



# 2024 Annual Meeting

October 25, 2024





# Welcome

Julie Wietzke, MHSA, MLS  
MICMT



# Agenda

9:30 – 9:35 AM	<b>Welcome &amp; Introduction</b> <i>Julie Wietzke, MHSA, MLS, MICMT, Administrative Director</i>
9:35 – 10:35 AM	<b>Leveraging Psychological Safety for Building High Performing Teams</b> <i>Brian Nickerson, LCSW, Nickerson Counseling</i>
10:35 – 11:00 AM	<b>MICMT Updates &amp; 2025 Scorecard</b> <i>Audrey Fan, MD, MICMT, Clinical Director</i> <i>Julie Wietzke, MHSA, MLS, MICMT, Administrative Director</i>
11:00 AM – 12:00 PM	<b>Expanding PDCM into Specialist Practices</b> <i>Barb Brady, BCBSM, Health Care Manager</i> <i>PO Representatives</i> <ul style="list-style-type: none"><li>• <i>Oakland Physician Network Services</i><ul style="list-style-type: none"><li>◦ <i>Peggy Best, RN, BSN, MSA, Clinical Care Manager</i></li></ul></li><li>• <i>United Physicians</i><ul style="list-style-type: none"><li>◦ <i>Ashley Sumara, CHES, Manager, Care Management Program</i></li></ul></li><li>• <i>Michigan Medicine</i><ul style="list-style-type: none"><li>◦ <i>Alicia Majcher, RN, MHSA, Administrative Director of Care Management and Population Health</i></li></ul></li></ul>
12:00 – 1:00 PM	<b>Lunch</b>



# Agenda

(cont.)

1:00 – 2:00 PM

## PO Perspectives on PDCM Group Education

- *Trinity Health IHA Medical Group*
  - *Heidi Steinhebel RN, BSN, CCM, CCP, Sr. Associate Director of Care Management*
- *MyMichigan Collaborative Care Organization*
  - *Jill Wheeler, BSN, RN, RN Care Manager*
- *United Physicians*
  - *Erin Lynne Beattie, RDN (Virtual only), RDN Care Manager*
- *Novello Physicians Organization*
  - *Rachael Smart, MSN, MHA, Manager of Quality*

2:00 – 2:30 PM

## Bridging the Gap: Nutrition Counseling for Cardiac Patients

*Eric J. Brandt, MD, MHS, FACC (Virtual Only), Assistant Professor, Internal Medicine - Cardiovascular Disease, Michigan Medicine*

*Beverly Kuznicki, MA, RDN, Allied Health Supervisor Intermediate, Michigan Medicine*

2:30 – 3:00 PM

## Open Discussion on Specialist Team-Based Care and Group Education





# New MICMT Clinical Director Audrey Fan, MD

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Dr. Fan has been a primary care physician for the past 20 years. She has previously served as a health center Medical Director, Associate Medical Director for Quality for the PO, and the Associate Chief Clinical Officer for Primary Care at Michigan Medicine. She currently serves as Co-Medical Director of the Community Blood Pressure Program at Meijer.

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Audrey is passionate about implementing systems improvements focused on supporting high quality, patient-centered care, including quality, safety and population health, within a multi-disciplinary team-based care model.





# Introduction

Brian earned his master's degree in Social Work from Portland State University in 2017 as part of the Integrated Care Program. He spent several years working as a hospital social worker and volunteered to be the lead social worker in a Covid ICU at the onset of the Covid-19 pandemic. This experience made him passionate about protecting the mental well being of workers in healthcare. He began working full-time as a therapist for medical staff and graduate students in 2021. He works with clients in Illinois & Michigan. One of his areas of focus continues to be supporting workers and students in protecting themselves from burnout as well as the challenges that come along with working in high-stakes professional environments.





# Leveraging Psychological Safety for Building High Performing Teams

Brian Nickerson, LCSW  
Nickerson Consulting





# Understanding Psychological Safety to build High Performing Teams

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Brian Nickerson, LCSW

10.25.24

# Learning Objectives

Understand

Understand the meaning of psychological safety and how it applies in the workplace.

Learn about

Learn about the physiological reaction to danger, types of stress, and how these factors affect our behaviors

Practice

Practice grounding and communication skills to foster psychological safety

# Section 1: The Organizational Perspective

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# RICU story



# What is psychological safety?

- It describes the **climate** in a group wherein all members are welcomed to act with **candor**
- Defined by a shared belief that it's safe to **take risks**, to **introduce ideas**, share knowledge, and **report mistakes** – all without fear of negative consequences
- It is ***aspirational*** - In 2017, research showed that only 3 in 10 employees felt "their opinions counted" at work



A group of hikers with backpacks are climbing a steep, rocky mountain peak. The hikers are wearing various colored backpacks (green, orange, red, black) and are moving up the rocky slope. The sky is overcast and grey.

# Why does this matter?

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## **Subjective:**

- *More engaged and motivated*
- *Better decision-making*
- *Continuous learning*
- *Enhanced diversity*

## **Objective:**

- *Reduction in turnover*
- *Reduction in safety incidents*
- *Increase in productivity*

# Foundational research –

## *Amy Edmondson's questionnaire*

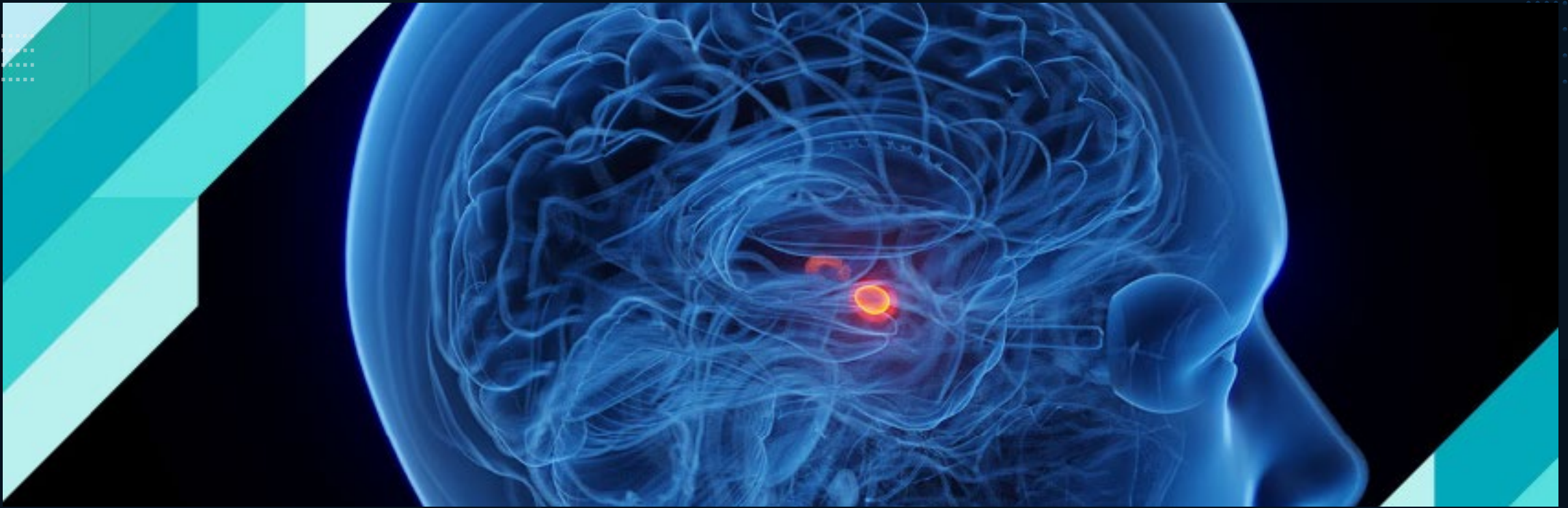
- 1) If you **make a mistake** on this team, it is not held against you
- 2) Members of this team **can bring up problems** and tough issues
- 3) People on this team sometimes **accept others for being different**
- 4) It is safe to **take a risk** on this team
- 5) It isn't difficult to **ask other members** of this team for help
- 6) No one on this team would **deliberately act in a way that undermines** my efforts
- 7) Working with members of this team, my unique skills and **talents are valued and utilized**

# **Section 2:**

## **The Psychological Perspective**

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# Types of stress

- **Positive Stress:** mild stress response that alerts and prepares us. Builds healthy response systems to cope with future stress.
- **Tolerable Stress:** serious, but temporary stress response, buffered by positive relationships.
- **Toxic Stress:** intense, frequent, or chronic activation of the stress response system without support from protective relationships.






# Have you seen these signs?



- **Physical:** appetite changes, sleep changes, headaches, aches/pain
- **Behavioral:** anxiety, feeling helpless, difficulty concentrating, irritability, quick to anger
- **Social:** social withdrawal, controlling, disengagement, hyper vigilance



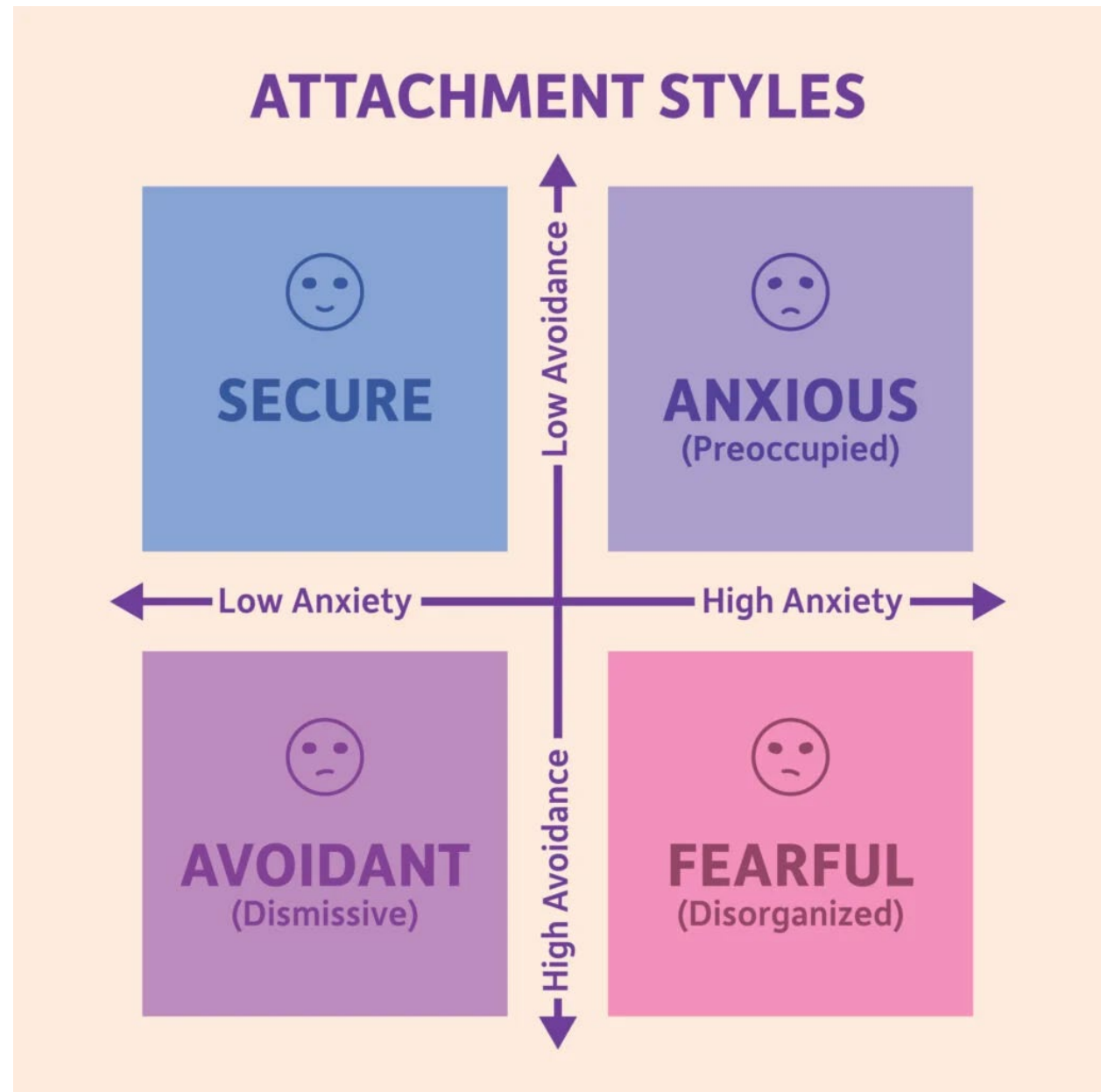
A photograph of a mother monkey sitting on the ground with her infant clinging to her chest. The mother monkey has grey and white fur, a black face, and a white patch on her forehead. She is looking to the left. The infant is smaller, with dark fur and a black face, and is looking towards the camera. They are in a natural, outdoor setting with green plants and brown soil.

# Attachment theory

- We are wired to form attachment and seek contact in times of stress.
- How we perceive and respond to adversity will change by cultivating “secure attachments” in our lives
- Secure attachments make us able to trust, be vulnerable, and feel safe in uncertainty



What do you  
see on your  
teams?





# Being safe versus feeling good

Providing psychological safety does not mean it is our job to make people feel good – we are here to make people feel safe.

- A secure attachment can be **uncomfortable**
- A secure attachment **doesn't have all the answers**
- You can't control people's reactions, **but you can control your own**



# **Section 3:**

## **Short-term change strategies**

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# Skill 1:

## Cultivate distress-tolerance

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- Grounding techniques help us “drop anchor” when we feel escalated in response to stress
- Increasing our mental clarity by taking a few minutes to ground will save us so much time in the long run
- The “ice cube trick” won’t solve your problem, but it will enhance your capacity for problem-solving



# Skill 2:

## Cultivate interpersonal effectiveness

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- Changing the climate at work takes time and intention
- We can lead by example when we model appropriate vulnerability and accountability

Think like a therapist:

- *What do you do well already?*
- *What is the greatest opportunity?*



## Skill 3:

# Reconnect with your core values

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- Clarifying your core values helps us identify moments when our work aligns with our bigger purpose
- Remembering why their work matters helps teams to address problems bravely and efficiently
- Creating a space for everyone to share knowledge and improve performance builds camaraderie and promotes equity



# **Section 4:**

## **Long-term change strategies**

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# Make it safe to discuss problems

## *Pebbles & Boulders*

- A “pebble in your shoe” is an impediment to your daily work
  - A “boulder in your path” is a department or system level issue






