

Patient-Centered Specialty Practice Readiness Assessment

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NCQA Programs

- **Patient-Centered Medical Home** – mechanism to standardize patient-centered care in primary care settings.
- **Patient-Centered Specialty Practice** – created to improve communication between specialists and primary care providers.
- **Patient-Centered Connected Care** – created to broaden coordination to include providers of episodic care, like urgent care, SBHCs, & retail clinics

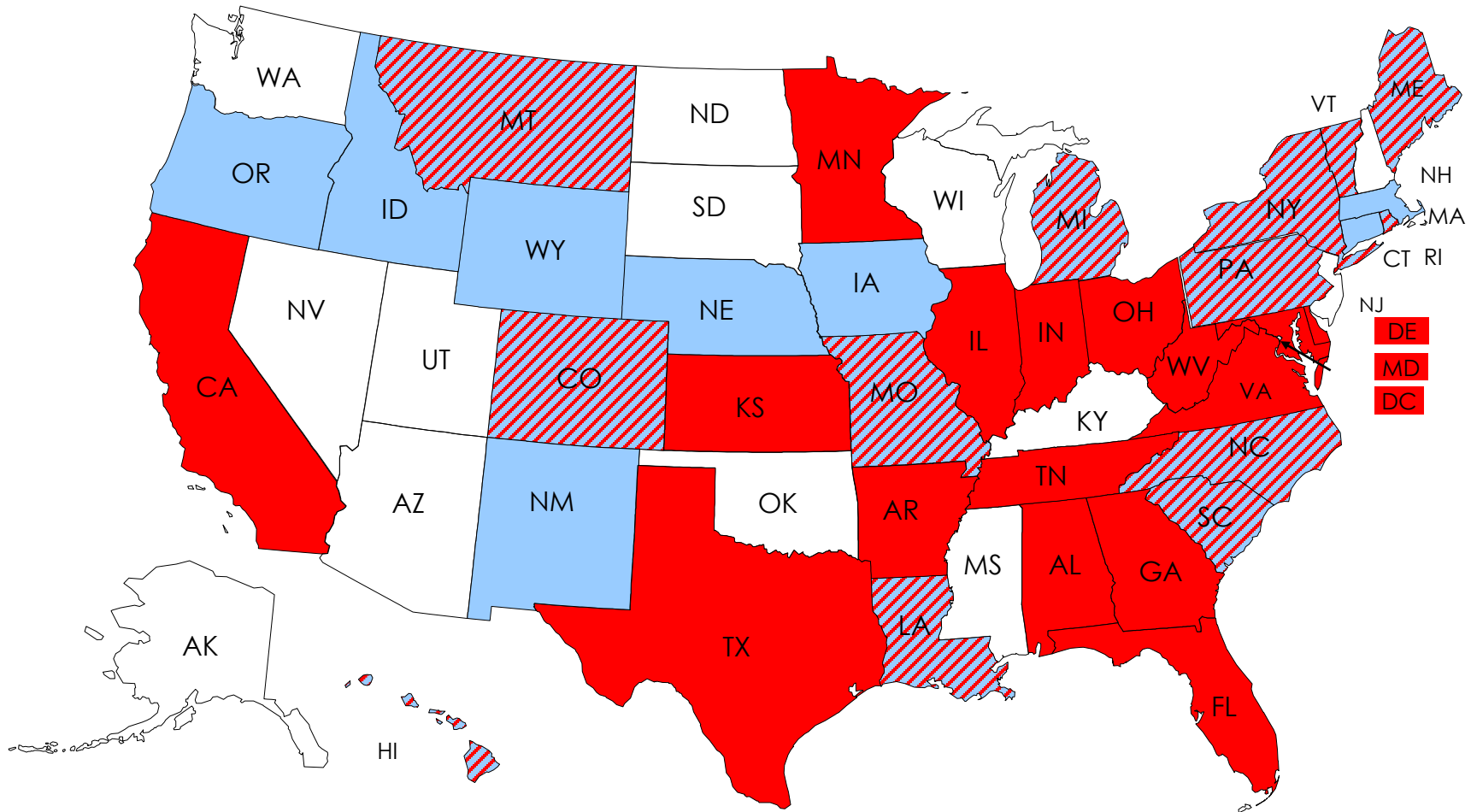
The Leadership Learning Collaborative

Organization	Location and Size	Recognition Type	Recognition Received
Adagio Health	Located in Pittsburgh, PA Serves over 100,000 women and their families every year in 55 sites across 27 counties	PCSP multi-site	Application pending
Maine Family Planning	Located in Augusta, ME Serves nearly 30,000 women and teens annually in 45 health centers statewide	PCMH single site	PCMH Level 3
Public Health Seattle King County	Located in King County, WA Serves approximately 12,000 individuals per year across 7 sites	PCSP single site	PCSP Level 3
MIC Women's Health Services	Located in New York, NY Serves 4,500 low-income, high risk individuals annually	PCSP two sites	PCSP Level 2

