

Unassigned ER Patients CHCRR/RRMC Collaborative

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2014 semi-annual Blueprint conference Lake Morey

Who are we?

- CHCRR (Community Health Centers of the Rutland Region) is an FQHC consisting of 5 Primary care Practices, 1 Pediatric Practice and a Dental Practice.
- 80% of Rutland County residents receive their care at CHCRR
- In **2013** we provided 144, 956 patient visits to 35,114 patients in CHCRR
- Dental visits - 8,570
- Behavioral health visits - 10,912
- 1,184,000 in discounted and free care

The Beginning.....

- When: The collaborative was initiated in June of 2013
- Our mission: How do we arrange for timely follow up care for patients who do not have a PCP in the Rutland Community.
- Focus: Patients who are admitted to the ER at RRMC (Rutland Regional Medical Center) need to be assigned to a Patient Center Medical Home and have a Provider and team, they can “call their own”.

The initial process....

- The notorious calendar of local PCP's....
 - Not always available for follow up visits
 - Sometimes accepting new patients?
 - Medically complex
 - Insurance
 - "Fired from other Practices"
 - One time visit
 - CHCRR had the vast majority of patients
 - Will the location work for the patient?
 - Ongoing follow up with a PCMH

Some Stats

- Initial report from RRMC – “16 unassigned patients per week”
- In reality....December 2013
 - 104 Unassigned patients in a 2 week period
 - 2 patients out of area
 - 91 patients: no PCP
 - 11 patients were already established patients at CHCRR

The process....

- CHCRR Unassigned Patient Committee
- Monthly and as needed
- CIC (Clinical Integration Committee)
- CHCRR/RRMC Unassigned Patient Committee
 - Emergency Room
 - Registration Informatics

Barriers/Challenges

- Allscripts vs. Cerner
- Challenges in designing hospital generated reports
 - Scanned documents
 - Fine tuning data
 - Secure email
- Larger amount of patients without a PCP than expected
- Process is overwhelming and labor intensive
- Any mental challenge – can't sign release!
- Not everyone wants a PCP.....
- NO SHOWS!!

Welcome Packet!



RRMC Emergency Department Follow-Up Instructions

Thank you for allowing us to care for you! Please remember that obtaining a follow-up visit is an important part of the emergency evaluation you received here today.

- In reviewing your care plan, it appears as if you do not have a Primary Care Provider
- The Providers and staff at the Community Health Centers of the Rutland Region (CHCRR) would be pleased to provide you with a follow-up appointment. They will be caring for patients seen at the RRMC Emergency Department.
- It is **very important** that you:
- Are seen in follow-up as directed and
- Establish an ongoing relationship with a Primary Care Provider and other members of the Health Care Team at CHCRR.



COMMUNITY HEALTH CENTERS
OF THE RUTLAND REGION

○ **Greater Rutland Area Centers**

○ **CHCRR Pediatric Associates**

- 1 General Wing Road
- Rutland, VT 05701
- **(802)773-9131**

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○ **Northern Area Centers**

○ **Brandon Medical Center**

- 420 Grove Street
- Brandon, VT 05733
- **(802)247-6305**

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○ **Western and Southern Area Centers**

