



Three Stops on the Data Journey and Why You'll Want to be on Board

The NYSBHF Data Hub Program

NYSBHA Annual Conference

March 17, 2023

Acknowledgements

The New York State Data Hub Program would not be possible without the support of the New York Community Trust, the Ira W. DeCamp Foundation and the Mother Cabrini Health Foundation.

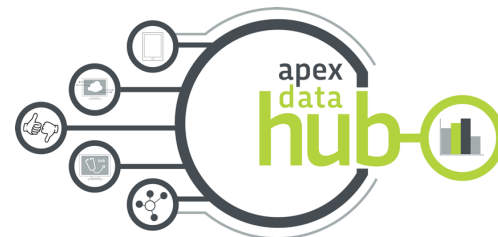
The New York School-Based Health Foundation is grateful to these three funders for their understanding of the importance of this work and their faith in us.

We are also grateful for the partnership of our Data Hub vendor, Apex Evaluation.



Mother Cabrini
HEALTH FOUNDATION

Ira W. DeCamp Foundation



Agenda

1. Apex & the National Perspective

Carlos Romero, MBA - President & CEO, Apex Evaluation

2. The Data Hub Program in NY State

*Lisa Perry, MBA, MPP – Program Director, NYSBHF Data Hub;
Principal, Morningside Health Strategies*

3. A User Perspective

*Viju Jacob, MD FAAP - VP of Medical Affairs/Medical Director,
Urban Health Plan; Co-Chair, NYSBHF Board Data Hub Committee*

4. SBHC Data: 2021-2022 School Year

Carlos Romero, MBA – President & CEO, Apex Evaluation



Apex & the National Perspective





apex

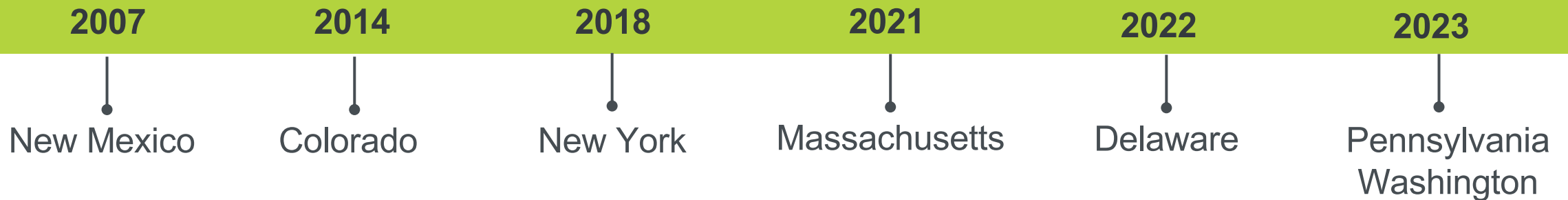
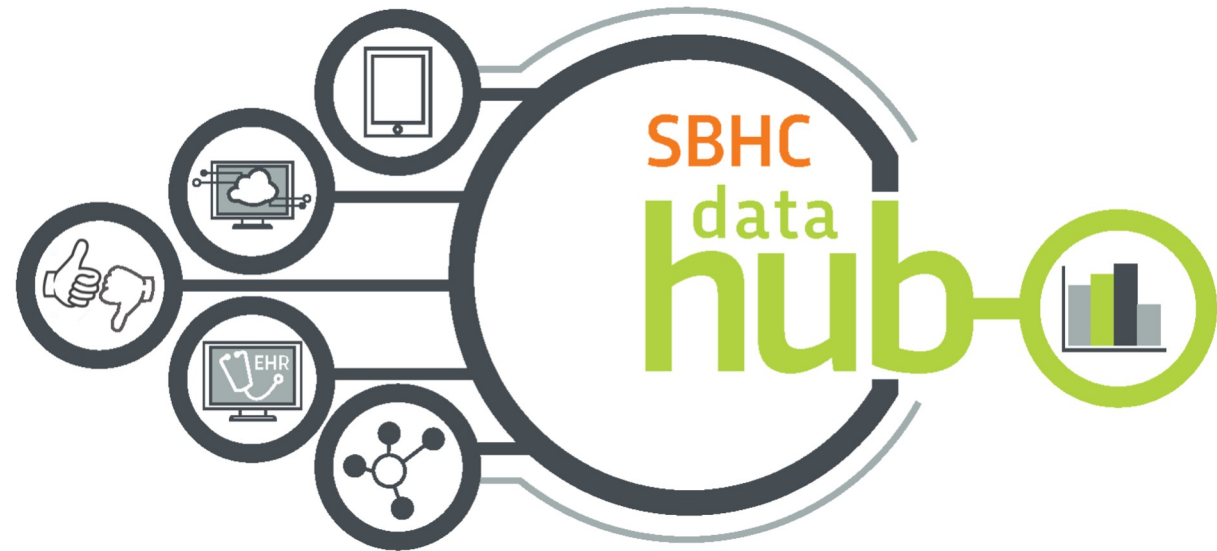
evaluation that works

New York Data Hub Project Data Briefing 2021-2022

Carlos Romero

March 2022

Data Ecosystem for SBHCs



Data Ecosystem for SBHCs

- People

- SBHC Clinicians
- SBHC Sponsor Administrators
- Funders
- Public health
- Evaluators and researchers
- School and community

- Purpose

- Compliance and accountability
 - Needs assessment
 - Coordination of care
 - Quality improvement
 - Research and publication
 - Advocacy and policy
- } Learning

Alignment to SBHC Needs

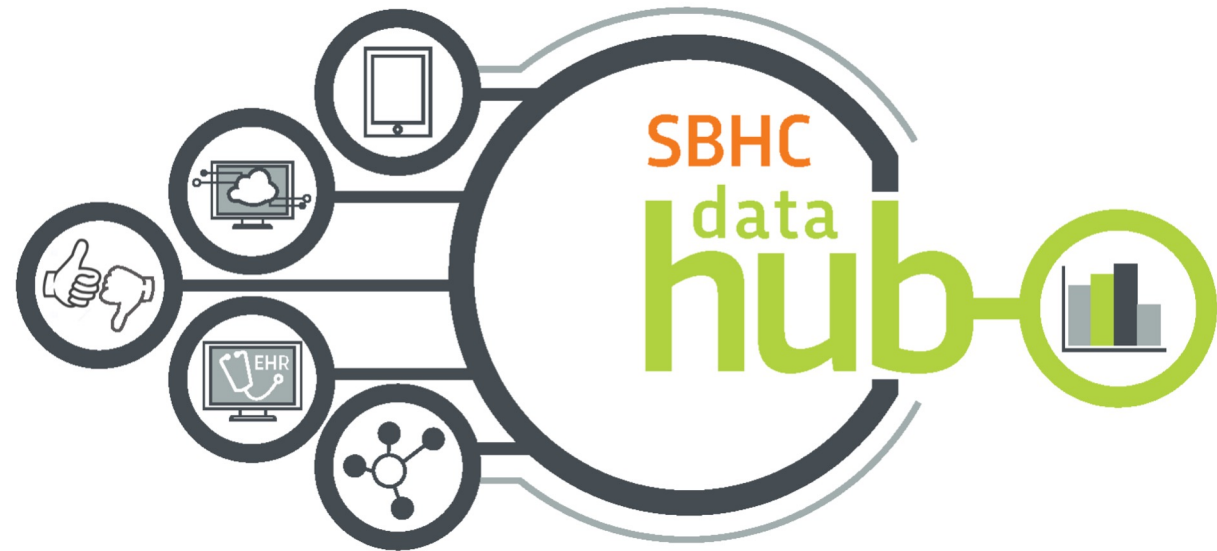
- More efficient data collection including
 - Reducing burden of data collection
 - Avoiding duplication of data entry
 - Tools for screening and other forms and surveys
- More effective use of data including
 - To inform individual and population care
 - To drive quality improvement and learning
 - To tell the story including advocacy and policy

Alignment to SBHC Principles

- Access and equity
- Integrated primary care, mental health, dental
- Education, prevention, and early intervention

Data Hub Use Cases

- Existing Data
- New Data
- Linking
- Reporting



Alignment to SBHC Story

Opportunity

- Rural/urban
- Host school
- Services
- Staffing
- Hours
- Revenue
- QI priorities

Needs and Conditions

- Home and school
- Diet and activity
- Social determinants
- Safety
- Substances
- Sexual health
- Mental health

Responsiveness

- Patient Info
- Visit Info

Outcomes

- Patient feedback
- School data
- Research



OPERATIONAL PLAN



JUST HEALTH



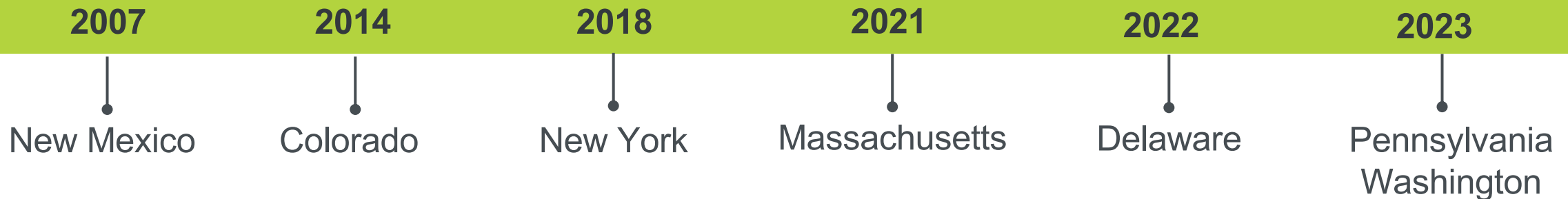
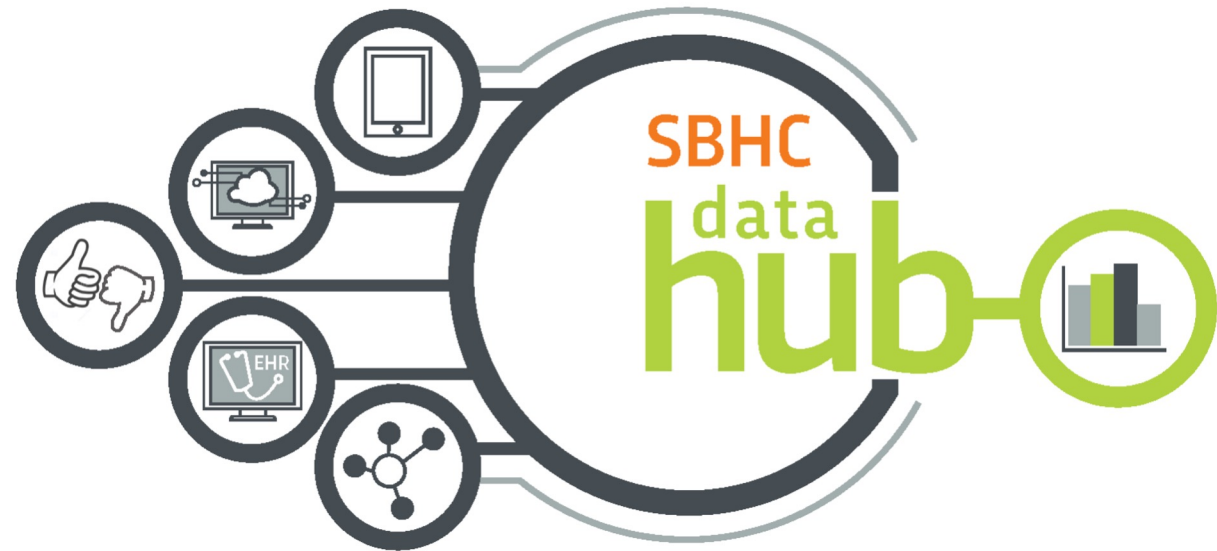
ELECTRONIC HEALTH RECORDS



PATIENT SURVEY

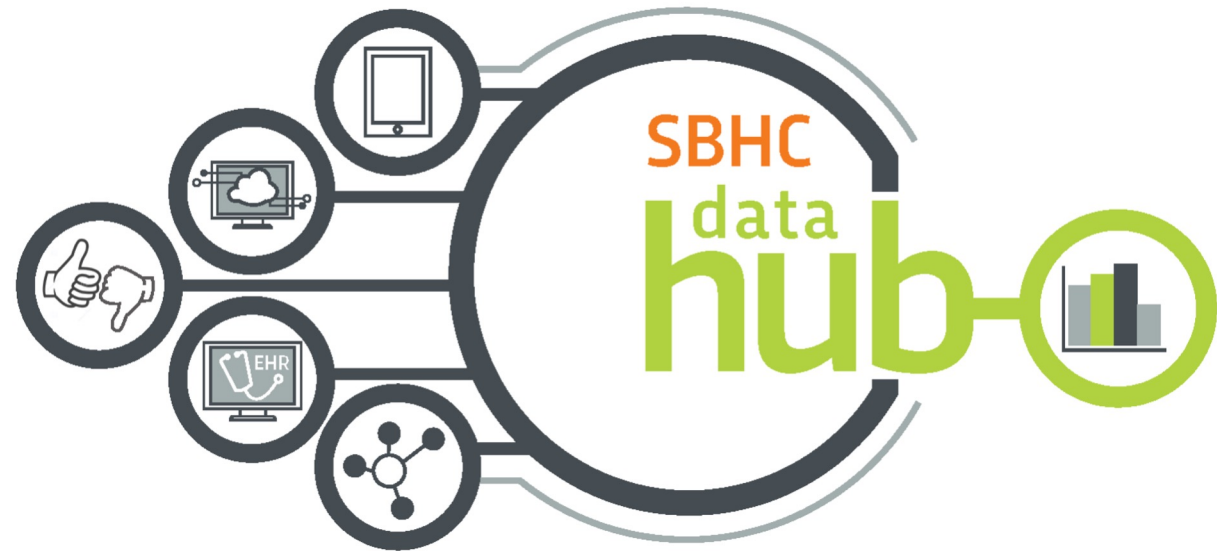
Data Ecosystem for SBHCs

- Efficiency
- Consistency
- Credibility
- Value
- Economy of scale



Data Ecosystem for SBHCs

- National hub
- Screening practices
- Screening data
- Community School
- Sustained funding



