

## CALL TO ACTION MEETING SEPTEMBER 13-14, 2006

### Medical Home - New Ideas

- Develop a resource list of medical homes and maintain updates.
- Increase education-parents, public, and schools regarding medical home.
- Partnering with Medicaid.
- Educating providers.
- Notify PCP when child is seen.
- Easier access to immunizations at medical home.
- Health steps.
- Insurance company waive co-pay for immunizations.
- Sharing protocol with providers.
- Dedicated staff member that will update the list of available providers.
- Increase education for providers and communication.
- Partnering with Medicaid so that they can get more involved with community.
- Education for provider.
- Drive-by immunizations.
- Education and technical info for clinic.
- More resources-QA for present providers.
- Spot checks for providers.
- Have child health and primary care clinic in LHD.
- Clinic for uninsured who may fall through the cracks.
- List of providers, but need resource for uninsured.
- Get involved in schools (standing delegation orders).
- Get medical home message in school handouts.
- Provider incentives for up to date 2 year olds.
- Send parent info on fees and available providers.
- Primary health care grant as resource for uninsured.
- Expand well child clinic to be comprehensive (sick visits).
- Make appt.. for well child visit before parents leave hospital after giving birth.
- Increase reimbursement to private providers to give shots.
- Define gaps in census for each provider and vaccines given.
- Survey of non-VFC providers.
- Educate WIC clients (2,4,6 mo visits) on immunizations needed.
- Capture MD name on demographics-Contact physicians and recruit if non-VFC.
- In ERs, ask if immunization needed, then give or refer.
- Indigent care coalition-patient gives consent to share medical information. LHD working with coalition to share information.
- Get info from parents about insurance and whether have availed themselves of social services to be enrolled in all programs they may be eligible for.
- Have staff person help with this.
- Get private providers to come as volunteers.
- Money is a barrier.
- Have clinic for those who don't qualify for Medicaid or CHIP, sliding scale, that provides child health services.

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- Rural-give people an idea of where they can go-the closest medical home they can go to.
- Incentives to providers-compensation doesn't cover time needed to screen and administer immunizations; considered a small piece of the pie; not as concerned with prevention as they are with ill children.
- Conducted survey of mothers and preferred health department for shots because better at giving shots, records are more complete.
- Get at least one physician to buy-in to the medical home concept. It might start something with their peers.
- Medicaid should be much easier to work with.
- If reimbursement was not such a huge hassle, physicians would be easier to work with.
- Rapport and investing more time and effort into building relationships with docs and nurses.
- Elimination of barriers such as transportation and access.
- Developing a list of medical homes that are accessible and open to new patients.
- Trying to find a time and place where doctors are already meeting and try to work with them there.
- Development of a brochure to explain the importance of a medical home.
- Develop a relationship with the Medicaid representative in your area. Let them know what's going on.
- Focus on recruitment of Pas and others who can give shots.
- More education to parents about the medical home.
- Focus on education to new or young parents on these concepts in new parent classes.
- Work on making one LHD a more 'true' medical home-doing well child visits because that is the only way to reach a particular group of people.
- Could use more statistical information about who we are targeting-which socio-economic groups.
- Provider liaison.
- Need a TVFC workshop.
- Discussed problem with physician not stocking varicella, due to having storage, but carries other vaccines. Results in referring client to LHD for varicella.
- Add medical home piece to TVFC provider workshop.
- Would like DSHS to waive fee for CEOs.
- Educate on all the components of the THS exam. Educate providers on whole packet
- See what providers are taking new patients.
- Give list of providers to city by bus route.
- Lack of staff time in provider offices to do all components of the THS exam. Work with provider.
- Increase Medicaid reimbursement rates.
- Problem with literacy rate of population.
- Lack of knowledge/idea/definition of medical home with the public. Need to address this first prior to other.
- Understand the concept of medical home-Is there something else we can call it? 'Family doctor'.
- Need too start where health literacy is.
- If you can understand then you can't take advantage of what is available.

