



Care Management Questions



Talked to some Care Managers to learn more about CM:

- What is your process for identifying patients for CM?
- What is working well with this process?
- Do you follow up between patient PCP visits with calls or CM visits?
- Please share a success story

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Domain 1



BCBSM asking how patient knows practice is PCMH and what does that mean to patient?

PCMH Brochure – one practice had a small cheat sheet on back of laminated PCMH document with points for front desk to hit

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All Processes and Training



Annual Process updates – wording BCBSM used: When do you talk about test tracking (example) process? How often? What do you talk about?

Good to have all participants contribute Goal is to update/improve process (procedure, training tool)

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Domain 3 – Performance Reporting



BCBSM asked: what are you using performance reports for?

Domain 4 - Care Management

4.4: Patient Satisfaction surveys must be trended, so some similar questions across a couple of years

Domain 6 - Test Tracking

6.7: Practices asked to show documentation of a closed loop with communication to patient

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Domain 9 – Preventive Services



9.4: Be clear who does what when asking patient about outside encounters

9.6: Written standing order protocols require physician signature annually

Domain 10 – Linkage to Community Services

BCBSM rep has now seen 2 practices so far this year on site visits that have food on hand (example: 3 days of non-perishable) because of needs. The practices worked with local food pantry to set this up.

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Domain 12 - Patient Portal



12.11: Patients actively graph and analyze self-administered tests

Domain 13 – Coordination of Care

13.4: Be able to describe phone triage process for all patient calls and how high risk identified and triaged

13.6: Have at least BCN and BCBSM CM numbers available (in guidelines)

Domain 14 – Specialist Pre-Consultation & Referral Process

14.4: Specialist referral info – BCBSM said great when patient has clear reminder for example to call PCP if haven't heard from specialist within 2 weeks; at least something that says what office will be calling them when (EX Ortho will be calling you within 2 weeks – if no call, then call PCP)

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PCMH Request Process



- Designed to help practices stay current.
- Focuses on issues NPO has seen during site visits, questions from RCRSM
- Replaces frequent, long meetings to review processes so trying to save you time
- Review and update written processes before sending if needed (hopefully routinely updated throughout the year)

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