

A publication of Michigan's State Innovation Model August 2018

In this Issue

- Program News and Updates
- Upcoming Events and Initiative Resources

About the Initiative

The Patient Centered Medical Home (PCMH) Initiative is a core component of the State Innovation Model (SIM) strategy for coordinated care delivery, focusing on the development and testing of health care payment and service delivery models in order to achieve better care coordination. lower costs, and improved health outcomes for Michiganders. For more information and resources, check out our webpage.

Contact Us

Questions can be sent to: MDHHS-SIMPCMH@michigan.gov

Links

SIM Initiative website

SIM Care Delivery webpage

SIM Population Health webpage

Welcome to the 2018 Patient Centered Medical Home Initiative monthly newsletter. Each month we will bring together all the updates, news and upcoming events relevant to PCMH Initiative Participants.

You will continue to receive other regular communications and event reminders from the PCMH Initiative. This newsletter has been developed as a method to share information in one common location. Previous editions of the newsletter can be found here.

Program News and Updates

Care Coordination Collaborative

The Care Coordination Collaborative Planning Committee is excited to announce the next virtual event on September 24 from 11:30—1:00PM. These events are designed to provide a forum for discussion, best practice sharing and problem solving for participants. All are welcome. Save the date by registering below. We will keep you up to date on agenda and speakers as they become available. We look forward to seeing even more participants at our next event!

REGISTER HERE

PCMH Initiative August 2018 Participant Compliance Audit

The two audits to be performed in August are: Utilize Dashboard and Utilize Patient Lists. Participating organizations are required to access the MDC Dashboard at least once quarterly and to download the monthly patient lists. SIM PCMH staff will check internal reports showing that organizations accessed dashboard and patient lists. Organizations who receive patient lists via sFTP are exempt from the patient lists audit.

PCMH Initiative Office Hours – "Attracting and Retaining Care Managers and Care Coordinators" September 19th

We are preparing for the upcoming PCMH Initiative Office Hours focused on the topic of "Attracting and Retaining Care Managers and Care Coordinators". If you have experience you are willing to share regarding promising approaches and /or working through barriers and finding solutions please contact Marie Beisel mbeisel@med.umich.edu or micmrc-requests@med.umich.edu.

Regional Summit Registration Now Open!

Registration is now open for all three regional summit locations! All PCMH Initiative participants can register, but space is limited at each venue so early registration is recommended to reserve your spot at the most convenient location for you!

- North: October 10 at Treetops in Gaylord
- West: October 23 at the Holiday Inn in Muskegon
- Southeast: November 8 at the Kensington Hotel in Ann Arbor

Access registration for all locations using the link here and we will notify you when it is available on the Care Delivery website. See you there!



Upcoming Michigan Data Collaborative Deliverables

New and Coming Soon

- Have you accessed the newly available Care Management and Coordination Visualizations on the Dashboard? The reports are also still available for download via SFTP.
- New fields are available on your patient lists including an updated Number of Visits to any PCP and Most Recent PCP Visit Date.
- Stay tuned for upcoming changes:
 - PCP Follow-Up After Inpatient Admission will be revised to align more closely with the recently updated Acute Hospital Admissions and remove admissions that aren't appropriate for PCP follow-up (i.e. Surgery).
 - Plans are underway to re-run 4Q17, 1Q18 and 2Q18 Percentage of Patients with Care Management reports. This will capture additional run-out beyond the standard 2 months. Also, some Medicaid Health Plans made updates to process previously rejected care management claims.

SIM PCMH Dashboard Release 5.0

MDC plans to post Release 5.0 at the end of July. It will include the following:

- Paid claims through May 2018 (Medicaid data received by 6/15/18)
- A 12-month reporting period of April 2017 March 2018
- March 2018 filtered SIM Participant File (SPF) and Provider Hierarchy data
- New Measures (See the Release Notes for the list of measures.)

Upcoming MDC Deliverables

- July 2018 Patient Lists and Provider Reports late July 2018
- Dashboard Release 5.0 late July 2018
- April 2018 Care Coordination Reports early-to-mid August 2018
- April 2018 Care Coordination Claims Detail Reports mid July 2018

You can view an up-to-date list of upcoming deliverables on the SIM PCMH page of the MDC Website.

Evaluation Updates

The SIM PCMH evaluation is underway! We are seeking volunteers to partner with us to share their patients' CCLs data, which will allow us to analyze changes in Medicaid usage and costs related to their participation in PCMH CCLs. You can find the application in the CCL Data Partnership section of the Semi-Annual Practice Transformation Report due at the end of July. Secondly, provider surveys are being administered this summer. The survey will either come to you as a CHIR evaluation survey or a PCMH provider survey (the PCMH survey is embedded in the CHIR survey). For those of you who are located in Community Health Innovation Regions (CHIRs), you only need to complete one survey, as we've streamlined our processes to minimize duplication. Finally, the Patient Experience Survey will be administered this fall. We are currently working with the evaluators on the details of the survey and how it's administered. We will communicate more details about this survey and seek your feedback in early Fall.

