



PRACTICE SPOTLIGHT



# MAHEC Utilizes PCSP to Improve Quality of OB/GYN Care

# Background

Mountain Area Health Education Center (MAHEC) is a nonprofit organization in Asheville, North Carolina, that comprises an OB/GYN group practice, a family medicine group practice, 5 satellite family medicine locations and 2 dental offices. MAHEC is a high-risk referral destination for 16 counties and sees about 120 patients every day. About 150 patients a month are new obstetrics patients. The OB/GYN practice has a staff of 40 providers: maternal-fetal medicine physicians, OB/GYN physicians, nurse-midwives, nurse practitioners and 35 clinical support staff.

## ACTIONS

In 2016, MAHEC OB/GYN Specialists decided to pursue National Committee for Quality Assurance (NCQA) Patient-Centered Specialty Practice (PCSP) Recognition. An important factor in the decision to pursue PCSP recognition was that it provides support for quality improvement initiatives critical to value-based care. In addition to quality improvement, another motivator was the potential for increased reimbursement from Blue Cross of North Carolina, under its Blue Cross Quality Provider Program, which required NCQA PCSP Recognition in order to participate. This incentive represented a significant increase in additional annual revenue.

*“Being able to introduce quality improvement to the practice by means of rapid PDSA cycles (which are encouraged in the quality improvement aspect of the medical home model) and really starting to look at the data, has changed things for this practice,” said Jenie Edwards-Abbotts, RN, Clinical Director for MAHEC OB/GYN Specialists, who headed up the quality improvement initiative. “It also allows us to ‘officially’ get credit for the high-quality, patient-centered care that we provide and offers a good framework for the care that people want to receive.”*

### Focus on Quality

As part of the PCSP transformation process, MAHEC formed a robust quality improvement team that meets twice a month to look at data trends. The team reports a standard set of data measurements monthly, but also looks at external data to ensure patient and provider satisfaction and to improve quality of care. A team approach is critical to overall practice improvement, and this multidisciplinary team of staff carves out time to work on quality initiatives.

*“Every six months, the team looks at what’s trending in the community and reviews other initiatives that are occurring. Do we need to change the measures? Do we need to increase our benchmarks or performance? We then decide as a team what needs to be modified,” said Edwards-Abbotts.*

MAHEC started the process with traditional measures such as breast cancer screening, cervical cancer screening and 17P administration. It also measures patient experience and access, and looks at how soon pregnant mothers start prenatal care and how many patients have a postpartum visit.

### Implementation of Care Teams

One PCSP recognition concept area is team-based care. Earning recognition introduced consistency to the practice’s daily routine—the same providers and support staff work together as a care team. This helped increase efficiency and has improved provider, staff and patient satisfaction.

## **i** PCSP recognition enabled MAHEC to see 1,800 additional patients per year.

"The biggest benefit of the program is that we were able to implement workflows and processes that might not have been implemented without PCSP. Transitioning a clinic of 40 providers to care teams was no easy feat, but it went unquestioned because it was backed by PCSP," says Edwards-Abbotts. "The things that I wanted to implement here, I was able to do because it aligned perfectly with PCSP. It gave me the backing to do what I felt should be done in transitioning to quality care."

### **Referral Tracking: The Key to Timely Patient Follow-Up**

PCSP recognition has helped the practice improve its referral tracking process, ensuring timely patient follow-up.

*"PCSP reinforces all of the elements that we need to be monitoring and ensures that we get results in a timely manner. When those results need follow up, there is now prompt outreach to the patient and discussion on the next steps," Edwards-Abbotts says. "Now that there is a tracking and monitoring system in place, we know that patients aren't falling through the cracks and that there are no concerning mammogram studies, for example, sitting out there that nobody is addressing."*



Patient satisfaction  
survey score  
increased 5%

## **RESULTS**

### **Overall Improvement in Practice Processes**

A focus on quality measures has had a positive effect on MAHEC and its patients. One recent measure focused on the time it took staff to answer phone calls. Utilizing PDSA cycles, the practice modified its phone tree, changing the number of options for patients from 7 to 4, reducing the time it took to answer calls and make routing more accurate. The result was a decrease in calls to their triage nurses by 3,658 over a 5-month period. Patient wait times went from 2.25 minutes to 1.46 minutes.

