



MONTANA
DPHHS

Healthy People. Healthy Communities.

Department of Public Health & Human Services

Primary Care Facility Assessment



Background

To assess Montana's primary care facilities (PCF) electronic health record (EHR) capacity and usage.



Methods - Questionnaire

- Adapted survey tool from:
 - CDC's *draft* – National Survey of Primary Care Policies for Managing Patients with High Blood Pressure, High Cholesterol or Diabetes
 - Montana's Quality Improvement Organization - Physician Office/Clinic EHR survey tool
- 45 questions – clinic characteristics, patient population, EHR, incentives and recognition programs, QI measures, chronic disease management and resources, and future funding opportunities

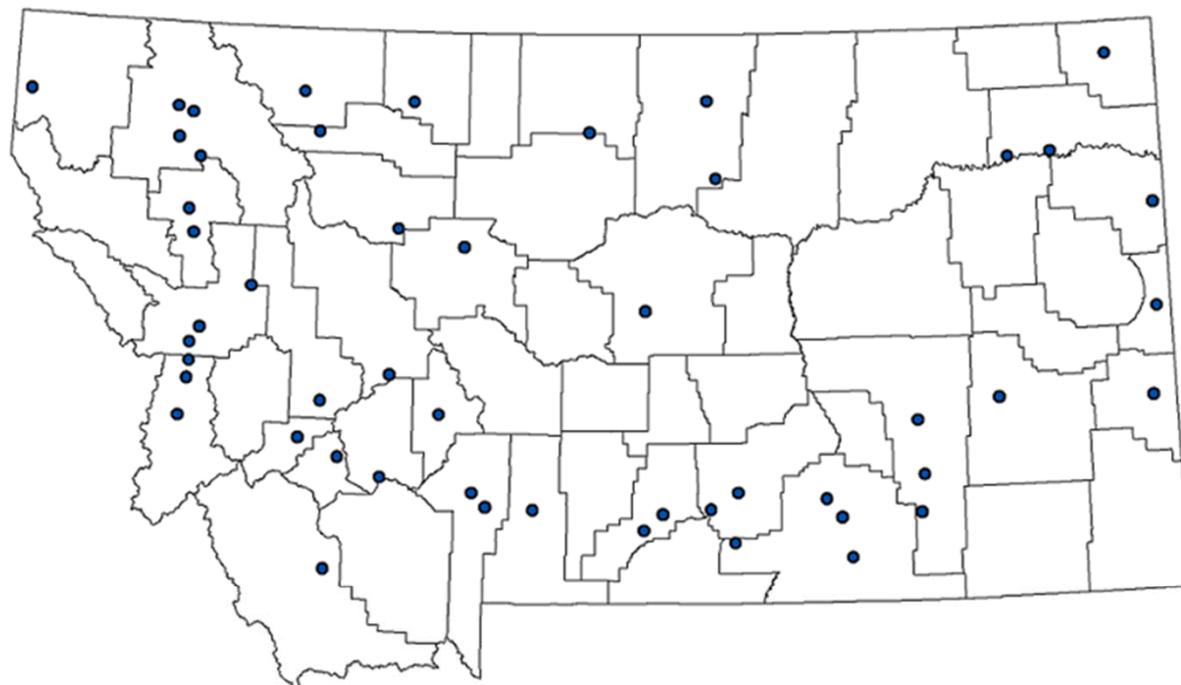
Methods - Respondents

- List of MT PCFs obtained from:
 - Montana Medical Association 2012 Directory
 - Telephone Directories
 - Montana Department of Labor Licensures
 - Various websites
 - Included IHS facilities
- Excluded: Rural Health Clinics, Community Health Centers, Urgent Care, University Health Centers, VA and Hospitals providing only hospital/ER services
- In 2014, PCFs receiving DPHHS funding were required to complete and mail in the PCF assessment.

