Follow-up and Treatment Workgroup Meeting Summary

Jeffrey P. Brosco MD PhD

ACHDNC Meeting, November 1-2, 2018

Follow-up and Treatment Workgroup

ACHDNC MEMBERS

- Jeffrey P. Brosco, MD, PhD (FUTR Chairperson)
- Susan A. Berry, MD
- Kamila B. Mistry, PhD, MPH
- Annamarie Saarinen

ORGANIZATION REPRESENTATIVES

- Debra Freedenberg, MD, PhD American Academy of Pediatrics
- Christopher A. Kus, MD, MPH (FUTR Co-Chair) Association of State & Territorial Health Officials
- Jed L. Miller, MD, MPH Association of Maternal and Child Health Programs
- Robert J. Ostrander, MD

American Academy of Family Physicians

WORKGROUP MEMBERS

- Sabra A. Anckner, RN, BSN
- Amy Brower, PhD
- Christine S. Brown, MS
- Kathryn Hassell, MD
- Nancy Doan Leslie, MD
- Sylvia Mann, MS, CGC
- Dawn S. Peck, M.S., CGC
- Margie A. Ream, MD, PhD
- Joseph H. Schneider, MD, MBA, FAAP
- Janet Thomas, MD

FUTR Workgroup Meeting

- Quality Measures report posted on website
- Medical Foods report awaiting publication
- NBS Follow-up and Treatment Roadmap
 - Nov 2017 May 2018 brainstorming
 - Aug-Sep 2018 Schneider/Ostrander preliminary proposals
 - "Federated System" that assures that every child identified with a NBS condition receives high-quality, evidence-based, family-centered care
 - All children
 - Children with special health care needs
 - Children with a NBS condition
 - Individual conditions (e.g. sickle cell, CF, MCAD, etc.)



ACHDNC – Genetics in Medicine (2008)

Long-term follow-up after diagnosis resulting from newborn screening: Statement of the US Secretary of Health and Human Services' Advisory Committee on Heritable Disorders and Genetic Diseases in Newborns and Children

Alex R. Kemper, MD, MPH¹, Coleen A. Boyle, PhD², Javier Aceves, MD³, Denise Dougherty, PhD⁴, James Figge, MD, MBA⁵, Jill L. Fisch⁶, Alan R. Hinman, MD, MPH⁷, Carol L. Greene, MD⁸, Christopher A. Kus, MD, MPH⁹, Julie Miller, BS¹⁰, Derek Robertson, MBA, JD¹¹, Brad Therrell, PhD¹², Michele Lloyd-Puryear, MD, PhD¹³, Peter C. van Dyck, MD, MPH¹³, and R. Rodney Howell, MD¹⁴

- Central components
 - Care coordination
 - Evidence-based treatment
 - Quality improvement
- Features
 - Quality chronic disease management
 - Condition-specific treatment
 - Care throughout lifespan

ACHDNC – Genetics in Medicine (2011)

What questions should newborn screening long-term follow-up be able to answer? A statement of the US Secretary for Health and Human Services' Advisory Committee on Heritable Disorders in Newborns and Children

Cynthia F. Hinton, PhD, MPH¹, Lisa Feuchtbaum, DrPH, MPH², Christopher A. Kus, MD, MPH³, Alex R. Kemper, MD, MPH⁴, Susan A. Berry, MD⁵, Jill Levy-Fisch, BA⁶, Julie Luedtke, BS⁷, Celia Kaye, MD, PhD⁸, and Coleen A. Boyle, PhD, MS¹

- Central components
 - Care coordination
 - Evidence-based treatment
 - Quality improvement
- Perspectives
 - State and nation
 - Primary/specialty providers
 - Families

ACHDNC – Molecular Gen & Metab (2016)

A framework for assessing outcomes from newborn screening: on the road to measuring its promise*



Cynthia F. Hinton ^{a,*}, Charles J. Homer ^b, Alexis A. Thompson ^c, Andrea Williams ^d, Kathryn L. Hassell ^e, Lisa Feuchtbaum ^f, Susan A. Berry ^g, Anne Marie Comeau ^h, Bradford L. Therrell ⁱ, Amy Brower ^j, Katharine B. Harris ^k, Christine Brown ¹, Jana Monaco ^m, Robert J. Ostrander ⁿ, Alan E. Zuckerman ^o, Celia Kaye ^p, Denise Dougherty ^q, Carol Greene ^r, Nancy S. Green ^s, the Follow-up and Treatment Sub-committee of the Advisory Committee on Heritable Disorders in Newborns

and Children (ACHDNC):

Framework for Assuring Good Outcomes from NBS

Outcomes	Primary Drivers	Measure Concepts (%)
Improved survival and well-being for individuals with specific screened congenital conditions Measures: Mortality Major complications Function Growth & development Patient/family experience Disparities	Rapid and Reliable Detection and Diagnosis	 Population screened Abnormal screens with timely follow-up Confirmed cases obtaining timely treatment
	Provision of Evidence-based Therapeutic and Habilitative Care	Patients receiving care consistent with guidelines
	Coordination and Integration of Services to Address Holistic Spectrum of Child- and Family-centered Needs	 Patients with care plans Patients obtaining care in a medical home Patients with assessed growth & development Patients receiving genetic services Patients with effective transition Patients receiving reproductive services
	Mechanisms for Continuous Improvement of Care, Discovery and Innovation	 Surveillance systems Patients in registries Patients in clinical studies or trials

