

POPULATION MANAGEMENT



MANAGING THE LOGISTICS FOR YOUR
PATIENT PANEL

WHAT IS POPULATION MANAGEMENT



- Population management is the part of primary care that is responsible for helping patients manage their health by preventing illness, appropriately screening for diseases and risk factors, and helping patients effectively manage their chronic illness.
- Population management goes beyond caring for individual patients and looks at creating systems that care for GROUPS of patients that you are responsible for advising.
- *YOU* are responsible for helping care for the patients assigned to your Care Team.

It can only happen within an effective Team

WCHC CARE TEAM



CARE TEAM MEDICAL ASSISTANT



CARE TEAM MEDICAL PROVIDER



CARE TEAM REPRESENTATIVE
(FRONT OFFICE)



BEHAVIORAL HEALTH / MENTAL
HEALTH



NURSE CASE MANAGEMENT

What is the role of the CTMA?



- The CTMA is responsible for the LOGISTICS associated with the population management for your patient panel
- Ordering needed labs/DI
- Performing clinical surveys
- Some referrals
- Scheduling appointments
- Managing recall queries
- Managing documents

What conditions are we managing?



- Diabetes
- Hepatitis C
- HIV
- Obstetrics
- Asthma/COPD
- Cancer screening: breast cancer, cervical cancer, colorectal cancer, prostate cancer
- Sexually transmitted infections: GC/Chlamydia

Why is effective population management important? (Diabetes)



- Overall, the risk for death among people with diabetes is about twice that of people without diabetes of similar age.
- Adults with diabetes have heart disease death rates about 2 to 4 times higher than adults without diabetes.
- The risk for stroke is 2 to 4 times higher among people with diabetes
- Diabetes is the leading cause of new cases of blindness among adults aged 20–74 years

Diabetes cont.



- Severe forms of diabetic nerve disease are a major contributing cause of lower-extremity amputations.
- People with diabetes are more susceptible to many other illnesses. Once they acquire these illnesses, they often have worse prognoses. For example, they are more likely to die with pneumonia or influenza than people who do not have diabetes

Source: CDC National Diabetes Fact sheet 2007

Breast Cancer/Cervical Cancer Screening



- Mammography for women 50 and over has been shown to reduce mortality from breast cancer by 20-30%.
- Most cervical cancers can be prevented by regular screening.
- It is important to be screened for cervical cancer because 6 of 10 cervical cancers occur in women who have never received a Pap test or have not been screened in the past five years.

Colorectal cancer prevention



- It is estimated that as many as 60% of colorectal cancer deaths could be prevented if all men and women aged 50 years or older were screened routinely.

Source: CDC 2009

WHY IS THIS SO IMPORTANT?

