

AHRQ's Primary Care Practice Facilitation Forum

This email newsletter is the first step in our plan to create a learning network for individuals with an interest in practice facilitation. We will use this listserve to share perspectives on questions and answers submitted by learning forum members, as well as resources, research articles, and events of interest.

Perspectives from the Field

How should new facilitation programs think about developing funding sources?

Below are some perspectives from three directors of PF programs:

- *Jim Mold, Oklahoma Physicians Resource/Research Network*
- *Lyndee Knox, LANet*
- *Kimbra Wells Metz, Washington Academy of Family Physicians*

Other programs are likely to have different perspectives, depending on their focus, context, and other factors. How does your experience compare?

What funds currently support your program and how did you secure these funds?

Jim Mold: Currently, half of our program is supported by grants from AHRQ and the National Institutes of Health (NIH), and the other half is supported by contracts with AHRQ and Oklahoma's Medicaid program. For example, we are using facilitators to help practices improve asthma care, adhere to chronic kidney disease guidelines, connect with community-based nutrition education services offered through Cooperative Extension, and improve immunization rates.

Lyndee Knox: Our start-up funding came from an AHRQ task order, which supported 18 practices using 2.3 FTE (full-time equivalent) facilitators. We then partnered with Jim Mold and OKPRN on the AHRQ Chronic Kidney Disease project to continue the work we are doing with our facilitators in the community. Other funds include:

- Fee for service contract with a federally qualified health center (FQHC) for PCMH improvement funded through the Health Resources and Services Administration (HRSA)
- Foundation grant through a community advocacy group working to improve health of low income community (in partnership with FQHCs) to implement diabetes managed care clinics
- Funding from L.A. Care Health Plan for the implementation of Project ECHO (Extension for Community Healthcare Outcomes). In an ECHO session/knowledge network, a specialist mentors primary care providers and provides case review. The sessions occur weekly and are aimed at building expertise in the primary care provider. The PF provides support to the provider and practice in this process by assisting the provider/practice to implement new workflows, enhance care teams, introduce supports for guideline use and implement supports

for panel management that, combined with the specialist support from ECHO, provide comprehensive clinical and QI support to the provider/practice.

- National Institutes of Health (NIH) grant to research faculty at UCLA
- Industry grant to research faculty at UCLA

Kimbra Wells Metz: We received initial funding through an American Board of Medical Specialties grant, and participation in the Improving Performance In Practice (IPIP) project through Robert Wood Johnson Foundation (RWJF). This grant was rolled into a two year state Collaborative in partnership with the WA Department of Health. It included 33 clinics of varying sizes and affiliations.

Current work is funded by a sub-award for Practice Transformation Coaching (Facilitating) through the Beacon Community of Inland Northwest (BCIN) project, which is one of 17 Beacon Communities nationally, funded by a Cooperative Agreement from the Office of the National Coordinator, Award No: 90BC0011/01, CFDA:93.727

How do you strategize about bringing in new money?

Jim Mold: We can think about partnering with health insurers, including Medicaid. Under the Minimum Loss Ratio (MLR) provision of the Affordable Care Act, for example, insurers must spend a certain percentage of premium dollars on claims and activities to improve health care quality. To the extent that insurers' MLR is under the threshold, some may be investing more in quality improvement, possibly including practice facilitation for medical home transformation and other activities. The regulations don't specifically list facilitation as an acceptable use of the funds. They simply say that insurers can spend the money on "activities to improve health care quality." Some insurers seem willing to pay for pilot projects to test the effectiveness of combinations of QI, care management, and IT interventions for improving quality and reducing cost. We will, of course, continue to apply for grants and contracts.

We can also think about leveraging state governments, since facilitators will increasingly be located within the counties in which they serve.

Lyndee Knox: The following are some of LA Net's strategies to bring in new money:

- Working on building support for idea of a County-wide regional extension program of facilitators for primary care improvement/safety net
- Beginning outreach to the foundation community this spring to build awareness of the role of facilitators in supporting community advocacy work/practice transformation
- Using facilitators as a resource for researchers wanting to recruit practices and get data; part of our facilitators' time is devoted to this, and the other part is for practice improvement
- Using facilitators as a resource for policy and advocacy groups wanting to improve health of communities—our partnership with the Southside coalition and community health council in Los Angeles County is an example of this
- Created a community fellowship for nursing and MHA students at the local university (CSU Long Beach) where we provide in the field experiences supporting QI in safety net practices and train

them to work as PFs. We had 2 applicants last year; this year we had 15 applicants and are training 7. This has attracted the attention of the university and we will be seeking funding from foundation community to support QI training for nursing and MHA students

- Doing lots of presentations to/for funder communities to raise awareness of PF as a local resource for the safety net
- Adding Project ECHO intervention from New Mexico to our list of services- PFs will help practices participate and this will be incorporated as part of our overall work to support the safety net

Kimbra Wells Metz: Future funding considerations through collaborations, grants, and fee for service contracts with the following:

- Health systems and medical groups/practices to support PCMH accreditation.
- Health Insurance entities to support the delivery side in implementing PCMH insurance products.
- Community ACO (Accountable Care Organization) efforts through practice facilitating care coordination efforts and working with stakeholders to implement PCMH principles and quality improvement work.
- Local, State, and Regional entities to pilot practice facilitation and healthcare reform models through grant partnerships.
- University/Medical School to:
 - Test change concepts and PCMH principles in the community through grants.
 - Develop curriculum for incorporating and testing PCMH principles during Healthcare professionals training

What do you think?

If you'd like to join the discussion, please send your thoughts to us at PracticeFacilitation@mathematica-mpr.com . Your responses will be compiled and shared in weekly newsletters.

Question of the Week

How should a facilitation program decide what activities its facilitators should focus on, and how can a key driver model help?

Submit your thoughts to PracticeFacilitation@mathematica-mpr.com. Your responses will be shared in next week's newsletter. *Please also let us know what other questions you are pondering by sending an email to the same address.*

Upcoming Event

Practice Facilitation Webinar- Part II

Wednesday, April 11th, 12:15-1:30 EDT **Save the Date!**

Title: **Hiring and Training Practice Facilitators**

Description: What should you look for when you are hiring a facilitator? What type of training do facilitators need to be effective? This webinar will discuss the core competencies needed by facilitators and various staffing models used by existing facilitation programs, as well as approaches and strategies for training your facilitators.

Webinar registration link to be included in future newsletters. Stay tuned!

Resources

Please visit the PCMH Resource Center at www.pcmh.ahrq.gov to explore white papers, briefs, a searchable citations database, and other resources related to the Patient-Centered Medical Home and primary care improvement.

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