# FROM THE PRESIDENT'S DESK



# One Step Ahead: ACOFP Looking Out for Its Members

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### **CONCERNS ON POPULATION MANAGEMENT**

Several months ago, I wrote about the passage of HR-2, *The Medicare Access and CHIP Reauthorization Act of 2015*, which repealed the deeply flawed Medicare sustainable growth rate formula.<sup>1</sup> In the months since the enactment of HR-2, the Center for Medicare and Medicaid Services, has been in dialog with physician organizations including the ACOFP regarding how to design the new payment systems authorized by the bill.

It is clear from both the MACRA law and the questions asked by CMS that the new payment systems being developed envisions family physicians and other primary care providers taking on significant responsibility for population management. Therein lies the rub; very few of us have had any training in population management. It certainly was not taught when I was in medical school or in residency. Population management has only recently been added to osteopathic medical school curriculum<sup>2</sup> and it still isn't part of the ACOFP family medicine residency standards.<sup>3</sup>

So what's a practicing family physician to do? Many of us are still struggling to implement electronic health records, keep up with CMS meaningful use requirements, make sure we submit our CMS Physician Quality Reporting data, see the volume of patients our employers expect, and provide the high quality care we know our patients deserve. One more thing on our plate is not what we were looking for.

What we need is a tool to help us integrate population management into our practices; to turn the hype of EHRs into reality. We need help learning how to adapt our practices to function in this new payment environment and we need to do it without breaking the bank or taking more time away from patient care.

# THE ANSWER

The ACOFP has the answer. The good news; it may be FREE.

The ACOFP has partnered with Symphony Performance Health Analytics (SPHA) and the Consortium for Southeastern Hypertension Control (COSEHC) to provide our members with the tools and services they need to thrive in the coming payment environment.

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COSEHC is a 501c3 founded in 1992 with the goal to improve global risk factor management to reduce vascular disease and its related morbidity and mortality. To achieve this, COSEHC strategies are:

- Define effective healthcare delivery models,
- Use EMRs to improve care delivery and track performance
- Translate science to clinical application,
- Disseminate and implement evidence-based guidelines
- Develop partnerships with healthcare groups,
- Improve healthcare access,
- Develop population strategies
- Promote patient education and healthcare literacy<sup>4</sup>

COSECH was the recipient of a CMS grant to provide the tools and assistance primary care practices need to effectively adopt and implement population health management. Both COSECH and ACOFP had prior relationships with SPHA; ACOFP for our Quality Markers program and COSECH for their own data analytics product.

## **QUALIFICATIONS**

Under our new partnership, ANY ACOFP member who is NOT participating in a Medicare Shared Savings ACO or a Pioneer ACO is eligible to receive our ACOFP Quality Markers program AND practice transformation services from COSECH at no charge. If you are in an office with other providers who are not ACOFP members, they can be included as well, as long as at least one ACOFP member is a part of the clinic staff and agrees to participate.

The ACOFP QM program can integrate with nearly any electronic medical record system. It is able to extract data directly from your EMR and collate and analyze the data in a way that is clinically meaningful to you. If you are attempting to achieve Patient Centered Medical Home certification, the National Committee for Quality Assurance, has prevalidated the use of QM, saving you time and money in the PCMH recognition process.<sup>5</sup>

If you would like to learn more about this opportunity to transform your practice and learn how to effectively use population management tools, visit the ACOFP website.

### **REFERENCES**

- de Regnier K. Physician Payment After SGR What's Next? Osteopathic Family Physician 2015;4:2
- Commission on Osteopathic College Accreditation, Accreditation of Colleges of Osteopathic Medicine: COM Accreditation Standards and Procedures, http://www.osteopathic.org/inside-aoa/accreditation/ predoctoral%20accreditation/Documents/COM-accreditationstandards-current.pdf, accessed January 30, 2016
- ACOFP, Basic Standards for Residency Training in Osteopathic Family Medicine and Manipulative Treatment http://www.acofp.org/ACOFPIMIS/ acofporg/PDFs/Program\_Directors/Basic\_Training\_Standards/FM/ Effective\_070115\_Basic\_Standards\_FM.pdf, accessed January 30, 2016
- Consortium for Southeastern Hypertension Control, About COSECH, http://www.cosehc.org/V2/AboutNew.aspx, accessed February 5, 2016
- National Committee for Quality Assurance, PCMH Prevalidation: Vendor Contact List, http://www.ncqa.org/Programs/Recognition/practices/ PatientCenteredMedicalHomePCMH/PCMHPrevalidationProgram/ VendorList.aspx, accessed February 5, 2015

