



# THE PERISCOPE PROJECT

PERINATAL SPECIALTY CONSULT PSYCHIATRY EXTENSION

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## Operations Report

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April 2018

A summary of The Periscope Project utilization data from program launch July 2017 through March 2018 highlighting key accomplishments.

## Operational Summary

The Periscope Project (TPP) is pleased to share our first nine months of operational data from July 2017 through March 2018. Provider enrollment exceeded year 1 goal within the first six months of operations and the number of teleconsultations continues to increase monthly. Approximately 37% of our encounters are from providers who have not pre-enrolled; this demonstrates the need for ease of use. Physicians are the most common type of provider using the teleconsultation service followed by midwives and nurse practitioners. These providers represent a broad cross section of health systems. Response time is averaging 9 minutes from the time the providers call TPP, to the return call from the perinatal psychiatrist, well within the response time goal of 30 minutes. This allows providers to develop treatment plan recommendations while the patient is still in their office. Approximately 82% of TPP service requests result in provider-to-provider consultation, however, utilization of educational opportunities and information on community resources are also increasing over time.

## Core Service Overview

### Tele-Consultation

**180** provider-to-provider tele-consultations.

### Provider Education

**48** total educational presentations.  
**37 online modules** viewed.  
**11 in person didactic** presentations to **455 providers**.

### Community Resource Information

**52** providers received information on additional resources to support the mental health and wellbeing of their patient.

## Provider Satisfaction

Based on a three question post-encounter survey with a **70% response rate**:

**100%** of providers agreed or strongly agreed they were satisfied with the service they received from TPP.

**100%** of providers indicate their most recent encounter with TPP helped them to more effectively manage their patient's care.

**100%** of providers indicate they will incorporate the information they learned in the future care of patients.

## Testimonials

*Dr. Wichman was very helpful. She answered my questions about medications for a patient I was going to see later in the day, which **gave me a lot more confidence in managing the patient's care.***

***Very helpful discussion. I have already used the information given to continue discussions with the patient, her family, and prescriber.***

*I was so impressed by prompt communication and care management options. What an **incredibly helpful service to meet significant patient care needs!***

# Enrollment

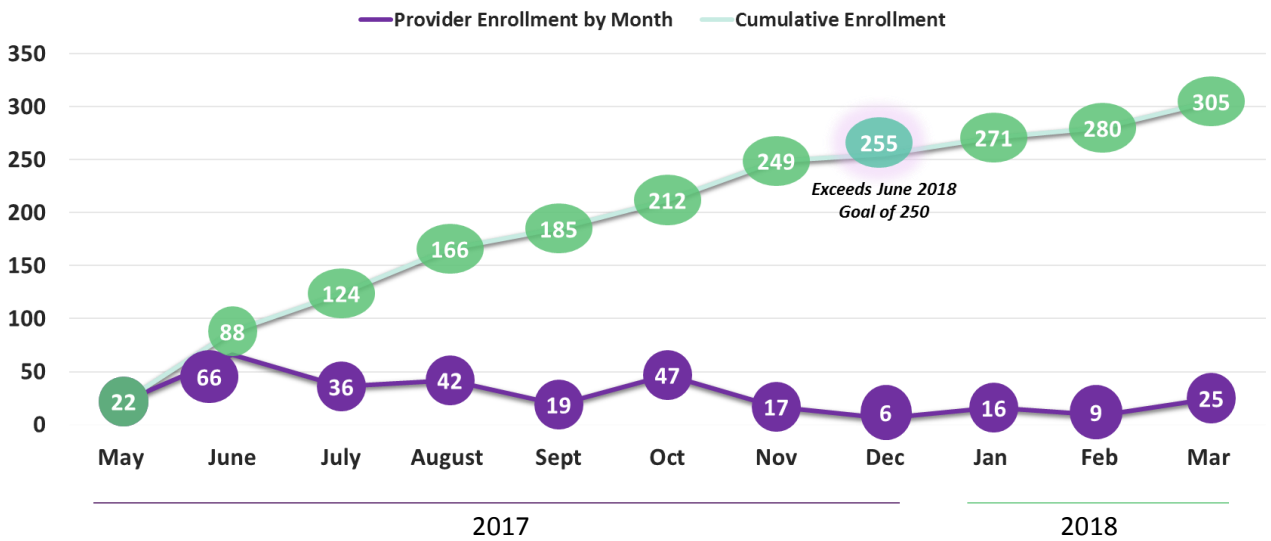
Enrollment efforts began in May 2017. TPP initially targeted providers and clinics with whom we had existing relationships. This resulted in high enrolled providers per month pre-launch and through the first few months of utilization. These providers support the service but may not have as frequent need to utilize the service as other providers. We tend to see spikes in enrollment when a perinatal psychiatrist speaks directly to providers. We believe this process builds trust and allows future utilizers to vet the expert knowledge of the psychiatrist.

