



Lunch & Learn



NP SAN Member Survey Results: Your Voice Heard and Next Steps

October 23, 2019, 12pm EST

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&

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Steps to Receive Free CE Credit

NNCC will review attendance list after webinar is complete.

Participants who attend entire live presentation qualify for CE credit

- **REQUIRED:** attend at least **55 minutes** of presentation
- **REQUIRED:** access & connect to presentation slide-deck
- Phone-in-only participants **DO NOT** qualify

Participants who qualify for CE will receive a detailed email from Jillian Bird at NNCC on how to obtain CE credit.

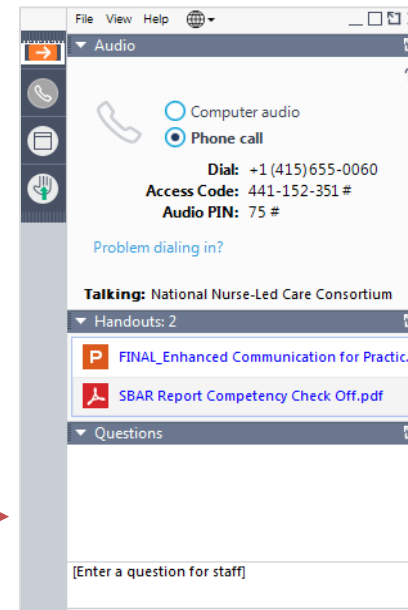
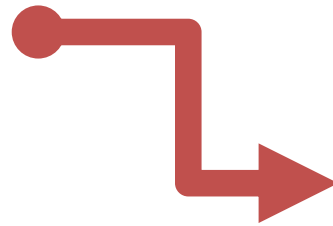
Completion of a quiz will be required to receive CE credit.

Questions can be directed to: jbird@ncc.us

Housekeeping Items

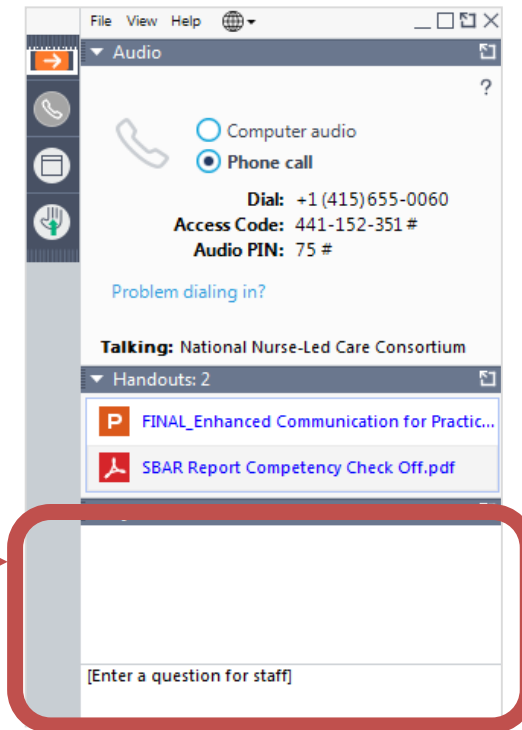
To **download materials**, go to the Handouts section on your GoToWebinar control panel.

To **ask a question**, type it into the Question pane in the GoToWebinar control panel and it will be relayed to the presenter.



Any Questions??

Please **submit questions** via the question pane in your GoToWebinar control panel or raise your hand to ask a question.



What was TCPI?

The CMS Transforming Clinical Practice Initiative (TCPI)

- 2015, a technical assistance program, funded by the CMMI
- designed to help clinicians achieve large-scale health transformation in primary and specialty care practice settings and prepare for participation in Advanced Payment Models (APMs)
- provided support to over 160,000 clinicians in developing their comprehensive quality improvement strategies and entered APM models

Outcomes:

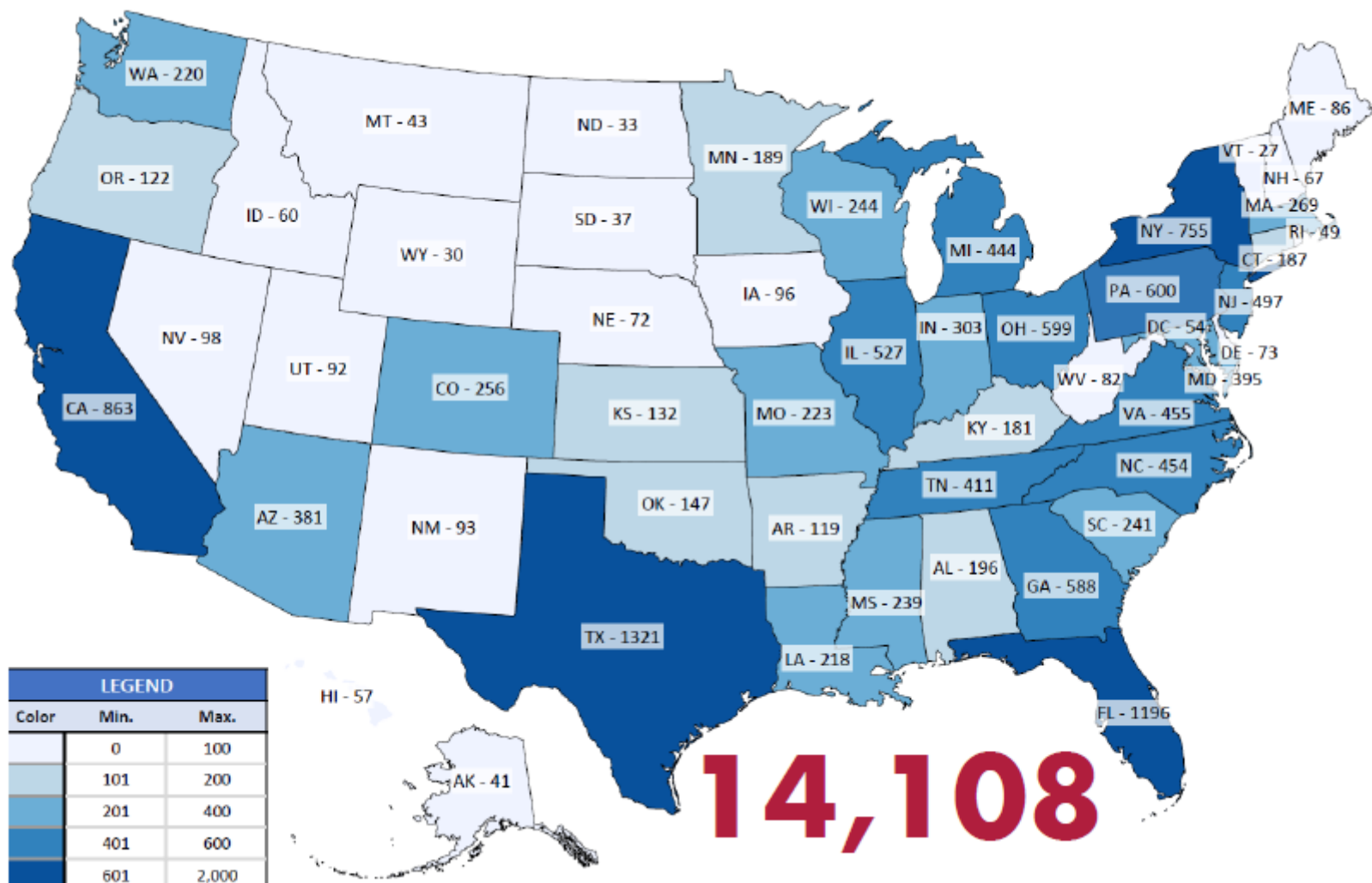
- improved the health outcomes for 5 million people
- generated \$5 billion in savings
- participants made significant progress in care coordination, engagement of patients and families in their care, and patient, clinician, and staff satisfaction
- enrolled practices joined APMs at twice the national rate

Nursing Practice Transformation

CMS currently defines **value-based care** as *paying for health care services in a manner that directly links performance on **cost, quality** and the **patient's experience of care**.*

Source: CMS VBP Affinity Group

NP SAN Reach and Engagement



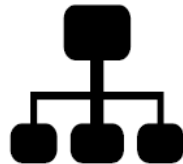
NP SAN Principles of Nursing

Principles of Nursing for NP SAN Training

Nursing Leadership



Proactive Patient Coordination



Interdisciplinary Care Teams



Patient & Family Engagement



Community Collaboration



Survey #1

Did you participate in our July 2019 online survey?

