

Registration Guide for CoCM Training

Reviewed April 2022

1) Accessing Registration Links

- Registration can be located on the [CoCM page](#) or the [MICMT Events page](#)
- Training occurs over multiple days. Please make sure to register learner(s) for **each day they plan to attend**.

COCM INTRODUCTION: OPERATIONAL TRAINING (DAY 1/3)

View Edit Record Attendance Delete Revisions

FEBRUARY 1, 2022 8:00AM - FEBRUARY 1, 2022 4:00PM

Live Virtual

Day 1: The Collaborative Care Model (CoCM): An Evidence- and Team-Based Care Approach to Integrating Behavioral Health into Primary Care hosted by MCCIST.

This training is intended for PCMH-designated practices that have completed the readiness assessment and are determined to be ready to implement the model. If you are interested in the training but have not undergone the readiness assessment (excel doc to complete with MI-CCSI and MCCIST), please reach out to Ashley Schwartz (schwaras@med.umich.edu).

If you have questions or require accommodations to fully participate in this meeting, please contact micmt-requests@med.umich.edu.

| Time | Topics | Attendees |
|--------------------|--|--|
| 8:00 am - 12:30 pm | Introduction, workflow, team roles and responsibilities | Psychiatric consultant, PCP champion, BHCM, and up to three other staff per practice (e.g., clinical supervisor, practice manager) |
| 12:30 pm - 1:30 pm | Peer discussion with practicing psychiatric consultants | Psychiatric Consultant |
| 1:00 pm - 4:00 pm | Patient tracking and identification, billing, implementation | BHCM, and up to three other staff per practice (e.g., clinical supervisor, practice manager) |

Trainer(s): Ashley Schwartz, Theresa Porter, Debra Snyder-Sclater, Sarah Fraley, Amy Wales, Karla Metzger

[iCal](#) | [Outlook](#) | [Google Calendar](#) | [Directions](#)

REGISTER NOW

Click Register Now

**You may be prompted to login to your MICMT account to access page*

2) Completing Registration Form

Are you registering for yourself or on behalf of others? (Note: If you are registering for yourself as well as on behalf of others, please register yourself last.)*

☒ Myself

☐ On behalf of others

Select on Behalf of Others

***PO leaders** will be responsible for registering all of their learners. IF the person is NOT a PO leader who will be responsible for registering learners, please contact Linny West (lindsamw@med.umich.edu) so additional permissions can be granted.

Is the registrant part of a Federally Qualified Health Center (FQHC) or a Rural Health Clinic (RHC)?*

☐ The registrant belongs to an FQHC.

☐ The registrant belongs to an RHC.

☐ No, the registrant does not belong to either of these.

What is the registrant's role within collaborative care?*

- Select -

NPI Number will be required for Primary Care Providers and Psychiatric Consultants

COCM CLINICAL TRAINING CONT. (DAY 3/3)

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FEBRUARY 10, 2022 8:00AM - FEBRUARY 10, 2022 12:45PM

Live Virtual

Day 3: The Collaborative Care Model (CoCM): An Evidence- and Team-Based Care Approach to Integrating Behavioral Health into Primary Care hosted by MCCIST.

This training is intended for PCMH-designated practices that have completed the readiness assessment and are determined to be ready to implement the model. If you are interested in the training but have not undergone the readiness assessment (excel doc to complete with MI-CCSI and MCCIST), please reach out to Ashley Schwartz (schwaras@med.umich.edu).

If you have questions or require accommodations to fully participate in this meeting, please contact micmt-requests@med.umich.edu.

| Time | Topics | Attendees |
|--------------------|------------------------|---------------------------|
| 8:00 am - 12:45 pm | BHCM clinical training | BHCM, clinical supervisor |

Trainer(s): Ashley Schwartz, Theresa Porter, Sarah Fraley, Debra Snyder-Sclater, Karla Metzger, Amy Wales, Karen Gall

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COCM CLINICAL TRAINING (DAY 2/3)

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FEBRUARY 9, 2022 8:00AM - FEBRUARY 9, 2022 12:45PM

Live Virtual

Day 2: The Collaborative Care Model (CoCM): An Evidence- and Team-Based Care Approach to Integrating Behavioral Health into Primary Care hosted by MCCIST.

This training is intended for PCMH-designated practices that have completed the readiness assessment and are determined to be ready to implement the model. If you are interested in the training but have not undergone the readiness assessment (excel doc to complete with MI-CCSI and MCCIST), please reach out to Ashley Schwartz (schwaras@med.umich.edu).

If you have questions or require accommodations to fully participate in this meeting, please contact micmt-requests@med.umich.edu.

| Time | Topics | Attendees |
|--------------------|------------------------|---------------------------|
| 8:00 am - 12:45 pm | BHCM clinical training | BHCM, clinical supervisor |

Trainer(s): Ashley Schwartz, Theresa Porter, Debra Snyder-Sclater, Karen Gall, Sarah Fraley, Amy Wales, Karla Metzger

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Registration Guide for CoCM Training

3) Completing Registration Form (continued)

Is the registrant taking this training to actively participate in the BCBSM CoCM Program?*

- ☐ Yes, the registrant is taking this as part of the BCBSM CoCM Program.
- ☐ No, the registrant is not taking this as part of the BCBSM CoCM Program.

Answer 'YES' if the registrant belongs to a clinic(s) that intend(s) to implement CoCM following the training.

BCBSM CoCM Registrants only: For which clinic(s) is the registrant providing services?*

If you cannot find your clinic in the list below, please [contact us](#).

Choose all appropriate options

If answered 'YES' to previous question, select clinic(s) that they intend to implement in. Please refer to BCBSM PGIP List for names. If 'NO', do not answer. If your clinic is not listed, please reach out to your [training partner](#) to verify you're ready for training.

Search Existing Users

Search by first name, last name, or email

PO Leaders will need to locate their learners in the MICMT website. If learners have an existing account, search for them using their first name, last name or associated e-mail.

Register a New User

If the learner does NOT have an existing account, PO leaders can register them as a new user. The fields below will be required to complete.

Name of attendee:

First

Last

Attendee email

Attendee's credentials

Physician Organization

Practice Unit

Note: only those practices within your chosen PO are displayed.

☐ Consent to Photograph or Record

Checking this box is an agreement to the University of Michigan's [Consent to Photograph or Record Electronically](#) terms and conditions.

Registration Guide for CoCM Training

4) Final Step

- a. Repeat process for each learner

Additional Emails to copy on the confirmation message

Multiple email addresses may be separated by commas.

- ☐ I attest that I am registering for myself and/or I am the PO leader, practice manager, or direct manager of the attendee being registered. *

If you need to cancel your registration we ask that you **contact us as soon as possible**. We reserve the right to cancel a training up to one week in advance.

SUBMIT

RESET

5) Summary of Items Needed to Complete Registration for Learners

- a. FQHC/RHC Status
- b. Registrant's Role in CoCM
 - i. NPI Number for Primary Care Providers and Psychiatric Consultants only
- c. Participation in BCBSM CoCM Program Status
 - i. Clinics the registrant is providing services (use BCBSM PGIP List names)
- d. If registrant has an existing MICMT website account:
 - i. If YES – registrant has an account: e-mail associated with MICMT website account
 - ii. If NO – registrant does not have an account:
 1. First Name, Last Name
 2. E-mail
 3. Credentials
 4. Physician Organization
 5. Practice Units