## Instructions

The Empanelment & Access Assessment will help you evaluate how empanelment processes are defined within your practice and how empanelment and access data is captured and utilized. The Assessment should be completed by a group of care team representatives (i.e., provider, clinical support staff, quality, and/or data analyst) that plays a key role in empanelment and access within your practice. Findings from this assessment will prepare you to develop your empanelment policy and procedure by identifying areas that require attention.

There are four sections in this assessment and each section is comprised of a series of questions.

For questions in Section 1, please select the response that most closely aligns with your practice's capabilities related to empanelment.

For each question in Sections 2-4, please select the process, tools, or data source used and how efficiently it is working. If multiple tools are used to manage data for a process, please select all options that apply. If the process is something that your organization is not currently doing, please select the "we do not know/we do not do this" option.

## Section 1: Empanelment & Access Capabilities

| Empanelment Component | 0<br>Not Started | 1<br>Planning | 2<br>Implementing | 3<br>Sustaining | Practice Score | Score Comments |
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| Identify an Empanelment Manager | The practice has not identified a staff member to manage empanelment processes. | Leadership identifies empanelment as a priority and has identified a staff member to play the role of empanelment manager. | The staff member who is fulfilling the role of empanelment manager has begun training and competency building in core responsibilities. | The empanelment manager has been in place for 6 months and is performing core responsibilities. | | |

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| Empanel each patient to a PCP (Primary Care Provider) | The practice does not have an empanelment process in place to empanel a patient to a PCP, or PCP empanelment is inaccurate | Practice has leadership buy-in and agreement to either implement empanelment or perform “re-set” using the 1-or-4-cut method. | Empanelment (or re-set) process is complete, and patients have an empaneled PCP that aligns with their visit history | Accuracy of PCP/patient empanelment is monitored, and adjustments are made as needed, including reconciling internal PCP empanelment with health plan assignments and processing PCP change requests. | | |
| Patient-side continuity (i.e., continuity from the perspective of the patient) reporting is available at the provider level | The practice does not have a process in place to monitor patient-side continuity. | Patient continuity reporting is being developed. A process for reviewing and acting on patient continuity reporting is being developed. Planning for staff training on empanelment concepts including continuity and scheduling is underway. | The practice has an established process for utilizing reports to monitor patient continuity. All necessary staff are trained on continuity scheduling. | The practice has been monitoring patient continuity reports monthly and looking at provider and patient continuity side-by-side for at least 3 months. | | |
| Access reporting like Third Next Available Appointment (TNAA) is available at the provider level | The practice does not assess patient access. | Access reports are being built. A process for reviewing and acting on access data is being developed. | The practice has an established process for utilizing reports to monitor access. | The practice is monitoring access reports and using access data to make decisions about panel fullness. | | |

### Section 2. Data-Supported Empanelment Processes

| Question | Tools (Multi select) | Process Efficiency (single select) |
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| 1. How are you notified when a health plan assigns patients to your practice? | • Automated Member Roster System<br>• EHR/PHM System<br>• Qualified Health Information Exchange (QHIO) Portal<br>• Email<br>• Health Plan Portal<br>• Paper Report<br>• Other<br>• We do not know | • Fully Automated<br>• Part Automated/Part Manual Entry<br>• Manual Entry<br>• We do not do this |
| 2. How do you know which patients need to be empaneled to a care team? | • EHR/PHM System<br>• Excel File/Spreadsheets<br>• Paper Report<br>• Other<br>• We do not know | • Fully Automated<br>• Part Automated/Part Manual Entry<br>• Manual Entry<br>• We do not do this |
| 3. How do you identify patients based on language preferences? | • EHR/PHM Report<br>• Search in EHR/PHM System<br>• Qualified Health Information Exchange (QHIO) Portal<br>• Excel File/Spreadsheets<br>• Verbal Communication<br>• Handwritten Communication<br>• Other<br>• We do not track this | • Fully Automated<br>• Part Automated/Part Manual Entry<br>• Manual Entry<br>• We do not do this |
| 4. How do you empanel patients on your health plan member roster to an appropriate care team panel based on language preferences? | • EHR/PHM System<br>• Excel File/Spreadsheets<br>• Verbal Communication<br>• Handwritten Communication<br>• Other<br>• We do not track this | • Fully Automated<br>• Part Automated/Part Manual Entry<br>• Manual Entry<br>• We do not do this |

