



PINE MEDICAL GROUP, P.C.

Patient Centered Medical Home

Presented by

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Pine Medical Group, P.C.

www.pinemed.com

First Program: Diabetes

- Champion of program in practice is our Medical Director
- Independent RHC
- Hospital Benefit G-codes
- Stark issues
- Beginning the program
- Decreased HbA1c
- Hospital achieved a 200% increase in patients in their diabetic program



(Diabetic Program continued...)

- Lab interface
- Registry reports—gaps in care
- Ongoing interaction
- Results
- Surveys



Asthma Days

- In-service nursing staff by physicians
- Champion of program
- Nursing teach back COPD
- Respiratory referral
- Care plan meetings with respiratory therapist



Care Management

- PCMH care management template created and scanned into charts of patients contracted by the care manager
- Documentation of her work
- Action plans
- Outcomes
- Action plans—fit patients



Care plan visit

- Emphasize preventive behaviors
- Chronic condition survey
- Follow-up with patients in the hospital and referrals from PCP
- Relationship established with Care Manager
- Relationship allows Care Manager to create trust—creates action plans and goal-setting



(Care plan visit continued...)

- Literacy/Care Manager assessment
- Hospital discharges
- CHF, COPD, etc.
- Evaluate follow-up care



PCMH evolved into...

- Lunch & learns
- Interviews/radio
- NCQA Level III
- Office info
- Website
- Quality standings
 - Top 3 each year
- Financial
- Strategy/evals



Urgent Care

- Access
- Office Extension



Patient Advocate

- Medicaid apps
- MI Child
- Medications
- FMLA Forms
- Help at Home
- Rides for appointments



(Patient Advocate continued...)

Community Resources

- Food pantry
- SFS
- Charity care apps—hosp
- Pre-pay uninsured for surgery
- Forms/Physicians



New Product Information

- WellCentive implemented—identify gaps in care
 - a. Patient Summary Sheet printed for each visit
- New patients entered
- Quest Labs portal into WellCentive
- SureScripts eRx incorporated into EMR
- Registry used to identify gaps in care—ongoing alerts in EMR
- Continue to incorporate registry information for all chronic conditions

Financial Benefits

- Priority Health
- BCBS
- 10% uptick all E&M codes with BCBS
- Increase of \$3.00 per member/per month with Priority Health
- Higher increase due to NCQA Level III
- T-Codes, Care managers
- Financial incentive yearly, \$265,000.00

(Financial Benefits continued...)

- Grant--\$145,000.00 over two years used for software-nurses
- Quality payments increased each year
- Medicare Demonstration Project begins January 1, 2012.

