NYACP
New York Chapter
American College of Physicians
Advancing Internal Medicine; Improving Patient Care

Your Chapter in Action

May 25, 2018

Practice Management

Introducing New York State Patient Centered Medical Home (NYS PCMH)

Are you aware of the changes to New York State's Advanced Primary Care Program?

On April 1, 2018 the New York State Department of Health (NYSDOH), in collaboration with the National Committee for Quality Assurance (NCQA) launched an innovative model for primary care transformation known as the New York State Patient Centered Medical Home (NYS PCMH). This statewide, innovative advanced primary care approach is characterized by a systematic focus on high quality care, population health and integrated behavioral health.

The NYS PCMH Recognition Program, built upon the NCQA PCMH model, is exclusive to New York State and supports the state's initiative to improve primary care and promote the Triple aim: Improving Health, Enhancing Quality, and Reducing Costs.

There are enhanced benefits and resources now available through the NYSDOH which include:

- Initial Recognition Fees at no cost to practices. NYSDOH will cover the first year NYS PCMH Recognition fee or the first NYS PCMH Annual Reporting fee. The practice is responsible for paying their Annual Reporting fee each year after earning NYS PCMH Recognition.
- Transformation Assistance. New York state contracted with 15 organizations that specialize in NYS PCMH transformation and provide technical assistance at no cost to participating practices. These entities provide step-by-step assistance in managing the transformation process and support the efforts of improving the patient experience.
- Enhanced reimbursement opportunities. Supplemental payments through state programs such as the Medicaid PCMH Incentive Program may be available to practices that participate in NYS PCMH transformation. NYSDOH is also engaged regionally with commercial payers to implement voluntary, multi-payer value-based payment (VBP) arrangements to support practices that have not had these opportunities through previous transformation efforts.

NCQA and the NYSDOH have developed numerous resources to assist in your transformation journey. The following can be found on the NYACP website:

- NCQA NYS PCMH Release
- NYS PCMH Brochure
- NYS PCMH Recognition Pathway

More information on NYS PCMH program requirements and additional resources and benefits can be found on the NYSDOH website or the NCQA website.

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provided are solely the responsibility of the authors and do not necessarily represent the official views of HHS or any of its agencies."

NYACP: A Partner in Connecting Patients to Information

With almost three-quarters of insured New Yorkers enrolled in High Deductible Health Plans,[1] increasing out-of-pocket costs are driving patients to become more informed consumers. Just under half (48%) of state residents have attempted to research price information before getting care.[2] Patients are thinking about it and want to talk about it. 66% expressed that they like the idea of their physicians and staff discussing cost with them and consider them a trusted source for information.[2] However, less than half actually ask their doctor.[2]

The topic can be awkward, and patients know that time is limited. Yet, understanding a patient's cost concerns could mean the difference between getting the treatment they need versus forgoing treatment altogether. Just as patients look to you as a credible source, we know you look to NYACP as a source for education, information and resources. We are here to support you in the quality and cost conversation with your patients! We can equip you with free tools, resources and best practices necessary to effectively engage and empower patients considering cost as a part of their decision making.

The Chapter has recently been asked by the NYS Health Foundation to participate in a Connecting "Consumers" to Information initiative to help physicians connect their patients to the quality and price information they seek. In the coming months we will be providing you with many educational resources, including: a list of free tools, informative webinars, and newsletter articles to help you and your patients navigate the quest for high quality, affordable care options. But first, we want to learn more about your understanding of currently available information and your thoughts relating to transparency of quality and cost. Within the next 2 weeks, we will be distributing a brief survey to gauge awareness and gather information. Be sure to look for our survey!

Citations

1. Agency for Healthcare Research and Quality. (Medical Expenditure Panel Survey Insurance Component Tables, 1996–2016). Table II.F.1, Table II.F.12, Table II.F.13, Table II.F.15, Table II.F.16. Retrieved May 3, 2018, from https://meps.ahrq.gov/mepsweb/data_stats/MEPSnetIC/startup
2. Schleifer, D., Silliman, R., & Rinehart, C. (2017). Research Brief: How People in New York Statue Use Health Care Price Information". Public Agenda.

Quality Payment Program (QPP) Website Open to Check MIPS Eligibility for 2018

The Centers for Medicare and Medicaid Services (CMS) has announced that physician practices/groups may now log into the CMS QPP website to check their 2018 eligibility for Medicare's Merit-based Incentive Payment System (MIPS). After groups log in, they will be able to click into a details screen to see the eligibility status of every clinician in the group (based on their National Provider Identifier or NPI) to find out whether they need to participate during the 2018 performance year for MIPS.

CMS will **not** be sending out letters to advise physicians of their eligibility status this year so checking on the QPP participation status look-up tool is the only way to determine or verify eligibility status. Eligibility rules in 2018 are different than in 2017 so status this year may be different than last. Also as is indicated in the look-up tool, exempt individual clinicians will still need to report if their group is eligible and chooses to report as a group.

