNPCC West		215	297	72.4

Assessment Over Time



HEDIS Breast Cancer Screening Scores

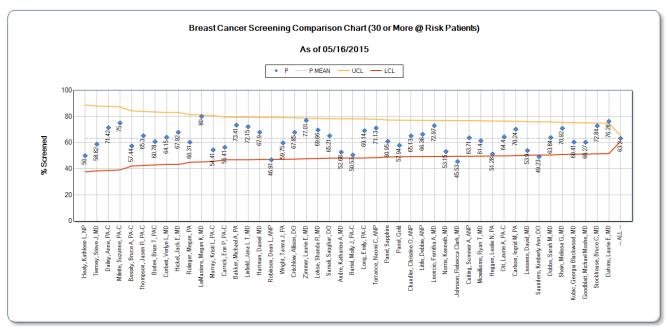


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Comparison Chart (Variation)



HEDIS Breast Cancer Screening Scores



Execution Time: 5/20/2015 11:31:02 AM Page 3 of 3

Customer Focus

5 The provider listened carefully					
to me.	SCF			97.0	
		MSD		96.9	
			Primary Care 1 East Primary Care 1 East	98.3	122
				93.6	110
			⊞ Primary Care 2 East	90.6	121
				100.0	105
			<u> Primary Care 3 East</u>	93.5	92
				97.6	176
6 I was provided with enough					
information to make decisions.	SCF			95.9	
		MSD		95.8	
			<u> Primary Care 1 East</u>	95.7	122
				95.4	110
			<u> Primary Care 2 East</u>	89.8	121
				98.0	105
			<u> Primary Care 3 East</u>	93.5	92
				94.6	176

Access

Past and Future Appointment Availability as of 8:00 am

Clinic in Report: VNP PC East

Open = Unbooked Appointments Booked = Booked Appointments

Blocked = Blocked Schedule for Meetings, Desk Time etc. Methodology

Location - Click ‡ plus to expand providers	Provider - Click	Unbooke ‡ d (Min)	Appts ÷ (Min)	Blocked ‡ (Min)	Total ÷ (Min)	Blocked % ‡	Unbooked % ÷	Appts % ‡
VNP PC East		6495	1950	1995	10440	19.11%	62.21%	18.68%
□ 5/20/2015		1680 ‡	1005 ‡	495 ‡	3180	15.57% ‡	52.83% ‡	31.6% ‡
	Bassity, Bruce PA	180	240	30	450	6.67%	40%	53.33%
	Boden, Brian PAC	150	225	75	450	16.67%	33.33%	50%
	Goff, Kylea Pharm.D.	420	0	60	480	12.5%	87.5%	0%
	Lohse, Shanda R MD	240	120	90	450	20%	53.33%	26.67%
	Nardini, Neil PA-C	300	150	0	450	0%	66.67%	33.33%
	Thompson, Jasen PA	225	45	180	450	40%	50%	10%
	Wright, Tamra PA	165	225	60	450	13.33%	36.67%	50%
⊕ 5/21/2015		1230 ‡	615 ‡	435 ‡	2280	19.08% ‡	53.95% ‡	26.97% ‡
⊞ 5/22/2015		705 ‡	135 ‡	510 ‡	1350	37.78% ‡	52.22% ‡	10% ‡
⊞ 5/25/2015		0 \$	0 \$	0 \$	0	0% ‡	0% ‡	0% ‡
⊞ 5/26/2015		1170 ‡	165 ‡	465 ‡	1800	25.83% ‡	65% ‡	9.17% ‡
⊞ 5/27/2015		1710 ‡	30 ‡	90 ‡	1830	4.92% ‡	93.44% ‡	1.64% ‡

Registries (Action Lists)

Fictitious Customer-Owner Information

Diabetes Action List

Links to Documentation: Report Methodology

Data Resolution/Error Correction Process

Diabetic Patient Status as of Week Ending: 3/13/2009

HRCN ‡	Patient ‡	New Diabetic (< \$\div 90 Days) *Click Link to see Diagnosis Details!*	Sex ‡	Age ‡	HBA1C ‡ Result	HBA1C ‡ Date	Most ‡ Recent LDL Result	LDL Date ‡	
Ko, Patricia	Ko, Patricia A Total Diabetic Patients: 47								
72048	Abbasi, Darren	<u>No</u>	М	71	5.8	2009/01/13	67	2009/01/13	
42457	Abell, Frederick	<u>No</u>	М	67	6.3	2009/03/06	86	2009/03/06	
12916	Allen, Marcus	<u>No</u>	М	82	6.4	2008/06/03	129	2008/06/03	
72098	Armston, George	<u>No</u>	М	81	5.3	2008/12/01	90	2008/12/01	
1192	Bark, Samuel	<u>No</u>	М	85	6.9	2009/01/22	110	2009/01/22	
45979	Bevis, Michael	<u>No</u>	М	76	5.7	2009/03/09	79	2009/03/09	
32158	Black, Lewis	<u>No</u>	М	36	6.3	2009/03/03	116	2008/11/15	
19202	Caldwell, Charlotte	<u>No</u>	F	80	5.8	2009/02/23	93	2009/02/23	
84893	Evarza, Wallace	<u>No</u>	М	40	5.7	2008/06/24	113	2008/06/24	
61328	Ferris, Adam	<u>No</u>	М	40	6.8	2009/02/12	86	2009/02/12	
19492	Gafford, Joseph	<u>No</u>	М	41	6.3	2008/03/31	64	2008/03/31	

