First Steps: Assessing Your Practice's Medical Home IQ







Elaine M. Skoch, RN, MN, EMBA October 19, 2008



What is your Medical Home IQ?









In a nutshell...



Where does our practice align with the medical home model?



What areas of the medical home model do we need to work on in our practice?



How do we take our practice from where it is today to where we want it to be?











(C) MHIQ/welcome.cfm











TransforMED Home > MHIQ Assessment



What does your Medical Home look like? A jumble of unconnected pieces or a coherent structure?

Find out where you stand on the journey to becoming a Medical Home by measuring your practice against the TransforMED Medical Home IQ Assessment's 8 core sets of competencies or "modules".



The TransforMED MHIQ makes it easy to benchmark your practice's current performance. Answer a dozen or so short questions and get your current score in each of the eight areas, along with recommendations based on that score. Read more about the MHIQ.

NCQA PPC-PCMH™ Recognition Yardstick

When you have completed all 8 modules, you may also elect to compare your MHIQ answers to the NCQA PPC-PCMH™ Standards— a national recognition program based on the patient centered medical home.

Scoring

Click here to learn more about how TransforMED scores the MHIQ and relates the MHIQ questions to the NCQA PPC-PCMH™ Must-Pass Standards.

The TransforMED Medical Home Model

- Complete the 8 modules in any order, at your own pace. Some modules might take as little as 15 minutes to finish.
- If you start a module, but can't finish it right now, you can choose to continue later and even set an email reminder for yourself. When you return, you can continue that module right where you left off.
- An at-a-glance overview gives you feedback on which modules you've completed, which are in progress and which haven't been begun.
- Your scores are all saved and we even provide a progress log so you can track your improvements.

Log in:

Your Email UserID:

Password:

Forget your password?

Log In

New Account

Create an account and begin the MHIQ.

There are numerous benefits to registration:

- · It's quick and easy to sign up
- · Save and review your scores and resources
- · Save and return to where you left off
- · Re-take modules and track your improvement in your Progress Log
- · Set daily, weekly or monthly email reminders to stay on track with incomplete modules

Why do I need to create an account?

In order for the MHIQ to store your responses and track your improvement in the database, you must be logged in to your account. Registration is quick and easy and only takes about a minute. Click here to create a new account now.

TransforMED respects your privacy.

Welcome Page

Transfor (ED)* Patient Centered Medical Home

Access to Care & Information

- · Health care for all
- · Same-day appointments
- · After-hours access coverage
- · Lab results highly accessible
- · Online patient services
- · e-Visits
- · Group visits

Practice Services

- Comprehensive care for both acute and chronic conditions
- · Prevention screening and services
- · Surgical procedures
- · Ancillary therapeutic & support services
- · Ancillary diagnostic services

Care Management

- · Population management
- Wellness promotion
- · Disease prevention
- · Chronic disease management
- · Care coordination
- · Patient engagement and education
- · Leverages automated technologies



A continuous relationship with a personal physician coordinating care for both wellness and illness

- Mindful clinician-patient communication: trust, respect, shared decision-making
 - · Patient engagement
 - Provider/patient partnership
 - Culturally sensitive care
 - Continuous relationship
 - Whole person care

Practice Management

- · Disciplined financial management
- · Cost-Benefit decision-making
- · Revenue enhancement
- · Optimized coding & billing
- · PersonneVHR management
- · Facilities management
- · Optimized office design/redesign
- · Change management

Health Information Technology

- · Electronic medical record
- · Electronic orders and reporting
- · Electronic prescribing
- · Evidence-based decision support
- · Population management registry
- · Practice Web site
- · Patient portal

Quality and Safety

- · Evidence-based best practices
- · Medication management
- · Patient satisfaction feedback
- · Clinical outcomes analysis
- · Quality improvement
- · Risk management
- · Regulatory compliance

