Who We Are

- **FQHC in San Joaquin, Solano, and Yolo Counties**
  - ➤ We Serve 36% of our entire community in San Joaquin County and 9% in Solano County

- **Medical, Dental, and Behavioral Health**

- **21 Locations in 7 Cities**

- **Membership Population:**
  - ➤ Medi-Cal: 81%
  - ➤ Uninsured: 15%
  - ➤ Medicare: 5%

- **Hispanic 67%, Asian 13%, White 13%, and African American 7%**

- **Next Gen and i2i Patient Registry**
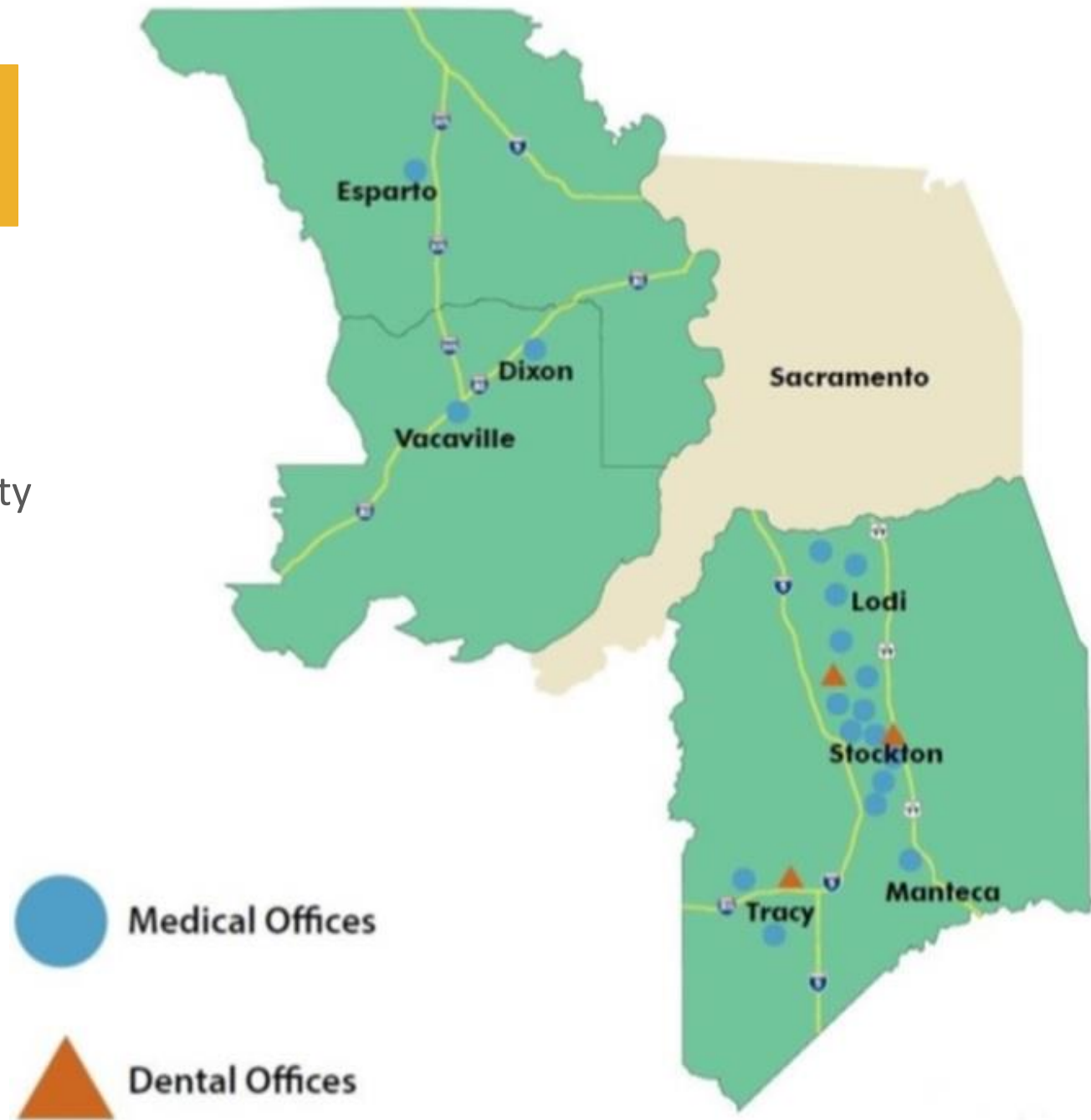
Community Medical Centers, Inc.

