



TennCare Health Plan Meeting Highlights Report

September 21, 2023



Meeting Objectives

As Tennessee's designated External Quality Review Organization (EQRO), Qsource facilitates health plan meetings to benefit TennCare and its managed care contractors (MCCs). These triannual meetings provide opportunities for learning from guest subject matter experts who can share success stories and best practices, for earning nursing and the Certified Professional in Healthcare Quality (CPHQ) continuing education units (CEUs), and for networking to stay abreast of pertinent topics to Medicaid and managed care. Objectives for September attendees were the following:

- ◆ Discuss quality outcomes of collaboration among health professionals on heart health, hypertension, and smoking cessation, as well as the future of the Tennessee Heart Health Network's partnerships in high priority areas;
- ◆ Increase understanding of the work of Community Health Workers in Tennessee, as well as the future and sustainability of their roles in the medical community;
- ◆ Increase awareness of the program Reach Out and Read, and their mission of increasing childhood literacy through childhood wellness visits;
- ◆ Examine the historical and current trends within the opioid epidemic in Tennessee and the effort to expand care for a wider population of affected patients; and
- ◆ Increase understanding of Supported Decision Making (SDM) to increase quality of life and quality of care for patients, as well as resources for providers to implement SDM into professional use.

While our shared goal has always been to improve the quality of care and services provided to TennCare members, this program was informed by your feedback and suggestions, and carefully designed by Qsource and TennCare to cover topics relevant to the requirements, needs and concerns of your health plan. It is our hope that you will find the presentations both helpful and informative when preparing procedures and crafting policies. This document contains highlights for a quick refresher on the day's speakers and topics.

Tennessee Heart Health Network: Primary Care Interventions for Chronic Conditions in Tennesseans from a Managed Care Perspective

Ashley Ellis, PHarmD, MBA, CDECS

Tennessee Population Health Consortium

- ◆ The Tennessee Population Health Consortium is a collaborative group of major academic institutions, healthcare professionals, and other stakeholder organizations who are all working to improve population health and health equity across the state. Their mission is to encourage the adoption of evidence-based practices, transform primary and preventative care, and measurably improve health outcomes. Their goals include reducing obesity, diabetes, strokes, heart attacks, and cancers, improve TN's overall health rating, increase access to primary care, and decrease preventable emergency and hospital visits.
- ◆ Key 2022 accomplishments include:
 - Engaging 65 primary care practices and, through those practices, the patients who are at the highest risk of cardiovascular disease in evidence-based interventions and activities;
 - Training more than 400 lay and professional staff through the Health Consortium's training and certification programs to become Health Coaches and Community Health Workers; and
 - Expanding the Tennessee Population Health Data Network to include nineteen health systems and more than three million patients.
- ◆ The Tennessee Population Health Data Network provides research supports and provider services. The research supports includes population health research, quality improvement (QI) research, health services, equity, and outcomes research, and pragmatic clinical research. The provider services include tracking QI initiatives, identifying high-risk patients for outreach services, and delivering of tailored motivation text messages to high-risk patients through the Heart Health Messages Program.
- ◆ The Neighborhood Health Hubs Initiative is a partnership of the University of Tennessee Health Science Center's College of Medicine, the Shelby County government, and the Consortium to improve health outcomes for Shelby County residents. Primary care services that are offered by the Health Hubs include health coaching, connecting to care, free classes and support groups, and generalized outreach into the community.
 - A future endeavor for the Health Hubs is integrating the CDC's Innovative Cardiovascular Health Program. This program tracks and monitors clinical measures shown to improve health and wellness, with team-based care to prevent, detect, control, and manage hypertension and high blood pressure.

Community Health Workers in Tennessee and the Tennessee Community Health Workers Association: An Overview

Nikayla Boyd, Ed.D.

Executive Director of TN Community Health Workers Association

- ◆ Community Health Workers are rooted in the community. This allows them to bridge cultural and linguistic barriers to health, facilitate access to services and social support, actively engage with patients to help them understand their diagnoses, increase follow up on provider recommendations, and aid in communication with the healthcare providers.
- ◆ Other than Tennessee, 32 other states have associations with Community Health Workers (CHWs), as a growing number of studies have emerged that CHWs have a positive impact on maternal health, psychological health, cancer and diabetes screening, reduction in HIV stigma, and more.
- ◆ The Tennessee Community Health Workers Association’s (TNCHWA) goals include:
 - Providing networking and professional development opportunities for CHWs and their organizations;
 - Familiarizing the public and policy makers with data showing the impact of CHWs on community health and healthcare costs; and
 - Encourage insurers to reimburse for CHW services, so that more people have access to CHWs.
- ◆ This year, TNCHWA is running three key programs: a training program for 280 new CHWs, assisting agencies who are new to the hiring and supervising of CHWs, and establishing a certification program to standardize the training of CHWs which would allow for better reimbursement both for the training and for partnerships with CHWs and providers.

Integrating Reading into Pediatric Care

Christine Hughes, Corporate and Foundation Relations Officer
Reach Out and Read

- ◆ Reach Out and Read is a simple model that seeks to promote positive, language-driven interactions between parents or caregivers and children. By partnering with pediatric primary care, Reach Out and Read has foundational integration into routine well-child visits, which allows the pediatricians to support the building of trusted relationships between the clinical teams and the families.
- ◆ 90% of the brain develops in the first five years of life, making what is termed an “environment of relationships” crucial for the development of a child’s brain. These relationships center around a give-and-take with another human being who interacts with the child and gives them individualized attention and experiences, building on the child’s interests, capabilities, and personality. These experiences shape the child’s self-awareness

and lays the foundations for future academic performance, mental health, and interpersonal skills.