Benefits

- Improved patient care and coordination
- A more favorable standing with insurance plans
- A framework for quality improvement and innovation
- A platform to build new partnerships with primary care
- An opportunity to provide professional development to staffs

38 States Use or Require NCQA PCMH for Public and Private Initiatives



Standard

- A fundamental quality concept
- There are 6 PCSP Standards



Element

- A specific aspect of the Standard
- Some Elements are **must-pass**; an organization must score at least 50% on must-pass Elements to receive Recognition
- PCSP has 22 Elements; 5 are must-pass



Factor

- A process, task, or metric that demonstrates quality
- **Critical Factors** are of particular importance; Critical Factors within PCSP are mandatory to receive more than minimal points, or for some Factors, any points in an Element
- PCSP has 155 Factors; 4 are Critical Factors

PCSP 1: Track and Coordinate Referrals

The practice has:

- formal and informal agreements and specified methods of communication with PCPs and other referring clinicians;
- a monitored process to track referrals that includes consideration of the urgency and type of referral; and
- a monitored process to ensure a timely response to PCPs, referring clinicians, and patients.

PCSP 2: Provide Access and Communication

- To provide access, the practice has a written process, defined standards, and demonstrates that it monitors against those standards.
- Patients have access to culturally and linguistically appropriate services and clinical advice.
- The focus is on team-based care with trained staff.

PCSP 3: Identify and Coordinate Patient Populations

The practice:

- collects demographic and clinical data for population management;
- assesses and documents patient risk factors; and
- identifies patients for proactive reminders.

PCSP 4: Plan and Manage Care

The practice:

- assesses patient/family self-management abilities;
- works with patient/family to develop a self-care plan and provide tools and resources, including community resources; and
- reconciles patient medications at visits and post-hospitalization.

PCSP 5: Track and Coordinate Care

The practice:

- tracks, follows-up on, and coordinates tests, referrals to secondary specialists, and care at other facilities (e.g., hospitals); and
- manages care transitions.

PCSP 6: Measure and Improve Performance

The practice:

- uses performance and patient experience data to continuously improve;
- tracks utilization measures such as rates of hospitalizations and ER visits;
- identifies vulnerable patient populations; and
- demonstrates improved performance.

PCSP Scoring Summary

Recognition Levels	Required Points	Must-Pass Elements
Level 1	25-49 points	<ul style="list-style-type: none">• 5 of 5 Elements are required for each level• Score for each Must-Pass Element must be $\geq 50\%$
Level 2	50-74 points	
Level 3	75-100 points	

Points	Standard/Element	Must-Pass
22	PCSP 1: Track and Coordinate Referrals	
9	Element A: Referral Process and Agreements	✓
5	Element B: Referral Content	
8	Element C: Referral Response	✓
Points	Standard/Element	Must-Pass
18	PCSP 2: Provide Access and Communication	
5	Element A: Access	
2	Element B: Electronic Access	
4	Element C: Specialty Practice Responsibilities	
2	Element D: Culturally & Linguistically Appropriate Services	
5	Element E: The Practice Team	✓

