# **Task Force on Maternal Health Data and Quality Measures**

Tuesday, May 24, 2022 10:00 AM – 12:00 PM

## Virginia Hospital & Healthcare Association

Washington Conference Room Glen Allen, VA 23060

**Zoom Meeting Registration** 

https://vdh.zoom.us/meeting/register/tJArf--vqTspHdPPXHHL-53nUv8zhzkqinCX

# **Attendance** (Present=**Bold**):

Laura Boutwell, DVM, MPH	Girlyn Cachaper	Crystal Fink, CPM, LM
Richard Rosendahl	Stephanie Spencer, BSN, RN,	Jonathan Swanson, MD, MSc
	LCCE, CLC	
Featherstone (Rachel)	Kenda Sutton-EL, B.H.S., CLC,	John Muraca for Tameeka L.
Featherstone, WHNP-BC, MSN	Doula Trainer, DEI	Smith
Kelly Cannon	Kanaja Hunt	Shannon R. Pursell, MPH
Rachel Becker	Doreen Bonnet	Henry C. Murdaugh, MPH
Deborah Waite	Scott Sullivan, MD MSCR	Heidi Dix
Christian Chisholm, MD	Evette Hernandez	Jenny Fox, MD, MPH
Peter Kemp, MD, F.A.C.O.G.	Karen Kelly	Kenesha Barber, PhD
Barbara Snapp	Melanie J. Rouse, PhD	Dane De Silva, PhD, MPH
Shannon Miles, RN	Sydney Ray	Jackie Cornell
Gabriela Mandolesi	Mary Ellen Bouchard	Jacque Hale

Senator Mamie E. Locke	Delegate Charniele Herring
Senator George Barker	Delegate Shelly Simonds
Senator Jen Kiggans	Delegate Kaye Kory
	Delegate Dawn Adams
	Brandon Jackson
	Delegate Candi Mundon King

VDH Staff
Charli Williams, MPH
Meagan Robinson, DrPH, MPH

10:00 – 10:15	<ul> <li>Welcome: Meagan Robinson, VDH ex-officio</li> <li>Roll Call began with in-person attendees, then those present via Zoom introduced themselves.</li> <li>Review of Agenda</li> <li>Review of meeting minutes</li> <li>Meeting minutes from March 22, 2022 were read. Motion to approve</li> </ul>
	minutes. Minutes approved.
10:15 – 10:30	<ul> <li>Bylaws Vote: Charli Williams</li> <li>Members were asked were there any suggested changes to draft         Bylaws sent after March 22, 2022 meeting. There were none. Motion         to accept Bylaws, second. Bylaws were accepted.</li> <li>Chair/Vice-Chair Nominations: Charli Williams</li> </ul>
	<ul> <li>Reviewed of roles of Chair and Vice Chair. Presented Dr. Larry Maxwell's nomination of Dr. Scott Sullivan (virtual) for Chair. Dr. Sullivan accepted the nomination and gave a brief history of his career; highlighting his time as Chair of the Maternal Mortality Review Committee in South Carolina. Members discussed the importance of the elected Chair being physically present to lead meetings. Dr. Sullivan's ability to be in-person for future meetings was confirmed, and he stated he would be present in-person. Dr. Robinson asked for a motion, and a second to nominate Dr. Sullivan; All voted to appoint Dr. Sullivan as chair.</li> <li>clarified Co chair vs vice chair. Delegate Sherri Simonds was nominated for Vice-Chair. Del Simonds accepted if no one else was interested. Motion to nominate, second. All voted to appoint Delegate Simonds as Vice-Chair.</li> </ul>
10:30 - 11:00	Presentations and Updates
	<ul> <li>Measure 1 Presentation: John Muraca, UHC (Tameeka Smith designee)</li> <li>Measure 2 Presentation: Laura Boutwell, DMAS</li> <li>Environmental Scan sub-team Update: Shannon Pursell, VNPC         <ul> <li>Suggested that Access to Medicaid/Enrollment question be included on survey</li> </ul> </li> <li>Best Practices sub-team Update: Shannon Pursell, VNPC         <ul> <li>Author's notes at the end of Meeting Minutes. All slide presentations and some supplemental materials will be sent to Task Force members in follow up email.</li> </ul> </li> </ul>
11:00 – 12:00	Open Discussion: Charli Williams

