Provider Community-Based Palliative Care Workflows

Note: Boxes in Red are required, Yellow are beneficial but optional, and Green not necessary before workshop end.   Implementation →

Organizational

Understand how palliative care fits into organizational or payer goals	Identify potential competitors and/or collaborators
Operations/Payer	Operations

Physician Engagement & Referrals

Identify current sources of referrals	Describe size and scope of services provided, by referral source	Outline current process for receiving referrals	Identify and describe potential referral sources & size
Operations	Clinical/Operations	Operations	Finance

Workforce

Describe current workforce, by provider type (count, staffing ratio)	Describe onboarding and continuous training practices	Do you have job descriptions, description of services provided, SOPs?	Describe current deployment model and tools	Describe ability to staff up/down
HR	Operations	Operations	Operations	Finance

Data/Analytics/Reporting

Describe patient identification and screening tools used	If you have experience, pull patient data (demographics, utilization, costs, insurance, etc.)	Identify capacity of EMR to capture and report data	Identify any measures your larger organization or potential funding source collects/finds important
Clinical	Analytics/IT	IT	Operations

Contracting & Finance

Identify current contracts and rates, along w/ org contracts & payment programs	Break down operational costs and cost to staff up	Understand what, if any, requirements payers have for a PC program	Describe current case mix, case mix in region	Determine ADC for break even point	Identify any regulatory barriers or overarching contracting barriers
Finance	Finance	Payer	Finance	Finance	Legal

IT and Informatics

Identify current workflows for ordering ancillary services	Identify workflow for interdisciplinary chart edits, PCP reporting, assessment completion	Review algorithms for 24/7 support and chart review; After hours supply/Rx ordering	Develop workflow for trigger of pt transition in care	Identify areas for IT support (EMR changes, landing or extracting data)	Identify any additional necessary data elements
Clinical	IT	Clinical/Operations	Clinical	IT/Operations	IT/Operations

Provider Community-Based Palliative Care Workflows

Note: Boxes in Red are required, Yellow are beneficial but optional, and Green are not necessary before workshop end.   Improvement →

Organizational

Review alignment of program with strategic goals	Identify strategic or organizational barriers to providing care
Operations	Operations

Physician Engagement & Referrals

Develop communication plan with PCPs or specialists	Develop assessment plan for referral rate and feedback
Clinical	Finance/Marketing

Workforce

Regular assessment of service deployment v. patient acuity	Identify administrative impact (drive time, home safety, charting or reporting burden) and gap closure plan	Determine provider team hiring trigger points, estimated fill time	Review team staffing model and IDT change needs w/ growth, freeze	Regular review of workflows and workforce administrative burden	Determine plan for program right-sizing and staff offsets
Clinical/IT	IT/Operations	Finance/HR	Clinical/Operations	Clinical/Operations	Operations/Finance

Data/Analytics/Reporting

Develop system of sharing data between payer, PCP, other parties	Identify data collection responsibilities of payer, provider	Standardize reporting templates, data extraction methods	Determine cadence for regular plot of enrollment, utilization, quality	Assess pt. referral appropriateness/ eligibility v. criteria
IT	IT/Payer	IT/Payer	IT/Operations	Clinical/Marketing

Contracting & Finance

Monitor cash flow and expenses and gap closure plan	Collect and report on elements expected in contract	Agree upon definitions of quality and utilization measures	Describe financial settlement methodology from payer	Monitor claims or payment issues and gap closure plan
Finance	IT/Operations	Operations/Payer	Finance/Payer	Finance/Billing

IT and Informatics

Regular reporting of enrollment and outcomes	QI of charting system and structure	QI on billing system and structure (internal or external)
Operations/IT	Clinical/Operations	Finance/IT