

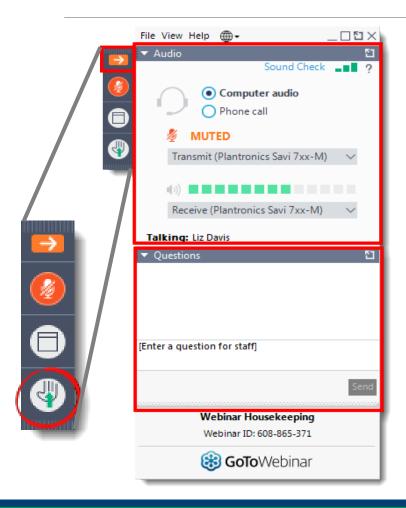
Quarterly Update

STATE INNOVATION MODEL

PATIENT CENTERED MEDICAL HOME INITIATIVE

10.16.2019

Housekeeping: Webinar Toolbar Features



Your Participation

Open and close your control panel

Join audio:

- Choose Mic & Speakers to use VoIP
- Choose **Telephone** and dial using the information provided

Submit questions and comments via the Questions panel

Note: If time allows, we will unmute participants to ask questions verbally.

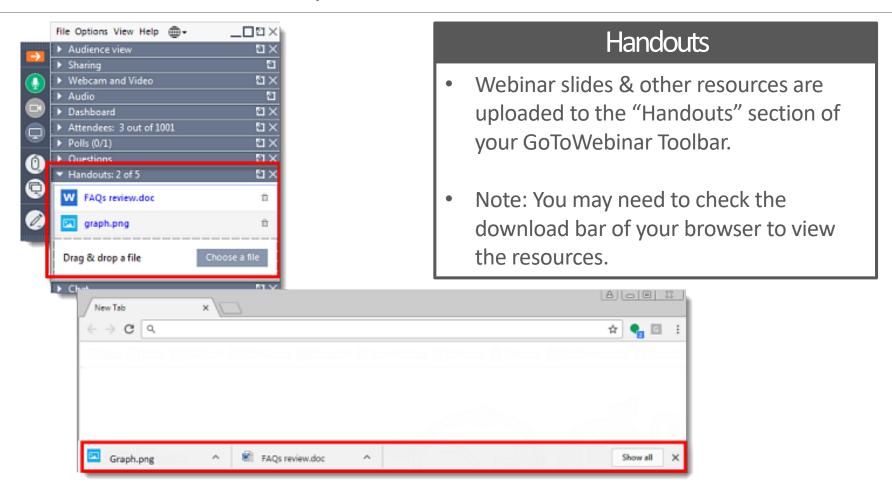
 Please raise your hand to be unmuted for verbal questions.

NOTE:

In the event that there is not time to answer questions live, all questions submitted via the Question Function of the GoToWebinar toolbar will be recorded, an Q & A generated and posted to our webpage



Housekeeping: Webinar Resources/Handouts





MDHHS Team Members:



Katie Commey, MPH SIM Care Delivery Lead



Sandra Greyerbiehl

Quality Payment Specialist



Lyndsay TylerDepartmental Specialist



Nell NewtonProject Manager

	MI-SIM Care Delivery Governance Team			
Kathy Stiffler	Medicaid Care Management and Quality Assurance, Deputy Director			
Brian Keisling	Medicaid Operations and Actuarial Services, Bureau Administrator			
Kim Hamilton	Managed Care Plan, Division Director			
Penny Rutledge	Actuarial Division, Manager			
Theresa Landfair	Managed Care Plan Division, Specialist			
Tom Curtis	Quality Improvement and Program Development, Section Manager			



