

PCMH Education Subcommittee Meeting  
February 3, 2016

Attendees

**Bill Warden**, Hospital Lobbyist  
**Sen. Mary Caferro**, State of Montana  
**Julie Sakaguchi**, Blue Cross Blue Shield of Montana  
**Kelley Gobbs**, Montana Medicaid  
**Lara Shadwick**, Mountain Pacific Quality Health  
**Tara Callaghan**, Providence Health System  
**Jody Haines**, Providence Health System  
**Erwin Austria**, Blue Cross Blue Shield of Montana

CSI Staff

Catherine Wright  
Amanda Roccabruna Eby

CSI staff began the meeting with an overview of preliminary results of the Patient Education Tool Kit follow-up survey sent to clinics. After one week, just 8 clinics had responded but the feedback was varied so hopefully gave a good indication of the reaction of other clinics. Two of the respondents did not receive the rack cards CSI mailed them; the six Providence clinics also had not received the rack cards and Jody Haines was looking into the reason and printing cards from an electronic file. Four clinics reported that they were not displaying the rack cards because they were redundant with other materials already on display. The materials received high ratings for appearance but low for information quality with several comments that the information was too vague. The Talking Points rated high for usefulness. Two respondents printed the poster and hung it, while others had problems with printing. One clinic requested videos on patient education.

The subcommittee discussed contacting clinics not using the rack cards to ask what they display instead of the CSI rack cards. If clinics are not using the cards, CSI should request they be sent back to redistribute to other clinics. Attendees suggested surveying clinics again about the materials and consider printing more cards for those that didn't receive them or run out. Others recommended CSI send the electronics files of the rack card and other materials directly to the marketing department of large health systems rather than the PCMH contact.

Next, the subcommittee reviewed the PCMH consumer/patient pages of the CSI website. Mary Caferro commented that she did a google search of "Montana PCMH" to see how easy or hard it would be to find the page. It was very difficult to find the page, her search took her to the DPHHS website, but she thought this was likely a problem typical of state government websites. Lara gave many suggestions for CSI to discuss with their web master regarding optimizing the search ability of the pages, such as tagging keywords used in the page. The group agreed that since most people would typically think of DPHHS

first as a logical source of information on PCMH that CSI should ask them to link to the CSI PCMH pages somewhere on their site that is a high traffic area.

The subcommittee members had other suggestions for edits to the page such as moving the “History of the Program” section to the bottom of the page and putting the “What Can I Expect from a PCMH?” section at the top of the page. The term “longer appointments” should be removed from the page because it is not necessarily accurate, and be replaced with “enhanced access.” The page should be branded more like the *Where Your Health Happens* tool kit with the same picture, color scheme, wording, etc.

The subcommittee reviewed a recently created interactive PCMH locator map. After review and approval the map will link from the PCMH patient page of the CSI website. Attendees suggested that the cities with more than one clinic should have all the clinics fan out so that the user doesn’t have to click through them. They asked if it would be possible to have a list of all the PCMH locations pop up when you click on a city. People may search for different reasons such as their insurance network or their preferred provider. CSI was not sure if these changes could be made to the map itself since it was created by public health staff but suggested posting a new list of PCMHs to the site sorted by city, not provisional or qualified. Another attendee requested a list of providers within PCMH clinics for people who make decisions about using a PCMH based on the providers available.

The subcommittee discussed preliminary plans for provider outreach. Bill Warden pointed out that all the critical access hospitals in the state are missing from the program. CSI will send draft questions for clinics missing from the program to the subcommittee for review.