

HEALTH MANAGEMENT ASSOCIATES

# Patient-Centered Medical Home Transformation

The Right Thing to Do for Patients and  
for Your Organization

Speakers:

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[HealthManagement.com](http://HealthManagement.com)

# HEALTH MANAGEMENT ASSOCIATES

Cisco WebEx Event Center

File Edit Share View Communicate Participant Event Help

Quick Start Event Info

## Test

Host: HMA Events  
Event number: 666 221 939

Record End Event

I Will Call In Share My Desktop Invite & Remind

Participants **Chat** Recorder Q&A

▼ Participants (1)

Speaking:

▼ Panelists: 1

HMA Events (Host, me)

▼ Attendees: 0 (0 displayed)

▼ Chat

Send to: All Panelists

Select a participant in the Send to menu first, type chat message, and send... Send

▼ Q&A

All (0)

Select a question, and then type your answer here. There is a 256 character maximum.

Send Send Privately...

Connected

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Chat

I Will Call In Share My Desktop Invite & Remind Copy Meeting URL

Send to: All Panelists

Host  
Presenter  
Host & Presenter

Q&A

All (0)

All Attendees  
All Panelists  
All Participants  
Select an Attendee...

Select a question, and then type your answer here. There is a 256 character maximum.

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Send

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Send Send Privately...

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## Transformation Includes:

- New scheduling
- New access
- New coordination
- New types of visits
- Incorporating population medicine
- Bringing evidence to point of care
- More point of care services
- Redefining patient visit
- New coordination with other parts of the healthcare system
- Team based care
- Changes in practice management
- Changes in roles
- New strategies for patient engagement
- Multiple uses of new information systems and technology
- Response to patient events outside of the clinical setting
- Outcomes based staffing
- QI at point of care

**Not incremental change but whole system change.**

## PCMH the Promise...

- Population-wide monitoring assists in addressing socioeconomic, racial, and ethnic disparities in health care quality
- Registries:
  - monitor adherence to treatment,
  - provide easy access to lab and test results
  - Provide reminders, decision support, and information on recommended treatments.

## PCMH the Reality

- Processes related to care coordination and integration, enhanced access, team-based care, and support from appropriate information systems have not been adopted as broadly as other PCMH measures

# Lesson 1: Communication

- Let's talk about it.
- Vocabulary
- Transforming as team
  - Process (robustness)
  - Accountability (all levels)
  - Communication loop (agility and responsiveness)





## Lesson 2: Top of Your Game

- Highest level of skills and licensure



- New roles for licensed and unlicensed
- Accurate evaluation
- Local leadership
- No trust = no team

## Lesson 3: Go Team!

- Not the team you're used to
- Requires change in roles and old MOC
- Eliminate obstacles
- Align:
  - Functional job descriptions
  - Expectations
  - Competencies and reviews
- Do not delay training
- Define leadership and oversight

## Lesson 4: Level Setting

- Retain your mission and values as the primary goal
- Step not destination (accreditation or recognition)
- Moving denominators
  - If moved in your favor what are next steps
  - Think beyond meeting the standard
  - you > PCMH Level

## Lesson 5: Moving the Needle

- Choose low hanging fruit
- Honor your passion
  - Choose areas that align with your needs and your vision
- Minimize your pain
  - Choose areas that align with practitioners pain points

## Lesson 6: Think Outside the Doc

- Engage the C suite
- Billing and finance as allies in health
- Front desk and appointments practice
- Adaptive reserve is critical to managing change
- Larger system can help or hinder

## Lesson 7: Leadership

- Honest
  - Financials tied beyond grants
  - Differences
  - Own your past
- Agile (I mean really agile)
- Inclusive



## Lesson 8: U and Variability

- Standardization takes time and buy in
- Never too early to start
  - Protocols
  - Procedures
  - Processes
  - Authority
- Who do these touch?
- Care Management, Care Transitions and Coordination and IT most difficult areas

## Lesson 9: Timing is Everything

- Practice problems (sudden)
- Practice problems (predictable)
- Protected time trap
- Motivation of key practice members
- Overbooking and other scheduling
  - Value over volume
  - Scheduling aligns with clinical expectations



## Lesson 10: Put a Ring on It

- Patient engagement (different than satisfaction)
- How, where and what type of information is shared
- Clear decision points and goals for you and patients
- Requires transformed teaching
- Clear management strategies
- PCMH-CAHPS

# ACHIEVING NCQA PCMH RECOGNITION:

A TOOLKIT FOR PRACTICES SEEKING TO APPLY

HEALTH MANAGEMENT ASSOCIATES



# Project Genesis

- HMA helped Florida and Illinois develop and implement learning collaboratives focused on medical home practice transformation for child-serving practices
- These projects demonstrated the value of and practice desire to achieve NCQA PCMH recognition
- Also exposed the difficulty in achieving recognition without additional assistance
- NCQA PCMH Recognition Facilitation project provided direct technical assistance to child-serving practices working to achieve recognition

