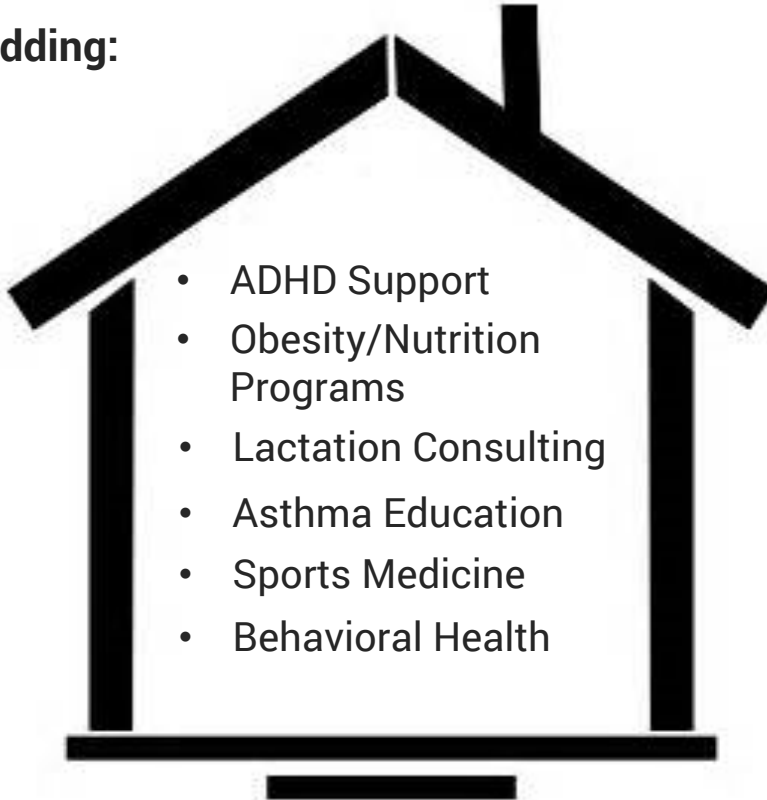


PCC UC 2020

How To Add New Lines of Services & Businesses To Your Pediatric Practice

Developing New Lines of Services and Businesses

Consider Adding:





DEVELOPING NEW SERVICES



Developing New Services

Create 'Clinics' within your practice to meet your patients' needs:

- Asthma clinics
 - Nutrition clinics
 - Adolescent clinics
- Provides excellent marketing opportunities and helps with scheduling

Developing New Services: Asthma

What others are doing

- Asthma clinics
 - Certified Asthma Educator to assist with treatment, education and management of asthma and asthma related diseases including
 - Medication monitoring and compliance;
 - Asthma control and action plan
 - Spirometry and nebulizer treatments
 - Patient centered goals and objectives related to control of the disease

Sample Asthma Plans



Asthma Action Plan

Green Zone: Well

- No signs of asthma
- Able to do normal activities
- No problems while sleeping

• Peak flow above: _____
(80-100% of best)

*Rinse mouth after this medicine



Give these medicines every day:

MEDICINE:	HOW MUCH:	WHEN:
_____	_____	_____
_____	_____	_____
_____	_____	_____

Yellow Zone: Watch Out!

Early Signs of Asthma:

- Cold symptoms
- Coughing day or night
- Wheezing day or night
- Funny feeling in chest

• My first sign: _____

• Peak flow: _____
(50-80% of best)



First — give:

■ Albuterol _____ 2-4 puffs or 1 nebulizer _____ 1-3 times in first hour

■ Call your Doctor or Nurse if not in Green Zone after first hour.

Next — if asthma is better after first hour, you may give:

■ Albuterol _____ 2-4 puffs or 1 nebulizer _____ every 4 hours as needed

Call your Doctor or Nurse if:

- Albuterol needed more often than every 4 hours.
- Albuterol needed every 4 hours for more than 1 day.

Keep taking other Green Zone medicines.

Red Zone: EMERGENCY!

Late Signs of Asthma:

- Tight chest
- Breathing hard or fast
- Using neck or stomach muscles to breathe
- Constant coughing
- Trouble talking or walking
- Vomiting
- Lips or nails blue

• Peak flow below: _____
(Below 50% of best)



First — give NOW:

■ Albuterol _____ 6 puffs or 1 nebulizer

■ AND call your Doctor or Nurse.

