



TEXAS TECH UNIVERSITY
HEALTH SCIENCES CENTER™
Paul L. Foster School of Medicine



REGIONAL HEALTHCARE
PARTNERSHIP
REGION 15

TEXAS HEALTH CARE

Transformation and Quality Improvement Program – 1115 Waiver

EXPANDING NEUROLOGY CARE

Region 15 RHP Meeting

El Paso First HealthPlan, 1145 Westmoreland Drive

Vinny Kaur, Administrator, TTUHSC Neurology

March 30, 2016 @ 1:00pm

Nation Wide Shortage

- 2012: 16,366 Neurologists; 2025: 18,060 Projected Neurologists (ideally 21,440)
- Between 2005 and 2012, only 38 annual average of new vascular neurologists entered this subspecialty; attrition occurring through death, retirement and changes in practice
- Currently, 1 out of 6 patients need neurological care
- Increased prevalence and rapidly rising rates for neurological conditions associated with population growth & aging (i.e. Dementia, Stroke, Alzheimer's)
- Stroke - #4 cause of death and leading cause of disability



Region 15 Shortage

- 2010 Paso Del Norte Symposia: Neurology was cited as a top 5 need
- El Paso Region Health Assessment: Critical Shortage of Neurologists in the city and surrounding area
- 2014 demographic data: El Paso population of 800,000; El Paso ideally needs about 40 neurologists.
- Currently: 13 Active community Neurologists (includes Beaumont and VA)



Benefits of Hiring Neurologists to this Community

- Build and introduce newer sub-specialty (i.e. stroke care/evaluation, treatment/intervention, and post-stroke care by pertinent specialists, epilepsy monitoring unit etc.)
- Having access to sufficient number of neurologists and neurological care in our community
- Quicker appointments with more neurologists
- Ability to stay in town to access neurological services
- Reduction in mortality rates directly related to immediate interventions and post care such as stroke
- Ability to see all payor mixes specifically the Medicaid and uninsured (Academic University specifically)



Milestone Progress: DY 05

1. Recruit 3 Physician or Faculty extenders

■ PROCESS FOR RECRUITMENT

- Word of mouth,
 - formal ads to include Neurology residency program directors,
 - and recruitment company
- ### ■ 65 inquiries & extensive conversations since Fall 2012(baseline year) to date.
- Physicians rejected: 54
 - Physicians/extenders accepted: 7
 - Accepted position; failed to get J-1: 1
 - Did not qualify: 1
 - Decision-making process: 2



Milestone Progress: DY 05

- 35 interviews since 2012
- 7 Hires since 2012

Current Total TTUHSC Neurologists :

- 2 NP + 8 Faculty (includes 2 part time Neurologists)



2. ACGME Residency Program w/ Two (2) residents

July 2016: 3 PGY 2's were offered
positions



3. Two (2) Annual conferences

- March 30, 2016 : Presentation to Region 15 RHP Meeting
- May 27, 2016: Neurology for Non-Neurologists annual seminar
 - Save the date cards have gone out



4. E-Referral Program (EXTERNAL)

- Initiation of *internal* Referrals began April 22, 2014 and has been implemented
- **Internal** e-referrals are being data entered
- Initiation of **external** Referrals implementation; Date TBD

Quality Improvement

- I. February 16: IT marketing efforts to several external providers to encourage use of External Referral Management system.



5. Annual increase in new patients

5a. Clinic Encounters

• DY 02	2381 patients
• DY 03	4,125 patients
• DY 04	5,383 patients
• DY 05 (YTD Feb)	2,302 patients
Annualized Projections	4,604 patients
DY 05 Goal:	5,000 patients

Note:

Estimations for end year projections will be higher due to OPC clinics that have not begun (NP (2), Residents (5), and 1 NCC))



5b. Clinic Volume – unique patients (Site 1)

- DY 02 1,761 patients
 - DY 03 2,241 patients
 - DY 04 YTD Jan 1,650 patients
 - DY 04 3,319 patients
 - DY 05 (YTD Feb) 1,242 patients
- Annualized Projections 2,484 patients**
- DY 05 Goal 3,500 patients**

Note:

DY 4 = used up 13 months

DY 5 = have only 11 months

Several new providers incl. residents will begin clinics



5b. Clinic Volume – unique patients for two additional sites

Site 2: Lost milestone in DY 04; unique volume was short in #. No longer valid for DY 05

Site 3: Delayed by one DY year; DY 05 is the last year to fulfill this milestone



5c. Medicaid/Uninsured Mix Oct 2015-Feb 2016:

Unique	41% (Goal: 45%)
Encounters	42% (Goal: 45%)

NOTE:

- Most new providers will initially begin clinics with Uninsured patients due to delay in credentialing



6. Category 3 Milestone:

■ Patient Satisfaction Patient Surveys

1.	DY 02	80.7%
2.	DY 03	85.44%
3.	DY 04	84.31%
4.	DY 05 YTD Feb	83%
	DY 05 Goal:	82.6%



■ Epilepsy notation of Seizure Types and Current Seizure Frequency

1.	DY 02	8%
2.	DY 03	20%
3.	DY 04	62%
4.	DY 05 YTD Feb	68%
	DY 05 Goal:	17.3%



Quality Improvement:

- I. Implement a process change within the clinic to increase our abandoned rates.
- II. Enhancements in reception area – suggestion box, additional seating, added additional signage
- III. 2 additional i-pads were purchased to expedite patient check-out

Innovation

- Developed internal Joint Commission (JC) training, education and checklist towards JC visit in March 2015; enhanced by weekly checks as of Jan 2016
- Created a Clinical Operations Subcommittee
- Promoted a CA to a leadership position to assist Clinic Manager. Also a direct liaison to current CAs
- Critical Care Unit at Hospital : start date Summer 2016
 - Begin Critical care service
 - Workforce enabled (Physicians & Extenders)
- Structural enhancements:
 - Extensive efforts to obtain appropriate Neurology signage
 - Added a secondary “informal” reception area
 - Suggestion Box
 - Added a small conference room
 - Continue to acquire additional space for a growing department
 - Build a dirty-clean sink in clinic

QUESTIONS?



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COMMENTS?