PCMH Initiative Team: U of M Team Members

Clinical Values Institute



Veralyn Klink Administrator



Diane Marriott
Director



Amanda First-Kallus, MHSA Analyst



Yi Mao Analyst

Michigan Data Collaborative



Jessie Chen
Application Systems
Analyst / Programmer



Alice Stanulis

Manager, Michigan Data

Collaborative



Susan Stephan Sr. System Analyst



Justin BielakBusiness Systems Analyst

Michigan Institute for Care Management and Transformation



Marie Beisel Administrative Manager, Sr. Healthcare



Curriculum Designer



Scott Johnson
Int. Project Manager



Sarah Fraley, Int.
Project Manager





Program Updates

LYNDSAY TYLER

KATIE COMMEY

Upcoming Events: October – December 2019

Date	Type of Event	Topic	Registration Link
October 22 1pm – 2pm	Office Hours	SDoH - Technical	REGISTER HERE
November 7 11 am – 12 noon	MICMT webinar	Understanding and Managing Anxiety in Children and Adolescents	REGISTER HERE
November 12 8:30 – 3:30	SIM PCMH Initiative Annual Summit	In-person Event	REGISTER HERE
December 10 12:30 – 1:30	December Office Hour	TBD	

TBD



Upcoming Events: 2019 Summit

THEME: "Sustaining the Gains Through Smart Delivery and Cost-Effective Care"

Date: November 12th (Full day from 8:30 to 3:30)

Approach: One central summit for all

Location: Kellogg Center, Lansing MI

Who Should Attend: Care Managers and Coordinators, Practice Management Staff, PO Administrators, and others from participating SIM practices, managing organizations or CHIRs



2019 Summit Pre-Polling Results

When you think about the trends that will most impact Medicaid in the next ten years, of the following, which will have the greatest importance?

- 1. Social Determinants of Health
- 2. Moving from volume to value-based payment systems
- 3. Patient engagement

Of the following, what is the <u>biggest area of improvement</u> your organization has made in your State Innovation Model (SIM) PCMH work?

- 1. Closing gaps in social determinant of health needs for patients
- 2. Building relationships with community resources
- 3. Closing gaps in clinical care (care plan follow-through, preventive testing, etc.) for patients



2019 Summit Pre-Polling Results cont.

Of the following, what remains the <u>biggest challenge</u> for your practice or organization in the State Innovation Model (SIM) PCMH work?

- 1. Alignment among plan guidelines and requirements in the interest of easing practice burden but still generating the information plans need for their operations
- 2. Closing gaps in social determinant of health needs for patients
- 3. Creating innovative ways to partner with patients

When you consider your work on SIM Social Determinants of Health (SDoH) specifically, how valuable do you consider your practice/PO's SDoH efforts to the care that you provide your patients?

90.36% of respondents said this work was of moderate or high value to them.



2019 Summit Agenda Preview

- Plenary: "Sustaining the Gains Through Smart Delivery and Cost-Effective Care"
- Lessons from a Partner State: Building Strong Patient Care Partnerships
- Healthier Communities: What Works to Make Real Change
- Acting on SDoH Data: Beyond Screening
- SIM Evaluation Results
- Adverse Events: From Trauma to Resiliency
- Adolescent Depression: Presentation, Diagnosis, and Treatment
- Medicaid Health Plan (MHP) Panel
- Next Steps and Alternative Payment Models



Care Delivery

The Patient Centered Medical Home (PCMH) Initiative is the core component of the State strategy for coordinated care delivery, focused on developing and testing service delivery care coordination, lower costs, and improved health outcomes for Michiganders. The SIM upon the principles of a patient-centered medical home that generally define the model re organization. Value is placed on core functions of a medical home, such as enhanced acc and expanded care teams that focus on comprehensive coordinated care. To increase val healthcare practices to provide high-quality and cost-efficient care, SIM is also working to alternative payment models (APMs).

This initiative is aligned with the overall SIM Care Delivery goals of:

- Championing models of care that engage patients using comprehensive, whole-per accessible and high-quality services centered on an individual's health and social w
- Supporting and creating clear accountability for quantifiable improvements in care provening well as health outcomes.
- Creating opportunities for Michigan primary care providers to participate in increasi
 If you have questions about the PCMH Initiative, please contact the SIM team at MDHHSSIMPCMH@michigan.gov.

