



## In this Issue:

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## #VegasStrong



Remembering the victims of the October 1, 2017 shooting in Las Vegas

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## EXPERIAN

### System Update and Transition to New Platform

As part of Silver State ACO's focus on improving patient outcomes, we have partnered with Experian to notify our Participant practices when one of their patients is hospitalized. In particular, we emphasize when a patient is discharged from an acute facility so that the practice can reach out, set an appointment, and bring the patient in as quickly as possible for a post-acute visit. CMS has identified this as perhaps the best way to avoid a patient being readmitted. This benefits the patient (by keeping him/her out of the hospital); the practice (patients get better results, and the practice can bill CMS for a post-acute Transitional Care Management visit); Silver State ACO (avoiding readmission reduces costs and earns higher quality scores); as well as CMS and taxpayers.

Experian has been transitioning to a new platform. In addition to the benefits that Experian has built into the new platform (known as Community Partner Encounters - CPE), we have been working with Experian to replicate, as closely as possible, the data available through the - about to be discontinued - Care



Coordination Manager ("CCM") system.

Experian has notified us that the transition will be completed on Thursday, October 14<sup>th</sup>. Currently, when logging in, users see two blue buttons – giving them the option to continue into the system using Care Coordination Manager *or* Community Partner Encounters. After October 14<sup>th</sup>, the CCM button will disappear.

We encourage all users to begin using Community Partner Encounters.

The sooner a user begins working with it, the more comfortable he/she will be when there is no other option. In addition, it gives

CARE COORDINATION  
MANAGER INBOX

COMMUNITY PARTNER  
ENCOUNTERS

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November 3, 2021

Northern Nevada:  
November 4, 2021

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October: Sunflowers, pumpkins  
and witches. Quite a collection.

users the opportunity to ask questions and/or make recommendations for improvement before October 14<sup>th</sup>.

A few helpful hints:

- Each of the columns can be sorted. Simply click on the header to sort up or down (numerically or alphabetically).

NAME ▲	DATE OF BIRTH	ADMIT DATE & TIME	DISCHARGE DATE	DISCHARGE DISPOSITION	PCP NAME (ROSTER)	FACILITY NAME	PATIENT CLASS	PATIENT TYPE	SERVICE TYPE	FLAGS
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- The entire report can be downloaded to a spreadsheet, allowing you to sort or manipulate the data any way you'd like. Although it will be created as a CSV file, simply "save as" Excel.
- The search function currently only allows searching by first or last name, or by date. Experian is currently working on adding other sort parameters.

[DOWNLOAD CSV](#)

We understand that change is always challenging but have full confidence that users will quickly acclimate to the new system and appreciate its benefits. As always, should you have any questions, don't hesitate to call Rena Kantor, Director of Operations, at 702-751-0945.

## CAHPS SURVEY

Since inception of the Medicare Shared Savings Program Accountable Care (MSSP ACO) program, the Centers for Medicare and Medicaid Services (CMS) has considered both reduction of cost as well as quality of services, and results, in calculating whether an ACO would earn Shared Savings. Over the years, CMS has increased how much they weigh the quality of services. Beneficiaries' opinion of their experience and perception of the quality of care they receive now reflect a greater percentage of the overall quality score CMS uses in its calculations.

Silver State ACO has always worked with its Participants to stress quality and improve patient experience. Scientific research shows a positive correlation between results for a patient and his/her opinion of the provider and experience. If a patient feels respected and valued and has a positive opinion of how the provider interacts with him/her, the patient is far more likely to follow instructions, resulting in better outcomes. Patient satisfaction also benefits the practice directly by improving patient retention.



CMS utilizes the Consumer Assessment of Healthcare Providers and Systems Survey (CAHPS) to quantify the patient experience. CAHPS is a standardized survey, required of all Accountable Care

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Organizations (ACOs), which focuses on how patients perceive key aspects of their care. Silver State ACO has, again this year, contracted with a CMS approved vendor to conduct the survey.

