

## PRIMARY CARE MODERNIZATION

# Shared Medical Appointments

## ELECTIVE CAPABILITY

Shared Medical Appointments are a form of group visit for patients with similar medical conditions during which a clinical team provides physical exams and education about ways patients can help manage their own conditions such as lifestyle changes and how to use community resources to reduce barriers to care.

## HOW CARE WILL IMPROVE

### CONSUMERS CAN...

- Have routine, condition-specific check-ins at a convenient location and time of day
- Get support and coaching to help change health behaviors
- Talk regularly with others who have a similar medical condition and socio-economic backgrounds and learn from their experience
- Improve your knowledge about your medical condition
- Receive guidance in a preferred language
- Have a primary care team that helps with "real life," day-to-day challenges about a medical condition



### PRIMARY CARE TEAMS CAN...

- Help patients improve self-management through coaching, discussion, and peer-to-peer interactions
- Offer more convenient meeting times and locations compared to conventional appointments and potentially improve compliance for patients who do not otherwise keep appointments
- Offer supports and strategies to help patients overcome cultural barriers, health literacy challenges, and social isolation, which may hinder self-management.
- Build relationships with patients and help support engagement and commitment to lifestyle changes
  - Improve provider experience and practice efficiency by using expanded care team members prevention or condition related shared visits



## PATIENT EXPERIENCE IN PRIMARY CARE MODERNIZATION



Lenny arrived for a routine appointment to check his diabetes, weight and high blood pressure. He's busy and has had trouble keeping on track with exercise and diet. He has also missed some primary care check-ups.



Lenny's primary care provider suggested he try a shared visit at a community center near his home. Unsure whether he wanted to talk to others about his health, Lenny was reassured by the confidentiality agreements everyone signed.



At the evening meeting, after work and before kids' homework started, a medical assistant recorded Lenny's blood pressure and other vital signs in a private area. A health coach gave a short talk about building more exercise into daily routines.



Lenny and others in the group met to share suggestions and ideas that Lenny thought might work. When it was time for questions, Lenny asked for tips on how to eat at a family barbeque. After this meeting, Lenny attended regularly and with the group's support, achieved his goals.



## HOW



### Care Team and Network Requirements

- Develop protocols and analytic methods to identify patients who might benefit from peer group coaching and support
- Designate and train care team staff to perform initial health checks, collect and record information, provide health instruction and facilitate discussion.
- Designate and train support staff to recruit and confirm participants, coordinate transportation, provide materials, set up the room and organize supplies and equipment, if needed
- Establish policies regarding privacy and confidentiality for patient participants
- Develop or identify an appropriate curriculum and provide training for staff in education, teaming, and facilitation
- Establish a regular meeting time at a conveniently located, accessible private meeting place



### Health Information Technology Requirements

- Electronic Health Record configured to record patient vitals, notes and group-based encounters
- Accurate and up-to-date patient contact information to send invitations and meeting reminders

## MEASURING IMPACT

### ✓ Patient Experience

- Improved patient experience with respect to timely care, communication, coordination, provider support, discussing stress, and overall provider satisfaction

### ★ Quality

- Improved preventive care compliance (e.g., colonoscopy screening)
- Improved chronic illness outcomes (e.g., diabetes control)
- Improved care plan adherence
- Reduced preventable hospital admissions for ambulatory care sensitive conditions

### \$ Cost

- Potential reduction in out-of-pocket costs
- Reduced emergency department, urgent care and hospital utilization

### 🔑 Access

- Easier access to primary care support and peer resources

## IMPROVING HEALTH EQUITY

Patients with complex medical conditions feel brief office visits don't allow enough time to answer questions and support self-management. Patients may face social isolation, low health literacy, and cultural barriers that affect their ability to effectively access care and manage conditions. To reduce this disparity, primary care will change in the following ways:

- ✓ **Interactions with peers from own community** may reduce stigma, address cultural barriers, enable peer support and reduce social isolation
- ✓ **Care team supports** may include medical translators or others with cultural insight, such as community health workers
- ✓ **May reduce health literacy barriers** through discussion with questions and answers (rather than lectures)



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