PHLN Year 2 Project Aim

Service Delivery to a Higher Percentage of Our Assigned Membership Consistent With Organization's Mission:

Focusing on outreach strategies, we aim to improve above our Health Plan of San Joaquin assigned members seen by reaching 80% membership engagement by December 31, 2019.

Measures for Success

Process measures:
- Implement a population health based roster system by April 30, 2019
- Identify number of members who have not had a visit with CMC
- Outreach all members newly assigned per month (last 90 days and 91-120 days) and schedule appointments for an annual wellness visit (new patient physical)

Outcomes Measures:

Run specific reports to track:
- Number of members reached

And of those members reached:
- How many resulted in appointments scheduled
- How many of those appointments were kept
- How many of those kept appointments were annual wellness visits

Changes

Tested Changes

- Developed an **Outreach In-Reach Activity Matrix** to help clearly identify what items teams are to work on.

- Cultivate and sustain **Tiered Approaches** for outreaching members.

Implemented Changes

- Implemented **Enrollment Manager**, a new roster management tool through eMedApps, which identifies newly assigned and established members who have received or not received services; and documents outreach efforts and results.

- Mailing **Welcome Letters** to newly enrolled members on a monthly basis.

- Sending **Text Message** Campaigns and **Post-card** follow-up communications.

OUTREACH/IN-REACH ACTIVITY MATRIX

Who's Responsible?	In-Reach (Patients) Tasks	Outreach (Members) Tasks
Clinic Care Teams	For new and established patients --- Generate i2i Huddle report; Huddle; conduct robust confirmation calls; manage patient panels; perform annual wellness visit (physical)/CHDP; use appropriate codes; perform SHA (age-appropriate, annually); print out anticipatory guidance; recall no-show patients; recall patients with abnormal labs/clinically significant follow up	Designated Care Team Staff: Schedule Non-Engaged Members (not new members) by documenting in Enrollment Manager as directed by Center Manager, Supervisors, Leaders. Center Managers will provide feedback to Membership Services Director on O & E staff progress at sites.
Health Educators	Conduct group classes; recall patients with gaps in care for diabetic labs CDC-HT; CDC-N; MPM-ACE; and MPM-Diuretics (standing orders); Recall patients who have not had an annual wellness visit (prioritize CHDPs) in the past 12 months (lists retrieved from Health Plans) Note: Documentation in NextGen only.	N/A
Patient Services Center	Schedule appointments in a timely manner for all patients	Conduct outreach; schedule appointments from the Enrollment Manger list from designated health plans for members assigned within the last 0-90 days. If all 0-90 day New Members have been contacted, available staff time should be concentrated on Non-Engaged members with a focus on sites that have available access.
Outreach and Enrollment Staff	Recall patients who are identified as uninsured and pursue enrollment of health coverage	Conduct outreach; schedule appointments from the Enrollment Manger list from designated health plans for members assigned within 91-120 days and Non-Engaged members as a second priority. Health coverage schedules are blocked for 4 hours weekly. Documentation will be done in Enrollment Manager. This time commitment will be allocated in full or part by the O & E Team Leader. O & E Team members will also communicate with Center Managers on weekly progress.