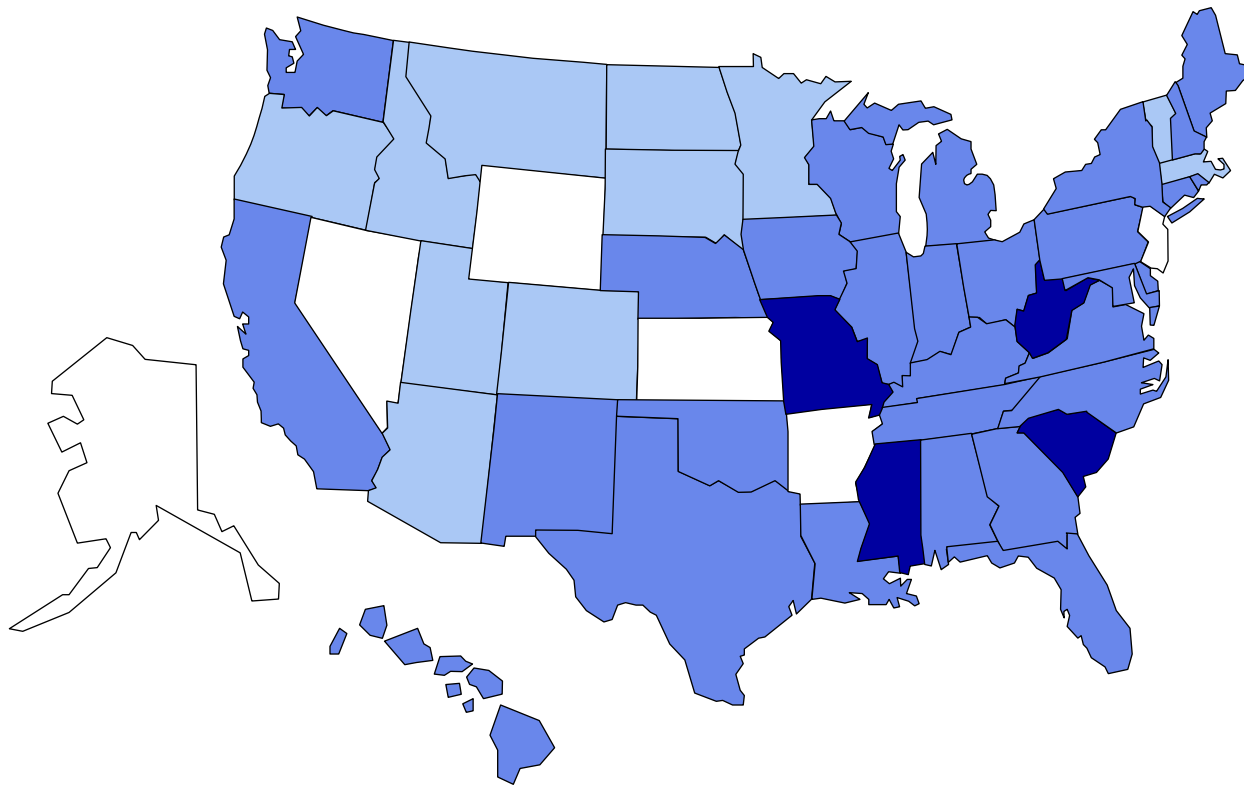


DIABETES TRENDS IN THE US

Diabetes Trends* Among Adults in the U.S.,

(Includes Gestational Diabetes)

