Health Plan Performance Improvement Project (PIP)

### Health Plan: Healthy Blue

### PIP Title: Ensuring access to the COVID-19 vaccine among Healthy Louisiana vaccine-eligible enrollees

### PIP Implementation Period: April 2021- ongoing

Project Phase: Final

#### **Submission Dates:**

	Baseline	Interim	Final
Version 1	4/22/2021		2/10/2021
Version 2			12/31/2022

#### 1. Principal MCO Contact Person

[PERSON RESPONSIBLE FOR COMPLETING THIS REPORT AND WHO CAN BE CONTACTED FOR QUESTIONS]

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#### 2. Additional Contact(s)

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**3. External Collaborators (if applicable):** Louisiana Department of Health Vaccination Strike Teams; Vaccine Providers; Office of Public Health

Plan Name: Healthy Blue LA Title of Project: COVID-19 Vaccine

The undersigned approve this PIP and assure involvement in the PIP throughout the course of the project.

Medical Director signature: <u>*Cheryll Bowers-Stephens, MD, MBA*</u> Cheryll Bowers-Stephens, MD, MBA Date: 12/30/22

CEO signature: <u>C. Valentine-Theard, MD, MBA</u> Christy Valentine, MD, MBA Date: 12/30/2022

Quality Director signature: <u>Jennifer Nethers, MS, MBA</u> Jennifer Nethers, MS, MBA Date: 12/30/2022

## **For Interim and Final Reports Only:** Report all changes in methodology and/or data collection from initial proposal submission in the table below.

[EXAMPLES INCLUDE: ADDED NEW INTERVENTIONS, ADDED A NEW SURVEY, CHANGE IN INDICATOR DEFINITION OR DATA COLLECTION, DEVIATED FROM HEDIS® SPECIFICATIONS, REDUCED SAMPLE SIZE(S)]

#### Table 1: Updates to PIP

Change	Date of change	Area of change	Brief Description of change
Change 1	6/1/2021	Project Topic	Disparities analysis;
		Methodology	collaboration with Hispanic
		⊠ Barrier Analysis /	clinic
		Intervention	
		□ Other	
Change 2	7/1/2021	Project Topic	Ages 12-15 approved for
		⊠ Methodology	vaccine; new initiatives
		🛛 Barrier Analysis /	developed for that population
		Intervention	
		□ Other	
Change 3	2021	Project Topic	Completion to transportation
		Methodology	barrier
		🛛 Barrier Analysis /	
		Intervention	
		□ Other	
Change 4		Project Topic	
		Methodology	
		🗆 Barrier Analysis /	
		Intervention	
		□ Other	

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#### For Final Report submission only. Do not exceed 1 page.

Provide a high-level summary of the PIP, including the project topic and rationale (include baseline and benchmark data), objectives, description of the methodology and interventions, results and major conclusions of the project, and next steps.

#### **Project Topic:**

Healthy Blue initiated the PIP for ensuring access to the COVID-19 vaccine among Healthy Louisiana vaccine-eligible enrollees: Persons 18 years of age or older (or 16 years and up for Pfizer vaccine only), in April 2021. The goal was to implement interventions to enact change with this population and compare the baseline encounter/claims data to determine target rates for each measure.

#### **Objectives:**

Healthy Blue's objective was to increase the number of Covid-19 vaccinations by:

- Direct member outreach with our case management (CM) team, community health workers (CHW), text campaigns, community events and various media campaigns regarding the need for the Covid-19 vaccination
- Provider engagement and participation in vaccination efforts
- Providers provided gap in care (GIC) reports for their attributed member population to assist with outreach efforts for vaccinations
- Develop community partnerships with provider clinics to provide Covid-19 vaccinations
- Use Healthy Blue mobile van to provide Covid-19 vaccinations in rural and underserved areas
- Ensure member transportation was available for members to attend vaccination events and visit providers to obtain the vaccine

#### Methodology and Interventions:

Healthy Blue identified members who were eligible for the Covid-19 vaccine, initially only sixteen and older and later in the project, included ages twelve to fifteen, progressing to five to eleven, and lastly zero to four population. The plan also continued to identified members who had not received the second vaccine to complete the vaccination series. The eligibility populations were stratified by race and disparity for outreach, case management engaged members for care coordination and referrals to providers to obtain the vaccine. Provider education on attributed members in need of the Covid-19 vaccine as well and assistance with coordinating them obtaining the vaccine for distribution.

#### Results and major conclusions of the project:

The plan did not meet target rate of 70% with any of the Performance Indicators (PI). However, for all 4 Performance Indicators the plan was able to note substantial growth when comparing to baseline percentages. Healthy Blue was able to identify the most growth related to Performance Indicator 2.

The plan continued to identify barriers during this project. Most members continue to have transportation concerns even if a vaccine provider has been identified. Members also need reminders for second vaccine dose. Healthy Blue was able to intervene this barrier through the SMS (Text) campaign. Providers continued to identify storage as a barrier for their practices.

#### **Next Steps:**

Healthy Blue will continue initiatives and the develop expanded strategies with community partners to obtain and dispense the Covid-19 vaccine. Strategic initiatives focused on the pediatric population will continue and be developed for the largest area identified to increase vaccination rates specifically targeting certain parishes. Provider and member feedback on barriers perceived in obtaining and dispensing the vaccine will be evaluated to develop targeted interventions. Member outreach and provider gap in care reports will continue in 2023.

#### To be completed upon Proposal submission. Do not exceed 2 pages.

#### **Describe Project Topic and Rationale for Topic Selection**

 Describe how PIP Topic addresses your enrollee needs and why it is important to your enrollees:

Healthy Blue had identified specific demographics and regions who have contracted the Covid-19 virus and therefore would benefit from the Covid-19 vaccine. The plan had identified that females contracted the virus more than males by 26.4%; ages 18-35 were more affected and the Jefferson/Orleans parishes had the most cases within the state. Healthy Blue will develop targeted strategies for these demographics and regions with a focus on the identified barriers related to not obtaining the Covid-19 vaccine.

- **Describe vaccine eligibility:** The Louisiana Department of Health website (https://ldh.la.gov/index.cfm/page/4137, 2021) lists vaccine eligibility. Currently, all individuals age 16 or greater are eligible for COVID-19 vaccination. It is anticipated that eligibility will expand to younger members once a pediatric vaccine is approved.
- Describe current research support for topic (e.g., clinical guidelines/standards): The Advisory Committee on Immunization Practices (ACIP) issued interim recommendations on the use of available COVID-19 vaccines to prevent COVID-19 (Oliver et al., 2020b). The State of Louisiana COVID-19 Vaccination Playbook's rationale for prioritizing persons with these conditions is to protect the most vulnerable, and cites the current CDC guidelines (CDC, 2020). Effective Tuesday, March 9, 2021, the State of Louisiana expanded eligibility for COVID-19 vaccines to include people who have health conditions that may result in a higher risk of disease (https://ldh.la.gov/index.cfm/page/4137, 2021).

