1. Be Extra Intentional About Patient Outreach

- Run a Registry for patients who have not been seen recently and proactively reach out to schedule visits.
- During outreach or **planned visits**:
 - o Order any services needed during the phone call if possible.
 - o Complete chart prep/ Planned Visit to ensure all care gaps are addressed.
 - Have a brief Advance Care Planning (ACP) discussion and bill S0257 (reminder: you can bill 98966–98968 if it's not a TOC call).

2. Be Extra Intentional About Reducing ED Visits

- Focus on **keeping patients out of the Emergency Department (ED)** through proactive follow-up and education.
- Complete **TOC** (**Transition of Care**) calls **within 2 business days** of discharge.
 - o Conduct **Medication Reconciliation** and bill **1111F** during the call.
 - Schedule a follow-up appointment ASAP ideally within 14 days or sooner, and no later than 30 days post-discharge. (This will ensure meeting MAJORITY or measures timeframes without cherry picking)

3. Review of QRS Data in Health Focus (by payer)

If the practice is not meeting target performance on the following measures, use the **patient registry** and apply the outreach and follow-up strategies in sections **1 & 2** above.

Key Measures:

- Well Child Visits
 - Immunizations
 - Weight Assessment & Counseling
 - Refer to the 2025 BCBSM Quality Tip Sheets or NPO Quality Measure Documents.
 - If height and BMI are documented for 2025, a Care Manager can provide nutrition and physical activity counseling over the phone, using:
 - Z71.3 (Nutrition)
 - Z71.82 (Physical Activity)
 - 98966-98968 (Telephone codes)
- Chlamydia Screening
- Annual Wellness Visits (AWV)

• Blood Pressures

- Reminder: Since only the last value of the year counts for BP, the practices should be on top of who needs another lab draw or BP taken before 12/31/2025
- Colorectal Cancer Screening
- Cervical Cancer Screening
- Breast Cancer Screening
- Eye Exams
- A1C (Especially <= 9.0)
- KED (Kidney Health Evaluation) eGFR & uACR