



**From Dr. Drusilla S. Powell, CMG Physician with Chesapeake Pediatrics and Chair, SQCN Pediatric Primary Care Collaborative**



Welcome to the August edition of the SQCN/SACO newsletter, *Inside Population Health*. We are focusing on back-to-school requirements, well-care visits, child vision checks, sun safety, and flu season. **Our measures include Immunizations for Adolescents (Combo 1 and HPV Immunizations); Childhood Immunization Status (Combo 3); Child and Adolescent Well-Care Visits; and the Flu Shot.**

For most kids, parents, and pediatricians, August means back-to-school. This includes completing the required physical forms and immunizations.

**Unfortunately, COVID-19 continues to impact the health of our children.** It disrupted routine well-care visits and increased parental mistrust of all vaccines. As a result, many children have fallen behind in routine visits and immunizations. For example, the Centers for Disease Control and Prevention (CDC) reported compliance with measles vaccine down 20% following the COVID-19 pandemic.

Adult physicians can assist pediatricians in restoring confidence in immunizations by raising awareness of both adult and maternal vaccinations. **For parents with vaccine hesitancy, studies show the best approach is to address the specific concern.** See this [CDC link for resources](#) to help increase vaccine compliance. There is vaccine-specific information for parents as well.

**In August, we cannot forget about sun safety.** Please remind your patients to apply sunscreen daily and limit exposure when possible. Skin cancer is the most common cancer found in the United States, affecting some 6 million adults each year. Treatment for squamous and basal cell carcinoma costs almost 9 billion a year. Find our HCC coding tips below for melanoma, basal, and Merkel cell carcinomas.

**Flu season begins for most in September**, but there are certain patients that can benefit from the flu shot now. This includes those over 65, pregnant people in the third trimester, and kids who need two doses. See this link for CDC information on the [2023-24 flu season](#). Remember that your patients with diabetes have an increased risk. Read below for more information on diabetes and the flu, and how SQCN and SACO can help your patients with diabetes management services.

**Back-to-school may be a stressful time for parents and children.** Remind patients to keep a check on the mental health of the family. Encourage parents to spend quality time with their child each day and limit screen time for all ages. Help children reduce anxiety by teaching organizational skills and maintaining a regular schedule, especially for meals and bedtime.

Thank you for all that you do!

### **SQCN August 2023 Primary Care Meetings\***

- The Pediatric PCPC will be on August 15 from 6-7:30 p.m. Dr. Amy Dryer, Dr. Jackie Cotton, Dr. Leah Rowland, and Dr. Angela Hogan will give a back-to-school update. Meeting link [here](#).
- The Adult PCPC meeting will be held on August 17 from 7-8 a.m. Speaker and topic TBD. Meeting link [here](#).

### **SQCN August 2023 Practice Managers Meeting\***

- The meeting will be on August 23 from 12:15-1 p.m. Meeting link [here](#).

### **SACO August 2023 Primary Care Leadership Meeting**

- The monthly meeting will be held on August 18 at 7 a.m. Discussion TBD.

\*No preregistration is necessary, simply join the links above. Click on the button

below to access the 2023 meeting schedule and information.

2023 SQCN Primary Care Engagement Bonus Meetings

## SQCN Impact Scorecards

This [link](#) will take you to your monthly 2023 Adult and Pediatric Practice Impact Scorecard. Please be sure to check back monthly for your practice performance.

Avoidable ED visits (rate per 1,000) remain as our utilization metric and there are several quality metrics for adult and pediatric populations. These metrics are scored for each practice and the total score is expressed as a percentage from 30-100%. That Performance score will be combined with attribution to determine distributions. The report will be updated monthly so that you can track your practice's performance.

See the button below for more information about the Impact Scorecard and the SQCN distribution plan.

Please contact [SQCN@sentara.com](mailto:SQCN@sentara.com) if you have any questions.