#### Aims, Objectives and Goals

Aim: Ensure access to COVID-19 vaccination for Healthy Louisiana enrollees.

#### **Objective:**

• The key objective of this PIP is to facilitate COVID-19 vaccination of all eligible enrollees.

#### Interventions:

- A. Enrollee Interventions will be the focus of this PIP, as follows:
  - 1. Refer and facilitate making appointments for eligible enrollees engaged in case management to COVID-19 vaccination sites.
  - 2. Refer and facilitate making appointments for eligible enrollees NOT engaged in case management to COVID-19 vaccination sites.
  - Educate and inform enrollees on vaccine merits, safety and accessibility with comprehensive and clear communication in accordance with the State of Louisiana communication plan for the COVID-19 vaccine [e.g., LDH COVID-19 website: <u>Louisiana Coronavirus COVID-19</u> | <u>Department of Health</u> <u>| State of Louisiana (la.gov)</u>].
  - 4. Provide enrollees with second dose reminders for those overdue.

#### **B.** Provider Interventions

- 5. Distribute listings of COVID-19 vaccine-eligible enrollees, as well as listings of pharmacy vaccination sites and other LINK-enrolled providers, to PCPs.
- 6. Conduct training and education of providers, when necessary, using LINKS training videos and CDC/ACIP evidence-based guidance in collaboration with the Tri-Regional LINKS Outreach Coordinators.

#### C. Collaborate with state and local partners

- 7. Outreach to racial/ethnic minority enrollees. Utilize COVID-19 vaccination coverage reports generated in LINKS to track and monitor COVID-19 vaccination rates and to determine pockets of need (e.g., zip code and region level). Collaborate and coordinate with the Louisiana Department of Health Vaccination Strike Teams to vaccinate hard-to-reach target populations in Louisiana.
- 8. Collaborate with the Office of Public Health on vaccine education materials.

#### Table 2: Goals

	Baseline Rate <sup>2</sup>		
Indicators	Measurement Period:	Target Rate <sup>3</sup>	Rationale for Target Rate <sup>₄</sup>
Indicator 1: Receipt of COVID-19 vaccine			National goal set by the President of the US
Measure A: Receipt of at least one dose of COVID-19 vaccine	N: 30214 D: 219679 R: 13.75%	R: 70%	
Measure B: Receipt of a complete vaccine series <sup>1</sup>	N: 15214 D: 219679 R: 6.93%	R: 70%	
Indicator 2: Racial/ethnic disparity in receipt of at least one dose of COVID-19 vaccine:			National goal set by the President of the US
Measure A: White enrollees receiving at least one dose	N: 5802 D:52643 R: 11.02%	R: 70%	
Measure B: Black enrollees receiving at least one dose	N: 9020 D:66408 R: 13.58%	R: 70%	
Measure C: Hispanic/Latino enrollees receiving at least one dose	N: 1589 D:14926 R: 10.65%	R: 70%	
Measure D: Enrollees of other, missing, or unknown race/ethnicity receiving at least one dose	N: 13803 D:85702 R: 16.11%	R: 70%	
Indicator 3: Racial/ethnic disparity in receipt of a complete COVID-19 vaccine course <sup>1</sup> :			National goal set by the President of the US
Measure A: White enrollees receiving a complete COVID-19 vaccine course	N: 2811 D: 52643 R: 5.34%	R: 70%	
Measure B: Black enrollees receiving a complete COVID-19 vaccine course	N: 4633 D: 66408 R: 6.98%	R: 70%	
Measure C: Hispanic/Latino enrollees receiving a complete COVID-19 vaccine course	N: 699 D: 14926 R:4.68%	R: 70%	
	N: 7071	R: 70%	

Indicators	Baseline Rate <sup>2</sup> Measurement Period:	Target Rate <sup>3</sup>	Rationale for Target Rate <sup>4</sup>
Measure D: Enrollees of other, missing, or unknown race/ethnicity receiving a complete COVID-19 vaccine course	D: 85702 R:8.25%	Turget Nate	
Indicator 4: Receipt of COVID-19 vaccine by children <sup>5</sup>			National goal set by the President of the US
Measure A: Receipt of at least one dose of COVID-19 vaccine		R: 70%	
Measure B: Receipt of a complete vaccine series <sup>1</sup>	Initiated July 2021 N: 1970 D: 27,826 R: 7.08%	R: 70%	
Measure C: Receipt of at least one dose of COVID-19 vaccine: children ages 5-11 years	N: 1310 D: 27,826 R: 4.71%		
Measure D: Receipt of a complete vaccine series <sup>1</sup> : children ages 5-11 years			

 This refers to completion of a 2-dose series for 2-dose vaccines (e.g., Pfizer and Moderna) and receipt of one dose for vaccines only requiring one dose (e.g., Johnson and Johnson).

2. LDH to provide data.

3. Upon evaluation of progress, consideration should be given to improving the target rate, if it has been met or exceeded at that time.

4. Indicate the rationale, e.g., percentage point improvement based upon the strength of interventions.

5. This is a future indicator which will not be measured until a pediatric vaccine is authorized

## To be completed upon Proposal submission. Table 3: Performance Indicators

Indicator	Description		Eligible	Exclusion	News	Description
		Data Source	Population	Criteria	Numerator	Denominator
Indicator 1	Receipt of COVID-19 vaccine	Numerator: State immunization registry (LINKS) Denominator: Medicaid enrollment data	All Medicaid enrollees, age 16+		Measure A: Persons who received at least one vaccine dose Measure B: Persons who received a complete vaccine course <sup>1</sup>	All Medicaid enrollees, age 16+
Indicator 2	Indicator 2: Racial/ethnic disparity in receipt of at least one dose of COVID-19 vaccine: Measure A: White enrollees receiving at least one dose Measure B: Black enrollees receiving at least one dose Measure C: Hispanic/Latino enrollees receiving at least one dose Measure D: Enrollees of other, missing, or unknown race/ethnicity receiving at least one dose	Numerator: State immunization registry (LINKS) Denominator: Medicaid enrollment data	All Medicaid enrollees, stratified by race/ethnicity, age 16+		Persons who received at least one vaccine dose	Eligible individuals as listed in LDH Report
Indicator 3	Indicator 3: Racial/ethnic disparity in receipt of a complete COVID-19 vaccine course <sup>1</sup> : Measure A: White enrollees receiving a complete COVID-19 vaccine course	Numerator: State immunization registry (LINKS) Denominator: Medicaid enrollment data	All Medicaid enrollees, stratified by race/ethnicity, age 16+		Persons who received a complete COVID-19 vaccine course <sup>1</sup>	All Medicaid enrollees