2028

The Data Hub Program in NY State

- **The Benefits**
- **Current Status**
- **Planned Growth**



The Data Hub Program in NY State:

The Benefits

- **For the 1st time, data is aggregated and made available to:**
 - **Compare your SO to peers**
 - **Quality measures, gaps in care, outcomes**
 - **Volume & types of service**
 - **Assess your operations**
 - **Support advocacy for the SBH sector, statewide**



The Data Hub Program in NY State: The Benefits, cont'd

- **Data quality checks with Apex Evaluation**
- **Preparation by Apex of required NY State Quarterly & Year-End Reports**
- **Sharing practices, lessons learned and resources through the Data Hub User Group, sponsored by NYSBHF**



The Data Hub Program in NY State

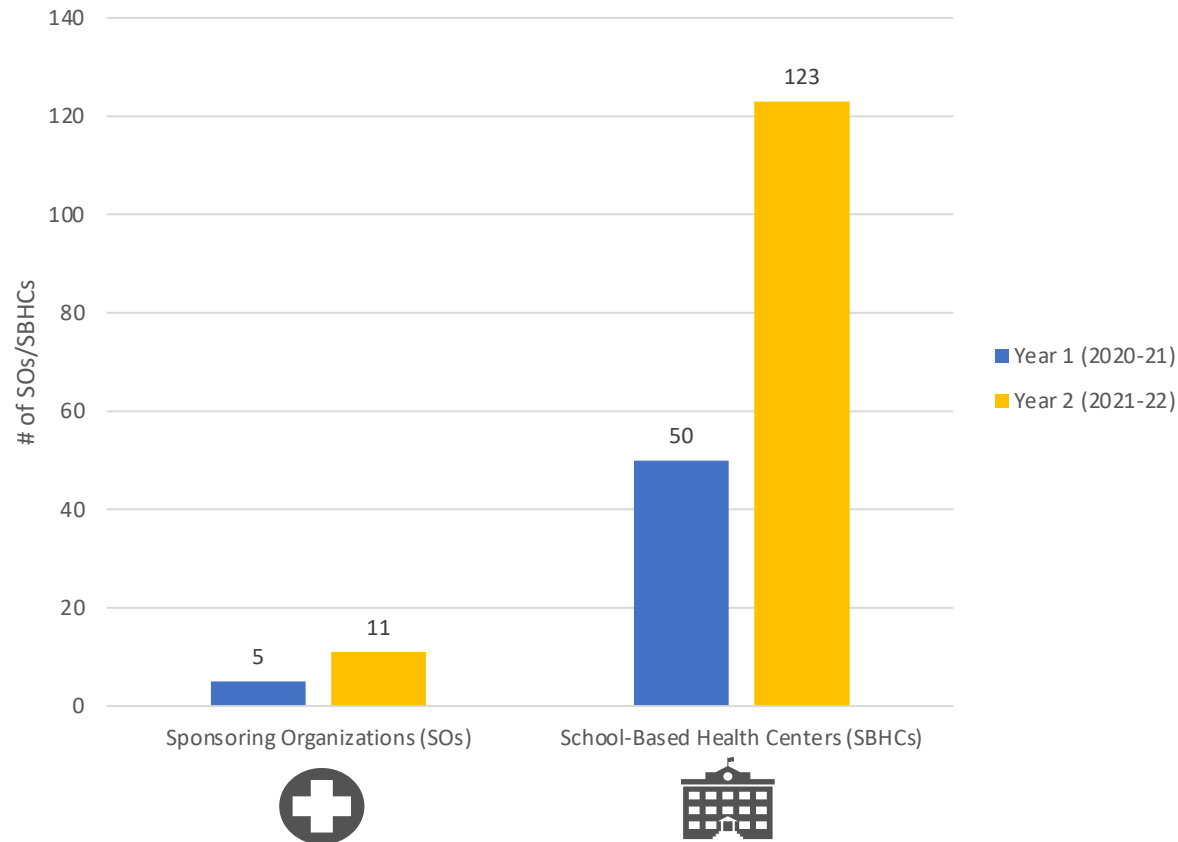
Current Status



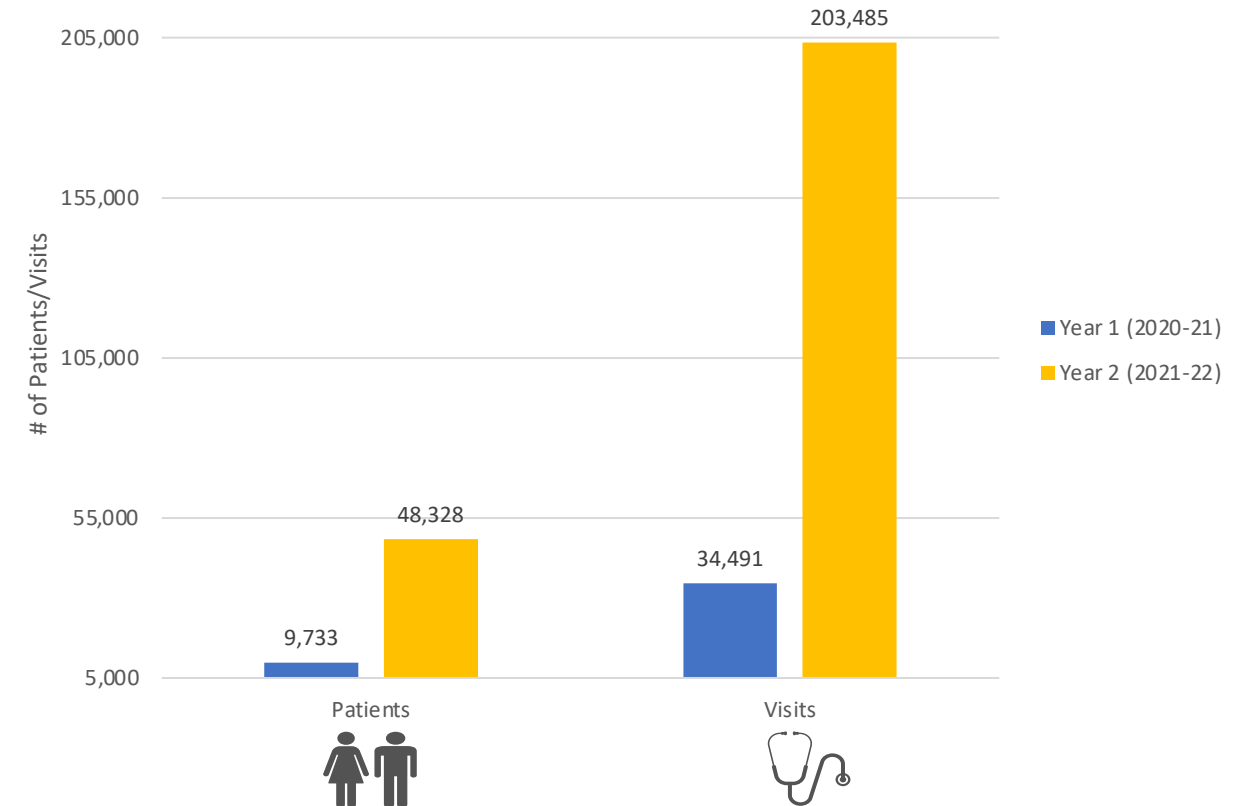
Growth in Data Hub Participation



Number of SOs and SBHCs Involved by Year



Number of Patients Seen and Visits Completed by Year





Current Reporting Snapshot

Total Utilization	2021-2022
	Group # ²
SBHC Users	52,212
Visits	205,427
Average Visits per SBHC User	3.93

SBHC User Race	2021-2022	
	Group #	Group %
Black or African American	9,879	19%
American Indian or Alaska Native	833	2%
Asian	2,068	4%
White	12,542	24%
Native Hawaiian or other Pacific Islander	449	1%
Unknown	17,010	33%
Other	9,431	18%

SBHC User Ethnicity	2021-2022	
	Group #	Group %
Hispanic or Latino/a	29,756	57%

Current Reporting Snapshot cont.



Type of Visit by Provider	2021-2022	
	Group #	Group %
Primary Care Visits (MD, NP, PA, DO)	161,678	79%
Behavioral Health Visits (BHPs)	41,541	20%
Dental Visits (Dentist, Dental Hygienist)	1,901	1%
Other (e.g., Care Coordinator, Health Educator)	0	0%
Missing	307	0%

Depression	2021-2022	
	Group #	Group %
Depression Screening (age 11 to <21)	17,551	47%

Depression Screening: Calculated using visit data. Procedure codes 96160, 96127, G0444, G8431, 3725F, 1220F, 3351F, 3352F, 3353F, 3354F, G8510 or diagnostic code Z13.31 in any position. The denominator for this measure is 37,374.

The Data Hub Program in NY State

Planned Growth



Planned Growth

- **3 new SOs to be added this Year**
 - **Goal: 60% of all SBHC sites in NY State**
- **Enhancements to Snapshot report under consideration:**
 - **Additional quality measures**
 - **More detailed reporting on chronic care, behavioral health and reproductive care**



A User Perspective



If your organization is not yet a member of
the Data Hub,
Please join us!

Email us at: nysbhfoundation@gmail.com



Access to Care



203, 485 Visits



48,328 Patients



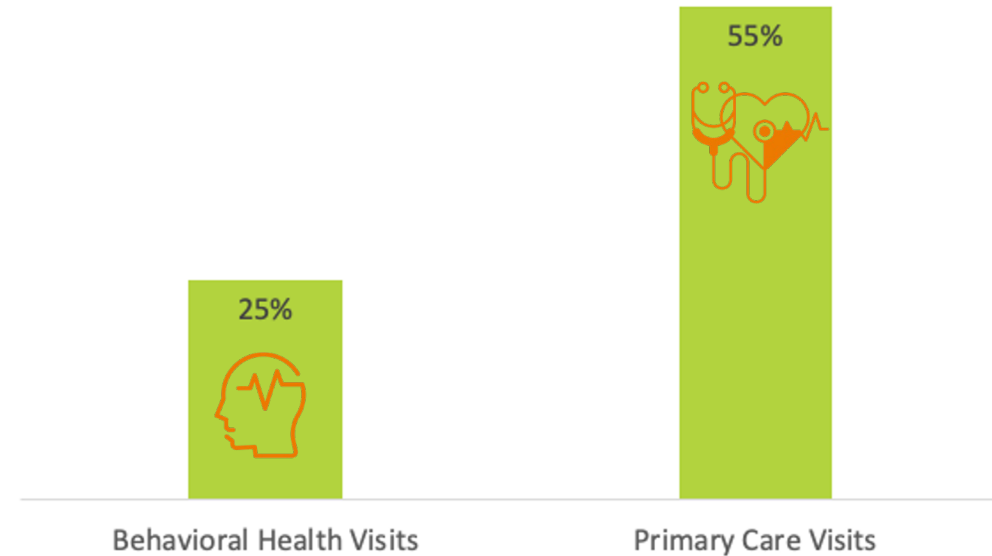
112,934 Primary Care Visits



50,098 Behavioral Health Visits



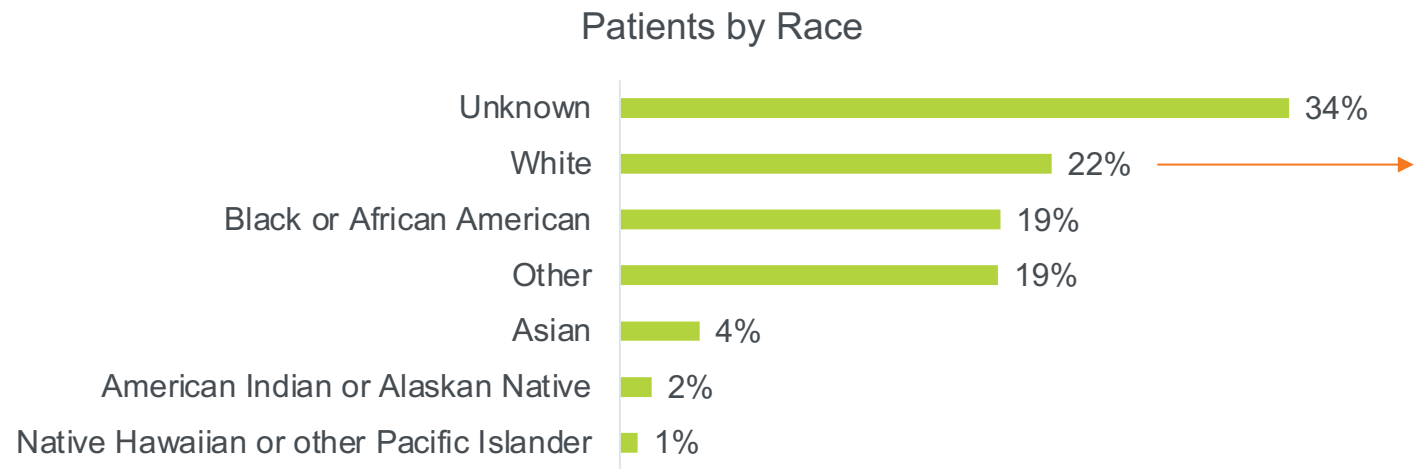
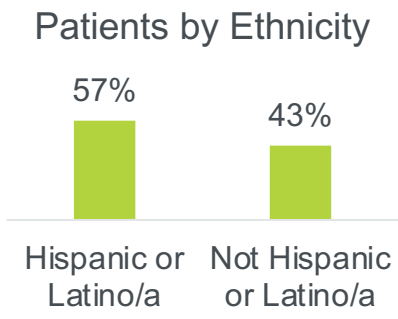
3,105 Dental Visits



