



CCHT 2006 Report Card Briefing Book

Overview:

There are 23 Care Coordination/Home Telehealth (CCHT) programs in VISN 8. Of these 22 will be reported in this report. As you know, our report card is issued to the executive leadership to show CCHT program's outcomes. The report card is designed to incorporate the same domains as those included in the Network's performance report card.

The impact of CCHT programs interventions is measured by changes in the four domains of healthcare values which include: access, financial – UR cost, functional status and selected quality outcomes.

The intent of this briefing book is to provide you with specific information on how the information presented was obtained, including data sources, methodology for calculations and explanations of the outcome data.

Data Sources:

- **Primary data** is collected by field program and reported to the business office or entered into the CCHT Database. This data includes census, disease specific measures, medication adherence and technology device usage.
- **Secondary data** is collected by CCHT Business Office Program Analyst, through data extractions from different VHA data banks such as DSS NDE files, KLFMENU, VISTA, ARC, HERC, OIF Database, etc. This data includes UR costs, ADC and disease-specific COPD measures.

Color Key: Outcomes are color coded to reflect the following:

Blue = Exceptional Performance

Green = Fully Successful Performance

Red = Underperforming

* Or N/A = Not Enough Data or Data not Available

If you have any questions with regards to this report card, you may contact Sarita Figueroa, VISN 8 CCHT Director Business Operations at 727-319-1288.

Performance Measures: Domains and Data Collection Methodology

ACCESS:

√ **Census – Program # Patients Enrolled (Target | Actual)**

Description: Target is the enrollment goal for a program. Actual is the reported count of enrolled patients in the program as of 30JUN06.

Data Source: Information extracted from the CCCS database.

Method: Actual number (counts).

Outcome Data: Two numbers separated by a vertical bar. Left side is Target and right side is Actual.

√ **Census – Program Enrollment as % of Target**

Description: The current enrollment percentage of the program target as of 30JUN06.

Data Source: Census data from CCCS database.

Method: Actual enrollment count is divided by Target and multiplied by 100.

Outcome Data: Actual enrollment as percentage of target goal.

√ **Census – Facility # Patients Enrolled**

Description: Patients enrolled in all programs at the facility level as of 30JUN06.

Data Source: Census data from CCCS database.

Method: Program enrollment counts for the facility are added together.

Outcome Data: Enrollment count at facility level.

√ **# of Patients on Home Telehealth Technology**

Description: Count of patients using a home Telehealth device as of 30JUN06.

Data Source: Actual count provided by programs.

Method: Count provided as reported.

Outcome Data: Number of patients using a Telehealth device.

√ **% of Patients on Home Telehealth Technology**

Description: The percentage of current enrollment count (Actual) using a Telehealth device as of 30JUN06.

Data Source: Monthly report by programs.

Method: Percentage is calculated as; Patients on Telehealth technology divided by Actual enrollment and multiplied by 100.

Outcome Data: Percentage of Actual count using a Telehealth device.

FINANCIAL – UR COST

Data shows a comparison 6 months pre enrollment vs. 6 months post enrollment of patient's utilization resource related to admissions and ER visits. A patient sample was obtained for each program.

√ **Patient Sample Size by Program**

Description: Sample size drawn from enrolled patients meeting criteria.

Data Source: VISN 8 CCHT database.

Method: Sample patients extracted from all patients ever enrolled and who are (or were) active for a minimum of 6 months or more in the program (data cutoff date 31MAY06).

Outcome Data: Count of those patients meeting the 6 month minimum enrollment criteria.

√ **# Patients with Admissions**

Description: The number of unique sample patients with 1 or more admissions during the pre and post enrollment periods.

Data Source: Austin AAC DSS National Data Extracts.

Method: Patient had an admission during the pre or post enrollment period.

Outcome Data: Patient count.

√ **% of Pre or Post-enrollment Sample Patients with an Admission**

Description: The percentage of sample patients with 1 or more admissions during the pre and post enrollment periods.

Data Source: Austin AAC DSS National Data Extracts.

Method: Patients with admissions divided by number of sample patients.

Outcome Data: Percentage of patient count.

√ **# of Admissions**

Description: The total number of admissions by the sample patients during the pre and post enrollment periods.

Data Source: Austin AAC DSS National Data Extracts.

Method: Extracted from data source.

Outcome Data: Admission count.

√ **# Bed Days of Care (BDOC)**

Description: The number of bed days of care (BDOC) from admissions by sample patients during the pre or post enrollment periods.

Data Source: Austin AAC DSS National Data Extracts.

Method: Extracted from data source.

Outcome Data: BDOC totaled from admissions.

√ **Total costs for Admissions/ BDOC**

Description: The costs associated with admissions for sample patients during the pre and post enrollment periods.

Data Source: Austin AAC DSS National Data Extracts.

Method: Extracted from data source.

Outcome Data: Costs totaled from admissions.

√ **# Patients with ER Encounters**

Description: The number of unique sample patients with 1 or more ER encounters during the pre and post enrollment periods.

