Best Practice - Innova Primary Care

Initiative Aim: Provide sustainable, high-value care in a healthcare environment with deep-seated fee-for-service, uncoordinated care policies and norms

Initiative Champion and Role: David Uptagrafft, MBA, PMP; Strategy Director for Innova Primary Care, Huntsville, AL

Initiative Overview: In 2015, Innova Primary Care, formerly BrookeMD, launched a care-delivery transformation project, and, in its success with this challenging process, became a role model for other practices and a healthcare champion for the people of Huntsville. Like many organizations assessing MACRA quality-based legislation, Innova Primary Care wanted to adopt a delivery model that would help its community. Still operationally supported by a fee-for-service structure, Innova Primary Care knew it needed a strong vision and strategy to cross the delivery-model chasm successfully. Over the last two years, Innova Primary Care has made deliberate changes, including growing the organization's home-based care team by 3 nurse practitioners and adding support staff. These changes have allowed Innova Primary Care to increase its panel by 1200+ patients, and, at the same time, offer all patients a more comprehensive array of services. Innova Primary Care can serve as an example and inspiration to other medical groups also looking to grow their practices systematically and sustainably.

Case Study

Healthcare Landscape:

- As the 2015 MACRA legislation requirements take root and Medicare reimbursements are increasingly based on quality measures, the fee-for-service model in Alabama will no longer provide a financially viable option. There can be a financial grey space when moving from being paid per service to being rewarded for population health outcomes and cost savings
- Blue Cross Blue Shield (BCBSAL), Alabama's prominent commercial payer, has started to become aware of the need to encourage coordination between primary care, specialists, and hospitals; to help drive change across the state, Innova has partnered with BCBSAL to share lessons learned from their NP-led, team-based care model

Practice Opportunity:

- Innova saw a need within the Huntsville community for high-value, well-coordinated care, and wanted to pioneer a team-based care model even if commercial payers were not rewarding this type of structure. In establishing itself as a care delivery pioneer, Innova gave its patients a new experience of care, raised service quality, improved cost performance, and reached more patients
- The lead clinician, Dr. Brooke Uptagrafft, started BrookeMD with patients from retired or soon-to-retire physicians in a shared multi-tenant facility; additional clinics were continuing to operate in close proximity. This led to accountability for a patient population unmotivated to engage with its healthcare providers or unsure how to respond to inconsistent messaging resulting from varied physician methods

- Sustainability was critical and thus a heavily examined component of the new model. A big question became how to provide high-quality patient care when the largest commercial payer wouldn't formally recognize NPs as primary care providers

Sharing Best Practices:

Innova knew that to successfully build a team-based model it would have to:

- **Critical Area 1**: Increase Its Patient Population and Add to the Quality and Human Resource Management Team
  - Rapid growth of patient population and practice workforce were required to expand the organization's capacity and improve its quality performance; Innova recognized that growth would permit larger impact and additional revenue for overhead costs
  - To meet the service needs of its patient population, within months of its transformation kick-off Innova hired 3 additional nurse practitioners, designated a care manager, and trained health coaches
  - To provide structure during this period of change and rapid expansion, Innova pursued NCQA PCMH recognition and implemented a Medicare Chronic Care Management program; this required workforce training, including professional development and study of process improvement methodologies

- **Critical Area 2**: Develop a Proficient Approach to Quality Improvement
  - Innova did not pursue targeted, problem-specific quality improvement approaches based on individual metrics. Rather, it started with a broad-based approach to improvement that better supported the operational transformation occurring at both the clinical and business levels
  - Once Innova improved basic population health measures, including disease prevention, it was able to target other areas that remained as opportunities for improvement, such as expanding services to incorporate cognitive assessment visits and advanced age planning
  - Innova equipped all staff members with ongoing education around quality improvement methods and set up weekly brainstorming sessions to explore additional opportunities and discuss barriers to efficiency

Implementation:

- **Patient Engagement**

  - Innova used a multipronged approach to sign up patients for their patient portal. Tactics included: patient education provided by all staff and providers, a "new-patient welcome and orientation meeting," and enforced provider and staff use of the portal; to-date, 90% of Innova patients are registered within the patient portal, and its patient engagement measure corresponds to this percentage
  - A new name and a new location helped reengage long-standing patients and offered an additional opportunity to market Innova's innovative approach to the community

- **Care Team Structure**
  - PCMH requirements helped build a structure supporting team communication and coordination. These requirements stipulated standardized daily workflows, structured pre-visit planning workflows, regular team training sessions, and daily huddles (one before AM appointments and a second one before PM appointments)
  - With the new Medicare codes they were able to capture from these changes, Innova could build capacity and designate a nurse to manage all Medicare chronic care patients
  - Guideline-based protocols, EHR scripts used during team workflows, and other tools and activities allowed staff to practice at the top of licensure and ensured the team's focus on closing patient care gaps. Examples included: Choosing Wisely protocols, comprehensive preventative services decision support, and automated blood pressure follow-up and recheck protocols for measurements outside of recommended goals
  - "Project Revive," a community-based program, encouraged staff to dedicate their own time to community-based projects. Via staff work on "Project Revive," employees improved workforce and community-based relationships

- **Physical Layout**
  - A new location afforded Innova the opportunity to assess the layout of its patient rooms and working stations, and to establish secured "off-stage" team work areas away from patient care
  - The new facility incorporated relationship focused design in the lobby and consultation rooms including:
    - Display areas in the lobby for "books we're reading" for team members to share books with guests and facilitate conversation/relationship
    - A "conversation corner" around a semi-circle table in every guest room for comfortable discussions with guests with a pendant light to facilitate relational space
    - Digital displays in all guest rooms that display family pictures for the provider seeing patients in that room that day in order to facilitate trusted relationships with guests, these also double as display screens for the patients' medical record to be shared during the encounter.
    - A group training wing in the reception area that can be closed off with a curtain for diabetes and other education sessions
    - Dedicated consultation rooms on each wing that feature couch and comfort seating with no clinical equipment for health coaching and other team care encounters in order to facilitate guest comfort and avoid nervousness

- **Innovative Programs**
  - Within 2 years of its transformation launch, Innova had established a larger patient base and effective population management processes, and was well on its way to PCMH recognition. At this point the organization began to develop new partnerships and host on-site pilot projects. Strongly contributing to the success of these collaborative efforts was the Innova staff's ongoing, now-ingrained involvement with quality improvement initiatives and new projects.
  - QualityImpact PTN recommended additional areas where best practices and useful partnerships, especially with entities outside the healthcare industry, could help Innova

fill gaps, increase efficiency, improve areas of low performance, and take strong performance to a superlative level. In one very successful example, Innova worked with a local technology firm to pilot automated positioning data collection. Data, collected via a network of embedded, real-time sensors, located staff members anywhere within the office and thus permitted care team members to locate each other rapidly

o Space added to Innova's new location has permitted a part-time psychologist to work with Innova patients in need of emotional support. Although patients pay the psychologist directly and Innova does not receive any revenue from this venture, the onsite service offers a convenient option in this facet of comprehensive care

Key Takeaways:

- Define what "compassionate customer service, exceptional quality care, innovative technology use and high-value results" means for you and your staff
- Work with local business stakeholders to elevate performance, learn from other industries, and spread the word of your high-quality care
- Conduct ongoing assessments to gauge staff capacity for additional patient engagement and training opportunities (i.e., nurse training towards diabetes-educator certification; group visit opportunities)
- Establish a progressive and sustainable approach to growth that allows clinic revenue (rather than grants or other subsidies) to finance practice growth.