BRFSS 1990

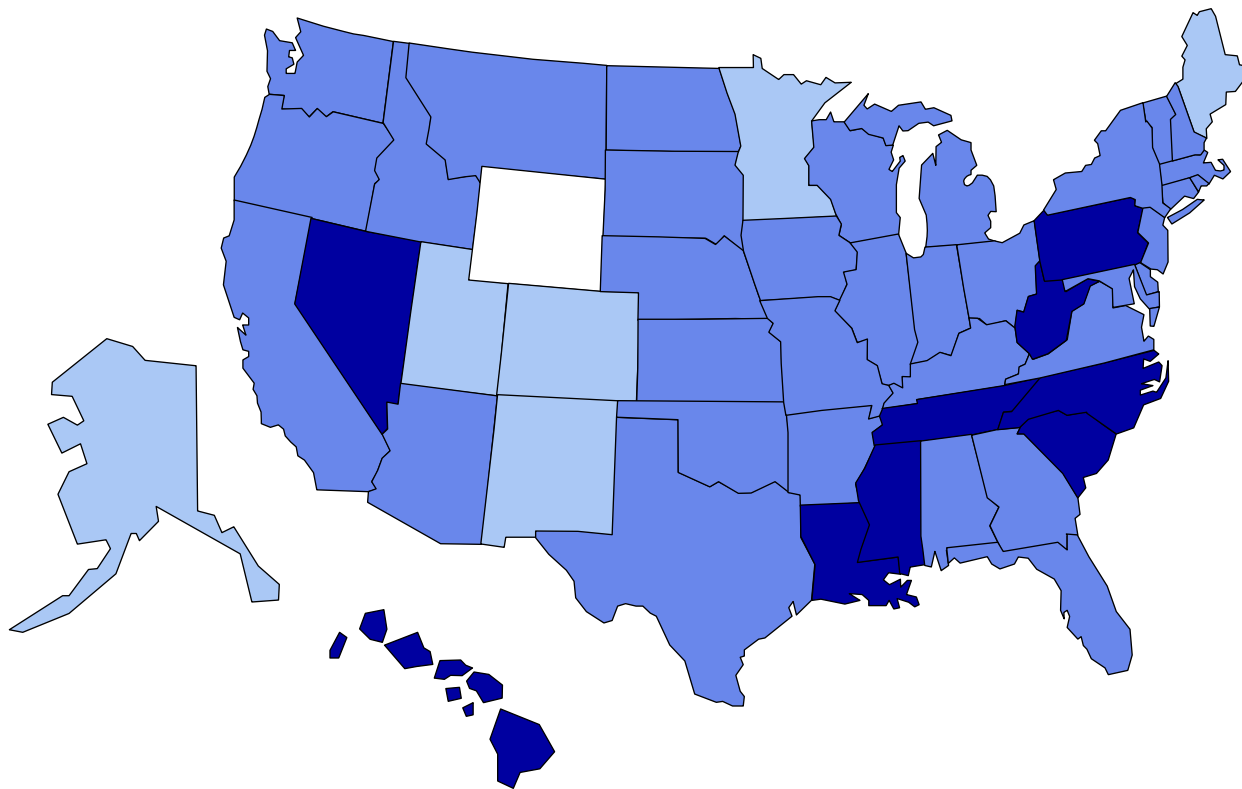


Source: Mokdad et al., *Diabetes Care* 2000;23:1278-83.

Diabetes Trends* Among Adults in the U.S.,

(Includes Gestational Diabetes)

BRFSS 1991-92

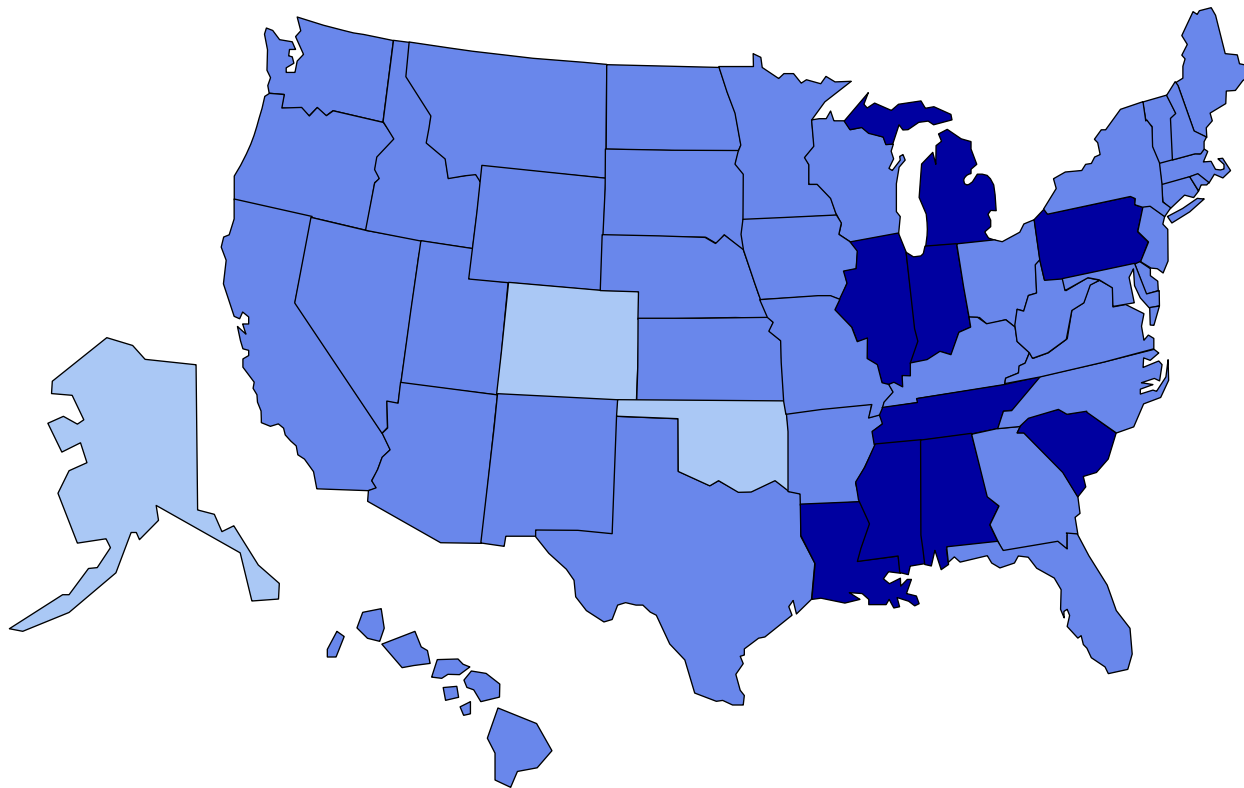


Source: Mokdad et al., *Diabetes Care* 2000;23:1278-83.