Data Source: Austin AAC DSS National Data Extracts.

Method: Patient had an ER encounter (defined as a walk-in, primary clinic stop code either 102 or 101) during the pre and post enrollment periods.

Outcome Data: Patient count.

√ **# ER Encounters**

Description: The total number of ER encounters for sample patients during given pre or post periods.

Data Source: Austin AAC DSS National Data Extracts.

Method: Extracted from data source.

Outcome Data: ER encounters count.

√ **Total ER Encounter Costs**

Description: The costs associated with ER encounters for sample patients during given pre or post periods.

Data Source: Austin AAC DSS National Data Extracts.

Method: Extracted from data source.

Outcome Data: Totaled costs from ER encounters.

√ **Total Combined Admissions and ER Encounter Costs**

Description: Summed costs associated with both admissions and ER encounters for sample patients during given pre or post period.

Data Source: Austin AAC DSS National Data Extracts.

Method: Costs extracted from data source and totaled.

Outcome Data: Totaled costs from admissions and ER encounters.

Differences for 6 months pre and 6 months post CCHT enrollment.

√ **% Change pre/post–enrollment # Sample Patients with an Admission**

Fully satisfactory = 10% decrease in pertinent utilization element

Exceptional > 10% decrease (more than 10% decrease)

Description: Percent change in number of patients with admissions for sample patients during post vs. pre periods.

Data Source: Austin AAC DSS National Data Extracts.

Method: Post enrollment count divided by pre enrollment count, subtract 1 and convert to percentage.

Outcome Data: Percentage difference between pre and post patient counts.

√ **% Change Admissions pre/post Total Costs**

Fully satisfactory = 10% decrease in pertinent utilization element

Exceptional > 10% decrease (more than 10% decrease)

Description: Percent change in total costs associated with admissions for sample patients during post vs. pre periods.

Data Source: Austin AAC DSS National Data Extracts.

Method: Post enrollment admissions costs divided by pre enrollment admission costs subtract 1 and convert to percentage.

Outcome Data: Percentage difference between pre and post patient admission costs.

✓ **% Change ER pre/post Total Costs**

Fully satisfactory = 10% decrease in pertinent utilization element

Exceptional > 10% decrease (more than 10% decrease)

Description: Percent change in total costs associated with ER encounters for sample patients during post vs. pre periods.

Data Source: Austin AAC DSS National Data Extracts.

Method: Post enrollment ER costs divided by pre enrollment ER costs, subtract 1 and convert to percentage.

Outcome Data: Percentage difference between pre and post patient ER costs.

✓ **% Change Admissions and ER pre/post combined Total Costs**

Fully satisfactory = 10% decrease in pertinent utilization element

Exceptional > 10% decrease (more than 10% decrease)

Description: Percent change in total costs associated with summed Admissions ER encounter costs for sample patients during post vs. pre periods.

Data Source: Austin AAC DSS National Data Extracts.

Method: Post enrollment summed Admission and ER costs divided by pre enrollment summed Admission ER costs, subtract 1 and convert to percentage.

Outcome Data: Percentage difference between pre and post summed admissions and ER costs.

FUNCTIONAL STATUS

✓ **VA Choice % of Patients at Risk of Institutionalization**

Description: The VA Choice questions used in this screening instrument describe skilled treatments, problem behaviors, performance of both instrumental and basic activities of daily living, basic caregiver information, and prognosis that a veteran might currently be experiencing in his/her life. By utilizing this instrument, the health professional is able to identify a Veteran's care needs and establish a level of care prior to the veteran's placement in any long term care program. The VA Choice tool also provides local staff with data for needs assessment, workload projections and performance improvement activities.

Data Source: Survey results reported by programs.

Method: Survey is accomplished by care coordinator at patient admission. Results are tabulated following accepted scoring methods and reported to the business office once a year.

Outcome Data: Percentage of patients at risk of institutionalization.

✓ **Facility Average Daily Census (ADC) through 30JUN06**

Description: CCHT is one of the 9 Non-Institutional Care programs. For patients enrolled in CCHT program during FY, calculation of care days, reporting ADC for CCHT as included in the National Non-Institutional Care Performance Measure Report Card.

Data Source: Figures obtained from National ADC Report for Non-Institutional Care.

Method: Patients are separated into two groups: (1) those using messaging/measurement/monitoring devices and (2) patients in video devices (face-to-face) visits.

For group 1 – using the national home telehealth technology activity report, OIF identify start date (1 st day using technology in the qtr.) and last date of the quarter that the patient used the technology (transmitted). The number of days are added = A = Total number of days of care in dialogue.

For group 2 – using dSs database (VSSC CCHT cube), VSSC identify total clinic stops with stop code 179 (video visits) and credit one day of care for each 179 encounter during the quarter. The numbers of 179 visits are added = B = Total number of days of care in Video visits.

Formula: Total days in A + Total days in B = Total days of care = C

Total days of care C is then divided by total days in the quarter or period = ADC

Outcome Data: Average daily Census on active care patients during the period.

