CPC
Comprehensive Primary Care

Milestone 3: Access to Care

Measuring and Optimizing Continuity in Your Practice

May 05, 2015 1:00 PM EDT

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New Jersey Academy of Family Physicians (NJAFP)

Facilitator: Cari Miller, MSM, PCMH CCE

Regional Faculty:

Karen Foster, RN, MSA

Tara Perrone, MHA

Jessica Runyon

Moderator:

Rose Langdon

TMF Health Quality Institute

Discussion Leader

Geralyn M. Prosswimmer, MD FAAP
Chief Medical Officer
Hunterdon Healthcare Partners

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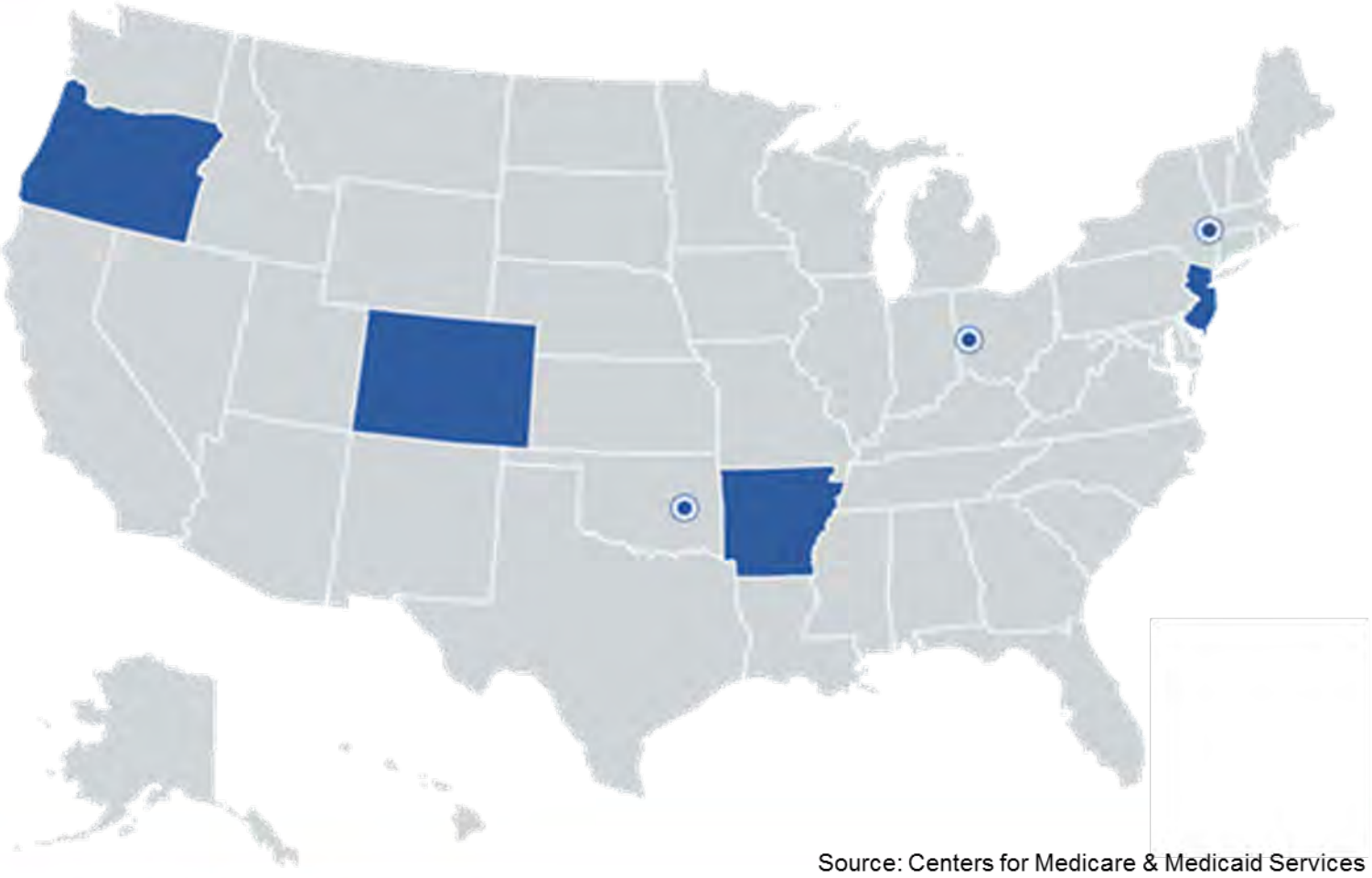
Click the arrow on the annotation toolbar, then point to your location…