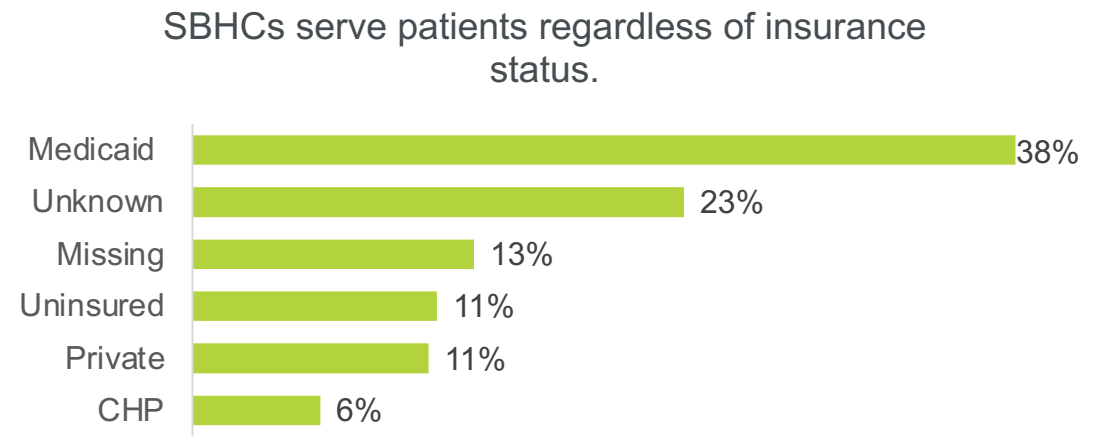
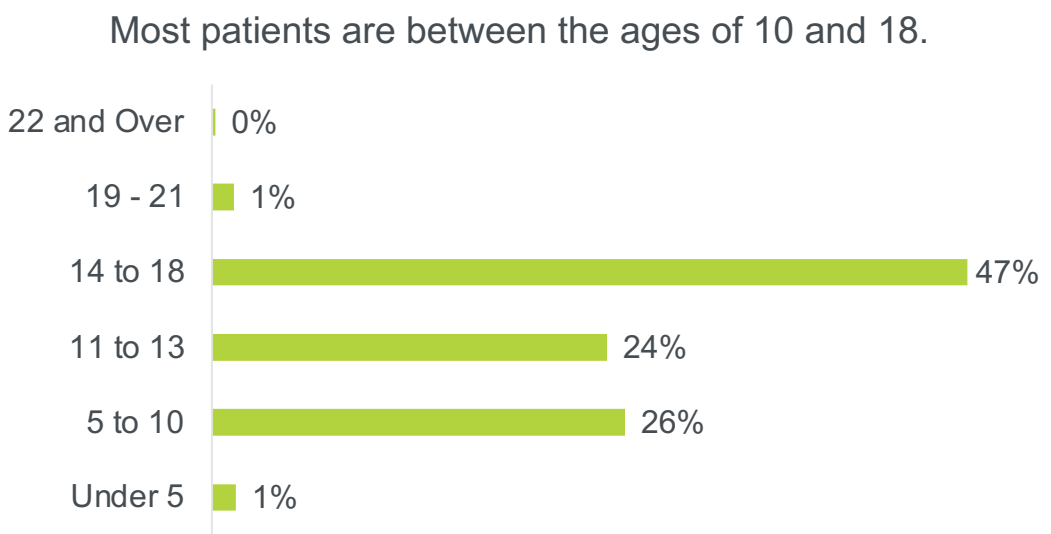
Note: A significant number of visits did not include diagnosis codes, which is why these numbers do not add up to 100%

Data are from Cohort 1 & Cohort 2 of the Data Hub Project - July 1, 2021 to June 30, 2022
Data are from 11 Sponsor Organizations representing 123 SBHC sites.

SBHC Patient Demographics



15% of white patients also identified as Hispanic or Latino/a



SBHC Performance Measures

SBHA Quality Initiative (NQI) Measures

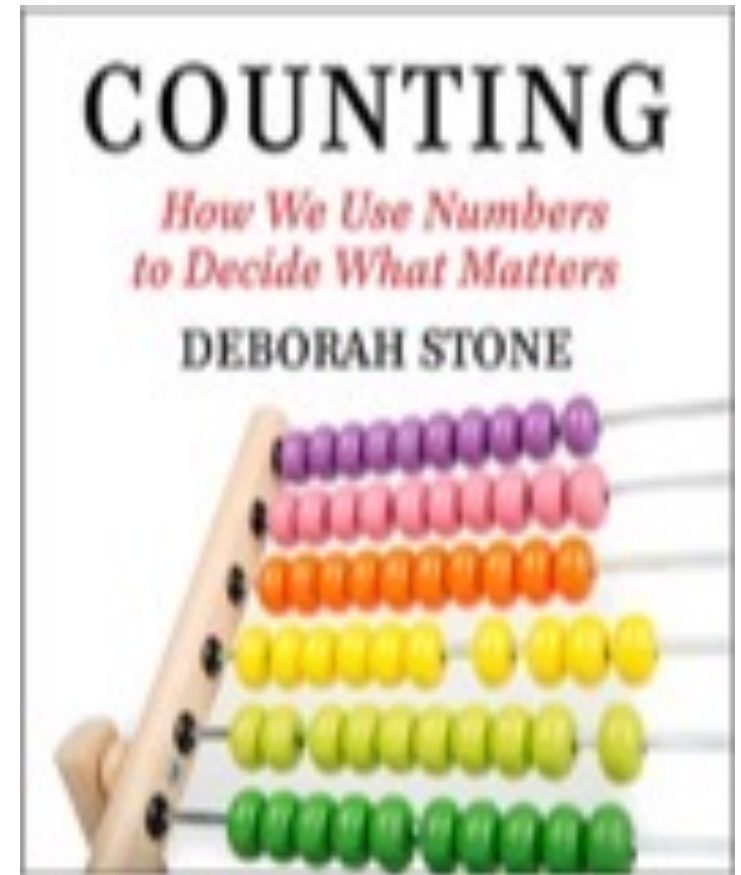
- Comprehensive well exams
- BMI screening (and nutrition/physical activity counseling)
- Depression screening
- Chlamydia screening
- Annual risk assessments

New York State DOH Measures

- Comprehensive well exams
- BMI screening (and nutrition/physical activity counseling)
- Behavioral health screening (depression screening)
- Immunizations
- Age-appropriate anticipatory guidance
- Asthma management
- Tobacco use and prevention
- Reproductive health screening
- Oral health assessments

Every **number** is born of subjective judgments, points of view, and cultural assumptions.

Numbers are filled with bias through and through, because that's what categories do.



Performance Measures

- Numbers
- Invented
- Manufactured
- Processed



- Consumed
- Tell a story
- Body of evidence



- Stimulate thinking
- Decide something

Context gives meaning to data;
data without context is meaningless.

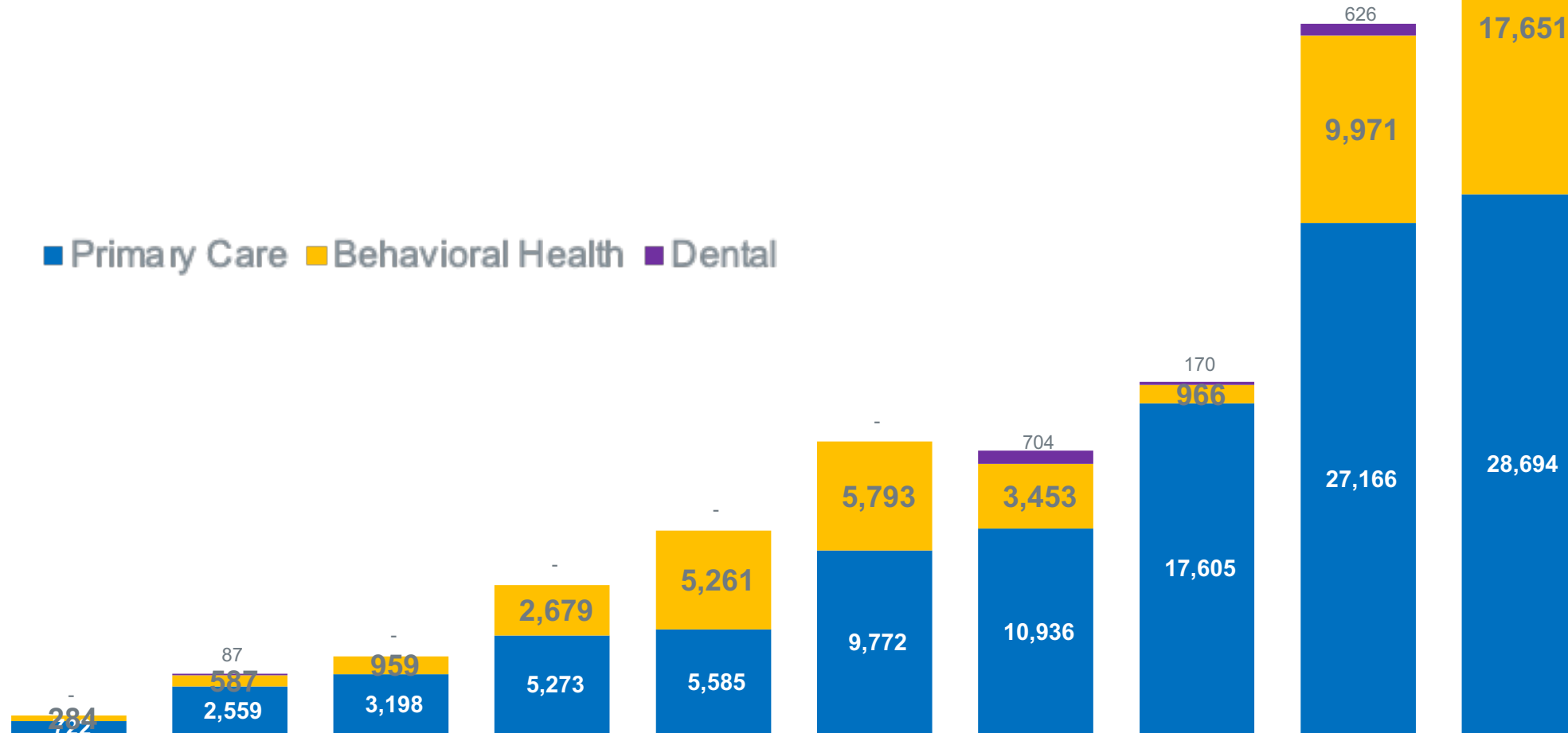
SBHC Performance Measure Data Food Label

Nutrition Facts			
	Amount/serving	% DV*	Amount/serving
1 serving per container	Total Fat 13g	17%	Sodium 340mg
Serv. size 2 Pastries (96g)	Sat. Fat 4.5g	23%	Total Carb. 68g
Calories per serving 400	Trans Fat 0g		Dietary Fiber 1g
	Polyunsat. Fat 5g		Total Sugars 30g
	Monounsatur. Fat 3g		Incl. 29g Added Sugars
	Cholest. 0mg	0%	Protein 4g
*The % Daily Value (DV) tells you how much a nutrient in a serving of food contributes to a daily diet. 2,000 calories a day is used for general nutrition advice.			
Vit. D 0mcg 0% • Calcium 10mg 0% • Iron 1.5mg 0% • Potas. 70mg 0% Thiamin 4% • Riboflavin 10% • Niacin 10% Folate 40mcg DFE 10% (25mcg folic acid)			

Ingredients: Enriched flour (wheat flour, niacin, reduced iron, vitamin B₁ [thiamin mononitrate], vitamin B₂ [riboflavin], folic acid), sugar, soybean and palm oil (with TBHQ for freshness), corn syrup, dextrose, high fructose corn syrup, bleached wheat flour. Contains 2% or less of molasses, salt, leavening (baking soda, sodium acid pyrophosphate, monocalcium phosphate), cinnamon, wheat starch, gelatin, caramel color, soy lecithin.
CONTAINS WHEAT AND SOY INGREDIENTS.

- Ingredients (specific)
- Ingredients (universal)
- Context and comparison
- Warnings

SBHC Visits by Sponsor and Visit Type



Comprehensive Well Exam

Comprehensive Well Exam

- Annual comprehensive exam for patients aged 0 to <21

33%

- Cohort 1 and Cohort 2
- July 1, 2021 to June 30, 2022.
- 10 Sponsor Organizations
- 116 SBHC locations
- **Data presented are preliminary and subject to change.** Apex is still cleaning and analyzing data from the 11th Sponsor Organization, which is new to this project. Their data will be included in future reports.

