

Dravidar Nama

Patient Centered Medical Home SoonerCare Choice Application Entry Level

rioviuei Naine.		
Provider ID:	NPI:	
Address:		
Practice Type:		(i.e., FP, Peds, GP, etc)
Medical Home requested pa	nel capacity:	
available to patients during a minin	available during your on-site practice which is defined as ha num of twenty (20) hours each	e visit. aving established appointment times a week. How many hours per week
are open for patient appointments? Approximate percent of Provider's		
SoonerCare members:	•	ent caring for patients that are
Provider agrees to the following:		

1. Provide all medically necessary primary and preventive services for panel members.

- 2. Provider organizes clinical data in a paper or electronic format as a patient-specific charting system for individual panel members. A patient-specific charting system is defined as charting tools that organize and document clinical information, such as the medical record: problem lists, medication list, etc., structured template for appropriate risk factors, structured templates for
- 3. Provider maintains medication list within the medical record and should be updated during each office visit. This medication list includes chronic, acute, over-the-counter medications, and herbal supplements; to include all prescribing instructions (i.e., dosage, method of administration, frequency, etc.).
- 4. Provider will maintain a step-by-step system to track the entire process for lab/diagnostic tests. This should include the process of follow-up on test results as well as patient reminders and notifications as needed. This tracking method can be via written logs/paper-based documents or

narrative progress notes.



- electronic reports. Provider must have <u>written policies and procedures</u> for this measure. The written policy and procedures should include the designated staff by position (*i.e.*, *nurse*, *medical assistant*, *clerk*, *etc.*) assigned to maintain and oversee this process.
- 5. Provider maintains a <u>step-by-step</u> system to track referrals including self-referrals communicated to provider by member. This should include the process of follow-up on consult notes and findings as well as to remind and notify patients to follow-up as needed. This tracking method can be via written logs/paper based documents or electronic reports. Provider notifies panel members when a specialty appointment is made by the PCP. Provider documents attempts to obtain a copy of the specialist provider's consult notes and findings. Provider must have <u>written policies and procedures</u> for this measure. The written policy and procedures should include the designated staff by position (*i.e.*, *nurse*, *medical assistant*, *clerk*, *etc.*) assigned to maintain and oversee this process.
- 6. Provider supplies Care Coordination for all SoonerCare members. This includes continuity of care through proactive contact with panel members and incorporates the family/support system with coordination of care. Provider will coordinate the delivery of primary care services with any specialist, case manager, and community-based entity involved with the patient (e.g., WIC, and Children's First program, home health, hospice, DME, etc.) This includes but is not limited to: referrals, lab/diagnostic testing, preventive services and behavioral health screening.
- 7. Provider supplies patient/family education and support utilizing varying forms of educational materials appropriate for individual patient needs/medical conditions to improve understanding of the medical care provided and plan of treatment. An example would include patient education handouts. This education must be documented within the patient medical record.
- 8. Provider explains the expectations of a patient-centered medical home with the patient and obtains a patient and provider signature on the "Medical Home Agreement" form. The defined roles should be explained within the context of all of the joint principles which reflect a patient-centered medical home. This agreement is to be maintained within the patient's medical record. (An example of an approved Medical Home Agreement can be found on the OHCA website.)
- 9. Provider uses scheduling processes to promote continuity of care, through maintaining open appointment slots daily. Open scheduling is defined as the practice of having open appointments slots available in the morning and afternoon for same day/urgent care appointments. This does not include double-booking appointment times. Provider implements training and written triage procedures for the scheduling staff.
- 10. Provider supplies voice-to-voice telephone coverage to panel members 24 hours a day, seven days a week. This must provide an opportunity for the patient to speak directly with a licensed health care professional. The number to call should connect to a person or message which can be returned within thirty minutes. All calls are triaged and forwarded to the PCP or on-call provider when necessary. This coverage includes after office hours and weekend/vacation coverage. Provider maintains a formal professional agreement with the on-call PCP or provider and notification is shared relating to panel members' needs and issues.



five years of age and above. Behavioral of screening tools the provider will coor	f intervention, and referral to treatment for members screening is an annual requirement. Through the used dinate treatment for members with positive screens with mbers with mental health and/or alcohol or substance
Name and position of person completing	g this form
Contact Telephone Number	Date Completed
Email Address	
Signature of Medical Director or Soone	erCare Choice Provider