Newsletters

April 2019 1 March 2019 1 February 2019 1 January 2019

Upcoming Events

- 2019 Participant Guide Release
- 2019 Agreement Release
- View all events

2019 SIM PCMH Initiative Summit

Resources

2019 PCMH Initiative Summit

REGISTER HERE

November 12: Kellogg Center East Lansing, Michigan

Summit Agenda

Continuing Education Nursing and Social Work 5.5 CE Contact Hours

"This continuing nursing education activity was approved by the Ohio Nurses Association, an accredited approver 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

For CE questions email micmt-requests@med.umich.edu

Our Care Delivery website has a dedicated page for our PCMH Initiative Annual Summit. View supplemental documents and Nursing, Social Work, CCMC Continuing Education Credits information.



Participation Guide Updates

v3 Highlights

Added Appendix: SDoH Maturity Checklist

v4 Update Pending

• CM/CC Training – financial support



Quarterly Payment Updates

3Q19 (July – September) Highlights:

- Care Management and Coordination PMPMs see <u>2019 Participation Guide</u>.
- Payments will be made by each individual Medicaid Health Plan, the PCMH Initiative will send a summary email with details of expected payments
- Anticipated Payment Timeframe: MHPs should make 3Q19 payments to participants in late
 November

Reminders:

- 2018 adjustment patient lists were posted to SIM PCMH Dashboard on September 19 (reference for 2Q19 payment reconciliations for 2018 PCMH patients who were identified as deceased, incarcerated or living in a Skilled Nursing Facility)
- Ensure practice and provider updates are submitted promptly using the online Change Form.



Close Out

Working on defining close-out process

Significant activities:

- Data destruction
- Dashboard access
- Final administrative reporting

Communication Pathways

- Newsletter Articles
- Key contact communications
- Dashboard communications





Support & Learning

SCOTT JOHNSON SARAH FRALEY

Pediatric Curriculum Planning Work Group

Pediatric Webinar Series	
Topic: ADHD Medication Education	Recorded *
Presenter: Tiffany Munzer, MD	
Topic: Pediatric Asthma	Recorded*
Presenter: Tisa Vorce MA, RRT	
Topic: Pediatric Depression	Recorded*
Presenter: Thomas Atkins, MD	



^{*}you can also access the webinar recordings via https://micmrc.org/webinars

MICMT CCM course 2019 Update

June 2019 and forward – MICMT Complex Care Management Course (CCM) has a new format:

• A blended learning activity with self-study modules and a one day in person training

Successful completion of the CCM course:

- Self-study modules (web based)
- One day training in person 8 hours
- MICMT CCM global course post test, achieve a passing score of 80%, and complete the course evaluation.

For MICMT CCM course information/registration: www.micmrc.org or click here



MICMT CCM Course Approved Statewide Trainer Organizations

June 2019, MICMT launched a standardized Complex Care Management course curriculum and a Statewide Trainer application.

The MICMT CCM course Statewide Trainer application is used to understand whether or not a specific training program may be approved as meeting training criteria for Michigan payer programs. This extends to BCBSM PDCM program, Priority Health Care Management Program and the MDHHS State Innovation Model (SIM) Patient Centered Medical Home (PCMH) Initiative.

MDHHS recognizes the MICMT approved CCM courses as meeting the SIM PCMH Initiative Care Manager and Coordinator initial training requirements.

A list of MICMT Approved CCM Course Trainer Organizations to date is available on the micmrc.org web site; click here



MICMT SMS Course 2019 Updates

October 2019 and forward – MICMT Self-Management Support (SMS) course includes existing Michigan SMS trainers and new MICMT approved SMS Trainer Organizations

MICMT SMS course:

A blended learning activity with self-study modules and a one day in person training

Successful completion of the SMS course:

- Self-study modules (web based)
- One day training in person 8 hours
- MICMT SMS global course post test, achieve a passing score of 80%, and complete the course evaluation.
- 30-minute Virtual Practice Session with MICMT SMS Trainer

For MICMT SMS course information/registration: www.micmrc.org or click here



MICMT SMS Course Approved Statewide Trainer Organizations

The MICMT SMS course Statewide Trainer application opened September 3, 2019

The MICMT SMS course Statewide Trainer application is used to understandwhether or not a specific training program may be approved as meeting training criteria for Michigan payer programs. This extends to BCBSM PDCM program, Priority Health Care Management Program and the MDHHS State Innovation Model (SIM) Patient Centered Medical Home (PCMH) Initiative.