Comprehensive Physical Exam:

Diagnostic OR procedure codes in any position: Z00.110, Z00.111, Z00.121, Z00.129, Z00.00, Z00.01, Z01.110, Z01.111, Z00.8, 99381-99385, or 99391-99395.

The denominator is all patients 21 and under.

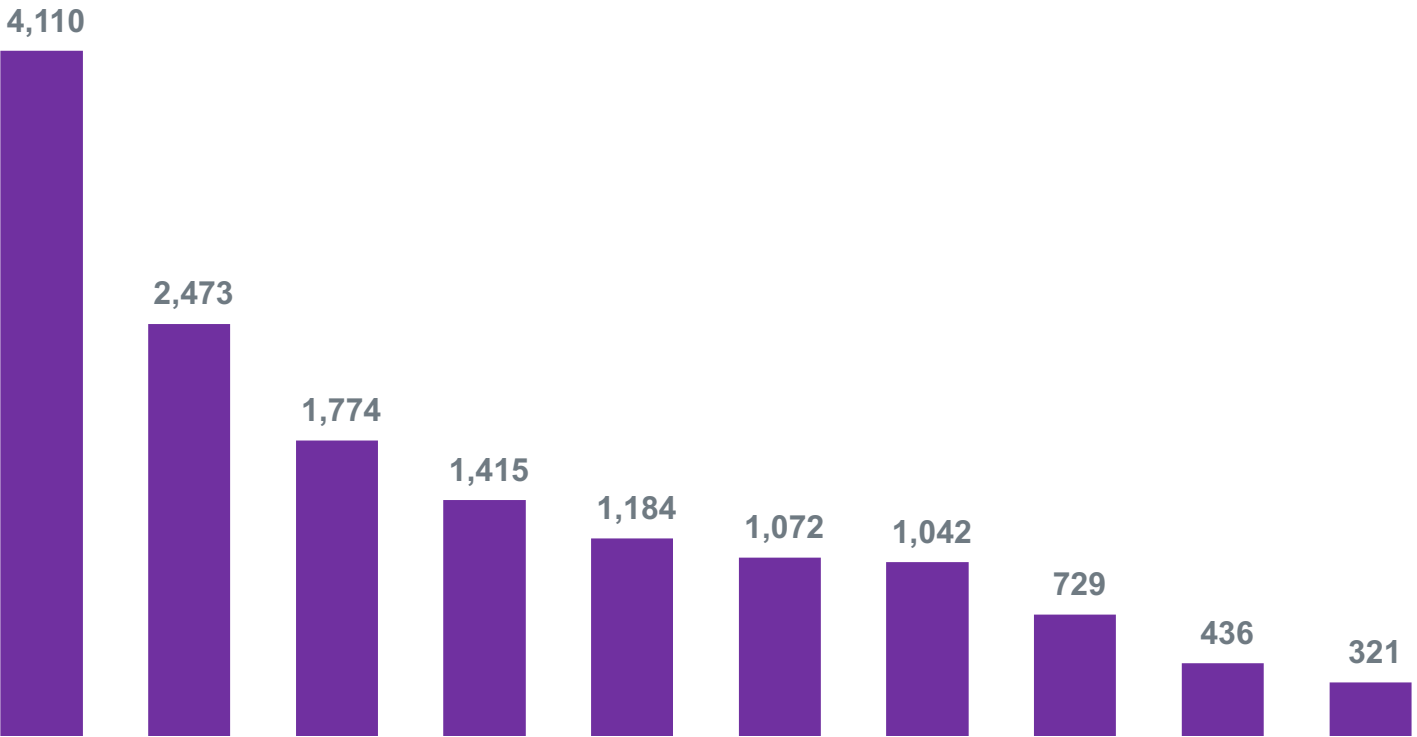
*indicates Sponsor Organization also provided supplemental data to Apex.

Comprehensive Well Exam

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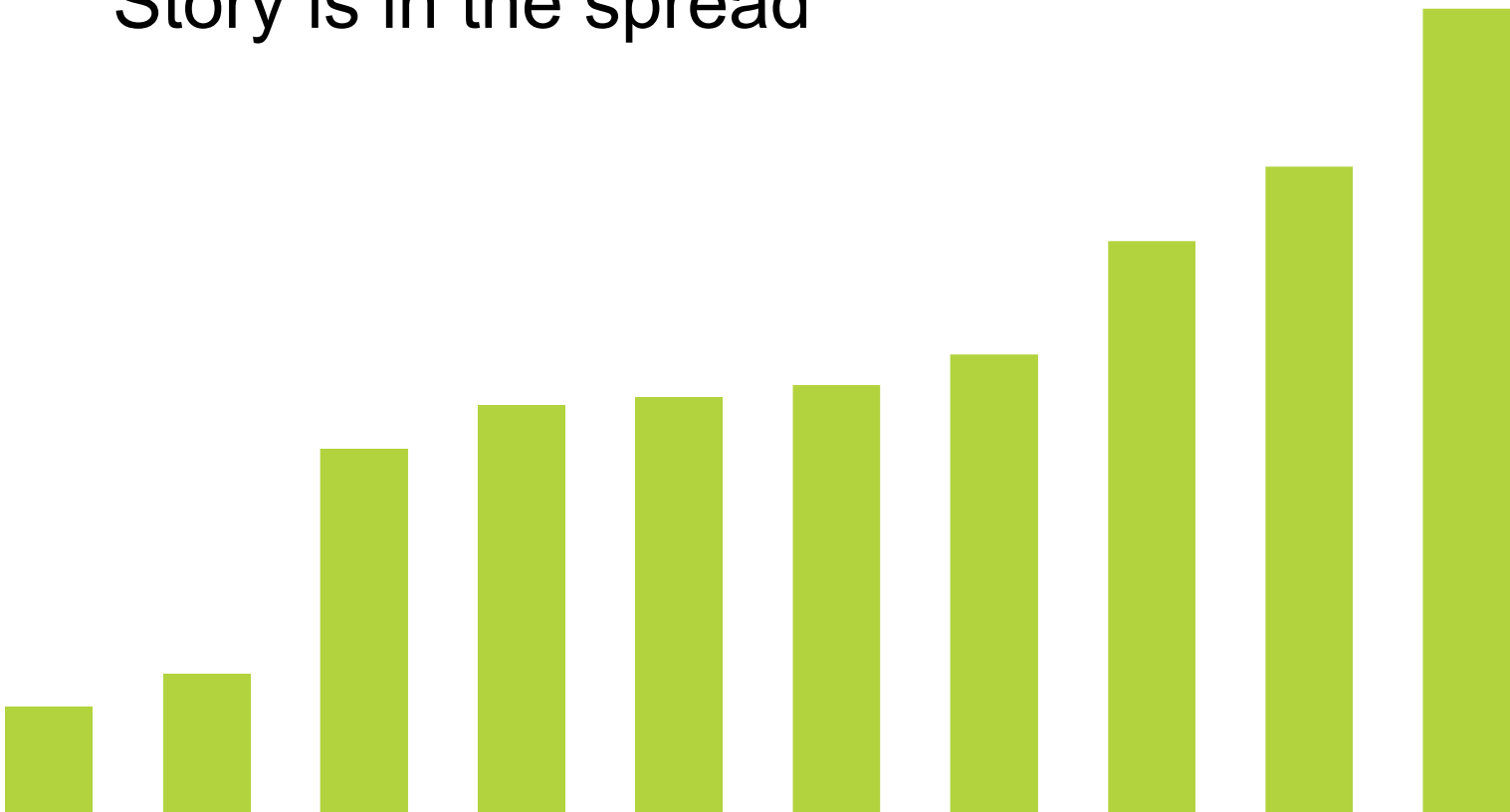
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CWE Performance Measure by Sponsor

Story is in the spread

33%



Comprehensive Physical Exam:

Diagnostic OR procedure codes in any position: Z00.110, Z00.111, Z00.121, Z00.129, Z00.00, Z00.01, Z01.110, Z01.111, Z00.8, 99381-99385, or 99391-99395.

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CWE Performance Measure by Sponsor

Cohorts and data quality

33%



Comprehensive Physical Exam:

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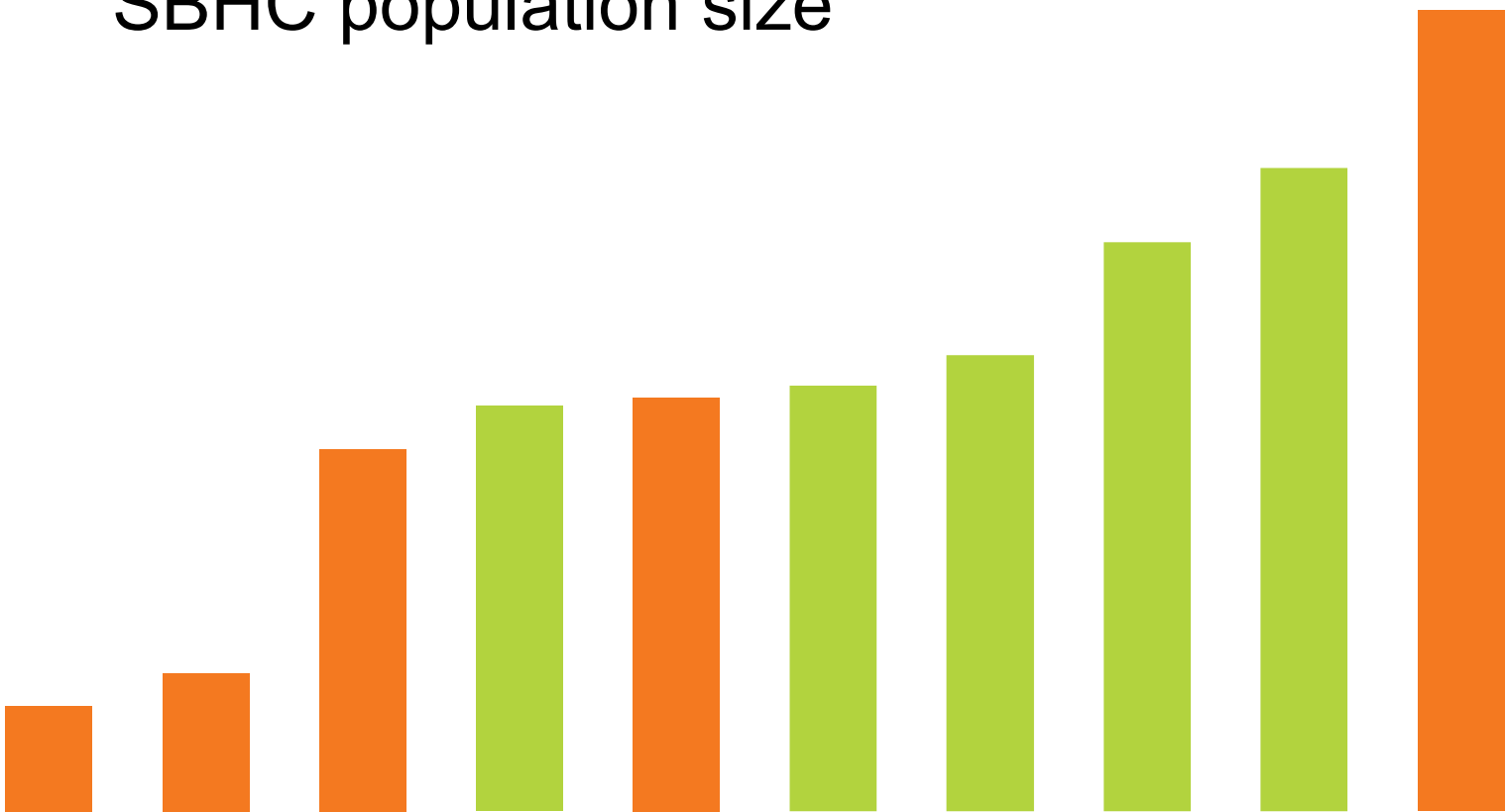
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CWE Performance Measure by Sponsor

SBHC population size

33%



Comprehensive Physical Exam:

Diagnostic OR procedure codes in any position: Z00.110, Z00.111, Z00.121, Z00.129, Z00.00, Z00.01, Z01.110, Z01.111, Z00.8, 99381-99385, or 99391-99395.