## Enrollment Goals

**July 2018:** 250 enrolled providers

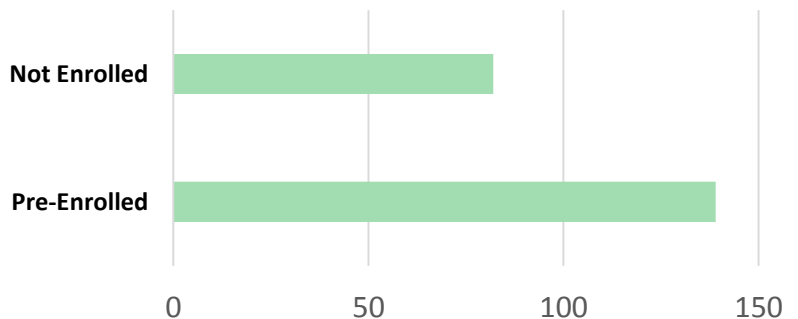
**December 2019:** 350 enrolled providers

### 2017-2018 Monthly Enrollment



Providers are not required to enroll before using the service for the first time. About 37% of utilizers are not pre-enrolled at the time of contact with TPP.

### Provider Status at the Time of Encounter

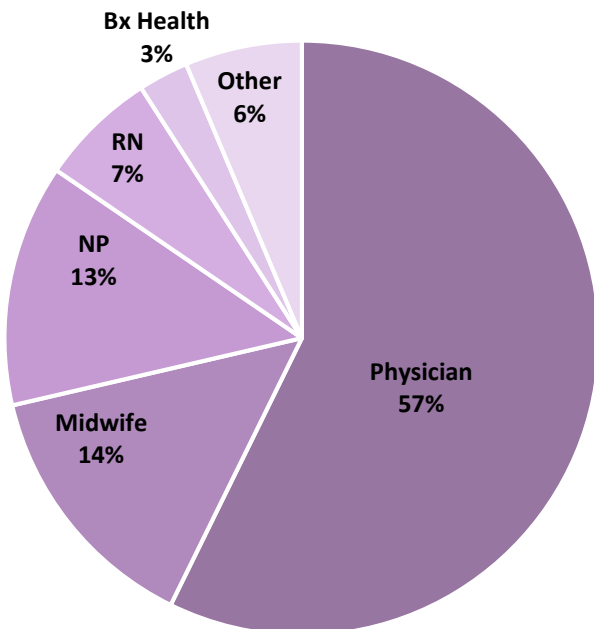


## Utilizing Provider Demographics

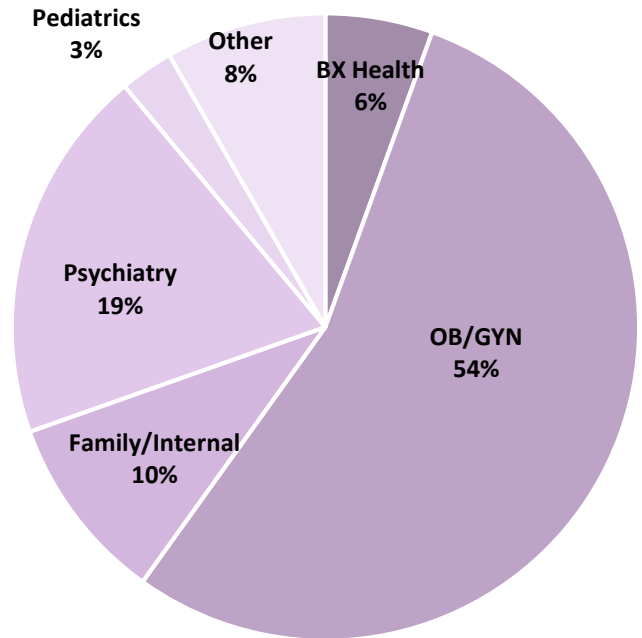
Initial provider outreach and engagement activities targeted the greater Milwaukee area. The snapshot below reflects these efforts. TPP utilizing providers reflect the intended target demographic of providers who care for perinatal women in an OB/GYN setting.

Top 5 Utilizing Provider Type & Area of Practice	
<b>Physician: OB/GYN</b>	<b>30%</b>
Physician: Psychiatry	16%
<b>Midwife: OB/GYN</b>	<b>14%</b>
Physician: Family Medicine	6%
<b>Nurse Practitioner: OB/GYN</b>	<b>5%</b>
Nurse Practitioner: Psychiatry	5%

Providers by Provider Type  
N=221



Providers by Area of Practice  
N=217



# Encounters

An encounter is any inquiry to TPP provider line via phone or email. From July 2017 through March 2018, TPP had 247 total encounters. 180 (82%) of those encounters resulted in a provider-to-provider tele-consultation. The remaining 67 encounters included requests for community resource information without consultation, administrative inquiries, or requests for TPP educational presentations. Reasons for contact are not mutually exclusive. Providers may discuss multiple topics.