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- Educate the client on medical home.
- Medical home brochures 'client friendly'.
- Have flyer on providers who is taking new patients and their hours.
- Assist clients with having an area where they can call for a provider.
- Educate clients to see if they are eligible for Medicaid or CHIP benefits.
- Have a video on medical home.
- Have an updated list of providers available in area. Have a resource person or volunteer.
- Increase reimbursement rates of well visits.
- Educational cartoons (great for the kids but would also have parents involved).
- The health department has hurdle that they can't recommend a certain provider.
- Educate physicians and their personnel on contraindications.
- Barriers to access to care: time and co-payments.
- Educate client on choosing a provider (location, hours of operation, booklet).
- Have Medicaid educate on how to choose a provider up front. Work better with their clients. Ask client language preferred.
- Problem-a provider moved to a different area in Texas and Medicaid still assigned clients to his previous practice location.
- Look at reimbursement rate for well visits.
- Does the State have a brochure to hand out to clients on medical home? Specific to just medical home.
- Advertising-TV ad/video to show in clinic lobby; make it a cartoon.
- Educate Medicaid on importance of medical home, to have client choose provider at time of visit.
- Invite Medicaid providers to meeting (such as maximizing the immunization schedule). Also invite Medicaid to discuss maximizing reimbursement rates. Nursing can get CEUs to attend.
- Discussed cost of obtaining CEUs through DSHS.
- Invite them to the satellite broadcast and then discuss any immunization topics; then they go back and do their evaluation and obtain their CEUs on-line; then there is no cost involved.
- New video; cartoon advertisement.
- Educate Medicaid (by the state) when clients first walk in-assistance in choosing a provider, not just providing a list; maximizing on the immunization schedule and in turn we would educate reimbursement.
- CEUs.
- Educate the clients-medical home pamphlets, reader friendly.
- Standardize medical home.
- Place in the clinic where a phone call can be made telling them where they can go.
- Eligibility for the benefits-educate.
- Provide provider list where they can go for Medicaid.
- Up to date provider list (name, address, phone, hours of operation).
- Cartoon education.
- Educate providers.
- Medical home liaison-go to providers to educate, identify with one person, they would do ImmTrac, immunize.

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- VFC training.
- CEUs fees should be waived when doing something for immunization.
- Education-Medicaid should provide education what is involved in the well child exam.
- Education-provided on the bus route-young mothers ride the bus.
- Provider education-find out what would work; what would make them see patients.
- Educate the public-What is a medical home? Provide a definition for the general public. It starts with the public. Until they know what is meant, how can we help them? They need to understand what a 'family doctor'.
- We need to start with health literacy-bring it down.
- Provide social work type service; providing a Medicaid/CHIP packet.
- Building a provider base.
- Lack of local resources.
- No appointment times available with PCP.
- Shot given at LHD-a copy of shot(s) given are sent to PCP.
- Long lines at the doctor's office with sick kids.
- Private MDs do not want to vaccinate.
- Get a list of providers and refer those clients to those providers.
- Issue: Medicaid provider is not within reach of clients; lack of transportation.
- Offer CHIP application.
- Exploit the dynamic of the physicians with the community.
- Encourage immunization appointments during season lulls.
- Look at pat doctors that have given vaccines.
- Provide list of VFC providers.
- Survey question if they have medical home.
- Provide referrals based on ethnic background.
- Refer to FQHC for care.
- List of providers given.
- Client has medical home but provider doesn't give immunizations.
- Community service aide verifies quarterly that providers are accepting patients.
- Staff to evaluate clients needs.
- Visit post-partum units in birthing hospitals to obtain permission to visit with moms; give information on babies vaccines and TDaP for mom.
- Show providers benefits.
- Expand well-child clinics to comprehensive primary care (include both well and sick).
- Challenge HB 1444-required HDs to get out of care.
- Survey all physician offices:
  - Are they giving immunizations
  - If not, what would be needed for them to start
  - What are the reasons why not (barriers, reimbursement issues, etc)
  - Not just VFC but non-VFC providers
- ERs-home, anyway, so use it. Have a caseworker who hooks them up to services in the community.
- Use doses administered data, and private vaccine volume data if available, to identify large volume providers and target the largest one who are not providing comprehensive services who are sending children to HD for shots.

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- Encourage both non-VFC and VFC providers to take at least 5 children pro bono.
- Spreadsheet of providers is provided.
- Hire community service aides.
- Need money to educate parents.
- Hire a person to educate on CHIP.
- Try to connect them with some kind of insurance.
- Provide hospital packets for new moms.
- Packet includes all vaccines & baby checkups.
- Show benefits to parents.

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