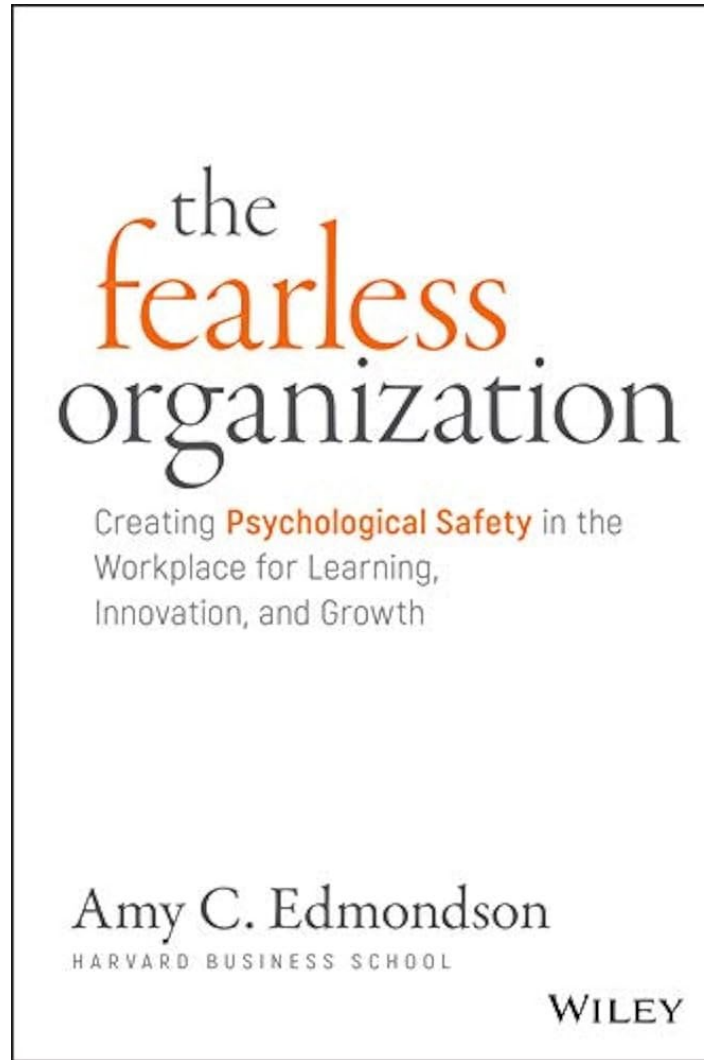
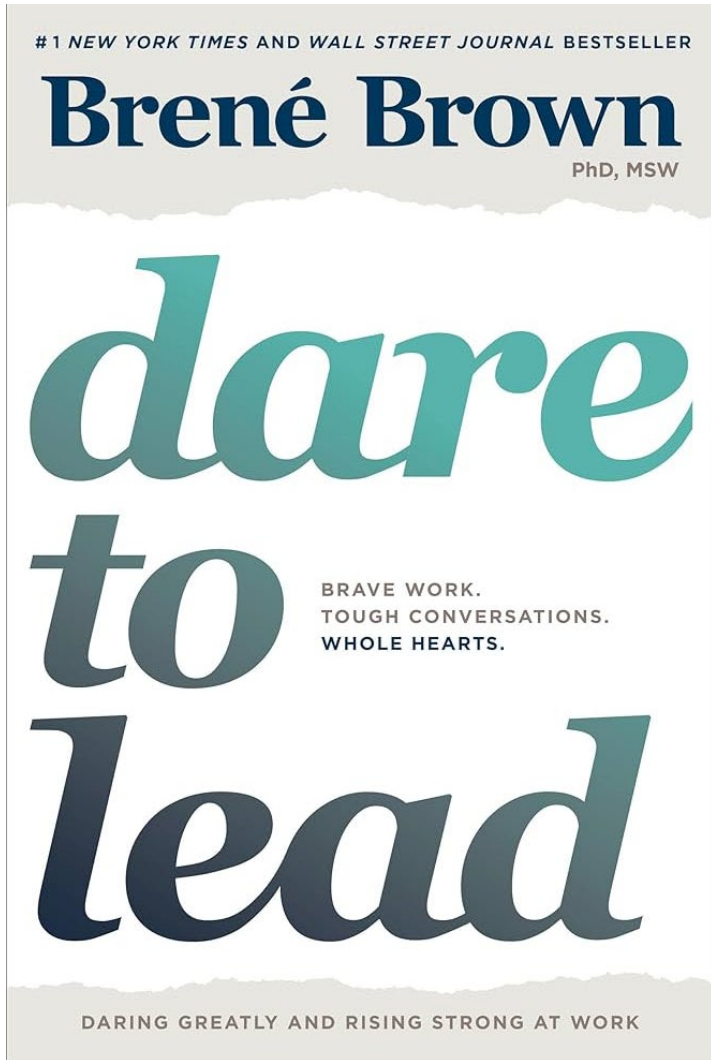
# 5-MINUTE PSYCHOLOGICAL SAFETY AUDIT:

- If you make a mistake in this team, will it be held against you?
- Are the members of this team able to bring up problems and tough issues?
- Do people on this team sometimes reject others for being different?
- Is it safe to take a risk on this team?
- Is it difficult to ask other members of this team for help?
- Would anyone on the team deliberately act in a way that undermines efforts?
- Working with member of this team, are unique skills and talents valued and utilised?

Edmondson, A. (1999) Psychological Safety and Learning Behaviour in Work Teams. Administrative Science Quarterly, 44: 350-383.



Assessing  
your teams



Great books  
to start with

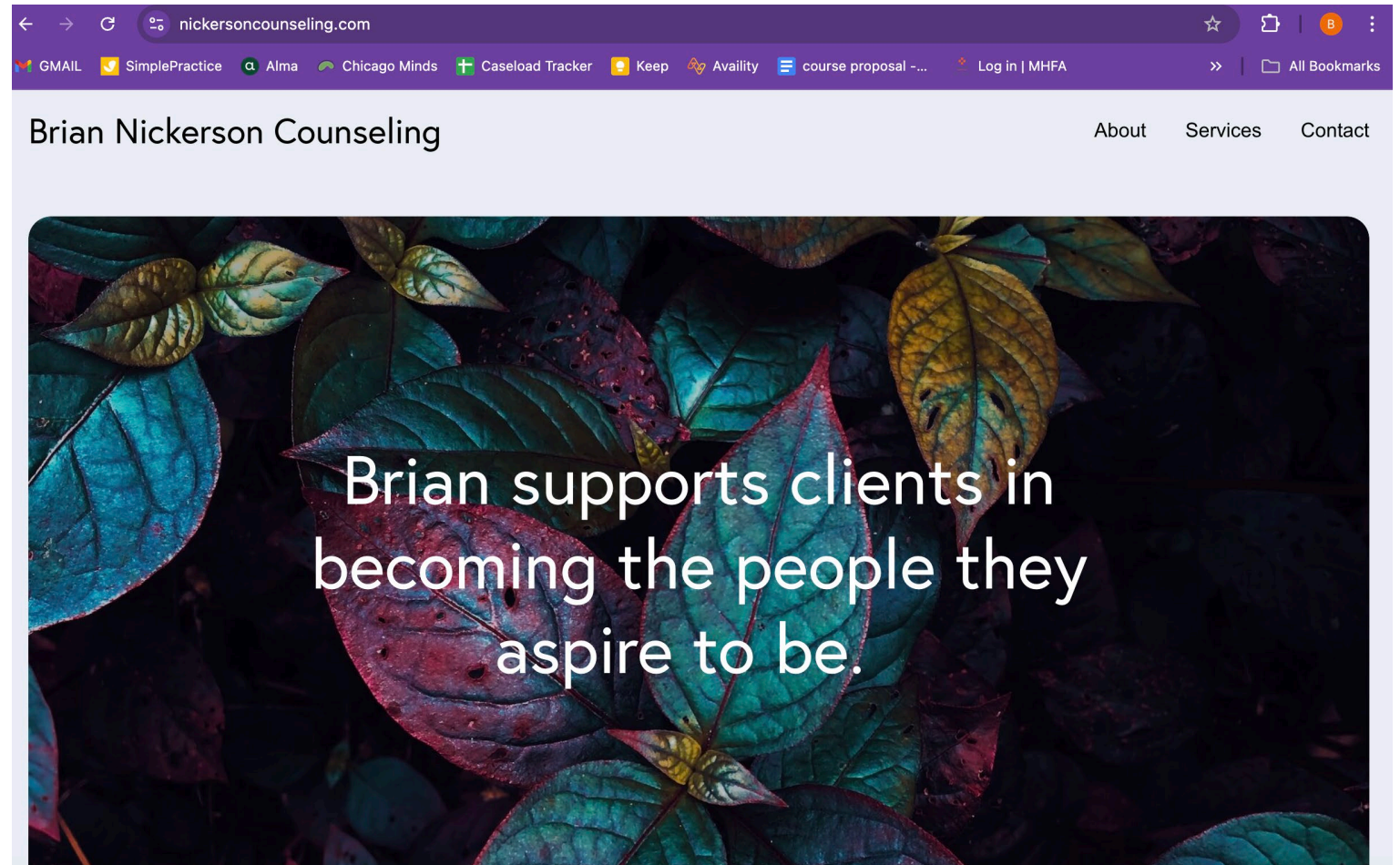


# This will take time and intention

- The goal is to have a culture of *learning* and *development*
- Celebrate successes - reward “*good catches*” rather than punishing mistakes
- Address conflict constructively – psychologically safe teams *report more mistakes* because no one is trying to hide mistakes
- Create a supportive and caring environment through being honest about *structural problems*, encouraging *values-alignment*, and modeling *appropriate vulnerability*
- Motivation that comes from *pursuing purpose* is so much more *sustainable* than motivation that comes from fear of consequences

# Thank you for doing this work

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# MICMT Updates & 2025 Scorecard

Julie Wietzke, MHSA, MLS, MICMT

Audrey Fan, MD, MICMT



# 2024 – Year in Review



**Congrats to all on a successful year!**

## Highlights of the year

- 362 attendees at Team-Based Care Conference
- Updated dashboards in MICMT website
- New Patient Engagement Foundations course launched
- CKD/ESRD webinar series
- Medication reconciliation training – 192 attendees



# 2024 Training Cycle Summary



- Intro to Team-Based Care
  - Totals:
    - **995 Attendees**
    - 44 Approved Trainers
    - 93 Sessions
- Patient Engagement
  - Totals:
    - **298 Attendees**
    - 29 Approved Trainers
    - 47 Sessions
- Foundational CM Codes & Billing
  - Totals:
    - **83 Attendees**
    - 14 Approved Trainers
    - 15 Sessions

*Trainings between 10/11/23 & 10/10/24*



# 2025 MICMT Scorecard

- Training reimbursement paid in January 2026 check. Will include those trainings that occur between October 11, 2024, and October 10, 2025.
- Scorecard payment paid in January 2027 check.

2025 Scorecard				
Measure #	Weight	Measure Description	Points	Data Source
1	72	<b>Outcomes</b>		
		Points for the below outcome measures are earned based on the PO performance with the PDCM Outcomes VBR.  (See Appendix A for more information)		Outcomes measures align with BCBSM outcomes reporting for POs/sub-POs.
		Peds: IP Utilization	9	
		Peds: ED Utilization	9	
		Peds: Weight Metric	9	
		Peds: Composite Metric	9	
		Adult: A1c performance	9	
		Adult: BP Performance	9	
		Adult: ED Utilization	9	
		Adult: IP Utilization	9	



# 2025 MICMT Scorecard (cont.)

2	15	<b>Care Management Operations</b> (Note: This will not impact PDCM Outcomes or Population Outreach VBR)			BCBSM 2026 PDCM reports (2025 claims) titled "....2025_PD CM_PU_Rpt ...".
		Percent of practices that deliver PDCM services to 1% of their PDCM attributed eligible members with at least two encounters on different days  <b>Note that this uses a different list:</b> The % of PDCM Participating practices will be assessed using the 2026 1% PDCM List (2 encounters on 1% of PDCM eligible patients) from 2025 Claims. These practices are identified in the reports provided with the Value-Based Reimbursement and PDCM Participation reports that BCBSM will distribute in Fall 2026.	<b>% of practices</b>	<b># of points</b>	
			90%	5	
			75%	4	
3	13	Percent of PDCM Participating practices that deliver PDCM services to 4% of their PDCM attributed eligible members with at least two encounters on different days  <b>Note that this uses a different list:</b> The % of PDCM Participating practices will be assessed using the 2026 1% PDCM List (2 encounters on 1% of patients) from 2025 Claims. These practices are identified in the reports provided with the Value-Based Reimbursement and PDCM Participation reports that BCBSM will distribute in Fall 2026.	<b>% of PDCM practices</b>	<b># of points</b>	BCBSM 2026 PDCM reports (2025 claims) titled "....2025_PD CM_PU_Rpt ...".
			90%	10	
			75%	8	
			50%	6	
3	13	<b>Engagement</b>			MICMT Reporting
		At least 3 scheduled phone conferences (30 minutes) with MICMT	5		
		Participation in the entire Annual Team-Based Care Conference by at least 1 PO representative	4		
		Participation in the entire Annual MICMT meeting by at least 1 PO Representative with a leadership role in Care Management activity at the PO level	4		

# Coming in 2025



Medication reconciliation training being offered in January

Repeat of prior training with some minor tweaks  
For licensed and unlicensed care team members



Mental Health First Aid offered again

Stay tuned for dates  
PO can host their own for team with any approved MHFA trainer and submit for reimbursement under training cap



