



ADVANCING INTEGRATED HEALTHCARE

Nurse Care Manager/Care Coordinator Best Practice Sharing Meeting

SEPTEMBER 15, 2020

Agenda

Topic <i>Presenter(s)</i>	Duration
School Response to Responding to Students and Staff with COVID-19 Symptoms <i>Linda Mendonca DNP, RN, NCSN, PHNA-BC, FNASN</i> <i>Kathy Marceau School and Adolescent Service Coordinator at RIDOH</i>	25 minutes
Update on the Pediatric Relief Fund / Immunization Performance <i>Susanne Campbell CTC-RI Senior Project Director</i>	10 minutes
Blue Cross Blue Shield of RI Program Update <i>Denise deHertogh, Director Quality Management</i> <i>Cameron Condry, Network Engagement Manger</i>	30 minutes
Nurse Care Mangers: Connecting with Patients at higher risk <i>Sharon Campbell RN, CDOE, RIPCPC</i> <i>Lucille Plasse, RN, CDOE, LMT, RIPCPC</i> <i>Kelsey Ryan and Melissa Feld, Coastal</i>	20 minutes

School Response

Responding to Students and Staff with COVID 19 Symptoms
Linda Mendonca DNP, RN, NCSN, PHNA-BC, FNASN



Protocol to Respond to Students and Staff with Symptoms of COVID-19
After-Illness Return Attestation



Reopening K-12 Schools Overview

Linda Mendonca, DNP, RN, PHNA-BC, NASN, FNASN

RIDOH State School Nurse Consultant

RHODE
ISLAND

Reopening RI

Back to School RI: Health and Safety Guidance to Reopen Rhode Island's Elementary and Secondary Schools

Released June 19, 2020

Updated August 25, 2020

**RHODE
ISLAND**

4 Plans that Districts and Schools needed to plan for

Full in Person

- Max 30-person stable group
- All K-8 students in person every day.*
- All High School students in person either every day or on an alternating schedules

Partial in Person

- Max 30-person stable group
- All K-5 students in person every day
- Middle and High School – no more than 50% in person at any one time with priority . Prioritize in person for transition grades and vulnerable populations

Limited in Person

- Max 15-person stable groups
- General population resumes distance learning and prioritize in person learning neediest students,(differently abled and multi-lingual students,) or transition grades
- No more than 25% of students in buildings at any one time

All Distance Learning

- 100% of Students doing Distance Learning

* Some Middle schools operate more like high schools and not able for stable groups, in which case they would follow the High School Guidelines
 Note: Parents may choose to keep kids at home in any scenario, utilizing distance learning options.

SCHOOL REOPENING READINESS

These benchmarks will help us determine whether it is safe to fully reopen schools.

- 1) **Statewide Readiness** - Does the state-level data indicate we should be in Phase 3 or higher?
- 2) **Municipal Readiness** – Do municipal-level case incidence rates indicate it is safe to fully reopen?
- 3) **Testing Readiness** – Do we have the ability to test all symptomatic staff & students & get results in 48-72 hrs.
- 4) **Supply Readiness** – Does every school have sufficient cleaning supplies, soap/hand sanitizer and face masks?
- 5) **Operational Readiness** – Does every district have a plan that has been vetted by RIDE/RIDOH?
 - Does every plan include necessary health precautions
 - Does every school have a point-person to work with RIDE and RIDOH on testing and contact tracing?
 - Does every school have a plan to support staff and students if they become ill?

Outbreak Response Protocols: Pre K-12

Guidance for COVID-19
outbreak response in
Pre K-12

Purpose of playbook

&

Directions for use

- This playbook provides guidance on how to respond if a child or staff member exhibits symptoms of COVID-19 or tests positive for COVID-19.
 - The playbook does not replace direct engagement with RIDOH, but rather gives an overview of what will occur throughout that engagement process.
 - The information shared in this document assumes that Pre K-12 and parents/guardians are **complying with current [RIDOH guidelines](#) and [CDC guidance](#).**
- Please keep this playbook in an area which is **easily accessible** for reference.
 - This playbook is intended **to share general best practices** which can be used by **all schools**; it does not address unique situation-specific questions that you may have.
 - In the event of a probable or confirmed case of COVID-19 in the school setting, in addition to this resource, RIDOH, and RIDE will support you throughout the process
 - K-12 Portal for probable cases

SCHOOL RESOURCES

• 1)

Reopeningri.com

www.ride.ri.gov

back2schoolri.com

www.health.ri.gov



Linda.Mendonca@health.ri.gov

www.Reopeningri.com Schools section - Health and Safety
Guidance, Playbook and other Information

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Pediatric Relief Fund

- ❑ Led by the Governor, RI Department of Health, and other state agencies.
- ❑ 55 Practices applied and received Pediatric Relief Fund Payments
“pediatric providers will take targeted actions to ensure patients are caught up on immunizations.”
- ❑ **2nd Medicaid Pediatric Primary Care Rate Supplement Program - applications were due Sept. 10**
 - will provide monthly payments to pediatric primary care providers based on the number of RI Medicaid-covered children served by the practice, and
 - awarded upon demonstration of performance improvement on a standardized measure of primary care access.
 - program guidance is [available here](#).



