This document provides extra guidance around Measure 1.G.2 under the Patient-Centered Primary Care Home Program's 2020 Recognition Criteria. The full technical specifications for this measure are available in the <u>2020 PCPCH TA Guide</u>.

1.G.2

PCPCH has identified patient populations that would benefit from alternative visit types and offers at least one.

10 points

Intent of Standard 1.G.2

All patients should have the same opportunity to access their providers. Some patients face barriers to in-person, in-clinic care, and need an alternative to the traditional office visit. Clinics that offer alternative office visit types are extending services to patients that may not receive care if only given the option of the tradition office visit. For practices to meet this measure, it is necessary for practices to comprehensively assess and understand their patient population and their preferred method of access to the clinic. Providing alternative visits to the traditional office visits may increase access to care for more patients. In addition, as alternative visits, especially tele-health have surged during Covid-19, it becomes imperative to have procedures in place for the best possible healthcare. A practice may choose the following methods to increase access to care for its patients:

Туре	Service	Example
Alternative Locations	 Home-based medical care:¹ Patients' providers visit the patients at their homes as a regular office visit. Older adults may find this especially beneficial. Skilled Nursing Facility medical care: Designed for patients in recovery, patients' providers go to the patients' skilled nursing facility to support their recovery from surgery etc. 	A practice with a high percentage of aging patients, homebound with multiple chronic conditions, chooses to offer a home/skilled nursing home-based medical care program. The program is as robust as the in-office visit for those patients. Providers/care teams visit patients and provide all the necessary care at home or in a skilled nursing home facility. ²
Telehealth	Telehealth is the provision of remote services involving direct or indirect patient contact. Per HRSA, telehealth is used "to support long- distance clinical health care, patient and professional health-related education, public health and health administration." ³	A provider diagnoses and/or prescribes medication over the phone or via audio/video software. "Telemonitoring of vital signs" ⁴ (Glucose etc.)

¹ <u>https://www.health.harvard.edu/staying-healthy/the-doctor-will-see-you-now-in-your-home</u>

⁴ <u>https://www.mayoclinic.org/healthy-lifestyle/consumer-health/in-depth/telehealth/art-20044878</u>



² <u>https://www.aahcm.org/page/what_is_hbpc</u>

³ <u>https://www.ortelehealth.org/content/telemedicine-or-telehealth-definitions</u>

Telephone Services	A form of telehealth, telephone services involve non-face-to-face audio evaluations and management of services by a physician provided to an established patient, family member, or caregiver.	During the pandemic, patients are unable to come to the practice and providers are unable to go to patients' homes for a face- to-face visit. The practice offers full phone visits between patients and providers to address acute and chronic needs, which include evaluations and management of those conditions.
Tele- medicine	Another form of telehealth, tele-medicine seeks to improve a patient's health through remote two-way, real-time interactive communication between the patient and the physician at the practice. This form of electronic communication makes use of interactive telecommunications equipment that includes, at a minimum, audio and video equipment ⁵ While this alternative visit type may be the easiest way for a patient to connect with their provider, it can be a barrier for others.	A practice has tele-medicine software built into its EHR and is able to provide personalized care with real-time audio and video connection between patients and their providers. The tele-medicine appointment includes medical decision making, evaluation, and management of chronic conditions. Practices should have clear procedures and established criteria for when tele-medicine is used for an easier workflow. ⁶
Patient Education classes/ Workshop	This refers to a group workshop or class that is facilitated by a physician or other qualified health care professional ⁷ and increases access to primary care for a specific patient population. The activity must include individual patient assessment and medical decision making.	A practice offers a HIPAA-complaint diabetes group education led by a Registered Nurse or Registered Dietician who offers onsite individual patient assessment and medical decision making after the group activity. ⁸ A practice offers HIPAA-complaint group counselling by Behavioral Health Specialist/LSCW that includes individual patient assessment following the group activity. ⁹

XFvNIczEC1FKekmoJTYySazozX46vdVO6O3ntyprHdl3dspJ-GraxXETbVEX~gWq-DMehKfYQAWvG7zJjUzPxRE-

⁹ https://www.aafp.org/about/policies/all/shared-medical.html



⁵ <u>https://www.ortelehealth.org/content/telemedicine-or-telehealth-definitions</u>

⁶ <u>https://www.aap.org/en-us/professional-resources/practice-transformation/telehealth/Pages/Provider-to-Patient-Visits.aspx</u>

⁷ See PCPCH TA Guide for definition of health care professional

⁸ https://d1wqtxts1xzle7.cloudfront.net/33496894/1002.full.pdf?1397800130=&response-content-

disposition=inline%3B+filename%3DA Comparison of Diabetes Education Admin.pdf&Expires=1595460036&Signature =KZMdMfeFrxuzElKxJkHTrbsMoov-vH2CmgTOTVogYUSwVtgvy5-U4aM7YfOm6DW9c-

GDqKMctxbEAmpbfq2gOoC0H0YSyf4kQ3BktMI5~MfroPxZjGXxTv6SNdUlH1q5SfBMu-80pVRI--

Dfzd6zIFVXuZkYbldyjMLAyseVIvdKo4M9JB6TSUSt7Ce42XL6oc8rBv1uf5C2w6gpSnM6NIxApFzS7RxKu6KEDaRLE3Kqw-

WcZRYvtJV0neefwA &Key-Pair-Id=APKAJLOHF5GGSLRBV4ZA