Impact Scorecards SBAR

## MIPS: New Reporting Options

It is important for all practices to think about the MIPS reporting requirements for 2023. Now that we are out of the Public Health Emergency, COVID-19 exceptions are not automatic. We all need to be aware of our reporting options.

The good news is there are three options in 2023: traditional MIPS, MIPS Value Pathways (MVPs), and the APM Performance Pathway (APP) for practices who participate in an ACO.

**Merit-based Incentive Payment System (MIPS)**  
Reporting Options

There are 3 MIPS reporting options available for the 2023 performance year:

Traditional MIPS	MIPS Value Pathways (MVPs) NEW for 2023	APM Performance Pathway (APP)
<p>This is the original MIPS reporting option.</p> <ul style="list-style-type: none"> <li>Clinicians: <ul style="list-style-type: none"> <li>Select their <b>quality measures and improvement activities</b> from the complete MIPS inventory.</li> <li>Clinicians are automatically evaluated and can be scored on up to 4 administrative claims quality measures.</li> </ul> </li> <li>Report the complete <b>Promoting Interoperability</b> measure set.</li> <li>Will be scored on <b>all cost</b> measures for which they meet or exceed the established case minimum.</li> </ul>	<p>This is the newest option for meeting your MIPS reporting requirements, offering clinicians subsets of measures and activities relevant to a given specialty or medical condition.</p> <ul style="list-style-type: none"> <li>MVPs offer more meaningful groupings of measures and activities to provide a more connected assessment of the quality of care.</li> <li>There are 12 MVPs available for 2023; <a href="#">advance registration is required</a>.</li> <li>Once registered, clinicians select from the quality measures and activities available within their selected MVP. <ul style="list-style-type: none"> <li>Population health measures are scored as part of the quality performance category.</li> </ul> </li> <li>Report the complete <b>Promoting Interoperability</b> measure set.</li> <li>Clinicians will be scored on every <b>cost</b> measure available in their selected MVP for which they meet case minimum.</li> </ul>	<p>This streamlined reporting option, with a predefined measure set, is only available to MIPS APM participants.</p> <ul style="list-style-type: none"> <li>The APP is designed to reduce reporting burden and encourage participation in APMs.</li> </ul>

CMS will use "best" score

The MVP option has fewer measures to report, and they are more relevant to specific specialties. Practices must [register in 2023 at the Centers for Medicare & Medicaid Services \(CMS\) Quality Payment Program \(QPP\) site](#) for MVP reporting.

If you are participating in SACO, we will report MIPS. You are encouraged to report independently as well—CMS will take the best score if more than one method is submitted. For SQCN practices not in SACO, use traditional MIPS or look into the new MVPs as an alternative.

Contact [SQCN@sentara.com](mailto:SQCN@sentara.com) or [SACO@sentara.com](mailto:SACO@sentara.com) with questions.

## HCC/Coding Tip: Melanoma and Other Cell Carcinomas

August is Summer Sun Safety Month. It is an excellent time to do an annual skin check on your patients. See the following codes for cell carcinoma, if found.

**Melanoma: Black or brown tumor is the most dangerous type of skin cancer.** Melanin-forming cells, especially in the form of a malignant tumor, are associated with skin cancer. Melanoma has increased over the last 30 years. Ultraviolet (UV) exposure is one of the main reasons for this rapid rise in the number of melanoma cases.

**(C43.XX - HCC Category 47 - RAF 0.838)**

**Merkel cell carcinoma: Malignant cutaneous cancer that is usually found in elderly patients with sun exposure.** It usually presents as a flesh-colored or bluish-red lump typically seen on the neck, head, and face.

**(C4A.XX - HCC Category 47 - RAF 0.838)**

**Basal cell carcinoma: Abnormal growth of skin cells that arises from the deepest layer of the epidermis and may present as an open sore, red**

**patches, pink growth, or scar.** Typically caused by sun exposure, it is one of the most common forms of skin cancer. **(Not HCC)**

Be sure to code as “history of” (no HCC) once the cancer is removed/resolved and the patient is no longer on any form of treatment.