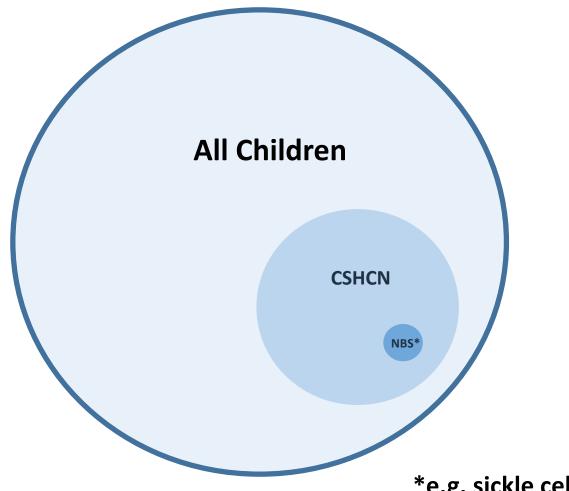
Hinton et al, 2016

The Role of Quality Measures to Promote Long-Term Follow-up of Children Identified by Newborn Screening Programs

Presented by the FUTR Workgroup to ACHDNC (February 2018)

- Quality measures are a crucial part of health and health care system
- Many different types of quality measures
- Creating/collecting data for these measures for NBS can be challenging
- Different perspectives needed, esp. patient/family/consumer
- Engage a broad range of stakeholders to
 - Identify a core set of long term follow-up quality measures and data resources
 - Encourage the use of large data collection activities (e.g NSCH) and QI activities (e.g. HEDIS)
 - Health Information Technology (HIT) standards/Clinical Decision Support (CDS) in the EHR

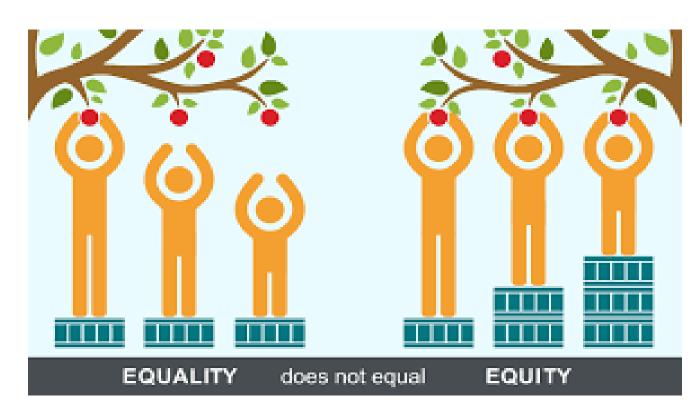
Approaches to Quality Assurance/Improvement



*e.g. sickle cell disease, cystic fibrosis, congenital hypothyroidism, medium chain acyl-CoA dehydrogenase deficiency

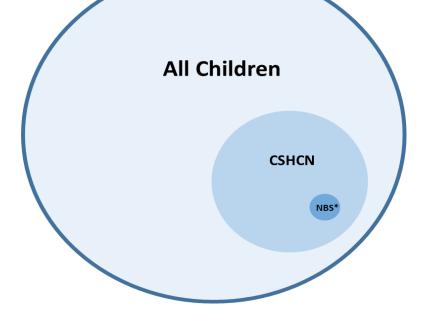
A Rose by any other name . . . "FUTR"

- What does "Follow-up and Treatment" really mean?
 - "Follow up" = assurance/reporting?
 - Does "Treatment" imply "equity"?
 - "Long-term"?
- Who is the "we"?



Who is the "we"? Some examples.

- MCHB/Medicaid/state department of health
 - Assurance and equity (reduce disparities) for <u>all children</u>
- State Title V CSHN programs
 - Assurance and equity (reduce disparities) for <u>CSHCN</u>
- State NBS programs
 - Assurance and equity for "NBS" children
 - What are the limits of responsibility?
- Clinicians/researchers/family members
 - Individual child with an NBS condition
 - Of course, many feel greater responsibility



FUTR Workgroup Charge (Revised September 2011)

Engage in a multi-step process that:

- Identifies <u>barriers</u> to post screening implementation and short- and long-term follow-up, including treatment, relevant to newborn screening results;
- Develops <u>recommendations</u> for overcoming identified barriers in order to improve implementation and short- and long-term follow-up, including treatment, relevant to newborn screening results; and
- Offers guidance on <u>responsibility</u> for post-screening implementation and short- and long-term follow-up, including treatment, relevant to newborn screening results.

LTFU Next Steps – Specific Recommendations

- LTFU work recommends that we explore what a coalition proposing a candidate NBS condition for inclusion on the RUSP might do to assure access to long-term follow-up and treatment
 - "Blueprint" addressing key (anticipated) issues for long-term FUTR?
 - E.g. Propose 2-3 condition-specific quality measures?
 - Provide recommendations for Feb 2019 meeting regarding evidence-review
- Continue to explore next steps for federated system
 - What else condition-specific coalitions can do?
 - Patient registries, centers of excellence, NORD
 - What state-level organizations can do?
 - "Birth defects" registries, NewSTEPs pilots
 - What national-level organizations can do?
 - CLSI, HEDIS, EHR