No-cost, updated billing course taught by Mi-CCSI





# Care Management in Michigan

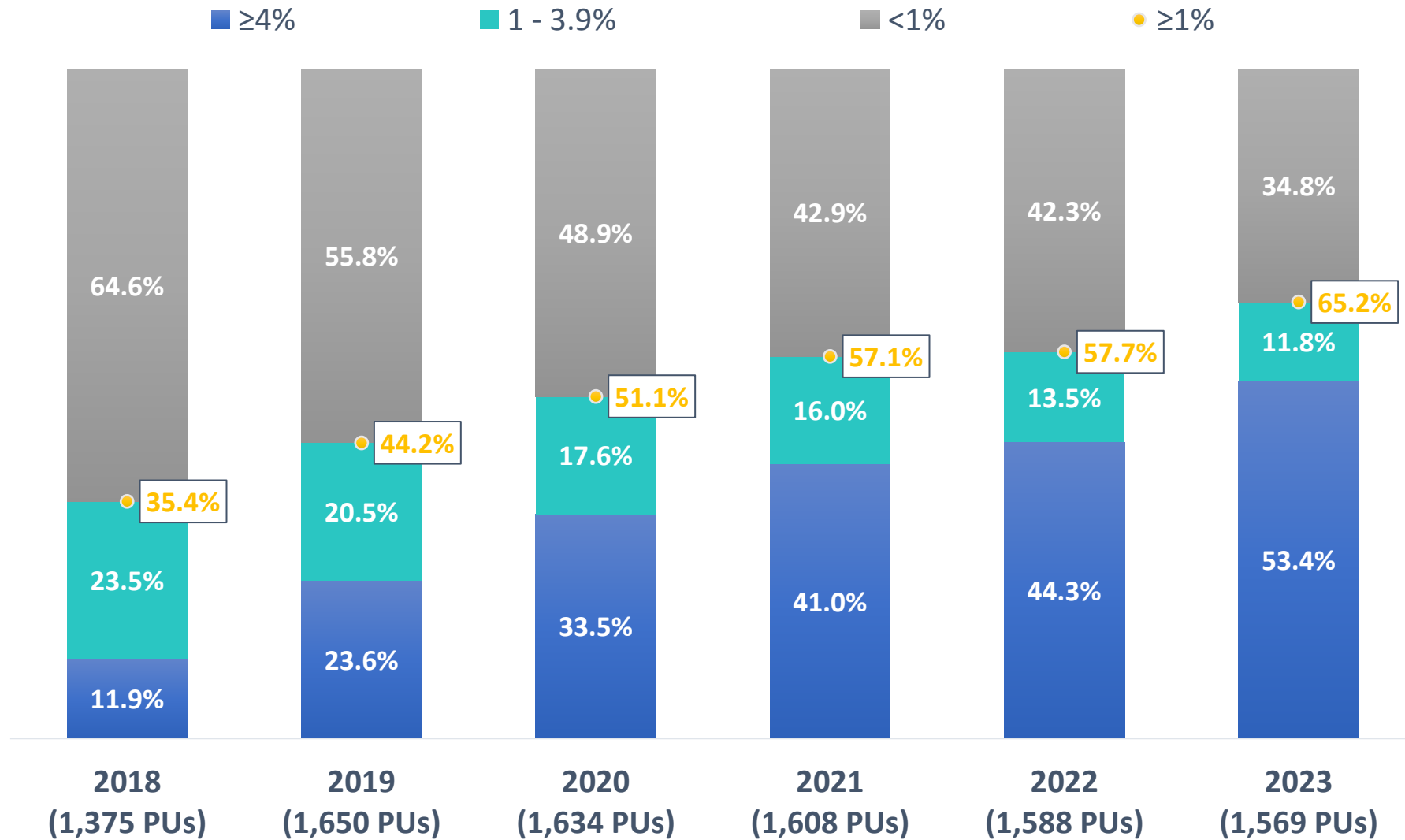


## Practice Unit PDCM Engagement

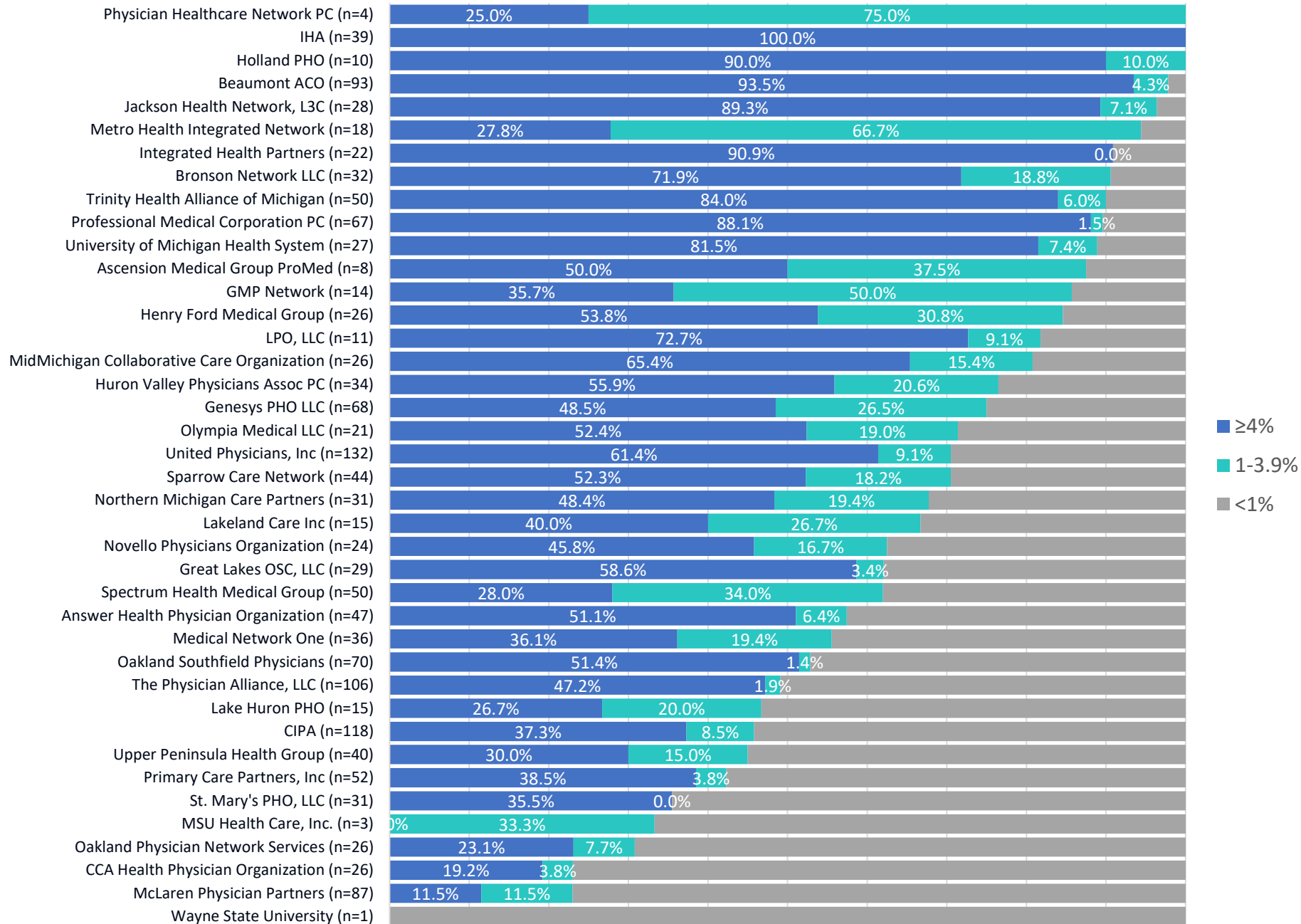
- **1% Engagement:** Two PDCM encounters for 1% percent of PDCM eligible members attributed to a PCP or Mixed practice
- **4% Engagement:** Two Care Management encounters of any type for 4% percent of PDCM eligible members attributed to PCP or Mixed practices that achieved 1% PDCM engagement.



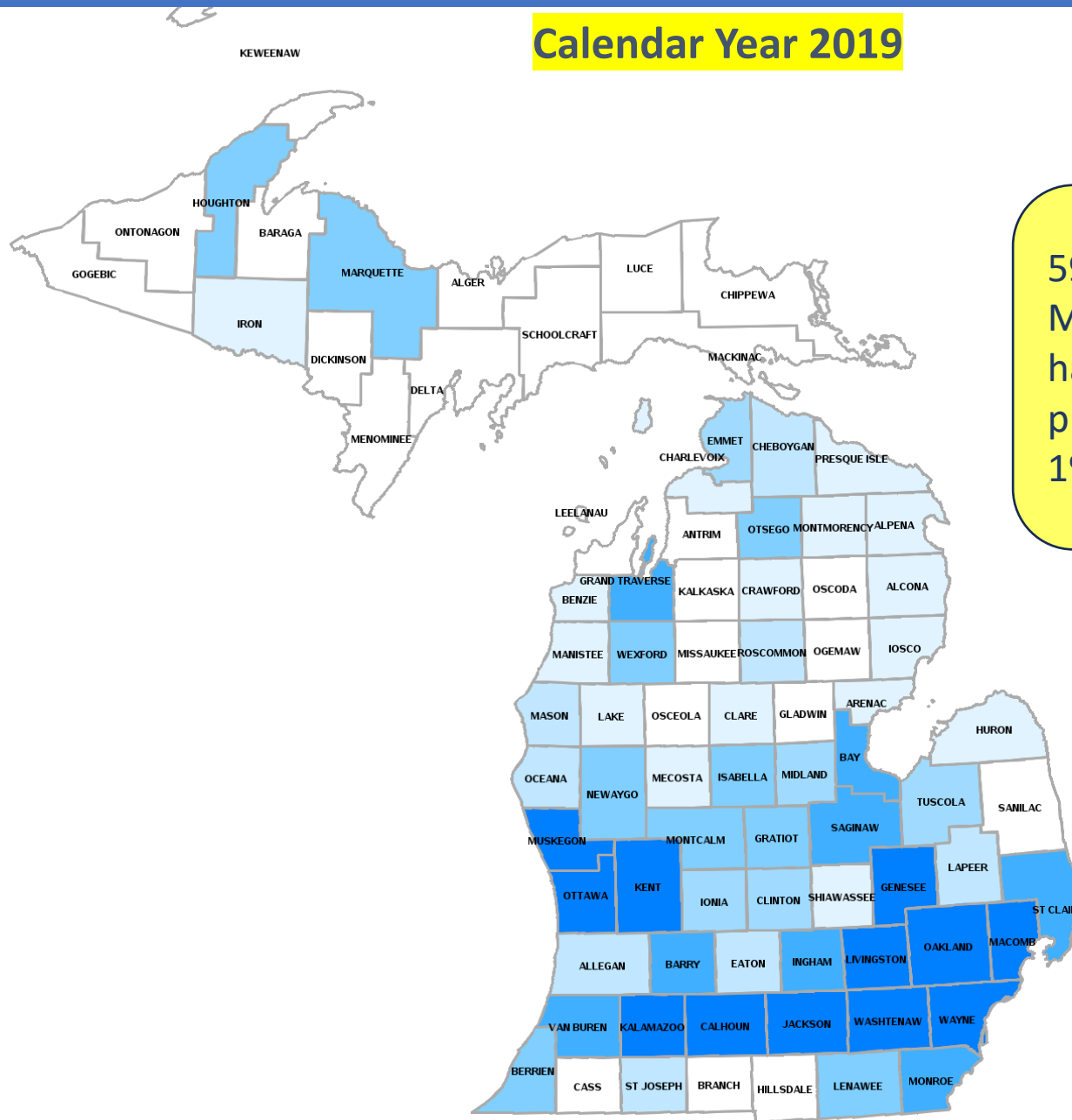
# PCMH Practices Achieving 1 and 4% Engagement



# PCMH Practices Achieving 1 and 4% Engagement by PO 2023



## Calendar Year 2019

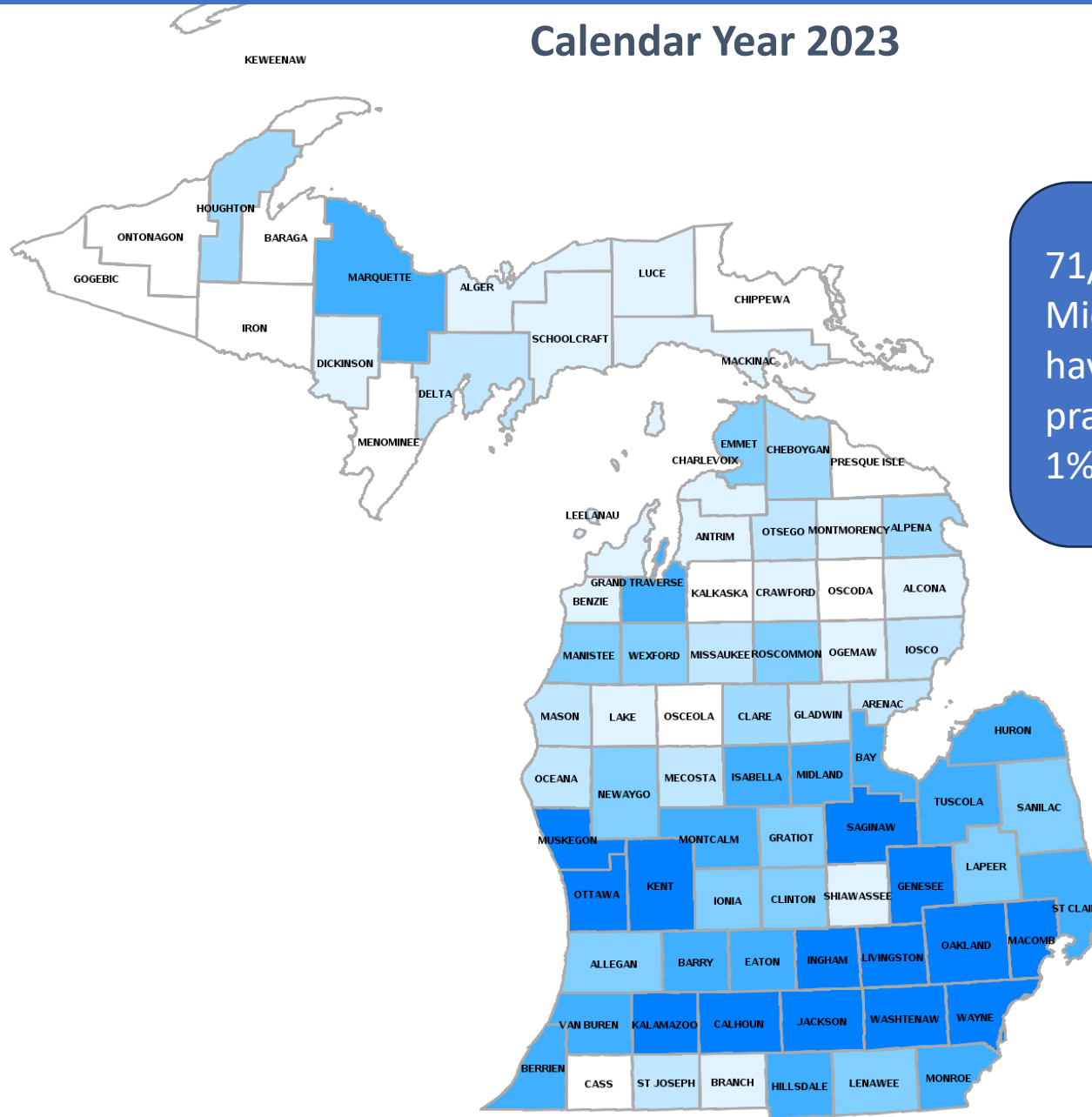


59/83 (71%) of Michigan counties have at least one practice meeting  
1% engagement



# Number of Practices with at least 1% Engagement

Calendar Year 2023



71/83 (86%) of Michigan counties have at least one practice meeting 1% engagement



0



1



2



3-4



5-7

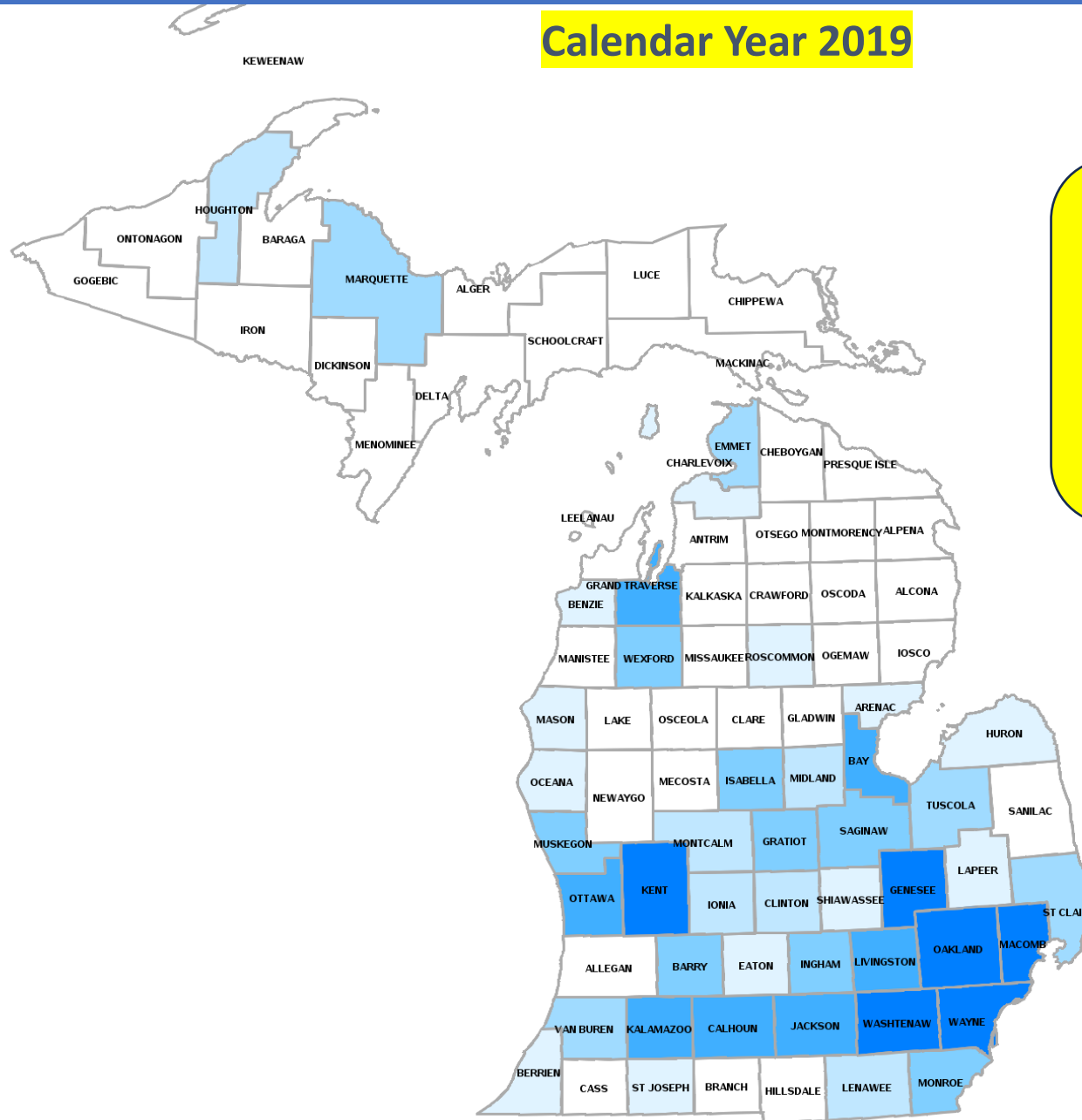


8-20



20+

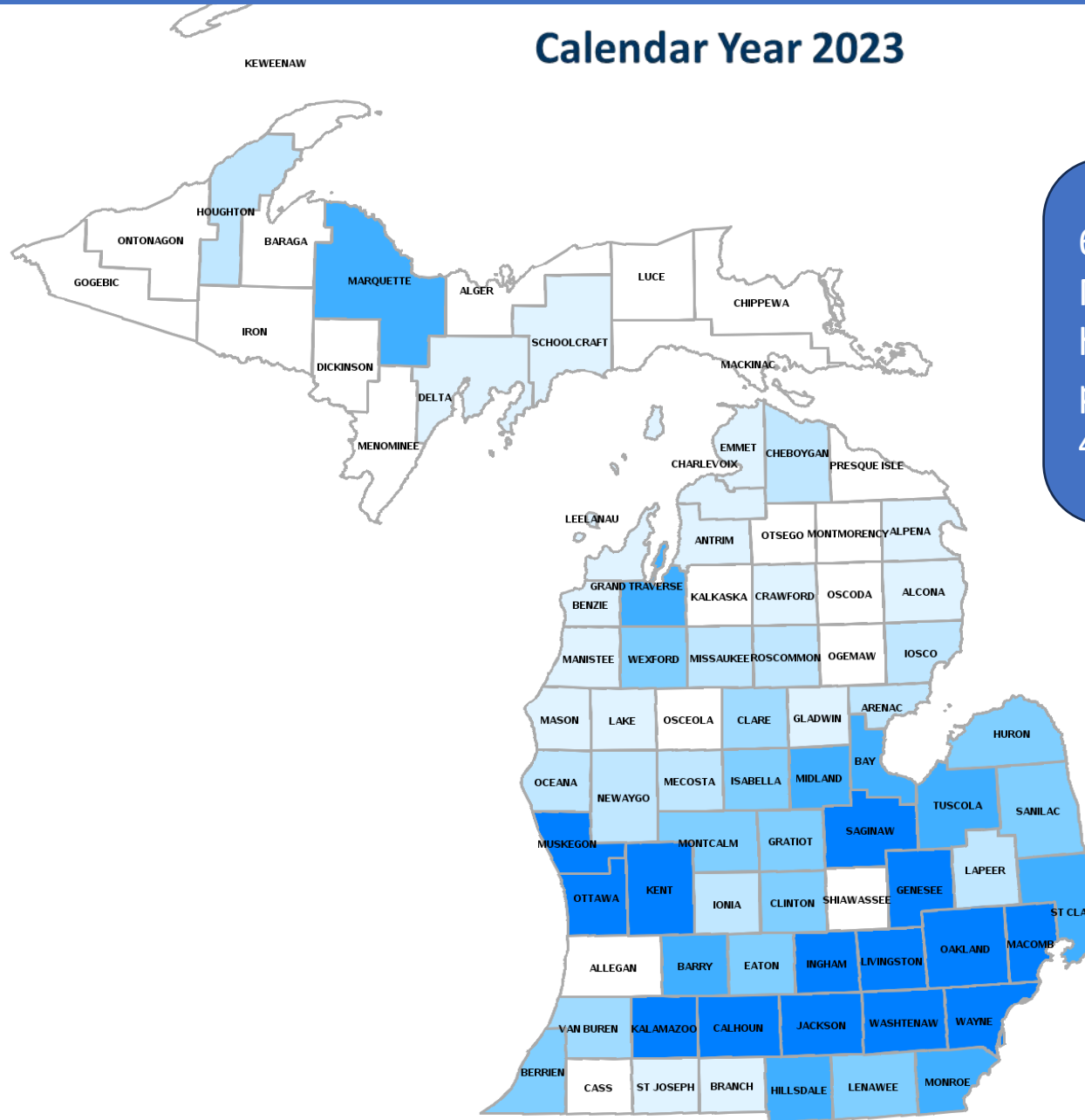
## Calendar Year 2019



44/83 (53%) of Michigan counties have at least one practice meeting  
4% engagement

