



Managed Medi-Cal Patient Outreach Process Assessment

Redwood Community Health Coalition

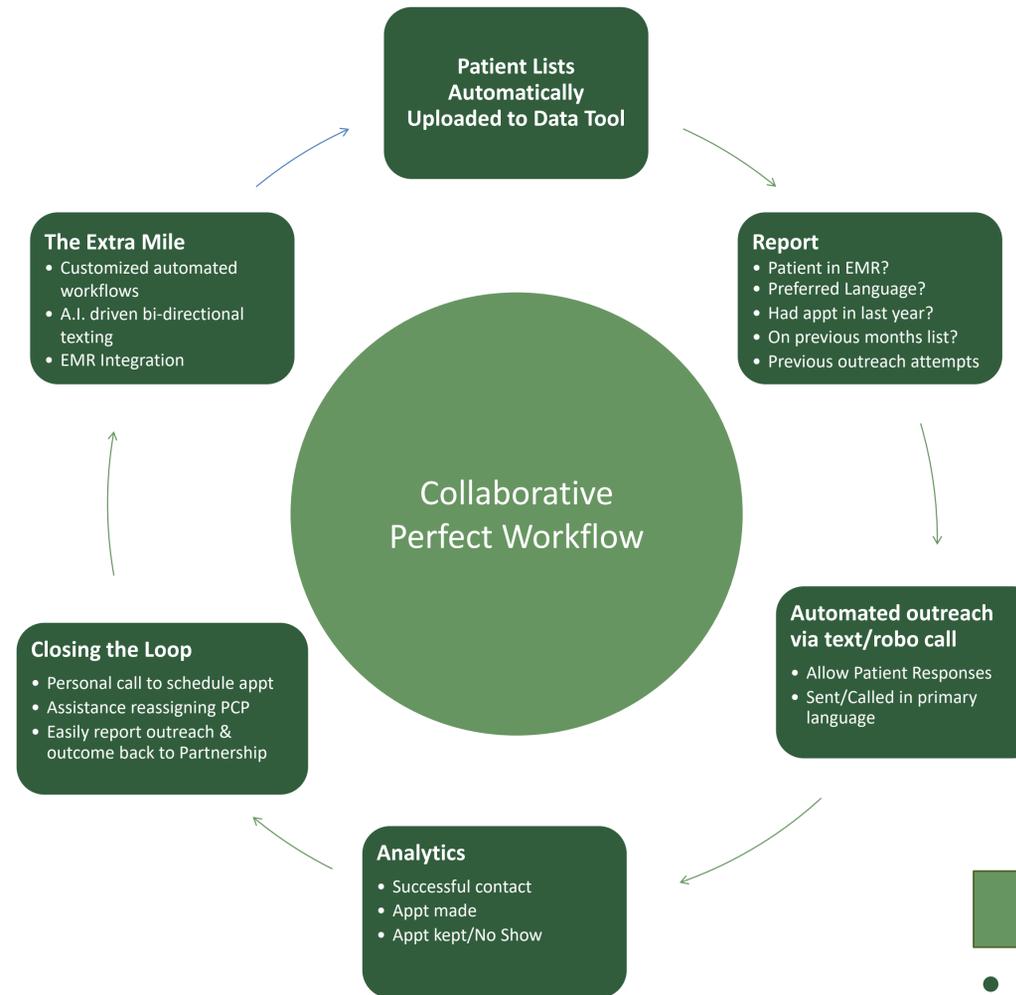
This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number H2QCS30258, Health Center Controlled Networks, for \$1,950,000. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.

OVERVIEW

Connecting patients to their newly assigned Primary Care Provider is the first step in increasing positive health outcomes. Being under the care of a PCP is essential to ensuring patients receive preventive services, screenings, and help managing chronic diseases.

The process of connection, however, is a manual, multi-step process, that even with the use of technology places a heavy workload on staff. Health Centers start by receiving monthly lists of newly assigned patients which are compared to patients within the EMR. This triggers an avalanche of additional sub-processes. Compounding the task burden is the lack of a single data source. It takes dedicated time to review multiple systems to set the patient on the correct process path.

Discussions with six health centers identified this labor-intensive process and a lack of staff capacity as the biggest barriers to sustainability. To help address these barriers, RCHC is working with its current data analytics partner, Relevant, to develop a customizable patient texting tool and dashboard.



All Health Centers interviewed stressed the importance of automating the workflow as much as possible to address the lack of staff capacity. The hope is to leverage smart adaptive technology in a sustainable solution where patients can easily connect with Health Centers in a way that works for them and reduces staff burden.

Method of Contact: Manual (Calls/Letters) 	Method of Contact: Automated (Text/Robo Calls)
Tracking: Paper 	Tracking: Spreadsheet
Tracking: EMR 	
Process Execution: Front Office/Call Center 	Process Execution: QI/Data/EMR/IT

LESSONS LEARNED

- Designate specific role/department with redundancy for execution ***Most Important**
- Have a project owner
- Get buy-in from providers and staff
- Create workflows to make it easy on the patient (ex: New patient phone line)
- Give actionable instructions to patients

CHALLENGES

- Lack of staff capacity
- Natural Staff turnover
- Out of date, incorrect or not enough information received
- Time consuming
- Manual process (even when using technology)