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| 5. How do you document and track interpreter needs for a patient? | • EHR/PHM Report<br>• Search in EHR/PHM System<br>• Excel File/Spreadsheets<br>• Verbal Communication<br>• Handwritten Communication<br>• Other<br>• We do not track this | • Fully Automated<br>• Part Automated/Part Manual Entry<br>• Manual Entry<br>• We do not do this |
| 6. How do you identify patient attributes, including race/ethnicity, sexual orientation, and gender identity? | • EHR/PHM Report<br>• Search in EHR/PHM System<br>• Qualified Health Information Exchange (QHIO) Portal<br>• Excel File/Spreadsheets<br>• Verbal Communication<br>• Handwritten Communication<br>• Other<br>• We do not track this | • Fully Automated<br>• Part Automated/Part Manual Entry<br>• Manual Entry<br>• We do not do this |
| 7. How do you empanel patients on your member roster to an appropriate care team panel based on patient and/or care team preferences such as race, ethnicity, sexual orientation, and gender identity? | • EHR/PHM System<br>• Excel File/Spreadsheets<br>• Verbal Communication<br>• Handwritten Communication<br>• Other<br>• We do not track this | • Fully Automated<br>• Part Automated/Part Manual Entry<br>• Manual Entry<br>• We do not do this |
| 8. How do you reconcile your patient assignment on the member roster sent from the health plan with the information you have in your systems? | • Automated Member Roster System<br>• EHR/PHM System<br>• Excel File/Spreadsheets<br>• Other<br>• We do not do this | • Fully Automated<br>• Part Automated/Part Manual Entry<br>• Manual Entry<br>• We do not do this |

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| 9. How do you identify patients that qualify for or are participating in Enhanced Care Management (ECM) services? | • Automated Member Roster System<br>• EHR/PHM System<br>• Qualified Health Information Exchange (QHIO) Portal<br>• Excel File/Spreadsheets<br>• Other<br>• We do not do this | • Fully Automated<br>• Part Automated/Part Manual Entry<br>• Manual Entry<br>• We do not do this |
| 10. How do you identify active patients (i.e., patients with a clinic visit within the past 24 months) for empanelment? | • Automated Member Roster System<br>• EHR/PHM System<br>• Qualified Health Information Exchange (QHIO) Portal<br>• Excel File/Spreadsheets<br>• Other<br>• We do not do this | • Fully Automated<br>• Part Automated/Part Manual Entry<br>• Manual Entry<br>• We do not do this |

**Section 3: Data-Supported Access Processes**

| Question | Tools (Multi select) | Process Efficiency (single select) |
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| 11. What tools do you use to locate, contact, and engage a new patient? | • Phone call<br>• Email<br>• Text<br>• Letter<br>• Other<br>• None | • Fully Automated<br>• Part Automated/Part Manual Entry<br>• Manual Entry<br>• We do not do this |
| 12. How do you document outreach and engagement attempts, including date, time, and method of outreach? | • EHR<br>• PHM System<br>• Excel File/Spreadsheets<br>• Other<br>• We do not do this | • Fully Automated<br>• Part Automated/Part Manual Entry<br>• Manual Entry<br>• We do not do this |

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| 13. How do you document the process for giving the patient a choice to choose a clinician and/or care team in your practice? | • EHR/PHM System<br>• Excel File/Spreadsheets<br>• Paper Form<br>• Other<br>• We do not do this | • Fully Automated<br>• Part Automated/Part Manual Entry<br>• Manual Entry<br>• We do not do this |
| 14. How do you make clinical information available to external facilities and on-call clinicians when the office is closed or when the appointments are conducted via virtual visit? | • EHR/PHM System<br>• Qualified Health Information Exchange (QHIO) Portal<br>• Email<br>• Paper Files<br>• Verbal Communication<br>• Other<br>• We do not do this | • Fully Automated<br>• Part Automated/Part Manual Entry<br>• Manual Entry<br>• We do not do this |
| 15. How do you communicate if a newly assigned patient is unable to be reached after multiple outreach attempts? | • Automated Member Roster System<br>• EHR/PHM System<br>• Excel File/Spreadsheets<br>• Email<br>• Paper Report<br>• Phone Call/Verbal Communication<br>• Other<br>• We do not do this | • Fully Automated<br>• Part Automated/Part Manual Entry<br>• Manual Entry<br>• We do not do this |
| 16. How do you document and track appointment no-shows and cancellations? | • EHR/PHM System<br>• Excel File/Spreadsheets<br>• Paper/Huddle Board<br>• Other<br>• We do not do this | • Fully Automated<br>• Part Automated/Part Manual Entry<br>• Manual Entry<br>• 0-We do not do this |

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| 17. How do you document and track missed opportunities for appointments? | • EHR/PHM System<br>• Excel File/Spreadsheets<br>• Paper/Huddle Board<br>• Other<br>• We do not do this | • Fully Automated<br>• Part Automated/Part Manual Entry<br>• Manual Entry<br>• We do not do this |
| 18. How do you identify if a patient needs transportation assistance to attend an appointment? | • Automated Member Roster System<br>• Qualified Health Information Exchange (QHIO) Portal<br>• EHR/PHM System<br>• Email<br>• Phone Call/Verbal Communication<br>• Other<br>• We do not do this | • Fully Automated<br>• Part Automated/Part Manual Entry<br>• Manual Entry<br>• We do not do this |
| 19. Which of the tools do you use to determine when a patient should be offered a virtual visit? | • EHR/PHM System<br>• Excel File/Spreadsheets<br>• Algorithm/Process Document<br>• Other<br>• We do not have a process for this | • Fully Automated<br>• Part Automated/Part Manual Entry<br>• Manual Entry<br>• We do not do this |
| 20. How do you identify opportunities to make changes to a schedule to increase access (i.e., active schedule management)? | • Quarterly Productivity Report<br>• Visit #s Review & Schedule Capacity Utilization Review<br>• Inappropriate use of appointments in clinician schedules<br>• Morning of/ in the Daily Huddle<br>• Day before/visit prep<br>• Other<br>• We do not do this | • Fully Automated<br>• Part Automated/Part Manual Entry<br>• Manual Entry<br>• We do not do this |