## Number of Practices with at least 4% Engagement Overall

## Calendar Year 2023



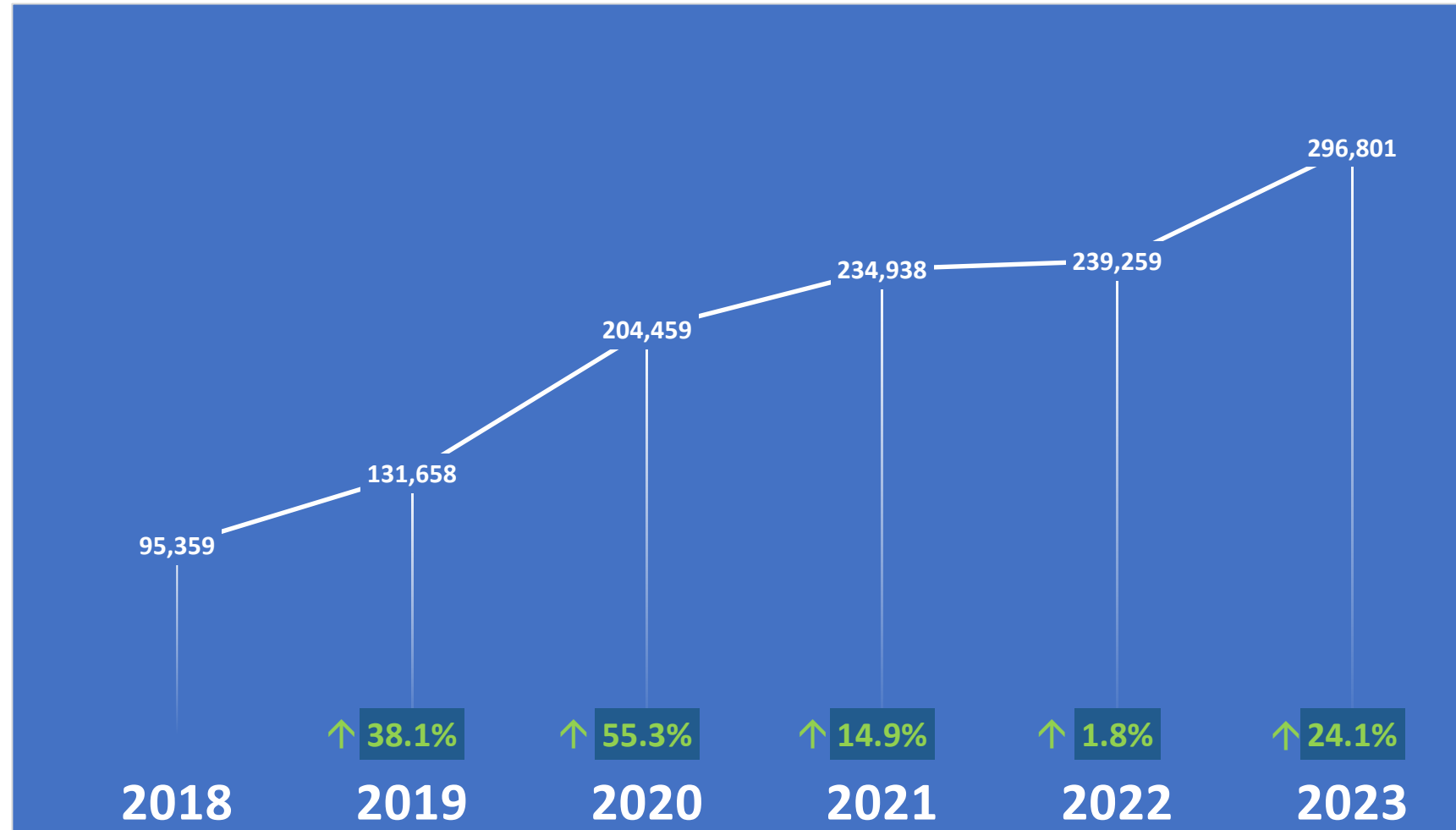
62/83 (75%) of Michigan counties have at least one practice meeting  
4% engagement



# Care Management Billing



# PDCM Utilization: Number of Claims



PCP and Mixed Practices Only





## PDCM Utilization: per 1,000 PDCM Eligible Members



PCP and Mixed Practices Only



## TCM Utilization: Number of Claims



PCP and Mixed Practices Only



## TCM Utilization: per 1,000 PDCM Eligible Members



PCP and Mixed Practices Only



## Med Rec Utilization: Number of Claims



PCP and Mixed Practices Only



## Med Rec Utilization: per 1,000 PDCM Eligible Members

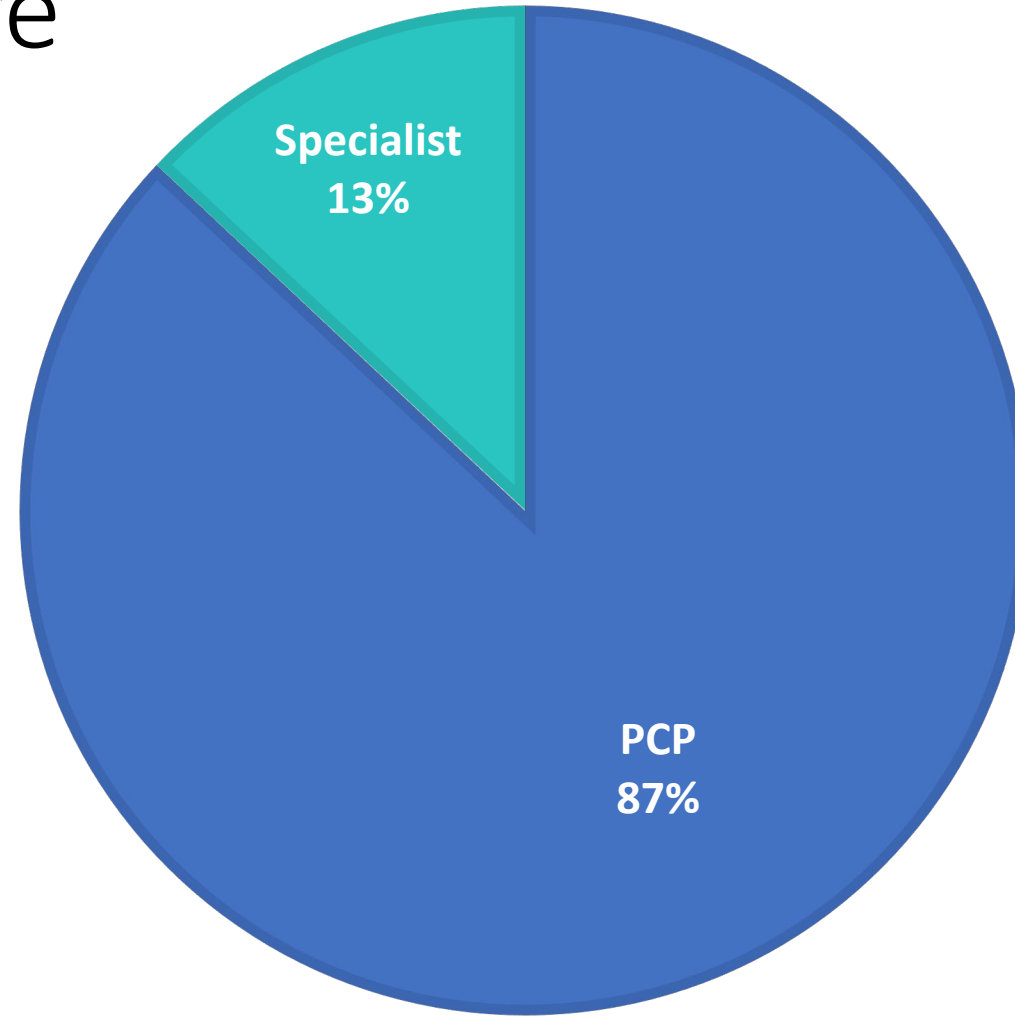


PCP and Mixed Practices Only





# CY 2023 PDCM Claims Specialty compared to Primary Care





## PDCM Outcomes VBR

- Based on SubPO/PO scores reflecting PDCM practice performance.
- Includes claims from Calendar Year 2023, with improvement scores calculated from year-over-year claims compared to 2022.



# Adult: Comprehensive Diabetes Control

PO met performance	PO met improvement	One or more Sub PO met performance or improvement	Did not meet performance or improvement
<ul style="list-style-type: none"> <li>-Primary Care Partners, Inc.</li> <li>-LPO, LLC</li> <li>-Holland PHO</li> <li>-Great Lakes OSC, LLC</li> <li>-Lakeland Care Inc.</li> <li>-Novello Physicians Organization</li> <li>-Sparrow Care Network</li> <li>-Spectrum Health Medical Group</li> <li>-Bronson Network LLC</li> <li>-Olympia Medical LLC</li> <li>-GMP Network</li> <li>-McLaren Physician Partners</li> <li>-Lake Huron PHO</li> <li>-Oakland Physician Network Services</li> <li>-Physician Healthcare Network PC</li> <li>-IHA</li> <li>-Beaumont ACO</li> <li>-Ascension Medical Group ProMed</li> <li>-Oakland Southfield Physicians</li> <li>-Jackson Health Network L3C</li> <li>-MSU Health Care, Inc.</li> <li>-University of Michigan Health System</li> <li>-The Physician Alliance, LLC</li> <li>-Metro Health Integrated Network</li> <li>-MidMichigan Collaborative Care Organization</li> <li>-Medical Network One</li> </ul>	<ul style="list-style-type: none"> <li>-Huron Valley Physicians Assoc PC</li> <li>-Professional Medical Corporation</li> </ul>	<ul style="list-style-type: none"> <li>-Northern Michigan Care Partners</li> <li>-United Physicians</li> <li>-Integrated Health Partners</li> <li>-Trinity Health Alliance of Michigan</li> <li>-CCA Health Physician Organization</li> <li>-CIPA</li> <li>-Upper Peninsula Health Group</li> </ul>	<ul style="list-style-type: none"> <li>-St. Mary's PHO, LLC</li> <li>-Henry Ford Medical Group</li> <li>-Answer Health Physician Organization</li> <li>-Genesys PHO LLC</li> </ul>



# Adult: High Blood Pressure

PO met performance	PO met improvement	One or more Sub PO met performance or improvement	Did not meet performance or improvement
<ul style="list-style-type: none"> <li>-Novello Physicians Organization</li> <li>-Answer Health Physician Organization</li> <li>-LPO, LLC</li> <li>-Great Lakes OSC, LLC</li> <li>-Primary Care Partners Inc</li> <li>-Olympia Medical LLC</li> <li>-Physician Healthcare Network PC</li> </ul>	<ul style="list-style-type: none"> <li>-The Physician Alliance, LLC</li> <li>-Spectrum Health Medical Group</li> <li>-Sparrow Care Network</li> <li>-St. Mary's PHO, LLC</li> </ul>	<ul style="list-style-type: none"> <li>-Huron Valley Physicians Assoc PC</li> <li>-Upper Peninsula Health Group</li> <li>-Northern Michigan Care Partners</li> <li>-Integrated Health Partners</li> <li>-GMP Network</li> <li>-McLaren Physician Partners</li> <li>-Oakland Physician Network Services</li> <li>-CIPA</li> <li>-United Physicians</li> <li>-CCA Health Physician Organization</li> </ul>	<ul style="list-style-type: none"> <li>-Jackson Health Network, L3C</li> <li>-Genesys PHO LLC</li> <li>-Holland PHO</li> <li>-Oakland Southfield Physicians</li> <li>-Professional Medical Corporation PC</li> <li>-Bronson Network LLC</li> <li>-Medical Network One</li> <li>-Beaumont ACO</li> <li>-Lake Huron PHO</li> <li>-Trinity Health Alliance of Michigan</li> <li>-IHA</li> <li>-Lakeland Care Inc</li> <li>-Metro Health Integrated Network</li> <li>-University of Michigan Health System</li> <li>-Ascension Medical Group ProMed</li> <li>-Henry Ford Medical Group</li> <li>-MidMichigan Collaborative Care Organization</li> <li>-MSU Health Care, Inc.</li> </ul>



# Adult: IP Encounters

PO met performance	PO met improvement	One or more Sub PO met performance or improvement	Did not meet performance or improvement
<ul style="list-style-type: none"> <li>-Novello Physicians Organization</li> <li>-Holland PHO</li> <li>-Spectrum Health Medical Group</li> <li>-Answer Health Physician Organization</li> <li>-Bronson Network LLC</li> <li>-Lakeland Care Inc</li> <li>-LPO, LLC</li> <li>-Northern Michigan Care Partners</li> <li>-Trinity Health Alliance of Michigan</li> <li>-Metro Health Integrated Network</li> <li>-Huron Valley Physicians Assoc PC</li> <li>-Sparrow Care Network</li> <li>-Primary Care Partners, Inc</li> <li>-Professional Medical Corporation PC</li> <li>-Physician Healthcare Network PC</li> <li>-IHA</li> <li>-Genesys PHO LLC</li> <li>-Lake Huron PHO</li> <li>-Ascension Medical Group ProMed</li> <li>-Great Lakes OSC, LLC</li> <li>-St Mary's PHO, LLC</li> <li>-MSU Health Care, Inc.</li> </ul>	<ul style="list-style-type: none"> <li>-University of Michigan Health System</li> </ul>	<ul style="list-style-type: none"> <li>-Upper Peninsula Health Group</li> <li>-Integrated Health Partners</li> <li>-The Physician Alliance, LLC</li> <li>-United Physicians, Inc.</li> <li>-CIPA</li> <li>-McLaren Physician Partners</li> <li>-Oakland Physician Network Services</li> <li>-Beaumont ACO</li> <li>-GMP Network</li> <li>-CCA Health Physician Organization</li> </ul>	<ul style="list-style-type: none"> <li>-Oakland Southfield Physicians</li> <li>-Medical Network One</li> <li>-MidMichigan Collaborative Care Organization</li> <li>-Jackson Health Network, L3C</li> <li>-Olympia Medical LLC</li> <li>-Henry Ford Medical Group</li> </ul>