## End-of-Life Care Presentation and Pilot

The Palliative Care Medicine Learning Collaborative presents part two of the four-part series inspired by the letters of Dr. Thomas Pellegrino, former Associate Dean for Education at EVMS. In 2011, Dr. Pellegrino was diagnosed with a terminal illness and used it as a teachable moment for his students to better understand the patient's perspective. [Part two, "What Matters Most," will be held virtually on Thursday, September 7, from 12-1:30 p.m. Register here.](#)

For the past few months, we have discussed our **end-of-life care pilot program led by Dr. Marissa Galicia-Castillo of EVMS Palliative Medicine**. End-of-life care planning is often uncomfortable for patients, families, and clinicians. However, it is an important population health goal to normalize these discussions and use our collective expertise to facilitate a “good life to the very end.” We have an opportunity to move these discussions to within the disease process, instead of waiting for an ED or ICU crisis. It should become a routine part of the care we provide.

Read more about our pilot and how to participate here. If you have any additional questions, please contact [SQC�@sentara.com](mailto:SQC�@sentara.com).

End-of-Life Care Pilot Information



**Innovative Practice: [Tidewater Children's Associates](#)**

Working with families to get children and adolescents in for the well-care visits and recommended vaccinations can be challenging. Particularly in time for a new school year. Tidewater Children's Associates in Hampton Roads has found a way to meet the goals of both their patients and their practice. Here are the best practices that Tidewater Children's Associates find helpful:

- **Discussing upcoming vaccines as early as possible.** For example, the conversation about getting the human papilloma virus (HPV) vaccine starts at the 10-year-old well-care visits. Though many families choose to delay the immunization until age 11 years or older, it can be beneficial to start this discussion earlier.
- **Working as a unified team to get those appointments scheduled.** After identifying the patients who need to come in, patient registration technicians, primary care coordinators, schedulers, and nurses all pull together.
- **Text message appointment reminders.**
- **Flexibility by most insurance companies to allow a well-care visit within the calendar year.** Often, summer months are less stressful for families as the children have a lighter schedule. Make sure families know they can take advantage of this timing.
- **Partnering with area schools.** Immunization requirements prior to entering for the upcoming school year helps motivate families to get them done.

As the school year approaches, it is a team effort to meet the needs of pediatric patients. Having healthy and medically ready children and teens should be the overall goal.

## **Back-to-School Immunizations and Eye Checks**

Beyond the standard School Entrance Health Form and Immunization Record required for kindergarten, middle and high school students entering the 7th and 12th grades also have vaccine requirements: Tdap and MenACWY (first dose) for 7th grade and MenACWY (second dose) and the Serogroup B meningococcal (MenB) series for 12th grade.



There is also the HPV vaccine that can prevent six different types of cancer. Children nine and up are generally on a two-dose schedule. One dose is recommended to enter 7th grade.

The [National Immunization Awareness Month \(NIAM\) campaign](#) exists to help get all age groups back on track with recommended vaccines.



Another part of school readiness for children is vision screening. The American Academy of Pediatrics recommends photoscreening starting at 12 months and continuing annually until the child can read an eye chart. This method screens for refractive errors, ocular misalignment, and other risk factors for amblyopia. The results are available in a matter of minutes, allowing for a referral for a comprehensive eye exam when indicated.

Ocular safety in sports is often overlooked. Protective eyewear with polycarbonate lenses is recommended for sports like basketball, soccer, lacrosse, field hockey, and paintball. Baseball batting and football helmets need a protective face shield. And swim goggles are necessary for competitive swimmers.

The sports pre-participation athletic exam is the perfect time to remind athletes and parents about protective eyewear. For more information, refer patients to the [National Eye Institute: Sports and Your Eyes website](#).

## Pharmacy Highlights: Vaccines and Flu Shot

Healthcare providers, like you, are essential, longstanding partners in the safe administration of vaccines. They ensure safety from the moment vaccines arrive at a facility to when they are administered to patients.

