IPLARC Monthly Teams
Webinar: Wave 1
Sustainability

November 18, 2019
1:00 – 2:00 PM
Introductions

• Please enter for yourself and all those in the room with you viewing the webinar into the chat box:
  • Name
  • Role
  • Institution
• If you are only on the phone line, please be sure to let us know so we can note your attendance.
Tips for Accessing WebEx

• You must manually add the meeting to your calendar.
• WebEx is currently unable to add the meeting to your calendar if you are accepting the meeting on a mobile device.

Add to calendar by clicking either of these options.

Add to Calendar

Call-in info

Join by phone
+1-415-655-0002 US Toll Global call-in numbers

Can't join the meeting?
Call Overview

- Annual Conference Recap
- Review of Data/Upcoming Team Talks Schedule
- Sustainability Update with Tennessee
- Team Talk: Northwestern Memorial
- Team Talk: Norwegian American
- Round Robin
- Next Steps
7TH ANNUAL CONFERENCE RECAP
Annual Conference Recap

- 430 Attendees!
- 80 hospitals from across Illinois/Missouri attended
- 7 national & local invited speakers
- 54 Quality Improvement posters (Record number!)
- 50+ Quality Improvement Awards awarded
CONGRATULATIONS

IPLARC Wave 1 QI Champion, QI Leader, and QI Recognition!

ILPQC IMMEDIATE POSTPARTUM LARC INITIATIVE WAVE 1

<table>
<thead>
<tr>
<th>QI Champion</th>
<th>QI Leader</th>
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<tbody>
<tr>
<td>Advocate Illinois Masonic Medical Center</td>
<td>Advocate Lutheran General Hospital</td>
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<tr>
<td>Carle Foundation Hospital</td>
<td>Memorial Hospital of Carbondale</td>
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<td>John H. Stroger Jr. Hospital of Cook County</td>
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<td>Memorial Medical Center</td>
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<td>Northwestern Memorial Hospital</td>
<td>NorthShore University HealthSystem Evanston Hospital</td>
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<td>Norwegian American Hospital</td>
<td>Vista Medical Center East</td>
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<tr>
<td>The University of Chicago Medical Center</td>
<td>Advocate Christ Medical Center</td>
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<tr>
<td>University of Illinois Hospital and Health Sciences System</td>
<td>Swedish Covenant Hospital</td>
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Wave 1 Hospitals Providing IPLARC

Percent of Wave 1 Hospitals Live with Immediate Postpartum LARC

- **Aug-19**: 100%
- **Apr-19**: 93%
- Initiative Go Live Goal - March 2019: 85%
- Initiative Start - Apr 2019: 28%
IPLARC Wave 1 Accomplishments

- 100% of teams completed a Key Players Meeting
- 100% of teams are LIVE with IPLARC
- 100% of teams submitted a sustainability plan
- Improved comprehensive contraceptive counseling
- Clarified IPLARC billing and coding
Impact of Increased Access

34,307 deliveries of patients chose a LARC device

5% of patients benefitted from improved access to LARC

LIVE IPLARC Hospitals (Apr 2018-Sept 2019)
Wave 1: Sustainable Change

Compliance Monitoring
- Monitor comprehensive contraceptive counseling
- Monitor placement for patients who desire IPLARC

Monitor Reimbursement
- Identify potential issues early
- Inform ILPQC for help with troubleshooting

New Hire & Ongoing Education
- Plan for training residents, new providers
- Plan for training new nursing hires
REVIEW OF DATA/UPCOMING TEAM TALKS
## Aims and Measures