Continuity of Care Services

- · Community-based services
- Collaborative relationships Hospital care

Behavioral health care

Maternity care

Specialist care Pharmacy

Physical Therapy

Case Management

Practice-Based Care Team

- · Provider leadership
- · Shared mission and vision
- · Effective communication
- · Task designation by skill set
- · Nurse Practitioner / Physician Assistant
- · Patient participation
- · Family involvement options

PCMH Model Comparison

TransforMED

- Access to Care & Information
- Practice Services
- Care Management
- Continuity of Care
- Patient Centered Personal
 Medical Home

NCQA

- Access &Communication
- Patient Tracking & Registry Function
- Care Management
- Patient Self-Management



Model Comparison (cont.)

TransforMED

- Practice-Based Team Care
- Quality and Safety
- Health Information Technology
- Practice Management

NCQA

- Electronic Prescribing
- Test Tracking
- Referral Tracking
- Performance Reporting & Improvement
- Ad. Electronic Communications



PPC-PCMH Content and Scoring

Standard 1: Access and Communication A. Has written standards for patient access and patient		Pt
	Has written standards for patient access and patient communication**	4
B.	Uses data to show it meets its standards for patient access and communication**	5
		9
Standard 2: Patient Tracking and Registry Functions		Pt
A.	Uses data system for basic patient information (mostly non-clinical data)	2
B.	Has clinical data system with clinical data in searchable	
C.	data fields Uses the clinical data system	3 3
D .	Uses paper or electronic-based charting tools to	6
	organize clinical information**	
E.	Uses data to identify important diagnoses and	4
F.	conditions in practice** Generates lists of patients and reminds patients and	3
٠.	clinicians of services needed (population management)	\vdash
		21
Standard 3: Care Management		
Α.	Adopts and implements evidence-based guidelines for three conditions **	3
B.	Generates reminders about preventive services for	4
	clinicians	
C. D.	Uses non-physician staff to manage patient care Conducts care management, including care plans,	3
٥.	assessing progress, addressing barriers	
E.	Coordinates care//follow-up for patients who receive care	5
	in inpatient and outpatient facilities	20
Standard 4: Patient Self-Management Support		
A.	Assesses language preference and other communication	Pt
	barriers	2
B.	Actively supports patient self-management**	4
		6

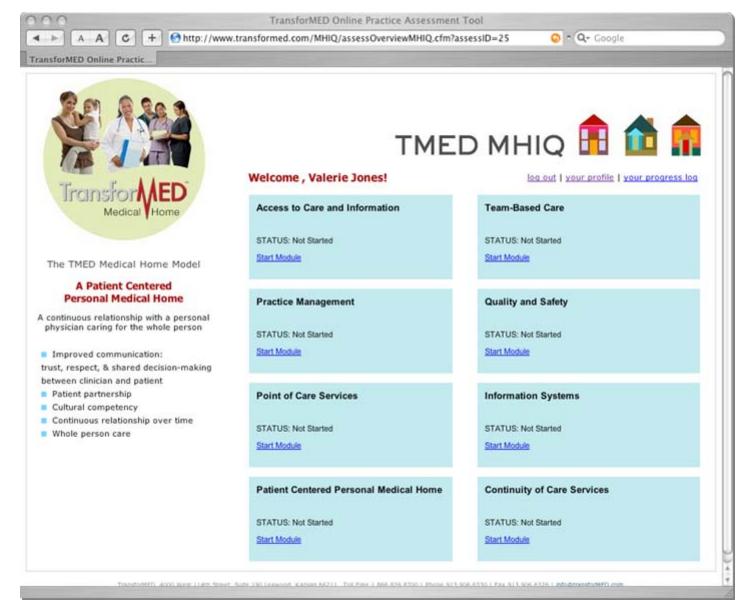
Star s A. B. C.	ndard 5: Electronic Prescribing Uses electronic system to write prescriptions Has electronic prescription writer with safety checks Has electronic prescription writer with cost checks	Pts 3 3 2
		8
Standard 6: Test Tracking		
s A.	Tracks tests and identifies abnormal results systematically**	Pts 7
В.	Uses electronic systems to order and retrieve tests	6
	and flag duplicate tests	13
-		PT
Sta	The state of the	
	system**	4
Standard 8: Performance Reporting and Improvement		Pts
Α.	Measures clinical and/or service performance by physician or across the practice**	3
В.	Survey of patients' care experience	3
C.	Reports performance across the practice or by physician **	3
D.	Sets goals and takes action to improve performance	3
E.	Produces reports using standardized measures	2
F.	Transmits reports with standardized measures	1
	electronically to external entities	15
Standard 9: Advanced Electronic Communications		
A.	Availability of Interactive Website	1
\$ B.	Electronic Patient Identification	2
C.	Electronic Care Management Support	1
		4