## Current TPP Turn Around Time



Triage

Less than 5 mins.

Ave. 9 mins. for call back

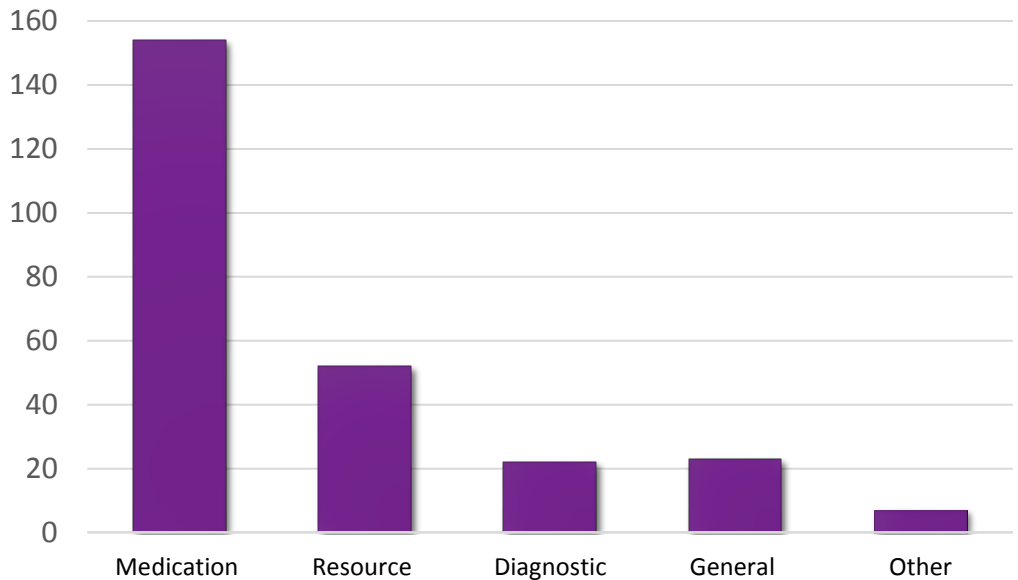


Provider to provider consult averages 10 mins.



Patient typically remains in the care of provider.

## Topics Discussed



## Patient Status at the Time of TPP Encounter



**59% Pregnant**

1st Trimester - 25%  
2nd Trimester - 20%  
3rd Trimester - 13%



**24% Postpartum**

204 providers called TPP regarding a specific patient. Nearly 60% of patient specific TPP encounters occur while the patient is pregnant and presents an opportunity to engage early in pregnancy and positively impact birth outcomes. Evidence for effects of maternal stress, depression, and anxiety in pregnancy on adverse neurodevelopmental outcomes for the child is substantial. TPP data suggests it is engaging with providers during a “window of opportunity” to impact the effective care management.

## Market Penetration

The three major health systems in the greater Milwaukee area include; Aurora, Ascension, and Froedtert and the Medical College of Wisconsin. Outreach and 16<sup>th</sup> Street Clinic are federally qualified health centers serving Milwaukee’s under-served and at-risk populations.

Providers by Health System N=244	
Froedtert/MCW	45%
Aurora	12%
16 <sup>th</sup> Street Clinic	7%
Outreach Community Health	5%
Ascension	7%
Children’s	5%
Other	20%