Source: Centers for Medicare & Medicaid Services

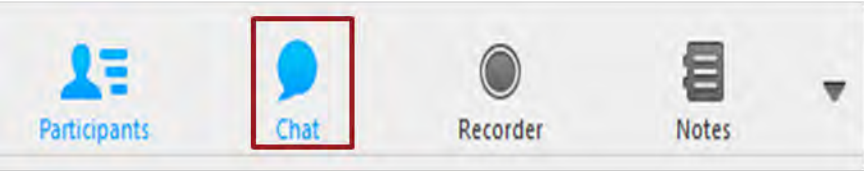
Live Session Pointers

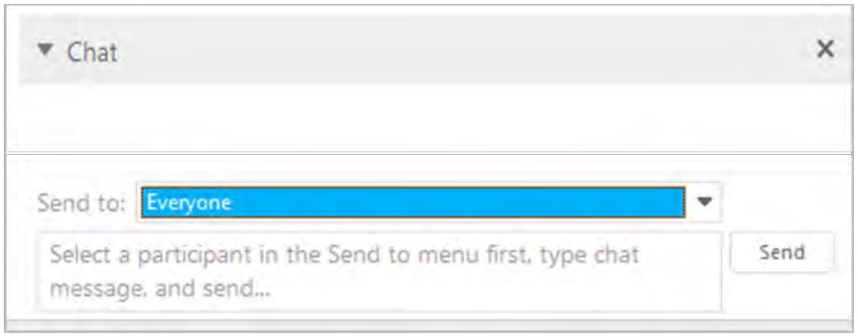
This is YOUR Action Group!

It will be interactive, using audience polls and the chat box, and will be continued in the forum.

More activity means more learning!

Chat now: ***What question would you like answered about Tracking Continuity TODAY?***





What is your role in your practice?

- Physician
- PA-C/ APRN
- Nurse RN/LPN
- Medical Assistant
- Practice Mgmt
- Quality/ Analyst
- Care Mgr/ Coord
- Admin/ Billling
- Other

Have you implemented a strategy for measuring continuity of care in your practice?

YES	NO	I'm not sure how to measure …	This is in planning stages

REMINDER:
Keep the Discussion Going!

To continue our learning, do the following and share your experiences on the forum and in the library:

- Go to the forum and post your thoughts about tracking and optimizing continuity of care in your practice
- Post the ideas you have tried as a result of this action group on the forum
- Post on the forum what you will do between now and the next live session of this action group

Overview

Last Live Session: Virtual Office Visits

Benefits include patient access to practice outside of normal office hours.

On the Forum:

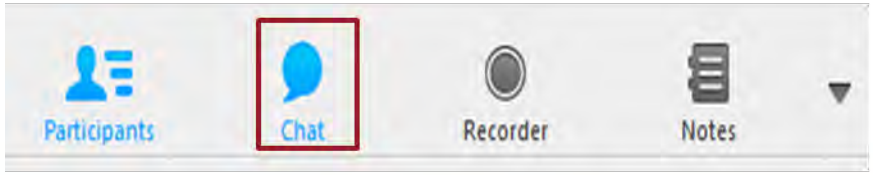
- Support and Utilization for mHealth Apps is on the Rise
- How Social Media Has Impacted the Healthcare Industry

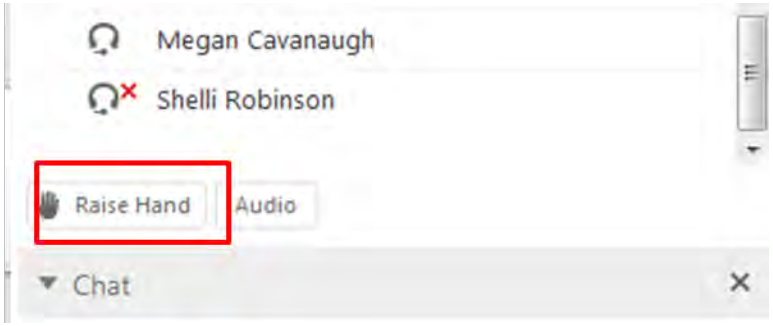
Our clinic is currently

Our clinic is currently working to create a Facebook page for our practice. We hope to have it available soon. We hope to use it to advertise the services our clinic offers, direct the public to our website, and update our patients regarding teaching, resources or notices on the patient portal.
Tammy, RN
Batesville Family Practice Clinic

Questions?