MDHHS recognizes the MICMT approved SMS courses as meeting the SIM PCMH Initiative Care Manager and Coordinator initial training requirements.

A list of MICMT Approved SMS Course Trainer Organizations to date is available on the micmrc.org web site; <u>click here</u>





Participant Reporting

AMANDA KALLUS NELL NEWTON SUSAN STEPHAN

Upcoming Compliance: *Schedule*

Report/Audit	Due Date
Final Progress Report	10/31/2019
Audits: Care Management Initial and Longitudinal Learning, Utilize Dashboards, Utilize Patient Lists	11/2019
Final SAPTR	1/15/2020



Upcoming Compliance: Semi-annual Practice Transformation Report

Anticipated Release Date: December 13, 2019 Due: January 15, 2020

Content:

- 1. Clinical-Community Linkages (CCL), with the following sub-sections:
 - 1.1 Assessing social determinants of health
 - 1.2 Linkage methodology
 - 1.3 Quality improvement activities
- 2. Population Health Management
 - 2.1 Ensuring engagement of clinical and administrative leadership
 - 2.2 Empaneling patient population
 - 2.3 Using feedback reports

Note: Participant Key Contact receive an email with report link and supplemental excel document in December 2019. The PO will complete the report on behalf of all participating practices.



Upcoming Compliance: Clinical-Community Linkages

CCL Data Partnership

Regular Initiative reporting provides valuable information on how the provider community is executing screening and linking requirements. The CCL Data Partnership was designed to provide details on the individual connection and solution to better understand the link between social needs and individual health and wellbeing.

- 11 PCMH Initiative Participants submitting Medicaid-only SDoH data
- All historical production files received
- Final production data file submissions due by October 31, 2019



Upcoming MDC Deliverables

DASHBOARD RELEASE 10

Final dashboard release targeted for the end of October

Participating organization's final measure results used for the Performance Incentive Program (PIP)

Reporting Period July 2018 – June 2019

Patients and provider attribution from June 2019

REPORTS

3Q19 (July – September) Patient Aggregate Report

October Patient and Provider Lists

2Q19 CM/CC Reports

- Final quarter that applies to Care
 Management performance measurement
- See next slide on True-Up processing

May – July 2019 CM/CC Reports



True-Up processing for CM/CC Reports

Re-Run CM/CC Reports that apply to 2019 Performance Measurement:

4Q18: Patients with CM/CC procedures and service dates Oct – Dec 2018

1Q19: Patients with CM/CC procedures and service dates Jan – Mar 2019

2Q19: Patients with CM/CC procedures and service dates Apr – Jun 2019

Incorporate additional claims that MDC received after original reporting was provided