The look-up tool can be found here.

Recommendations for Increasing Physician Engagement with EHR

Article courtesy of Becker's Hospital Review

Suffering from the day-to-day burdens of increasing documentation demands and changing technology tools, physicians are now more burned out than ever, according to Rick Roesemeier, manager at ECG Management Consultants. This is forcing many to reduce their clinical availability in an effort to manage a better work-life balance.

Mr. Roesemeier noted the EHR is a key factor contributing to physicians' job dissatisfaction, and the issues fall into three buckets.

- Declining perception of patient care. Physicians view documentation requirements as an interference to their face-to-face time with patients.
- Misalignment of workflows. There is a major disconnect between the existing EHR workflows and physicians' clinical workflows.
- Data fatigue. The EHR stores a plethora of data that can overload physicians who don't have time to devote to sorting through the noise.

He proposed four ways healthcare organizations can better support their providers and reduce their risk of EHR-induced burnout.

1. Let physicians personalize the EHR interface. EHRs are equipped with functionalities that allow providers to customize their individual interactions with the system. When building and offering these custom tools, it is important to consider each user group who will be conducting that specific EHR task. In other words, anything financial-related must get the stamp of approval from the billing department, while anything clinical gets the physicians' OK.

Leveraging tools such as customized templates, landing pages and order sets, as well as quick text and view filters, can foster a unique EHR experience for providers that makes their documentation responsibilities easier. It is more important to understand the EHR functionality at its core before tacking on apps or features; one exception tends to be voice recognition, which is a common solution that many organizations have found helpful in reducing documentation time.

2. Train physicians on the EHR, then train them again. While the required EHR training time for providers may be just four hours, surveys and research have shown those who receive six or more hours of formal training before the go-live indicated higher levels of overall satisfaction. And, training shouldn't stop after that initial implementation.Continuous training regime optimization and added that it is crucial to eliminating physicians' EHR frustrations.

To read the rest of this article, please click here
To view what resources ACP has for physician burnout, please click here

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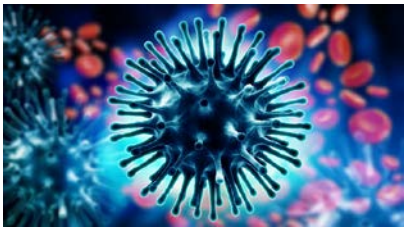
NY Department of Health Influenza Surveillance



During the week ending May 12, 2018:

- There were **457** laboratory-confirmed influenza reports, an **41% decrease** over last week.
- Of the **1,569** specimens submitted to NYS WHO/NREVSS laboratories, **86 (5.48%)** were positive for influenza.

- Of the **111** specimens submitted to the Wadsworth Center, **102 were positive for influenza. 6 were for influenza A (H1), 67 were influenza A (H3), 26 were influenza B (Yamagata), and 3 was influenza B (Victoria)**
- Reports of percent of patient visits or influenza-like illness (ILI[3]) from ILINet providers was **1.71%**, which is below the regional baseline of 3.10%.
- The number of patients hospitalized with laboratory-confirmed influenza was **99**, an **38% decrease over last week.**
- There were no influenza-associated pediatric deaths reported this week, and six pediatric deaths so far this season.

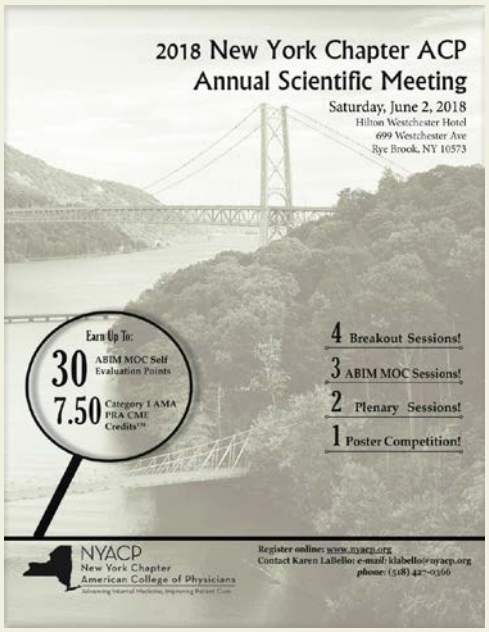
Read the entire report here.

Education

NYACP Annual Scientific Meeting: REGISTER TODAY

Worth 7.5 CME Credits™ & 30 MOC Points!

Saturday, June 2, 2018
Hilton Westchester Hotel
699 Westchester Avenue
Rye Town, NY



Take advantage of the Chapter's rich resources and increase your knowledge by attending our premier educational event for all Internists, as well as residents and medical students. This one-day conference offers something for everyone – you can earn up to **7.5 CME Credits™**, along with viewing the outstanding posters by our resident and medical student members. You can also earn up to **30 MOC points** if you register for the SEP breakout sessions to be held on Saturday.

Click on the image above to view the full brochure and fax flyer!

Meeting Details • **Register Online**