Please enter your questions into the Chat Box or "Raise Your Hand" to ask verbally.





What are we trying to accomplish?

After attending this session, attendees should be able to:

- Begin to determine how to generate continuity of care reports.
- Describe who is responsible for continuity of care reporting in the practice, the frequency with which this information is generated, and methods used to share the information with providers and the practice team.
- Discuss how practices are using continuity of care reporting or other reporting capabilities to determine access to care needs for the practice population and changes that have been made based on the data provided.

Continuity of Care: The Hunterdon Experience

A PCMH Pillar

Geralyn M. Prosswimmer, MD FAAP
Chief Medical Officer
Hunterdon Healthcare Partners
prosswimmer.geralyn@hunterdonhealthcare.org

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Hunterdon Healthcare

- IDS with employed and independent physicians in central New Jersey
- 24 NCQA Level III PCMH sites (2012)
- 11 CPC Sites
  - 6 employed, 5 independent
  - ~30 Physicians (not FTE) plus APN/PA
  - ~44,000 Patients
  - Single EMR: NextGen

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Defining Continuity of Care

NCQA Definition

Total proportion of patient encounters that occurred with the selected personal clinician OR team

- Element 1D3 in 2011 survey
- May include structured electronic visits (e-visits) or phone visits in these statistics if relevant

Defining Continuity of Care (cont'd)

CPC Definition

- **Provider-centric measure**: divide number of visits to a clinician by patients empanelled to clinician or team by the total number of visits for that clinician
- **Patient-centric measure**: number of times patients see the provider to whom they are empanelled divided by the total number of visits in the practice

Assuring Continuity of Care

At Hunterdon: "PPP"

- "Patient's Preferred Provider"
- Field in EMR (NextGen) captures this
- Displays to team members on each screen
- Reports pull from this field

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NextGen EHR: Abba Karen G Test DOB: 09/26/1976 (Female) AGE: 38 years 5 months NICKNAME: Do NOT Use - 03/16/2015 04:51 PM

Abba K. Test (F) DOB: 09/26/1976 (38 years) Weight: 188.00 lb (85.28 Kg) Allergies: (3) Problems: (1) Diagnoses: (35) Medications: (4)

Address: 518 Park Place
Flemington, NJ 08822
Contact: (908) 555-1212 (Home)

NextMD: No
Enterprise Chart: Yes

Pharm 1:
Pharm 2:
PPP: Polizzi MD, David R
PCP: Murry, Robert L MD
Referring:
Rendering: Polizzi, David R MD

PPP: Polizzi MD, David R
Specialty: Family Practice
Visit Type: Office Visit

Intake | History | SOAP | Finalize | Checkout | Order Mgmt

Physical Exam
Assessment/Plan
General
Reason for Visit

PPP shown on demographic bar as well as header for each template

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Designating PPP improves continuity

- Allows scheduler to prioritize PPP for appointments
  - For routine visits always
  - For acute visits whenever possible
- Allows team members to easily identify which provider should handle questions or problems presented asynchronously
  - Portal, phone messages from patient/family
  - Inquiries/correspondence from medical neighborhood

PPP Selection

- Patient chooses his or her PPP
- Patient may change PPP at any time
- Patient’s choice is verified at every office visit

- Auto-flow example

NextGen - Default Practice

File Edit Tasks Reports Admin Window Help

Lookup ApptList ApptBook Practice

Add Patient Information

Prefix | Last: Test | First: Diaz | Middle | Suffix | Previous Last | Nickname

Social Security | Birth Date: 09/23/1966 | Age: 48 yrs. | Sex: Female

Demographics | Status | Client Defined | Provider | Privacy | Employer | Relations/Role | Ext | History

Pref Name	Provider Name	Specialty	Eff Date	Exp Date	Exp Reason
Preferred Practice Provider	Murry MD, Robert L	FP	04/20/2015		