- a. Yes
- b. No
- c. Don't recall

How prepared are you to use value-based reimbursement models?

- a. Not at all Prepared
- b. A little Prepared
- c. Well Prepared
- d. Can Teach others

NP SAN Evaluation and Impact

In summer 2019:

- Analyzed the characteristics and needs of members
- Examined the impact of webinars on helping NPs move to VBMs

Three data sources:

- GoToWebinar data from 43 of the 50+ webinars
- Listserv registrations
- Outcomes survey launched in July 2019 ($n = 586$)

NP SAN Outcomes Survey

Evaluators asked:

1. What are the characteristics, needs, and NP SAN experiences of NPs?
2. To what extent did webinar participation contribute to improvements in attendees' knowledge, understanding, and use of VBMs?
3. What type of help do members need to succeed in using VBMs?

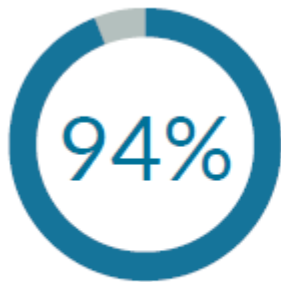
Listserv and Lunch N' Learn Participants

- Listserv members represented every state & over 13,000 organizations
- Approximately 10% worked in rural areas
- 10,870 unduplicated persons participated in one or more Lunch N' Learn webinars
- States with the greatest representation were TX, FL, CA, PA & OH
- Participants were highly engaged
- Participants reported being likely to use what they learned in their practice

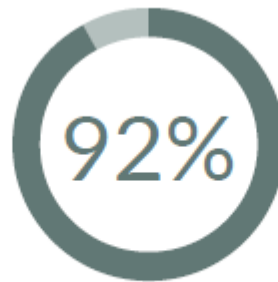
Lunch N' Learn Participants

Findings revealed that:

- 94% of 10,750 respondents rated the webinars as good or excellent
- 96% of 822 respondents agreed that content should be included in NP education
- 83% of 819 respondents felt more prepared for their role after the webinar



Rated the webinar as
good or excellent



Were likely to use what they
learned in their practice



Felt more prepared
for their role as an NP

Outcome Survey ($n = 586$)

Demographic data showed that:

- 83% of respondents were NPs
 - 80% worked full-time
- Work experience ranged from
 - less than 1 year to 45 years
- Two-thirds ($n = 375$) participated in Lunch N' Learn
- 11% came from rural areas of the U.S.

Outcome Survey ($n = 586$)

Findings indicated that:

- 20% had input into planning and implementing the transition to VBMs in their clinical settings
- 29% agreed that VBMs were central to their practice going forward
- 30% used VBMs in their practice

Types of VBMs used by 135 respondents:

Accountable Care Organizations (ACOs) 49%	Merit-based Incentive Payments (MIPS) 44%	Alternative Payment Models (APMs) 10%
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*Note: totals sum to more than 100% because users could use more than one type

Impact on Knowledge & Skills

Table 1. Percentage of Lunch N' Learn Webinar Attendees Agreeing that Participation Contributed to Improvements in Selected Areas (n = 375)

	#	%
<i>Participation in Webinars Contributed to Improvements in My:</i>		
Understanding of VBMs	302	80.5
Capacity to move toward VBMs	274	73.1
Ability to communicate with others the importance of using VBMs	278	74.1
Confidence to succeed in using VBMs	272	77.9
Knowledge of eligibility regarding VBMs	281	72.5
Ability to forge partnerships with others using/attempting to use VBMs	248	66.1
Intention to move towards VBMs	258	68.8
Awareness of practice changes needed to succeed in using value-based payment models	286	76.3

Help is Still Needed...

NP providers reported

- not feeling fully prepared to make changes toward VBMs
- needing more information to make changes toward VBMs

Respondents who did *not* participate in the webinars were more likely than participants to need basic information on VBMs

Help is Still Needed...

Surveyed NP SAN members reported:

- needing basic information on the core components of VBM's (42%)
- Collecting and reporting data (34%)
- Standardizing quality measures (36%)

Help is Still Needed...