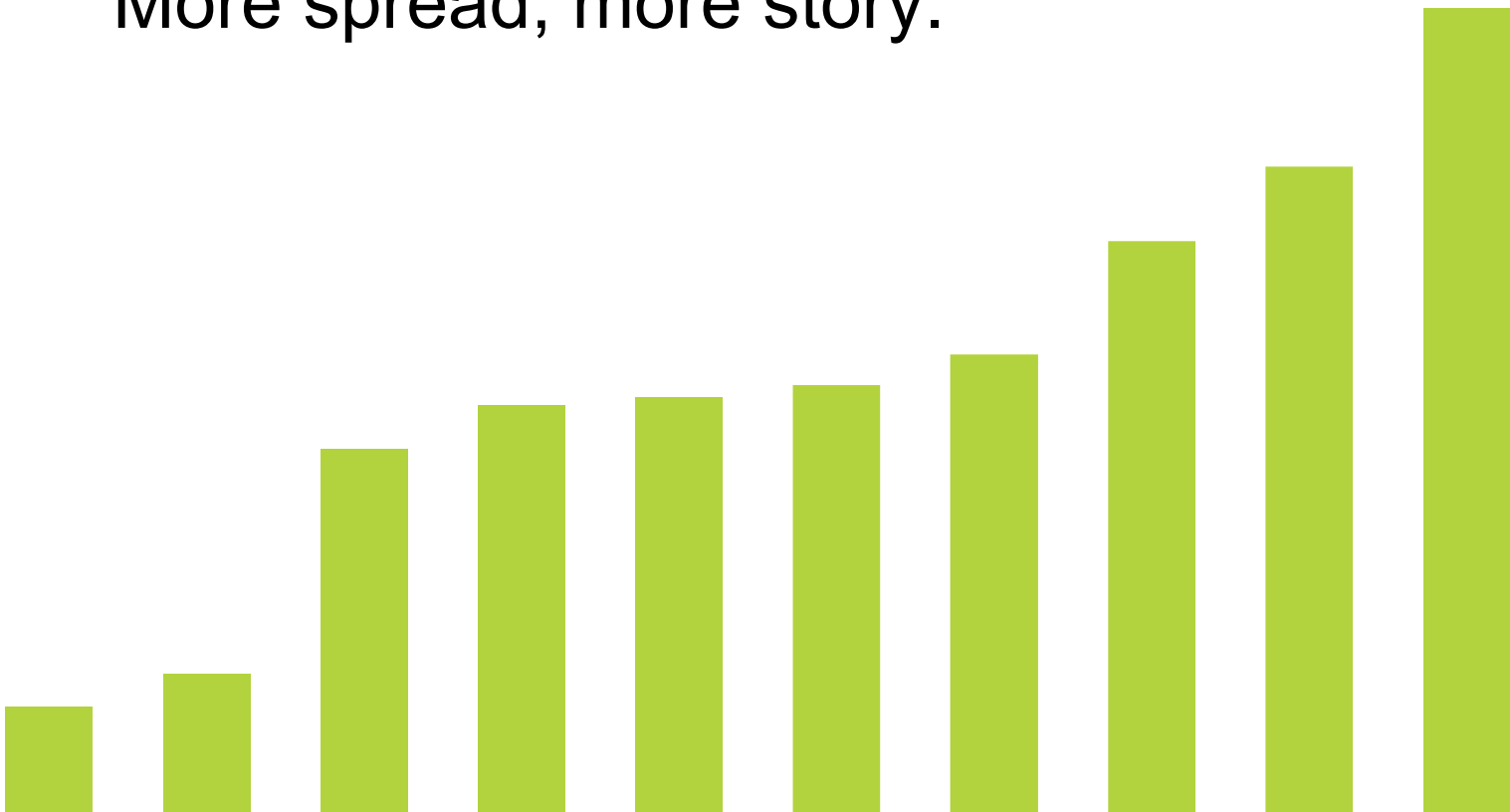
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CWE Performance Measure by Sponsor

More spread, more story.

33%



Comprehensive Physical Exam:

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The denominator is all patients 21 and under.

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Performance Measure Context Review

- State-level metric doesn't tell the story
- Sponsor-Level - story in the spread
- Data quality versus actual performance
- SBHC site level - more spread, more story
- Relationship to total patients served

More Context for CWE Performance Measure

- Code-based data (delivery)
- Survey-based data (documentation)

Comprehensive Physical Exam:

Diagnostic OR procedure codes in any position: Z00.110, Z00.111, Z00.121, Z00.129, Z00.00, Z00.01, Z01.110, Z01.111, Z00.8, 99381-99385, or 99391-99395.

The denominator is all patients 21 and under.

*indicates Sponsor Organization also provided supplemental data to Apex.

More CWE Performance Measure Context

- Influence of other initiatives (Dental clinics, QI efforts)
- Practice variations including referrals, relationship to PC

We create numbers and then numbers create us.

Even More Context for Comprehensive Well Exam

- HEDIS measure



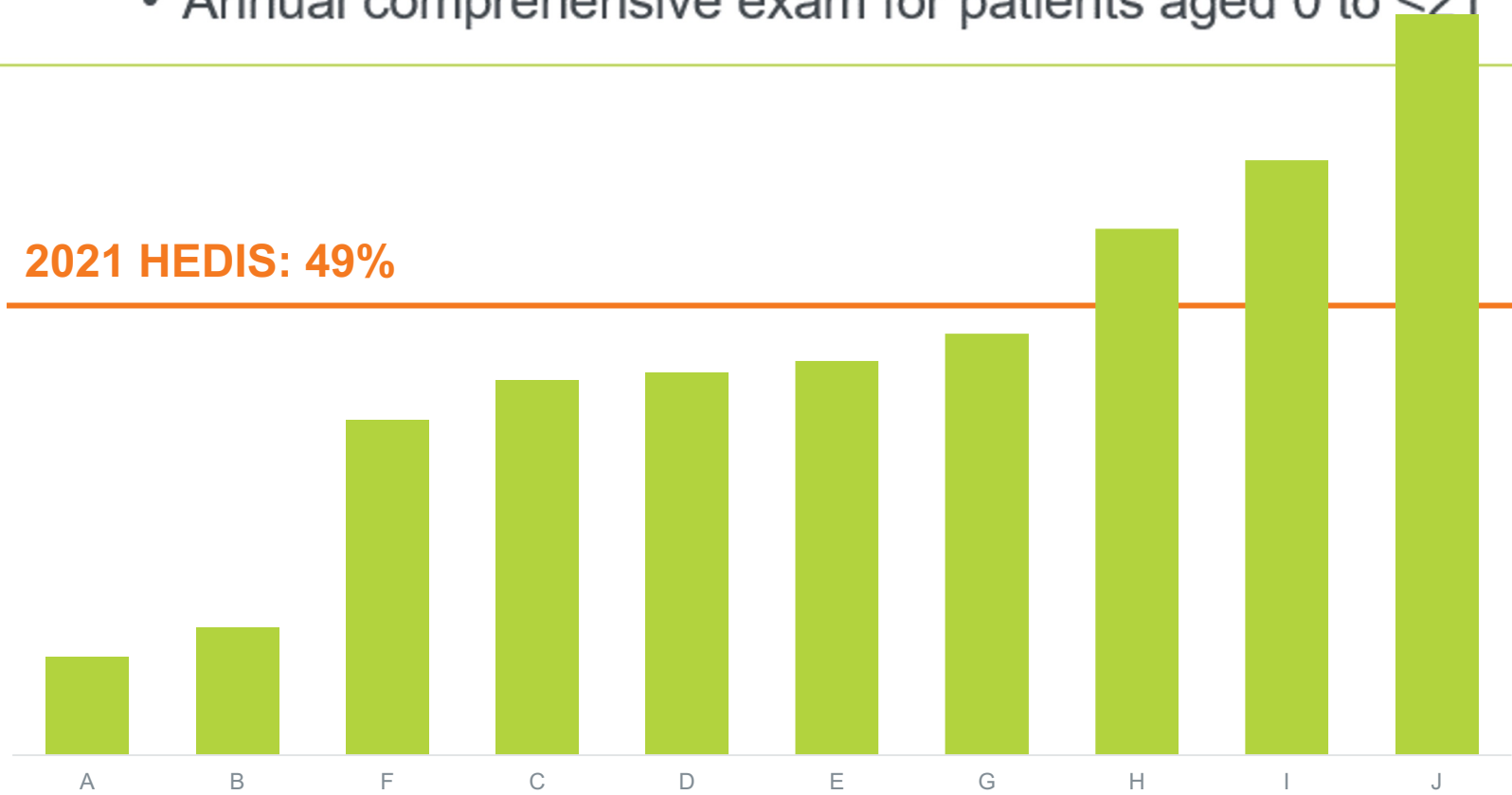
SBHCs make significant contributions to CWE

Comprehensive Well Exam

- Annual comprehensive exam for patients aged 0 to <21

30%

2021 HEDIS: 49%



Comprehensive Physical Exam: Diagnostic OR procedure codes in any position: Z00.110, Z00.111, Z00.121, Z00.129, Z00.00, Z00.01, Z01.110, Z01.111, Z00.8, 99381-99385, or 99391-99395.

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Depression Screening

2021-2022

Depression Screening

- Depression screening for patients aged 11 to <21

47%

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The denominator is patients ages 11 to under 21.

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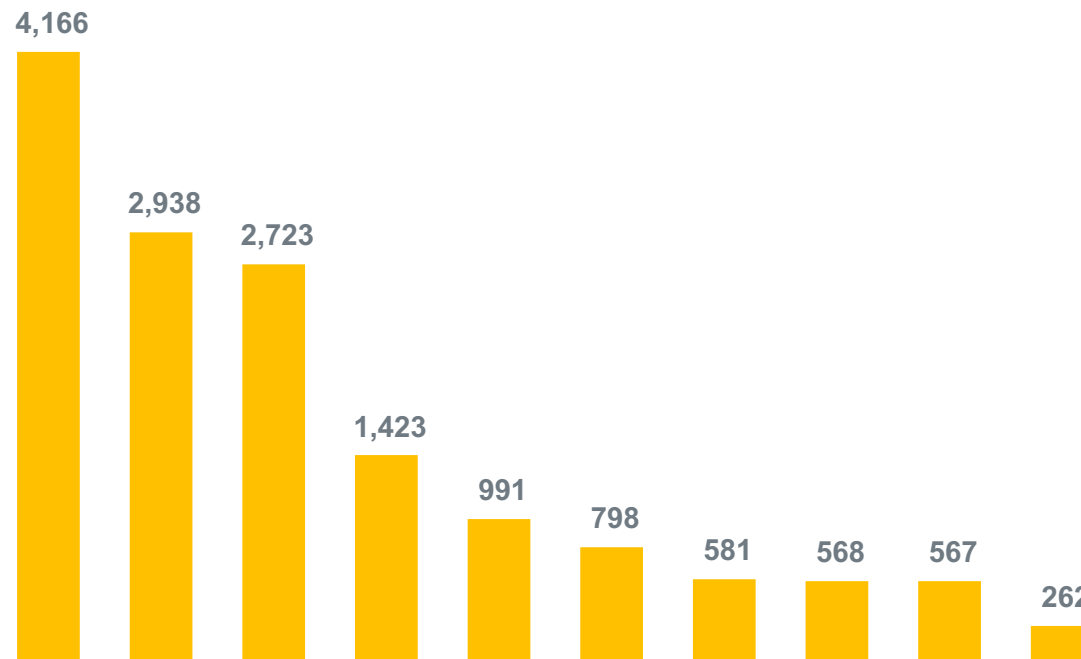
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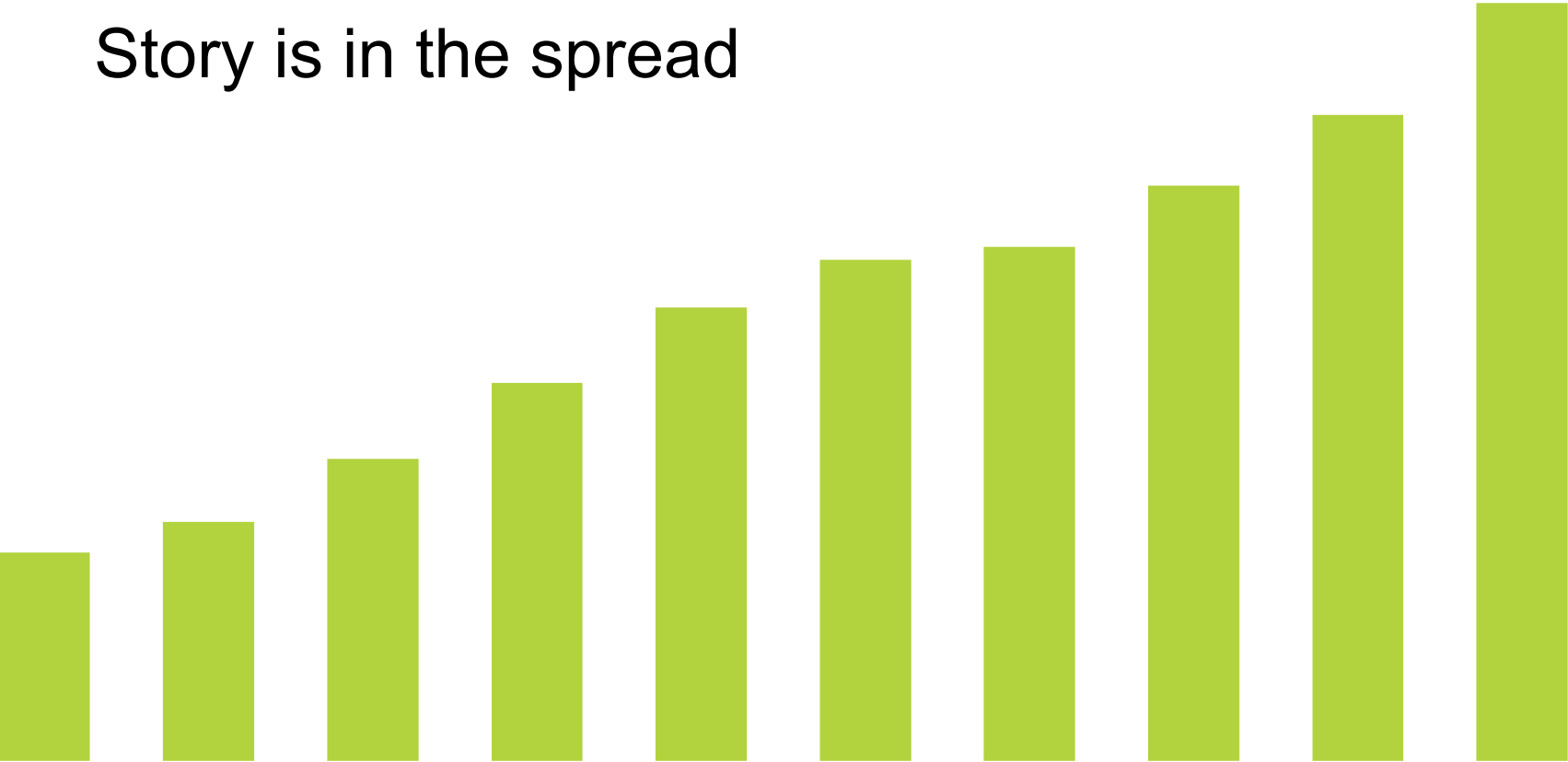
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Depression Screening by Sponsor