<table>
<thead>
<tr>
<th>Overall Initiative Aim</th>
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<tr>
<td>Within 9 months of initiative start, ≥75% of participating hospitals will be providing immediate postpartum LARC.</td>
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<tr>
<th>Structure Measures</th>
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<tr>
<td>IT/EMR systems that allow for documentation of IPLARC placement for tracking, and documentation</td>
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<tr>
<td>Coding / billing strategies in place for reimbursement for IPLARC</td>
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<tr>
<td>IPLARC devices stocked in the inpatient pharmacy</td>
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<td>IPLARC protocols in place for labor and delivery and postpartum units</td>
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<tr>
<td>Implemented standardized education materials and counseling protocols* for patients during delivery admission regarding contraceptive options including IPLARC</td>
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<td>Communicated launch of IPLARC availability during delivery admission with affiliated prenatal care site and provided sites with provider/staff and patient education materials for contraceptive options counseling, including IPLARC</td>
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<tr>
<th>Process Measure</th>
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<tr>
<td>Educated all participating providers/nurses on benefits of IPLARC, protocols, counseling &amp; IPLARC placement</td>
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<tr>
<th>Outcome Measure, among participating hospitals</th>
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<tr>
<td>Provide and document comprehensive contraceptive counseling, including IPLARC, during prenatal care and delivery admission</td>
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<tr>
<td>By increasing access to IPLARC, increase in utilization of IPLARC</td>
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*Focus on monitoring achievement of outcome measures during sustainability
## IPLARC Data Entry Status

<table>
<thead>
<tr>
<th>Month</th>
<th># Teams Entering Data</th>
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<tbody>
<tr>
<td>April – December 2018</td>
<td>16</td>
</tr>
<tr>
<td>January 2019</td>
<td>15</td>
</tr>
<tr>
<td>February 2019</td>
<td>14</td>
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<tr>
<td>March 2019</td>
<td>14</td>
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<td>April 2019</td>
<td>14</td>
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<td>May 2019</td>
<td>14</td>
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<tr>
<td>June 2019</td>
<td>12</td>
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<tr>
<td>July 2019</td>
<td>12</td>
</tr>
<tr>
<td>August 2019</td>
<td>12</td>
</tr>
<tr>
<td>September 2019</td>
<td>12</td>
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Please continue to submit data through December 2019 to monitor the success of your implementation/sustainability efforts.
Comprehensive Contraceptive Counseling

Percent of Patients at Participating Hospitals Receiving Comprehensive Contraception Counseling, Including IPLARC*
April 2018-September 2019

Wave 2 teams start reporting

*Based on a random sample of patients
<table>
<thead>
<tr>
<th>Month</th>
<th>Team 1</th>
<th>Team 2</th>
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<tbody>
<tr>
<td>July 15</td>
<td>NorthShore Evanston Hospital</td>
<td>Memorial Hospital of Carbondale</td>
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<tr>
<td>August 19</td>
<td>Advocate Christ Medical Center</td>
<td>Carle Foundation Hospital</td>
</tr>
<tr>
<td>September 16</td>
<td>UIC</td>
<td>Stroger</td>
</tr>
<tr>
<td>October 21</td>
<td>Advocate Lutheran General</td>
<td>University of Chicago</td>
</tr>
<tr>
<td>November 18</td>
<td>Northwestern Memorial</td>
<td>Norwegian American</td>
</tr>
<tr>
<td>December 16</td>
<td>Vista Medical Center</td>
<td>Swedish Covenant Hospital</td>
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TENNESSEE SUSTAINABILITY FOLLOW-UP
TIPQC: Immediate PostPartum LARC Sustainment

Nikki Zite, MD, MPH
**Project Aim:** To improve the health of infants as well as eligible, desiring mothers in Tennessee by increasing access to contraception through systematically promoting and supporting immediate postpartum LARC in the birth setting in Tennessee, thus reducing unplanned pregnancies, improving pregnancy spacing, and potentially reducing NAS births.