Some NPs responded that they needed assistance in the following areas to succeed in shifting to greater VBM use:

- “a patient panel population with coverage”
- “administrative support for transitioning”
- “all of the providers in agreement”
- “dissemination of best-practice models to others (e.g., preceptors)”

NP SAN Programmatic Transition

The Nurse Practitioner Support & Alignment Network (NP SAN) will be evolving

- concluded its four-year CMMI grant-funded programming
- transitioning to be on-going training and technical assistance from NNCC
- continued focus on preparing NPs for the upcoming changes to the health care system

NP SAN Programmatic Transition

NNCC will continue to provide

- continuing education
- professional development
- value-based health care practices & sustainability
- webinar series
- providing CEUs

A focus of NNCC's work includes supporting full practice authority for NPs, Nursing Practice and Value-Based Transformation and Sustainability Support.

Next Steps: What You Can Do


Set a goal to discover

1. if your organization is involved with MIPS
2. your financial contribution to your organizations MIPS scores
3. your MIPS measure selection
4. strategies to improve your outcomes

Next Steps: What You Can Do

<https://qpp.cms.gov/participation-lookup>

QPP Participation Status

Enter your 10-digit [National Provider Identifier \(NPI\)](#)  number to view your QPP participation status by performance year (PY).

Check All Years >

Want to check eligibility for all clinicians in a practice at once?

[View practice eligibility](#) in our signed in experience

Next Steps: What You Can Do

<https://qpp.cms.gov/>

Quality Payment
PROGRAM

MIPS ▾

Merit-based Incentive
Payment System

APMs ▾

Alternative Payment
Models

About ▾

The Quality
Payment Program

Sign In

Manage Account
and Register

PERFORMANCE YEAR 2020

Virtual Group Election Period is Now Open

Clinicians interested in participating in MIPS as a Virtual Group in 2020 must follow an election process and submit an election to CMS by **December 31, 2019.**

Download Toolkit >



Next Steps: Leadership Buy in

Leadership and organization-wide commitment toward continuous performance improvement is critical to success in MIPS and in the transition to value-based care.

As the financial stakes increase, the program gets harder, and scores become public, healthcare organizations will need to have effective insights to set meaningful goals, relevant scorecards to engage clinicians, and accurate data to manage performance.

<https://qpp-cm-prod-content.s3.amazonaws.com/uploads/607/2019%20MIPS%20101%20Guide.pdf>

Next Steps: Evidence for Role of NP in VBM

The body of literature supports the position that NPs provide care that is safe, effective, patient-centered, timely, efficient, equitable and evidenced based.

Furthermore, NP care is comparable in quality to that of their physician colleagues. Patients under the care of NPs have higher patient satisfaction, fewer unnecessary hospital readmissions, fewer potentially preventable hospitalizations and fewer unnecessary emergency room visits than patients under the care of physicians.

Next Steps: Power Packs



Power Packs are breakthrough examples of practice transformation that:

- Improve health outcomes for all people
- Avoid unnecessary use of hospitals and emergency departments
- Avoid unnecessary tests and procedures
- Reduce the total cost of care

In addition, Power Packs:

- Support short- and long-term financial sustainability
- Improve patient engagement and satisfaction
- Improve provider joy in work, including employee satisfaction and workforce retention

Next Steps: Power Packs

TCPI Transforming Clinical Practice Initiative

Sole Provider's Transition to APM

Lessons Learned

Performance Challenge

Small, rural practices face challenges making the transition to Alternative Payment Models payment structures. Because APM structures are created with larger systems in mind, it is difficult for small practices to demonstrate success using defined APM metrics. Adding to the challenge is the fact that rural practitioners need to address the needs of their patient population, which is spread over a large geographic area.

As small practices fight for existing programs to transition to APM...

Practice Spotlight

Firth Medical Center (FMC) is a primary care health center that serves people from across southern Oregon. Firth's patient population includes American Indians. A significant challenge is the fact that rural practitioners need to address the needs of their patient population, which is spread over a large geographic area.

TCPI Transforming Clinical Practice Initiative

Patient-Centered Care in Rural Settings

Lessons Learned

Performance Challenge

Rural primary care practitioners need to meet a variety of health care needs for their patients.

Patient-centered care in rural settings delivers improved outcomes and patient engagement.

Practice Spotlight

King, owns and practices in southern Oregon. Her practice, two communities, a psychologist, King herself, most of whom...

to serve the local...