Next — if you cannot reach your Doctor or Nurse immediately, give:

■ Albuterol _____ 6 puffs or 1 nebulizer

(oral steroid)

■ AND go to the nearest emergency room or call 911.

Patient/Parent/Guardian Signature _____

Date _____

RN/MD Signature _____

Date _____

Phone number of Doctor or Nurse:

Day: _____

Night: _____

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Pick and choose from various resources, and customize to fit your needs!

Asthma Action Plan from Children's Hospital, St. Louis

Easy for parents to follow, pictures that even the youngest child can recognize.

<http://www.stlouischildrens.org/our-services/allergy-immunology-and-pulmonary-medicine/asthma-education>

Developing New Services: Nutrition

What others are doing:

- Nutrition clinics
 - On-site nutritional health evaluation by independently contracted counselor
 - Treatment and counseling services for individuals, families and groups
 - Tie in with community based weight ins and 'weight watcher' program at the local YMCA
 - Schedule alongside well visits

Nutrition Example

How about an 8 month visit or a 21 month visit with the nurse to teach proper nutrition habits?

Calculate by forecasting:

- You have three hundred 8 month olds a year
- Nurse payment at \$50.00
- Don't forget the cost of your nurse!

$300 \times 20 \text{ minutes} = 100 \text{ hours} \times \text{nurse salary } (\$25/\text{hr}) = \$2,500$

$\$15,000 - \$2,500 = \$12,500 \text{ net profit}$

Example: Nutrition Program

Example:

www.LetsGo.org

Combating Pediatric Obesity

- Encourages use of their materials
- Allows co-branding of materials and customization

Child Care
Health Care
Out-of-School
K-5 School
Middle/High School
Workplace

Let's Go! Toolkits

We've created toolkits for each program area. These toolkits are loaded with information on how to integrate Let's Go's evidence based strategies and the 5-2-1-0 message into specific environments (schools, out-of-school, child care, health care and workplaces).

If you live within the state of Maine and are interested in ordering hard copies of our toolkits, please [contact your local partner](#). If you are out of Maine, please visit our [online store](#).

Program Toolkits:

- K-5
- Middle and High School
- Out-of-School
- Child Care
- Health Care
- Healthy Workplaces

Bilingual Handouts

Below are individual toolkit pages that are especially helpful as printed handouts. We've included both English and Spanish versions:

5-2-1-0 Let's Go!

Let's Go! is a nationally recognized childhood obesity prevention program implemented throughout Maine and in a few communities in neighboring states. We partner with schools, child care and out-of-school programs, healthcare practices and community organizations to change environments where children and families live, learn work and play. We developed 5-2-1-0 as the foundation for change..

- 5** or more fruits & vegetables
- 2** hours or less recreational screen time*
- 1** hour or more of physical activity
- 0** sugary drinks, more water

*Keep TV/Computer out of the bedroom. No screen time under the age of 2.

The screenshot shows the Let's Go! website. At the top is a green header with the '5 2 1 0 LET'S GO!' logo. Below the header is a navigation bar with links: PROGRAMS, TOOLKITS, GET INVOLVED, PARTNERS, and ABOUT. The main content area features a large image of a young girl with braids eating an orange. To the right of the image, the text reads '5 fruits and veggies' in a large font, followed by 'Healthy foods at meals, snacks and celebrations make for healthy children.' and 'Learn more healthy tips for your family.' At the bottom right is a red button that says 'LEARN MORE'.

Developing New Services: Adolescents

What others are doing:

- Adolescent clinics
 - Specific hours for teens (certain days & hours)
 - Specified exam rooms for teens that are age appropriate (not 'kiddie')
 - Teen education programs playing in waiting room
 - Greater emphasis on teen screens and services
- Adolescent Well Visits including depression and substance abuse screening, may be a new metric coming to Payer plans soon

Parent Education



Parent Education Programs

- Grant Funded: putting educational grants to work to build community
- Sponsored: local businesses, insurance companies, self-funded employers
- Event Charge: parents / community pay to attend



Telemedicine

Yesterday, Today, Tomorrow

- Yesterday: Big box providers and little coverage for in-network providers
- Today: Payers covering well and sick visits, waiving cost sharing
- Tomorrow: Will Payers continue to pay? Patients want convenience



