



**MICMT Annual Meeting  
November 1, 2019**

**Topic Discussion Summary: Blood Pressure**

**Proper Measurement:**

- Train the trainer – having consistent, reliable trainers to support staff
- Check BP equipment regularly
- Handy tips – establishing tips that can be used throughout the practice
- BP newsletter for clinic staff
- Marketing materials which are patient directed/focused
- Rechecks – flagging for the nurse and physician outside the room or in the chart
- PCMH annual education
- Population health educations
- Equipment in room – understanding the placement in room and how that may impact readings

**Rechecking:**

- Identify with heart/communication between staff – using some type of way to identify which patients need a recheck either through a sticker (heart) or other form of communication to ensure no patient is missed
- Planned visit document/high BP in red (workflow document) – being able to proactively identify patients who typically have high blood pressure
- Setting a daily goal – what % of patients were rechecked?
- Green clothespin on door of patient as a flag for a recheck

**Follow-Up:**

- Using a centralized team to conduct phone calls for recheck
  - Using payer list to contact patients
  - Send messages to PCP/who messages back/then care team member conducts a phone call back
- Having an automated pharmacist referral
- Linking other gaps at one time when completing follow-up
  - Prioritizing those patients who have multiple gaps in service
  - Contacting patients with multi-open gaps first

- Using CM referral for follow-up
- Having automatic orders for uncontrolled BP
  - Using auto appointments and no phone calls
- Having automatic referrals to any appropriate CM

**Provider Engagement:**

- Looking to increase leadership involvement to keep providers accountable and engaged
- Focus on the priority to meet measures/metrics
- Incentivize providers to engage