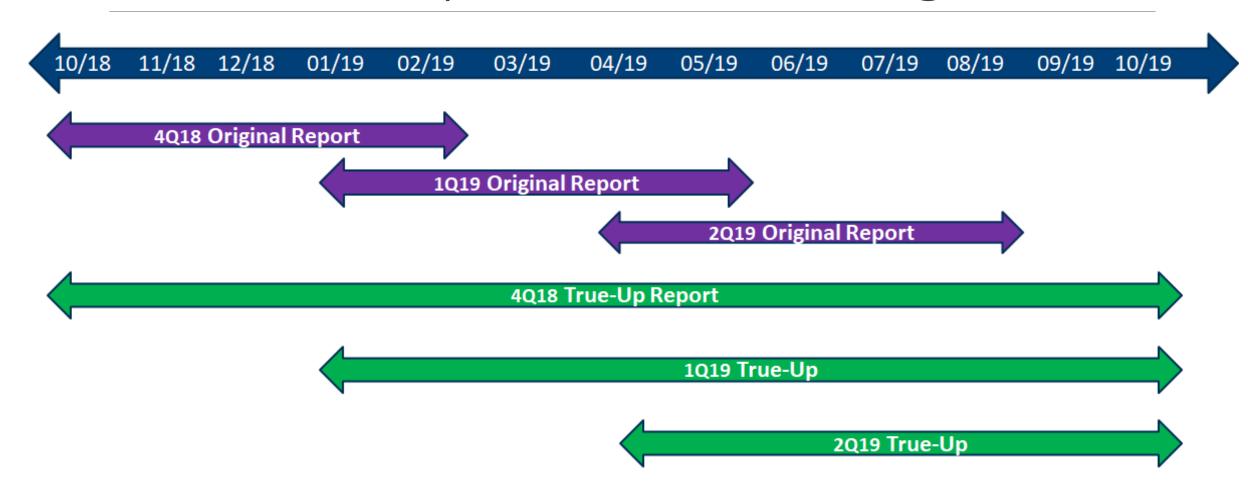
Include claims data MDC received through October 2019

Targeted for early December 2019

True-Up results utilized for final CMIR calculations



Visual True-Up CM/CC Processing





Calculating Performance Rate

Patients with CM/CC in 4Q18 + 1Q19 + 2Q19 reports

AVERAGE Population (4Q18, 1Q19 and 2Q19 reports)

× 100 =

Performance Rate

EXAMPLE:

Participant Organization	April 2019	July 2019	October 2019	2019 Aggregate Performance	2019 Performance Rate
Participant 1	<u>173</u> 35,051	<u>201</u> 35,419	<u>222</u> 34,426	<u>596</u> 34,965	1.70%
Participant 2	<u>81</u> 4,891	<u>83</u> 5,196	<u>61</u> 5,438	<u>225</u> 5,145	4.37%
Participant 3	<u>62</u> 1,444	<u>37</u> 1,460	<u>39</u> 1,489	<u>138</u> 1,464	9.43%
Participant 4	<u>7</u> 4,439	<u>16</u> 4,656	<u>39</u> 4,967	<u>62</u> 4,687	1.32%

BENCHMARK

2.5%



Q419 (Oct - Dec) Payment Details

- Final Initiative Payment
- •Timeline End of February 2020
- Highlights
 - PIP Base and Bonus (if applicable) Incentive Awards
 - Final CM/CC payments including CMIR reconciliations if applicable
- •Summary CM/CC and PIP communications will be sent to Primary and Financial contacts late October early November
- •All PO/Provider changes must be submitted by November 25th



SIM PCMH Initiative Evaluation Components

Evaluation Activity	Purpose	Target Audience	Timeline	Owner
Provider Survey (PO reps, PCPs, CM/CC, Office Managers) Identify attitudes and experiences of health providers who participate in Clinical Community Linkages (CCLs) directly or indirectly	 PCMH Initiative Participants identified as members or partners of a CHIR 	May – July 2018	MSU •	
	 PCMH Initiative Participants in CHIRs NOT identified as members or partners 	Aug. 1-31, 2018	МРНІ 🔷	
		 PCMH Initiative Participants outside of CHIRs 	Aug. 1-31, 2018	МРНІ 🔷
Patient Experience Survey	Identify experiences of patients who participate in CCLs	 Sample of patients from PCMH Initiative Participants 	Fall, 2018	CHEAR
CCL Data Partnership (optional)	Connect individual-level CCL data (Social Determinant of Health screening and linkages) to Medicaid utilization and costs (claims data from MDC)	 Patients within PCMH Initiative participants selected to participate. 	Final quarterly file submissions due 10/31/19	MPHI In pr





Continuity of Best Practices

KATIE COMMEY

SANDRA GREYERBIEHL

FY20 Budget Update

Public Act 67 of 2019 signed September 30, 2019:

- Secured for and limited to FY20
- Amount: \$3 million
- Purpose: Support the continuation and evaluation of Community Health Regions