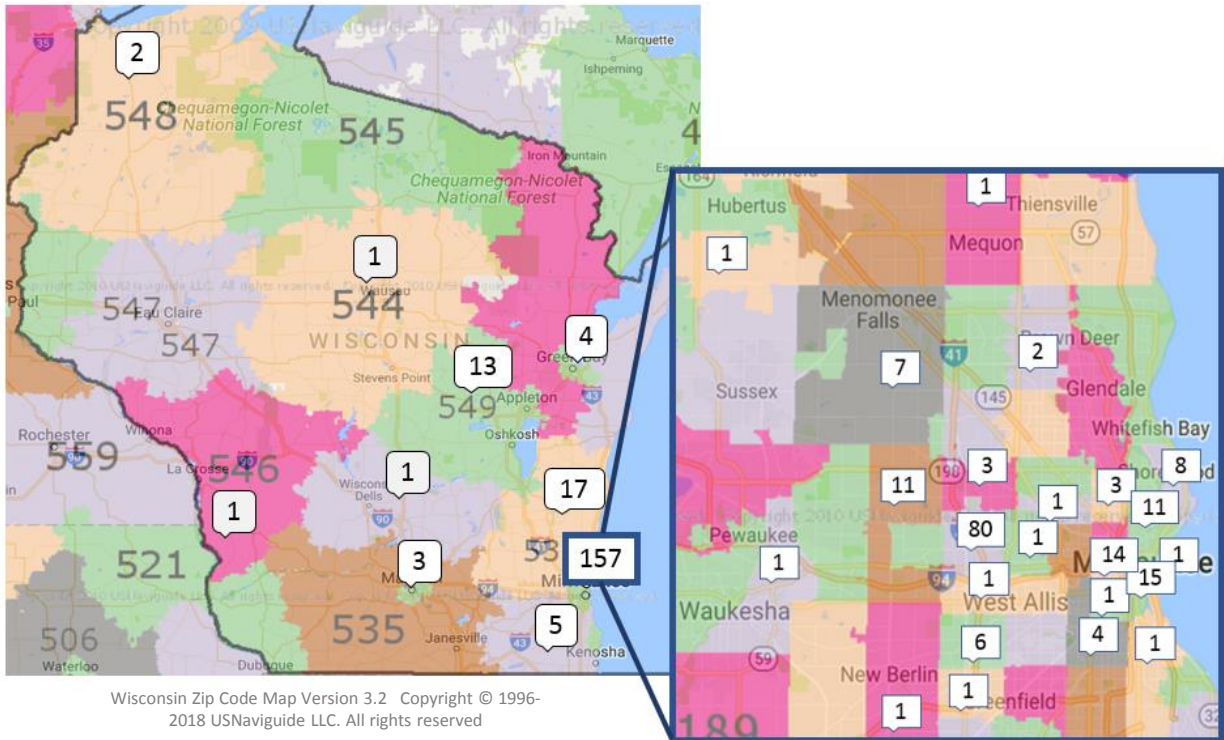
The ‘other’ category includes health systems outside of Wisconsin, those health systems not listed in our database, government agencies, and/or private practice.

Notable, repeat health systems from the ‘other’ category include:

- Essentia Health – 1% of total
- Mayo – 2% of total
- Private Practice Providers – 3% of total

### Statewide TPP Service Reach

TPP services are available statewide. Due to it’s dramatic and persistent health disparities by socioeconomic status the Milwaukee area was the primary target for TPP at program launch. The highest utilization of TPP services to date is concentrated in the Milwaukee area. Statewide outreach and expansion is underway.



## Visibility

Outreach and visibility are critical activities to keep TPP in front of providers and expanding across the state. Our website continues to be a tool for program awareness. Providers can use the website to learn more about the program, become an enrolled provider, view modules, and download the provider toolkit. Once a quarter, TPP sends out a newsletter to enrolled providers and community partners. In person presentations continue to be the best method to build relationships with individual providers, clinics, and community groups.

Unique Visits to Website by Quarter			TPP Newsletter Activity		
Q2 2017	Q3 2017	Q4 2017	Date Sent	<u>11/17/2017</u>	<u>2/20/2018</u>
311	797	2166	Unique Opens	122	155
<a href="http://www.the-periscope-project.org">www.the-periscope-project.org</a>			Percent Opened	40.3%	45.2%



46 introductory presentations completed



Reaching **1100** total attendees

## Evaluation Summary

TPP is a new resource designed to support providers in real time with access to subspecialty expertise. The team of evaluators from University of Wisconsin-Milwaukee, led by Dr. Jennifer Doering, began research on TPP. The primary analysis looks at enrolled and utilizing providers. The secondary analysis looks at Medicaid claims data to see if TPP has an impact on health care costs.

The first six months of data was analyzed using two surveys sent to providers. One survey was sent to the provider at the time they enrolled and the second survey was sent in early January 2018, roughly six months after TPP launched. Only those providers who called for a TPP service and enrolled in TPP were used in analysis.

The initial analysis of Medicaid claims data was conducted on claims over a six month period, prior to TPP's launch. This data will serve as baseline for cost and utilization. A second analysis will be conducted during year 2, and examine Medicaid claims data of patients whose provider enrolled in TPP to detect program impact through the claims data.

In an effort to understand what care options providers considered, providers are being asked what they would have done had they not connected to TPP. Preliminary results to date suggest that if TPP did not exist, providers would have made medication-related adjustments without subspecialty consultation or referred the patient to another provider which would have resulted in delayed or missed care. Currently, the team is exploring the feasibility of additional analysis to measure the impact of delayed and missed care. Complete evaluation results and program impact findings will be included in the final grant report in December 2019.