○ **Castleton Family Health Center**

- 275 Route 30 North
- Bomoseen, VT 05732
- **(802)468-5641**

Rutland Community Health Center

- 215 Stratton Road
- Rutland, VT 05701
- **(802)773-3386**

Shorewell Clinic

- 115 Route 74 West
- Shoreham, VT 05770
- **(802)897-2673**

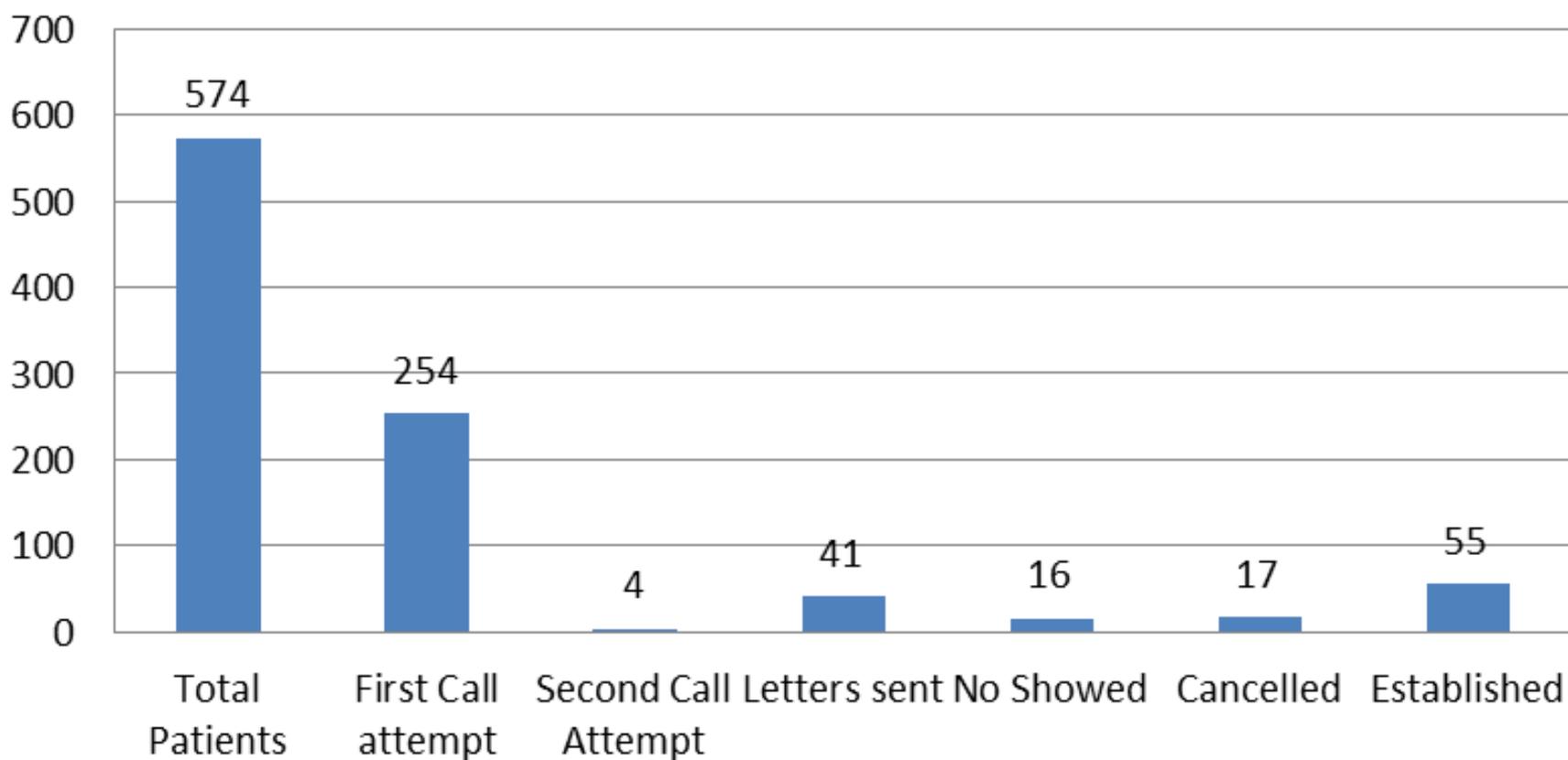
Mettowee Valley Family Health Center

- 278 VT Route 149
- West Pawlet, VT 05775
- **(802)645-0580**

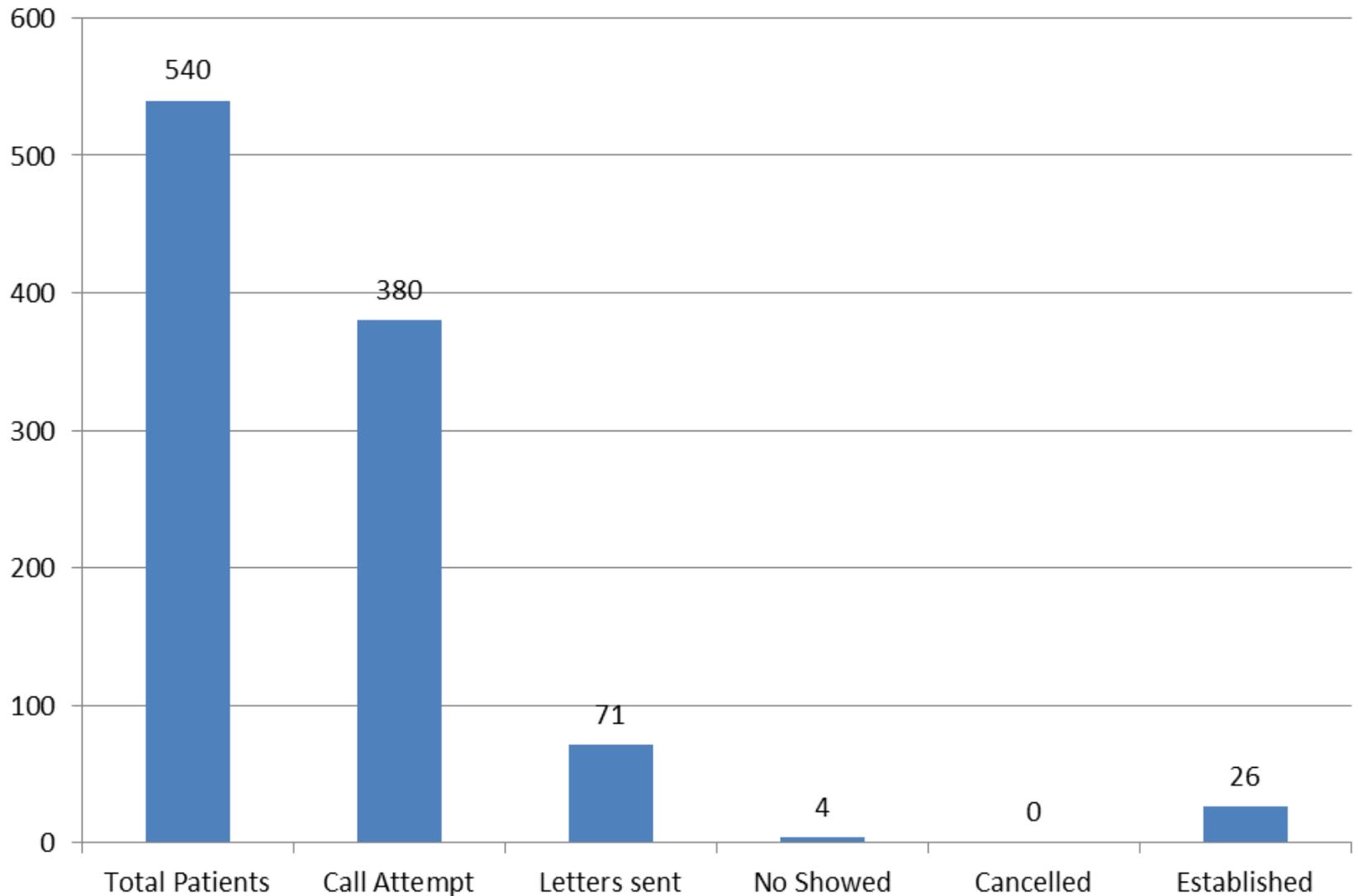
Gatekeeper

- Tracks all unassigned ER patients
- Log system
- Tracking vs. scheduling
- Not consistently kept up to date
- Challenging!

CHCRR/RRMC Unassinged Patient Data 2/1/14-5/31/14



RRMC/CHCRR Unassigned Patient Date from 6/1/14-9/30/14



Plans for the future

- Continued collaboration with RRMC and CHCRR
- New positions
- Access Coordinator
- Population/Panel manager
- CHCRR Hospital based Care Coordinator

In summary.....

- Great collaboration with our RRMC Partners
- Ongoing reinforcement
- Much bigger project than we anticipated
- Expanded services
- Creation of new roles at CHCRR
- Increased focus on RRMC inpatients
 - Case management
- Behavioral health vs. Medically complex patients