Methods - Respondents

- 94 PCFs identified
- Contractor called to identify the CEO and Clinic Manager at each PCF
- Mailed a letter and assessment tool to these individuals
- Telephone interview conducted from 7/18/13 to 8/26/13
- Due to low response rate and difficulty with telephone interviews, an incentive was offered

Location of Montana's Primary Care Facilities Surveyed, 2013



Data source: List generated from information obtained in the Montana Medical Association 2012 Directory, Montana Department of Labor Licensure list of Montana Licensed Physicians, various websites including NPIdb, Montana Primary Care Association list of Rural and Community Health Centers, DexKnows.com Montana Department of Public Health PHIL list

Map created: December 2013 by the Cardiovascular Health Program



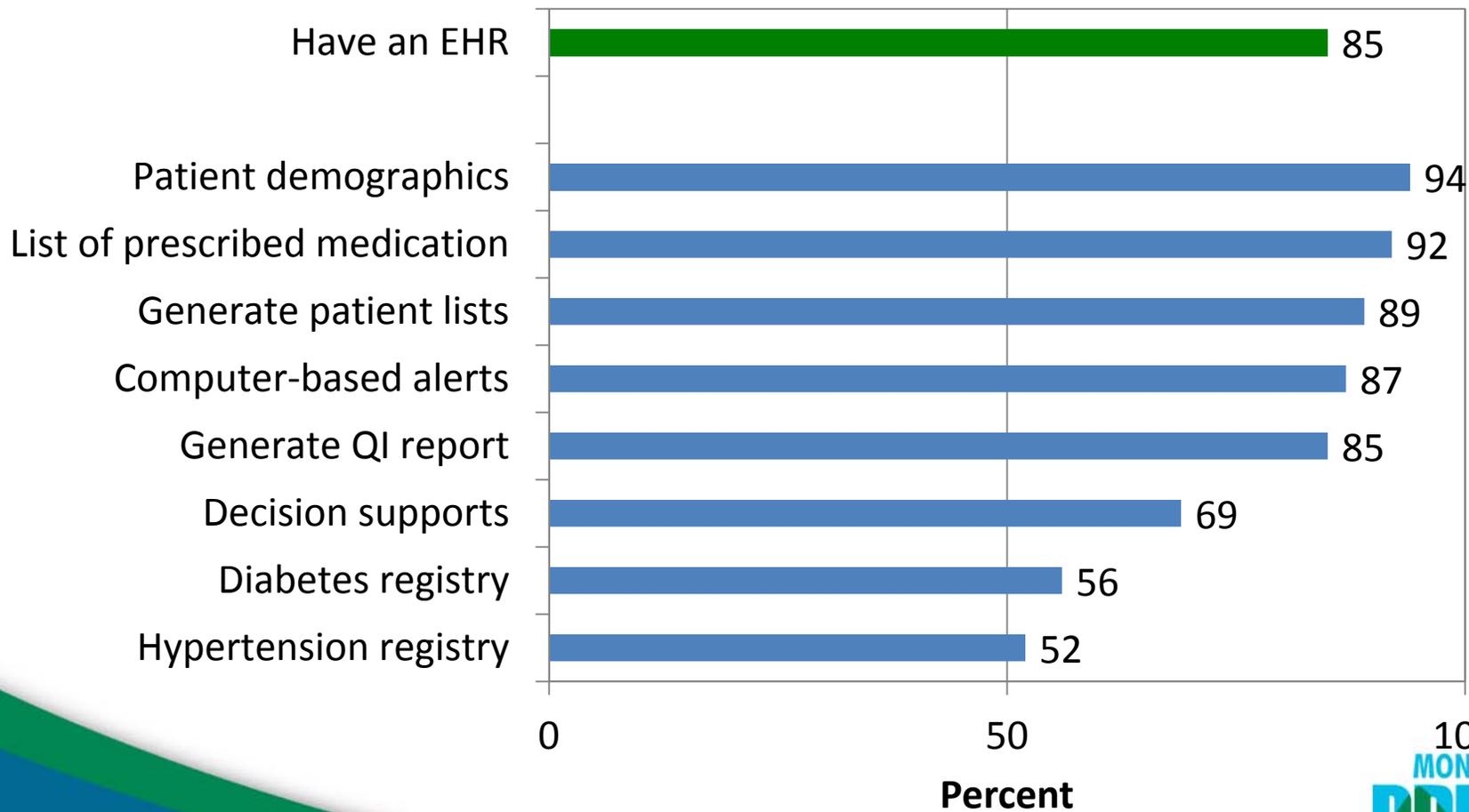
Results

- In 2014, six PCFs were added to the original list for a total of 100 PCFs in Montana
- Response rate = 61% (61/100)
- Reasons for non-respondents:
 - About one-half scheduled an interview but never followed through with completing the interview.
 - 10% never reached
 - 38% refused to participate (some commented recently started using their EHR)

Clinic and Adult Patient Population Characteristics of Montana's Primary Care Facilities, 2013-2014