# Project Goals

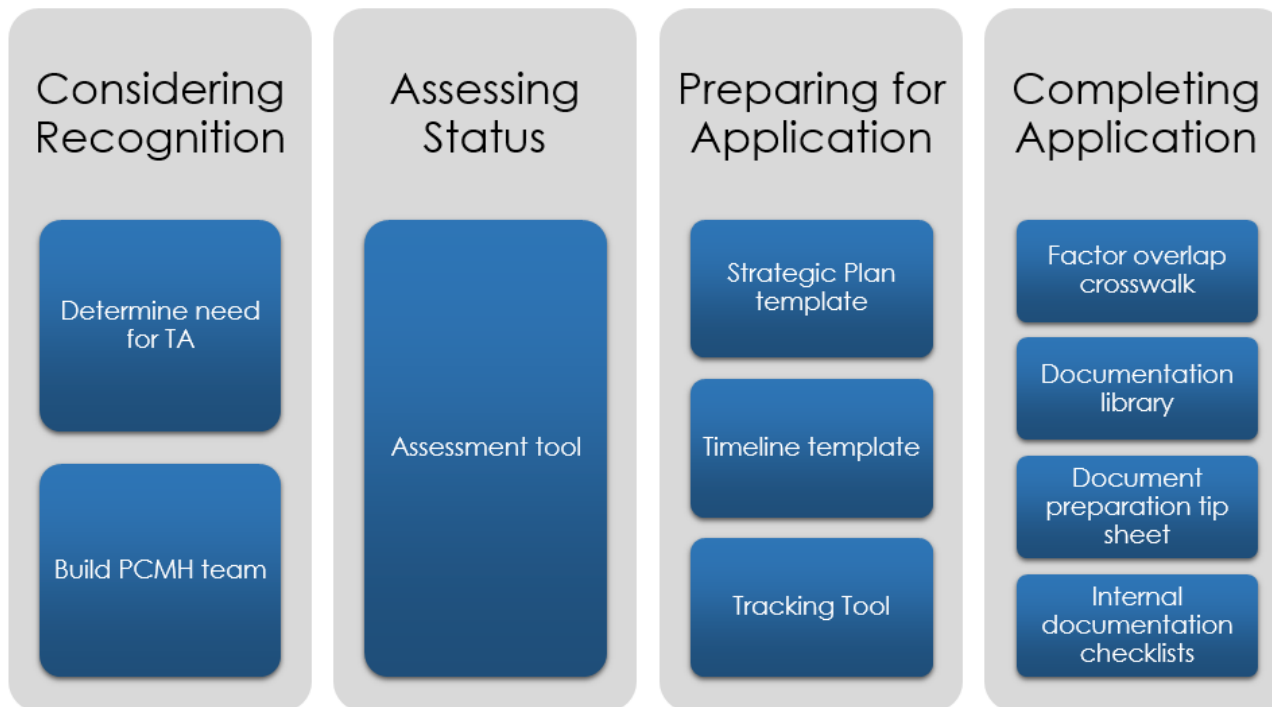
- Gain understanding of practice needs for transformation to the PCMH model of care by gathering information through the following “boots on the ground” activities:
  - Provide technical assistance for NCQA PCMH recognition to individual practices
  - Understand the resources and effort necessary for practices to achieve PCMH recognition
  - Identify transformation areas and processes that are the most challenging for individual practices
  - Develop key resources/tools to share with future practices
  - Inform the medical community and federal and state policy makers of needed resources

# Toolkit Development

- Key resources were developed throughout the project as needed
- Toolkit of these resources was assembled to share more broadly with practices considering applying for recognition the tools created through this work are those involved practices found most useful
- Not intended to be a comprehensive guide to achieving recognition – a supplement to other available resources
- Tool icon indicates embedded tools



# Toolkit Contents



# Considering Recognition

- **Determine need for TA:** strongly recommend practices consider seeking technical assistance directly from an outside source
- **Build PCMH Team:** should include at least four key roles including a PCMH Champion, Communicator-in-Chief, Lead Administrator, and Report Master

# Assessing Status

- **Assessment:** Understand the current level of medical homeness according to NCQA’s standards utilizing a standard Medical Home Assessment Tool

