Agenda

Research and OCC Meeting

December 4th, 2020/12:00pm EST

Minutes

| # | Topic | Lead Speaker |
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| 1 | Welcome * Dr. Upton thanked researcher for these meetings and to those who attended the HPP Call
* Dr. Brill is very excited about the projects that are coming forward
 | Kristin CunninghamDr. BrillDr. Upton |
| 2 | Fall 2020 OCC Grant Submissions * Roughly 18 submissions that went to the IIRAs (grant review process).
* A majority of proposals are in HSR 5 Study Section
* Dr. Mattocks brought up with David Atkins – is concerned about where the existing review committee won’t be able to review the grants (due to existing relaionships/conflicts)
* Suggested to HSR&D that someone from OCC to sit in the room and express importance of the proposals (since reviewers may be external to VA)
* If any OCC members have recommendations to improve the process, please let Kristin know
* Kristin Cunningham – Would suggest that researchers reach out to the OCC Action Mail Group (not individuals), to ensure that nothing gets lost in email and we respond timely.
* Todd – Mentioned there are three other Cores out there, struggling with synthesize proposal for partners (HSR&D)
	+ Everyone is trying to build it out currently
* Dr. Campbell – all the research projects are good, the high risk suicide risk (helps providers to stand up programs), is a direct application, those kinds of projects are outstanding
 | Kristin Mattocks |
| 3 | PIT Data Question – Institutional table only has DRGs (no ICD procedure codes). We can find corresponding claims in the Professional table with CPT codes. * Is there an additional place we should look for ICD procedure codes on institutional claims?
* Or is cross walking the CPTs we find on the corresponding professional claims the best way to determine what procedures likely occurred during an inpatient stay?

Response provided after the meeting.**OCC Response:** Institutional claim procedure codes can be found in the PIT.PITCLAIMPROCEDURE table.  The join would look something like this:FROM CDWWork.PIT.PITClaim a   join cdwwork.pit.PITclaimprocedure b    on a.pitclaimsid = b.pitclaimsid  join cdwwork.ndim.PITProcedureCode con b.pitprocedurecodesid = c.pitprocedurecodesid | Erin Beilstein-WedelAmy Rosen |
| 4 | Is there information about the numbers and types of providers that are contracted to provide community care to Veterans by site, and before and after implementation of MISSION and new VCCP contracts for sites that have deployed the new provider network contracts? * If yes, is this information available for research purposes and how can this information be obtained? At present, we are trying to understand how the number of providers who deliver VA community based primary care has changed for those facilities that have implemented the new VCCP contracts. For upcoming work, we will be trying to understand how the numbers of providers for certain types of care/specialties have changed (e.g. cardiology, GI, sleep medicine, Radiology/mammography).
* Over a million providers now,PPMS is the system that has all the providers, doesn’t see why it wouldn’t be available on va.gov (public-facing PPMS)
* Before MISSION, there were about 750,000 providers. There is a lot of overlap between old and new providers
* Denise Hines – In PPMS, should be able to match providers with regions
	+ Kristin Cunningham – not a region number associated, but are listed by address. Contracts are by region (can see anyone in network)
		- If you need to move across regions, there is a process for that
	+ Dr. Upton – Didn’t designate by contract/region on va.gov to keep information simple/clear
		- PPMS should tell you the designation (by CCN region and TPA)
		- Some areas are a little confusing (ex. Shreveport, LA). States should be all CCN (of whichever TPA), and a few VCA providers
	+ Trying to link what providers on contract would be available for a particular facility. Is there a database that lists all contracted providers and what region they serve?
		- Dr. Upton – Shouldn’t be a problem.There are some national provider groups (NPI and Tax ID locations may not be the same). OCC will work with researchers to ensure that questions are answered (specifying concerning provider locations)
* Michelle Mengeling – Trying to ensure they’re getting the researchers they are looking into
	+ OCC working on seeting up a PPMS training for the Research group
 | Avery Laliberte |
| 5 | At what level are provider contracts administered under the new VCCP program (e.g., VA site, VISN, region, TPA, other)? If a provider is contracted at more than one site/VISN/region, could their contract be different at each site/VISN/region?* Kristin Cunningham – Largely at the region level, can be at a higher level (if it’s a national system)
* Dr. Upton – concrete example (Mayo Clinic). When working on their contract, viewed it as one large entity. So, will have to navigate these issues as they arise
 | Avery Laliberte |
| 6 | Wrap Up* Transition
	+ VHA USH is the only political appointee, staffing should remain largely the same
	+ Dr. Upton, is acting in the role. Team is still waiting to see how leadership will work
 | Kristin Cunningham |

Action/Follow-up Items

| # | Action Item | Date Assigned | Person | Due Date | Status |
| --- | --- | --- | --- | --- | --- |
| 1 | PPMS Training for Research Group | 12/4/2020 | Sarah Leder |  | Pending |
| 2 | PIT Data Question (#3) in agenda  | 12/4/2020 | Matt Czegen Dr. Sandrow | 12/11/2020 | Completed (included in minutes) |