**IMMEDIATE AIM:** To increase access to immediate postpartum LARC to 50% of participating institutions by March 2019. Once an institution’s supporting structure is complete, to increase placement in **eligible women desiring** immediate postpartum LARC to 70% by March 2019.
Project Finding: The Importance of Contraceptive Counseling

January 15 - August 30, 2018
1,968 women delivered

936 (47.6%) reported prenatal CC

- 92 (9.8%) left with “no plan” documented
- 153 (16.3%) changed their plan to another method
- 534 (57.1%) obtained planned contraception
- 39 (9%) obtained planned contraception

431 (21.9%) reported no prenatal CC

- 92 (21.3%) left with “no plan” documented
- 68 (15.8%) changed their plan to another method

When IPP LARC was the intended plan, women with prenatal CC had more success obtaining IPP LARC than women without prenatal CC (55.1% vs 5.1%).
Contraceptive counseling should occur during prenatal care: early and often

**Persistence:** we try to make LARC apart of every conversation

Gaps in documented counseling, are addressed with the corresponding providers

**Staff Education Part 2:** We need to continue discussing IPP LARC with new staff and existing staff to keep IPP LARC a standard of care for eligible women
Successes

MUCH OF OUR SUCCESS IS DUE TO PERSISTENCE

WE ARE GETTING PAID

LARC IS BEING USED AS A BACK-UP FOR BTLS THAT CANNOT BE PERFORMED DUE TO SYSTEM BARRIERS

UTMCK MET TIPQC AIM OF PROVIDING IPP LARCS TO 87% OF ELIGIBLE, DESIRING WOMEN (GOAL WAS 70%).

BCBS STATE EMPLOYEES GAINED ACCESS TO IPP LARC DURING PROJECT YEAR 2
Barriers

Exact amounts of reimbursement for devices are hard to distinguish - the billing department just knows the total amount (including delivery) that we were reimbursed.

Billing: Identified the various billing “triggers” that tell individuals coders to look for device LOT # to submit a claim.
Strategies to continue to succeed

• Engage state champions to provide hospital level reimbursement data
• Continue to offer assistance to teams in sustainment
• Engage MCO Champions
• Incorporate contraceptive counseling and IPP LARC into future projects
  • OUD
  • 4th Trimester
• Offer resources to new hospitals interested in implementing an IPP LARC Program
TEAM TALK: NORTHWESTERN MEMORIAL HOSPITAL
Northwestern Prentice Women’s Hospital

Leanne McCloskey, MD, MPH
Northwestern University, Feinberg School of Medicine
Department of Obstetrics and Gynecology, Assistant Professor
Section Family Planning and Contraception, Ryan Program Director
legriffi@nm.org

ILPQC-IPLARC Webinar
November 18, 2019
## Team Roster

<table>
<thead>
<tr>
<th>NAME</th>
<th>ROLE</th>
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<tbody>
<tr>
<td>Jessica Kiley, MD MPH</td>
<td>OB Provider Champion</td>
</tr>
<tr>
<td>Leanne McCloskey, MD MPH</td>
<td>OB Provider Champion</td>
</tr>
<tr>
<td>Jessika Ralph, MD</td>
<td>OB Senior Family Planning Fellow</td>
</tr>
<tr>
<td>Janelle Bolden, MD</td>
<td>MFM</td>
</tr>
<tr>
<td>Alissa Carlson, MD</td>
<td>Erie Family Health Center</td>
</tr>
<tr>
<td>Kylie Smith</td>
<td>OB Nurse Champion</td>
</tr>
<tr>
<td>Mary Clare Vanecko</td>
<td>OB Nurse Champion</td>
</tr>
<tr>
<td>Katie Jefferson</td>
<td>Mother-Baby Nurse Champion</td>
</tr>
<tr>
<td>Michelle Sullivan</td>
<td>Billing/Collections</td>
</tr>
<tr>
<td>Brady Luby</td>
<td>Contracts/MCO liaison</td>
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<tr>
<td>Sheila O'Brien</td>
<td>IT/EMR</td>
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<tr>
<td>Elise Wozniak</td>
<td>Pharmacy</td>
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<tr>
<td>Martha Meyers</td>
<td>Lactation Consultant/BFC</td>
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<tr>
<td>Deb Miller</td>
<td>QI Professional</td>
</tr>
<tr>
<td>Terry Long</td>
<td>Project Leader</td>
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<tr>
<td>Amanda Roman</td>
<td>APN, Mother-Baby</td>
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<tr>
<td>Heidi Vyhmeister</td>
<td>Erie Family Health Center</td>
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<tr>
<td>Beth Meinhold</td>
<td>Manager, Mother-Baby Prentice 12</td>
</tr>
<tr>
<td>Caroline Fisher</td>
<td>L&amp;D RN</td>
</tr>
<tr>
<td>Katie Rowlands</td>
<td>L&amp;D RN</td>
</tr>
<tr>
<td>Liz Zaragoza</td>
<td>Social Work</td>
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<tr>
<td>Lauren Ratliff</td>
<td>Social Work</td>
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IPLARC at Northwestern Prentice Women’s Hospital