47%

Story is in the spread



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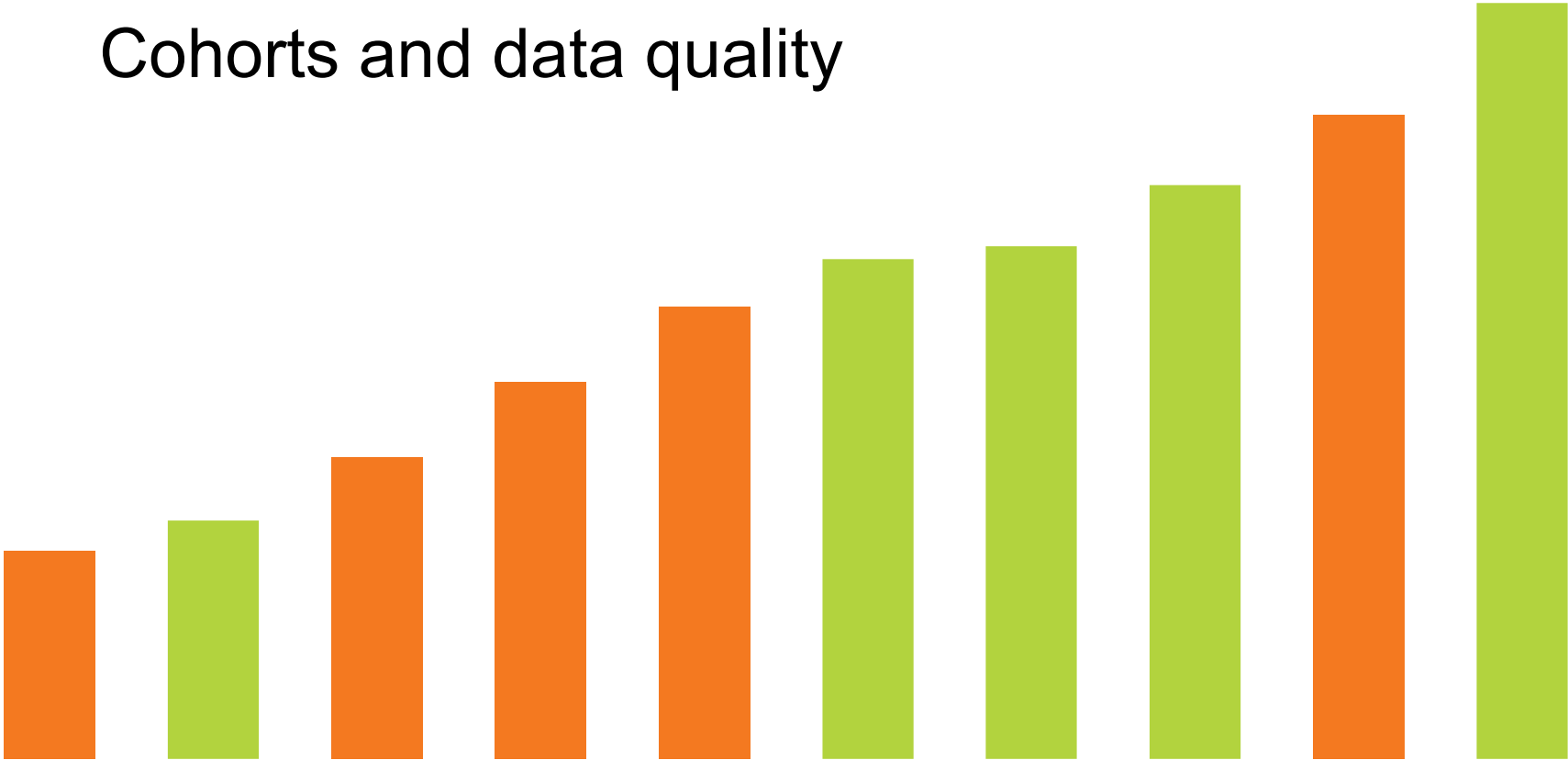
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Depression Screening by Sponsor

47%

Cohorts and data quality



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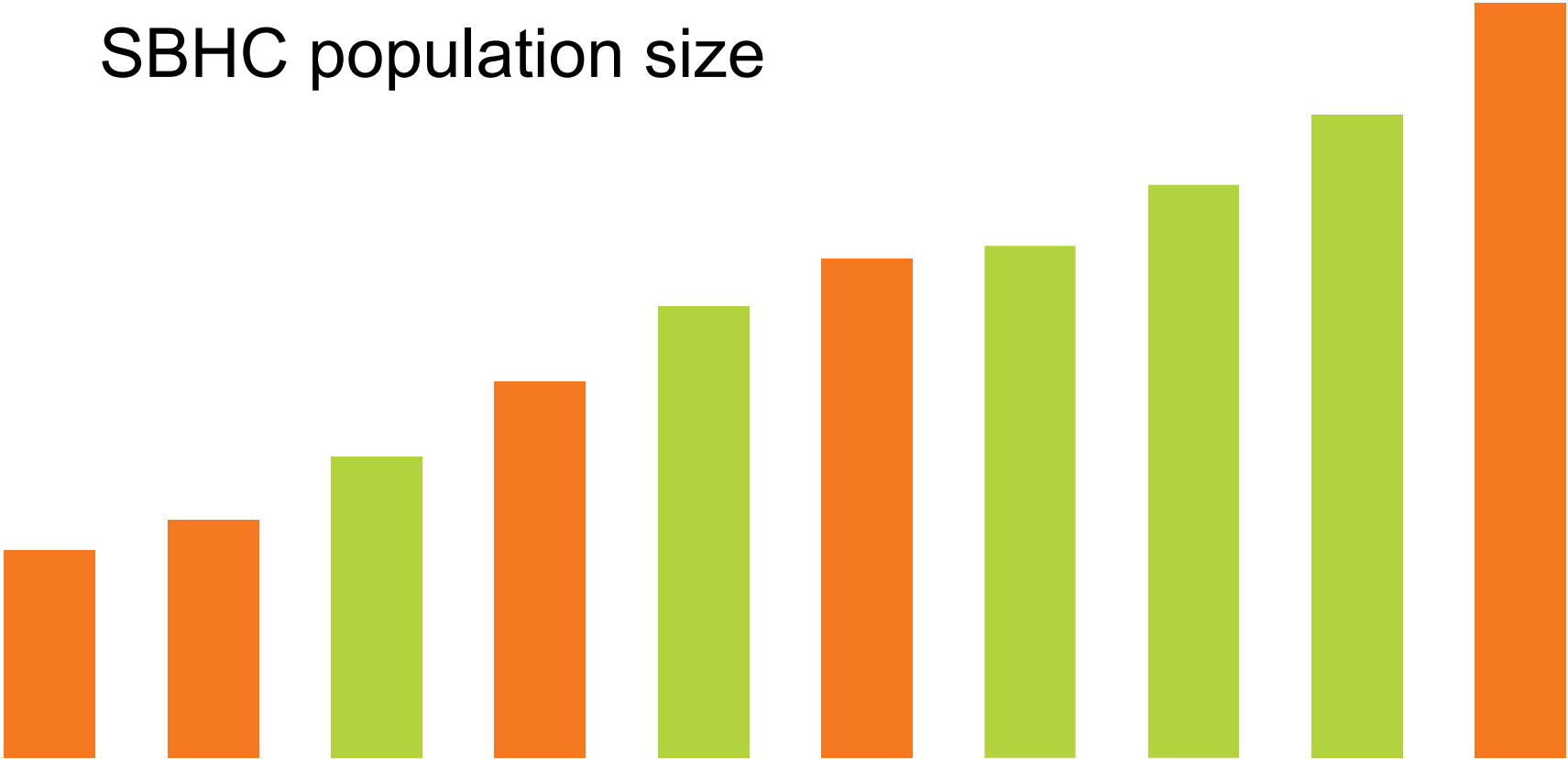
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Depression Screening by Sponsor

47%

SBHC population size



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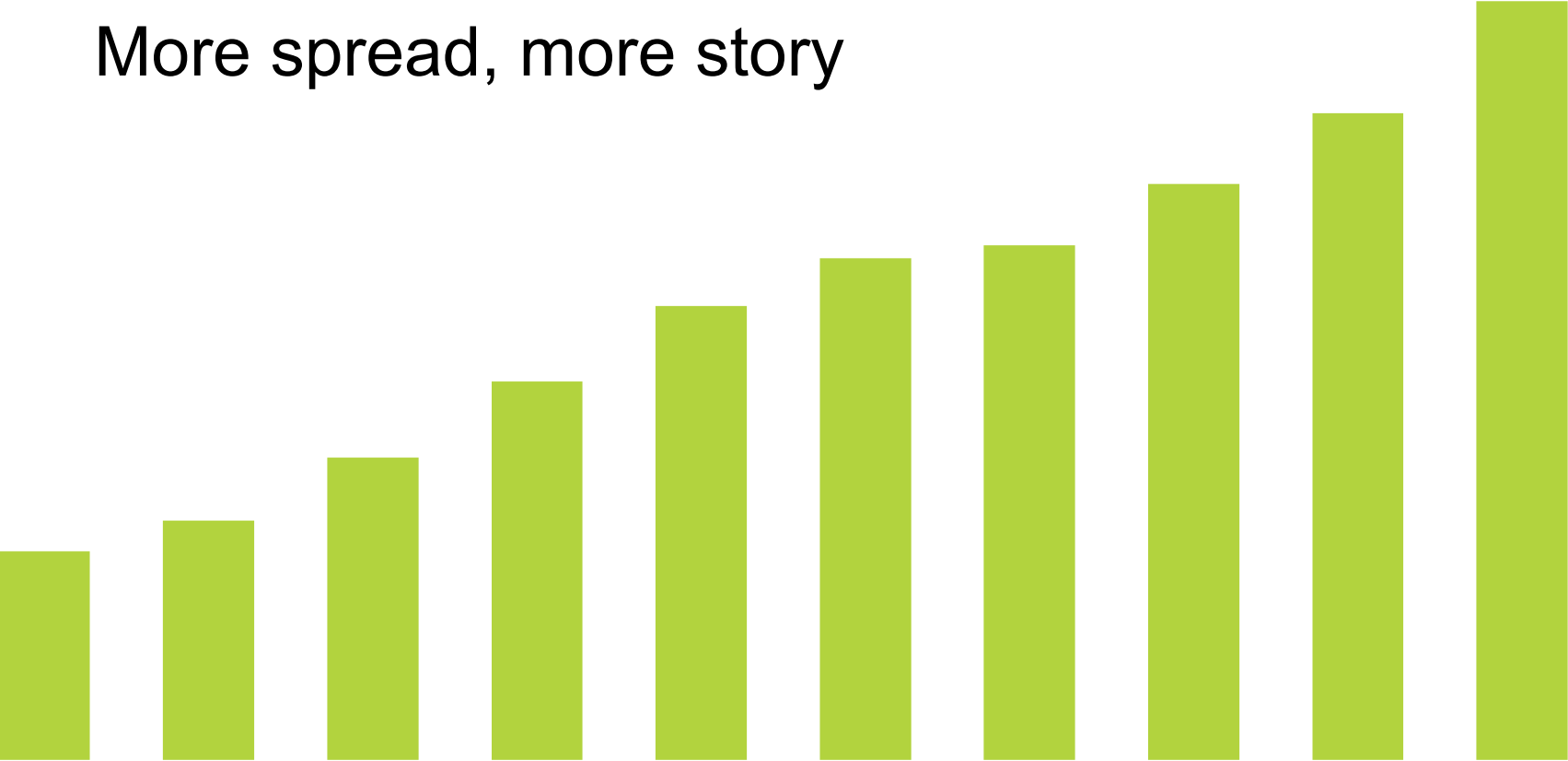
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Depression Screening by Sponsor

47%

More spread, more story



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Depression Performance Measure Context

- Different measure from other performance measures
- Barriers and challenges:
 - Time
 - Tools
 - Capacity
 - Confidential services

More Screening Performance Measure Context

- Diagnostic or procedure code
- Verification/documentation
- Screening data *content*

Depression Screening: Calculated using visit data. Procedure codes 96160, 96127, G0444, G8431, 3725F, 1220F, 3351F, 3352F, 3353F, 3354F, G8510 or diagnostic code Z13.31 in any position.