**Must Pass Flements

NCQA PPC-PCMH Summary

- 9 standards; 100 points total
- 30 elements
- 10 Must Pass elements
- Recognition at three different levels
 - Level I: 25 points and 5 Must Pass Elements
 - Level II: 50 points and 10 Must Pass Elements
 - Level III:75 points and 10 Must Pass Elements





Module Identification







A continuous relationship with a personal physician coordinating care for both wellness and illness

- Mindful clinician-patient communication: trust, respect, shared decision-making
 - Patient engagement
 - Provider/patient partnership
 - Culturally sensitive care
 - Continuous relationship
 - Whole person care



Access to Care & Information

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Care Management

- Population management
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- Disease prevention
- Chronic disease management
- Care coordination
- Patient engagement and education
- Leverages automated technologies



Continuity of Care Services

- Community-based services
- Collaborative relationships
 - Hospital care
 - Behavioral health care
 - Maternity care
 - Specialist care
 - Pharmacy
 - Physical Therapy
 - Case Management



Practice-Based Care Team

- Provider leadership
- Shared mission and vision
- Effective communication
- Task designation by skill set
- Nurse Practitioner / Physician Assistant
- Patient participation
- Family involvement options



Quality and Safety

- Evidence-based best practices
- Medication management
- Patient satisfaction feedback
- Clinical outcomes analysis
- Quality improvement
- Risk management
- Regulatory compliance



log out | your profile | your progress log





TransforMED Home > TransforMED MHIQ Assessment Overview > Quality and Safety Score Review

Your Results from 02/18/2008

Your Practice's Quality and Safety Score: 28 of 41 points.

Your practice has failed this module.

Performance Level: Intermediate

What Does My Score Mean?

A score within this level indicates that the practice has begun to lay the ground work for an ongoing performance improvement process addressing quality of care and safety. The first phase of policies and procedures and evidence-based guidelines form the foundation for consistency in practice and understanding what is expected in the performance improvement endeavors. Simple studies with outcomes that make a difference in practice processes, functions, structures and clinical outcomes of care will reinforce the usefulness of gathering data on an ongoing basis. For performance improvement to continue to work everyone in the practice must be involved in the gathering of data and receiving feedback on the outcomes of the studies conducted.

Tips to set a solid foundation for performance improvement activities:

- Consider creating a patient advisory group. A patient advisory group is gathering of
 individuals, representative of the practice demographics, who are called together at least
 annually and whose mission it is to provide feedback, observations and recommendations for
 the purpose of improving practice processes, patient services and outcomes.
- Develop and implement age sensitive prevention and screening flow sheets for the
 predominant age groups in the practice. As patients make appointments for routine and/or
 acute conditions fill out the flow sheets, bring patients current on immunizations, provide
 education where indicated. Set taxcets for the number of natients who will be current and



Click to download a PDF of the TransforMED Medical Home Model

In much the same way that primary care treats the whole person, the TransforMED Medical Home Model recognizes that all the elements of a successful Medical Home practice are interrelated, thus the TransforMED approach "treats the whole practice."

