

Developing A Standardized Enabling Services Data Collection Model At FQHCs

Live Virtual Learning Series: Part 1 – Thur., Oct. 15, 2020 9am-10:30am PST







BACKGROUND





Providing enabling services, such as connecting people to housing, food and employment resources is important for increasing access to care and leads to better health outcomes. Health centers need to collect data on the enabling services they provide to demonstrate the complexity of the clients they serve and the value of this work to payers and policy makers.

During a 3-part live virtual learning series, Health Outreach Partners (HOP) will train health centers how to codify enabling services, create a standardized data collection model to improve data collection, and better understand impact on health care access and outcomes.





TRAINING OBJECTIVES



As a result of the training, participants will be able to:

- Delineate and define each enabling service category
- Use the enabling services data collection protocol
- Understand how the protocol can be implemented and data used
- Develop a proposed work plan for pilot implementation at their health center
- Provide guidance or train staff on the protocol

Three-Part Learning Series

Pre-Training: Video Review

Part 1: Thur., Oct. 15, 2020 9:00am-10:30am PST

- Module 1: Enabling Services Data Collection Protocol
- Breakout: Enabling Service Documentation Practice #1

Pre-Training: Homework & Video Review

Part 2: Thur., Oct. 22, 2020 9am-10:30am PST

- Breakout: Enabling Services Documentation Practice #2
- Module 2: Data Collection & Analysis

Pre-Training: Video Review

Part 3: Thur., Oct. 29, 2020 9am-10:30am PST

- Module 3: Planning for Implementation
- Breakout: Making Enabling Services Data Collection Work
- Next Steps

INTRODUCTIONS



Host:
Patricia Gepert
Health Access Coordinator





Presenter:
Cynthia Selmi
Executive Director





Presenter: Beleny Reese Project Manager



Health Outreach Partners www.outreach-partners.org

WE SUPPORT HEALTH OUTREACH PROGRAMS by providing training, consultation, and timely resources.

OUR MISSION IS TO BUILD STRONG, EFFECTIVE, AND SUSTAINABLE HEALTH OUTREACH MODELS by partnering with local community-based organizations across the country in order to improve the quality of life of low-income, vulnerable and underserved populations.

WE SERVE Community Health Centers, Primary Care Associations, and Safety-net Health Organization





Agenda

- Welcome and Introductions, Icebreaker (10 min)
- Module 1:Enabling Services Data Collection Protocol (30 min)
 - Brief review of Enabling Services Accountability Project
 - Enabling Services Category Definitions
 - Documentation Guidelines and Criteria
 - Presentation of Sample ES EHR Template
- Breakout Groups: Enabling services Documentation Practice (30 min)
 - Group Practice
- Re-Group and Share Back: (10 min)
- Session 2 Preview and closing (5 min)





Group Agreements

We aim to create a safe space to learn and share with each other. To do so, we will:

- Respect the value of each other's opinions and experiences
- Maintain confidentiality
- Acknowledge its okay to disagree, respectfully and openly
- Remain present and engaged
- Listen to each other
- Seek to understand our blind spots

- Assume positive intent
- Honor the limitations of time, speak concisely
- Know when to Step up and Step back
- Practice mindfulness and self-care
- *Mute microphones when not speaking
- *Keep cameras on





Ice Breaker Poll



VS.







Enabling Services Data Collection Protocol

- Enabling Services Accountability Project
- Category Definition
- Documentation Guidelines

Presentation of Sample EHR Template





Definition of Enabling Services

...non-clinical services that are provided to health center patients that promote support and assist in the delivery of health care and facilitate access to quality patient care.

- NACHC/MGMA 2000







Enabling Services Accountability Project





What is the ES Accountability Project?

- Collaborative effort between AAPCHO and 4 FQHC health centers
 - Waianae Coast HI Comprehensive Health Center
 - Charles B Wang Community HC in NY NY
 - International Community Health Services in Seattle
 - Kalihi-Palama Health center in Honolulu
- Increased Electronic Medical Record Data collection
- The project illustrated the role ES play on increased access, improved quality of care for underserved communities, and improved health outcomes
- Provided compelling data to compensate health centers for providing these services

Key Areas of Study



Social Services Assessment	Case Management
• Referral (2)	Interpretation
Health Education (4)	 Eligibility Assistance/Financial Counseling
• Transportation (2)	Outreach
• Inreach	Other Services

- Two performance measures/outcomes
 - Adult Diabetes
 - Childhood Immunization
- The study also compared the demographics between Enabling Services users and non-users.