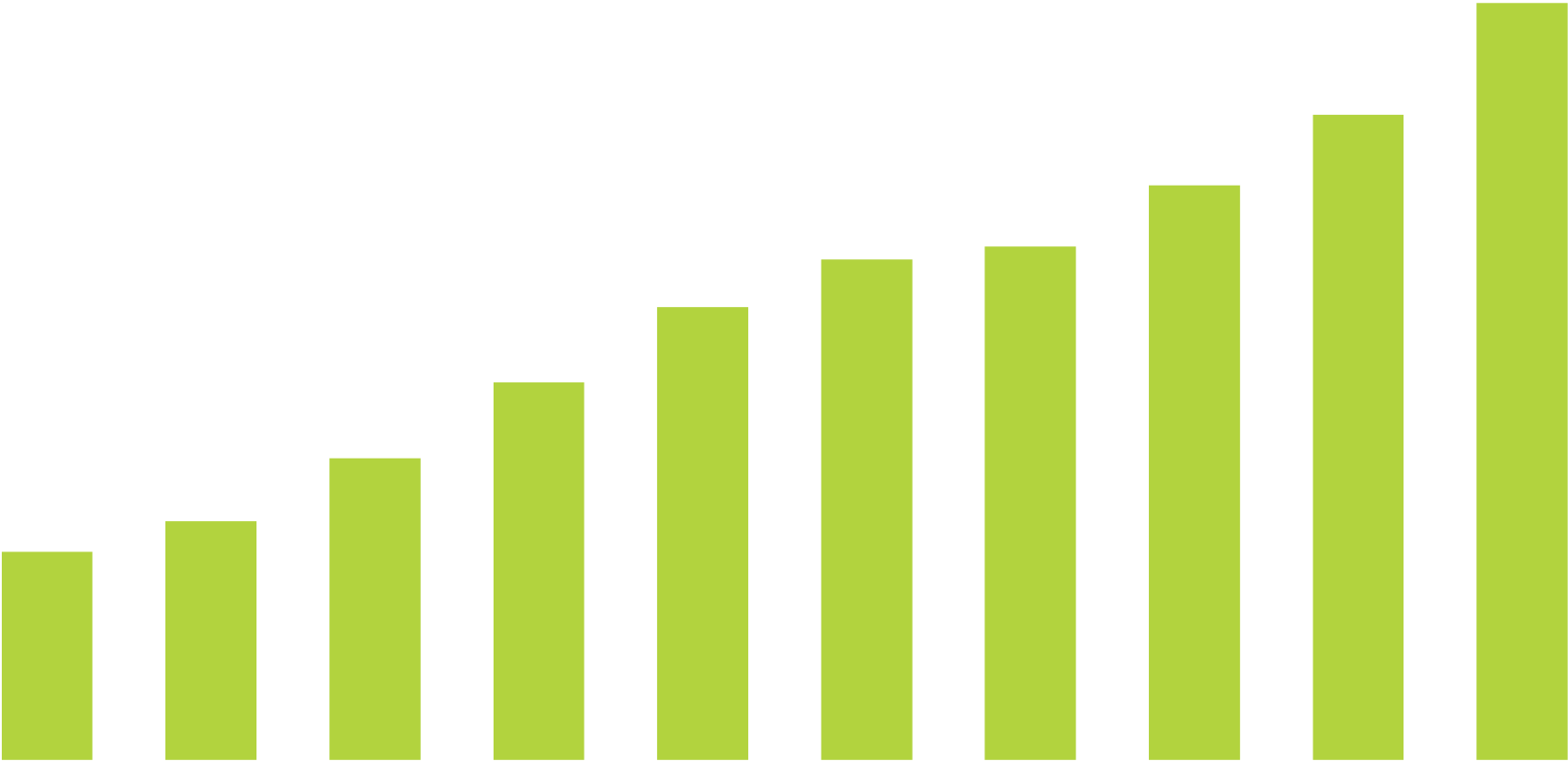
The denominator is patients ages 11 to under 21.

*indicates Sponsor Organization also provided supplemental data to Apex.

- Relationship to care
- Relationship to other SDOH and risk factors

SBHCs are well-positioned to make significant contributions to depression screening

47%



Depression Screening: Calculated using visit data. Procedure codes 96160, 96127, G0444, G8431, 3725F, 1220F, 3351F, 3352F, 3353F, 3354F, G8510 or diagnostic code Z13.31 in any position.

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SBHC Performance Measures

SBHA Quality Initiative (NQI) Measures

- Comprehensive well exams
- BMI screening (and nutrition/physical activity counseling)
- Depression screening
- Chlamydia screening
- Annual risk assessments

New York State DOH Measures

- Comprehensive well exams
- BMI screening (and nutrition/physical activity counseling)
- Behavioral health screening (depression screening)
- Immunizations
- Age-appropriate anticipatory guidance
- Asthma management
- Tobacco use and prevention
- Reproductive health screening
- Oral health assessments

Performance Measures are not created equal

Prioritize and contextualize those performance measures most closely aligned to the principles and promise of the SBHC model:

- Access and equity
- Integrated primary care, mental health, dental
- Prevention and early intervention

Additional Data

Well-Child Check	2021-2022		
	Site #	Site %	State %
Well-Child Check Quantity (WCC) (age 0 to <21)	73	24.3%	38.4%

Diagnostic OR procedure codes in any position: Z00.110, Z00.111, Z00.121, Z00.129, Z00.00, Z00.01, Z01.110, Z01.111, Z00.8, 99381-99385, or 99391-99395. The denominator for this measure is 300.

Depression Screening	2021-2022		
	Site #	Site %	State %
Depression Screening (age 11 to <21)	19	90.5%	60.3%

Depression Screening: Calculated using the Just Health - Massachusetts Adolescent Version and standalone PHQ-9 screening count. The denominator for this measure is 21 and only includes clients that had at least one visit with a medical provider at the SBHC. This performance measure only includes SBHC Clients that received care on or after September 21, the date the first screening record was submitted in the Apex Data App for this site

Weight Assessment & Counseling	2021-2022		
	Site #	Site %	State %
BMI Assessment (age 3 to 17)	135	69.6%	26.7%
Nutritional Counseling (age 3 to 17)	81	41.8%	24.0%
Physical Activity Counseling (age 3 to 17)	66	34.0%	21.5%
BMI Assessment & Counseling (age 3 to 17)	59	30.4%	15.9%

Diagnostic OR procedure codes in any position:

BMI assessment: Any diagnostic code beginning in Z68, E66, or R63.6.

Nutritional counseling: Z71.3, 97802, 97803, or G8780.

Physical activity counseling: Z71.82 or G8780.

BMI & Counseling: This includes those who receive a BMI Assessment, Nutritional Counseling, AND Physical Activity Counseling. The denominator for each of the BMI assessment, nutrition counseling, physical activity counseling, and BMI assessment & counseling measures is 194.

Host School Saturation	2021-2022		
	Site #	Site %	State %
School Saturation	267	15.2%	28.1%

Percentage of enrolled students seen at the SBHC: The denominator for the measure is 1,754.

Just Health – Massachusetts Adolescent Version Additional Information	2021-2022		
	Site #	Site %	State %
Oral Health (age 11 to <21)	14	93.3%	
Depression/Anxiety positive (age 11 to <21)	3	20.0%	
CRAFFT Positive (age 11 to <21)	2	13.3%	

Oral Health: The number of users who answered yes to receiving a dental visit in the past 6 months.

Depression/Anxiety Positive: The number of users who showed depression/anxiety symptoms.

CRAFFT Positive: The number of users with a CRAFFT score ≥2 in the Just Health – Massachusetts Adolescent Version.

The denominator for this additional Just Health – Massachusetts Adolescent Version information is 15.

Clinic

July 2021 to September 2021 Data Snapshot Report¹Clinic Utilization

Total Utilization	2021-2022		
	Site #	Site %	State %
SBHC Clients	301		28,453
Visits	1,008		81,564
Average Visits per SBHC Client	3.3		2.9
Telehealth	Site #	Site %	State %
Telehealth visits (of total visits)	371	36.8%	32.6%

Type of Visit by Primary Diagnosis	2021-2022		
	Site #	Site %	State %
Primary Care Visits	486	48.2%	54.2%
Well-Child Checks (w/o Sports Physicals)	37	7.6%	10.3%
Sports Physicals	105	21.6%	19.5%
Reproductive Health Visits	85	17.4%	13.8%
Acute Care Visits	259	53.3%	56.4%
Behavioral Health Visits	362	35.9%	32.5%
Dental Visits	116	11.5%	9.3%
Missing Visits	44	4.3%	4.0%

Primary Care Visits: Well-Child Checks, Sports Physicals, Reproductive Health Visits, and Acute Care Visits.

Well-Child Checks: Primary diagnostic codes Z00.00, Z00.01, Z00.110, Z00.111, Z00.121, Z00.129, or Z00.8.

Sports Physicals: Primary diagnostic codes Z02.89 or Z02.5.

Reproductive Health Visits: Primary diagnostic codes beginning in O, A5, N4, N8, Z3, A60-A64, B07, E28-E29, N34, N50-N53, N70-N77, N90-N98, Q96-Q98, R36-R37, R86-R87, A748, Z01.4, Z03.7, Z04.4, Z11.3, A74.9, B20, B37.3, B97.7, or Z20.2.

Acute Care Visits: Visits that do not fit into any other category.

Behavioral Health Visits: Primary diagnostic codes that start with F, R45, T74, T76, Z60, Z62-Z63, R46.2-R46.4, R46.6-R46.8, Z13.4, Z55.0-Z55.9, Z71.1, Z71.4-Z71.9, Z56.6, Z65.8, Z65.9, or Z72.

Dental Visits: Visits with procedure codes beginning in D.

Missing: Visits missing a primary diagnosis.

Type of Visit by Provider	2021-2022		
	Site #	Site %	State %
Medical Visits (MD, NP, PA, DO)	541	53.6%	56.2%
Behavioral Health Visits (BHPs)	334	33.1%	29.8%
Dental Visits (Dentist, Dental Hygienist)	85	8.4%	5.1%
Case Management	6	0.6%	3.0%
Other (e.g., Care Coordinator, Health Educator, Community Health Worker, Nutritionist)	40	4.0%	4.3%
Missing	2	0.2%	1.6%

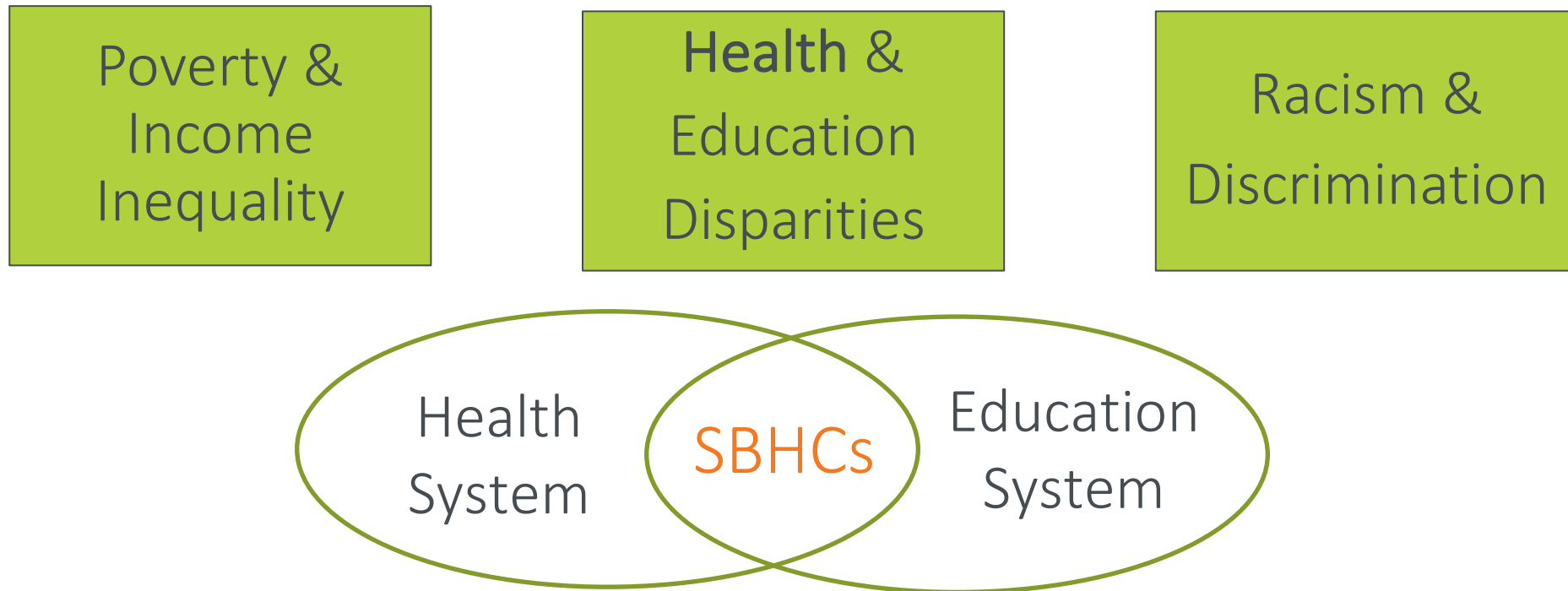
Data Snapshots

- Data quality conversations
- Quality improvement initiatives
- Performance measures dives