TransforMED develops real-world strategies to make critical "tipping point" improvements, achieving transformations in multiple competency areas simultaneously.

Need help transforming your practice?

TransforMED Results



Health Information Technology

- Electronic medical record
- Electronic orders and reporting
- Electronic prescribing
- Evidence-based decision support
- Population management registry
- Practice Web site
- Patient portal



Practice Management

- Disciplined financial management
- Cost-Benefit decision-making
- Revenue enhancement
- Optimized coding & billing
- Personnel/HR management
- Facilities management
- Optimized office design/redesign
- Change management



What areas of the medical home model do we need to work on in our practice?







he TMED Medical Home Model

A Patient Centered Personal Medical Home

continuous relationship with a personal physician caring for the whole person

dful clinician-patient communication: st, respect, and shared decision-making

- Patient partnership
- Cultural competency
- Continuous relationship
- Whole person care

TMED MHIQ







Log Out | Your Profile | MHIQ Learning Resource

Welcome to your MHIQ Dashboard, Dr. Francis!

MHIQ Performance Snapshot - Level I: Needs significant improvement 72 of 331 points

As of 06/05/2008 7:07 /

Completed Assessment History

DATE

SCORE

06/05/08 7:07 AM 06/05/08 5:54 AM

72 of 331 points Review Score 84 of 331 points Review Score

Access to Care and Information (18 questions)

Re-take Module

Date

Score

05/12/08 5:20 AM

10 of 47 points Review Score

Team-Based Care (13 questions)

Quality and Safety (16 questions)

Re-take Module

Date

Score

06/05/08 7:07 AM

1 of 13 points Review Score

06/05/08 5:41 AM

13 of 13 points Review Score

Practice Management (33 questions)

Re-take Module

06/05/08 5:45 AM

Date

Score

44 of 64 points Review Score

Re-take Module

06/05/08 5:47 AM

Date

Score

7 of 53 points Review Score





TransforMED Home . TransforMED MHIQ Assessment Dashboard . Assessment Score Review

VIEW RESULTS FOR: 06/05/2008 7:07 AM *

YOUR PROGRESS: The TransforMED MHIQ Assessment is COMPLETE

Your Practice's Score: 72 of 331 points.



Level I: Needs significant improvement

A score at this level indicates the practice is just beginning to lay the groundwork for building a cold foundation for the patient centered medical home. The practice is working on basic operational structures and processes and evaluating clinical processes to shift their circinal practice from managing episodes of acuts care for those patients with chronic disease to population management, prevention and health maintenance practices built on evidence-based guidelines.

Access to care and information, continuity of care and point of care services are augmented and further developed by feedback from the practice's performance improvement processes.

Increased technology utilization and more advanced reporting mechanisms could contribute to further refinement and organizational growth in all the areas including practice management.

For performance improvement to continue to work, everyone in the practice must be involved in the gathering of data and receiving feedback on the outcomes of the studies conducted.



Resources: TransforMED Medical Home

Click the links below to access TransforMED's MHIQ online resources for that module

- Access to Care & Information
- . Continuity of Care Services
- · Information Systems
- . Patient-Centered Care
- . Point of Care Services
- Practice Management
- Quality and Safety
- Team-Based Care

Tips for building a TransforMED Medical Home



Practices scering at this level for the overall TransforMED Medical Home Model should begin by downloading the TransforMED Medical Home Model (PDF) and reviewing the resources for the individual modules by clicking the links in the bulleted list entitled "Resources" on this pose.

Next steps include the formulation of a plan that outlines where the practice will start the transfermation process in relation to each of the identified modules, the objectives and goals and the person responsible for following up the particular initiative.

Creating the leadership, communication and teamwork structure to carry out the transformation plan is also essential at this level, as well as exploring how the practice has managed change in the past.

Initiating the process of getting feedback and information from patients regarding practice processes, satisfaction and outcomes is important.

What next?

