

Transcript of Healthy Moms, Healthy Babies MIHP Pilot Webinar

00:00:03.929 --> 00:00:17.039

Sarah Ostyn: Hello, and welcome to the Healthy Moms Healthy Babies MIHP pilot webinar. My name is Sarah Ostyn and I represent the Youth Policy Lab at the University of Michigan as well as the Maternal Infant Health Unit at MDHHS.

00:00:17.760 --> 00:00:28.590

Sarah Ostyn: I will be providing information about the programmatic and building components of this project, and I'm joined by my colleague Olivia Meeks at the Youth Policy Lab who will provide information about the survey component.

00:00:31.470 --> 00:00:43.920

Sarah Ostyn: The goals of this webinar are to learn about your role in the project, learn about what resources are available and where to find them, and how to use them and learn more about how to administer the outcome survey.

00:00:46.440 --> 00:00:57.630

Sarah Ostyn: To reach these goals, we will provide an overview of the project goals and interventions, provide information about the survey, and provide details about communication expectations and next steps.

00:01:01.020 --> 00:01:16.410

Sarah Ostyn: The goal of this project is to understand how enhanced billing opportunities impact beneficiary outcomes, specifically in social determinants of health. While there are many social determinants of health, this slide shows a list of those covered by MIHP interventions.

00:01:20.700 --> 00:01:26.400

Sarah Ostyn: To do this, the Youth Policy Lab has recruited and randomized MIHP providers into two groups.

00:01:27.420 --> 00:01:43.290

Sarah Ostyn: Each group will have the opportunity to bill for additional services for beneficiaries and caregivers identified as high risk through their risk identifier. Please note that scoring high risk on the risk identifier is what makes a beneficiary eligible for participation in this pilot.

00:01:48.090 --> 00:02:00.030

Sarah Ostyn: Those agencies who have been randomized into the treatment group will be able to bill for these for activities. Agencies who have been randomized into the control group will be able to bill for the discharge visit.

00:02:06.330 --> 00:02:18.900

Sarah Ostyn: Next we'll go through the details of each of the activities for each of these categories. You will find more information about programmatic and billing requirements on the MIHP website under the MIHP Initiatives button.

00:02:23.250 --> 00:02:36.390

Sarah Ostyn: The first opportunity is for extended home visits. This is a visit that lasts at least 60 minutes. It will be billed as a Healthy Moms Healthy Babies visit instead of a standard MIHP visit, not in addition to.

00:02:37.440 --> 00:02:40.140

Sarah Ostyn: This can occur for any number of home visits.

00:02:45.390 --> 00:03:00.780

Sarah Ostyn: The next opportunity is an additional home visit. This is one additional visit per beneficiary and can occur at any point during the course of care. It has to be treated like a professional visit and must follow all professional visit requirements.

00:03:06.480 --> 00:03:21.210

Sarah Ostyn: Next, we have a billing opportunity for care coordination activities. This includes things such as initiation or follow up with community resources. The provider can bill for care coordination once per month per beneficiary included in the project.

00:03:25.890 --> 00:03:32.670

Sarah Ostyn: The final activity is the discharge visit, which includes all participating agencies in both the treatment and control groups.

00:03:33.240 --> 00:03:46.470

Sarah Ostyn: This visit lasts at least 30 minutes and will include the outcome survey. It is this survey that will help us learn whether or not these billing opportunities support improved outcomes for beneficiaries and their families.

00:03:47.520 --> 00:03:50.520

Sarah Ostyn: Next Olivia will join me to further discuss the survey.

00:03:54.360 --> 00:04:04.410

Olivia Meeks: In the next section of the webinar we're going to provide you with an overview of the MIHP Outcomes Survey, which will be administered during the newly instituted discharge visits.

00:04:07.650 --> 00:04:22.680

Olivia Meeks: The goals of the MIHP Outcomes Survey are to measure MIHP's impact on the social determinants of health that Sarah outlined earlier and to collect programmatic details on transitioning families out of MIHP.

00:04:26.430 --> 00:04:46.830

Olivia Meeks: The MIHP Outcomes Survey has two main components. First is the family section. This section will be completed by families and it includes questions covering social determinants of health, referrals or resource connections made during their participation, and their relationship with their home visitors.

00:04:48.300 --> 00:05:09.960

Olivia Meeks: The second section is to be completed by Home Visitors themselves. The Home Visitor section includes questions about the referrals or resources made to families, the Home Visitor's relationship with the family and the process of service transitioning. The survey is estimated to take around eight to 10 minutes to complete both sections.

00:05:14.100 --> 00:05:31.530

Olivia Meeks: Home Visitors play a critical role in the MIHP Outcomes Survey for each high risk family referral received by participating agencies. Home visitors will be responsible for administering the MIHP Outcomes Survey to families and completing the home visitor section of the survey.

00:05:32.580 --> 00:05:39.960

Olivia Meeks: Survey administration and completion can be done at either telehealth or in-person discharged visits.

00:05:42.450 --> 00:06:04.830

Olivia Meeks: To help with administering and completing the MIHP Outcomes Survey, the MIHP website will feature supporting materials. These include a link to the online version of the survey and a home visitor guide providing step-by-step instructions for the different service administration options both via telehealth and in-person visits.

00:06:05.820 --> 00:06:23.820

Olivia Meeks: In addition, for situations in which the online MIHP Outcomes Survey cannot be administered, your agency will also be provided with paper copies of the survey and consent forms, as well as prepaid, pre-addressed return envelopes for mailing completed surveys to the Youth Policy Lab.

00:06:27.150 --> 00:06:35.160

Olivia Meeks: Again, you can find these supporting materials for survey administration on the MIHP website under in MIHP Initiatives.

00:06:38.970 --> 00:06:45.930

Olivia Meeks: As a pilot, project information or guidance on the Healthy Moms Healthy Babies MIHP pilot will likely change.

00:06:46.620 --> 00:07:03.540

Olivia Meeks: Information about any programmatic or survey changes will be distributed through email communications from the Healthy Moms Healthy Babies MIHP Pilot email address shown here and on the MIHP website's MIHP Initiative section we just saw.

00:07:07.530 --> 00:07:22.200

Olivia Meeks: If you have questions regarding the healthy moms healthy babies in HP pilot project, please contact MDHHS at MDHHS-HMHBPilot@michigan.gov.

00:07:23.310 --> 00:07:33.450

Olivia Meeks: For questions regarding the MIHP Outcomes Survey and its administration, please contact myself or my colleague Megan Foster Friedman at the Youth Policy Lab.

00:07:37.590 --> 00:08:03.870

Olivia Meeks: We have now come to the end of the webinar. To ensure that all participating MIHP coordinators have received and will abide by the Healthy Moms Healthy Babies MIHP Pilot procedures, you must confirm prior to the beginning of new billing that you have viewed this webinar in its entirety, have reviewed the program and survey administration guidance documents, and will adhere to appropriate billing practices.

00:08:05.010 --> 00:08:24.300

Olivia Meeks: To do this, please visit the MIHP website's MIHP Initiatives section and find and fill out the Webinar Attestation form provided. Completed Webinar Attestation forms must be submitted before billing for Healthy Moms Healthy Babies MIHP Pilot activities can begin.

00:08:28.140 --> 00:08:34.920

Olivia Meeks: Thank you for your time and attendance during the Healthy Moms Healthy Babies MIHP Pilot webinar.