Data Hub ecosystem is built for equity

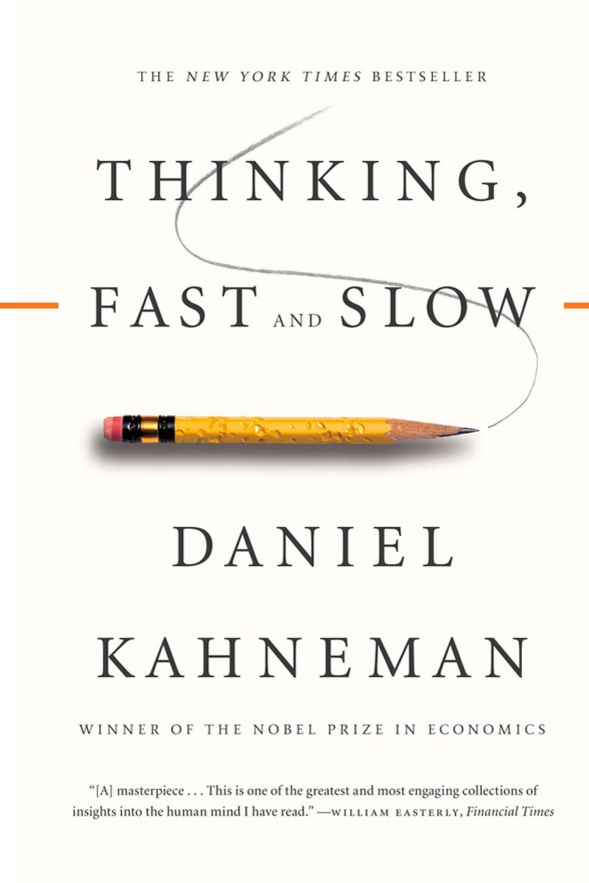
SBHCs and equity

Trifecta of Equity Wicked Problems



Black Box

- Assumptions
- Biases
- Lacking context
- Lacking scrutiny
- Lacking perspective



Transparency

- Challenge assumptions
- Expose biases
- Reveal context
- Scrutinize numbers
- Elevate perspective

Performance Measure Conclusion

- Beware of black box performance measures (fast thinking)
- Rely on data and data systems that:
 - Offer transparency of source
 - Promote slower thinking in use

Performance Measure Conclusion

- Beware of black box performance measures (fast thinking)

- Ask to see the data food label (source)

Nutrition Facts		Amount/serving	% DV*	Amount/serving	% DV*
1 serving per container		Total Fat 13g	17%	Sodium 340mg	15%
Serv. size 2 Pastries (96g)		Sat. Fat 4.5g	23%	Total Carb. 68g	25%
Calories per serving 400		Trans Fat 0g		Dietary Fiber 1g	5%
		Polyunsat. Fat 5g		Total Sugars 30g	
		Monounsat. Fat 3g		Incl. 29g Added Sugars	58%
		Cholest. 0mg	0%	Protein 4g	
*The % Daily Value (DV) tells you how much a nutrient in a serving of food contributes to a daily diet. 2,000 calories a day is used for general nutrition advice.		Vit. D 0mcg 0%	Calcium 10mg 0%	Iron 1.5mg 8%	Potas. 70mg 0%
		Thiamin 4%	Riboflavin 10%	Niacin 10%	
		Folate 40mcg DFE 10%	(25mcg folic acid)		

- Consume with context for healthier results (use)



FOOD ALLERGY WARNING

Please be advised that our food may have come in contact or contain peanuts, tree nuts, soy, milk, eggs, wheat, shellfish or fish.



Please ask a staff member about the ingredients used in your meal before ordering. Thank you — Management.



FAST THINKING WARNING

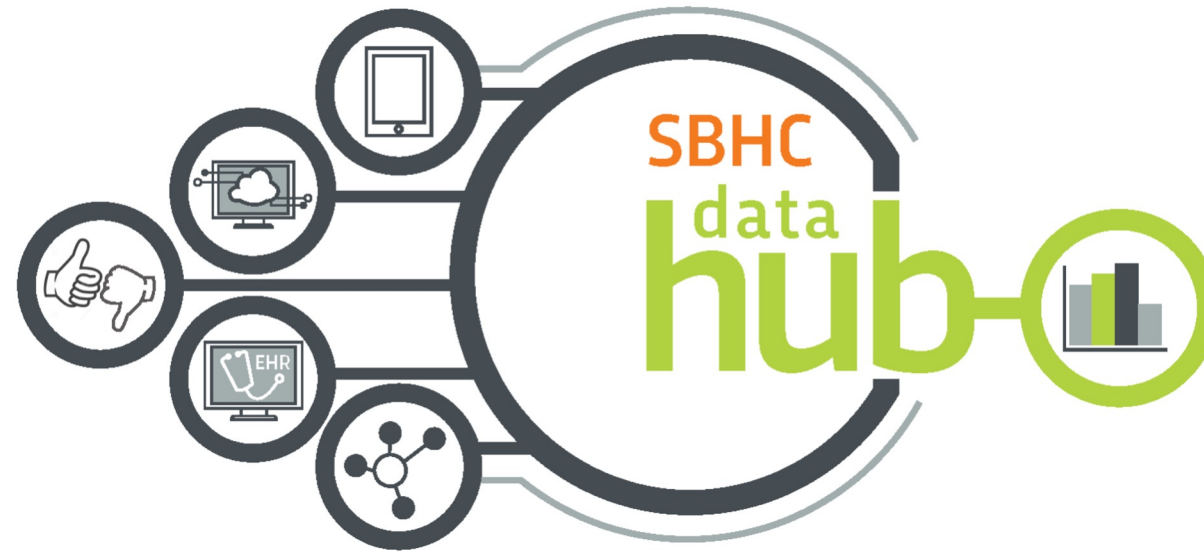
Performance measures contain fast thinking which is known to be associated with harmful assumptions and dangerous biases.

Data without context is meaningless.

Consume with caution and in moderation and as part of a balanced diet of data and ask lots of questions.

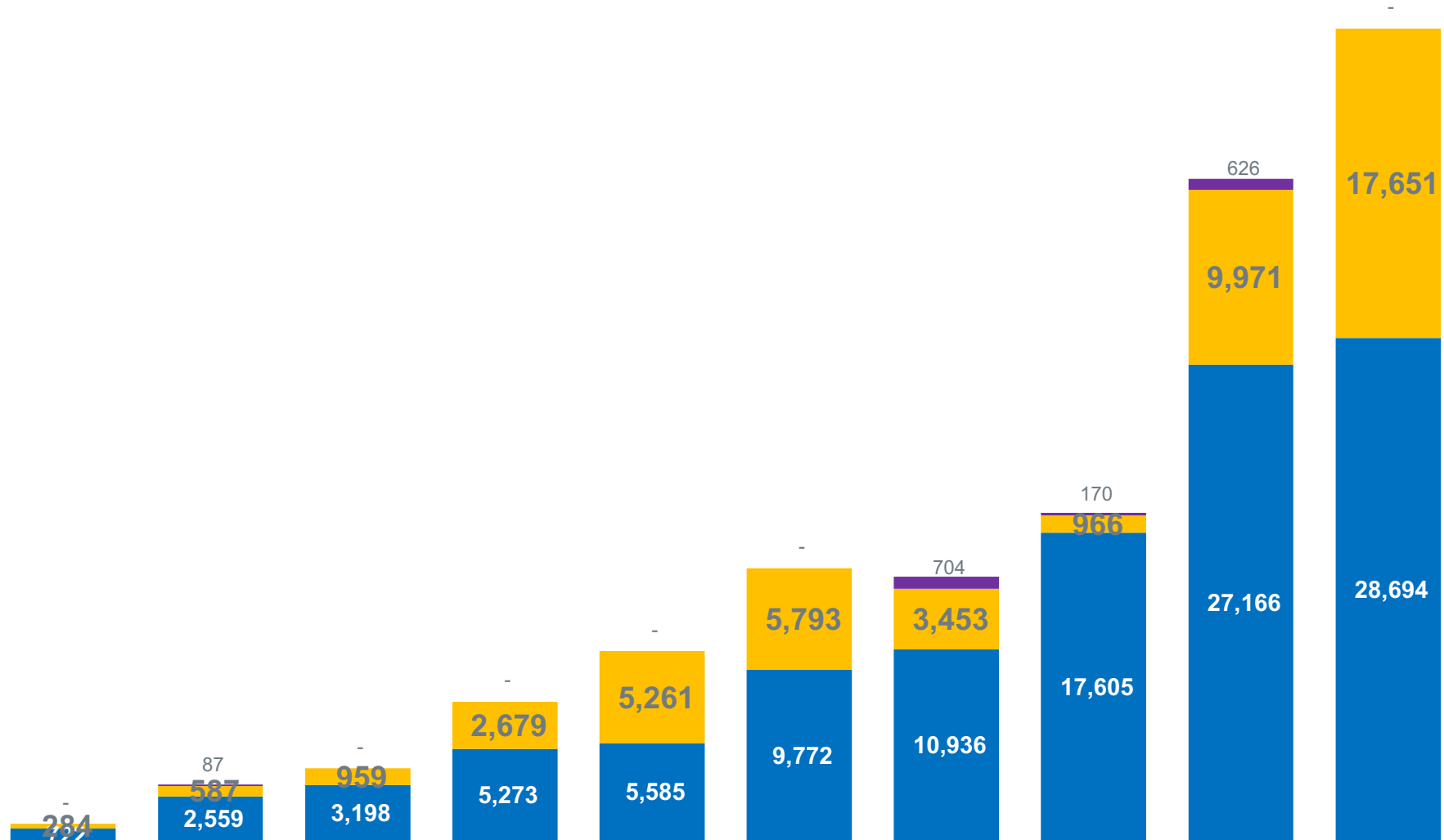
SBHC Performance Measure Conclusion

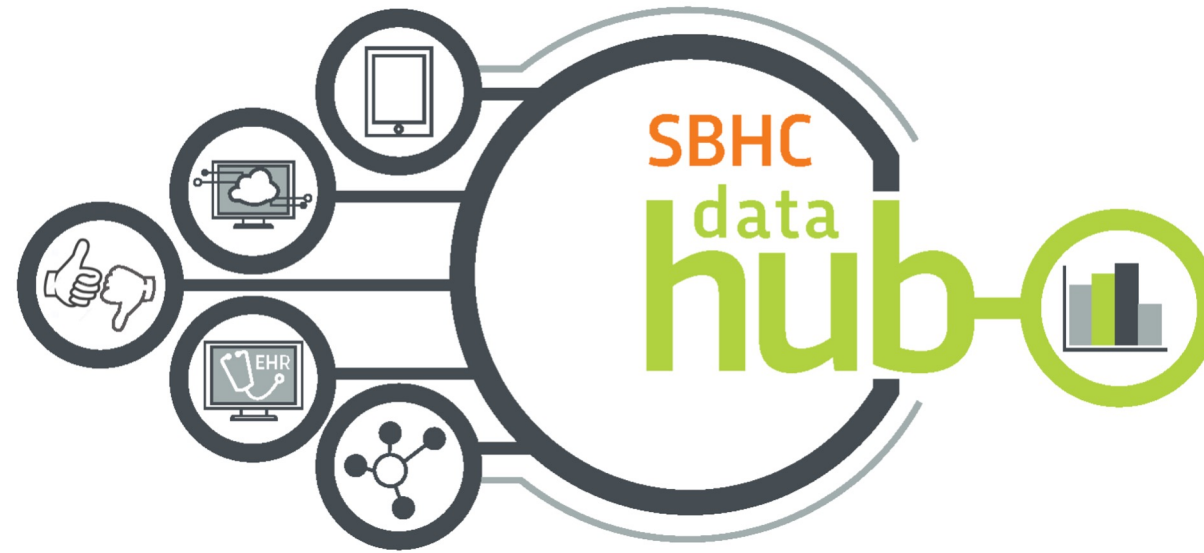
- Access and equity
- Integrated primary care, mental health, oral health
- Education, prevention and early intervention



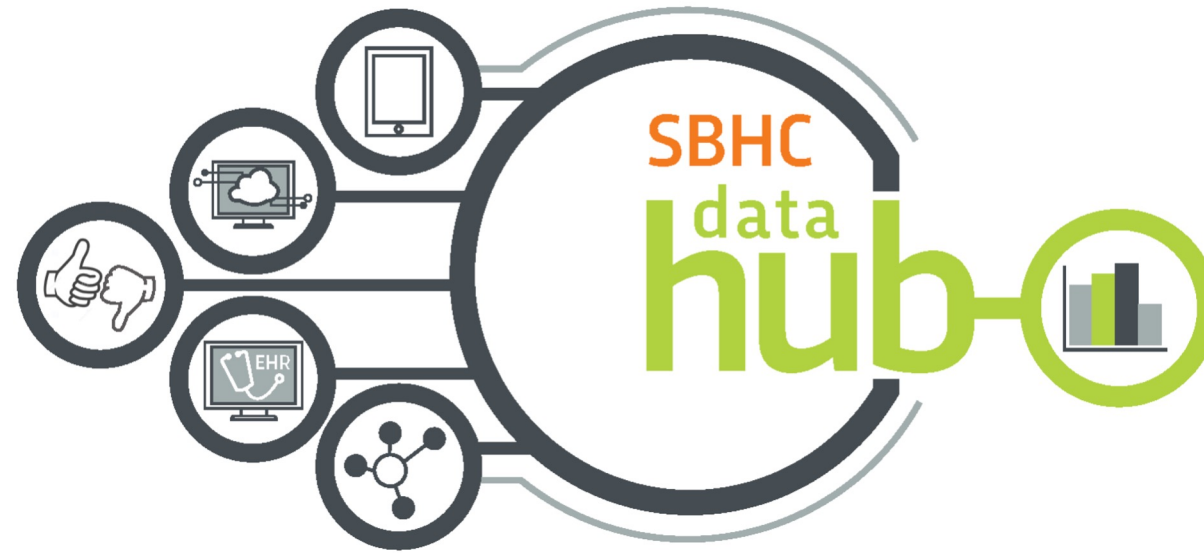
Celebrate data flowing

Celebrate access to care





Join the learning journey!



Questions & Discussion