Using Data for Improvement
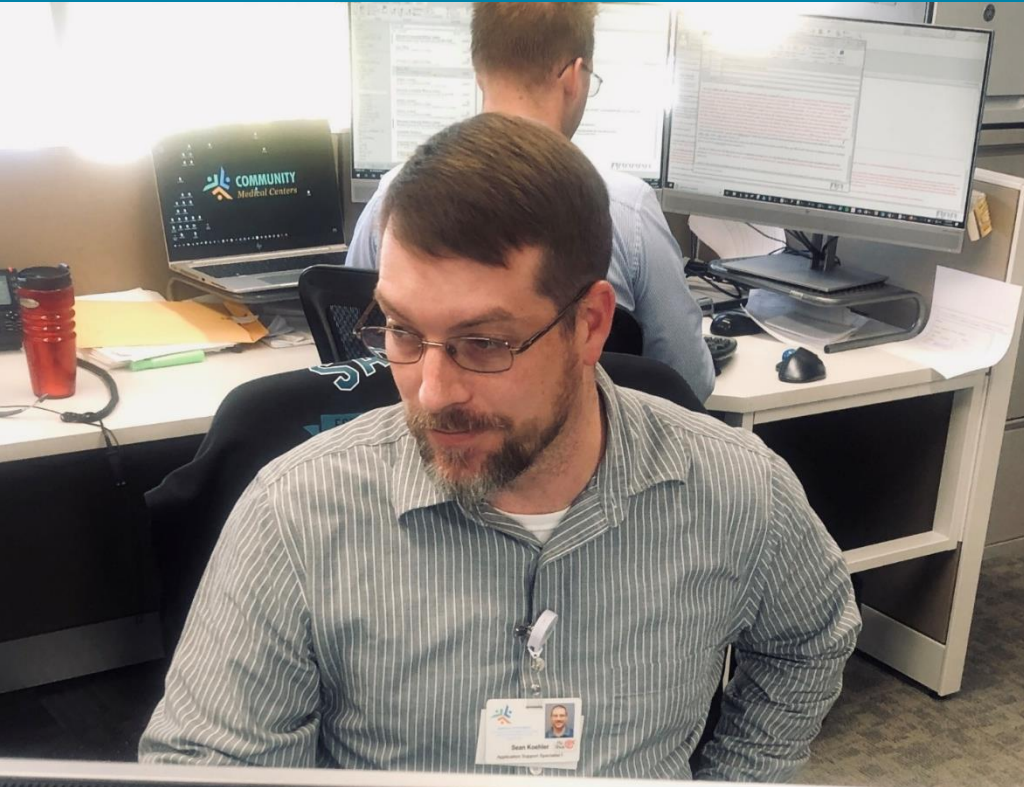
HPSJ Assigned Members Outreached
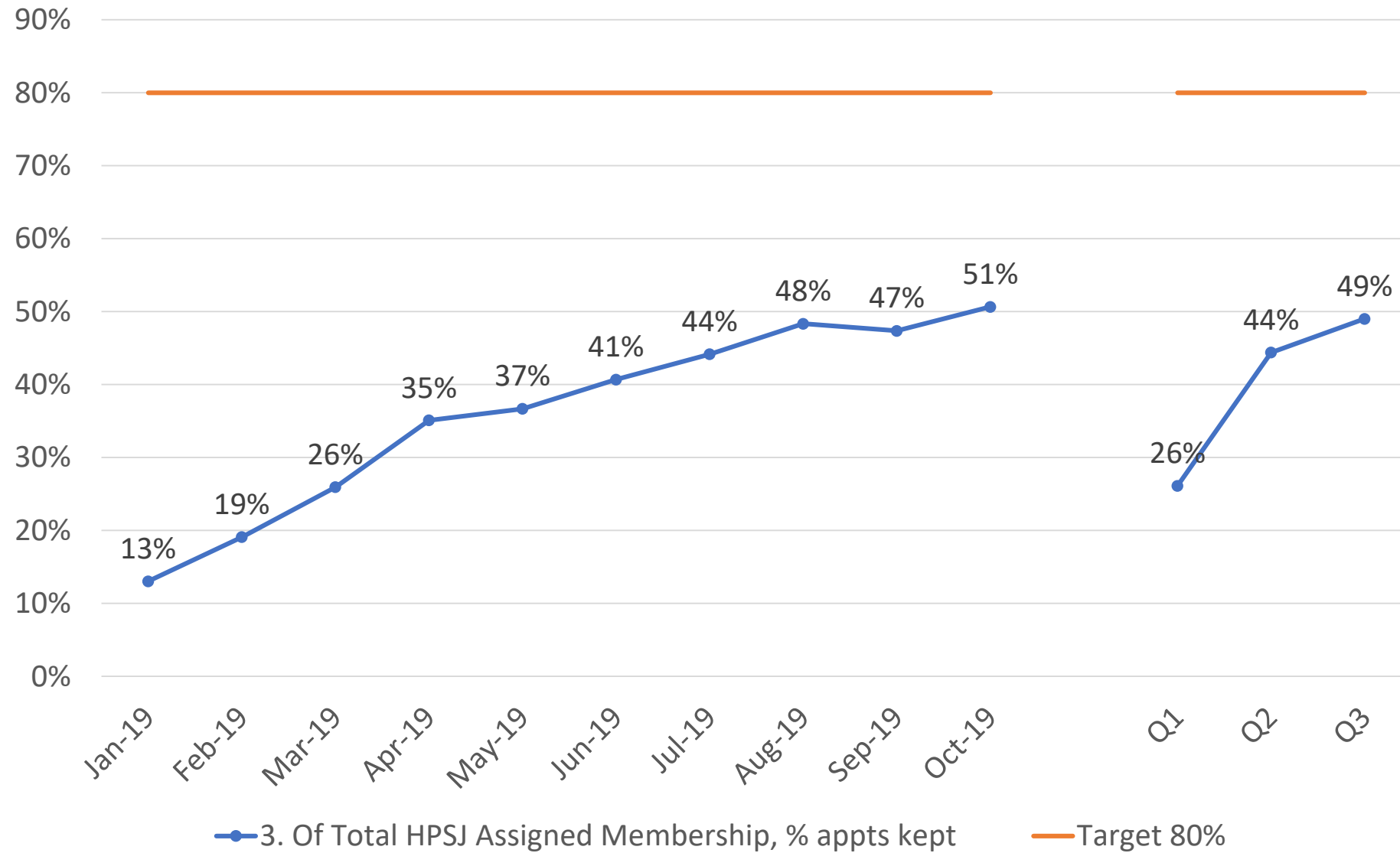
We had Staff/Resources role changes and