DEVELOPING NEW BUSINESSES



Developing New Businesses

Develop Entirely New Business Lines

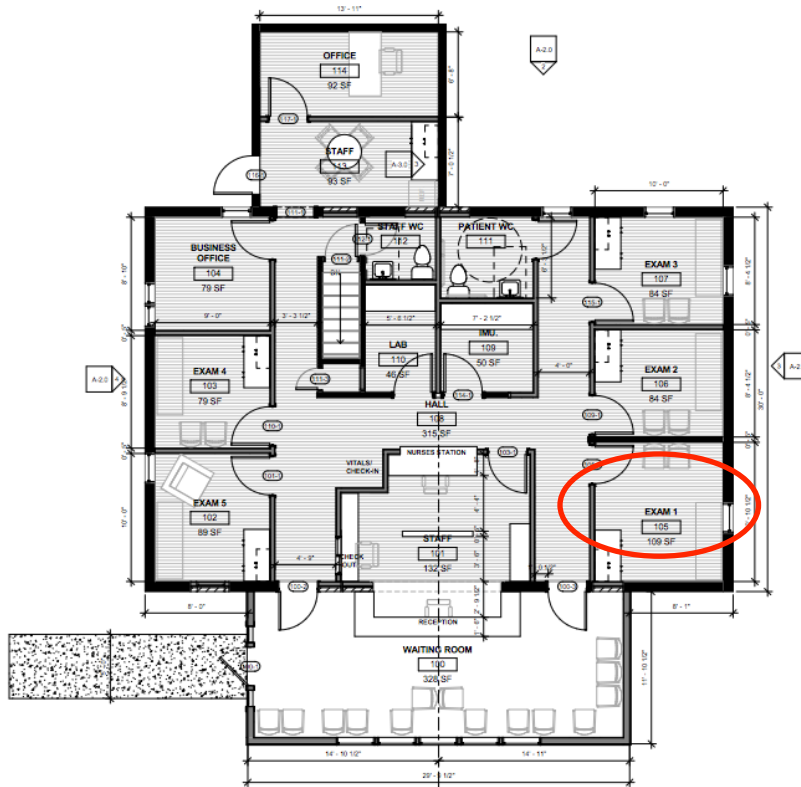
- Lactation / Breastfeeding Center
 - Behavioral / Social Health Center
 - Urgent Care / After Hours Clinic
-
- Bringing services in-house either through direct employee contributions or through sub-contracted professionals, extends your reach in the market.
 - These can be developed as extensively as you like, with their own tax ID numbers and 'brand', or less extensively as a business within your practice that is financially separate

Developing New Businesses: Lactation

Lactation / Breastfeeding Center

- Can reside within your pediatric practice footprint or as a separate area altogether
- Some practices designate 2 exams rooms and design as newborn & nursing rooms
- Schedule consultations alongside the newborn visit and / or the 1 month for patient convenience
- Utilize a trained employee or contract with an independent agent
- Great practice builder and new Moms love the newborn / nursing rooms

EXAMPLE: Even a small practice can be a BF center!



- Add a lazy-e-boy
- Add a Boppy
- Add a baby scale
- Add a mobile
- Newborns get seen by doc, LC sees Mom for BF consult

Becomes the 'newborn / BF room!

Developing New Businesses: BH

Behavioral Health: What Others Are Doing

- Usually resides within pediatric practice footprint
- Staff it with an employee (if practice population supports it) or contract with an independent agent or lease space to therapist / social worker who is building their practice
- Usually defined hours, practice staff manages schedule and can set up appointments without patient having to arrange separately
- Allows for better care, coordination, access
- Even just start with an ADHD program and a qualified / trained nurse

ADHD Program Tools

The Children's Hospital of Philadelphia Center for Management of ADHD Health Resources

Videos

Executive Functioning and ADHD

A CHOP psychologist discusses executive functioning in children with ADHD, and provides practical tips for parents.

Helping Teens with ADHD Succeed after High School

This video focuses on the transition to adulthood for teens with ADHD, presented by J. Russell Ramsay, PhD, co-director of the Adult ADHD Treatment and Research Program at the Hospital of the University of Pennsylvania.

Helping Your Adolescent With ADHD Succeed

Psychologists from The Children's Hospital of Philadelphia discuss ADHD in the context of adolescence, and suggest strategies to help your teen with ADHD.

Helping Your Child with ADHD Succeed at Home

Dr. **Stephen L. Soffer, PhD**, psychologist in the Center for Management of ADHD at The Children's Hospital of Philadelphia, discusses interventions and treatment options to help children with ADHD succeed in the home environment.