Outcomes of Study

- Better outcomes on both measures for the ES users
- Illustrates- that vital role of ES in reducing health disparities and improving service quality
- Illustrates developing long term federal and state initiatives to fully fund and support these services
- Preliminary evidence shows that Health education plays a critical role in improving health access. Without the data – health education will be inadequately financed by health centers and funders

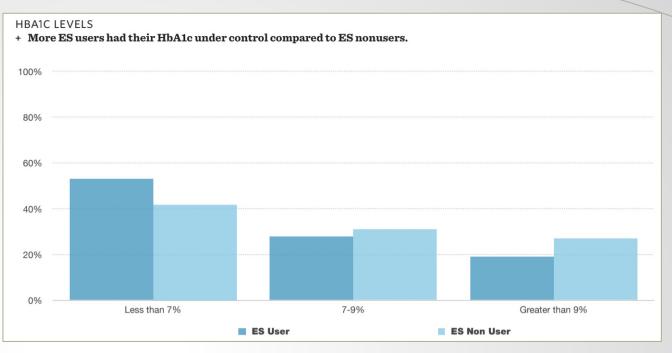


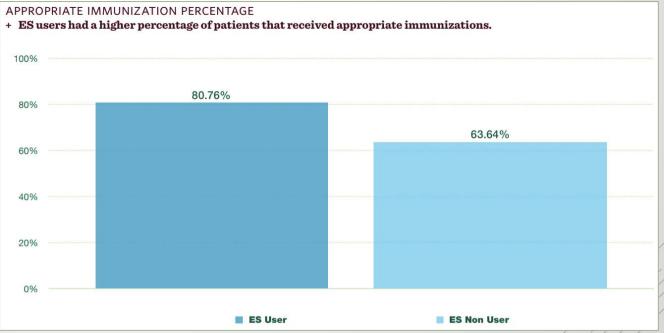


Health Outcomes









Enabling Services Categories





Revised Categories	Code
Social Services Assessment	SS001
Case Management	CM001
Referral- Health	RF001
Referral- Social Services	RF002
Financial Counseling/Eligibility Assistance	FC001
Health Education- Individual (one-on-one)	HE001
Health Education- Small Group (2-12)	HE002
Health Education- Large Group (13 or more)	HE003
Supportive Counseling	SC001
Interpretation	IN001
Outreach	OR001
Inreach	IRO01
Transportation- Health	TR001
Transportation-Social Services	TR002
Other	OT001

Social Service Assessment

Non-medical assessment that includes the use of an acceptable instrument measuring socioeconomic status, wellness, or other non-medical health status







Case Management

An encounter with a patient or their household/or family member in which a comprehensive patient centered care plan is developed or monitored.







Referral Health & Social Services

Facilitation of a visit with a patient to a healthcare or social service provider.







Eligibility Assistance/ Financial Counseling

Counseling of a patient with financial limitations and assessing the patient's eligibility to a sliding fee scale or health insurance program (i.e. Medicaid, Medicare, CHIP, etc.) or pharmaceutical benefits program; or assistance in the development of a payment plan.







Health Education/ Supportive Counseling

Provision of learning experiences designed to help individuals improve their health.



SUBCATEGORIES

HE001 – Health Education - Individual

HE002 – Health Education – Small

Group 2-12

HE003-Health Education-13 or more

HE004 – Supportive Counseling





Health Education Subcategories

- Individual: The provision of learning experiences in an one-on-one encounter designed to help an individual improve their health.
- **Small Group:** The provision of learning experinces to a small group designed to help individuals improve their health.
- Health Education (13 or More): same as above to a larger group
- Supportive: The provision of support to patients to mitigate distress or concerns regarding diagnosis or other issues affecting their health or wellbeing.





Interpretation

The provision of interpreter services by a third party (other than the service provider) intended to reduce barriers to a limited English-proficient (LEP) patient or a patient with documented limitations in writing or speaking skills sufficient to affect the outcome of a medical visit or procedure. [Includes sign language]







Transportation

Health: Providing transportation assistance [directly or via referral] to a patient requiring transport to receive appropriate medical care

Social Services: Providing transportation assistance [directly or via referral] to a patient requiring transport to receive appropriate social services.