Diabetes Trends* Among Adults in the U.S.,

(Includes Gestational Diabetes)

BRFSS 1995-96

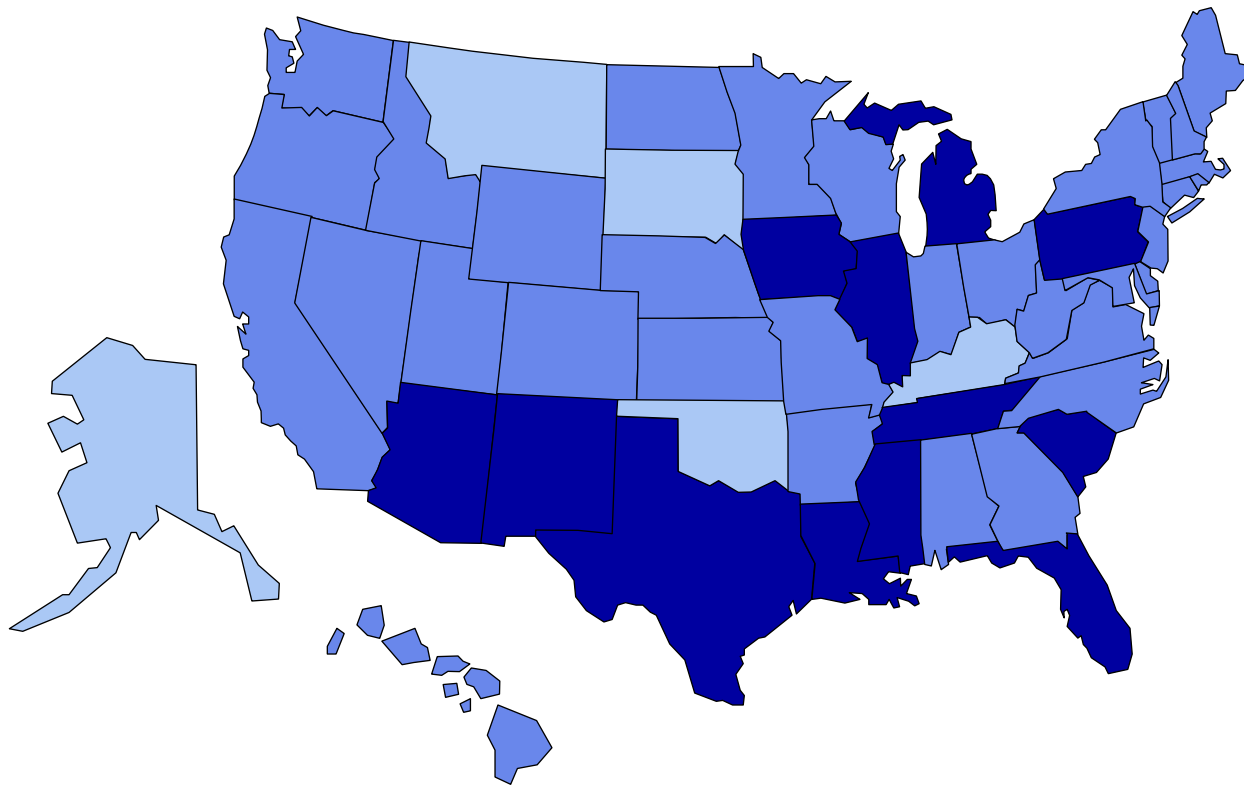


Source: Mokdad et al., *Diabetes Care* 2000;23:1278-83.