Indicator	Description	Data Source	Eligible Population	Exclusion Criteria	Numerator	Denominator
	Measure B: Black enrollees receiving of a complete COVID-19 vaccine course					
	Measure C: Hispanic/Latino enrollees receiving a complete COVID-19 vaccine course					
	Measure D: Enrollees of other, missing, or unknown race/ethnicity receiving a complete COVID-19 vaccine course					
Indicator 4	Receipt of COVID-19 vaccine by children <sup>2</sup>	Numerator: State immunization registry (LINKS) Denominator: Medicaid enrollment data	All Medicaid enrollees, age 0-15		Measure A: Persons who received at least one vaccine dose Measure B: Persons who received a complete vaccine series <sup>1</sup>	All Medicaid enrollees, age 0 to 15
only requirin	to completion of a 2-dose s g one dose (e.g., Johnson a ture indicator which will not	and Johnson).				for vaccines

#### **Data Collection and Analysis Procedures**

#### Is the entire eligible population being targeted by PIP interventions? If not, why?

#### Sampling Procedures

• **Describe sampling methodology:** University Louisiana of Monroe (ULM) will provide data related to Covid-19 vaccination rates for those members who have had at least one vaccination and those who completed the vaccination series and stratify by race and ethnicity. Weekly member detail reports will be sent by LDH to the plan for those who are eligible for the vaccine (age 16 and older) and those who only received one vaccine. Healthy Blue will analyze the gap in care reports when developing interventions.

#### **Data Collection**

#### • Describe data collection:

Vaccination data will be collected and distributed by LDH and ULM to the plan weekly as well as monthly/quarterly breakdown data by race and ethnicity. Intervention data will be collected monthly for evaluation on effectiveness of interventions.

#### Validity and Reliability

• **Describe validity and reliability:** Data validation issues occur based on the consistency of providers to capture full and complete member demographics/insurance information upfront and their ability to accurately use the LINKs system for data recording.

#### Data Analysis

#### • Describe data analysis procedures:

Once data is obtained, it is analyzed and compared to the goals set forth for each performance measure. Performance Indicator data is reviewed by Quality, Marketing, Provider relations, Case Management and the Leadership teams to collectively seek out the best areas of impact to improve Covid-19 vaccination rates. Additionally, the data is trended and compared to prior results for identification of opportunities of improvement. The data is stratified by region and member demographics to identify opportunities for targeted interventions to address specific performance measures.

#### • Describe how plan will interpret improvement relative to goal:

Data is continuously monitored, at minimum, on a monthly basis to determine if metrics are on target or at risk to meeting goals. Data is benchmarked using similar studies and compared to previous results each month/quarter. Additionally, data deep dives may be required to determine a subset of population trends as related to regional prevalence, member disparities and/or access to care barriers. Healthy Blue will identify potential areas of initial target as related to low vaccination rates.

#### • Describe how plan will monitor ITMs for ongoing QI:

Healthy Blue will complete evaluations of data monthly for oversight of measuring interventions to impact overall goals. Additionally, a barrier analysis along with an analysis of reoccurring member concerns such as transportation and other barriers to care, will be used to identify appropriate interventions in developing goals during the project. The plan will obtain feedback from providers during educational sessions and providing gap in care reports, to help determine barriers and develop interventions to assist with increasing vaccination rates. These exercises will assist in the monitoring of interventions, developing new interventions or the realignment of existing interventions as needed.

#### **PIP Timeline**

*Start Date: April 9, 2021* Baseline Measurement Period: COVID-19 Vaccine Report as of 3/25/21 PIP Interventions (New or Enhanced) Initiated: 4/9/2021 Submission of Baseline Report Due: 5/7/2021 Submission of Interim Report Due: 12/31/2021 Submission of Final Report Due: 12/31/2022

## Barrier Analysis, Interventions, and Monitoring

#### To be completed upon Proposal submission (to be updated for baseline, interim and final reports).

Barrier 1: Enrollees need COVID-19 vaccine.	arriers, Interventions an help with accessing			March 2022	April 2022	May 2022	June 2022		August 2022	Sept 2022	October 2022	Nov 2022	Dec 2022
	ICO-identified Barriers (indicate month, and laborate in footnote as needed beneath table)							July 2022					
Intervention to address barrier 1: 1b. Develop and implement COVID-19 vaccination outreach to enrollees not engaged in case management. Planned Start Date: 5/2021 Actual Start Date:5/2021 Revised Intervention to address MCO-identified barrier: Revision Date:	Intervention tracking measure 1a: N: # enrollees with appointments made at any vaccine provider D: # enrollees NOT engaged in case management	N: 419 D: 118,88 3 R:0.35 %	N: 726 D: 117,96 3 R: 0.62%	N:939 D:120, 552 R: 0.78%	N: 1153 D: 121106 R: 0.95%	N: 1409 D: 120619 R: 1.17%	N:1315 D: 115917 R:1.13%	N: 1327 D: 115768 R: 1.15%	N: 1487 D: 114968 R: 1.29%	N: 1343 D: 127973 R: 1.05%	N: 1448 D: 130395 R:1.11 %	N: 1183 D: 130129 R: 0.09%	N: N/A D: N/A R: N/A
Intervention to address barrier 1 for the pediatric population: 1c. Develop and implement COVID-19 vaccination outreach to the pediatric population. Planned Start Date: 5/2021 Actual Start Date: 5/52021 Revised Intervention to address MCO-identified barrier:	Intervention tracking measure 1b: Percentage of the eligible pediatric population based on GIC report who had an appointment made for COVID- 19 vaccination N: # member appts/referrals made for vaccine D: # members assigned to Pediatricians outreached for GIC reports	N: 32 D: 230 R: 10%	N: 33 D: 459 R: 7.19%	N:16 D:580 R: 2.75%	N:13 D:530 R: 2.45%	N: 6 D: 304 R: 1.97%	N: 8 D: 417 R:1.92%	N: 9 D: 133 R: 6.77%	N: 2 D: 111 R: 1.8%	N: 4 D: 550 R: 0.73%	N: N/A D: N/A R: N/A	N: N/A D: N/A R: N/A	N: N/A D: N/A R: N/A

Table 4: Alignment of Barriers, Interventions and Tracking Measures \*Q4 data not provided in its entirety due to report timing.