Helping Your Child With ADHD Succeed at School

CHOP psychologists describe the role of parent-school collaboration in success of students with ADHD, and present practical school- and home-based behavior management strategies.

Helping Your Child With ADHD Succeed Socially

A psychologist from The Children's Hospital of Philadelphia discusses the effect of ADHD on peer relationships and ways to help your child improve his social skills and make and keep friends.

Preparing Your Teen with ADHD for Safe Driving

This video discusses the impact of ADHD on teen behavior as it relates to driving and provides strategies for promoting safe driving in teens with ADHD.

For Parents and Caregivers

How to Increase Success at Home for Children With ADHD

As a parent of a child with, you will often need to be the manager of the team that helps your child succeed. Find out how you can help.

<http://www.chop.edu/centers-programs/center-management-adhd/health-resources#.V4BM-o3Hz4g>

Developing New Businesses: UC

Urgent Care Center: What Others Are Doing

- Typically is a separate building, or has a separate entrance to main practice
- Staff with existing providers and staff
- Close practice at 5pm, all after hours care provided at the UC
- Network with small practices to be their preferred referral choice when they are closed (by providing excellent follow up and pass back)
- Compete directly with retail-based clinics
- Many Payers offer separate contracts for UC, **but note: higher copays for patients is likely!**

Developing New Businesses: UC

Partnership vs. Competition

Partner

- Smaller practices have partnered with UCs to serve their patients after hours
 - Promotes better care through collaboration and education
 - Allows for expeditious exchange of information between two parties
 - Helps fill the gap of needing to provide after hour services to patients

Competitor

- Competing with medical home that offers extra hours
- Creating fragmentation of care and higher costs
- Patients go to most convenient point-of-care
- Eroding value of medical homes providing after hours care

Developing New Businesses: UC

Compete

- UCs are now more concerned about medical homes competing with THEIR business
- UC model is about convenience and access, they have added immunizations and are looking to diversify further
- They tout themselves as 'one stop'; pediatrics must show how networks help to coordinate any additional care needed
- Differentiating on customer service; we must improve customer service within our practices
- Looking to partner with PCPs; do you joint-venture or compete?

Do Your Research Before Undertaking

Ask your patients what they need! You have a captive audience of 100s of patients every week / month coming to your practice – hand them a short survey and ask for their feedback!

Do your market research too:

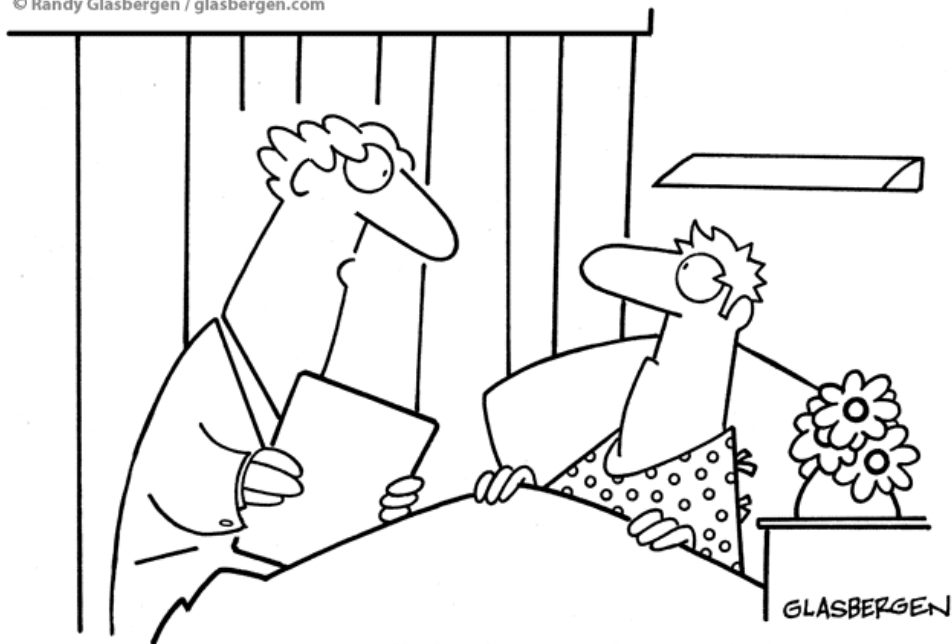
- Number of annual births (www.cdc.gov/nchs/fastats/births.htm)
- City demographics (citydata.com – it's free)
- Distance to competitors (plot via www.easymapmaker.com of similar free software)
- Competitor offerings (check out their websites)



UTILIZING PAYER RESOURCES



© Randy Glasbergen / glasbergen.com



"You're suffering from a serious medical condition called 'lousy insurance'."

