

Moving the Needle

Progress and Shared Success from the MaineHealth ACO

MaineHealth ACO Meets HbA1c System Goal

As a system, we have closed the long-standing gap on the poor control HbA1c Measure as of September 30, 2016. This notable accomplishment reflects sustained efforts at Maine Medical Center/Maine Medical Partners, Southern Maine Health Care, MidCoast, St. Mary's and Waldo Country HealthCare, as well as recent improvements at PenBay and Western Maine. Congratulations to teams who have worked so hard to meet this goal and for the continued excellent work in the field of diabetes care!

Whether the focus is on diabetes, COPD, or other high-risk populations, the journey of patient-centered, team-based models of care can involve a series of distinct steps: from panel management, to visit-based workflows, to clinical interventions and coordination, these steps have been found to improve patient outcomes, experience and cost. [Click here for more](#) on some of the common steps on this journey.

Colorectal Cancer Screening Receives an “A” Recommendation from USPSTF

The US Preventive Services Task Force (USPSTF) has released an update to their colorectal cancer screening guidelines and again assigns an “A” rating to screening for those aged 50 to 75 years. Screening for those aged 76-85 years receives a “C” rating, with the decision based on the patient’s screening history and overall health. The report can be found on the [USPSTF website](#).

This year’s recommendations emphasize that a number of effective screening options exist and that colorectal cancer screening is “substantially underused”; therefore, they do not rank the tests or recommend any one method over another. The report outlines the evidence, risks, and benefits of available screening methods and encourages providers to review this evidence to determine the most appropriate test for each individual. Information is available on the following methods: colonoscopy, flexible sigmoidoscopy, CT colonography, guaiac-based FOBT, the fecal-immunochemical test (FIT), and the FIT- DNA test (brand name Cologuard).*

Other bodies that publish colorectal cancer screening guidelines include the American College of Gastroenterology (2009), the National Comprehensive Cancer Network (2012), the American College of Physicians (2015), the American Academy of Family Physicians (2008), and a joint issuance by the American Cancer Society, American College of Radiology, and the US Multi-Society Task Force (2008). Some prioritize or tier particular screening methods, and they vary in their inclusion of several tests (e.g. CT colonography, FIT-DNA).

MaineHealth ACO contracts are revised on an annual basis and therefore any new tests may not currently be included in quality measures. Inclusion of these methods will be reevaluated during contract negotiation. Currently, two colon cancer screening tests are not included in MaineHealth ACO contractual definitions (FIT-DNA and CT Colonography)

Note: Changes in clinical practice should always be informed by evidence-based guidelines. Contractual and public reporting programs often lag behind clinical practice recommended changes. While this can be frustrating, eventually quality reporting does catch up and align with evidence-based guidelines.

For questions related to colorectal cancer screening guidelines please contact Marin Johnson at mejohanson@mainehealth.org or 661-7137

For questions related to public reporting, please contact Jennifer Maurice at jmaurice@mmc.org or 207-482-7054.

**The methylated SEPT-9 DNA serology test—Epi proColon—was evaluated but found to have insufficient supporting data and a sensitivity of less than 50 percent.*

MaineHealth's Childhood Immunizations Team Reaches Hepatitis B Birth Dose Honor Roll

MaineHealth's Childhood Immunizations Team lent data support and expertise to Maine Medical Center (MMC) and Barbara Bush Children's Hospital (BBCH) staff to successfully reach the Immunization Action Coalition's Hepatitis B Birth Dose Honor Roll.



Pictured Here: Members of Maine Medical Center's Labor and Delivery, Mother/Baby, NICU, Continuing Care Nursery, Pediatric Short Stay Units, and the Barbara Bush Children's Hospital are presented with the Immunization Action Coalition's Hepatitis B Birth Dose Honor Roll certificate by MaineHealth's Child Health team.

This honor was achieved over a 12-month period with a coverage rate of 90% or greater for administering the Hepatitis B vaccine to all newborns (regardless of weight) and with the implementation of specific written policies, procedures, and protocols to protect all newborns from Hepatitis B virus infection prior to hospital discharge.

MMC and BBCH join 13 other Maine hospitals on the honor roll and is one of two Maine hospitals for 2016. Thank you to Labor and Delivery, Mother/Baby, NICU, Continuing Care Nursery, BBCH, Pediatric Short Stay Units, and patient families for their continued support of the Child Health team's goal of working together to improve the overall well-being of Maine children to ensure the long-term health of our communities.

To learn more about why Hepatitis B vaccine is important for newborns to receive at birth, before leaving the hospital visit: <http://www.immunize.org/catg.d/p4110.pdf>

Successful Implementation of Early Pediatric Oral Health at SMHC

As an early adopter of the "From the First Tooth Program", Southern Maine Health Care has been providing early pediatric oral health to patients in their pediatric and family medicine practices for several years. Success of their implementation was recently validated through a data study that assessed fluoride varnish application or oral evaluations provided. [Click here to read more](#) about the program.

For information about the "From the First Tooth Program", contact [Susan Cote](#), FTFT Program Manager.