Outreach & Inreach

OUTREACH: Providing information about health center services in order to recruit new patients.

INREACH: Provision of services not linked to an existing care plan that are aimed at engaging existing patients in order to ensure appropriate and timely care

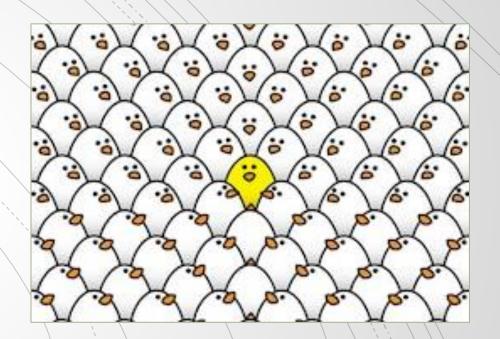






Other Services

Provision of services that reduces access to barriers to health care and addresses social services needs of a patient and that do not fall into the other established service categories.







Documenting Guidelines & Criteria

How to accurately describe and record Enabling
Services encounters





Documentation Criteria





IN ORDER FOR AN ES ENCOUNTER TO BE VALID, THE SERVICE MUST:

- be provided by a staff member or volunteer of the health center/contractor
- be linked to a medical patient of the health center
- be provided directly to the patient or to their primary caregiver (e.g. parent)
- Be documented on one encounter form per patient, even if multiple services were provided



Documentation Criteria: Time

- A valid ES encounter must be at least 10 minutes in duration
- Any encounter *less than* 10 minutes should **not** be recorded
- Encounters lasting more than 10 minutes should be recorded in 10-minute increments
 - Direct patient time only
 - Does not include documentation time
- For encounters that fall in between 10-minute increments:
 - Round down if ≤ 4
 - Round up if ≥ 5







Sample ES Standardized EHR Template



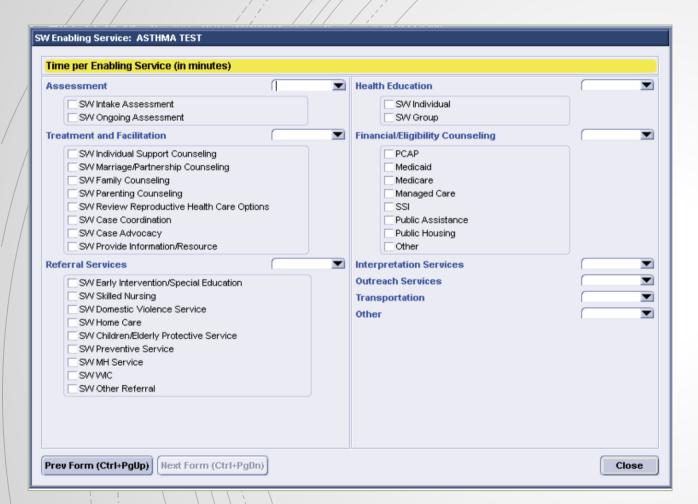


Other Enhanced Services

Patient: Man Zztest Age: 30 Years Gender: Male **Enhanced Services** Current Provider: Kimo C. Hirayama MD Gender Zip Code Staff ID DOB Service Date Provider ID Patient ID Kimo C. Hirayama MD 02/19/1980 M 05/20/2010 Jian Z. Wong 267440 98104 C Face to Face C Telecommunication Off-site **Encounter Type** C Scheduled ○ Walk-in Appointment Type O Individual C Group Group or individual **Primary Language** Race Ethnicity Vietnamese Asian Place of Birth Check if applicable Service provided in language other than English Person Providing Service Physician's Assistant / ARNP Case Manager C Health Educator O Nurse Community Health Worker Interpreter Nutritionist Psychologist Counselor/Therapist Outreach Worker Receptionist Dental Personnel Pharmacist Social Worker Medical Assistant C Physician (MD or DO) Eligibility/Financial Worker Other Midwife Enhanced Service(s) Provided Place of Service Case Management - Assessment Save Case Management - Treatment Plan & Facilitation Save Case Management - Referral Service Save Financial Counseling / Eligibility Assistance Save Health Education / Supportive Counseling Save Interpretation / Translation Save Save Outreach Services **Transportation Services** Save