As we begin to approach the end of the year, SSACO is focusing on year end reporting requirements and has redoubled efforts to maintain – or improve – outstanding quality scores. This annual effort has contributed to our remarkable results – earning Shared Savings for six consecutive years. This year, results of the CAHPS survey will comprise an even greater share of the quality score. Therefore, we implore all our Participants to focus on the patient experience. Remember that how a patient perceives the medical staff’s caring and behavior can affect outcomes and will certainly affect CAHPS scores.



The CAHPS survey is comprised of various classifications of questions. Please see below for a review of the categories, along with suggestions on how to maximize positive patient experience. We’d like to remind you that “you don’t get a second chance to make a first impression”. In other words, be sure that your patients’ first interaction – the front desk – is a good one. It will put a positive spin on everything that follows. A smile costs nothing but is worth a lot!

### Improving the Patient Experience

It is beneficial to your practice, your patients and to the ACO to take steps to ensure that your patients have the best experience possible when interacting with you. Patient satisfaction affects clinical outcomes and patient retention. A loyal and satisfied patient is more likely to adhere to provider recommendations, improving clinical outcomes and controlling expenditures.

Below are categories that are key to the patient experience along with suggestions for improving the experience for your patients.

#### Timely Care, Appointment and Information

Schedule your patients as soon as possible for an illness, injury or condition that needs care right away. Whenever possible, return patient calls/answer patient medical questions the same day that they call.



#### Provider Communication

Providers should explain things in a way that is easy for the patient to understand.

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**Rating of Provider**

Ask your patients how they would rate their provider on a scale of 0-10, asking for feedback will let you know what areas may need improvement.

**Courteous and Helpful Office Staff**

Be sure all of your office staff treat every patient with courtesy and respect.

**Access to Specialists**

Assist your patients in obtaining appointments with any specialists you refer them to.



**Health Promotion and Education**

Be sure a member of the patient's health care team discusses exercise/physical activity and healthy diet with the patient.

**Shared Decision Making**

Encourage the patient to be involved in their medical care. I.e. ask the patient how they feel about starting/stopping medications, etc. Be sure your providers talk about how much personal health information the patient wants shared with family or friends.



**Stewardship of Patient Resources**

Be certain someone on the health care team discusses how much the patient's prescription medicines cost and if possible/appropriate offer a lower cost alternative.



**Care Coordination**

Whenever one of your providers order (labs, x-ray, etc) be certain that someone on the health care team contacts the patient to provide the results.



**PROMINENCE HEALTH Adds Additional Plan Option**

**New Health Plan! More Choice!**

*Consider an affordable Association Health Plan for your office practice insurance*

Washoe County Medical Society (WCMS) has partnered with Prominence Health Plan to bring high-quality, affordable health



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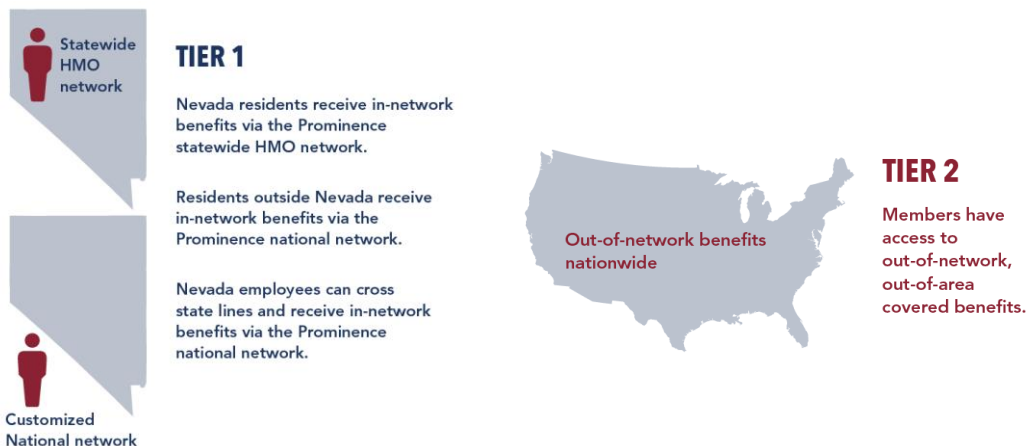
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insurance to medical practices across the state. As a small employer, you must have a minimum of 2 (unrelated) employees to be eligible with up to 50 full-time employees to enroll into the Washoe County Medical Society Association Health Plan.