training that effected a dip in outreach attempts.
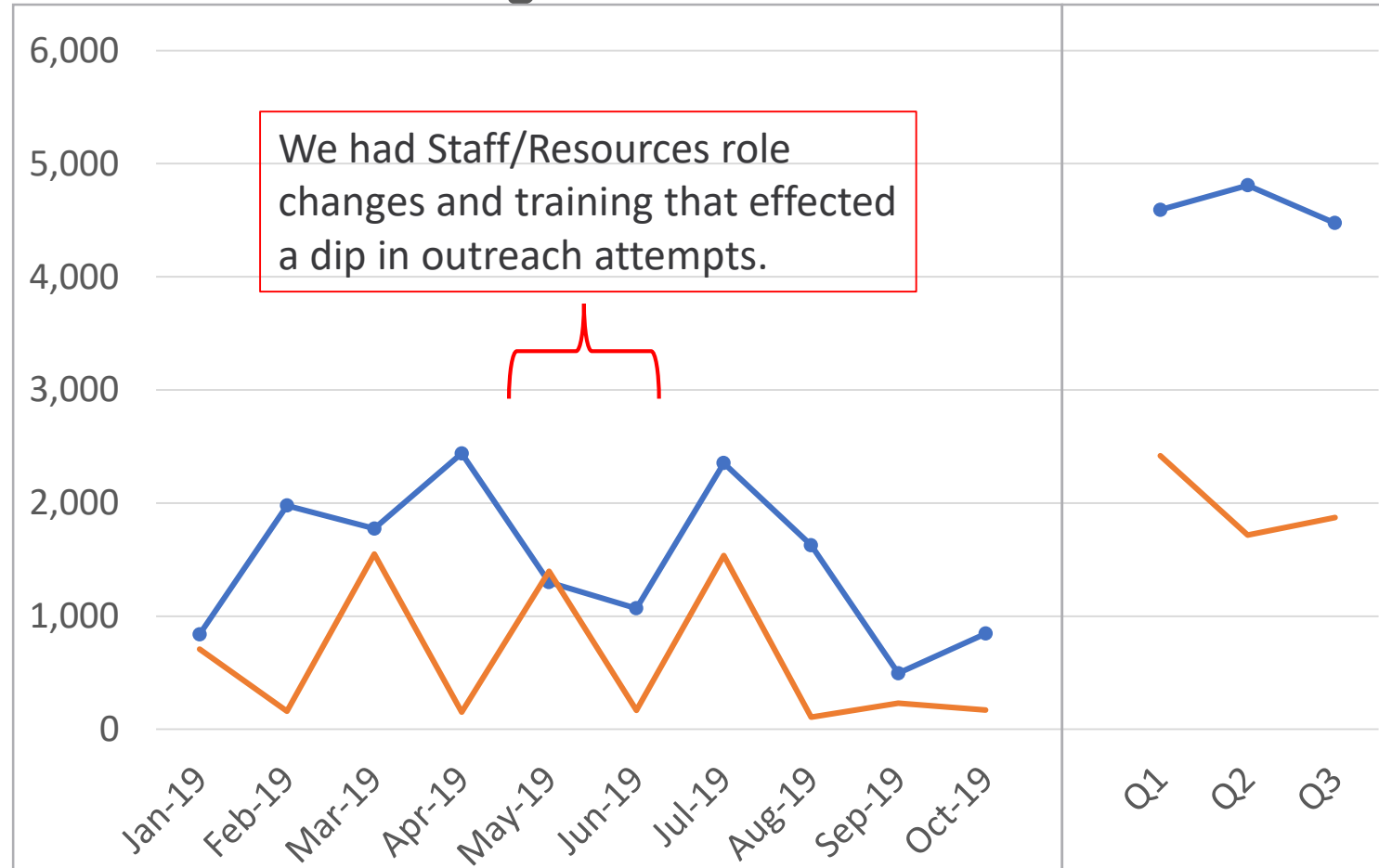
1. # HPSJ members outreach attempts (phone, mailer, text - members assigned 0-120 days)