Upcoming Opportunities

MDHHS is working with CMS to pursue potential funding opportunities for PCMH practices and Physician Organizations within the final SIM program period:

- 1. Capacity Building: Clinical-Community Linkages Data Sharing
- 2. Practice Transformation: Behavioral Health Integration

Highlights:

- Application would be required
- Open to PCMH practices and POs statewide (not limited to current SIM PCMH Initiative participants)
- Designed to support enhanced coordination efforts across sectors
- Anticipated Application(s) release: early to mid-November
- Anticipated Application(s) close: mid to late November
- Anticipated Award Announcement: early December

PLEASE NOTE: Funding for these opportunities are contingent upon CMS approval. Completion of the application does not ensure approval, selection for, or payment.



State-preferred PCMH Model

Michigan's Medicaid Managed Care Plan Division (MCPD), in collaboration with Medicaid Health Plans (MHPs) have been developing a set of PCMH program parameters for integration into MHP future payment/contract models.

Highlights:

- Funds will be added to MHP capitation rates to directly administer preferred PCMH programs and care management/care coordination services.
- Developed a measure to assess utilization of care management/care coordination services by MHP members in the State.
 - Meeting the utilization targets will be linked to MHPs' ability to earn bonus payments beginning in FY 2020.



State-preferred PCMH Model 2020 Interest Application

MDHHS facilitated a central application process in partnership with the MHPs to identify provider interest in participating in MHP PCMH programs. The application information been transferred to the health plans.

Application Results:

- 73 applications
- 870 Practices
- 560 Meet Minimum Eligibility Requirements
- 114 Contingent Status pending MHP determination
- 289 Current SIM PCMH Initiative Participants

<u>Notification</u>: Applicants received communication from <u>MDHHS-SIMPCMH@Michigan.gov</u> indicating status communicated to MHPs (Eligible, Contingent, Fail) with respect to minimum eligibility requirements*.

<u>Contracting</u>: MHPs will contract directly with providers. Refer to MHP contact list which has been updated to include State-Preferred PCMH Model contact for each health plan



^{*}additional advanced practice requirements will be required for consideration, MHPs may have additional criteria beyond MDHHS' preferred model program requirements

Care Management & Coordination Evolution

State Innovation Model

Providers receive CM/CC \$ from MHPs for SIM PCMH Initiative participation and requirements as directed by MDHHS

- Requirements:
 - Accreditation
 - Advanced Practice Activities
 - HIE Participation
 - Social Needs Screening & CCL
 - Quality & Utilization Metrics

FY2020

- MHPs will receive added Capitation \$ for CM/CC Services
- MHPs will contract with providers to deliver CM/CC Services
- Providers will meet MHP requirements
- Accreditation and/or Practice Requirements
- Quality/CM/CC Performance
- Panel Size



FY20 Medicaid Health Plan Requirements CM/CC Utilization Measurement

CM/CC Utilization Measures based on

- SIM CM/CC code set
- All Managed Care Medicaid populations, not specific to age, diagnosis, or inclusion in SIM
- FY 16 FY 18 data
 - # Codes Submitted
 - # Beneficiaries Served



CM/CC Utilization Measurement *FY20 Code Set*

Code	Description
G9001	Comprehensive Assessment
G9002	In-person CM/CC Encounters
G9007	Care Team Conferences
G9008	Provider Oversight
98966	Telephone CM/CC Services
98967	Telephone CM/CC Services
98968	Telephone CM/CC Services
98961	Education/Training for Patient Self-Management
98962	Education/Training for Patient Self-Management
99495	Care Transitions
99496	Care Transitions
S0257	End of Life Counseling



FY20 MHP CM/CC Utilization Measurement CMCC Codes (Volume) Benchmark

Measure	Benchmark	
# of Codes Submitted per 1,000 MM	38 Codes per 1,000 Member Months	
Health Plan Specific: # of Codes submitted per 1,000 MM	> = Jan – Sept 2018 Performance	