# Adult: ED Encounters

PO met performance	PO met improvement	One or more Sub PO met performance or improvement	Did not meet performance or improvement
-Novello Physicians Organization	-Lake Huron PHO	<ul style="list-style-type: none"> <li>-United Physicians, Inc.</li> <li>-Huron Valley Physicians Assoc PC</li> <li>-McLaren Physician Partners</li> <li>-CIPA</li> <li>-Northern Michigan Care Partners</li> <li>-Upper Peninsula Health Group</li> <li>-Primary Care Partners, Inc.</li> </ul>	<ul style="list-style-type: none"> <li>-Genesys PHO LLC</li> <li>-Oakland Physician Network Services</li> <li>-Answer Health Physician Organization</li> <li>-University of Michigan Health System</li> <li>-Professional Medical Corporation PC</li> <li>-Oakland Southfield Physicians</li> <li>-GMP Network</li> <li>-Lakeland Care Inc</li> <li>-Holland PHO</li> <li>-IHA</li> <li>-The Physician Alliance, LLC</li> <li>-Sparrow Care Network</li> <li>-Great Lakes OSC, LLC</li> <li>-LPO, LLC</li> <li>-Spectrum Health Medical Group</li> <li>-Medical Network One</li> <li>-Integrated Health Partners</li> <li>-Bronson Network LLC</li> <li>-Metro Health Integrated Network</li> <li>-Olympia Medical LLC</li> <li>-Physician Healthcare Network PC</li> <li>-Beaumont ACO</li> <li>-MSU Health Care, Inc.</li> <li>-St. Mary's PHO, LLC</li> <li>-Jackson Health Network, L3C</li> <li>-Trinity Health Alliance of Michigan</li> <li>-Ascension Medical Group ProMed</li> <li>-Henry Ford Medical Group</li> <li>-MidMichigan Collaborative Care Organization</li> <li>-CCA Health Physician Organization</li> </ul>



# Pediatric: Composite

PO met performance	PO met improvement	One or more Sub PO met performance or improvement	Did not meet performance or improvement
<ul style="list-style-type: none"><li>-Professional Medical Corporation PC</li><li>-Great Lakes OSC, LLC</li><li>-IHA</li><li>-Oakland Southfield Physicians</li><li>-Huron Valley Physicians Assoc PC</li><li>-Answer Health Physician Organization</li><li>-CIPA</li></ul>		<ul style="list-style-type: none"><li>-United Physicians, Inc.</li></ul>	<ul style="list-style-type: none"><li>-Jackson Health Network, L3C</li><li>-University of Michigan Health System</li><li>-Henry Ford Medical Group</li><li>-Sparrow Care Network</li><li>-The Physician Alliance, LLC</li><li>-Beaumont ACO</li><li>-Bronson Network LLC</li><li>-Novello Physicians Organization</li></ul>



# Pediatric: Weight Management

PO met performance	PO met improvement	One or more Sub PO met performance or improvement	Did not meet performance or improvement
<ul style="list-style-type: none"> <li>-Bronson Network LLC</li> <li>-Huron Valley Physicians Assoc PC</li> <li>-Professional Medical Corporation PC</li> <li>-Oakland Southfield Physicians</li> <li>-Great Lakes OSC, LLC</li> <li>-Jackson Health Network, L3C</li> <li>-Beaumont ACO</li> </ul>		<ul style="list-style-type: none"> <li>-United Physicians, Inc.</li> <li>-Medical Network One</li> <li>-CIPA</li> </ul>	<ul style="list-style-type: none"> <li>-IHA</li> <li>-The Physician Alliance, LLC</li> <li>-LPO, LLC</li> <li>-Answer Health Organization</li> <li>-Upper Peninsula Health Group</li> <li>-Integrated Health Partners</li> <li>-Novello Physicians Organization</li> <li>-Primary Care Partners, Inc</li> <li>-Trinity Health Alliance of Michigan</li> <li>-Holland PHO</li> <li>-Genesys PHO LLC</li> <li>-Sparrow Care Network</li> <li>-Spectrum Health Medical Group</li> <li>-University of Michigan Health System</li> </ul>



# Pediatric: IP Encounters

PO met performance	PO met improvement	One or more Sub PO met performance or improvement	Did not meet performance or improvement
<ul style="list-style-type: none"> <li>-Upper Peninsula Health Group</li> <li>-Great Lakes OSC, LLC</li> <li>-Spectrum Health Medical Group</li> <li>-Bronson Network LLC</li> <li>-Novello Physicians Organization</li> <li>-Trinity Health Alliance of Michigan</li> <li>-Answer Health Physician Organization</li> <li>-Primary Care Partners, Inc.</li> <li>-Integrated Health Partners</li> <li>-Metro Health Integrated Network</li> <li>-Professional Medical Corporation PC</li> <li>-IHA</li> <li>-Sparrow Care Network</li> <li>-United Physicians</li> <li>-Henry Ford Medical Group</li> <li>-Oakland Southfield Physicians</li> <li>-LPO, LLC</li> <li>-Olympia Medical LLC</li> <li>-Northern Michigan Care Partners</li> </ul>		<ul style="list-style-type: none"> <li>-Medical Network One</li> <li>-CIPA</li> <li>-Huron Valley Physicians Assoc PC</li> </ul>	<ul style="list-style-type: none"> <li>-The Physician Alliance, LLC</li> <li>-Holland PHO</li> <li>-Genesys PHO LLC</li> <li>-Jackson Health Network, L3C</li> <li>-Beaumont ACO</li> <li>-University of Michigan Health System</li> </ul>



# Pediatric: ED Encounters

PO met performance	PO met improvement	One or more Sub PO met performance or improvement	Did not meet performance or improvement
<ul style="list-style-type: none"> <li>-Integrated Health Partners</li> <li>-Answer Health Physician Organization</li> <li>-Novello Physicians Organization</li> </ul>	<ul style="list-style-type: none"> <li>-Holland PHO</li> <li>-Jackson Health Network, L3C</li> <li>-Northern Michigan Care Partners</li> <li>-Spectrum Health Medical Group</li> <li>-Beaumont ACO</li> </ul>	<ul style="list-style-type: none"> <li>-United Physicians, Inc</li> <li>-CIPA</li> </ul>	<ul style="list-style-type: none"> <li>-Genesys PHO LLC</li> <li>-Huron Valley Physicians Assoc PC</li> <li>-LPO, LLC</li> <li>-IHA</li> <li>-Professional Medical Corporation PC</li> <li>-Sparrow Care Network</li> <li>-The Physician Alliance, LLC</li> <li>-Great Lakes OSC, LLC</li> <li>-Oakland Southfield Physicians</li> <li>-Bronson Network LLC</li> <li>-Upper Peninsula Health Group</li> <li>-Trinity Health Alliance of Michigan</li> <li>-University of Michigan Health System</li> <li>-Primary Care Partners, Inc.</li> <li>-Metro Health Integrated Network</li> <li>-Medical Network One</li> <li>-Olympia Medical LLC</li> <li>-Henry Ford Medical Group</li> </ul>







# Expanding PDCM into Specialist Practices

Barb Brady, BCBSM

Peggy Best, RN, BSN, MSA, Oakland Physician Network Services

Ashley Sumara, CHES, United Physicians

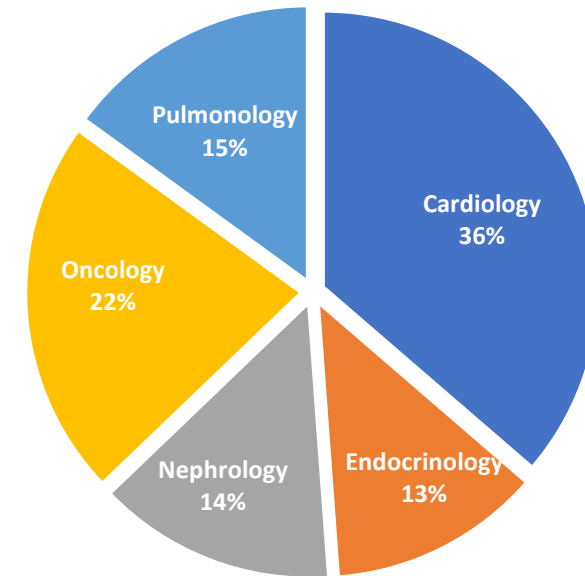
Alicia Majcher, RN, MHSA, Michigan Medicine



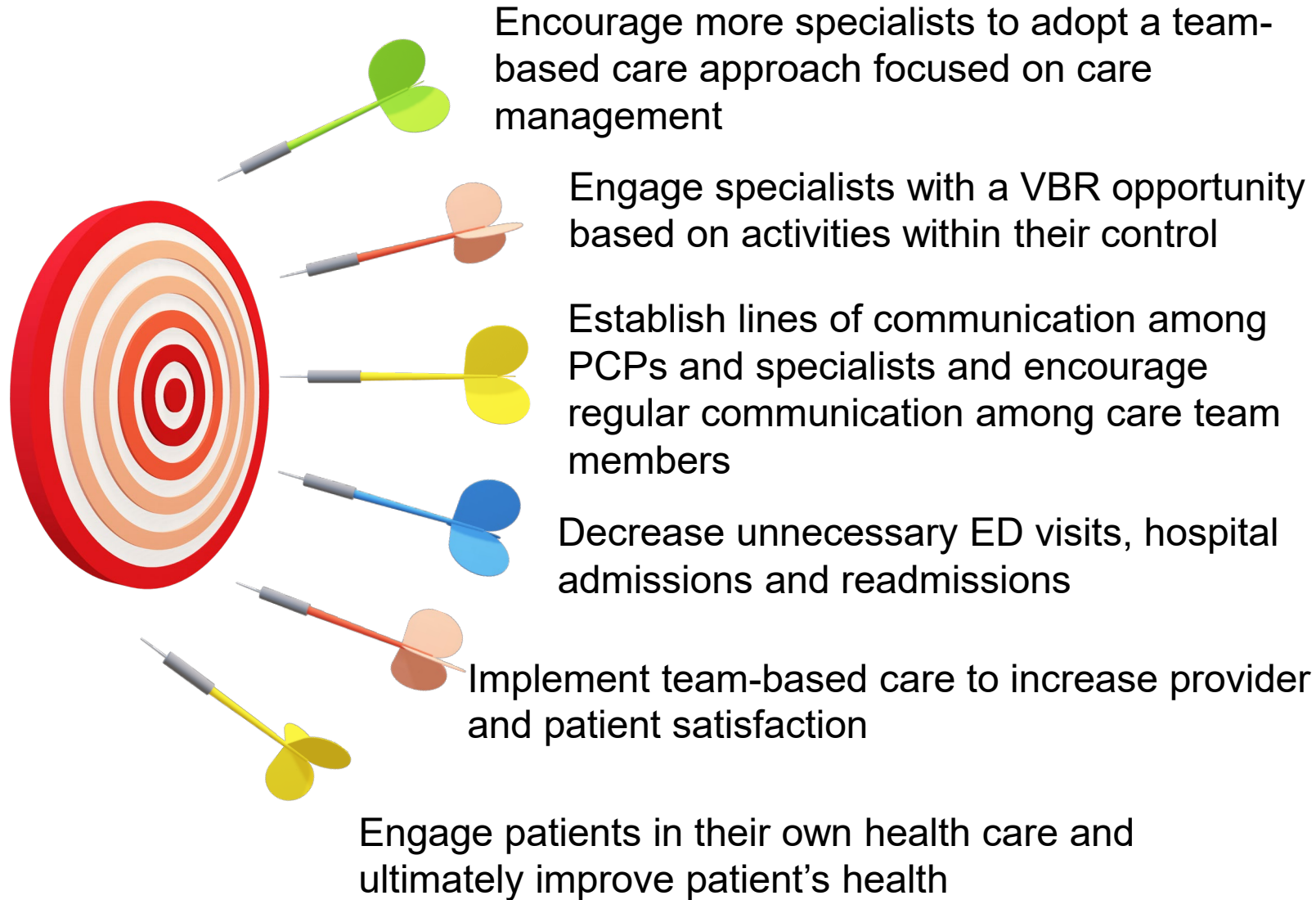
# Current State of Specialist Team-Based Care (STBC)

- The STBC initiative began in 2020.
- This initiative promotes care management in specialists' offices. The five specialties eligible to join the program are:
  - Cardiology
  - Endocrinology
  - Nephrology
  - Oncology
  - Pulmonology
- Currently, the program consists of:
  - 13 Physician Organizations (POs)
  - 56 Practice Units
  - 600 Specialists

STBC Practitioners By Specialty



# Specialist Team-Based Care (STBC) Goals



*Blue Cross Blue Shield of Michigan and Blue Care Network are nonprofit corporations and independent licensees of the Blue Cross Blue Shield Association*

*Proprietary and confidential | Prepared by Health Care Value*

Blue Cross Blue Shield of Michigan is a nonprofit corporation and independent licensee of the Blue Cross and Blue Shield Association



Peggy Best, RN, MSA  
Lead Care Manager



- 284 Practices
- 76 PCP/208 Specialists
- Oakland County
- RNCM/Pharmacist/Community Health Worker
- OPNS Employed and Practice Employed



# Engagement

- MiCMT defined Specialists
- Endocrinology/Nephrology patients most likely to benefit from Care Management and coordination of services
- Endocrinologist on OPNS QA/UM Committee
- Education with providers re: Care Management
- Endocrinologist CM – PO Employed
- Nephrologist CM – Clinic Employed



# Best Practices for Engagement

- Embedded Care Manager
- Physician Involvement – Patient Identification
- Establish Processes and Workflow
- Warm Handoff – Referrals from Physicians
- Relationship with PCP CM
- Continuous Mentorship with PO Lead Care Manager

# Barriers/Challenges

- Patient Eligibility/Threshold for VBR
- Endocrinology Clinic- Small Patient Population
- Nephrology Clinic – Very Large – 1 Care Manager
- Billing – Education for Clinic Billers

# How to be Successful

- Defined Office Processes and Workflow
- Physician Engagement, Communication and Support
- Adequate Care Manager Staffing

# Questions?

- Peggy Best, RN, MSA
- OPNS Lead Care Manger
- [pbest@OPNS.org](mailto:pbest@OPNS.org)
  
- Julie Stange, RN
- [jstange@OPNS.org](mailto:jstange@OPNS.org)
- Lisa Burnand, RN
- [lburnand@michigankidney.org](mailto:lburnand@michigankidney.org)

# Ashley Sumara, CHES, Care Management- Programs Manager



- ~1,600 independent physicians (400 PCPs / 1,200 Specialists) across 600 practices throughout Oakland and Macomb counties
- 17 specialty practices (42 physicians) participating in BCBSM STBC initiative
- Cardiology, Endocrinology, Pulmonary, Nephrology, Oncology
- Providing around 1,500 care management services annually (individual claims including G9008)
- Disciplines involved:
  - Specialty Practices-RN, NP, MA, RD
  - United Physicians Care Team-NP, RN, SW, MA, CHW and Pharm D
- Wide variety of engagement and approaches by specialty practices



# Expanding PDCM into Specialist Offices



- *How did your organization engage and select the clinics/providers involved?*
- *Best practices for engagement with clinics (providers, staff, and patients)*
- *Barriers/Challenges to participating in STBC and how did you overcome them?*
- *How to be successful when participating*
- *Billing*





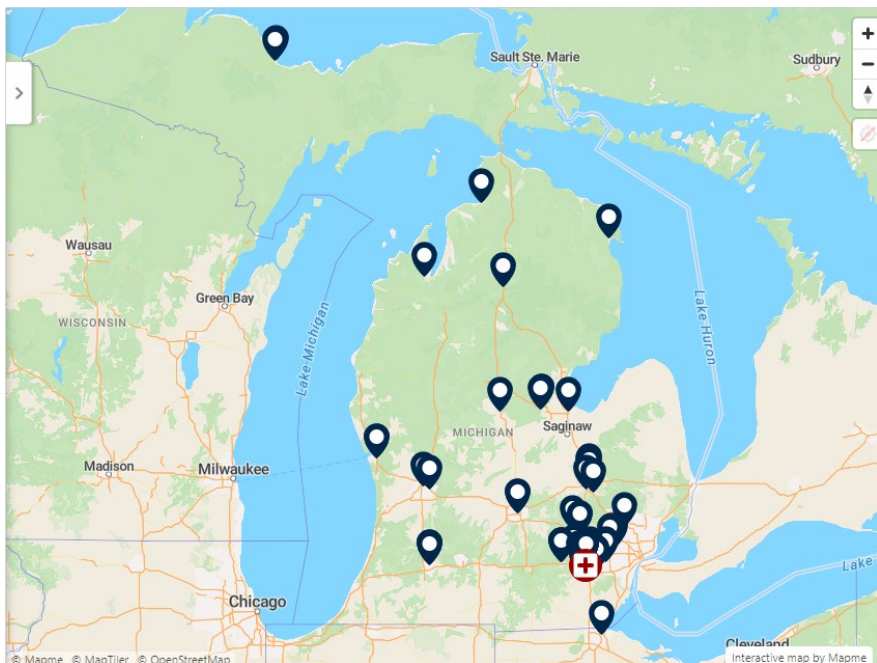
UP analytics team runs reports on potentially eligible patients with additional data to help risk stratify (prioritize) patients Had to meet requirements of regular meetings with CM, PCHM-N capabilities, review of eligible patients (UP reports risk stratified)