	<ul> <li>HB2111 Measures 1 &amp; 2</li> <li>Due to time running out members suggested we start the 3<sup>rd</sup> task force meeting with discussion of Measures 1 and 2. Suggestion made that members think over the questions presented and have some research and responses prepared for top of the meeting. Members all agreed.</li> </ul>
	<ul> <li>Next meeting         <ul> <li>Suggestions on where to have the next meeting in-person (virtual option available)</li> <li>Next meeting agreed to be held at Virginia Healthcare and Hospital Association again. The same conference room to be utilized again.</li> </ul> </li> </ul>
	<ul> <li>Potential Agenda Items for next meeting         Measure 1 &amp; 2 to be discussed at top of next meeting.</li> <li>Data Systems: environmental scan survey to be further distributed</li> </ul>
	<ul> <li>*Note* survey not approved day of meeting. Will be sent out to Task Force by Friday May 27, 2022.</li> <li>Action Items:</li> </ul>
	Existing Data Systems (recurring)
12:00	Adjournment: Charli Williams  Meeting adjourned at 11:59 AM.
	Lunch: Provided by VHHA

#### **Presentation Notes**

## MEASURE 1- John Muraca-Third Party Payer Data Benefits/Missed Opportunities

Good for aggregate data

Not as comprehensive as clinical notes

Maternal care spectrum not always collected because the code used to pay is allowed as one, so prenatal and postpartum care can be missed

Reimbursement is what matters; providers might know multiple things about the patient, but may only report one (the one they deem as the most important issue)

Medicaid ID is the unique identifier utilized by UHC as they don't have SSN for all members

Social Determinants of Health (SDoH) diagnosis rarely submitted by providers

Provided clarity and gave examples of SDoH diagnosis codes

Barriers- largely Coverage! Eligibility, but also just gaps in coverage

Question about Hospitalist and OB barrier point from slideshow

Question about United's claims database and whether updates had been made to track quality of care

Question about whether United was different than other MCOs

Discussed more examples about SDoH diagnosis codes. And the number of diagnosis codes allowed in a claim.

Point was that most providers may submit 1 or 2, rarely 3 diagnosis codes. Even though limit is higher and vary from MCO to MCO.

Discussion about Z codes- where Social Determinants of Health (SDoH) diagnosis codes are. They are not widely used

#### MEASURE 2- Dr. Boutwell- HEDIS Measures and Timeliness of pre and postpartum care

**Defining HEDIS** 

NCQA- private organization. MCOs must be accredited, audited, and rates approved by NCQA Access and availability of Care is the HEDIS measure

Telemedicine was expanded in the calculation of rate

Calculating and supplementing data is an issue

External Quality Review Organization- reg'd to oversee federal programs

Members discussed the rate under HEDIS of 1 trimester care

Many shared concerns about the rate not capturing a clear picture of early prenatal care Members discussed how an uninsured pregnant woman would know how to get on Medicaid (FAMIS) Dr. Boutwell explained there are a lot of marketing avenues for Medicaid and would be happy to share more information later.

### Best Practices Research (Example) - Shannon Pursell- VNPC Maternal Health Data Dashboard

Limiter- Only delivery/discharge data (if admitted 3 times, but did not deliver, then it will not make it to this dashboard)

Only lags about 1.5 quarter (close to real-time as far as data systems are concerned)'
Presenter was asked about where VNPC gets the All Payer Claims data- answered that VHHA Analytics provide it to the dashboard, so yes, it comes from VHI

Point of the data is to cause us to ask questions

Doula's – 1 year from now, what impact has Doula access had

Members discussed the current state of capturing the use of Doula's involved in these births? Some members were aware of the use of doulas and knew of data collected on that usage. Members and the presenter discussed the tracking of military affiliations among mothers, and how

there is current communication with the VA to begin this. The VA has switched from Tricare and now they must get access to data from the new system.

Members discussed more about how Doulas help and how Sentara RMH have had 2 doulas in their system for almost a decade.