FY20 MHP CM/CC Utilization Measurement CMCC Codes (Volume) Benchmark: HP Specific

Health Plan	FY 2018	Jan2018 – Sept 2018
AET	772	619
BCC	11,972	9,575
TRU	47	35
MCL	9,547	7,507
MER	23,648	19,564
HAP	117	79
MOL	18,408	14,771
PRI	22,312	16,675
THC	1,754	1,410
UNI	6,514	5,319
UPP	1,063	765
Total	96,154	76,319



FY20 MHP CM/CC Utilization Measurement Unique Beneficiaries Served Benchmark

Measure	Benchmark	
Percentage of Beneficiaries Served	1.7% of beneficiaries	
Health Plan Specific: Percentage of Beneficiaries Served	> = Jan – Sept 2018 Performance	



FY20 MHP CM/CC Utilization Measurement Unique Beneficiaries Served Benchmark-HP Specific

Health Plan	FY 2018	Jan2018 – Sept 2018
AET	400	323
BCC	5,187	4,313
TRU	23	19
MCL	4,352	3,654
MER	11,236	9,600
HAP	54	45
MOL	7,779	6,503
PRI	8,397	6,709
THC	914	746
UNI	3,366	2,805
UPP	540	397
Total	42,248	35,114



Next Steps Roles and Responsibilities

What MCPD is doing	What MHPs should consider	What Providers should consider	
Folding directed payments (from SIM) into MHP rates for FY 20	Identify the providers in your network you anticipate getting value from for your investment; determine your payment methodology	 □ Connect with MHPs to discuss value proposition your organization brings to their network to support meeting CM/CC performance requirements □ Maintain/exceed CM/CC performance 	
Providing common PCMH parameters for MHPs to follow in contracting with PCMHs starting CY 20	Add state-preferred PCMH parameters to provider contracts incorporating PCMH and care management/care coordination services		
Measuring utilization of care management and care coordination using encounter codes to ensure utilization consistent with historic Medicaid investment	Ensure a balance between volume of providers in network with PCMH parameters in contract, enticing payment methodology for providing services, and engaged providers who will provide services	to demonstrate value proposition	
Looking at standardizing quality measures for PCMH model and/or by region	Align with quality measures at the PCMH level to the extent possible		



Questions and Additional Resources

MDHHS-SIMPCMH@michigan.gov

Thank you for joining us today!

www.michigan.gov/SIM

(SIM Comprehensive <u>Summary</u>; Newsletters; Operational Plan, <u>CHIR</u> info., <u>PCMH</u>, etc.)





Resources



Care Delivery Website



Date: June 15, 2018

Time: 11:30 AM - 01:00 PM

Add to Calendar: Google YYahoo MSN/Hotmail/Live

REGISTER HERE

Selecting an event in the calendar will allow you to register and add it to your calendar with one click!



Care Delivery Resources

PCMH Initiative newsletters, materials shared at Care Delivery and PCMH Initiative events, and Care Delivery component background materials can be found below.

If you have questions about the PCMH Initiative, please contact the SIM team at MDHHS-SIMPCMH@michigan.gov

To ensure you're viewing the correct resources make sure you're on the Care Delivery page.

Newsletters

Event Materials

- · May Office Hour: Care Management and Coordination Benchmarks
- Pediatric Office Hours: Engaging Families Common Challenges Across the Chronic Conditions
- 2018 PCMH Initiative Launch Webinar
- 2017 December Quarterly PCMH Initiative Updates
- 2018 April Quarterly PCMH Initiative Updates
- January Office Hours: Integrated Service Delivery
- February Office Hours: Michigan 2-1-1, Basic Concepts and Utilization
- March Office Hours: Care Management and Coordination Tracking Codes
- April Office Hours: Evaluation

Resources

Care Delivery

Calendar

2017 Resources

May Office Hour: Care Management and Coordination Benchmarks

May 16: Webinar Slides | Webinar Recording



Click on an event listed in the drop down menu and you will be able to access any available materials related to it: webinar slides, webinar recording, any supplemental documents.