Practice Name	Physician Name	Service Begin DT	SERVICE CODE	SERVICE TYPE	UP Care Managed (Y/N)	UP Attributed Patient (Y/N)	Member Attributed PCP Name	Member Attributed Practice	CM RISK SCORE	IP PROB SCORE	ED VISITS LAST 12 MO	TOTAL ALLOWED LAST 12 MOS
Academic Cardiology Associates PC	John A Sallach, MD	12/7/2023	99213	E & M	N	Y	Roby John Geevarghese, MD	Arcturus Healthcare PLC - Associates of Family Medicine	9.5081	97%	1	\$ 105,633.36
Academic Cardiology Associates PC	Malav Jayendra Parikh, MD	1/5/2024	99214	E & M	N	Y	Roby John Geevarghese, MD	Arcturus Healthcare PLC - Associates of Family Medicine	9.5081	97%	1	\$ 105,633.36
Academic Cardiology Associates PC	John S Heath II, MD	7/25/2023	99213	E & M	Y	Y	Jonathan M Joliat, MD	Arcturus Healthcare PLC - Troy Internal Medicine	11.9869	94%	0	\$ 280,883.64
Academic Cardiology Associates PC	Malav Jayendra Parikh, MD	9/15/2023	99213	E & M	N	Y	Vasilios Gikas, DO	Silver Pine Medical Group PLC	14.2938	92%	18	\$ 153,260.79
Academic Cardiology Associates PC	Malav Jayendra Parikh, MD	9/28/2023	99214	E & M	N	Y	Vasilios Gikas, DO	Silver Pine Medical Group PLC	14.2938	92%	18	\$ 153,260.79
Academic Cardiology Associates PC	Malav Jayendra Parikh, MD	1/4/2024	99214	E & M	N	Y	Vasilios Gikas, DO	Silver Pine Medical Group PLC	14.2938	92%	18	\$ 153,260.79
Academic Cardiology Associates PC	Malav Jayendra Parikh, MD	5/16/2024	99214	E & M	N	Y	Vasilios Gikas, DO	Silver Pine Medical Group PLC	14.2938	92%	18	\$ 153,260.79
Academic Cardiology Associates PC	John A Sallach, MD	11/15/2023	99213	E & M	N	Y	Naysha M Varghese, MD	Silver Pine Medical Group PLC	11.4073	92%	1	\$ 124,984.43
Academic Cardiology Associates PC	Malav Jayendra Parikh, MD	11/14/2023	99214	E & M	N	Y	Naysha M Varghese, MD	Silver Pine Medical Group PLC	11.4073	92%	1	\$ 124,984.43
Academic Cardiology Associates PC	Martin Francis McGough, MD	4/29/2024	99213	E & M	N	Y	Naysha M Varghese, MD	Silver Pine Medical Group PLC	11.4073	92%	1	\$ 124,984.43
Academic Cardiology Associates PC	Martin Francis McGough, MD	4/29/2024	G9002	PDCM	N	Y	Naysha M Varghese, MD	Silver Pine Medical Group PLC	11.4073	92%	1	\$ 124,984.43
Academic Cardiology Associates PC	Martin Francis McGough, MD	4/29/2024	G9008	PDCM	N	Y	Naysha M Varghese, MD	Silver Pine Medical Group PLC	11.4073	92%	1	\$ 124,984.43
Academic Cardiology Associates PC	Martin Francis McGough, MD	5/7/2024	G9007	PDCM	N	Y	Naysha M Varghese, MD	Silver Pine Medical Group PLC	11.4073	92%	1	\$ 124,984.43
Academic Cardiology Associates PC	Martin Francis McGough, MD	5/31/2024	G9002	PDCM	N	Y	Naysha M Varghese, MD	Silver Pine Medical Group PLC	11.4073	92%	1	\$ 124,984.43
Academic Cardiology Associates PC	Brandon Michael Herber, NP	4/30/2024	99214	E & M	N	Y	Mara Louise Geiger, MD	Arcturus Healthcare PLC - Macomb Oakland Adult Medicine	7.5063	89%	1	\$ 78,189.07
Academic Cardiology Associates PC	John A Sallach, MD	5/15/2024	99214	E & M	N	Y	Mara Louise Geiger, MD	Arcturus Healthcare PLC - Macomb Oakland Adult Medicine	7.5063	89%	1	\$ 78,189.07
Academic Cardiology Associates PC	John S Heath II, MD	1/2/2024	99214	E & M	N	Y	Mara Louise Geiger, MD	Arcturus Healthcare PLC - Macomb Oakland Adult Medicine	7.5063	89%	1	\$ 78,189.07
Academic Cardiology Associates PC	John S Heath II, MD	6/6/2024	99214	E & M	N	Y	Mara Louise Geiger, MD	Arcturus Healthcare PLC - Macomb Oakland Adult Medicine	7.5063	89%	1	\$ 78,189.07
Academic Cardiology Associates PC	Martin Francis McGough, MD	9/29/2023	99213	E & M	N	Y	Timothy J Tinetti, MD	Arcturus Healthcare PLC - Troy Internal Medicine	9.6197	84%	0	\$ 132,624.44

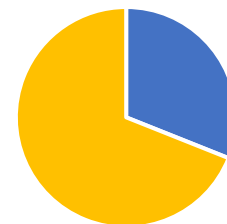


# Alicia Majcher, RN, MHSA

Admin Director of Care Management and Population Health



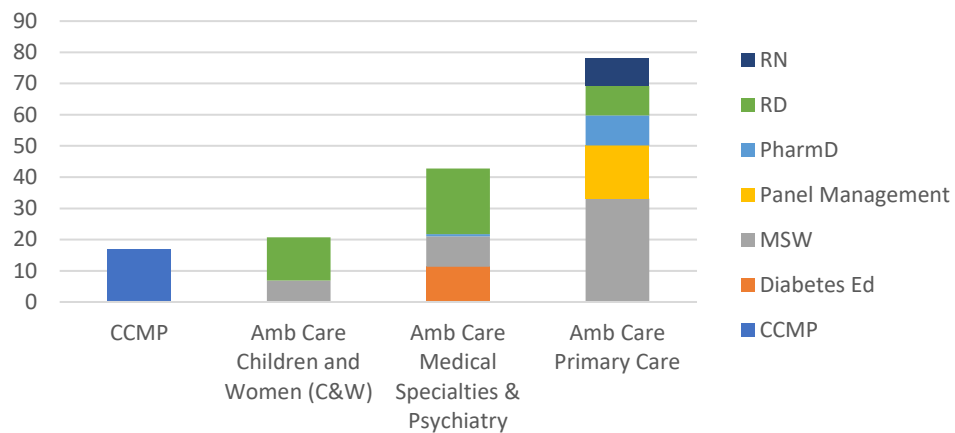
Michigan Medicine Practice Make Up



■ Primary Care ■ Specialty Care



Care Manager Distribution



# LUNCH

Please join us back here at 1





# PO Perspectives on PDCM Group Education

Heidi Steinhebel, RN, BSN, CCM, CCP, Trinity Health IHA Medical Group

Jill Wheeler, BSN, RN, MyMichigan Collaborative Care Organization

Erin Lynne Beattie, RDN, United Physicians

Rachael Smart, MSN, MHA, Novello Physicians Organization





**Heidi Steinhebel RN BSN CCM CCP**  
**Sr. Associate Director of Care Management**  
**Trinity Health IHA Medical Group**



- 418,596 Attributed Lives
- PO/Practice Breakdown
  - 29 Primary Care Offices
  - 10 Pediatric Practice locations
  - 15 ASN Practice locations
  - 36 Specialty Practice locations
- Location: Washtenaw, Livingston, Wayne, Oakland
- Team: RN RD MD
- Topics: Diet/Nutrition/Chronic Conditions, lifestyle modification.





Trinity Health

IHA Medical Group

# Shared Group Visits

Heidi Steinhebel RN BSN CCM CCP  
Sr. Associate Director of Care Management  
October 25, 2024



# Diabetic Share Medical Appointments

- **Identification of patients:** DM Type 2 that are not at goal, struggling with compliance and/or want to learn more about lifestyle modifications.
- **Disciplines involved:** this group is co-led by a physician and a registered dietitian
- **Cadence:** monthly x 15 years
- **Billing:** all SMA are billed as a CCV level 3 or 4 depending on complexity of patient
- **Education:** movement, healthy food choices, prevention, immunizations, cooking tips, supplements and vitamins, side effects of medications
- **Challenges:** recruitment and retention
- **Overcoming challenges:** showing value of the group, helping patients understand that groups increase ownership.
- **Successes:** gaps are being closed on time, sense of comradery.
- **Teamwork**
  - The front desk staff are scheduling and reminding patients of visits: catching no shows or cancellations to get them on the next rotation.
  - MA have to “room” a lot of patients at one time.
  - Practice managers need to maintain the schedule.
  - RD has to prepare education on a monthly basis that will add value to the patient experience.

# Lifestyle Medicine Group Visits

- **Identification of patients:** Patients with HTN, T2DM, Obesity, Dyslipidemia interested in lifestyle medicine
- **Disciplines involved:** LM trained provider (MD or APP) and facilitator
- **Cadence:** monthly, started January 2023
- **Billing:** E/M codes 99213 and 99214
- **Education:** Pillars of lifestyle medicine: whole food plant predominant eating patterns, importance of regular activity, restorative sleep, stress management, social connections and avoidance of risky substances
- **Challenges:** patients attending 1 group and not returning
- **Overcoming challenges:** currently in the survey stages of determining why patients not consistently attending
- **Successes:** Patient has attended 2 groups and has lost 15 lbs and dropped BP medications, managing BP

# Jill Wheeler, BSN, RN

## RN Care Manager



- MCCO has approximately 12,500 attributed BCBSM lives
- Primarily employed providers with 3 affiliated FQHC practices
- Service area includes mid and northern Michigan
  - Clinics in many rural locations-including RHCs and FQHCs
  - Hospitals in Midland, Alma, Alpena, Clare, Gladwin, Mt. Pleasant, West Branch
- Practice Units
  - 31 Primary Care Practices with 79 doctors and 56 APPs
  - 80 Specialty Practices with 249 doctors and 161 APPs
- PCP Care Team support
  - Embedded RN Care Managers, Behavioral Health, and PharmDs
  - Centralized: Patient Care Navigators, and Community Health Workers
- Group Visit Disciplines: RN, Social Worker, MA, BHT, Exercise

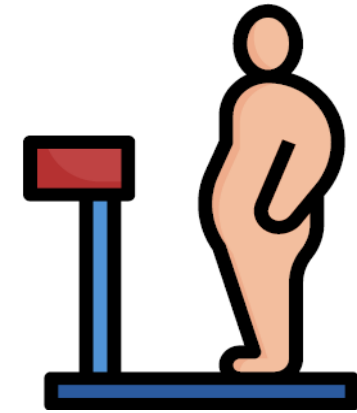


# Weight Management Group Visits

Jill Wheeler, BSN, RN  
Nurse Care Manager

# Why Weight Management?

- Obesity is a **Disease**, not a Weakness
- Passionate of topic
- Variety of information available on topic
- Group led by knowledgeable professionals
- Support and educate patients that they are not alone
- Provide a supportive group environment



# Why did we explore Group Visits?



To improve adherence to medication regimen, lifestyle changes, and improve compliance with care.



Utilizing the Patient Center Medical Home approach to provide collaborative care in creating healthy communities.



With offering an innovated and fresh approach to chronic disease management, this collaboration helps with provider burn out while resulting in maintaining adequate RVU thresholds and improving value base incentive metrics.



# East End Family Practice Program

Group Visit Provider: Danielle Bennett, DO, DABOM

- Currently offering to Dr. Bennett's patients only



## Program Details

- Four different topics
- Multiple sessions
- After office hours (4-6pm)
- Located at the practice

# East End Family Practice Program

## How did we determine participants?

- Portal message sent to Primary Care Providers entire patient panel.



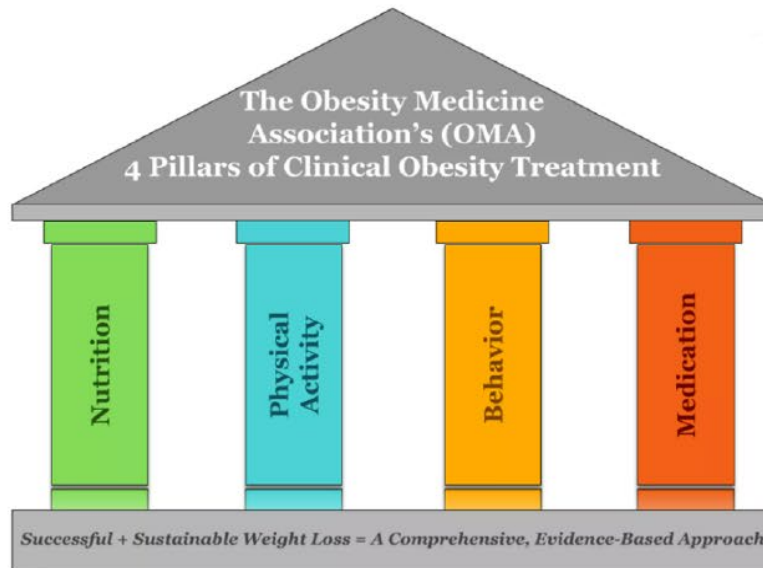
## Billing for Group Visit

- Billed as an office visit by PCP
  - Vitals/weight obtained by Clinical Staff
- G9007 code for BCBS patients
- Referrals



-Currently working on a virtual component

# Pillars of Obesity Medicine



## Topics Focused On:

- Nutrition 101
- Weight Loss Mindset
- Let's Get Your Move On
- Tools For Your Lifestyle Toolbox

# Disciplines Involved

- Provider
- Care Managers
- Behavioral Health Therapist
- Pharmacist
- Office Management
- Front Desk Staff
- Clinical Staff
- \*Community Outreach



\*New to 2024 Group Visits

# Challenges

- Staffing
- Space
- Documentation/Billing



\*To bill as office visit, must be on site

## Weight Management Wins

- Empowerment of a Healthy Lifestyle
- Positive Weight Changes
- Decrease in Blood Pressures
- Increased Patient Satisfaction
- Increased Provider/Presenter Satisfaction

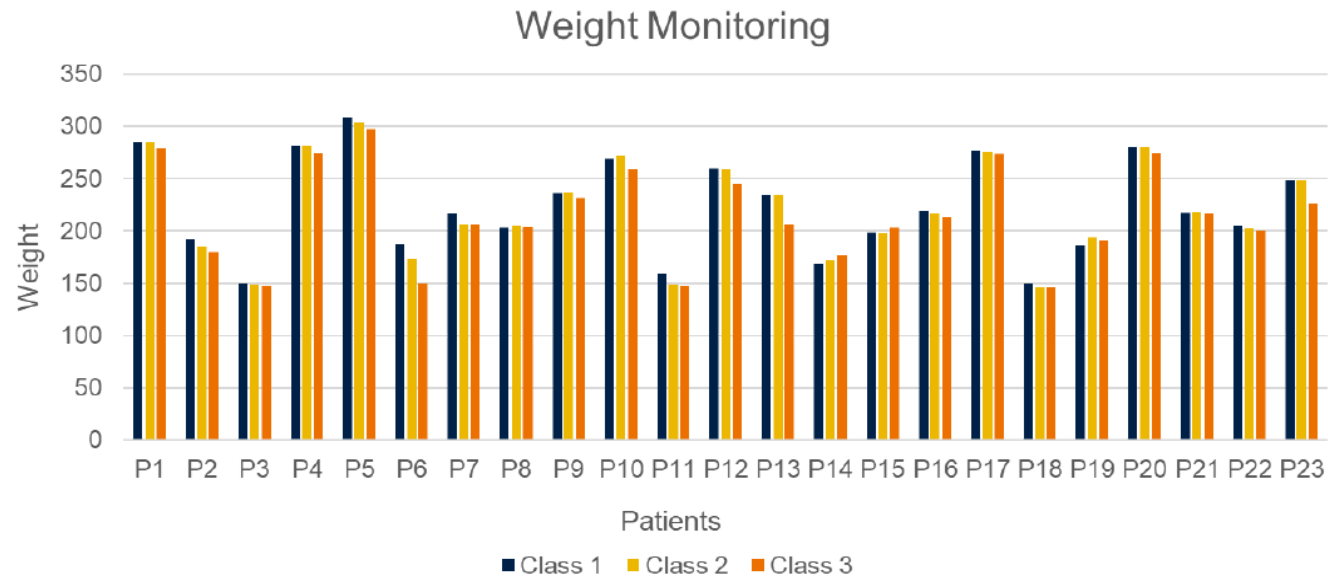
### *Patient Quote*

“I just love this office and being treated as a person. You actually care about me.”