Diabetes Trends* Among Adults in the U.S.,

(Includes Gestational Diabetes)

BRFSS 1995

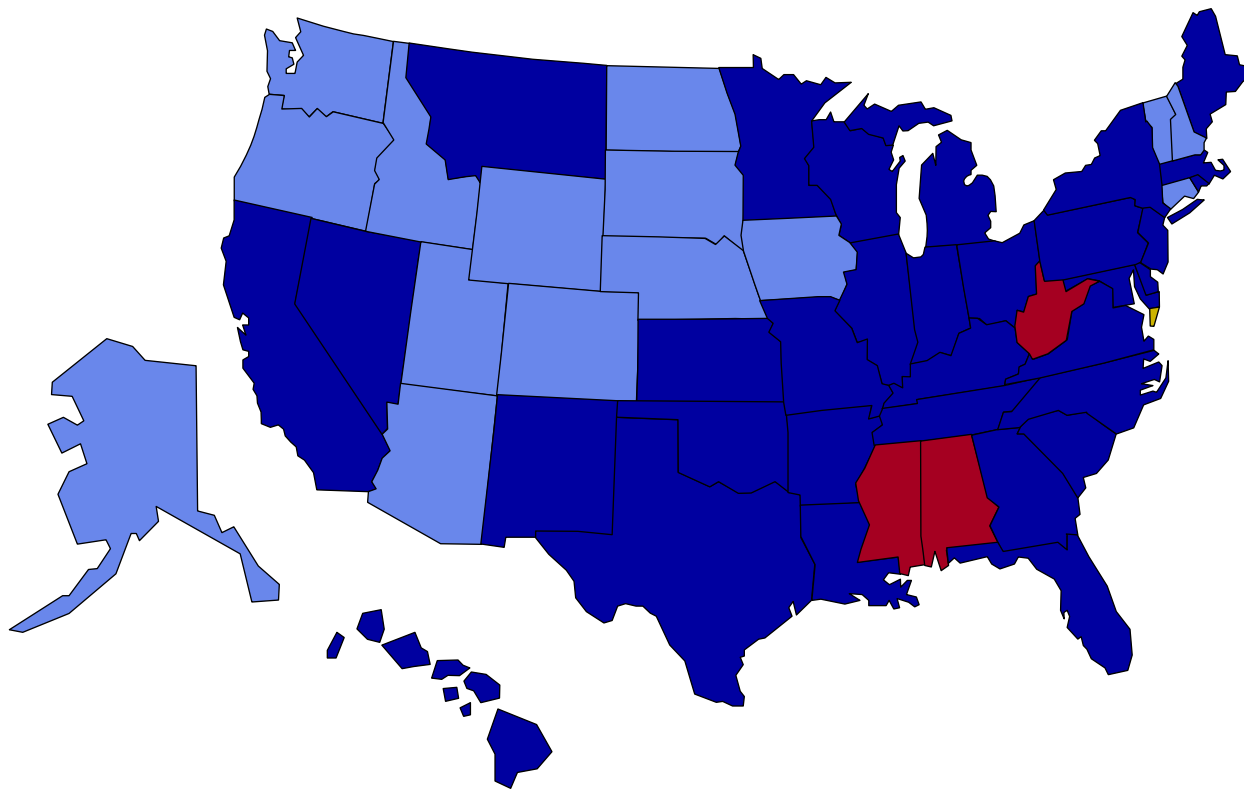


Source: Mokdad et al., *Diabetes Care* 2000;23:1278-83.

Diabetes Trends* Among Adults in the U.S.,

(Includes Gestational Diabetes)