Immunization Performance thru 9/1/2020

KIDSNET Quick Tips

Preventive Healthcare Measures - Rhode Island

Run Date	# children in K range	# children meeting K immunization requirements	% in K range meeting K requirement	# in K range with 2 MMR	% in K range with 2 MMR	# children in 7th grade DOB range	# meeting 7th grade immunization requirements	% meeting 7th grade immunization requirement	# children 12-24 mo on 12/31/19	# with at least one lead screen	% with at least one lead screen
9/1/2019	11821	9131	77.2%	9916	83.9%	13431	7368	54.9%	11081	8669	78.2%
12/31/2019	11813	9429	79.8%	10109	85.6%	13424	8183	61.0%	11074	9028	81.5%
7/15/2020	11892	8729	73.4%	9492	79.8%	12996	6375	49.1%	10903	7988	73.3%
8/1/2020	11904	8851	74.4%	9594	80.6%	13027	6551	50.3%	10903	8051	73.8%
8/15/2020	11918	8974	75.3%	9693	81.3%	13028	6665	51.2%	10892	8077	74.2%
9/1/2020	11788	9089	77.1%	9780	83.0%	12999	6882	52.9%	10879	8130	74.7%

Source: RIDOH, Center for Health Data and Analysis, KIDSNET

Note: Includes children who are patients of a Rhode Island primary care provider, 2019 dates include children 1 year older

Kindergarten measure: % of children eligible to enter K on 8/31/2020 meeting K immunization requirements, DOBs: 9/1/2014 – 8/31/2015

MMR measure: % of children eligible to enter K on 8/31/2020 having two doses of MMR immunization, DOBs: 9/1/2014 – 8/31/2015

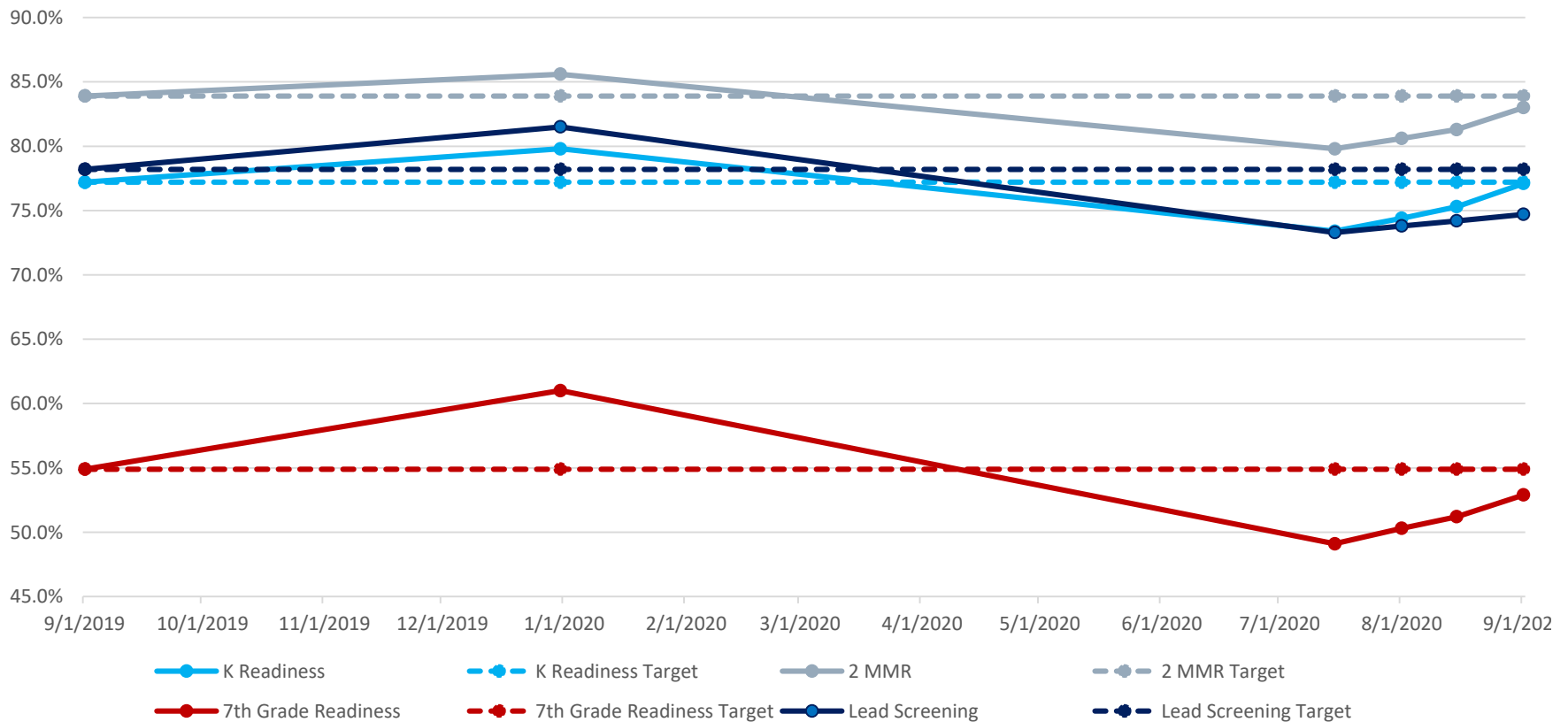
Seventh grade measure: % of children likely to enter 7th grade on 8/31/2020 meeting 7th grade immunization requirements, DOBs: 9/1/2007 – 8/31/2008