# Weight Data Collection

Collection of data of patients who came to three classes



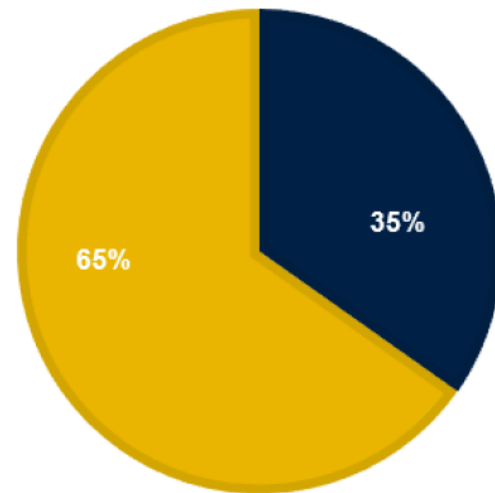
20/23 patients experienced weight loss



# Weight Data Collection

## IMPROVED WEIGHT PATIENTS

■ With Medication ■ Without Medication

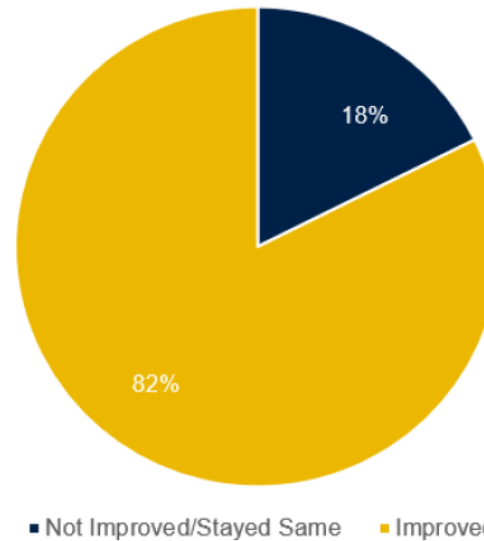


## Medications Used

- Rybelsus
- Mounjaro
- Ozempic
- Trulicity
- Invokana
- Metformin

# Blood Pressures

Patients Blood Pressures Improvement



Data collected from patients who attended at least two of the three classes (34 patients).

# Patient Comments

"I found the class very comfortable and presenters knowledgeable. This group class is badly needed."

"Very informative presentation."

"No such thing as good food bad food. And that I am a human."

"The medical approach and no such thing as a magical answer."

"This class is badly needed. Great job."

"Absolutely the most caring Doctor and staff I have ever had. Thank you!"

"Like the positive spin on food and mind."

"New to me. Not forced to eat 'just' certain foods."

"Knowing that I am more than what I eat."

"The idea that nothing is wrong with me if I struggle with eating. Giving myself Grace."

"The opportunity for education led by Nurse Jill and to check in with Dr. Bennett is truly amazing. "

"I think the follow up I am getting for weight management is so important. I really appreciate that I was not just given a prescription and left on my own for the next 6-12 months."

*Thank You*

# Erin Lynne Beattie, RDN, Care Manager



- ~1,600 independent physicians (400 PCPs / 1,200 Specialists) across 600 practices throughout Oakland and Macomb counties,
- Type of disciplines involved: RD, RN, LMSW, CHW (Community Health Worker), Pharm D
- Group Topics:
  - Picky Eating



# What are Shared Appointments (Group Visits)?

- A shared appointment is~ an innovative, interactive approach to healthcare that brings patients with common needs together with one or more healthcare providers
- Began in the U.S. in the mid-1990s
  - Pioneers: Dr. Ed Noffsinger - Kaiser Permanente, Dr. Marianne Sumego, MD - Cleveland Clinic
- Groups are based off shared diagnosis or concern
  - Ex. Picky Eating (pediatric), Diabetes, High cholesterol, CVD, HTN, Binge &/or Emotional Eating, Crohn's, Ulcerative Colitis, Infant Feeding (pediatric).

## Benefits of Group Visits

<b>Patients</b>	<b>Providers/Organization</b>
Learn from each other	Time efficiency - Share recommendations x1 versus multiple times
Inspire each other	Cost efficiency - Greater billing opportunities
Provide additional accountability	Learning opportunity as some patients share more in a group setting.

**Let's look at an example...**





# Group Visits: Shared Nutrition Appointments

Erin Lynne Beattie, RDN  
United Physicians 10/2/24  
@ Noon



<b>Initials</b>	<b>SMART Goals:</b>	<b>Solutions to Barriers:</b>
<b>PL &amp; HL</b>	<b>Have kiddo help pack lunch 2x/week.</b>	<b>Barrier: Waking up early enough to pack homemade lunch.</b>  <b>Solution: Preparing lunches the evening/night before.</b>
<b>RG</b>	<b>Have kiddo help with meal planning &amp; preparing 2x/week.</b>	<b>Barrier: Time constraints.</b>  <b>Solution: Meal prep on weekends with Dad.</b>

# How to Enroll Patients

- Identify which patients have the common diagnosis/condition
  - May need to ask administration team for this list.
- Can call these patients and/or invite them at the end of their upcoming appointment.
  - End with, “Would you like to join for this?” versus “Would you like to join or just stick with your individual appointments?”
- For the pilot, do not advertise that it is the pilot.
- At the end of each group visit, have the patients sign up for the upcoming group visit.
- “RSVP is required. Limited spots available. First come, first serve.”

## Other Logistics

- Completing charts:
  - For general information discussed, C&V
  - For specific information such as individual goals, can document these individually in each chart.
- Keep a record of patients contacted & the outcome of the contact attempts.
  - Ex. Excel Sheet
- Set ground rules.
  - Ex. For virtual, mute microphone when not speaking to avoid background noise.

# Rachael Smart, MSN,MHA,BSN-RN Manager of Quality



## ***Novello Physicians Organization PO Overview***

- Independent Physician PO In Northern Michigan
  - Location: Mostly Traverse City Area. North to Petoskey and Gaylord, West to Manistee, and then south to the Lansing area.
  - Roughly 300 Active Physician Members
  - 98 Practices and 26 PCP practices
    - All PCMH Designated or working towards PCMH designation.
      - CoCM: 3 practices active, 1 new practice this October, more to join possibly 2025
      - MAT: 6 practices
      - MCT2D: 6 Practices
  - 57 Specialist Practices

## Types of disciplines involved:

- Most practices use RNs and Social Workers
- Pharm D at 6 practices
- Registered Dietitian at 1 practice
- Certified Lactation Counselor at 1 practice



***Novello Physicians Organization, Practice Specific:  
Family Medicine of Michigan (FMOM)***



- Independent Physician Practice in the Lansing Area
  - 8 Physician Providers
  - 4 APP Providers
  - Care Managers
    - Some Care Managers participate in both PDCM and CoCM
    - 4 RN Care Managers
      - 2 PDCM
      - 2 CoCM
    - 1 SW Care Managers
    - 1 PA
  - PCMH Designated prior to 2012
  - CoCM Designated since the program launched
  - MCT2D 2024

**Group Visit Topics:**

- Current:
  - Holiday Healthy Eating
  - Working on healthy eating/ Gut health and the brain
    - FMOM sent a CM to a conference
- Future Considerations:
  - Welcome to Care Management
    - Way to play patients in best program for them
    - Way to possibly pair patient to best care manager for them
    - Way to discuss expectations and understand what kind and how much support the patient wants
  - More General Healthy Living/ Healthy Eating
  - Diabetes





# Bridging the Gap: Nutrition Counseling for Cardiac Patients

Eric J. Brandt, MD, MHS, FACC, Michigan Medicine

Beverly Kuznicki, MA, RDN, Michigan Medicine





# Bridging the Gap: Increasing Nutrition Counseling for Cardiac Patients



Eric J. Brandt MD MHS FACC  
Beverly Kuznick, RDN

Communicable, maternal, neonatal, and nutritional diseases

- HIV/AIDS and tuberculosis
- Diarrhea, lower respiratory tract, and other common infectious diseases
- Maternal disorders
- Neonatal disorders
- Nutritional deficiencies
- Other communicable maternal, neonatal, and nutritional diseases

Noncommunicable diseases

- Neoplasms
- Cardiovascular diseases
- Chronic respiratory diseases
- Cirrhosis and other chronic liver diseases
- Digestive diseases
- Neurological disorders
- Mental and substance use disorders
- Diabetes, urogenital, blood, and endocrine diseases
- Musculoskeletal disorders
- Other noncommunicable diseases

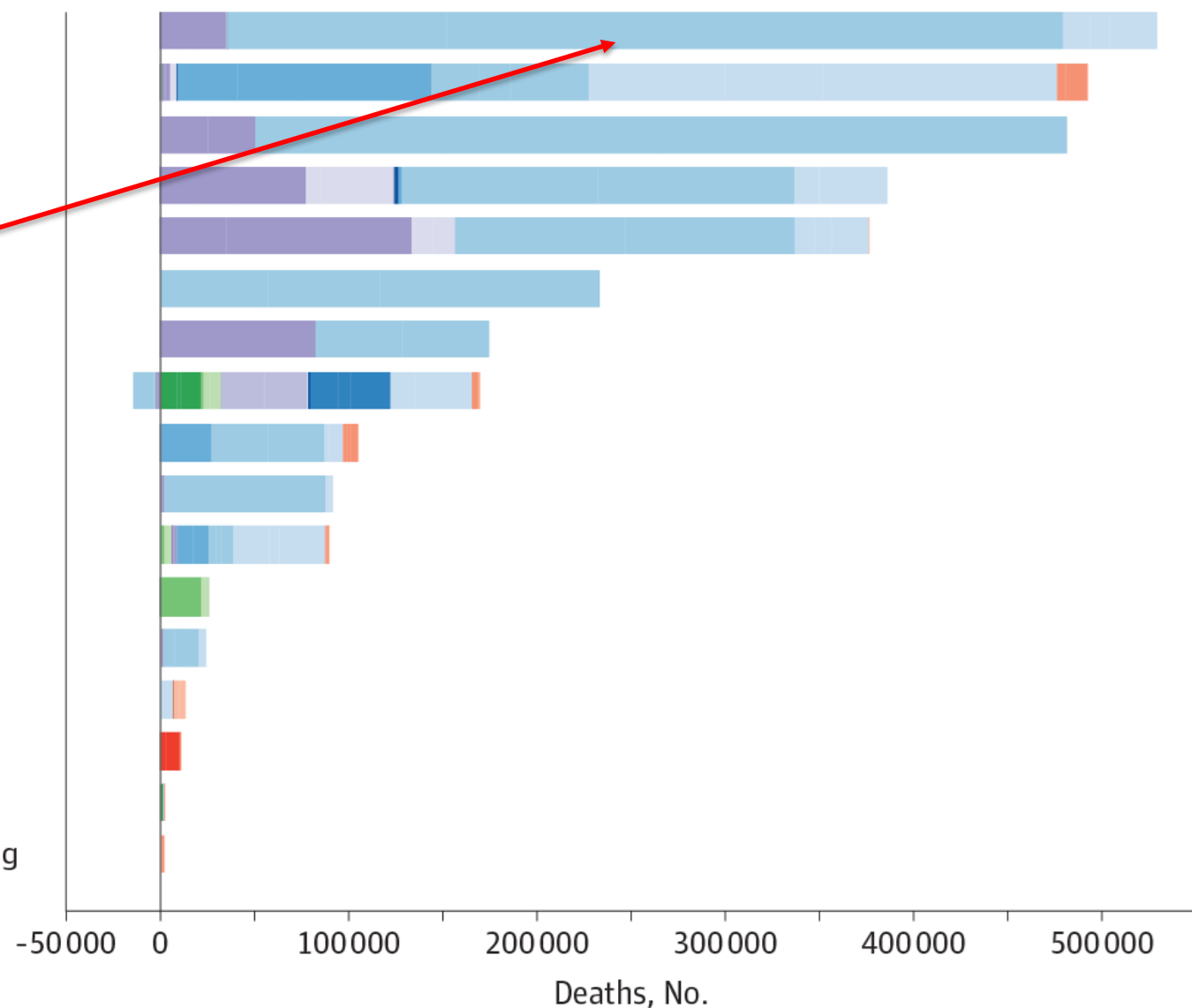
Injuries

- Transport injuries
- Unintentional injuries
- Self-harm and interpersonal violence
- Force of nature, conflict and terrorism, and executions and police violence

## A Risk factors and related deaths

### Risk factors

- Dietary risks
- Tobacco use
- High systolic blood pressure
- High body mass index
- High fasting plasma glucose
- High total cholesterol
- Impaired kidney function
- Alcohol and drug use
- Air pollution
- Low physical activity
- Occupational risks
- Low bone mineral density
- Residential radon and lead exposure
- Unsafe sex
- Child and maternal malnutrition
- Sexual abuse and violence
- Unsafe water, sanitation, and handwashing





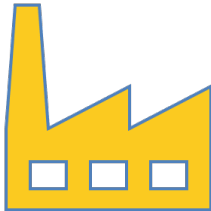




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**MICHIGAN MEDICINE**  
UNIVERSITY OF MICHIGAN

# Missing the mark

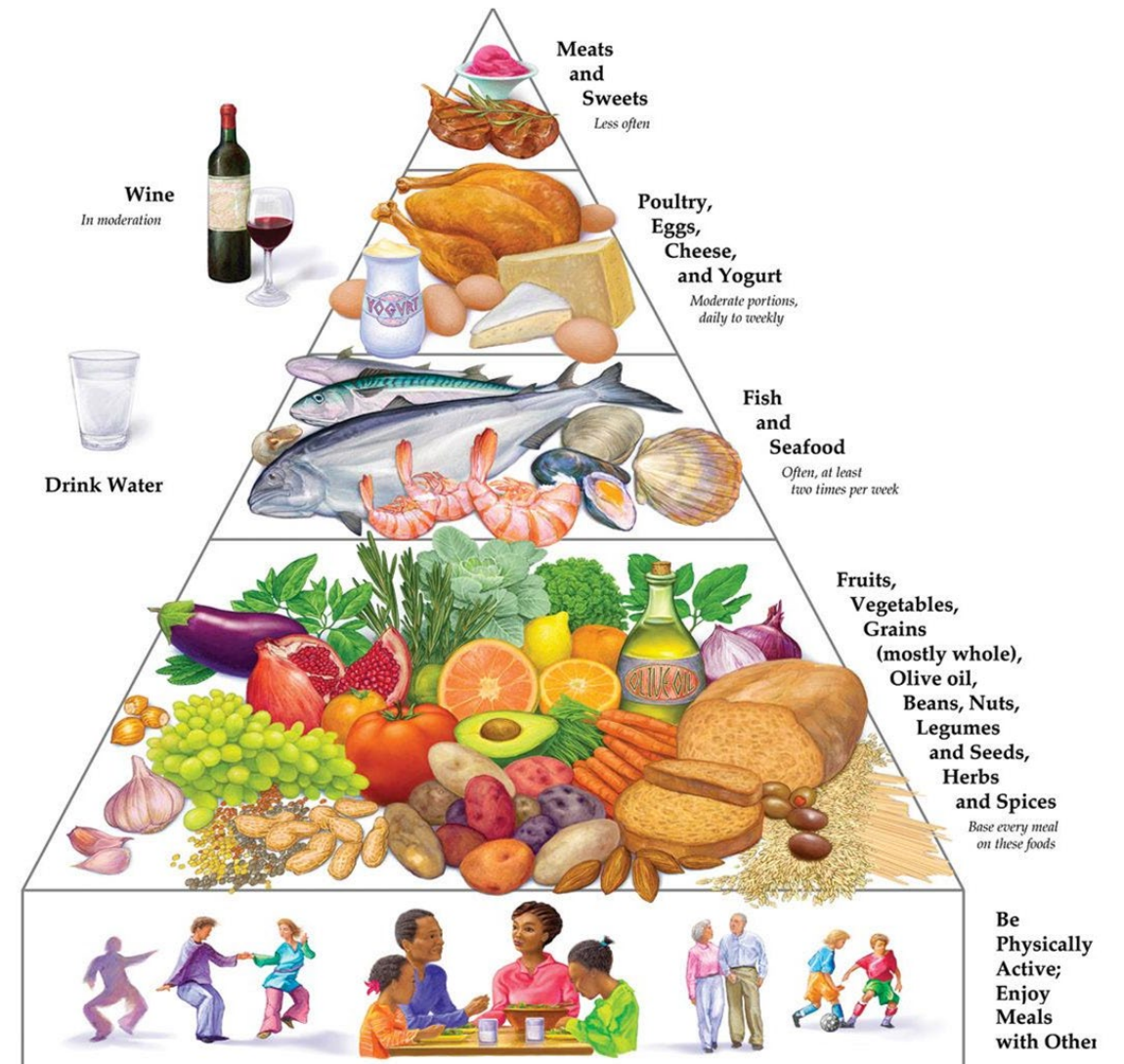
1 in 7	1 in 4	1 in 50	1 in 3	1 in 3	1 in 5	1 in 40
						

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# Vegetarian & Vegan Diet Pyramid



# Mediterranean Diet Pyramid





# MD Role in Nutrition Counseling

## Nutrition Education From Medical School to Fellowship

Receive a formal, practical lecture, series, or discussion on the role of nutrition and diet in overall health	During Medical / Professional School		During Residency	
	FIT	MD	FIT	MD
Yes, part of one lecture	0%	4%	7%	2%
Yes, one lecture	24%	17%	21%	9%
Yes, a series of lectures	39%	21%	5%	6%
Yes, a bedside discussion on teaching rounds	0%	3%	11%	7%
No	21%	31%	43%	59%
Don't recall	16%	24%	13%	17%

During Fellowship Training...	FIT	MD
I recall receiving a high level of nutrition education that gave me excellent skills for counseling patients.	0%	1%
I recall receiving a solid nutrition education during my fellowship training that adequately prepared me for counseling patients.	9%	8%
I recall receiving minimal nutrition education during my fellowship training that did not adequately prepare me for counseling patients.	35%	33%
I do not recall receiving any nutrition education during my fellowship training.	56%	57%

MD n= 646  
FIT n= 75

PMID: 28551044



**MICHIGAN MEDICINE**  
UNIVERSITY OF MICHIGAN

## Dietary Counseling: The Current State

- How often do patients receive dietary counseling after a major cardiovascular event?
- We look within 90 days after being hospitalized for heart attack, stent, coronary bypass, heart failure episode, or stroke then quantified how many had ICD codes for dietary counseling or participation in cardiac rehab.



