



Care Manager Meeting Highlights 1/27/16

Handouts from presentations are attached to email and on website (handouts and highlights under Care Manager User Group, handouts also under Care Manager Resources)

NPO Updates

CM Education

- Update: NPO has developed table for educational requirements (attached to email)
- **Attendance at these CM meetings will count for 1 CEU of PO led education – NPO will issue certificate**
- Educational session requests
 - Karen Kain -COPD for future training
 - Diabetes educator
 - Pharmacist - meds assistance; common food to drug interactions
- Next meeting March 2nd - 3:00-5:00, every 4-6 weeks

SIM – PCMH Initiative

- SIM program - Prospective payments to practice for CM of Medicaid health plans
- 1st objective - increasing community linkage between recipients and community resources
- 2nd objective - reducing costs by reducing ED visits in the Medicaid population
- Bill G codes to track services as being provided

Medicare Shared Savings Accountable Care Organizations – NMHN and Trillium

- Board set goal to reduce costs by 5% so that shared savings could be achieved
- Looking at top 20% of spend patients and high risk patients and enroll 65% of those patients in CCM (Chronic Care Management)
- Thirlby piloted using Health Endeavors for the CCM calls – good alternative to hiring and training staff and allows CMs to be free to CM

Referral feedback

- One practice reported using MAs hasn't helped a whole lot - MAs keep changing
- Another practice used a letter with follow up call
 - Few responded with a follow up call
 - Used PDCM list and called based on risk score
- Can develop protocol so CM can target people, without need for physician referral, based on conditions such as
 - A1C above goal
 - Recent emergency department visits
- Kaskaska is starting a diabetic clinic, CM will be part of this
 - See doctor, see CM, develop a Care Plan
- **Dr. Nathan March shares the following advice to improve CM participation:**
 - **He either tells the patient directly: "I think it would be a good idea for you to participate in CM" or the CM says "Dr. March thinks it would be a good idea for you to participate in CM"**
 - **Then, next time he sees the patient, Dr. March asks the patient how it is going in CM**

Case Discussion and General Discussion

Kevin discussed how to manage a patient to help them lose weight. He stressed setting small achievable goals because "lose 20 pounds" can seem so big and hard to achieve. He suggests setting the goals so that the patient can see

improvement and an impact on their lives sooner – why does the patient really want to lose weight? What is it the patient wants to achieve? Healthier feeling? An activity they used to be able to do and can't do now?

He also suggests recognizing and applauding all achievements. Started planning ahead to pack a lunch instead of eating at McDonalds? That is an accomplishment to be cheered! Walking for 30 minutes every day? Another great accomplishment to be recognized, acknowledged, and cheered.

When dealing with teenagers or children, don't use "lose weight" wording – use "eat healthier" or "increase activity". Let the child/teenager state what they want to achieve and work towards that. It is crucial that the patient not develop any body image issues.

There was some discussion about relapse, especially around the holidays. Group thoughts:

- Relapse happens. Focus on all the good changes the patient has made, acknowledge the relapse, and develop a plan moving forward.
- Planning in advance for difficult situations can help. Planning to eat a salad before going to a holiday dinner; looking in advance at a restaurant menu; putting half a restaurant meal in a take-out container at the start of the meal – planning in advance gives the patient a feeling of control.

There was much good discussion and unfortunately not all good ideas were documented. Processes have been changed to prevent this from occurring again.

Next Meeting – all meetings from 3P – 5P:

- 3/2, Thursday

3:00 – 3:05	Welcome –Kevin
3:05 – 3:10	Introductions
3:10 – 3:40	Echo Dean – case with cognitive issues
3:40 – 4:10	Cheri Bostwick – CHF teach back tool and case
4:10 – 4:30	NPO updates Munson Case Manager request: Munson, as part of the efforts to reduce readmissions, is asking for processes and contact info for practice care managers. Discussion with decisions.
4:30 – 5:00	Open sharing <ul style="list-style-type: none"> • Referrals – how are they going? • What do you want to share or ask your peers?

- 2017 meetings (Thursdays, 3-5P)
 - 5/11 – Kathleen Brown, NPO Pharmacist – OTC, Drug interactions
 - 6/22
 - 8/31
 - 10/19
 - 11/30

PLEASE NOTE: If you plan to attend the next meeting either in-person or telephonically, please either email kelliott@npoinc.org or call NPO at 231-421-8505 to RSVP. After we receive your RSVP, we send you an Outlook appointment. Please bring in parking garage tickets for validation. NPO has moved to 125 Park Street, Suite 300. You can still park in the parking garage; the building entrance is across from Sorellina Restaurant.