A Case for Rising Risk Management

The Advisory Board describes the work efforts of leading organizations and their strategies to address rising risk patients. Rising-risk patient management is challenging since it is difficult to develop strategies around a large population of individuals who may be unknown to the practice. It is estimated that 15%-35% of patients fall in the category of rising risk. Key characteristics of a rising-risk patient include: a) patient has one to two well-managed chronic conditions, b) symptoms are not severe and are ignored, c) patient has co-occurring psychosocial risk factors.

Rising-risk patients are hard to identify because of minimal symptoms and they don't always seek health care from the primary care physician. Even when patients are seen by primary care, they tend to have isolated contact with a variety of providers including the ED, urgent care or specialists.

Rising-risk patient management is a cost avoidance strategy. Every year approximately 18% of rising-risk patients will move into the high-risk category when not managed. Organizations are investing in rising-risk patient management to slow the revolving door of rising-risk patients moving into the high-risk category. Interrupting the escalation of rising risk to high risk results in avoidance of future costs and avoidance of potential complications related to the individual's chronic conditions. There are two main triggers for patients moving from a rising-risk cohort to a high-risk cohort, unpredicted exacerbation and uncontrolled disease progression. The Advisory Board states "the most common risk factors that drive escalation include undiagnosed clinical conditions, lack of patient motivation, and inadequate access to providers or other supportive services".

To develop a strategy for rising-risk population management, the initial two steps include: 1. Identify your at-risk populations by focusing on key risk factors and triggers. 2. Engage partners: patients, care takers and the community to meet the holistic needs of the individual.

To read details about the steps to develop a sustainable rising risk strategy please access the full article using the link below.

Reference: The Advisory Board, Addressing the Needs of Your Rising-Risk Patients 2017, https://www.advisory.com/research/population-health-advisor/research-briefings/2018/addressing-the-needs-of-your-rising-risk-patients

Upcoming Events and Initiative Resources

Pediatric Office Hours: Save the Date for September 13th

The third in our series of Pediatric Office Hours sessions is scheduled in September! This session is specifically designed for Pediatric practices, but all are welcome. Please bring your questions.

Date/Time: Wednesday, September 13th 12pm-1pm

Topic: To Be Determined
Presenters: To Be Determined

REGISTER HERE

MiCMRC 2018 Care Management Educational Webinars

Title: SAVE THE DATE: 2018 Update in Standards of Care for Management of Diabetes

Date and Time: Friday, July 27, 2018 - 12:30-1:30 pm

Presenter: Jill Vollbrecht, MD

This course has been approved for AMA PRA Category 1 Credits™

REGISTER HERE

Title: Advance Care Planning Conversation Basics **Date and Time:** Wednesday, August 8th 2-3 pm

Presenter: Carol Robinson DNP, MS, BSN, RN, CHPN®

Community Coordinator, Making Choices Michigan

This activity has been submitted to the Ohio Nurses Association for approval to award contact hours. The Ohio Nurses Association is accredited as an approver of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation. (OBN-001-91)

"Michigan Care Management Resource Center is an approved provider with the Michigan Social Work Continuing Education Collaborative". Approved Provider Number: MICEC 110216

This program has been pre-approved by The Commission for Case Manager Certification to provide continuing education credit to CCM® board certified case managers. The course is approved for 1.0 CE contact hour(s). Activity code: I00032397 Approval Number: 180002075 To claim these CEs, log into your CCMC Dashboard at www.ccmcertification.org

REGISTER HERE

Title: Management of Acute Exacerbation of COPD **Date and Time:** Wednesday, August 22nd 2-3 pm **Presenter:** Catherine Meldrum PhD MS RN CCRC

Clinical Nurse IV, Lung Volume Reduction Surgery Program Coordinator, Department of Internal Medicine,

Division of Pulmonary & Critical Care, Michigan Medicine

This activity has been submitted to the Ohio Nurses Association for approval to award contact hours. The Ohio Nurses Association is accredited as an approver of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation. (OBN-001-91)

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REGISTER HERE

For questions, please submit to micmrc-requests@med.umich.edu

MiCMRC Approved Self-Management Course Registration

To access the list of the MiCMRC approved Self-Management Support <u>courses</u>. The list of MiCMRC approved Self-Management Support Courses provides a detailed summary of each course, with associated objectives, location, cost and more.

Additionally, MiCMRC has collected resources for Self-Management Support including: websites of interest, publications, tools, videos, and even patient materials. MiCMRC's "Self-Management Support Tools and Resources" document offers an at a glance list and summary of these resources, along with descriptions and website links for quick access. Click here for "Self-Management Support Tools and Resources".

Both of these documents can also be accessed on the MiCMRC website home page http://micmrc.org/

<u>Upcoming Complex Care Management Course Dates and Registration</u>

August 6-9 | Dimondale | REGISTER HERE | Registration deadline: August 2, 2018

September 10-13 | Lansing | REGISTER HERE | Registration deadline: September 6, 2018

NOTES: If you have 15 or more Care Managers in your area and would like the MiCMRC team to provide a regional training at your location please submit your request to: micmrc-ccm-course@med.umich.edu

For questions please contact: <u>micmrc-ccm-course@med.umich.edu</u>

For More Information

www.michigan.gov/SIM | MDHHS-SIMPCMH@michigan.gov