PMID: 38462127

## Dietary Counseling: The Current State

- We found that dietary counseling was documented in these codes in only about **1-in-5** individuals.
- When we excluded cardiac rehab this was only **1-in-20**.

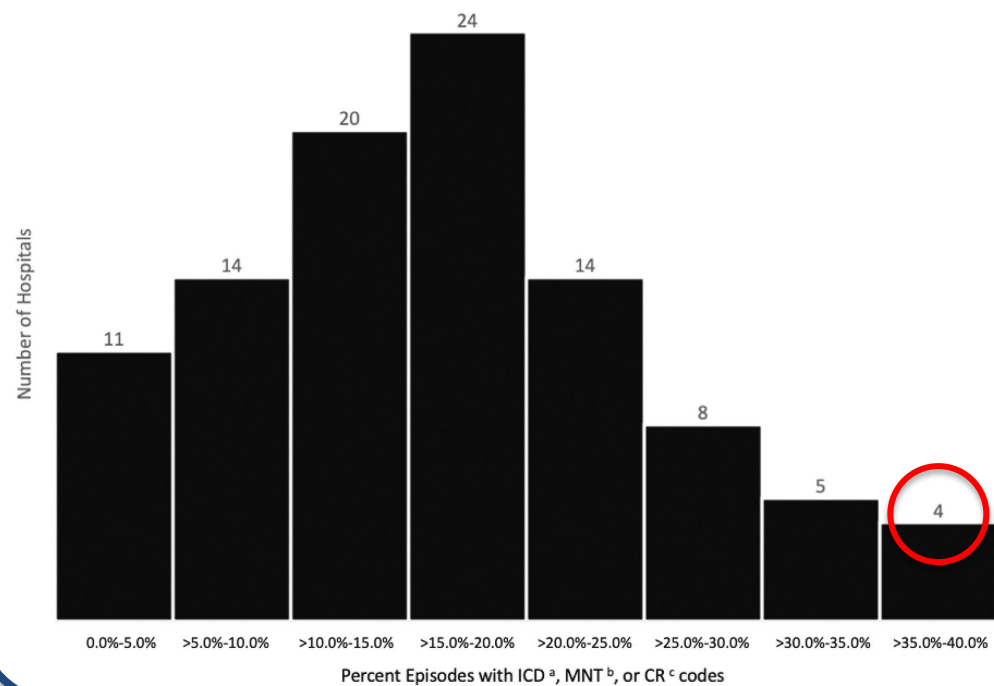


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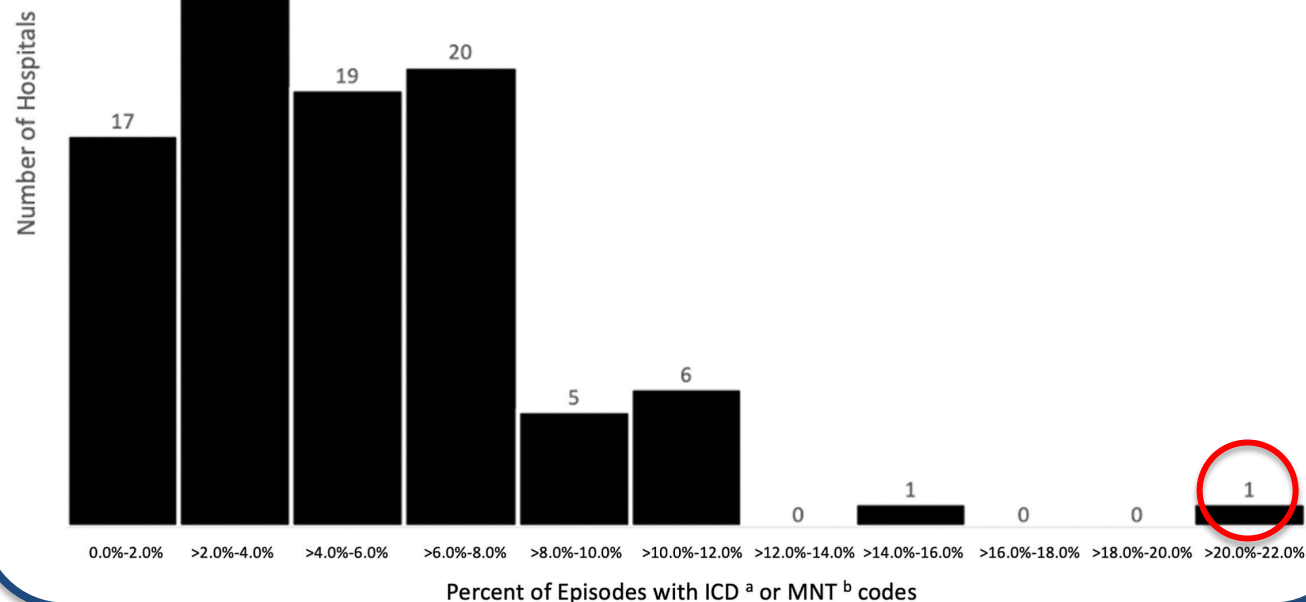
# Dietary Counseling: The Current State

- There was large variation across hospitals, with most having very low dietary counseling after major events

Cardiac Rehab included



Cardiac Rehab excluded





## Michigan Medicine Cardiology-Team Based Care

- Lipid Clinic – provider & RDN
- HTN Clinic – provider & RDN
- Metabolic Fitness Program – RDN, EP, SW
- Cardiac Rehab – EP, RDN, SW



# 50+ Group Classes offered by UMMG RDNs



## Virtual Group Visit Nutrition Program Increases Access and Provides a Positive Patient Experience

**Executive Summary:** Access for outpatient Registered Dietitian Nutritionist (RDN) appointments in our primary care clinics have an 8-16+ week lead time. As part of a clinical redesign initiative, RDN leadership piloted a program that made a virtual group visit an automatic "first contact" for patients referred for prediabetes. In the 3-month pilot period, initial visit wait times dropped from 8.37 weeks (pre-pilot program for virtual 1:1 RDN appts) to 1.97 weeks (during pilot program for virtual group visit RDN appts).

### Problem & Importance

- Access for outpatient Registered Dietitian Nutritionist (RDN) appointments in our primary care clinics have an 8-16+ week lead time.
- Patients are empowered to manage their chronic conditions when provided with evidence-based medical nutrition therapy by an RDN.
- Delayed appointments with a RDN negatively impact complex self-management conditions.
- Utilizing the institutional focus on BASE concepts, this team sought to improve access for more timely patient care.



### What We Measured

**Baseline:** An average lead time for primary care nutrition appointments from date of referral to RDN appt was 10 weeks.

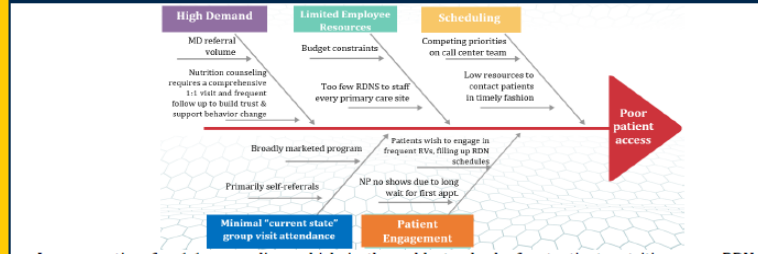
**SMART Target:** To meet an average lead time goal for primary care nutrition appointments of 2 weeks or less from date of referral to RDN appt for qualifying conditions.

**Gap to Close (Target Minus Baseline):** Approximately 8-week lead time gap closure.

### Understanding the Current State

- Virtual delivery of outpatient nutrition care has become widespread. Little research is available on the delivery of virtual group visits for nutrition care.
- Our team of 56 outpatient RDNs initiated a virtual group visit program in March 2021 with goals of improving patient access and increasing RDN productivity. The program was initially marketed primarily as a self-referral program.
- Evaluations indicated that participants were highly satisfied with the content and means of instruction, but attendance was minimal and did not significantly impact access.
- RDN leadership observed that attendance was significantly higher for specialty areas where group visit referrals came from the physician/RDN and where the virtual group care model became the expected mode of "first contact" with nutrition services.

### Analysis & Interventions to Improve



- In preparation for 1:1 counseling, which is the gold standard of outpatient nutrition care, RDN leadership sought ways to create new methods to engage patients with nutrition services sooner and maintain a positive patient experience.
- As part of a clinical redesign initiative in 2022, RDN leadership piloted a program that made a virtual group visit an automatic "first contact" with nutrition services for patients referred for "prediabetes."
- Nine primary care RDNs each lead a once weekly virtual group visit (each group with 2-8 patients with prediabetes).
- Patients referred to nutrition services for prediabetes were scheduled into a virtual group visit as their first RDN encounter, with 1:1 virtual RDN visit scheduled subsequently.

### Results & Outcomes Achieved

- In the 3-month pilot period, initial visit wait times for participating RDN providers dropped from 8.37 weeks (pre-pilot program for virtual 1:1 RDN appts) to 1.97 weeks (during pilot program for virtual group visit RDN appts).
- Productivity for 9 participating RDN providers in the first year of the pilot  $\uparrow$  14% in a year-over-year comparison (Nov 2021 vs. Nov 2022).
- Post-group patient evaluations indicate high satisfaction with the virtual group visit experience.
- RDN providers appreciate the opportunity to deliver efficient, timely nutrition care.

### Sustain & Spread

The clinical redesign model of patients receiving virtual group care for their first RDN encounter has now also gone live for the following referral reasons/diagnoses:

- Chronic kidney disease
- Hypertension
- Gout
- Osteoporosis/Osteopenia
- Prenatal nutrition
- Nutrition for PCOS (polycystic ovary syndrome)
- Picky eating (peds)
- Food Talk (group for caregivers of children who live in larger bodies)
- Low FODMAP diet follow up care
- Care provided for patients following very low or low carbohydrate eating approaches

**Examples of patient feedback:** "Thank you so much for creating this connection space! I love how it was structured where you brought in ideas that sparked more ideas and conversation."

"I have already told many friends about the info I learned and about the classes, very informative and many helpful tips I began to implement immediately after class."

### Conclusions

- Keys to success:
  - Support from our RDN team to be flexible in their care provision and clinical approach.
  - Collaboration from our Call Center for re-modeling care into groups when scheduling.
- Aligns with dept/institutional goals by:
  - Improving access
  - Increasing productivity
  - Promoting a positive patient experience
- Our RDN team will continue to expand this service moving ahead as it has proven to be an effective method for clinical care redesign.

### Team Members and Contacts

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# Cardiology Specific Nutrition Groups

- Mediterranean
- Figuring Out Fats
- Plant-Based Eating
  - Fundamentals
  - Adding Beans to Your Diet
  - Adding Soy to Your diet



## Additional cardiovascular group classes as initial contact

### **HTN & CHF**

**Group** – max 8 patients

### **Challenges**

scheduling

provider awareness

patient resistance



# The Referral:

Referral to Nutrition Cardiology		✓ Accept	✗ Cancel
Class:	<div>Internal Referral Internal Referral External Referral</div>		
Referral:	Priority:	<div>Routine Routine Urgent</div>	
Reason for referral:	<div>1:1 Counseling Group Classes (8 participants or less)</div>		
Comments:	<div><div><div>⊕ abc ↶ ↷ ⓧ ⓧ +</div><div>Insert SmartText</div><div>⬅ ➡ ✎ ⌵</div></div><div>100%</div><div></div></div>		
Scheduling Instructions:	+ Add Scheduling Instructions		
Process Instructions:	To reschedule or cancel an appointment for the services listed above, please call (734)647-7321 or (888)287-1082.		
Reference Links:	<ul style="list-style-type: none"><li>Michigan Medicine Referral Guidelines</li></ul>		
! Next Required		✓ Accept	✗ Cancel

## The Referral – Group Classes chosen:

Referral to Nutrition Cardiology		✓ Accept	✗ Cancel
Class:	<input type="text" value="Internal Referral"/> <input type="button" value="Internal Referral"/> <input type="button" value="External Referral"/>		
Referral:	Priority: <input type="text" value="Routine"/> <input type="button" value="Routine"/> <input type="button" value="Urgent"/>		
Reason for referral:	<input type="button" value="1:1 Counseling"/> <input type="button" value="Group Classes (8 participants or less)"/>		
⚠ Please specify group:	<input type="button" value="HTN"/> <input type="button" value="CHF"/>		
Comments:	<div><div><input type="button" value="abc"/> <input type="button" value="undo"/> <input type="button" value="redo"/> <input type="button" value="help"/> <input type="button" value="insert smarttext"/></div><div><input type="button" value="bold"/> <input type="button" value="italic"/> <input type="button" value="link"/> <input type="button" value="unlink"/></div><div><input type="button" value="100%"/></div></div> <div></div>		
Scheduling Instructions:	➕ Add Scheduling Instructions		
Process Instructions:	To reschedule or cancel an appointment for the services listed above, please call (734)647-7321 or (888)287-1082.		
Reference Links:	• <a href="#">Michigan Medicine Referral Guidelines</a>		
⚠ Next Required		✓ Accept	✗ Cancel

# Post Discharge Group Nutrition

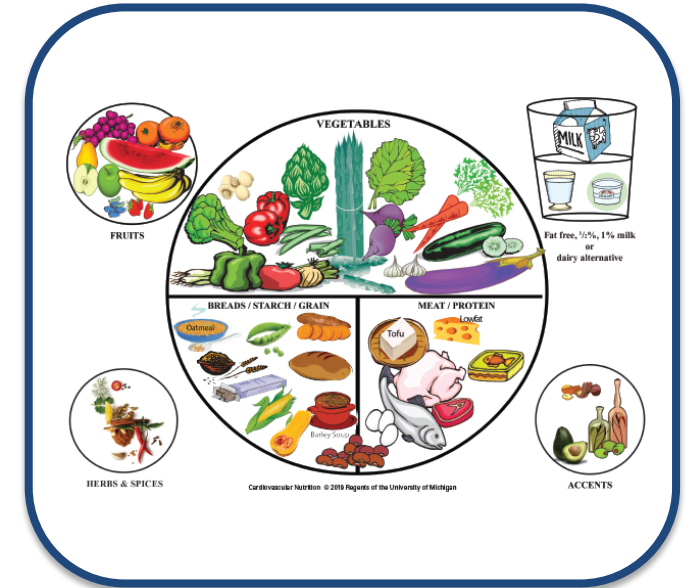
- All patients discharged with MI, stent, CABG
- Automatic referral
- Schedule 2 weeks post DC

## Pros

Equitable care

Motivated patients

Introduction to RDN









# PDCM in Specialist Practices and Group Education Discussion





Thank You for Joining!

Please complete the evaluation  
e-mailed to you after the meeting.