	Total (N = 61)
	Mean (SD) [Range]
Number of Full-time (FT) /Part-time (PT) Family/General Practice and Internal Medicine physicians	4.5 (5.2) [0-32.5]
Number of FT/PT Physician Assistants and Nurse Practitioners	2.3 (3.4) [0-23.6]
	Mean (SD)
Adult (18 years and older) patient population	4903 (6734)
	%
With hypertension diagnosis	26%
Adequately controlled blood pressure	59%
With diabetes diagnosis	15%
Adequately controlled A1c (\leq 9.0 mg/dL)	57%

EHR Capacity for Montana's Primary Care Facilities, 2013-2014



Status of Meaningful Use and Patient Centered Medical Home accreditation among Primary Care Facilities, Montana, 2013-2014.

	Total N = 61
Meaningful Use (MU)	% (n)
Yes, primary care providers applied or intend to apply for MU	79 (48)
Currently reporting to the following outside organizations:	63 (30)
CMS (i.e., Medicare, Medicaid, PQRS, ACO, etc.)	53 (16)
Other (including HRSA)	20 (6)
Don't know, not sure, unknown	27 (8)
Currently submit PQRS measures to CMS	44 (27)
Report NQF-18 or PQRS 236 (blood pressure control)	67 (18)
Report NQF-59 or PQRS 1 (A1c poorly controlled in DM)	74 (20)
Report NQF-75 (Ischemic Vascular Disease: Complete lipid panel and LDL control)	41 (11)
Patient Centered Medical Home (PCMH) through NCQA	16 (10)
Planning to apply for PCMH within the next two years	57 (29)