Example Resources

Aetna has a Behavioral Health program and a step by step checklist to help you integrate this into your practice.

Aetna Integrated Primary Care Behavioral Health Program

The Aetna Integrated Primary Care Behavioral Health Program offers a collaborative approach that allows the direct provision of behavioral health services to our members in the primary care setting.

When implementing an integrated approach in your primary care practice, consider the following:

○ Lease agreement

- Necessity of lease agreement between primary care physician (PCP) practice and behavioral health clinician/practice

○ Location where the behavioral health clinician will see patients

- Available exam room
- Unoccupied office or room

○ Times when room will be available for the behavioral health clinician to see patients

- Set day(s) and time(s) of the week
- Increase/decrease allotted time, depending on patient volume

○ Workflow to confirm patient insurance coverage

- Aetna medical — for services provided by the physician
- Aetna Behavioral Health — for services provided by the behavioral health clinician
 - > Behavioral health clinicians submit their own claims for services provided in the PCP practice, and are reimbursed from the behavioral health benefit

- Non-Aetna coverage

- > Explore available options for behavioral health clinicians to provide services for patients with other insurance coverage

○ Workflow for physician to refer patients to the behavioral health clinician

- Designated contact person in PCP and behavioral health practices to send/receive referrals
- Use of a referral form

○ Scheduling appointments

- Behavioral health or PCP practice to verify patient's behavioral health benefits
- Behavioral health or PCP practice to contact patient and schedule appointment

○ Charting and confidentiality

- Behavioral health clinician's access to the medical record
- Obtaining a patient release

○ Behavioral health clinician reports

- Designated contact person in PCP and behavioral health practices to send/receive written reports about behavioral health intervention

Example Resources

How the program works



You refer patients, as clinically indicated, to the behavioral health clinician.

The clinician sees patients within the primary care setting, using a problem-solution focus.



The clinician communicates regularly with you, providing written reports about patients' progress and interventions.

Billing guidelines

Behavioral health clinicians (licensed psychologists, either master's- or PhD-level; licensed social workers, master's-level minimum; or licensed professional counselors, master's-level minimum): If you deliver behavioral health services in primary care offices, you may submit claims to us using the following codes:

Diagnosis code: F48.9 (Nonpsychotic mental disorder, unspecified)

Procedure code: 90834 (Psychotherapy with patient — 45 minutes)

You can submit claims using your behavioral health office address and provider ID number/tax ID number. We'll reimburse you out of the behavioral health benefit, as outlined in your agreement.

90834 = 2.938 RVUs
(\$106.02 CMS National 2020)

Example Resources



ConditionCare

About the Program

A team of nurses with added support from other health professionals – such as dietitians, pharmacists and health educators – work with members to help them understand their condition(s), their physician's orders and how to become a better self-manager of their condition. Members are stratified into three different risk levels.

Engagement methods vary by risk level but may include:

- **Education** about their condition through mailings, telephonic outreach, and/or online tools and resources.
- **Round-the-clock phone access** to registered nurses.
- **Guidance and support** from nurse coaches and other health professionals.

Physician benefits:

- **Saves time** for the physician and staff by answering patient questions and responding to concerns, freeing up valuable time for the physicians and their staffs.
- **Helps support the physician-patient relationship** by encouraging participants to follow their physician's treatment plan and recommendations.
- **Provides** the physician with updates and reports on the patient's progress in the program.

Nurse coaches encourage participants to follow their physician's plan of care; not to offer separate medical advice. In order to help ensure that our service complements the physician's instructions, we collaborate with the treating physician to understand the member's plan of care and educate the member on options for their treatment plan. Providers may receive a quarterly report for patients who are currently enrolled in the program including the member's current educational goals.

Example Resources

Humana case management and chronic care programs

Overview of programs

Members who choose to enroll in a Humana case management or chronic care program are assigned a care manager who supports them by phone (eligible members also receive home visits). The manager's goal is to anticipate members' needs and problems, encourage preventive care and prevent costly interventions through home-safety assessments and evaluations of medical, functional and psychosocial status.