TCPI Transforming Clinical Practice Initiative

Nurse-Supported Revenue and ROI

Lessons Learned

Performance Challenge

Many practices have trouble meeting quality measures targets, making it difficult for them to realize financial incentives available through Medicare Advantage Plans. Demonstrating the value of a newly embedded BSN-RN can help practices to improve metrics to realize revenue from incentive programs and capture money "left on the table."

Practice Solution

Nurse-led interventions: documentation issues for positive return on investment.

Practice Spotlight

Opened in 1963, Blue Ridge Community Health Center is the nation's oldest migrant health center. Behavioral health, pharmacy, and dental services are provided at this health center that serves approximately 10,000 patients. The percentage of patients receiving preventive care measures, were below 50%.

BRCHS initiated the integration of a Registered Nurse (RN) to address these issues. Pa...

TCPI Transforming Clinical Practice Initiative

Sustainability for Independent Rural Providers

Lessons Learned

Performance Challenge

Access to primary care in rural settings is a challenge in many parts of the country. Rural health clinics often serve small towns and expansive of territory inhabited by the elderly, farmers, migrant workers, and American Indians. Creating sustainability while building capacity to meet the needs of the rural community is a challenge that many providers face across the country.

Practice Solution

Rural primary care has the dual challenge of meeting the needs of its population while maintaining sustainability.

Practice Spotlight

Firth Medical Center (FMC), is a Patient-Centered Medical Home (PCMH) that serves a diverse rural region of the US whose patient population is mostly comprised of Medicare and Medicaid patients who are farmers, migrant workers, and American Indians. The center's care team is made up of 3 Family Nurse Practitioners (FNP), Certified Nursing Assistants (CNAs), and a Social Worker. FNPs refer out to the surrounding medical community when necessary, the social worker helps to deliver and coordinate behavioral healthcare re...



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Where Can I Go to Learn More?

1. CMS QPP
website

www.qpp.cms.gov

2. Roadmap for
APM

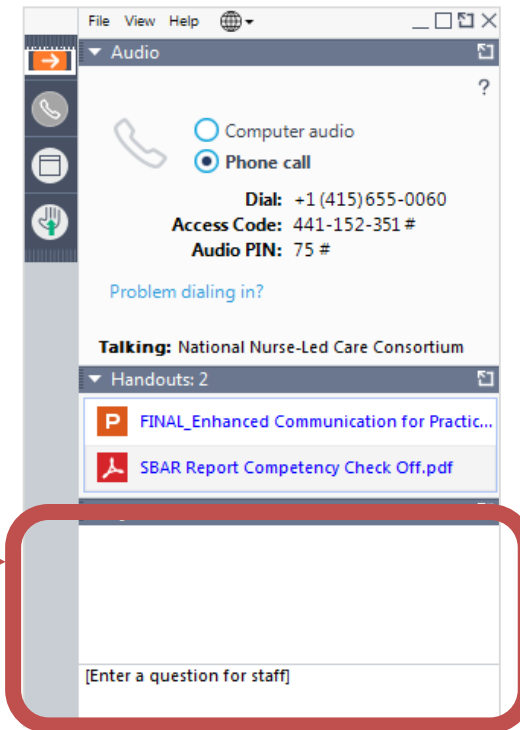
<https://hcp-lan.org/apm-roadmap/>

3. NNCC

<https://www.nurseledcare.org/programs/npsan.html>

Any Questions??

Please **submit questions** via the question pane in your GoToWebinar control panel or raise your hand to ask a question.



Coming Up

Improving Diagnostic Outcomes Through Patient Engagement



Join us as Kelly Smith, Ph.D., Principal Investigator at the MedStar Health Research Institute, discusses Patient and Family Engagement in a Healthcare setting.

[**Register Here**](#)

Coming Up

Dec 11, 2019

Disruptive Innovation: Nurse-Led Employee-Based Healthcare
with Kelly Fox

Jan 15, 2020

Care Coordination and Optimizing Medicare Reimbursement
with Faith Jones

Jan 29, 2020

ROI Business Case for the RN on your Care Team with Kae Livzy

The Power of Data to Build a Healthier Nation



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OF STATE NURSING WORKFORCE CENTERS

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ABSTRACTS**

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PENNSYLVANIA