New care management platform to prepare CCNC for 2020 and beyond

CCNC has signed a 5-year contract with VirtualHealth to implement a new care management platform incorporating technology and value-based care for its program’s 1.7 million current Medicaid members and anticipated Medicare Advantage enrollees.

The new program will offer a user-friendly design and improved features, including a patient portal for patients to interact directly with physicians and care managers.

“We are energized and ready to move forward in this new partnership,” Jamie Philyaw, vice president for care management at CCNC. “With the VirtualHealth platform, we can improve outcomes while optimizing use of integrated care management technology. This will help us move more quickly to identify opportunities to improve care and address the social determinants of health that are significant factors for our populations.”

CCNC’s clinical systems upgrade is slated for an initial implementation of October.


DHHS looks to CCNC reports as model on evaluating physicians

CCNC's physician feedback reports were cited in a recent study by the U.S. Department of Health and Human Services' Agency for Healthcare Research and Quality (AHRQ), serving as a model for other report developers because of their evidence-based design features that promote physician engagement, performance awareness, and ultimately, performance improvement.

Building a physician feedback report that results in improved physician performance involves revamping existing reports to include evidence-based design features and clearer metrics, AHRQ said in the article.


CCPN enrollment grows 51% in 2017

The state's largest independent physician network, Community Care Physician Network (CCPN), has grown to 2,167 members in 667 practices in North Carolina, a 51 percent increase in just the last year. CCPN is a clinically integrated network of independent physicians that provides local practices with the support they need to ensure they can be strong players in healthcare reform efforts.

"Independent practices are the backbone of primary care in North Carolina," said Gregory L. Adams, MD, FAAP, a member of the CCPN Board of Managers and a pediatrician with Blue Ridge Pediatric and Adolescent Medicine in Boone, North Carolina. "This is particularly true for Medicaid patients and residents of rural areas. CCPN is a vehicle for strengthening these vital practices and ensuring access to care beyond the local emergency department. I am proud to be among the physician leaders who are charting a course for the future of healthcare in North Carolina."

Close to 80% of CCPN practices have five or fewer clinicians and 30% of those are solo practices. Like-minded peer physicians in CCPN's network across NC come together share accountability and rewards for hitting quality targets.

"Through CCPN, independent providers will be positioned to survive and thrive, keeping access to primary care strong," said L. Allen Dobson, Jr., MD, Chairman of the CCPN Board of Managers and president and CEO of CCNC. "CCPN's partnerships with health plans will help preserve North Carolina's unique primary care infrastructure, including community-based care managers and effective, long-standing relationships between physicians, hospitals, public health, and community organizations."

CCPN's population management infrastructure is supported by Community Care of North Carolina, a close partner with CCPN. This includes provider services, care management, data analysis, and quality reporting efforts required in new payment and delivery models with plans and payers.

Click here to view the press release

or go to: http://bit.ly/ccpn-51-percent
CCNC efforts to improve pediatric oral health detailed in NC Medical Journal

The latest North Carolina Medical Journal issue features an article written by Kern Eason, program manager at CCNC, and Dr. Marian Earls, deputy chief medical officer at CCNC, on the unique path of integrating oral health into pediatric primary care visits in North Carolina.

In the article, Eason & Dr. Earls discuss how the “Into the Mouths of Babes” program, which coordinates statewide efforts to improve the oral health of children, leverages CCNC’s local network presence to promote the adoption of clinical guidelines for pediatric preventive oral health care for young populations.

Training implemented under CHIPRA has led to an increase in access to preventive oral health services and a decrease in dental caries related treatments, Eason writes.

Learn about CCNC’s continuing efforts to improve communication between primary care doctors and dentists in “A Commentary of Pediatric Oral Health in North Carolina,” available now.

Click here to register or go to: http://bit.ly/ccpn-clinician-conference

Trygstad leads panel working to improve diabetes care

CCNC’s Troy Trygstad (center), vice president pharmacy provider partnerships, moderates the Pharmacy Times panel, “Broad Impact of Metabolic Syndrome,” where speakers explore the value of the pharmacist in improving team-based diabetes care and discuss opportunities for better collaboration among health care team members.

Read the transcript

Watch the video

CCPN 2nd annual clinician conference

Registration for CCPN’s Second Annual Clinician Conference is now open! Conference registration is open to CCPN clinicians (MDs, PAs, NPs, psychologists). Conference topics will include payment reform, quality improvement, and CCPN services. Please contact Jessica Whelan at jwhelan@ncaccesscare.org with any questions.

New CCNC website coming soon

Later this month, CCNC will launch a new, redesigned public site at www.communitycarenc.org.
CCNC recognized nationally for its approach to maternal mortality

In an article by The Huffington Post, CCNC’s Pregnancy Medical Home model is recognized for its innovative approach to improving North Carolina’s maternal mortality rates, which is currently one of the highest in the United States.

Jeffery Rakover, senior researcher at the Institute for Healthcare Improvement, calls North Carolina a leader in the pregnancy medical home model and said CCNC’s “well-defined and rigorous” program will likely become a model for other states.

Although a number of states have pregnancy medical homes in place, North Carolina is currently the only one with a statewide program. Launched in April 2011, CCNC’s Pregnancy Medical Home includes the majority of maternity care providers – more than 350 practices and 1,600 individual North Carolina providers.

CCNC’s model aims to improve birth and maternal health outcomes by offering incentives to medical practices to help patients understand medical terminology and encourage them to keep postpartum appointments. Women facing a high risk of pregnancy-related complications are paired with a pregnancy care manager to coordinate care between providers and evaluate non-medical barriers to care, such as substance abuse or barriers to secure housing.

Analysis of the Pregnancy Medical Home program at CCNC has shown lower rates of low-birth weight babies, a decrease in the amount of C-section deliveries, and an increase in rural access to obstetrical care for program participants in North Carolina.

Click here to read the article or go to: http://bit.ly/ccnc-pmh-huffpost

Find CCNC on social media!

UNC taps CPESN to educate next generation of pharmacists

Developed and tested in the trenches by over 270 pharmacies in the Community Pharmacy Enhanced Services Network, UNC’s new implementation “change package” provides a road map for integrating community pharmacists care management teams.

CPESN worked with the research team at the Center for Medication Optimization through Practice and Policy at UNC’s Eshelman School of Pharmacy to provide step-by-step details pharmacies need to adopt best practices shown to engage patients, to improve clinical outcomes, and to deliver quality care.

To learn more about the research process & to find the complete guide, “Process of Care Change Package,” please visit http://bit.ly/cpesn-unc.