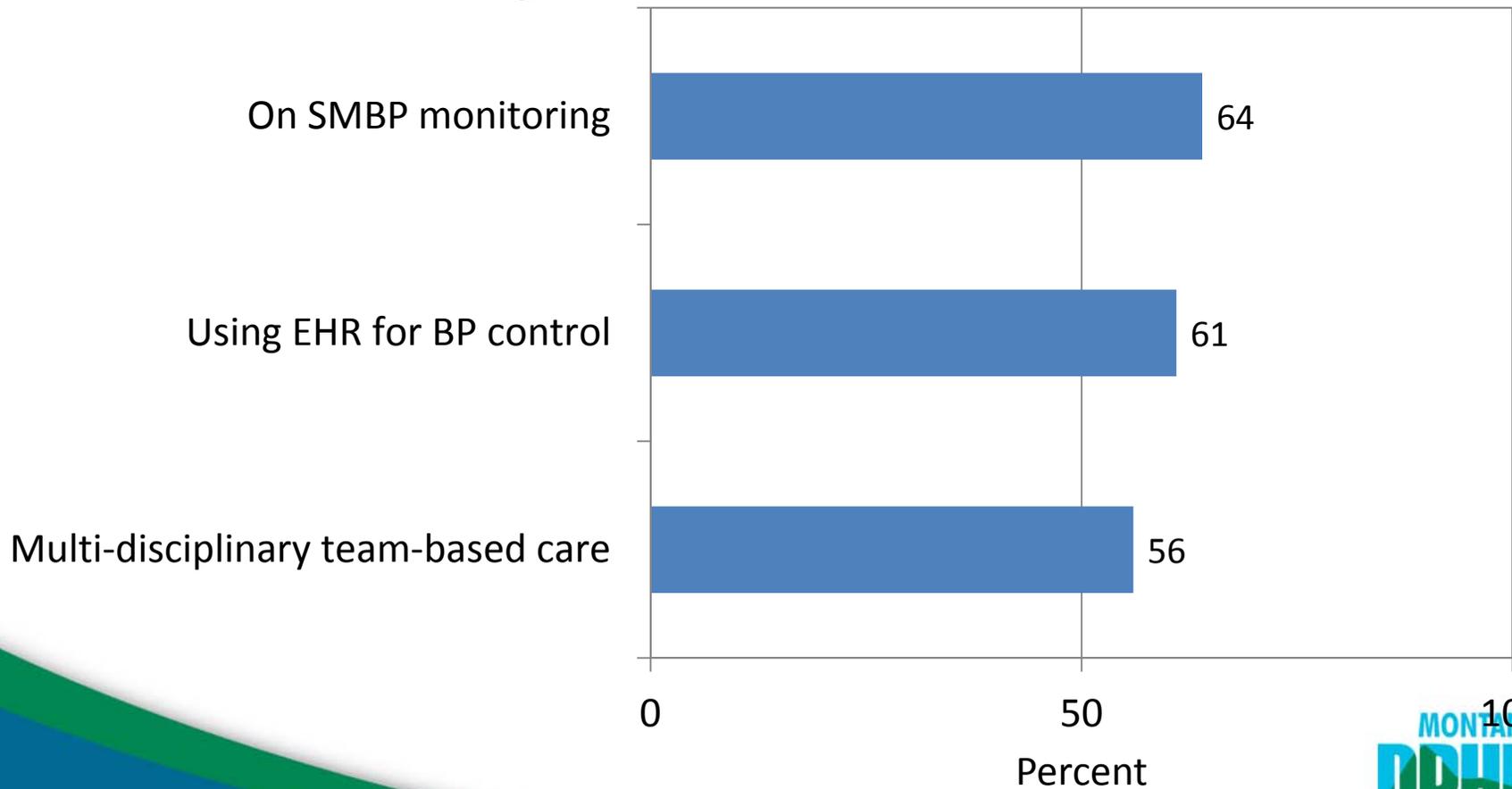
Quality Improvement (QI) Activities to Improve Blood Pressure (BP) Control at Montana's Primary Care Facilities, 2013-2014

	Total N = 61
	% (n)
Facility/provider conducted a QI project to improve BP control	25 (15)
Focused on practitioner compliance to evidence based guidelines	93 (13)
Facility encourages self measured blood pressure (SMBP) monitoring for patients with hypertension	89 (54)
Have provided training on use of BP monitor	81 (44)
Provide/loan BP cuffs for patients with uncontrolled BP	26 (14)

Quality Improvement (QI) Activities to Improve Blood Pressure Control at Montana's Primary Care Facilities, 2013-2014

	Total N = 61
	% (n)
Facility has a multi-disciplinary team approach for the management and control of blood pressure	51 (31)
Facility/provider conducted a QI Project Initiative to promote smoking cessation	49 (30)
Have policies/systems to follow-up patients with high BP	66 (40)
Have policies/systems to increase patient adherence to BP meds	49 (30)

Facility interest in working with the Montana Cardiovascular Health Program, 2013-2014



Limitations of Assessment

- Assessment was self-reported
- Mixed methodology (telephone and mailed)
- Patient populations were based on estimates
- DPHHS funded PCFs were required to have an EHR, conduct QI and required to complete the assessment



Summary

- Response rate = 61%
- 85% of facilities reported having an EHR system
- Few facilities reported conducting QI activities around blood pressure control
- Only half have a hypertension registry
- A majority of respondents applied or intend to apply for Meaningful Use

Action Items

- DPHHS sub-awards will be announced Summer 2015.
 - Primary care facility blood pressure/ diabetes sub-awards.
 - Patient Centered Medical Home blood pressure sub-awards.

QUESTIONS?



Contact

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