**New! Now available a SEVENTH plan option – further extending employee choice!**

- SEVEN health plan options available including HMO, HMO Freedom, PPO and a NEW POS plan.
- All plans are open access, which means no referrals required to see a specialist.
- Comprehensive local provider network with some plans that include national network coverage for those members who live, work or travel outside of Nevada.
- This is not an ACO-specific health plan, coverage options are offered to all WCMS membership.
- Practices interested in the options can enroll at any time, they do NOT have to wait for their existing carrier renewal date.

**Consider a Prominence Freedom Health Plan – here’s how it works!**



**Freedom plans are ideal for:**

- Employers with out-of-state employees or those who travel for work
- Families with children living away from home
- Employees looking to maximize savings when it comes to their health coverage

**Not a WCMS Member?**

No problem. Visit [www.wcmsnv.org](http://www.wcmsnv.org) for more information, including membership details. Enroll today so your practice can get the type of health insurance benefits that will help retain and recruit practice employees.

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## Is your practice located outside of Washoe County?

That's not an issue either! The Clark County Medical Society has created an affiliation program that extends the health insurance program to providers that practice in Clark County.

## Ready to enroll or need more information?

Contact your broker and ask for an Association Health Plan from Prominence. You can also email [PHP-GroupQuotes@uhsinc.com](mailto:PHP-GroupQuotes@uhsinc.com) and a friendly member of our sales team can assist.

*Prominence Health Plan is a subsidiary of Universal Health Services, Inc. (UHS), one of the nation's largest and most respected providers of hospital and healthcare services. UHS also maintains an active partnership in the Silver State ACO.*

## QUALITY MEASURES SPOTLIGHT

### Controlling High Blood Pressure

The Centers for Medicare and Medicaid Services (CMS) requires the ACO to report several Quality Measures on behalf of our participant practices. This month we are focusing on the measure related to Controlling High Blood Pressure in patients with Hypertension.



## SPOTLIGHT

CMS requires patients with an active diagnosis of Essential Hypertension and who are between the ages of ages 18-85 to have an adequately controlled blood pressure reading at the patient's most recent visit. For this particular measure CMS requires that the ACO report the last blood pressure reading taken during the calendar year.

CMS considers an "adequately controlled" blood pressure reading to be 139/89 mmHg or lower. If no blood pressure reading is documented during the most recent visit, the patient's blood pressure is assumed to be "not controlled."

When auditing your charts for measure compliance, your assigned Quality Coordinator will first confirm the patient has a diagnosis of hypertension using the patient's active problem list/diagnosis list or the diagnosis listed in an office visit encounter. Once the diagnosis and age parameter are confirmed, the Quality Coordinator will then review the most recent patient visit for a documented blood pressure reading.

In order to assist in improving scores, for those patients out of range, make sure to re-take their blood pressure before you end the

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visit. If there are multiple readings documented on the same day, your Quality Coordinators will use the lowest systolic and diastolic reading to report. Also, you may bring the patient back in a week or two for a blood pressure recheck. This is especially helpful if the patient needed a refill or medication change.



CMS continues to monitor the impact the COVID-19 public health emergency has on practices and will allow a blood pressure reading from a telehealth encounter to meet the “Controlling High Blood Pressure” measure that the ACO is required to report for 2021.

Per CMS, a blood pressure reading taken by either a clinician, or a remote monitoring device (see definition below) and conveyed by the patient to their clinician is acceptable as long as it is the most recent blood pressure reading documented for the patient.

