

CMS will Begin CCM Promotion to Beneficiaries:

Are you Prepared for Patient Engagement?

Building Leaders – Transforming Hospitals – Improving Care



HEALTHTECHS³

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Faith Jones began her healthcare career in the US Navy over 30 years ago. She has worked in a variety of roles in clinical practice, education, management, administration, consulting, and healthcare compliance. Her knowledge and experience spans various settings including ambulance, clinics, hospitals, home care, and long term care. In her leadership roles she has been responsible for operational leadership for all clinical functions including multiple nursing specialties, pharmacy, laboratory, imaging, nutrition, therapies, as well as administrative functions related to quality management, case management, medical staff credentialing, staff education, and corporate compliance. She currently implements care coordination programs focusing on the Medicare population and teaches care coordination concepts nationally. She also holds a Green Belt in Healthcare and is a Certified Lean Instructor.

Healthcare
Focus

45 Year
Company History

Experienced
Consultants

Technology
Partnerships

Objectives

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Following this presentation, the participant will understand:

- The information beneficiaries are receiving about CCM
- Who are being targeted for direct promotion and why
- How to become prepared for potential questions from Medicare patients



Transformative Learning

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- Not spontaneous (requires work and discipline)
 - Creates new meaning to life, events, facts, interactions with others
 - Results in change in perception; knowing which requires different action or structure
- What is the learning that creates a new habit of mind?
 - Change perspectives and paradigms
 - Challenge and validate assumptions
 - Critical self-reflection
 - Include and integrate experiences

Based on the work W. Edwards Deming



Transformational Learning: 1st Reflection

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- Think of a time in your life (situation or incident) where you were vulnerable.
 - Where were you?
 - Who was involved?
 - What happened?
 - What made you feel vulnerable?
 - Make note of your feelings

Developed by Jane Taylor and Pat Rutherford



Transformational Learning: 1st Reflection

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- Take a few minutes and share those stories and feelings in small groups



Transformational Learning: 1st Reflection

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- What advice did you or would you have liked to give those who influenced your experience?



Transformational Learning: 2nd Reflection

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- Think of a time in your life when someone provided you genuinely *“helpful”* help.
 - What was your experience?
 - What did you feel?
 - Describe the characteristics of *“helpful”* helping



Transformational Learning: 2nd Reflection

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- Think of a time when someone provided you some “not-so helpful” help.
 - What was your experience?
 - What did you feel?
 - Describe the characteristics of “not-so helpful” helping



The voyage of discovery
is not in seeking new landscapes
but in having new eyes.

Marcel Proust



Changing Paradigms

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- Paradigm defined
- Evidenced Based Practice
- Ambivalence
- Letting go of our “expertise”



Giving Advice = Fixing

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Research on the flip side...

“When we’re standing across from someone who is hidden or shielded by masks and armor, we feel frustrated and disconnected.

Vulnerability is the last thing I want you to see in me, but the first thing I look for you in.”

p.113



Vulnerability 12

What is it?

“Vulnerability is the birthplace of love, belonging, joy, courage, empathy, and creativity.

It is the source of hope, empathy, accountability, and authenticity”

p.34



Relationship Building



Feelings about Change 13





Openness to Change 14

Early Majority
Late Majority

Innovators
Early Adopters
Resisters

Laggards

<https://web.stanford.edu/class/sybsys205/Diffusion%20of%20Innovations.htm>



Biggest Bang for our Buck 15

What Makes Us Healthy



What We Spend On Being Healthy



http://cdn.bipartisanpolicy.org/wp-content/uploads/sites/default/files/HEALTHY_1.pdf



Changing View of Non-Compliant

16

- What is important to you?
- Motivation Interviewing Skills
- Being present
- Listening for "Change Talk"
- Realistic goal setting
- Commitment



Life Long Process

The journey of a thousand miles begins with a single step.