✓ **Medication Adherence**

Fully satisfactory = 90% medication compliance

Exceptional => 95% medication compliance

Description: Percentage of enrolled patients considered to be compliant with their medication regimen and renewals.

Data Source: Reported by programs.

Method: Programs keep track of medication compliance locally.

Outcome Data: Percentage of current enrolled patients compliant.

QUALITY

Disease specific measures for patients enrolled in CCHT.

✓ **HTN = Hypertension SBP < or = 140 & DBP < or = 90**

Fully satisfactory = 70% hypertensive patients meet target BP

Exceptional = > 80% hypertensive patients meet target BP

Description: The percentage of hypertensive patients most recent in-house blood pressure reading(s) indicate they have, or usually have, systolic and diastolic readings at or below the specified values.

Data Source: Reported by programs.

Method: Clinical chart reviews accomplished by care providers.

Outcome Data: Expressed as a percentage of known hypertensive enrollees.

✓ **DM = glycemic control HgBA1c < 9**

Fully satisfactory = 70% DM patients meet target HgBA1c

Exceptional = > 80% DM patients meet target HgBA1c

Description: For patients diagnosed with DM, the standard for control is an HgBA1c score < 9.

Data Source: Reported by programs.

Method: Clinical chart reviews accomplished by care providers.

Outcome Data: Percent of DM patients meeting goal.

✓ **CHF = Are patients prescribed an ACEI or ARB and Beta Blockers?**

Fully satisfactory = 70% of CHF patients prescribed

Exceptional => 80% of CHF patients prescribed

Description: For patients with known CHF, what percentage is receiving recommended medications for this condition?

Data Source: Reported by programs.

Method: Clinical chart reviews accomplished by care providers.

Outcome Data: Percentage of enrollees with Dx of CHF receiving these medications.

✓ **# Patients with Primary or Secondary Dx of COPD**

Description: Patients with COPD listed as primary or co-morbid Dx at time of enrollment into CCHT program.

Data Source: Extracted from CCHT database.

Method: Data entered by program staff and extracted by CCHT Program Analyst.

Outcome Data: Count of patients with COPD as Dx.

✓ **COPD = Exacerbation requiring hospitalization in recent year**

(1) # of BDOC for COPD in 1 yr (Jun05 – May06)

Description: The number of BDOC during the given period where the admitting Dx for the inpatient episode of care was COPD (ICD-9 = 496).

Data Source: Austin AAC DSS National Data Extracts.

Method: All enrollee inpatient episodes of care are extracted and reviewed for specific Dx of COPD.

Outcome Data: Number of BDOC for COPD during period.

(2) # of readmissions within 30 days (Jun05 – May06)

Description: The number of COPD readmissions within 30 days of a previous discharge.

Data Source: Austin AAC DSS National Data Extracts.

Method: All enrollee inpatient episodes of care are examined and reviewed for an admission due to COPD Dx which occurred 30 days or less from a previous discharge for a COPD admission.

Outcome Data: Number of possible COPD related admissions within 30 days of a previous COPD discharge.

The following section is for Mental Health CCHT programs.

✓ **# Patients (sample) enrolled for 1 year in MH CCHT program**

Description: Patients with MH diagnosis enrolled for 1 year in the MH CCHT program.

Data Source: CCCS data base

Method: MH CCHT care coordinators total their active patients for 1 year

Outcome Data: Count of patients with MH diagnosis actively enrolled for 1 year.

✓ **# Psychiatric Hospital admissions 1 year pre-enrollment**

Description: The total number of admissions by sample patients during a given pre or post period.

Data Source: CPRS

Method: Extracted from data source.

Outcome Data: Admission count.

✓ **# Psychiatric Hospital admissions 1 year post-enrollment**

Description: The total number of admissions by sample patients during a given pre or post period.

Data Source: CPRS

Method: Extracted from data source.

Outcome Data: Admission count.

✓ **#Psychiatric BDOC 1 year pre-enrollment**

Description: The number of bed days of care (BDOC) from admissions by sample patients during the pre enrollment periods.

Data Source: CPRS

Method: Extracted from data source.

Outcome Data: BDOC totaled from admissions.

✓ **#Psychiatric BDOC 1 year post-enrollment**

Description: The number of bed days of care (BDOC) from admissions by sample patients during the post enrollment periods.

Data Source: CPRS

Method: Extracted from data source.

Outcome Data: BDOC totaled from admissions.

✓ **%Change in Psychiatric admissions**

Description: Percent change in number of psychiatric admissions for sample patients during post vs. pre periods.

Data Source: CPRS

Method: Post admission count divided by pre admission count, subtract 1 and convert to percentage.

Outcome Data: Percentage difference between pre and post admission counts.

✓ **%Change in Psychiatric BDOC**

Description: Percent change in psychiatric BDOC for sample patients during post vs. pre periods.

Data Source: CPRS

Method: Post BDOC count divided by pre BDOC count, subtract 1 and convert to percentage.

Outcome Data: Percentage difference between pre and post BDOC counts.