Revision date:													
Barrier 2: The large volume of eligible enrollees boses a challenge to enrollee reach via CM butreach alone. MCO-identified Barriers (indicate month, and elaborate in footnote as needed beneath table)		January	Feb	March 2022	April 2022	May 2022	June 2022	July	August 2022	Sept 2022	October 2022	Nov 2022	Dec 2022
	2022	2022					2022						
Intervention to address barrier 2: 2. Distribute eligible enrollee lists and vaccination site lists to PCPs and facilitate referrals as needed. Planned Start Date: 5/2021 Actual Start Date: 6/2021 Revised Intervention to address MCO-identified barrier: Revision Date	Intervention tracking measure 2: Percentage of enrollees age 16+ where PCPs were provided with their eligible patient list and list of vaccine providers N: # members appts made for vaccine D: # members associated to provider outreached for education and GIC reports	N: 157 D: 189 R: 83.07 %	N: 49 D: 706 R: 6.94%	N:20 D: 552 R: 3.62%	N: 9 D: 567 R: 1.59%	N: 10 D: 404 R: 2.48%	N: 16 D: 597 R: 2.68%	N:16 D: 326 R: 4.91%	N:8 D: 273 R:2.93 %	N: 5 D:583 R: 0.86%	N: n/a D: n/a R: n/a	N: n/a D: n/a R: n/a	N: n/a D: n/a R: n/a
Barrier 3: Enrollees may	need reminders for the			March	April	Мау	June		August	Sept	October	Nov	Dec
second dose in a 2-dose MCO-identified Barriers ( elaborate in footnote as	(indicate month, and	January 2022	Feb 2022	2022	2022	2022	2022	July 2022	2022	2022	2022	2022	2022
Intervention to address barrier 3:Intervention tracking measure 3:3. Member calls initiated to those who have not completed the vaccination series (not received second dose) through text campaignsIntervention tracking measure 3: MCO to develop.N: # of members actively enrolled in text campaignsN: # of members actively enrolled in text campaignsPlanned Start Date: 5/30/2021 Actual Start Date: 6/2021Intervention tracking measure 3: MCO to develop.		N:512 D: 18166 R: 2.81%	N:2216 7 D: 38224 R:57.9 9%	N: 9770 D: 15658 R:62.3 9%	N:1729 8 D: 38512 R:44.9 2%	N: N/A D: N/A R: N/A	N: 33483 D: 58216 R: 57.5%	N:3381 9 D: 59388 R: 56.95%	N:2209 6 D: 38464 R: 57.45%	N:1146 3 D: 21217 R: 54.03%	N: n/a D: n/a R: n/a	N: n/a D: n/a R: n/a	N: n/a D: n/a R: n/a

Revised Intervention to address MCO-identified barrier: Revision Date:	dress MCO-identified rrier:												
Barrier 4: There may be COVID-19 vaccines	Barrier 4: There may be disparities in receipt of COVID-19 vaccines				April 2022	May 2022	June 2022		August 2022	Sept 2022	October 2022	Nov 2022	Dec 2022
	MCO-identified Barriers (indicate month, and elaborate in footnote as needed beneath table)							July 2022					
Intervention to address barrier: 4. MCO to develop interventions tailored and targeted to susceptible subpopulations in order to address each observed disparity. Planned Start Date: 5/2021	Intervention tracking measure 4a: N: # Foster care member referred/appointments made at any vaccine provider D: # Foster care members otherwise engaged in case management	N: 37 D: 60 R: 61.66 %	N: 45 D: 74 R: 17.80	N: 13 D: 73 R: 17.80	N: 19 D: 43 R: 44.19%	N: 20 D: 51 R: 39.22%	N: 15 D: 24 R: 62.5%	N: 10 D: 30 R: 33.3%	N:17 D: 38 R: 44.74%	N: n/a D: n/a R: n/a	N: n/a D: n/a R: n/a	N: n/a D: n/a R: n/a	N: n/a D: n/a R: n
Actual Start Date:5/2021 Revised Intervention to address MCO-identified barrier: Revision Date:	Intervention tracking measure 4b: N: D:	N: D: R:	N: D: R:	N: D: R:	N: D: R:	N: D: R:	N: D: R:	N: D: R:	N: D: R:	N: D: R:	N: D: R:	N: D: R:	N: D: R:
	Intervention tracking measure 4c: N: D:		N: D: R:	N: D: R:	N: D: R:	N: D: R:	N: D: R:	N: D: R:	N: D: R:	N: D: R:	N: D: R:	N: D: R:	N: D: R:
	N: D: R:	N: D: R:	N: D: R:	N: D: R:	N: D: R:	N: D: R:	N: D: R:	N: D: R:	N: D: R:	N: D: R:	N: D: R:	N: D: R:	
	D: Barrier 5: Enrollees may have difficulties with ransportation or be homebound			March 2022	April 2022	May 2022	June 2022	July 2022	August 2022	Sept 2022	October 2022	Nov 2022	Dec 2022

MCO-identified Barriers ( elaborate in footnote as Completed 2021													
Intervention to address barrier:	Intervention tracking measure 5a:	N: D:	N: D: R:	N: D:	N: D:	N: D:	N: D:						
Planned Start Date: 4/3/2021 Actual Start Date:5/2021	N: D:	R:	1.	R:	R:	R:	R:						
Revised Intervention to address MCO-identified barrier: Revision Date:	Intervention tracking measure 5b: N: D:	N: D: R:											
	Intervention tracking measure 5c: N: D:	N: D: R:											

### Results

To be completed upon Baseline, Interim and Final Report submissions. The results section should present project findings related to performance indicators. *Do not* interpret the results in this section.