BRFSS 1999

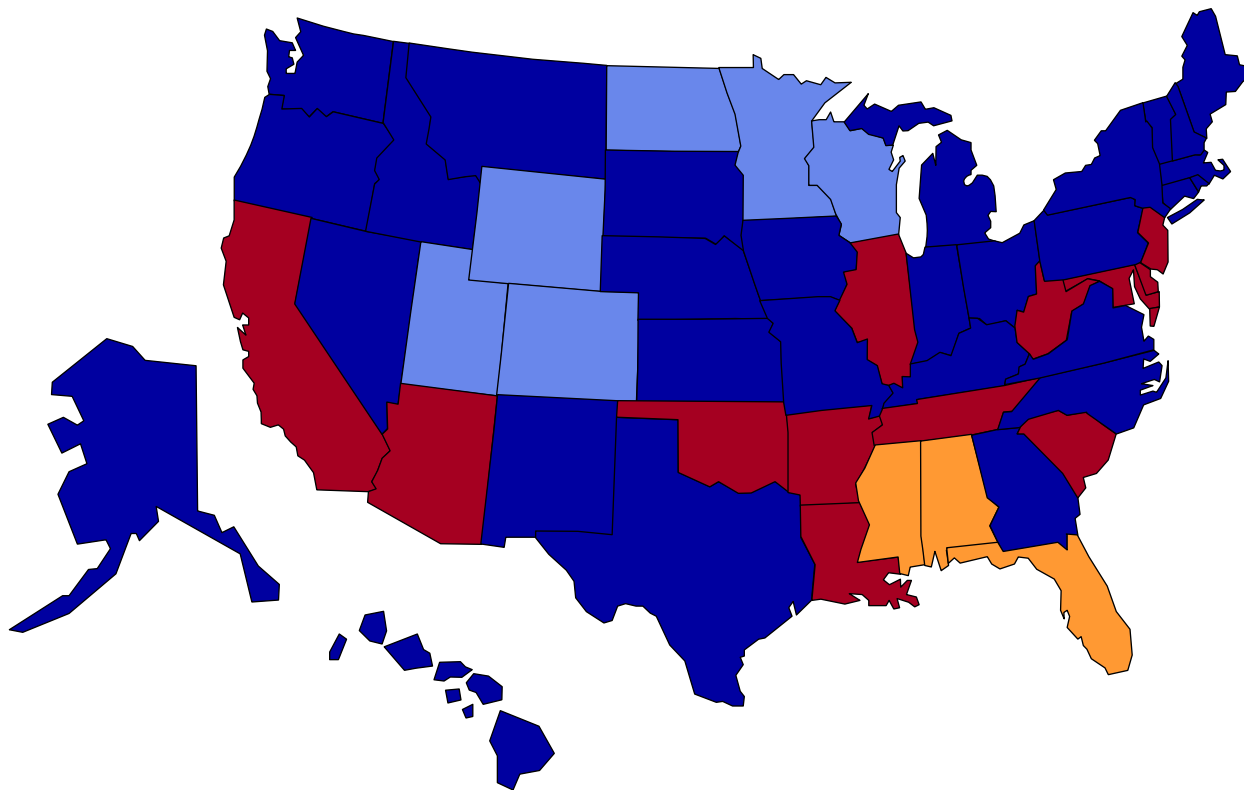


Source: Mokdad et al., *Diabetes Care* 2001;24:412.

Diabetes Trends* Among Adults in the U.S.,

(Includes Gestational Diabetes)

BRFSS 2001



Source: Mokdad et al., *J Am Med Assoc* 2001;286:10.

What are your statistics as of
November for Diabetes?



Getting Accurate Data



- We can't act on inaccurate information
- Spending the time to enter data already in eCW in the RIGHT place
- Careful attention to entering new information into the RIGHT place with the RIGHT workflow.
- If we don't do this – we won't be able to proactively and effectively manage groups of patients and we won't know how we are doing

Nuts and bolts of Pop. Mgmt for the CTMA



- “Point of care” alerts
- Managing disease specific “recalls” for recommended labs/DI, referrals, and clinical testing based on CTMA protocols
- Scheduling appointments as needed to manage needed clinical exams or testing
- Managing documents related to population management tasks

POINT OF CARE ALERTS



**GETTING THINGS DONE WHEN THE
PATIENT IS IN THE OFFICE**

RUNNING THE LIST (recall management)



**APPROACHING PATIENTS
PROACTIVELY TO COMPLETE
RECOMMENDED CLINICAL ITEMS**

Where did the day go?



- West County Leadership is committed to giving you the resources you need to have the time to manage your patients effectively.
- SCHEDULING is important – even if it isn't fun.
- We need to work as an agency to give you “population management time”
- YOU need to work effectively in your population management time – “closed door time”

Huddles



**YOU WILL HAVE DATA ON HOW YOU ARE
DOING – USE IT TO INFORM YOUR TEAM
YOUR INSIGHT IS UNIQUE**

THANK YOU!