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| 21. How do you manage same day appointment access and fluctuations in schedules? | • Our Patient Schedule via our EMR adjusts based on seasonal changes and a data review<br>• We manually open slots in our schedule based on demand<br>• Phone Calls to and from patients<br>• Other<br>• We do not do this | • Fully Automated<br>• Part Automated/Part Manual Entry<br>• Manual Entry<br>• We do not do this |

**Section 4: How does your practice use data to track key performance indicators (KPIs)?**

| Question | Tools (Multi select) | Process Efficiency (single select) |
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| 22. How do you identify the third next available appointment for a patient? | • EHR<br>• PHM System<br>• Excel File/Spreadsheets<br>• Other<br>• We do not do this | • Fully Automated<br>• Part Automated/Part Manual Entry<br>• Manual Entry<br>• We do not do this |
| 23. How do you identify patients empaneled to a care team but not seen? | • EHR<br>• PHM System<br>• Excel File/Spreadsheets<br>• Other<br>• We do not do this | • Fully Automated<br>• Part Automated/Part Manual Entry<br>• Manual Entry<br>• We do not do this |
| 24. How do you track the percentage of patient visits that occur with their empaneled care team? | • EHR<br>• PHM System<br>• Excel File/Spreadsheets<br>• Other<br>• We do not do this | • Fully Automated<br>• Part Automated/Part Manual Entry<br>• Manual Entry<br>• We do not do this |

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| 25. How do you monitor if assigned patients have had a preventative or outpatient visit with their PCP within a 12-month period? | • EHR<br>• PHM System<br>• Excel File/Spreadsheets<br>• Other<br>• We do not do this | • Fully Automated<br>• Part Automated/Part Manual Entry<br>• Manual Entry<br>• We do not do this |
| 26. How do you monitor utilization (i.e., appointment demand vs. clinic/provider capacity)? | • EHR<br>• PHM System<br>• Excel File/Spreadsheets<br>• Other<br>• We do not do this | • Fully Automated<br>• Part Automated/Part Manual Entry<br>• Manual Entry<br>• We do not do this |
| 27. How do you anticipate and plan for schedule modifications (due to clinician turnover, seasonality needs, staffing fluctuations)? | • EHR<br>• PHM System<br>• Excel File/Spreadsheets<br>• Other<br>• We do not do this | • Fully Automated<br>• Part Automated/Part Manual Entry<br>• Manual Entry<br>• We do not do this |

**Instructions**

Please upload your practice's empanelment policy and procedure and provide excerpts that address the following sections.

**Section 1. Provide a 2-3 sentence empanelment policy statement.**

The "Policy" states what empanelment is and why it is important to your practice. For example: It is the policy of [PRACTICE NAME] to continuously monitor and advance quality, outcomes, and continuity of care for its community residents. [PRACTICE NAME] will implement empanelment to ensure improvement on delivery of care, population health management, and patient and provider satisfaction.

| Practice Response |
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**Section 2: Describe your practice's process for empaneling patients. Please include the following:**

a) Methodology (1-cut, 4-cut, or other) used to establish panels
b) How patients assigned by the health plan but unseen by your practice (i.e., shadow patients) are empaneled, if at all
c) Target panel size per 1.0 clinical full time equivalent (FTE)
d) Process, including roles and responsibilities, for empaneling patients

| Practice Response |
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**Section 3: Describe your practice's process for defining open and closed panels. Please include the following:**

a) Criteria used to determine when a panel should be closed
b) Criteria used to determine how many new slots are allocated to a provider's schedule
c) Process, including roles and responsibilities, for opening and closing panels

| Practice Response |
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**Section 4: Describe your practice's process for patient-initiated primary care provider (PCP) changes. Please include the following:**

a) How patients make the request
b) How the request is reviewed and processed
c) How PCP change requests are tracked and monitored to identify themes or trends

| Practice Response |
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**Section 5: Describe your practice's process for moving patients to a different panel due to changes in provider FTE or provider departure. Please include the following:**

a) What happens to a provider's panel when they leave the practice
b) What happens to a provider's panel if they reduce their FTE
c) How panels are established for new providers at the practice

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| Practice Response |

**Section 6: Describe your practice's mechanisms for monitoring empanelment. Please include the following:**

a) What reports are utilized to monitor and update panel assignments
b) What is the frequency of the reports
c) Who is accountable for reviewing the reports
d) How are the report findings incorporated into practice operations

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| Practice Response |