Celebrate Each Step



Chronic Care Management

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"We acknowledged that the care coordination included in services such as office visits does not always describe adequately the non-face-to-face care management work involved in primary care and may not reflect all the services and resources required to furnish comprehensive, coordinated care management for certain categories of beneficiaries"

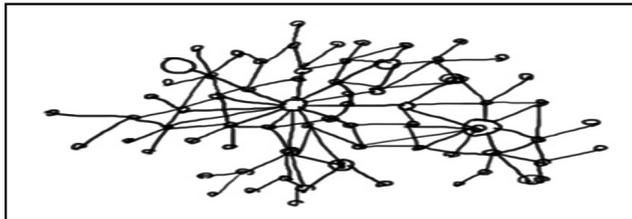
CMS CFR 7-15-2015



Population Health: It Takes a Village

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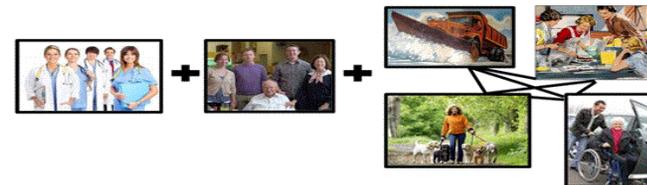
Caring. Community. Connections.



Bridging the Gap

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- Connect and integrate existing informal/non-traditional community networks with the healthcare team
- Invest in tools & processes to maximize the benefits of connectivity



Elements for CCM 20

Practice Eligibility	Patient Eligibility
<ul style="list-style-type: none"> • Qualified EMR • Availability of electronic communication with patient and care giver • Collaboration and communication with community resources & referrals • After hours coverage • Care Plan Access • Primary Care Provider supervision of clinical staff 	<ul style="list-style-type: none"> • Medicare Patient • Two or more chronic conditions expected to last at least 12 months or until the death of the patient • At significant risk of death, acute exacerbation, decompensation, or functional decline without management • Patient Consent • CCM initiated by the primary care provider



2017 Regulation Updates 21

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Family of Codes 22

CCM	Complex CCM
<p>99490</p> <ul style="list-style-type: none"> • All elements of program are met as previously discussed • At least 20 min of clinical staff time in the month • Billed only once per calendar month • Applies to PFS clinics, RHCs and FQHCs. 	<p>99487 and 99489</p> <ul style="list-style-type: none"> • All elements of program met as previously discussed PLUS <ul style="list-style-type: none"> – Moderate or high complexity medical decision making; • At least 60 min of clinical staff time in the month. <ul style="list-style-type: none"> – Use code 99489 for each additional 30 min of clinical staff time in a month • Billed only once per calendar month • Only applies to PFS clinics <ul style="list-style-type: none"> – RHCs and FQHCs may not bill



Payment Codes for 2017 23

Chronic Care Management (CCM)

- Billed per calendar month for 20 plus minutes of care coordination
 - CPT Code 99490
 - National Average Reimbursement **~\$42.70**
- Billed per calendar month for 60 plus minutes of Complex Chronic Care Management
 - CPT Code 99487
 - National Average Reimbursement **~\$93.66**
- Billed with 99487 for additional 30 min per calendar month for Complex Chronic Care Management
 - CPT Code 99489
 - National Average Reimbursement **~\$47.00**



CMS is Helping you with Marketing

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Connected Care

MANAGING YOUR HEALTH CARE CAN BE OVERWHELMING, BUT IT DOESN'T HAVE TO BE.

If you have Medicare and live with two or more chronic conditions like arthritis, diabetes, depression, or high blood pressure, chronic care management services can help connect the dots so you can spend more time doing what you love.

SERVICES MAY INCLUDE:

- At least 20 minutes a month of chronic care management services
- Personalized assistance from a dedicated health care professional who will work with you to create your care plan
- Coordination of care between your pharmacy, specialists, testing centers, hospitals, and more
- Phone check-ins between visits to keep you on track
- 24/7 emergency access to a health care professional
- Expert assistance with setting and meeting your health goals

Ask your doctor about chronic care management services and get the connected care you need.

For more information visit: ga.cms.gov/ccm

<https://www.cms.gov/About-CMS/Agency-Information/OMH/equity-initiatives/ccm/patient-resources.html>



CMS Target

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Pennsylvania
Georgia
Washington
New Mexico



Are you Ready?

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- Do you have a program to coach patients with chronic conditions?
- Do you have the skills to coach patients to identify and meet the goals that are important to them?
- Have you built trusting relationships with patients?
- Do you consider patients to be experts in their lives?



Thank You

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