Services may include:

- Facilitating conference calls between the member, the physician and the care manager as needed to clarify treatment plans, medication regimens or other urgent issues.
- Monitoring medication adherence.
- Assessing the member's daily living activities and cognitive, behavioral and social support.
- Assessing the member's risk for falls and providing fall-prevention education.
- Connecting members and their families with professionals who can help them address medical, legal, housing, insurance and financial issues facing older adults.
- Helping caregivers access support and respite care.
- Arranging access to transportation.
- Assisting members in obtaining home health and durable medical equipment.
- Referring members to meal-delivery programs and advance directive preparation services.

Example Resources



24 Hour Nurse Line *Oxford On-Call®*

When you're worried about someone you love at 2 a.m., you want to talk to someone who can help. That's exactly what you get with *Oxford On-Call*. 24 hours a day, 365 days a year, you can speak with an informed, registered nurse who is available to offer suggestions and guide you to the most appropriate source of care.

Oxford On-Call nurses can:

- Identify caller symptoms and recommend next steps using one of the most advanced patient assessment systems available.
- Pose a series of questions derived from clinically tested algorithms.
- Recommend a visit to an emergency room, suggest an appointment with a physician, or suggest how to care for a problem at home.
- Refer Members directly to specialists when medically appropriate.
- Make follow-up calls to promote continuity of care.
- Keep primary care physicians informed by faxing call records.

If you are a Member and you need to reach *Oxford On-Call*, please call 800-201-4911.



Patient's should call you first....but sometimes they don't. Keep actively engaged with the Nurse Line for continued communication about your patient!

Example Resources



Tools to
combat
childhood
obesity

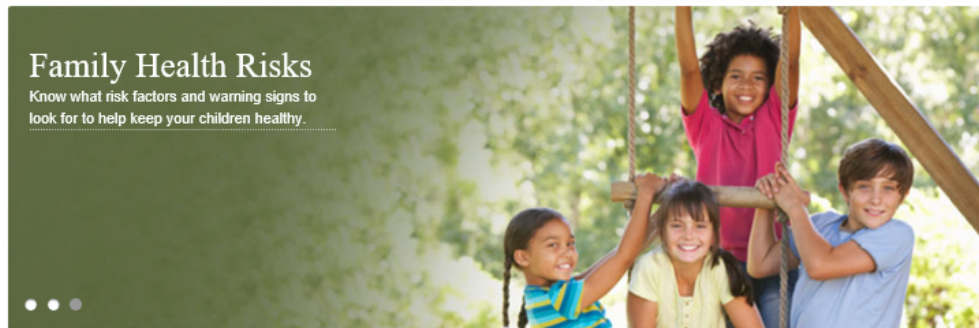
For Families

- Healthy Eating
- Weight Assessment Tools
- Programs and Rewards
- Tips For Parents
- Wellness Support
- Recipe Box
- For Adults
- For Seniors
- For Families**
- Healthier Generation Benefit
- Fitness Activities
- Weight Management
- Health Risks
- CaféWell™
- What Is Your Child's BMI?

RESIZE TEXT SHARE PAGE

Family Health Risks

Know what risk factors and warning signs to look for to help keep your children healthy.



Make Healthy Decisions for the Entire Family with Weigh 2 BeSM

Healthy living can start at any age. Learn ways to protect your family's health and help them feel their best.

Healthier Generation Benefit

The Alliance for a Healthier Generation is an initiative to address the obesity epidemic in young people.

Fitness Activities

Use these ideas and programs to keep your children active.

- [Get Moving](#)
- [Free Classes](#)
- [Let's Move!](#)

Weight Management

Use these resources to talk about obesity, healthy eating, and healthy body image with your children.


- [Feeding Your Child Using Division of Responsibility](#)
- [Genetic Influences on Weight](#)
- [Evaluating Nutrition and Activity](#)

FUNDING

Always check to see if there are any grants available to help get a new program off the ground.

Example:

<http://www2.aap.org/commpeps/grantsdatabase/>



*“The best way to cope with
change is to help create it.”*

Q & A

Contact Information

The Verden Group, Inc.
www.TheVerdenGroup.com

Patient Centered Solutions
www.ncqasolutions.com

Independent Practice MSO
www.ipmso.org

Susanne Madden, CEO
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