Table 5: Results

	Description	January 2022	February 2022	March 2022	April 2022	May 2022	June 2022	July 2022	August 2022	September 2022	October 2022	November 2022	December 2022	Target
Indicator 1	Measure A: Persons who received at least one vaccine dose Measure B: Persons who received a complete vaccine course	N: 101508 D: 236040 R:43.00 % N: 87308 D: 236040 R: 36.98%	N: 104221 D: 237650 R: 43.85% N: 89742 D: 237650 R: 37.76%	N: 105668 D: 238868 R: 44.24% N: 91370 D: 238868 R: 38.25%	N: 106875 D: 240278 R: 44.48% N: 92567 D: 240278 R: 38.52%	N: 107760 D: 241471 R: 44.63% N: 93448 D: 241471 R: 38.70%	N: 114842 D: 242827 R: 47.29% N: 99377 D: 242827 R: 40.93%	N: 116021 D: 244596 R: 47.43% N: 100544 D: 244596 R:41.11%	N: 116735 D: 245693 R: 47.51% N: 101207 D: 245693 R: 41.19%	N: 117697 D: 247230 R: 47.61% N: 102085 D: 247230 R: 41.29%	N: 11843 9 D: 24822 0 R: 47.72% N: 102727 D: 248220 R: 41.39%	N: 119273 D: 249920 R: 47.72% N: 103467 D: 249920 R: 41.40%	N: 119721 D: 251082 R: 47.68% N: 103898 D: 251082 R: 41.38%	70%
Indicator 2	Racial/ethnic disparity in receipt of at least one dose of COVID-19 vaccine Measure A: Difference between the percentage of eligible White and Black individuals receiving at least one dose Measure B: Difference between the percentage of	N: 71006 D: 151986 R: 46.71% % N: 45772 D: 97320 R:64.03 % N: 9303 D: 23539 R: 39.52%	N: 70479 D: 145844 R 48.32% N: 49376 D: 102829 R: 48.02% N:3540 D: 8885 R: 39.84%	N: 49922 D: 102733 R:48.59% N: 4085 D: 10268 R: 39.78%	N: 72747 D: 148640 R: 48.94% N: 50355 D: 102765 R:49.00% N: 4629 D: 11763 R: 39.35%	149962 R: 49.07% N: 50604 D: 102737 R: 49.26% N: 5264	N: 25963 D: 151380 R: 17.15% N: 53573 D: 102773 R: 52.13% N: 6374 D: 14664 R:43.47%	N: 79995 D: 153024 R: 52.28% N: 54008 D:103004 R:52.43% N: 6944 D: 16068 R: 43.22%	N: 80664 D: 154096 R: 52.35% N: 54292 D: 103108 R: 52.66% N: 7370 D:17077 R: 43.16%	N: 81500 D: 155496 R: 52.41% N: 54584 D:103314 R:52.83% N: 7876 D: 18269 R: 43.11%	N: 82195 D: 156475 R: 52.53% N:54854 D:103342 R: 53.08% N: 8293 D: 19257 R: 43.06%	N: 82943 D: 158055 R: 52.48% N: 55042 D: 103601 R: 53.13% N: 8822 D: 20506 R: 43.02%	N: 83365 D: 159117 R: 52.40% N: 55188 D: 103803 R: 53.17% N: 9246 D: 21504	70%

	and Hispanic/Latino individuals receiving at least one dose Measure C: Difference between the percentage of eligible White and those of Other, Unknown, or Missing race/ethnicity receiving at least one dose Measure D: Racial/ethnic disparity in receipt of a complete COVID-19 vaccine series <sup>1</sup>	N:15931 D: 31127 R: 51.18% N: 60904 D: 151986 R: 40.07%	N: 17563 D: 34130 R: 51.46% N: 60527 D: 145844 R:41.50 %	N: 17713 D: 34188 R: 51.81% N: 61890 D: 147189 R: 42.05%	N: 17763 D: 34112 R: 52.07% N: 62887 D: 102765 R: 61.19%	N: 17729 D: 33968 R: 52.19% N: 63683 D:149962 R: 42.47%	N: 19016 D: 33943 R: 56.02% N: 68192 D: 151380 R: 45.04%	N: 19043 D: 33952 R: 56.09% N: 69174 D: 153024 R: 45.20%	N: 19002 D: 33911 R: 56.03% N: 69781 D:154096 R: 45.28%	N: 19040 D: 33913 R: 56.14% N: 70522 D: 155496 R: 45.35%	N: 19048 D: 33876 R: 56.23% N: 71122 D: 156475 R: 45.45%	N: 19079 D: 33948 R: 56.20% N: 82943 D: 158055 R: 52.48%	R: 43.00%: N: 18931 D: 33810 R: 55.99% N: 72185 D: 159117 R: 45.37%	
Indicator 3	Measure A: Difference between the percentage of	N: 38737 D: 97320 R: 39.80%	N: 41794 D: 102829	N: 42511 D: 102733	N: 42988 D: 102765 R: 41.83%	N: 43272 D: 102737 R: 42.12%	N: 45754 D: 102773	N: 46208 D: 103004 R: 44.86%	N: 46480 D:103108 R: 45.08%	N: 46765 D:103314 R:45.26%	N: 46996 D: 31605 R: 45.48%	N: 47184 D:103601 R: 45.54%	N: 47323 D: 103803 R: 45.59%	70%

	eligible White and Black individuals receiving a complete vaccine series Measure B: Difference between the percentage of	N: 7867 D: 23539 R: 33.42%	R: 40.64% N: 2965 D: 8885 R: 33.37%	R: 48.59% N: 3442 D: 10268 R: 33.52%	N: 3900 D: 11763 R: 33.15%	N: 4440 D: 13257 R: 33.49%	R: 44.52% N: 5359 D: 14664 R: 36.55%	N: 5854 D: 16068 R: 36.43%	N: 6207 D: 17077 R: 36.35%	N: 6636 D:18269 R: 36.32%	N: 6995 D:19257 R: 36.32%	N:7440 D: 20506 R: 36.28%	N: 7826 D: 21504 R: 36.39%	
	eligible White and Hispanic/Latino individuals receiving a complete vaccine series Measure C: Difference between the percentage of eligible White and those of Other, Unknown, or	N: 14300 D: 31127 R: 45.94%	N: 15768 D: 34130 R: 43.94%	N: 15937 D: 34188 R: 46.62%	N: 15999 D: 34112 R: 46.90%	N: 15 D: 33968 R: 47.02%	N:17079 D: 33943 R: 50.32%	N:17112 D: 33952 R: 50.40%	N:17094 D: 33911 R: 50.41%	N: 17121 D: 33913 R: 50.49%	N: 17131 D:33876 R: 50.57%	N:17159 D: 33948 R: 50.54%	N: 17036 D: 33810 R: 50.39%	
	Missing race/ethnicity receiving a complete vaccine series Measure D: Racial/ethnic disparity in receipt of a complete vaccine series	N:60904 D: 151986 R: 40.07%	N: 57827 D: 145844 R:39.65 %	N: 61890 D: 147189 42.05%	N: 62887 D: 102765 R: 61.19%	N: 63683 D:149962 R: 42.47%	N: 27192 D: 151380 R: 45.04%	N: 23904 D: 153024 R: 15.62%	N: 69781 D: 154096 R: 45.28%	N: 70522 D: 155496 R: 45.35%	N: 71122 D: 156475 R: 45.45%	N: 82943 D: 158055 R: 52.48%	N: 72185 D: 159117 R: 45.37%	
Indicator 4 <sup>2</sup>	Measure A: Children (12-	N: 8614 D: 28693	N: 8828 D:28677	N: 8911 D: 28726	N: 8901 D: 28799	N: 8919 D: 28912	N: 9351 D:28985	N: 9313 D: 28971	N: 9258	N: 9154 D: 28977	N: 9029	N: 8960 D: 29039	N: 8870 D: 29084	70%