Lead Screening measure: % of children between 12 months and 24 months of age as of December 31, 2019 with at least one lead screen, DOBs: 1/1/2018 - 12/31/2018



Immunization Performance thru 9/1/2020

Pediatric Immunization Resource Guide



BCBSRI PCMH Program Update

CTC-RI Care Manager/Coordinator Best Practice Sharing Meeting

September 15, 2020

2019-2020 PCMH Initiatives

- Care Management Effectiveness Reviews
 - Onsite care plan reviews with PCMHs in Q3 and Q4 2019
 - Areas of success and opportunity reviewed with SOC/group leadership
 - Corrective Action Plans and programs implemented by SOCs to address findings
 - CM Collaboration meetings established with SOCs to discuss progress, new initiatives, etc.
- Delegated Care Management Reporting Kaizen – March 16-19
 - Reviewed current patient panel report with SOC/PCMH partners
 - Developed condensed and digestible report to replace current format
- Delegated Care Management Processes Kaizen – June 22-25
 - Reviewed current external CM process with SOC/PCMH partners to align on expectations (NCQA, BCBSRI, SOC/PCMH)
 - Created Care Management Forum, CM Guide, updated PCMH Policies

Best Practices Kaizen

- Eight different organizations participated in the Kaizen event
- Stronger partnerships were developed by dismantling assumptions
- Merging Case Management efforts for optimal member/patient experience
- Developed guidelines and expectations of PCMH Nurse Care Managers
- Reconciled the PCMH and health plan NCQA standards and requirements and industry best practices
- Creation of a Global Care Management Forum – partnership of PCMHs and BCBSRI care managers

Best Practices Kaizen

- Created consistency between Internal/External for
 - Care Plan Development
 - Assessment
 - On-going monitoring and follow-up
 - Transition to self-management
- Shared and identified best practices for outreach and ongoing engagement
- Development of the Internal/External Quick Reference Guide
- Established a framework for future reporting

Advanced Primary Care Policy

- Revised and distributed July 2020
- Reflects Best Practice Kaizenwork
- Key Points
 - Nurse Care Manager/Care Coordinator (NCM/CC) recognition requirements and staffing notification process to BCBSRI
 - NCM/CC Roles and Responsibilities:
 - Key Elements of Care Management defined by NCQA standards
 - Care Management Areas of Focus
 - Performance Guarantees
 - Reporting Requirements

Reporting

- BCBSRI is required to demonstrate compliance with NCQA accreditation standards
- BCBSRI is required to demonstrate oversight of delegated case management activities.
- BCBSRI customers require information on delivery and effectiveness of PCMH CM services
- Oversight processes assure delegated PCMH efforts:
 - Align with expectations
 - Produce effective, high quality patient outcomes

Two Options

Option 1- Return Reporting Tab on Patient Panel

- Pre-populated List of Members Identified as High Risk/High Cost
- Enter Dates as indicated by NCM activities
 - Outreach Date
 - Enrolled Date
 - BH Screening PHQ-2/PHQ9 Completed Date
 - Care Plan Established Date
 - Discharged from CM Date
- The data (dates) entered will remain on the file



[ex] For patient Jane Doe, successful patient contact made on 7/20/2020. Patient agreed to participate in CM on 7/24/2020.
There should be dates populated in each status event column.