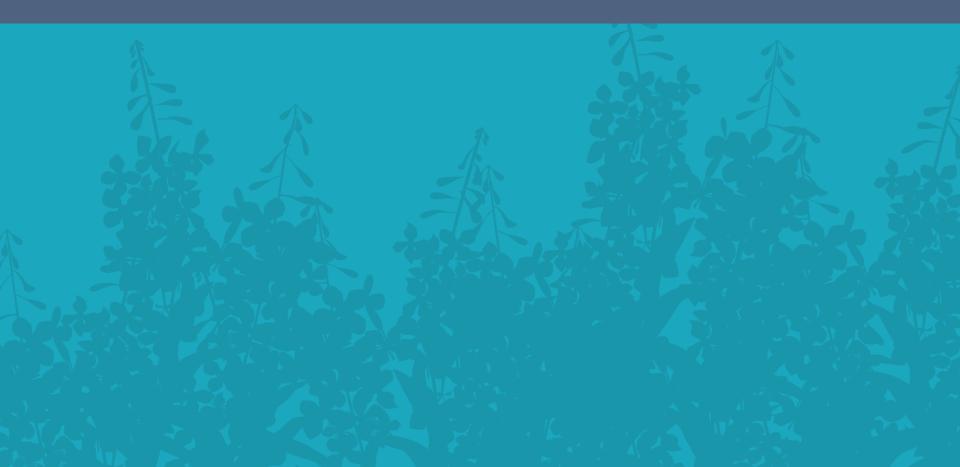
Beyond Reporting

- Machine Learning
- Data Modeling
- Workflow Modeling/Testing/Integration
- Proactive/Integrated Population Health

Why Is All This Important?

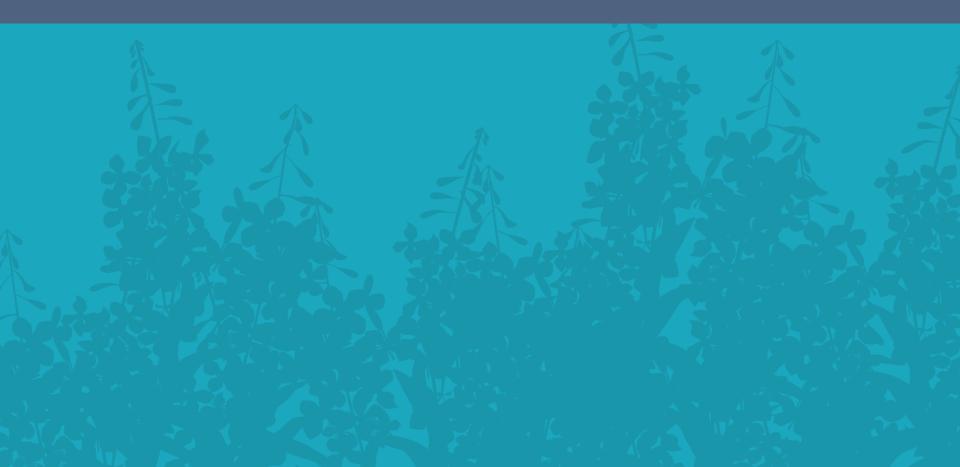


Self Assessment Exercise



5 Level Integrating Surviving **Understanding Applying Analyzing** Characteristics Capability: Capability: Capability: Capability: Capability: Canned Reports/ Metrics/ Reports Dashboards/Regis Statistical Data Models integrated Extracts/ Excel (Not Standardized/ tries (Standardized); Models/ Machine into Workflows Not Centralized). Align with Corporate Spreadsheets Learning. Goals and Objectives. Workforce: Workforce: Workforce: Workforce: Workforce: Department Staff IT support through Centralized Data Data Scientists. Data Scientists. Run Reports. ticket system. Services Department Data Architects Application Developers (report writers and join Data Services and Data Services data analysts) aligned Governance: Governance: Governance: Governance: Governance: No clear data Limited to specific Data Governance Data Stewardship & Organizational ownership, no projects, informal, Committee mostly T Information Focused Planning and Funding proactive data siloed and EHR focused (standardization, align with Data planning (security, change mapping, priority Steward and Data setting, data lifecycles) management) Governance objectives Infrastructure: Infrastructure: Infrastructure: Infrastructure: Infrastructure: Data warehouse data Data primarily in Query tools for Data Warehousing Certified metrics in the transactional specialized staff with multiple data with cleansed. warehouse.APIs. systems. Query from transactional sources. Data standardized, and multiple database and options are limited. system. available for query modeled data. Refer applications integrated ing, but data not ence tables, report tools standadized integrated.

Discussion



Thank You!

Qaĝaasakung Aleut

QuyanaaAlutiiq

QuyanaqInupiaq

Awa'ahdah

Eyak

Mahsi'Gwich'in Athabascan

Igamsiqanaghalek
Siberian Yupik

Háw'aa Haida

Quyana Yup'ik **T'oyaxsm**Tsimshian

Gunalchéesh Tlingit

Tsin'aenAhtna Athabascan

Chin'anDena'ina Athabascan

Upcoming Nuka Events

Event Name	Date
Core Concepts Training	May 23-25, 2018
Nuka System of Care Conference	June 18-22, 2018
Motivational Interviewing	June 25-26, 2018
Coaching and Mentoring Program	June 25-29, 2018
Quality Management Training	June 25-29, 2018
Integrated Primary Care Team Training	June 27-29, 2018
Behavioral Health Integration Training	June 27-29, 2018