15) who	R:	R:	R:31.02%	R:	R: 30.85%	R:	R: 32.15%	D:	R:	D:	R:	R:	
received at	30.02%	30.78%		30.91%		32.26%		28961	31.59%	29027	30.86%	30.50%	
least one								R:		R:			
vaccine dose	N: 6838	N: 7117	N:7283		N: 7347	N: 7684		31.97%		31.11%			
Measure B:	D: 28693	D: 28677	D: 28726	N: 7314	D: 28912		N: 7627						
Children (12-	R:	R:	R:	D: 28799	R: 25.41%		D: 28971		N: 7468		N: 7329	N: 7252	
15) who	23.83%	24.82%	25.35%	R:		26.51%	R: 26.33%	N: 7572	D:28977		D: 29039	D: 29084	
received a				25.40%				D:	R:25.77%	N: 7377	R:	R:24.93%	
complete								28961 R:		D: 29027	25.24%		
vaccine series	N: 5258	N: 6303			N: 7105	N: 7559		R. 26.15%		29027 R:			
	D: 51196	D: 51300	N: 6925		D: 51686			20.1070		25.41%			
Measure C:	R:	R:	D: 51368	N: 7067	R: 13.75%		N: 7645		N: 7767				
Children (5-11)	10.27%	12.29%	R:	D: 51543		R:	D: 52126		D: 52659		N: 7586	N:7598	
who received			13.48%	R:		14.58%	R: 14.67%	NL 7770	R:	N: 7668	D:53026 R:	D: 53137	
at least one vaccine dose	N: 2746	N: 4042		13.71%	N: 5142			N: 7773 D:	14.75%	D: 52770	к. 14.31%	R: 14.30%	
	D: 51196	D: 51300			D: 51686	N: 5516		52374		R:		14.00 /0	
Measure D:	R: 5.36%	R: 7.88%	N:4821		R: 9.95%			R:	N: 5694	14.53%			
Children (5-11)			D: 51368	N: 5063		51859	N: 5583	14.84%	D:52659				
who received a			R: 9.39%	D: 51543		R:	D: 52126		R:	N:5649	N: 5600	N: 5589	
complete	N/A	N/A		R: 9.82%	N/A	10.64%	R: 10.71%		10.81%	D:5277 0	D: 53026 R:	D: 53137 R:	
vaccine series	IN/A	IN/A			IN/A			N: 5638		0 R:	10.56%	к. 10.52%	
Measure E:			N/A					D:		10.70%			
Pediatric						N/A		52374	N:474		NI: 470		
population				N/A			N: 233	R:	D: 38451		N: 476 D: 38585	N: 570 D: 38662	
ages 0-4							D: 38398	10.76%	R:1.23%	N: 483	R: 1.23%	D: 30002 R: 1.47%	
years who received at					N/A		R: 0.58%			D: 38439			
least one					11/7			N: 386		R:			
vaccine dose	N/A	N/A						D:		1.26%			
						N/A		38498					
Measure F:			N/A	<b>N</b> 1/A			N: 42	R:	N: 282			N: 399	
Pediatric				N/A			D: 38398 R: 0.11%	1.00%	D: 38451 R: 0.73%		N: 356	D: 38662	
population ages 0-4							IX. U. I I /0		IX. U.7 J /0	N: 339	D: 38585	R: 1.03%	
years who										D:	R: 0.92%		
received a										38439			
complete										R:			
vaccine series								N: 168		0.88%			

					D: 38498 R: 0.44%					
<sup>1</sup> This refers to completion of a 2-dose series for 2-dose vaccines (e.g., Pfizer and Moderna) and receipt of one dose for vaccines only requiring one dose (e.g., Johnson and Johnson). <sup>2</sup> This is a future indicator which will not be measured until a pediatric vaccine is authorized.										

## Discussion

**To be completed upon Interim and Final Report submissions.** The discussion section is for explanation and interpretation of the results. In the Final Report Discussion, revise the Interim Discussion so that the Final Discussion Section represents one comprehensive and integrated interpretation of results, rather than a separate add-on to the Interim discussion.

#### **Discussion of Results**

#### Interpret the performance indicator rates for each measurement period:

The results for the Performance Indicators (PI) are as follows:

- Indicator 1: Measure A: Persons who received at least one vaccine dose: Increased to 52.40% in comparison to last year's 27.67 percentage points. Target rate of 70% was not met.
- Indicator 1: Measure B: Persons who received a complete vaccine course: Increased to 53.17% in comparison to last year's 28.65. Target rate of 70% was not met.
- Indicator 2: Racial/ethnic disparity in receipt of at least one dose of COVID-19 vaccine:
- Measure A: Difference between the percentage of eligible White and Black individuals receiving at least one dose: Increased to 45.59% in comparison to last year's 33.92 percentage points. Target rate of 70% was not met.
- Measure B: Difference between the percentage of eligible White and Hispanic/Latino individuals receiving at least one dose: Increased to 43.00% in comparison to last year's 27.11 percentage points. Target rate of 70% was not met.
- Measure C: Difference between the percentage of eligible White and those of Other, Unknown, or Missing race/ethnicity
  receiving at least one dose: Increased to 55.99% in comparison to last year's 33.66 percentage points. Target rate of 70% was
  not met.
- Indicator 3: Racial/ethnic disparity in receipt of a complete COVID-19 vaccine series:
- Measure A: Difference between the percentage of eligible White and Black individuals receiving a complete vaccine series: Increased to 45.59% in comparison to last year's 32.58 percentage points. Target rate of 70% was not met.
- Measure B: Difference between the percentage of eligible White and Hispanic/Latino individuals receiving a complete vaccine series: Increased to 36.39% in comparison to last year's 27.32 percentage points. Target rate of 70% was not met.

- Measure C: Difference between the percentage of eligible White and those of Other, Unknown, or Missing race/ethnicity
  receiving a complete vaccine series: Increased to 50.39% in comparison to last year's 36.62 percentage points. Target rate of
  70% was not met.
- Indicator 4: Measure A: Children (12-15) who received at least one vaccine dose: Increased to 30.50% in comparison to last year's 16.54 percentage points. Target rate of 70% was not met.
- Indicator 4: Measure B: Children (12-15) who received a complete vaccine series: Increased to 24.93% in comparison to last year's 15.99 percentage points from baseline. Target rate of 70% was not met.
- Indicator 4: Measure C: Children (5-11) who received a least one vaccine dose: 14.30% Target rate of 70% was not met.
- Indicator 4: Measure D: Children (5-11) who received a complete vaccine series: 10.52% Target rate of 70% was not met.
- Indicator 4: Measure E: Children (0-4) who received a least one vaccine dose: 1.47% Target rate of 70% was not met.
- Indicator 4: Measure F: Children (0-4) who received a least one vaccine dose: 1.03% Target rate of 70% was not met

The interpretation and analysis of the performance indicator rates for 2022 showed a month over month improvement with most measures. Healthy Blue did not meet the target rate of 70% for any of the indicators. Pediatric (ages 0-4) rates and data began in July 2022 with varied rates month over month. Barriers to this indicator have been identified as parents having some hesitancy due to unknown risk with vaccines.