Insurance | Account | Chart | OK | Cancel

Patient Chart - Test

Test, Diaz

Encounters

Demographics | Relationship/Contact/Guar | Chart Details | Provider | Case Management

Ready | NGProd | ISJFITZG (18) | Version 5.8.1.28 | 04/21/15 02:16 PM

Start | \\HUNTERDON - Terminal... | NextGen | NextGen - Default Practice | 2:17 PM

Hunterdon Continuity Reporting

Two types:

1. Continuity of care for patient
2. Track metrics for empaneled patients

Continuity Reports: First type

- Reports that track continuity
  - N= total number of visits with PPP this quarter
  - D= total number of visits to practice this quarter
- These reports do not aggregate teams
  - Smaller practices – just one team
  - Larger practices – may have more than one team; we don't differentiate (yet) in our reporting even when our providers are grouped into teams

Reports that track continuity

Practice Name

Numerator: Total number of appointments held with the patients' PPP during the report period	Denominator: Total number of appointments held during the reporting period	% (Numerator / Denominator)
341	432	78.94%

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Continuity Reports: Second type

- Reports that track performance of individual providers by attributed patient panel
- Each provider's individual performance is tracked for his or her attributed patients for 12 clinical metrics

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Reports that track performance

- Performance is displayed on a dashboard and compared to other providers in the group each month
- Goals are set for the practice based on national benchmarks

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Osteoporosis Screening

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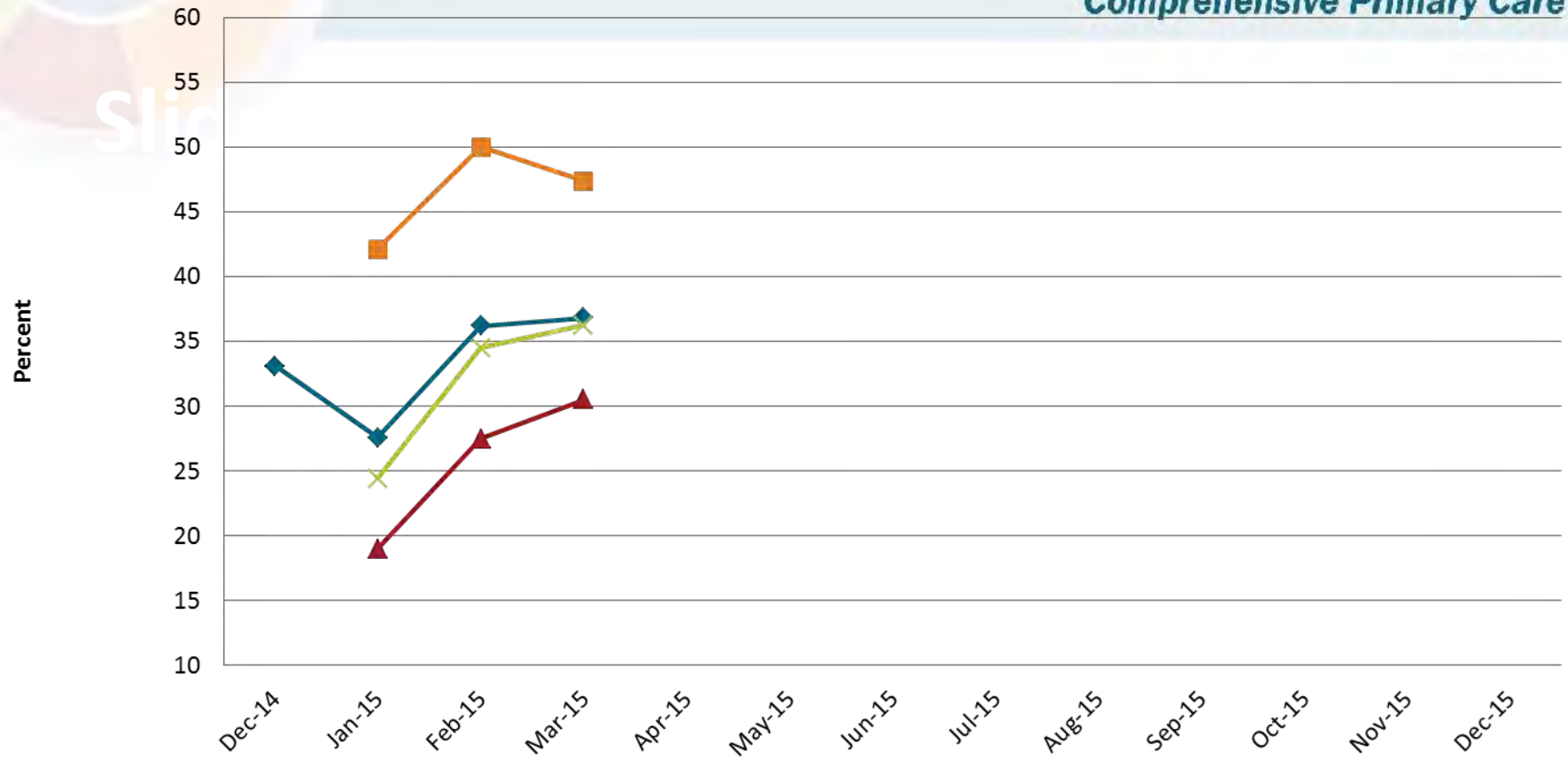