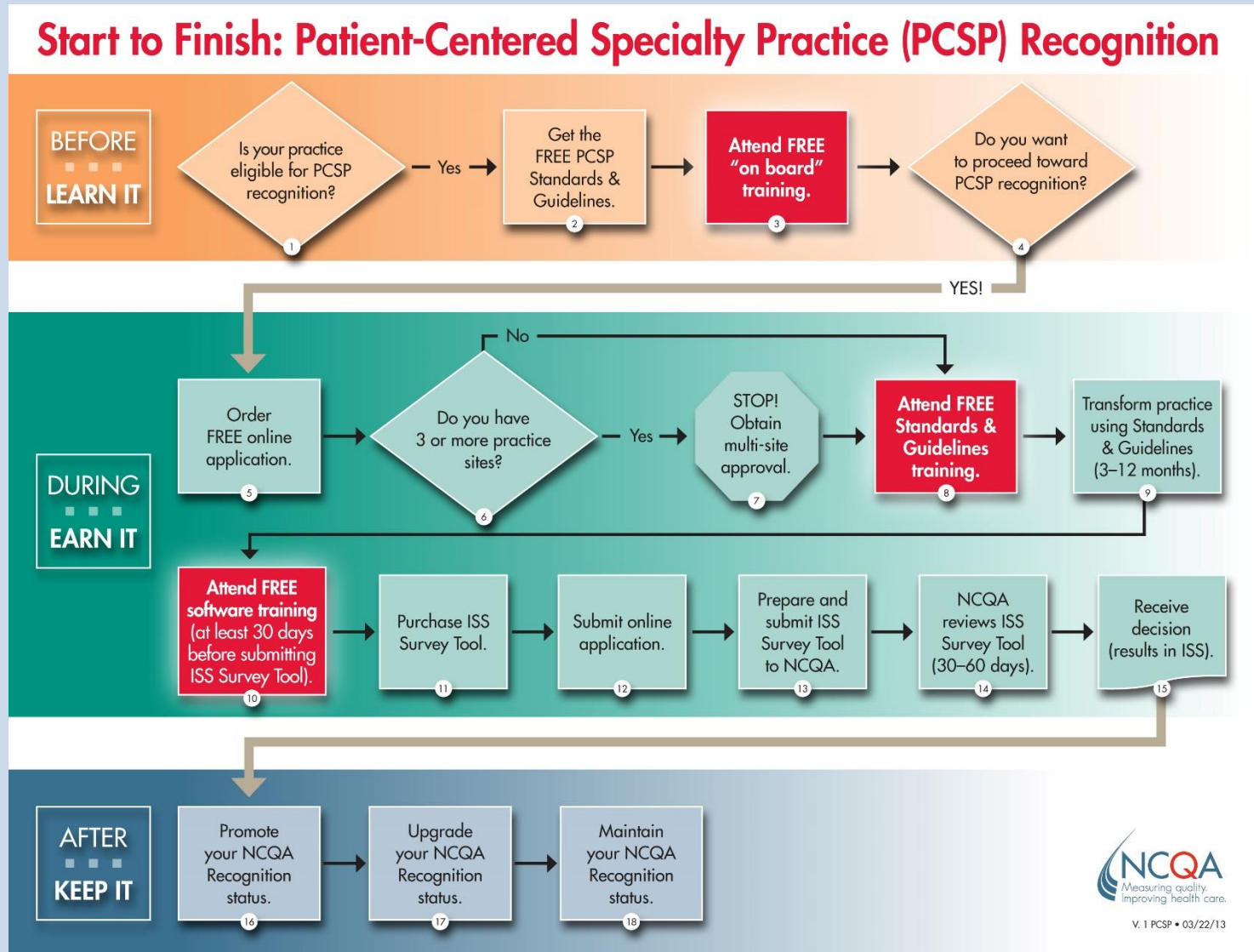
Points	Standard/Element	Must-Pass
10	PCSP 3: Identify and Coordinate Patient Populations	
3	Element A: Patient Information	
4	Element B: Clinical Data	
3	Element C: Coordinate Patient Populations	
Points	Standard/Element	Must-Pass
18	PCSP 4: Plan and Manage Care	
11	Element A: Care Planning and Support Self-Care	
5	Element B: Medication Management	✓
2	Element C: Use Electronic Prescribing	

Points	Standard/Element	Must-Pass
16	PCSP 5: Track and Coordinate Care	
5	Element A: Test Tracking and Follow-up	
6	Element B: Referral Tracking and Follow-up	
5	Element C: Coordinate Care Transitions	
Points	Standard/Element	Must-Pass
16	PCSP 6: Measure and Improve Performance	
5	Element A: Measure Performance	
5	Element B: Measure Patient/Family Experience	
4	Element C: Implement & Demonstrate Continuous QI	✓
2	Element D: Report Performance	
0	Element E: Use Certified EHR Technology	

PCSP and Title X/QFP

- Accessibility
- Primary care engagement
- Quality improvement
- Patient-centeredness
- Culturally and linguistically appropriate care