#### Explain and interpret the results by reviewing the degree to which objectives and goals were achieved.

Healthy Blue's interventions implemented in 2022 helped meet the objectives and goals for this PIP. The intervention of increasing provider awareness and education on the availability of the covid vaccine led to positive outcomes. All performance indicators increased greatly in comparison to last year percentages. Interventions that impacted the rates the most were noted as those with member outreach via text campaigns and attendance with community events. These interventions showed rate increases month over month.

#### What factors were associated with success or failure?

Barriers related to Covid-19 (Omicron and other variants) infection rates increasing and weather related events created access to care issues for receiving the vaccine. Case management outreach and engagement for members did not impact the vaccination rates. CM rates varied this year as did last year.

#### Limitations

As in any population health study, there are study design limitations for a PIP. Address the limitations of your project design, i.e., challenges identified when conducting the PIP (e.g., accuracy of administrative measures that are specified using diagnosis or procedure codes are limited to the extent that providers and coders enter the correct codes; accuracy of hybrid measures specified using chart review findings are limited to the extent that documentation addresses all services provided).

- Were there any factors that may pose a threat to the internal validity the findings? Weekly eligibility file analysis delayed implementation efforts due to overlap and need for scrubbing the data before being useful.
- Were there any threats to the external validity the findings?

Data received monthly from SMS vendor was not always timely due to unforeseen situations

• Describe any data collection challenges.

Manual weekly/monthly data collection for interventions was cumbersome and led to delays in evaluating effectiveness in efforts.

## Next Steps

This section is completed for the Final Report. For each intervention, summarize lessons learned, system-level changes made and/or planned, and outline next steps for ongoing improvement beyond the PIP timeframe.

#### Table 6: Next Steps

Description of Intervention	Lessons Learned	System-Level Changes Made and/or Planned	Next Steps
Intervention tracking measure 1a: Percentage of enrollees age 16+ who are engaged in CM and had an appointment made for COVID-19 vaccination	Difficult to track and measure appointments made to completed vaccine series; members resistant to vaccines; providers not able to administer vaccine in office setting	Plan developed manual processes t track member outreach and referrals provided member education using motivational interviewing techniques plan assisted providers in obtaining vaccine	Continue to educate members contacted/enrolled in CM with need for vaccine and how to obtain
Intervention tracking measure 1b: Percentage of enrollees age 16+ who are NOT engaged in CM and had an appointment made for COVID-19 vaccination	Difficult to track and measure appointments made to completed vaccine series; members resistant to vaccines; providers not able to administer vaccine in office setting	Plan developed manual processes t track member outreach and referrals provided member education using motivational interviewing techniques plan assisted providers in obtaining vaccine	for vaccine and how to obtain
Intervention tracking measure 2: Percentage of enrollees age 16+ where PCPs were provided with their eligible patient list and list of vaccine providers	Difficult to track and measure appointments made to completed vaccine series; members resistant to vaccines; providers not able to administer vaccine in office setting	Gap in Care (GIC) reports provided providers monthly for those eligible members	Continue to provide GIC reports fo providers and assist with them obtaining the vaccine
Intervention tracking measure 3: Member calls initiated to those who have not completed the vaccination series (not received second dose)	Difficult to track and measure appointments made to completed vaccine series; members resistant to second dose or stated already completed series;	Plan developed manual processes t track member outreach and referrals provided member education using motivational interviewing techniques	Continue to outreach members wh have not completed the vaccine by CHW and/or CM, and text campaigns
Intervention tracking measure 5a: Members with transportation issues will be transported to vaccination locations as needed	Transportation vendor began trackir Covid-19 vaccine transportation needs of population	Plan was able to track members wh required transportation to receive th vaccine	Continue to provide transportation for members with transportation issues

## References

Include a list of references for any sources of information used to formulate the project.

Centers for Disease Control and Prevention (CDC). People with Certain Medical Conditions. Updated December1, 2020. <u>https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html?CDC\_AA\_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fneed-extra-precautions%2Fgroups-at-higher-risk.html [Accessed 18 December 2020]</u>

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Oliver SE, Gargano JW, Marin M, Wallace M, Curran KG, Chamberland M, et al. The Advisory Committee on Immunization Practices' Interim Recommendation for Use of Pfizer-BioNTech COVID-19 Vaccine---United States, December 2020. Morbidity and Mortality Weekly Report, US Department of Health and Human Services/Centers for Disease Control and Prevention, December 18, 2020b; 69(50): 1922-1924.