Target (100% of members newly enrolled that month, 0-30 days)

% HPSJ Assigned Membership Engagement

Chart showing "3. Of Total HPSJ Assigned Membership, % appts kept" (blue line) versus "Target 80%" (orange line).

Monthly values:
- Jan-19: 13%
- Feb-19: 19%
- Mar-19: 26%
- Apr-19: 35%
- May-19: 37%
- Jun-19: 41%
- Jul-19: 44%
- Aug-19: 48%
- Sep-19: 47%
- Oct-19: 51%

Quarterly values:
- Q1: 26%
- Q2: 44%
- Q3: 49%

2018 v. 2019 Comparison
Total # HPSJ Members (Assigned & Not Asssigned) Engagement

- Jan. 18 - Dec. 18 (41389)
- Jan. 19 - Oct. 19 (48595)
- Projected Scheduled Appts for Nov-Dec 19 (1073)

2018 (41389)   2019 (49903)

HPSJ Assigned Members Preventive Visits Kept

- # HPSJ members Engaged (38388)
- # HPSJ Preventive Visits Kept (24458)
- # HPSJ members NOT Engaged (37255)

75643
Total HPSJ Assigned Membership (Oct 2019)

eMedApps

Enrollment Manager Member Processing

File Source: [HPSJ] ⓘ

Panel Control: ⊙ Toggle ⊙ ↺ Cycle ↴

Member Statistics ⓘ   ⊙

Members by Current Status   Total: 83468   **File Processing Status**

Status	Count
EM_Active Member	46590
EM_New Enrollment	3048
EM_No Contact From Member	399
EM_Not Engaged	30798
EM_Scheduled Member	1308
EM_Termed Member	1325

Source	Processed Date	Total	Added	Existing	Exceptions	Termed
HPSJ	10/30/19 4:01:38 AM	75833	856	70054	4923	0
HPSJ	09/16/19 9:47:23 AM	75128	586	58905	15637	0
HPSJ	08/07/19 11:17:18 PM	6707	111	5457	1139	0
HPSJ	08/01/19 8:07:12 PM	61090	1507	47224	12359	0
HPSJ	06/05/19 9:35:26 PM	61809	540	49602	11667	0

Member Processing ⓘ   ⊙

Member Processing Filters

Status	Sub Status	Days Since Outreach	Days Since Followup	Days Since Eff Date	From Eff Dt.	To Eff Dt.	☐ Peds Only
					/ /	/ /	