Compare your MHIQ answers to the NCQA's PPC-PCMH^{CC} "must-pass" elements.

E-mail these results to yourself.

COMPARE TO NCQA PPC-PCMH™

Need help transforming your practice? TransforMED is how. Contact TransforMED: Phone: 913.996.6330 Send a 1-Click Email nee



Click to download a PDF of the TransforMED Medical Home Model

Total Assessment Results



Or click here to return to the TransforMED MHIQ Dashboard page.



TransforMED MHIQ Assessment Tool

















Practice policies and procedures relating to access to care and information, data systems and security, HIPAA compliance, and financial, human resource and risk management practices are written and adhered to, and reviewed on an annual basis.

Performance improvement tools (quality improvement, resource utilization, and risk management) are providing the practice with valuable information which can be used in practice management for the long term. Patients are given the opportunity to provide feedback about care processes and satisfaction with the overall care experience.

Good leadership principles, teamwork and communication are being used on a regular basis to improve the overall operation of the practice.



Click to download a PDF of the TransforMED Medical Home Model



Resources: TransforMED Medical Home

Click the links below to access TransforMED's MHIQ online resources for that module.

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Tips for building a TransforMED Medical Home



Develop a Web site to educate patients about practice policies and procedures before they even get to the practice. Use the Web site as a means to pre-enroll patients and let them know about their rights and responsibilities as a partner in their











http://www.transformed.com/MHIQ/MHIQ-resources/Access.cfm ▼ ▶











TransforMED Home MHIQ Assessment

Resources: Access to Care & Information

Same Day Appointments

» AAFP Resources: Same Day Appointments

The AAFP offers simple and useful Word and Excel tools to determine capacity and predict demand.

» Primary Care Access Measures at Institute for Healthcare Improvement

The IHI's Access outcome measures include Percentage of No-Show Appointments, Future Capacity, Third Next Available Appointment and Office Visit Cycle Time.

» Dartmouth College and Clinical Microsystems - Improving Acces to Care **Toolkits**

Some of the very best materials on the topic of Advanced Access / Same Day Appointments are available from the smartly redesigned Clinical Microsystems site at Dartmouth.

• The Measuring Access Improvement Workbook

A valuable collection of international materials that samples best practices over a decade.

• Measuring Access Improvement - Patient Focused Access Measures

by Marjorie M. Godfrey, MS, RN and Victoria P. Patric, MHA

Group Visits

» AAFP Resources: Group Visits (Shared Medical Appointments)

The AAFP offers a practical FAQ & Bullet-style exploration of Group Vists. A time-efficient way to get answers to common questions and acquire a basic

MHIQ RESOURCES

- Access to Care & Information
- Continuity of Care Services
- Information Systems
- Patient-Centered Care
- Point of Care Services
- Practice Management
- Quality and Safety
- Team-Based Care

Glossary #ABCDEFGHIJKLM

Terms:

Advanced access

(Also referred to as same day appointments or open access) is a methodology to see patients the same day they request services and for doing today's work today.

Advanced access

(Also referred to as same day appointments or open access) is a methodology to see patients the same day they request services and for doing today's work today.

Advanced access

















Tips for building a TransforMED Medical Home



Develop a Web site to educate patients about practice policies and procedures before they even get to the practice. Use the Web site as a means to pre-enroll patients and let them know about their rights and responsibilities as a partner in their healthcare. Set the stage for self-management by encouraging the use of e-visits and group visits.

Develop a process for follow-up phone contact with patients for preventive care and the management of populations with similar disease processes on a pro-active basis rather than only responding to acute care episodes of chronic diseases. Group visits may be used to support understanding of chronic disease processes and provide peer support.

An electronic health record system supports the development of point of care processes and population management. Is it being used to its fullest? Evidence-based clinical guidelines promote health at the highest level possible and aid in the practice's patient education efforts.