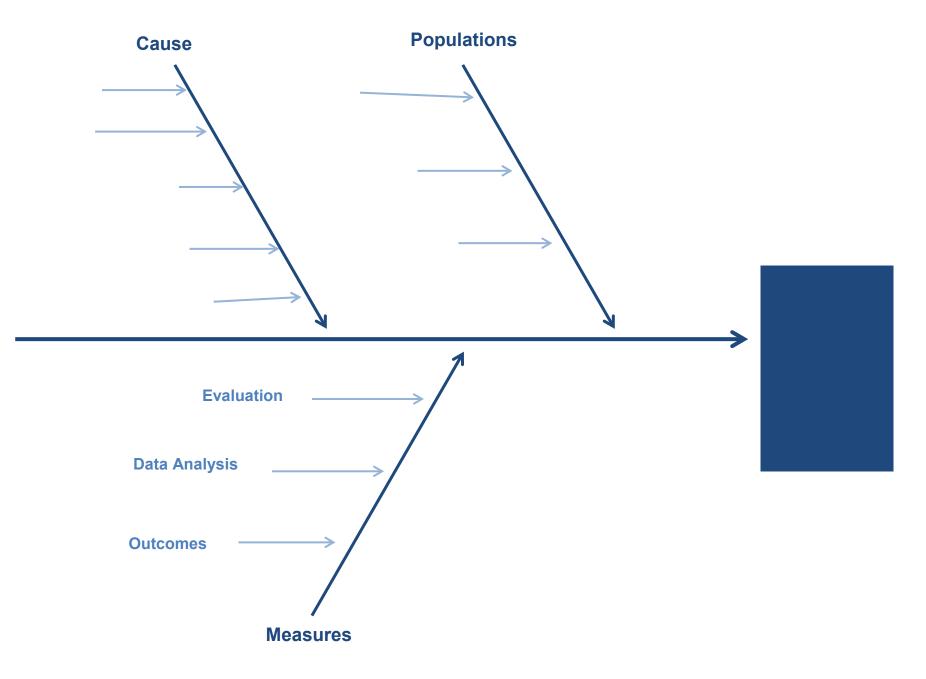
## Glossary of PIP Terms

#### Table 7: PIP Terms

PIP Term	Also Known as…	Purpose	Definition
Aim	• Purpose	To state what the MCO is trying to accomplish by implementing their PIP.	An aim clearly articulates the goal or objective of the work being performed for the PIP. It describes the desired outcome. The Aim answers the questions "How much improvement, to what, for whom, and by when?"
Barrier	<ul> <li>Obstacle</li> <li>Hurdle</li> <li>Road block</li> </ul>	To inform meaningful and specific intervention development addressing enrollees, providers, and MCO staff.	Barriers are obstacles that need to be overcome in order for the MCO to be successful in reaching the PIP Aim or target goals. The root cause (s) of barriers should be identified so that interventions can be developed to overcome these barriers and produce improvement for enrollees/providers/MCOs. A barrier analysis should include analyses of both quantitative (e.g., MCO claims data) and qualitative (such as surveys, access and availability data or focus groups and interviews) data as well as a review of published literature where appropriate to root out the issues preventing implementation of interventions.
Baseline rate	<ul> <li>Starting point</li> </ul>	To evaluate the MCO's performance in the year prior to implementation of the PIP.	The baseline rate refers to the rate of performance of a given indicator in the year prior to PIP implementation. The baseline rate must be measured for the period before PIP interventions begin.
Benchmark rate	<ul><li>Standard</li><li>Gauge</li></ul>	To establish a comparison standard against which the MCO can evaluate its own performance.	The benchmark rate refers to a standard that the MCO aims to meet or exceed during the PIP period. For example, this rate can be obtained from the statewide average, or Quality Compass.
Goal	<ul><li>Target</li><li>Aspiration</li></ul>	To establish a desired level of performance.	A goal is a measurable target that is realistic relative to baseline performance, yet ambitious, and that is directly tied to the PIP aim and objectives.
Intervention tracking measure	<ul> <li>Process Measure</li> </ul>	To gauge the effectiveness of interventions (on a quarterly or monthly basis).	Intervention tracking measures are monthly or quarterly measures of the success of, or barriers to, each intervention, and are used to show where changes in PIP interventions might be necessary to improve success rates on an ongoing basis.

PIP Term	Also Known as…	Purpose	Definition
Limitation	<ul><li>Challenges</li><li>Constraints</li><li>Problems</li></ul>	To reveal challenges faced by the MCO, and the MCO's ability to conduct a valid PIP.	Limitations are challenges encountered by the MCO when conducting the PIP that might impact the validity of results. Examples include difficulty collecting/ analyzing data, or lack of resources / insufficient nurses for chart abstraction.
Performance indicator	<ul> <li>Indicator</li> <li>Performance Measure (terminology used in HEDIS)</li> <li>Outcome measure</li> </ul>	To measure or gauge health care performance improvement (on a yearly basis).	Performance indicators evaluate the success of a PIP annually. They are a valid and measurable gauge, for example, of improvement in health care status, delivery processes, or access.
Objective	Intention	To state how the MCO intends to accomplish their aim.	Objectives describe the intervention approaches the MCO plans to implement in order to reach its goal(s).

### Appendix A: Fishbone (Cause and Effect) Diagram- OPTIONAL



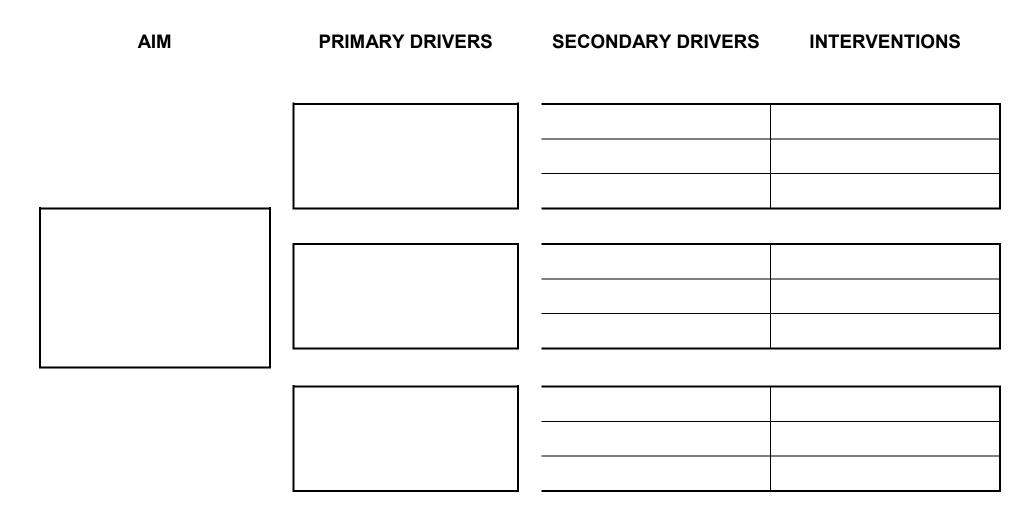
### Appendix B: Priority Matrix- OPTIONAL

Which of the Root Causes Are	Very Important	Less Important
Very Feasible to Address		
Less Feasible to Address		

# Appendix C: Strengths, Weaknesses, Opportunities, and Threats (SWOT) Diagram- OPTIONAL

	Positives	Negatives
INTERNAL under your control	build on STRENGTHS Examples:	minimize WEAKNESSES Examples:
EXTERNAL not under your control, but can impact your work	pursue OPPORTUNITIES Examples:	protect from THREATS Examples:

### Appendix D: Driver Diagram- OPTIONAL



### Appendix E: Plan-Do-Study-Act Worksheet- OPTIONAL

	Pilot Testing	Measurement #1	Measurement #2
Intervention #1:			
<b>Plan:</b> Document the plan for conducting the intervention.	•	•	•
<b>Do:</b> Document implementation of the intervention.	•	•	•
<b>Study:</b> Document what you learned from the study of your work to this point, including impact on secondary drivers.	•	•	•
Act: Document how you will improve the plan for the subsequent phase of your work based on the study and analysis of the intervention.	•	•	•
Intervention #2:			
<b>Plan:</b> Document the plan for conducting the intervention.	•	•	•
<b>Do:</b> Document implementation of the intervention.	•	•	•
<b>Study:</b> Document what you learned from the study of your work to this point, including impact on secondary drivers.	•	•	•
<b>Act:</b> Document how you will improve the plan for the subsequent phase of your work based on the study and analysis of the intervention.	•	•	•