	12/14	1/15	2/15	3/15	4/15	5/15	6/15	7/15	8/15	9/15	10/15	11/15	12/15
Practice Name	33.11	27.59	36.21	36.81									
Provider B		42.11	50	47.37									
Provider C		18.99	27.5	30.49									
Provider D		24.44	34.51	36.24									

Continuity in the Medical Neighborhood

- Assure our medical neighbors can identify the patient's primary provider
- Assure our medical neighbors have access to all necessary information
- Unified Chart: debut November 2013

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Unified Chart

All providers in our integrated delivery system chart in the same record and see the same:

- Problem list
- Med list
- Allergies
- Social and family history
- Can view office visit notes, etc., from all practices

CPC

Logout | Save | Highlands Hampton | Polizzi, David R MD | Patient | History | Inbox | PAQ | PM | ICS | Templates | Medications | Orders | Medication Allergies | Procedures | Problems | Close

Abba K. Test (F) DOB: 09/26/1976 (38 years) Weight: 188.00 lb (85.28 Kg) Allergies: (3) Problems: (1) Diagnoses: (35) Medications: (4)

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Pharm 1:
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PCP: Murry, Robert L MD
Referring:
PPP: Polizzi MD, David R Rendering: Mitev, Iliya D MD

Alerts | OBGYN Details | UC Communication | Demographics | Sticky Note | Referring Provider | HIPAA | Advance Directives | Screening Summary

03/16/2015 04:51 PM : "*SOAP HMC" | 02/24/2015 09:18 AM : "Care Coordination Home HMC" <Read-only>

Navigation

Add

Care Plan History

Problem	Goal	Outcome	Intervention	Rol

Communication

PTA Summary

Select a communication tool:
- All
- Medication Mgmt
- Medical Question
- Test Result Request
- Referral Request
- Forms/Records
- Billing Questions

Date	Time	Employee	Reason	Status	Comments
12/08/2014	12:55 PM	Karen Giannattasio	Test Action		Other: Will be address
12/08/2014	12:53 PM	Karen Giannattasio	Test Action		Other: Will be address

Patient History

Patient History | Patient Demographics | Categories

New | Lock | Search

- 03/03/15 Murry, R Delaware Valley Family Health Center
- 03/03/15 Bauman, S Hunterdon Palliative Care
- 02/24/15 Sacchieri, T Annandale Family Practice
- 02/24/15 Mitev, I Hunterdon Medical Center
  - *SOAP HMC
  - Care Coordination Home HMC
- 02/24/15 Esch, J Highlands Hampton
- 02/19/15 Dave, P Your Doctors Care
- 02/19/15 Bednar, M Hunterdon Hematology Oncology
- 02/19/15 Shapiro, D County Line Family Practice
- 02/18/15 Kolpan, B Riverfield Clinton
- 02/17/15 Peng, V Hunterdon Family Physicians
- 02/16/15 Murry, R Delaware Valley Family Health Center
- 02/16/15 Sandberg, M Diab And Endo -Flemington
- 02/11/15 Quinn, B Hunterdon Hematology Oncology
- 02/11/15 Sacchieri, T Annandale Family Practice

My Practice

Custom

Ready | Highlands Family Health Center | hpgpross | CAP | NUM | SCRL | 03/16/2015

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Managing your Diabetes with your Healthcare Team

This care plan is a guide to help you manage your diabetes working with your doctor and healthcare team. Keep it handy for daily use.