Save

Sample EHR Template: Tailored







	Hea	alth Education		
Encounter Da Encounter Ty	Pe Face to face Off-site Telephone E-mail	■ Department Refer	ral	•
Appointmen Type Group or Individual	VValk-in Group Individual			
Language Us	Cantonese Mandarin Other Chinese dialect English Korean Other	Person Educated	Person Educated	
Time Per En	abling Service (In Minutes)			
Assessment		■ Interpretation Ser	Interpretation Services	
Treatment ar	nd Facilitation	▼ Transportation	Transportation	
Referral Services		▼ Outreach Services	Outreach Services	
Health Education		Other Enabling Ser	Other Enabling Services (13 or more)	
Financial/Elig	ibility Counseling	▼		
Topics				
Healthy Lifestyle	Child Development Healthy Aging Nutrition Physical Activity Prenatal Care Smoking Cessation Veight Management Other	Disease Prevention and Self-Management	Asthma Cancer COPD Diabetes Gastrointestinal Disease Heart Disease Hepatitis Hypertension	
Access to Care	Provider-Patient Communication Electronic Access To Health Information Other		Kidney Disease Medication Management Preventive Health Other	
Comments				

Sample EHR Template: Tailored 2

Health Education Time	Health Education/Supportive Counseling (HE001)			
Group Education Time	Group Health Education/Supportive Counseling (HE002	Group Health Education/Supportive Counseling (HE002)		
Provision of health education or supportive sen or other improved health outcomes are attempted	rices to individuals or groups of 12 or less in which wellness, preventive diseated through behavior change methodology.	ase management		
Individual	Group			
	☐ Breast/Cervical Cancer Education X5201 ☐ Individual Education X5008 ☐ Immunization/EPSDT X5098 ☐ Injury Prevention X5099 ☐ Harm Reduction X5106 ☐ Nutrition X5107 ☐ Individual Supp Counseling X5116 ☐ Lifestyle Supp Counseling X5132 ☐ Family Supp Counseling X5118 ☐ Family Planning X5229	Page Down		
Interpretation Time	Interpretation (IN001)			
☐ Linguistic Services X5023				
	party (other than the primary care giver) intended to reduce barriers to a limite in writing or speaking skills sufficient to affect the outcome of a medical visit of			
Svc. Provided in other langue Enabling provider interpreting	age X5340			





Practice

Identification & Documentation





Practice Scenario 1

As an Outreach Worker, your clinic is hosting a booth at the local Grandparents and Parents conference. A 52 year old, uninsured grandmother spends 15 minutes speaking with you regarding applying for insurance and her need for a primary care physician. You schedule an appointment for her to see a nurse practitioner in two weeks. After the day of her appointment, you follow-up and she kept her appointment with your clinic's medical provider.

What type of services were provided and for how long?





Practice Scenario 1 Answer

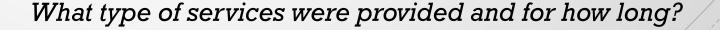
- Type of service(s) provided:
 - 1. Outreach
- Duration: 20 minutes





Practice Scenario 2

A 34-year-old female patient from Mexico has several conditions, including diabetes and back pain from her work in the tomato fields. She and her husband are both undocumented and they have two young children. During her most recent scheduled visit, you first spent 8 minutes to assess her children's eligibility for Medicaid. Then you spent another 34 minutes to develop a management plan for her diabetes. You also spent an additional 17 minutes to arrange a referral to a physical therapist. You are bilingual in English and Spanish and provided all services to her in Spanish.







Practice Scenario 2 -Answer

- Type of service(s) provided + duration :
 - L. Case Management 30 mins
 - 2. Referral Health 20 mins
 - 3. Eligibility Assistance?
 - 4. Interpretation?





Practice Scenario 3

A 55-year old man who is experiencing homelessness came to your health center's mobile medical unit during its weekly rounds at a local church. You performed a psychosocial assessment, which took 24 minutes. You also spent 18 minutes talking with him about his challenges related to alcohol dependency and 12 minutes talking to him about a supportive housing program.

What type of services were provided and for how long?





Practice Scenario 3 -Answer

- Type of service(s) provided + duration:
 - L. Case Management 20 mins
 - 2. Supportive Counseling 20 mins
 - 3. Other 10 mins





Homework Assignment

With your group members:

- Create 2-3 sample scenarios based on recent ES encounters at your sites
- Don't be afraid to use challenging examples
- Have an answer key!
- Have one member of your group email scenarios and answers to beleny@outreach-partners.org by Midnight on Tuesday Oct. 20th







Data Collection & Analysis

See you then!