Payer	PCP Name	Assigned to	First Name	Last Name	DOB	New Member	Risk Level
					/ /		

[Open Chart] [Appointments] [Filter] [Clear]

Source	Status	Sub Status	Original Status	Date Rcvd	Member Name	Do
HPSJ	EM_Termed Member	Left voice message	EM_Active Member	06/05/2019 21:35:26		06/
HPSJ	EM_Not Engaged	Left voice message	EM_Active Member	08/01/2019 20:07:12		12/
HPSJ	EM_Not Engaged	Left voice message	EM_Not Engaged	08/01/2019 20:07:12		07/
HPSJ	EM_Not Engaged	Phone call made	EM_Active Member	09/16/2019 09:47:23		04/
HPSJ	EM_Not Engaged	Phone call made	EM_New Enrollment	08/01/2019 20:07:12		07/

Selected Patient: None

Total Row Count: 83603   ◀ Page: [1] / 8361 ▶   [Generate Report]

Strategies for Success

1. Creating an Interdisciplinary Team

2. Developed an Outreach In-Reach Activity Matrix

3. Improve reporting on progress where results are readily available

4. Tiered approaches to outreach member engagement

Key Tools & Resources

In efforts to expand our outreach goals to also help with meeting inreach of our non-engaged members, we have updated our matrix to include resources from our direct **Clinical Care Teams**.

Staff training on new Enrollment Manager tool. **Training materials** on using the roster product have been developed by our Applications Department with the support of super users from our Patient Services Center.
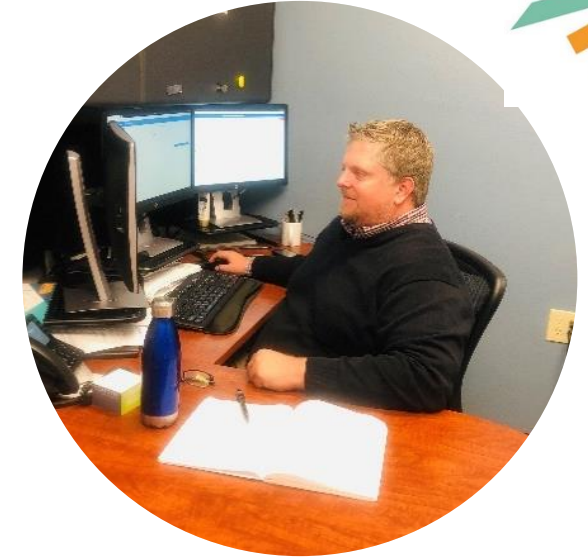
We added Text Reminders to come for care via integration from our established Appointment Reminder System, Well App. We used a Special **Text Campaign.**

Next Steps

Spreading

Add 2 new health plans to the Enrollment Manager roster process, bringing our total participating percentage to 92%.

Integrate our **unassigned "members"** into this process, primarily our Uninsured and Standard Medi-Cal and Medicare.

Incorporate Enrollment Manager into **Health Educator** outreach efforts

Sustaining

Utilize the Enrollment Manager to facilitate appointments to **improve HEDIS outcomes and member engagement.**

Hardwire an **ongoing process** by refining and learning on what works and does not work.

We're Proud of What We've Learned!

Outreaching 100% of newly assigned members within 30 days

To date, we have seen 3% more HPSJ Members for Preventive Visits compared to last year

Implemented Enrollment Manager that will help track outreach/inreach documentation efforts

Learned how to improve our data analytics to work for us

We now have better tools and a stronger understanding of how to continue engaging our members!

Current Challenges or Barriers

1 What relationship tools and techniques are the most effective methods to engage our members in receiving our services?

2 Membership changes monthly which creates a moving target for tracking outreach results. What tactics may be utilized to help mitigate this?

Questions?

Alyssa Arismendi-Alvarez, Director of Quality Improvement   Aalvarez@cmcenters.org
Ginger Manss, Chief Nursing Officer   Gmanss@cmcenters.org
Javier Romo, Data Analyst   Jaromo@cmcenters.org
Laura Thao Vang, Operations Special Projects Manager   Lathao@cmcenters.org
Marc Smith, Director of Member Services   Msmith@cmcenters.org