Keep Your Numbers in Check

	A1C	Blood Pressure	LDL	Weight
Recommended Goal	Less than 7	Less than 140/80	Less than 100	
Why It's Important	High blood sugar damages organs. A1C tells us about your blood sugar levels over the last 3 months.	High blood pressure makes your heart work too hard. It can cause heart attack, stroke, and kidney damage.	This "BAD" cholesterol clogs your blood vessels and causes heart attacks and strokes.	Obesity makes diabetes worse and may cause heart attacks and strokes.
Most Recent Numbers				
Goal for Next Visit				

MEDICATION AND BLOOD SUGAR CHECK

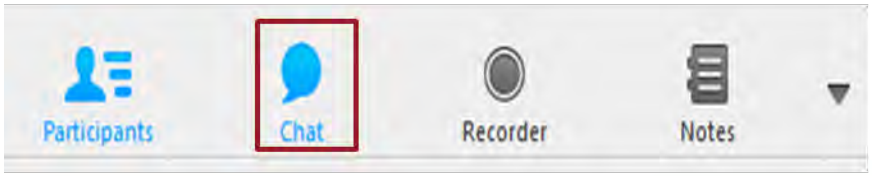
- Goal: To keep your blood sugars controlled
- Plan: Take your diabetes medicine and check your blood sugar as directed by your doctor and healthcare team

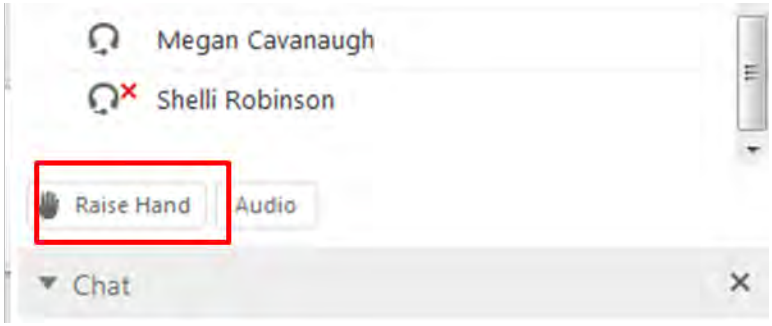
What are some changes made in your practice for continuity of care reporting?

- Added more provider staff
- We did not make any changes
- We do not currently review or have continuity of care reporting
- Made provider scheduling changes
- Expanded our office hours
- All of these

Questions?

- Raise your hand
- Type question in Q&A section
- Type Question into Chat Room





Questions from the Action Group Participants

Practice Questions

How are practices tracking continuity in their EHR?

Practice Questions

How are practices defining a care team?

Practice Questions

Are practices tracking continuity of care on a “team” basis or a “provider” basis?

Practice Questions

If the practice has a defined care team for each patient, how are they tracking continuity of care in their EHR?

Practice Questions

What are the alternative methods of tracking continuity if you can't track it in your EHR?

Practice Questions

How often are practices measuring and reporting on continuity of care?

Practice Questions

What actions have practices taken based on the data provided in the continuity of care report?

Practice Questions

Who in your practice has the responsibility for monitoring, feedback to the practice leadership and implementing change based on the results of continuity of care reporting?

Practice Questions

Are practices using payer data for any of their continuity of care reporting?

Practice Questions

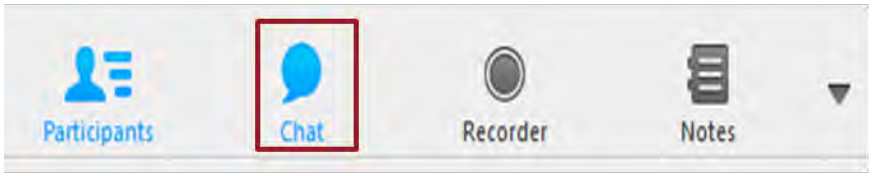
For those practices who are, how are you using this data?