The date format should either:
[1] Conform to ISO 8601 standard (e.g. "YYYY-MM-DD")
[2] Be an Excel date type

PCMH Patient Status Report **AUGUST_2020**

Mr_Last_Name	Mr_First_Name	BCBSRI_ID	Mr_DOB	BCBSRI_Risk_Categorization	Perf_Guarantee_Mbr	Practice_Site	Practice_Identified_Indicator
XXXXXX	XXXXXX	XXXXXX	XXXXXX	RED	N	ABC Primary Care	No
XXXXXX	XXXXXX	XXXXXX	XXXXXX	RED	N	ABC Primary Care	No
XXXXXX	XXXXXX	XXXXXX	XXXXXX	RED	N	ABC Primary Care	No
XXXXXX	XXXXXX	XXXXXX	XXXXXX	RED	N	ABC Primary Care	No
XXXXXX	XXXXXX	XXXXXX	XXXXXX	ORANGE	N	ABC Primary Care	No
XXXXXX	XXXXXX	XXXXXX	XXXXXX	ORANGE	N	ABC Primary Care	No

1 - Outreach_Attempted_Date	2 - Enrolled_Status_Date	3 - BH_Screening_PHQ-2_PHQ9_Completed_Date	4 - Care_Plan_Established_Date	5 - Discharged_from_CM_Date

Two Options

Option 2 - PCMH Data Extract Reporting

File Layout

FIELD_NAME	DATA_TYPE	SHORT_DESCRIPTION	NOTES
mbr_last_name	str	Member lastname	None
mbr_first_name	str	Member firstname	None
bcbsri_id	str	BCBSRI subscriber ID	None
mbr_dob	str (ISO 8601 "YYYY-MM-DD" format)	Member date of birth	None
practice_site	str	Name of practicesite	None
practice_identified_ind	str	Practice identified indicator	Indicate "Y" if the member was not identified by BCBSRI but added to the status report by the practice.
outreach_attempt_date	str (ISO 8601 "YYYY-MM-DD" format)	Date of attempted outreach	None
enrolled_status_date	str (ISO 8601 "YYYY-MM-DD" format)	Date of care management enrollment	None
bh_screening_phq2-phq9_date	str (ISO 8601 "YYYY-MM-DD" format)	Date of depression screening	None
care_plan_established_date	str (ISO 8601 "YYYY-MM-DD" format)	Date of care plan establishment	None
discharged_from_cm_date	str (ISO 8601 "YYYY-MM-DD" format)	Date of discharge from care management	None

Case Management Global Forum

September 29th
8:30 to 10am

- BCBSRI is hosting its first case management forum
- The first **virtual** meeting will largely present ideas that NCMs have brought forward to improve communications and ultimately, patient experiences.
- **Forum Agenda:**
 - Partner Recommendations - core expectations for CM
 - CM Resources - improving patient experiences
 - Coordinating Patient Care - streamlining NCM communication efforts
 - Bridging the Gap (in care) - partnership in Quality and CM initiatives
- We hope you join us!

Nurse Care Managers: Connecting with Patients at Higher Risk

- RIPCPC Report Out
 - Sharon Campbell, RN, CDOE
 - Lucille Plasse, RN, CDOE, LMT
- Coastal Report Out
 - Kelsey Ryan and Melissa Feld

Care Team Patient Engagement Tools

Care Team Patient Engagement Tools

Kelsey Ryan, PharmD, CDE, BC-ADM
Director of Population Health Management

Goal: Engaging patients in the way that meets evolving needs in the new landscape of healthcare delivery

Telemedicine Platforms

Used for:

- Care teams engaging patients for video visits
- **Virtual** warm handoff from clinician during telemedicine visit

The logo for doximity features a blue signal icon consisting of three curved lines to the left of the word "doximity" in a bold, black, sans-serif font.The logo for doxy.me features a teal cross icon to the left of the text "doxy.me" in a bold, black, sans-serif font.

Video Conferencing

- **Used for:**

- Scheduled visits with multiple family members or care team members
- Clinician warm handoff during in office visit with **remote** team member

- **Examples:**

- Goals of care discussion
- Collaboration with visiting nurse for homebound patients.



Google Voice for Business

- **Used for:** Texting and phone communication with patients
 - Examples:
 - Scheduling phone call or appointment
 - Brief symptom check-in or follow up



Remote Patient Monitoring

- **Used for:** Monitoring patients through text messaging, patient input applet, or Bluetooth linked devices to a monitoring portal.
 - COVID-19 symptom tracking
 - CHF
 - Diabetes
 - Blood pressure



Questions?



**COASTAL
MEDICAL**

Some Resources

[Flyer for the Pediatric Complex Program](#)

[MTM Frequently Asked Questions and Gas Mileage Form](#)

RI DOH World Diabetes Day

- [Information](#)
- [Sponsorship](#)
- [Challenge](#)
- [Calendar](#)



ADVANCING INTEGRATED HEALTHCARE

Thank you Stay Healthy and Safe

NEXT MEETING: OCT 20, 2020