Discussion Questions for Winter Sessions:

1. Getting access to timely information about hospital:
* How are you getting information about your patients being in the hospital?
* Are you getting it in a real-time/timely way?
* Are you only getting discharge information or are you also getting/acting on admits (i.e. reaching people while they’re still in the hospital)
* Are you getting this information from an HIO or from the MCOs or a combination?
* Is it complete/adequate?
* Does the way you get the information integrate easily with your workflow?
1. Doing effective outreach to patients for 7-day follow up
* How do you risk stratify the patients and prioritize patients for outreach?
	+ Specific populations?
	+ Specific diagnoses?
	+ Readmissions/frequent flyers?
* Where are you getting the data to be able to prioritize in this way?
* What are effective outreach methods - phone, text, letters?
* Do you try to reach people while they’re still in the hospital? How does that work?
* Who does this outreach on your team? Who is most effective in doing it?
* What has been most important in achieving successful outreach and driving metrics up?
1. Innovative strategies to complete follow-up visits
* How challenging is it to get people in within 7 days? Do you have ways to accommodate them in the schedule? What have you done that is innovative to make sure they can get in?
* How do you use nontraditional visits, like telehealth, nurse visits, home visits, etc. to do hospital follow-up?
* What kinds of patients are easier/harder to get in during this timeframe?
* Are you following Medicare TCM guidelines and billing these visits accordingly when patients are Medicare? What are the challenges with applying this workflow more broadly to all your patients?
1. Non-engaged patients
* Are you aware of the full roster of patients assigned to you by all the Medicaid plans you work with?
* Are you receiving notifications about these individuals’ hospital use?
* Do you do outreach to non-engaged, but assigned, patients?
* How well does this outreach work? Do you find that people are interested in getting engaged in care after a hospitalization?
* Is this outreach done differently than outreach to engaged patients?
* How do you manage doing a hospital follow up visit when you have never seen the patient for routine care?