Practice Support and Learning Opportunities: *Monthly Newsletters*

Distributed via GovDelivery & on our website!

- To sign up for the distribution:
 - Email us at MDHHS-SIMPCMH@michigan.gov, or
 - Sign up for <u>MDHHS subscriptions</u>: when managing your "subscriptions" select State Innovation Model Patient Centered Medical Home Initiative"

Will be released late month for the following month (ex. February Newsletter will be released in late January)

Designed to have upcoming events, training information, topics of interest, participant highlights, suggested resources and other pertinent information

Suggestions always welcome, please email them to MDHHS-SIMPCMH@Michigan.gov



SIM PCMH Initiative Newsletter

A publication of Michigan's State Innovation Model

December 2017

In this Issue

- Initiative Announcements
- Upcoming EventsMonthly Calendar

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 multi-payer 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 Welcome to the 2017 Patient Centered Medical Home Initiative, and the eleventh release of our monthly newsletter. Each month we will bring together all the updates, news and upcoming events relevant to PCMH Initiative Participants. Additionally, we will provide updates on other happenings across the State Innovation Model.

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

PCMH Initiative Quarter 4 Progress Report

The PCMH Initiative Quarter 4 Progress Report is expected to be released on December 21, 2017. Submission deadline is Wednesday, January 31, 2018 by 5:00pm. The link to the electronic submission will be distributed to your organization's key contact. You can preview the requirements and instructions to complete report in the report guide. The guide can be found under "Resources" at the main PCMH Initiative website.

PCMH Initiative 2018 Launch

We look forward to connecting with at least one representative from each Physician Organization or Practice at our PCMH Initiative 2018 Launch webinar on January 9, 2018 from 12:00-1:00pm. Topics covered will include a recap of 2017, an overview of 2018, an outline of resources available to participants, a guide to PCMH Initiative team members and who to contact, reporting requirements including the 2018 Practice Self-Assessment, and a time for questions and answers. Register to reserve your spot. See you there! Please Note: participation in this webinar is a requirement of the PCMH Initiative.



MiCMRC is now MICMT

On January 1, 2019 the Michigan Care Management Resource Center (MiCMRC) along with the Michigan Pharmacists Transforming Care and Quality (MPTCQ) joined together to create a new organization called the Michigan Institute for Care Management and Transformation (MICMT).

MICMT will:

- convene thought leaders, care managers, and PO leaders throughout the state to support collaboration and disseminate best practices
- support the development and implementation of best-practice infused care management strategies within Michigan POs
- develop and maintain a library of materials, self-learning modules, and training opportunities that support the programs and goals described above
- align efforts along a common set of success metrics, which include both outreach and outcomes (quality/ utilization) metrics, and provide evaluation of those metrics at a PO and state level

For questions please contact: www.micmt-requests@med.umich.edu



Michigan Institute for Care Management and Transformation (MICMT): Webinars, E—Learning and Resources



Registration for MiCMRC webinars: http://micmrc.org/webinars



2019 Self-Management Training Options

Class availability and the number of training slots may vary at each organization. If classes with a particular vendor are full, you will be put on a wait list or can explore availability at the other organizations.

The links for each organization are:

- Integrated Health Partners (IHP) based in Battle Creek
 - http://www.integratedhealthpartners.net/events
 - To be placed on a wait list, contact: Emily Moe | moee@integratedhealthpartners.net | Phone: 269-425-7138.
- Michigan Center for Clinical Systems Improvement (Mi-CCSI) based in Grand Rapids
 - https://www.miccsi.org/training/upcoming-events/
 - To be placed on a wait list, contact: Amy Wales | <u>amy.wales@miccsi.org</u> | Phone: 616-551-0795 ext. 11
- Practice Transformation Institute (PTI) based in Southfield
 - http://www.transformcoach.org/care-manager-training/
 - To be placed on a wait list, contact: Yang Yang | yyang@transformcoach.org | Phone: 248-475-4839

For "At a Glance" information about each organization's Self-Management training visit: http://micmrc.org/