Access, another program concept of PCSP, is reviewed continually. MAHEC recently implemented nurse clinics to help reduce patient wait times and improve access. Going through the recognition process has enabled MAHEC to see more patients—more than 1,800 more in one year.

*"The implementation of care teams has made big improvements in how we provide patient care. It's nice because you start to be able to anticipate the provider's needs, and the communication and rapport is established, so you really start developing these great dynamics, and the patients feel it too," said Edwards-Abbotts.*

Before implementing care teams, 76% of patients responding to a survey (November 2015–July 2016) responded that they "always" recommend MAHEC to a family member or friend. After implementation, in a survey fielded from November 2017–March 2017, 81% responded "always" to the question. "We've received several comments from satisfaction surveys about how patients appreciated the teamwork," says Edwards-Abbotts. "Another surprising benefit of moving to a care team approach has been a significant decrease in overtime. Overtime has been reduced down to \$2,200 per pay period from the \$4,500 per pay period prior to implementation."

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### Increase in Patient Satisfaction

Before, during and after earning recognition, Edwards-Abbotts looked at MAHEC's Centering Pregnancy® program, which allows patients to receive prenatal care in a group setting with the same provider. Patients in the program typically spend 12 times more time with their provider than patients in traditional care. The increased face time and patient engagement has been shown to improve outcomes, including a reduction of occurrences of low birthweight and increased breastfeeding, while also improving patient and provider satisfaction.

*“This program embodies the patient-centered spirit and we knew we wanted to extend this offering to more of our moms,” says Edwards-Abbotts. “PCSP helped MAHEC transition Centering Pregnancy® to be our standard of care.”*

Before recognition, the program enrolled an average of 20 patients a month. Enrollment now exceeds 50 patients a month.

## RESULTS

### EXPERIENCED INCREASES IN:

- Payer reimbursement.
- Annual patient volume.
- Patient satisfaction scores.

### PRACTICE IMPROVEMENTS:

- Care quality.
- Reduced costs and utilization.
- Process efficiency.

### Shared Decision-Making Tools Increase Patient Understanding

PCSP recognition stresses utilization of shared decision-making tools. Edwards-Abbotts' team created two that are currently in use. One addresses abnormal uterine bleeding, the other addresses genetic screening. They give providers an informational tool that can help patients decide what's best for them.

Edwards-Abbotts says, “Both tools help the patient understand a little bit more of what the provider is saying. It provides a visual and it's something that they can go over together.” Since the introduction of these tools, MAHEC has seen an increase in the number of “always” responses from patients—to 85%, from 78%—when asked if staff and providers explain things in a way they can easily understand.

### A Focus on Patient-Centered Care

PCSP recognition encourages patient outreach and pre-visit preparation. MAHEC contacts new OB patients ahead of their first appointment to get patient information, prepare for the visit and minimize the time the patient is in the office. This has made the intake process more efficient and has improved patient access.

PCSP also helped MAHEC ensure that the pieces were in place for Project CARA, a program for pregnant women with substance use issues. Providers from across western North Carolina refer patients to this multi-disciplinary team that includes integrated behavioral health, community substance use treatment representatives, and neonatal abstinence education specialists from the hospital. The goal of this program is to decrease access barriers by providing a clinic with multiple agencies represented during the obstetrical visit. Edwards-Abbotts feels that Project CARA epitomizes patient-centered care.

### PCSP Recognition Encourages Continuous Improvement

Edwards-Abbotts says NCQA PCSP Recognition had a great impact on MAHEC. “I have been at MAHEC for three years now and I think continuous improvement is now part of our language. PCSP recognition has helped us enhance our quality initiatives. We're becoming much more aware of what being patient-centered means.”