Start-to-Finish Chart

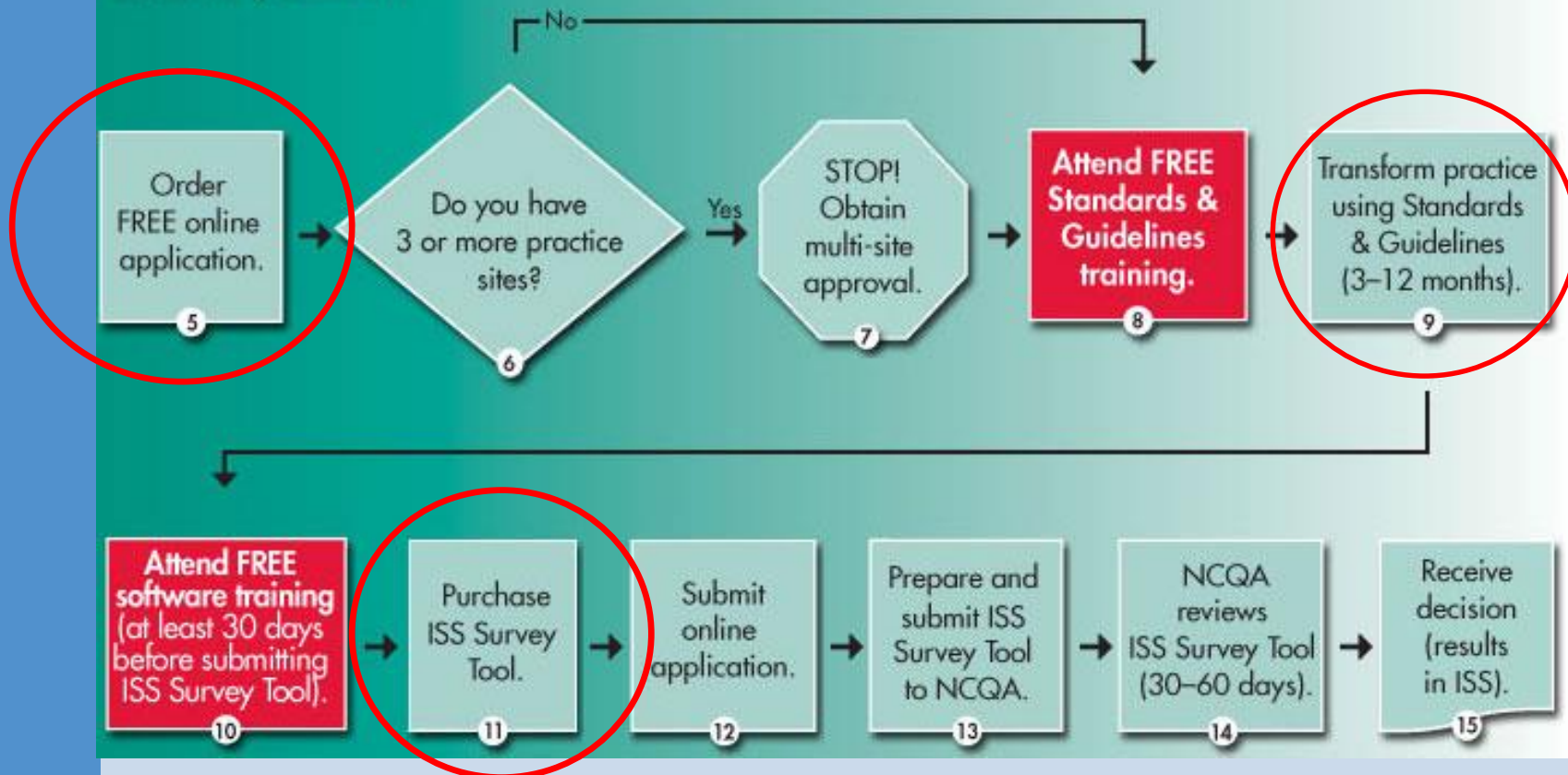


PCSP Eligibility

- Practice eligibility
- Clinician eligibility
- Multi-site application eligibility
- Multi-specialty eligibility

Earn It

DURING | EARN IT



Organizational Assessment

Leadership	Low				High
	1	2	3	4	5
There is strong leadership support for PCSP Recognition, including both executive leadership and the board (if applicable).					
Leadership understands the benefits of PCSP Recognition.					
Leadership is knowledgeable of the time and resources necessary for the PCSP Recognition application process.					
Leadership has approved the time and resources necessary for the PCSP Recognition application process.					
Total Score					

Organizational Assessment

Organizational Culture	Low High				
	1	2	3	4	5
Our organization's culture supports a patient-centered care philosophy.					
Our organization's culture supports the goal of care coordination.					
Our organization's culture is one that is open to and prepared for change.					
Total Score					

Organizational Assessment

Organizational Capacity	Low					High	
	1	2	3	4	5		
An electronic health records (EHR) system is in use.							
Our organization has implemented Meaningful Use.							
Our organization has a patient referral system is in place, either formal or informal.							
The time is right for the organization to pursue PCSP Recognition.							
Our organization's policies are written down and regularly reviewed.							
Our organization's protocols are written down and documented.							
Total Score							

Assessment Scoring

The following scores indicate that your organization is in a good position to begin the Recognition process:

- Leadership – Score 16 to 20
- Organizational Culture – Score of 12 to 15
- Organizational Capacity – Score of 20 to 30
- Staff Capacity – Score of 12 to 15

Discussion





A Framework for Quality Improvement

Family Planning and Patient-Centered
Speciality Practice Toolkit

National
Family Planning
& Reproductive Health Association

Available at

[www.nationalfamilyplanning.org/Health Care Delivery](http://www.nationalfamilyplanning.org/Health_Care_Delivery)

Thank you

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