| PCMH 1: PATIENT CENTERED ACCESS   |                                    |                                     |
|---|------------------------------------|-------------------------------------|
| Factor  | Factor Present?<br>(Yes = 1, No=0) | Documentation<br>Required           |
| <b>ELEMENT A: PATIENT CENTERED APPOINTMENT ACCESS (MUST PASS)</b>   |                                    |                                     |
| The practice has a written process and defined standards for providing access to appointments, and regularly assesses its performance on: |                                    |                                     |
| 1. Providing same-day appointments for routine and urgent care. <b>(CRITICAL FACTOR)</b>  |                                    | P/R                                 |
| 2. Providing routine and urgent-care appointments outside regular business hours.   |                                    | P/R                                 |
| 3. Providing alternative types of clinical encounters.  |                                    | P/R                                 |
| 4. Availability of appointments.  |                                    | P/R                                 |
| 5. Monitoring no-show rates.  |                                    | P/R                                 |
| 6. Acting on identified opportunities to improve access.  |                                    | P/R                                 |
| <i>Total Possible Points for PCMH 1A:</i>   | <b>4.5</b>                         | <i>Additional Notes for<br/>1A:</i> |
| <b>Total # of Factors with "Yes" for PCMH 1A:</b>   | <b>0</b>                           |                                     |
| <b>% Points Received for PCMH 1A:</b>   | <b>0%</b>                          |                                     |
| <b>Total # of Points Received for PCMH 1A:</b>  | <b>0.00</b>                        |                                     |
| <b>MUST PASS Element - Passed at 50% Level?</b>   | <b>NO</b>                          |                                     |

The Medical Home Assessment Tool is a product of the Primary Care Development Corporation.



# Preparing for application

- **Strategic Plan Template:** Helps inform where to go next – every factor does not need to be met. The strategic plan helps determine how best to proceed with recognition.
- **Timeline Template:** Helps in determining an appropriate and realistic timeline, both in terms of the recognition requirements and practice characteristics.
- **Tracking Tool:** Tracking tool to help ensure ownership, accountability, and that the process progresses according to the timeline.

# Completing Application

- **Factor Overlap Crosswalk:** Shows where factors and elements overlap. Assists practices in developing their timeline, and also in determining their strategic plan for completion – many factors and elements closely align with, or must be completed in conjunction with or subsequent to another factor/element, and practices should not attempt to achieve each standard, element and factor in a sequential order.
- **Documentation Library:** Examples of documentation that meets NCQA requirements for each element/factor, gathered from NCQA training materials and practices that received recognition.
- **Document Preparation Tip Sheet:** NCQA’s resources on documentation preparation are extremely helpful and highly recommended.
- **Internal Documentation Checklists:** Checklists for each factor to assist in documentation review and provide a standardized process.

## Accessing the Toolkit: HMA Website

The screenshot displays the HMA website's navigation and content. At the top, the HMA logo is centered, with a 'Contact us' button to its right. Below the logo is a blue navigation bar containing links for HOME, WHO WE ARE, WHAT WE DO, WHO WE HELP, KNOWLEDGE SHARE, and OUR TEAM, along with a search bar. The main content area is titled 'CHIPRA Library' and includes a breadcrumb trail: Home / What We Do / Government Programs & The Uninsured / CHIP / CHIPRA Library. A left sidebar lists various service areas under 'What We Do', with 'Government Programs & The Uninsured' expanded to show 'CHIPRA Library' and 'Achieving NCQA PCMH'. The main content area features a heading 'CHIPRA Library' and a welcome message. A list of three key federal priority areas is provided, with the first item, 'Achieving NCQA PCMH Recognition', highlighted in a grey box. This box contains a detailed description of the toolkit and a 'WEBSITE LINK' button.

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HOME WHO WE ARE WHAT WE DO WHO WE HELP KNOWLEDGE SHARE OUR TEAM

CHIPRA Library Home / What We Do / Government Programs & The Uninsured / CHIP / CHIPRA Library

**What We Do** ▼

- Behavioral Health
- Clinical Services
- Community Strategies ▶
- Correctional Health
- Data Analytics
- Government Programs & The Uninsured ▼
  - CHIP ▼
    - Florida-Illinois CHIPRA Library ▶
    - **CHIPRA Library** ▼
      - [Achieving NCQA PCMH](#)

### CHIPRA Library

Welcome to HMA's CHIPRA Library for Florida and Illinois. Below that, you'll find an explanation of each of the key federal priority areas:

- Utilizing Quality Measures
- Promoting the Use of HIT
- Implementing and Evaluating Provider-Based Delivery Models
- **Achieving NCQA PCMH Recognition**

These are followed by links to the pertinent documents in each area. A brief document is also included.

**Achieving NCQA PCMH Recognition: A toolkit for practices seeking to apply**

A collaborative venture of Florida and Illinois sought to provide direct technical assistance to child-serving practices working to achieve NCQA Patient-Centered Medical Home (PCMH) recognition in an effort to gain a better understanding of the resources and effort necessary for practices to achieve PCMH recognition, identify transformation areas and processes that are the most challenging for individual practices, develop key resources/tools to share with future practices, and inform the medical community and federal and state policy makers of needed resources. The NCQA PCMH Recognition Toolkit was assembled to share more broadly with practices considering applying for recognition the tools created through this work.

[WEBSITE LINK](#)

# Accessing the Toolkit and Further Information:

To access *Achieving NCQA PCMH Recognition: A toolkit for practices seeking to apply*  
<https://www.healthmanagement.com/what-we-do/government-programs-uninsured/chip/chipra-library/>

For further information:

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## Q&A

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