Proper storage and handling of vaccines by healthcare providers helps to ensure vaccines remain potent and result in an adequate immune response in the patient. The CDC provides [vaccine storage and handling resources](#) to educate providers on best practices.

Healthcare providers also contribute to what we know about vaccine safety by reporting clinically important adverse events following vaccination. The [Vaccine](#)

[\*\*Adverse Event Reporting System \(VAERS\)\*\*](#) is the nation's frontline system for monitoring vaccine safety. The information shared in VAERS reports helps CDC and FDA keep vaccines safe for everyone.

Pharmacists in the community pharmacy setting have specialized training and certifications to provide certain vaccines to patients without a prescription. As an example, the state of Virginia permits pharmacists to provide the flu vaccine to all patients ages 6-months and older. See the CDC report on the recommendations for the [\*\*upcoming 2023-2024 flu season\*\*](#).

## Care Corner: Diabetes and Flu

According to the CDC, people with diabetes (to include type 1, type 2, or gestational) [\*\*have a higher risk of serious flu complications\*\*](#).

These may include ear or sinus infections, bronchitis, or even pneumonia. Remind your patients with diabetes to get a flu shot.

If you have a patient who may benefit from [\*\*diabetes self-management care services\*\*](#), contact SQCN at [\*\*SQCN@sentara.com\*\*](mailto:SQCN@sentara.com) or SACO at [\*\*SACO@sentara.com\*\*](mailto:SACO@sentara.com).

### Diabetes Self-Management Care Services

#### A Message on Behalf of Your Primary Care Team

Having a diagnosis of diabetes can be stressful and scary. It can feel like it is too much to handle on your own. Your primary care team is working with specially trained registered nurse care managers and care coordinators. Together, they can help you understand and manage your diabetes. They can also help with any other health issues that you may have.

Here are some examples of the kind of help the team can give you.  
These services are personalized and do not cost you anything:

- ✓ Diabetes education and how daily events affect glucose control
- ✓ Treatment option education including **medications and glucose monitoring**
- ✓ **Benefits and eligibility** for continuous glucose monitoring (CGMs)
- ✓ Healthy **eating and activity** recommendations
- ✓ **Reducing risk** for complications
- ✓ Maximizing your **insurance benefits**



When you have blood sugar levels over 180, this can cause damage to blood vessels and nerves. It can lead to:

- Heart disease or stroke
- Kidney disease
- Eye damage
- Poor circulation in the feet or legs
- Poor wound healing
- Immune system issues
- Depression, distress, or low mood

Contact our care management team to get started with diabetes self-management services at [\*\*SQCN@sentara.com\*\*](mailto:SQCN@sentara.com) or [\*\*SACO@sentara.com\*\*](mailto:SACO@sentara.com).



## Healthy Planet Update: It's Live!

Epic Healthy Planet and the Value-Based Program Scorecard are now available to provisioned SQCN providers and practices. Healthy Planet is an Epic tool that allows non-Sentara partners to review and contribute clinical information to patient records for the Optima Commercial population. There is future expansion planned to Optima MA, Optima Medicaid, and Humana MA populations.

Integrated within Healthy Planet is the Value-Based Program Scorecard. This is an interactive dashboard available to provisioned SQCN partners that includes HEDIS® measures to track and trend quality and utilization outcomes for patients, goals, scores, care gaps, and access patient lists to close the care gaps. Sentara partners will be able to utilize the Value-Based Program Scorecard through Epic Hyperspace.



Training guides are available on the [MDOffice Provider Portal](#).

For additional questions, please email [Heather Lynn](#).

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### **Questions About SQCN or SACO?**

**For Independent Practices, please contact the Population Health Team:**

**757-455-7330 | [SQCN@sentara.com](mailto:SQCN@sentara.com)**

**757-455-7040 | [SACO@sentara.com](mailto:SACO@sentara.com)**

**For SASD and SMG practices, please contact your Director of Business Operations and Director of Medical Operations, respectively.**

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