CMS has defined a “remote monitoring device” as either a home device or a device brought by a visiting nurse or caregiver utilized to take the patient’s blood pressure.

Please reach out to your Quality Coordinator if you have any questions or need help meeting this measure.

### October is Cybersecurity Awareness Month

In October, 2004, Cybersecurity Awareness month was launched by the National Cyber Security Alliance and the U.S. Department of Homeland Security. The need for education and diligence in protecting data from security threats has increased dramatically since then. It’s nice to have a month to remind all about the importance, but the threats are a daily reality.



The fallout from a hacking or ransomware incident affects patients, staff and the practice. Recovering takes a tremendous amount of time and has long lasting implications.

As with many issues, education is key. Remind your staff of the hazards and consequences of having your systems compromised. Constant reinforcement does work... but only if it’s kept fresh and meaningful. Posting the same message - physically or digitally - and not changing it for a year, will have little impact.

Never allow staff to use personal email addresses. And, if using free, easily available email addresses (such as @gmail.com), be sure that the practice administration maintains full control. If a staff member leaves the practice, administration must be able to immediately block access.

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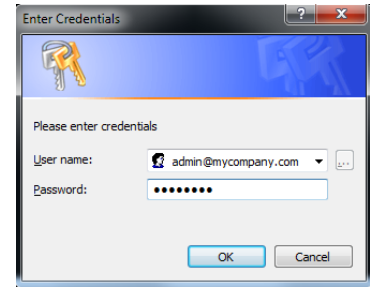
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Password management is of utmost importance. We are all challenged by the myriad of passwords and different requirements for each program or online website we use. But protecting passwords means protecting data and is of utmost importance!

A few things to remember:

- Be sure to establish password requirements for all systems your staff uses
- Never use the same password for all (or even most) online activity. That exposes *all* your data should one system be hacked
- Enable two factor authentication if practical
- Never allow physical posting of passwords
- Never allow staff to share passwords

To paraphrase a leading high-tech reporter – Passwords are like “unmentionables”: Change them often, don’t share them, and don’t leave them laying around.



## Public Health Emergency

The federal government extended the Public Health Emergency for COVID-19 through mid-October.

Although there has been a recent increase in the number of COVID cases, there is no way to know whether the PHE will be extended again. We strongly recommend that all practices maintain flexibility and continue to plan for future contingencies. In particular, many changes to Telehealth, which were put in place during the pandemic, may change.

To monitor factual updates, see the official Public Health Emergency Declaration website:

<https://www.phe.gov/emergency/news/healthactions/phe/Pages/default.aspx>

## 2021 Practice Meetings



Larry Preston,  
CEO,  
announcing  
Shared Savings  
at the  
September 30<sup>th</sup>  
Practice  
Meeting in  
Northern  
Nevada



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As Silver State ACO remains flexible and reacts to current conditions and preferences in each of our markets, the September practice meeting for Southern Nevada was held virtually, while the meeting in Northern Nevada was held in person. Both meetings were very well attended and attendees remarked on the value of the learning opportunity presented. We hope that the November meetings will both be held in person, but watch your email for updates.



Crystal Smith, Tumbleweed Medical Group (on right), winner of the newsletter raffle, with Jessica Wright, Silver State ACO Quality Coordinator. For a chance to win a prize at the November practice meeting, respond to the email to which this newsletter was attached with the words "In the homestretch for 2021" in the subject line.

**Last Practice Meetings for 2021:**

**Southern Nevada:**

Wednesday, November 3<sup>rd</sup> (At 7:30 and 11:30 a.m.)  
at Summerlin Hospital

**Northern Nevada:**

Sparks Medical Building at 5 pm  
Thursday, November 4<sup>th</sup>

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Available for secure reporting of any suspected compliance issues, without fear of retribution.



**Remembering the victims of the October 1<sup>st</sup> shooting in Las Vegas.**

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