

Pennsylvania Academy of Family Physicians Foundation

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Primary Healthcare Consultants – An Introduction

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Disclosures:

Speaker has disclosures she is an employee of PAFP and Primary Healthcare Consultants. No conflicts of interest exists.

The speaker has attested that their presentation will be free of all commercial bias toward a specific company and its products.

The speaker indicated that the content of the presentation will not include discussion of unapproved or investigational uses of products or devices.



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Disclosure

- › Ms. Debra Hammaker is an employee of PAFP and Primary Healthcare Consultants. No conflicts of interest exists.

Discussion

- › Formation of Primary Healthcare Consultants
- › Our services and types of support
- › Approach to technical assistance
- › The official launch and website

The Beginning

- › During the 2010 PAFP Planning Commission meeting, the Strategic Plan for 2011–2013 was being created and it included the principal goal of PAFP becoming the premier resource for the Patient–Centered Medical Home model
- › PAFP staff was currently working under the PA Regional Extension and Assistance for Health Information Technology (REACH) grant
- › The REACH grant work mirrored our strategic objectives

- › REACH Sub–contractor agreement was ending 3/31/14
- › Efforts shifted to create a business plan to continue the work we started to support and service primary care offices
- › Our goal was to align with PAFP’s mission statement and the Foundation’s quality improvement program
- › The Patient–Centered Medical Home model and it’s principles are our focus

Services and Support

- › Services Lines include:
 - Patient–Centered Medical Home
 - Meaningful Use
 - EHR Utilization / Support
 - Privacy and Security
 - Quality Reporting
 - Population Management
 - Quality Improvement Programs
- › We provide on site, web–based, e–mail and phone support.
- › We offer reasonable hourly rates and discounted package pricing
- › Additional discounts apply to PAFP members

Our Approach

▶ Initial Performance Review

- Identify where the practice is as it relates to the service
- Reason for obtaining our services
- Develop meeting plan
- Use EHR workflow analysis to determine practice's use of technology
- Prepare report or feedback highlighting areas for improvement and recommendations

▶ Planning and Education

- Present findings how we can help
- Assist practice with defining roles and responsibilities for team members
- Develop a time frame for project completion
- Review and educate on the specifics of the project

▶ Guidance and Facilitation

- Use of project tools, example materials; templates and other resources to aid the practice
- Develop communication process for entire practice to keep everyone updated on any changes as it related to the project
- Review practice materials; reports, etc. and advise on modifications / process improvements
- Find answers for any unresolved issues and give suggestions

▶ Reporting and Improvement

- Assist practices with interpreting reports and data
- Teach practices importance of data accuracy and how to verify patient lists, understanding numerators and denominators
- Review reports to offer pointers for improvement opportunities

▶ Documentation and Submission

- Review all documentation, offering suggestions on any changes and best practices
- Assemble all needed documentation for the project as it relates to the service line and program requirements
- Assist with submission of data, if applicable

► Completion and Follow-up

- Our project plan includes follow-up with the practice
 - 3 months
 - 6 months
 - 12 months
- Satisfaction survey

Primary Healthcare Consultants

- Official launch was September 19, 2014
- Website is www.primaryhealthcareconsultants.com
- Each service line page has additional resource links



CMS NEWS

FOR IMMEDIATE RELEASE
October 31, 2014

Contact: CMS Media Relations
(202) 690-6145 or press@cms.hhs.gov

CMS releases final payment rules for the Medicare program

New policies focus on value, improve how care is provided, and increase transparency of information on quality

WASHINGTON – Over the past several days, the Centers for Medicare & Medicaid Services (CMS) released final rules outlining how Medicare will pay major health care providers and suppliers in 2015. Important provisions of the Affordable Care Act that reward higher quality, patient-centered care at a lower cost are being implemented by these rules. The final rules include Medicare payments to physicians and non-physician practitioners, hospital outpatient departments, ambulatory surgical centers, home health agencies and dialysis facilities that treat patients with end-stage renal disease.

Questions?

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