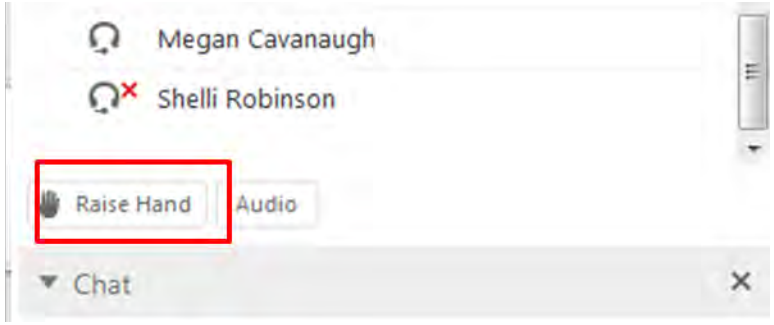
Open Discussion

Summary

Questions?

- Raise your hand
- Type question in Q&A section
- Type Question into Chat Room





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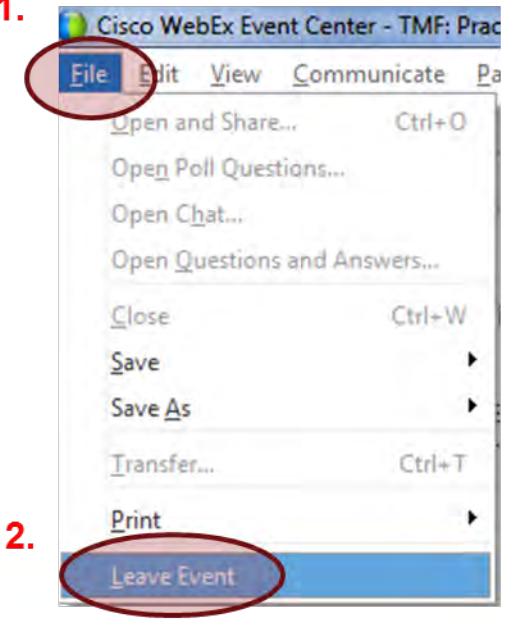
NEW: All attendees, including faculty, MUST complete a survey. You may add multiple participants on one form if you participated as a group.

1.



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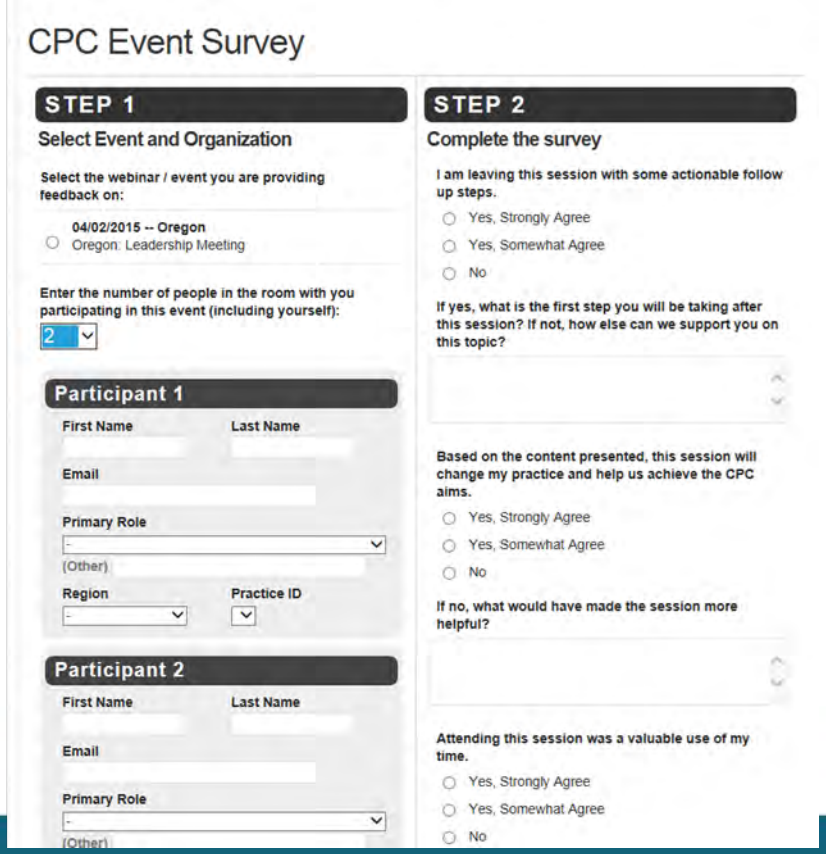
3.