Status:
• IPLARC Go-Live: March 1, 2019

• From March to August 2019, a total of 100 IUDs and 91 implants were placed (Liletta, Paragard, Nexplanon)

• Success from:
  – Multidisciplinary team of experts and executive level support
  – Implementation of standardized guidelines, educational materials for providers, staff, and patients, and enhancements to EMR documentation and billing/coding strategies
IPLARC Sustainability

- Compliance Monitoring
- Education: new hire & ongoing
- Billing & Reimbursement Monitoring
- Operations & Quality Improvement
TEAM TALK: NORWEGIAN AMERICAN HOSPITAL
Norwegian American Hospital
Compliance Monitoring for Counseling

• Prenatal and admission counseling data collected and submitted REDCap by RN team member using:
  • Chart audits
  • IPLARC device log-book
  • Automated EMAR report (in process, to eventually replace log-book)

• OB team member notified of cases from NAH clinic without prenatal counseling documentation

• Family practice resident on OB rotation notified of FP clinic cases without prenatal counseling documentation

• Nurses notified directly of missing counseling documentation on their admissions. Records kept to monitor for trends.
Compliance Monitoring for Counseling

• QI Team Meetings:
  • Communication primarily done via email or through RN team member for new issues as they arise
  • Check-ins scheduled quarterly with OB team member, Department Director, and RN team member to discuss any new issues or ideas, but these are typically addressed as they occur
New Hire Education

• New Providers:
  • Receive ILPQC Grand Rounds slide set and ACOG District II modules assigned to their online learning assignments
  • OB team member discusses program with new hires and assesses for further educational needs

• New nurses:
  • IPLARC program added to orientation checklist; all to receive program overview from RN team member
    • IPLARC reference bulletin board, supply checklists, and documentation checklists utilized
  • NAH IPLARC educational powerpoint and videos assigned to online learning assignments
Ongoing Education

• Providers:
  • ACOG District II online modules to be assigned to yearly online education

• Nurses:
  • IPLARC education station will be taught by the RN team member at the yearly OB nurses skills fair, post-test included
  • IPLARC quick reference bulletin board including printout of the NAH IPLARC powerpoint, process checklists, and supply checklists
Monitoring Billing/Reimbursement

• Chargemaster coordinator tracks IPLARC claims with Quadax and a person spreadsheet
• If an issue arises, we first reference the billing/coding checklist in the toolkit, then reach out to ILPQC if needed
• We plan to amend private payer contracts in 2020
Ensuring Patients Receive Desired IPLARC

• Original change made: Section for postpartum birth control choice added to patient admission documentation

• Added soon after Go Live date:
  • Section on unofficial SBAR report sheet that is kept in patient’s chart for shift handoffs.
  • Patient’s PP birth control choice included in 8AM and 8PM physician/RN huddle
ROUND ROBIN – TEAMS
UPDATE ON PROGRESS
TOWARDS SUSTAINABILITY
Round Robin Guidelines

- What are some lessons learned throughout IPLARC Wave 1 sustainability?
- How will your team maintain IPLARC sustainability in 2020 and beyond?
- Would you like an ILPQC Wave 1 IPLARC sustainability call in 2020?
- Success stories from your IPLARC journey – what are you proud of?
- What is some advice you would give to Wave 2 teams?
NEXT STEPS
Next Steps

• Tune in for December 2019 webinar to hear from Vista and Swedish Covenant!
• Continue to submit data through December 2019
• Continue to work on improving comprehensive contraceptive counseling in prenatal and on L&D
• Reach out to ILPQC – we are always here to help!