Develop processes to measure compliance with established clinical standards. Begin reporting outcomes of clinical performance measures to the providers in the practice. Feedback may be provided for the practice as a whole initially and, eventually, by provider.

What next?

EVALUATE AGAINST NCQA

Check to see how you might perform on the NCQA's PPC-PCMH, based on the answers you've given compared against the NCQA's "must-pass" elements.

View your Activity Log

E-mail these results to yourself.

Or click here to return to the TransforMED MHIO Overview page.



TransforMED Home > TransforMED MHIQ > NCQA Comparison Tool

Your MHIQ-to-NCQA Comparison:

This comparison tool allows you to use your MHIQ responses to estimate your practice's performance on the NCQA "must-pass" elements, and therefore provides a partial but important indicator of how the practice might score on the NCQA recognition tool.

Click on "See how you answered" to view a page that lists the NCQA-related questions and how you answered those on the TransforMED MHIQ.

- NCQA "must pass" elements are highlighted, below.
- · Feedback on "must-pass" elements is shown in red.

PPC 1: Access and Communication

See how you answered »

The Access and Communication standard contains two "must pass" elements. The first element requires written practice standards for a variety of access and communication processes and functions found in the medical practice. Additionally, the second element in this set of standards requires the practice to evaluate and document the practice's success in meeting their stated standards. This standard requires basic IT functioning in the practice.

PPC: 1-A: Written Standards - Your practice may not meet this standard

- The practice must have written policies describing standards for access to care and communication with patients.
- The practice must have written standards for a minimum of 6 access and communication items to pass this element at Level 1.

PPC: 1-B : Data and Reporting on the Standards - Your practice may not meet this standard

 Data from tracking reports are required for a minimum of three of the five identified areas to pass at Level I.

What is a "must pass" element?

The NCQA PPC-PCMH™ is developed around 9 standards and includes 30 elements of which 10 are "must-pass," meaning you must pass them to achieve recognition— regardless of your total PPC-PCMH™ score.

In order to be recognized as a Level I practice by NCQA, at least five of the 10 "must pass" elements must be met. In order to be recognized as a Level II or Level III practice by NCQA all 10 of the "must pass" elements must be met.

About NCQA Recognition:

The National Committee for Quality
Assurance (NCQA) offers a Physician
Practice Connections (PPC) recognition
program based on the patient centered
medical home (PCMH). To learn more
about PPC-PCMH™ Recognition, including
the benefits of becoming a recognized
practice, visit www.ncqa.com.

Free NCQA Recognition Program Training for Physicians

NCQA offers a series of training programs on each of the Physician Recognition
Programs to help you complete the
PPC-PCMH™ application and submission

Visite SQN's Web 25 to Fine
Visite SQN's Web 2

How do we take our practice from where it is today to where we want it to be?





Getting started...

1. Get your house in order

- Think "inside the box"
- Lay a solid foundation
- Know that flexibility will be important!





Getting started...(cont.)

2. Create a work plan

- Define key areas to begin
- Establish a team (or several teams!)
- Start with early and easy wins
- Set milestones & targets for completion
- Set timeframes for evaluating progress
- Don't try to do everything at once
- Be patient!





Getting started...(cont.)

3. Network

- Talk to others who are engaged in transformation
- Talk with your patients and *listen* to what they have to say!

4. Don't be afraid to seek out help

- Technical- IT
- Facility re-design
- Change management





Getting started...(cont.)

5. Transformation is a journey... not a destination!

- Build one success on another & let your successes guide your direction.
 - Celebrate your successes!





Keep Your Goals in Mind...

For Patients:

- Increase satisfaction
 - Personalized care
 - Self care management
- Improve patient outcomes
 - Decrease hospitalizations
 - Decrease ER visits
 - Slow chronic disease progression





Goals for the Practice



Practice Improvements

- Workflow
- Teamwork
- Staff satisfaction
- Provider satisfaction
 - Quality of care
 - Productivity





Questions?