- ◆ Abuse, neglect, and household dysfunction at large all contribute to adverse childhood experiences (ACEs) that raises the risk of negative health outcomes. Nurturing, positive experiences, such as reading aloud or reading with a child regularly, results in a 33% reduction in the probability of social-emotional deficit and risk of developmental delay.
- ◆ Dr. Andrew Garner, from the American Academy for Pediatrics, published a study titled, “Preventing Childhood Toxic Stress: Partnering with Families and Communities to Promote Relational Health,” in 2021 that stated: “By focusing on the safe, stable, and nurturing relationships that buffer adversity and build resilience, pediatric care is on the cusp of a paradigm shift that could reprioritize clinical activities, rewrite research agendas, and realign our collective advocacy.”
- ◆ Reach Out and Read partners with medical clinics that serve under-resourced communities—children who are facing many ACEs—and gives young children a foundation for success by incorporating books into pediatric care and encouraging families to read aloud together. The doctors and nurse practitioners talk to the parents about the benefits of reading aloud and engaging with their young children, but also use the books for developmental surveillance, observing how the child and caregiver interact both with the book and each other to gauge the child’s developmental milestones. At the end of the exam, the child gets to take home a new book.
- ◆ 91% of children under the age of five see their doctor at least once a year, and the medical provider has early access to families as a trusted source of information; both of these factors make pediatric clinics a good place to partner with Reach Out and Read.
- ◆ There are multiple peer-reviewed publications that report that the Reach Out and Read Model is effective. The findings include improvements to language development, improvements to attendance of well-child visits, a boost to clinician morale, an improvement on patient-clinician relationships, and an overall recognition of how Reach Out and Read can directly, positively impact the Social Determinants of Health on their patients through a rise in literacy and a lowering of ACEs.

Trends with the Opioid Epidemic and Expanding Access to Care

Dr. Stephen Loyd, Chief Medical Officer Cedar Recovery

- ◆ Cedar Recovery is a level 1 outpatient and level 2 intensive outpatient treatment center specializing in medication assisted treatment for opioid use disorder. It has 18 network locations through a strategic alliance with Health Connect America, and 9 independent locations. They serve approximately 2,400 patients every month, most of them Medicaid or Medicare patients.
- ◆ There is a difference between dependence and addiction—a difference that Cedar Recovery seeks to educate its patients on, to help find the right treatment plan for each individual. Dependence is the biological result of withdrawing the drug from an individual’s system: a predictable physiological withdrawal syndrome occurs. Addiction

is the compulsive use of a drug, the loss of control and continued usage despite adverse consequences of use; the hallmark of addiction is the craving. A person can undergo drug dependence without undergoing drug addiction; addiction is the illness that needs to be treated. When addiction occurs, the object of the addiction hi-jacks the limbic, or reward system, of the brain.

- ◆ Methadone, buprenorphine, and naltrexone are used to treat opioid use disorders to heroin, morphine, codeine, oxycodone, and hydrocodone. These medications reduce the symptoms of drug dependence and increase the likelihood that a patient will remain in treatment (which itself is associated with a lower risk of mortality).
- ◆ Cedar Recovery piloted a Peer Recovery Support group, that paired new patients. This was an effort to create community and allow the patients to help each other succeed. The pairs were to have contact at least three times a week during their time in Cedar Recovery. The pilot program showed an improved retention rate of 46% and reduction in no-show to appointments by 6%.
- ◆ This pilot program is being expanded to all of Cedar Recovery’s locations in an effort to drive progress towards their goals of retention in treatment, reduction in mortality, improvement in Social Determinants of Health, eliminating unnecessary health plan utilization, and an increase in psychoeducation—a therapeutic intervention for patients that provides information about, and support for, their illness so that they can learn coping strategies.

The Arc Tennessee: Center for Decision-Making Support

Penny Johnson,
The Arc, TN

- ◆ One of the Arc’s founding principles is the philosophy of choice. Exercising choice is a fundamental right, making choices helps develop decision-making and problem-solving skills, and even the best supporters cannot read our minds or understand our personal experiences; only we can truly know what we want or need.
- ◆ When people with disabilities practice decision making, they are less likely to be taken advantage of. They experience a better quality of life, better physical and psychological health, and more employment and community engagement. Choice starts with education, experience, and exposure.
- ◆ Supported Decision-Making (SDM) is a main part of Arc’s work. This is a process of using a person or team of trusted advisors to help a person with disabilities make decisions by helping them understand the options and benefits and risks of the decision. SDM is not a one-size fits all process, as each person has different needs. SDM can be used along with other decision-making supports such as Power of Attorney or Conservatorship, or used as the primary decision-making support if the person has decision-making capacity. There are three principles of SDM:
 - Everyone has the right to make their own decisions and direct their own lives to the maximum extent of their abilities;

- People may ask for and receive help making their own decisions without society assuming that they cannot make decisions; and
 - There are as many ways to give and receive help as there are people.
- ◆ In order to properly provide support, decision making capacity must be presumed. This capacity can be developed through practice and is not solely based on IQ or diagnosis. “Bad” decision making does not equal a lack of capacity to make decisions.