

Million Hearts® Model Promising Practice Case Study

Participant Spotlight
FamilyCare Health Centers
Scott Depot, WV



FamilyCare Health Centers is a Federally Qualified Health Center (FQHC) based in Scott Depot, West Virginia, with a multidisciplinary care delivery team that spans 16 locations across 4 counties.

This Million Hearts® Model Participant, FamilyCare Health Centers has established a team-based approach to care delivery by implementing a **Chronic Care Management (CCM) Program**. CCM is leveraged by social workers and the care delivery team if a social constraint— such as food or housing insecurity, is identified during a patient’s visit. CCM enables the team to coordinate care so patients can readily tap into community resources, engage with their care plan more meaningfully, and address barriers to access. CCM capabilities include:

- A telephonic service to facilitate ongoing communication between the patient and the healthcare site
- Tracking tools for lab results, follow-up visits, and select medication refill notifications
- Coordination across community programs and resources

Additionally, the team has implemented the capability to **pull and print educational materials from the Electronic Medical Record (EMR) system** to help patients view and visualize health topics in greater detail during their visit. Paired with the use of an interactive **digital display which provides use to educate patients on Atherosclerotic Cardiovascular Disease Risk (ASCVD) conditions and their potential enrollment in the Million Hearts® Model**, FamilyCare Health Centers has been able to activate patients and empower them towards more effective interactions during their clinical visit.

“Caring for the whole person means that staff members are attuned to issues such as unstable housing, food insecurity, lack of transportation or child care, and fear of violence.”

- Martha Carter, Founding CEO, FamilyCare Health Center



The aim of the Centers for Medicare & Medicaid Services (CMS) Innovation Center’s Million Hearts® Cardiovascular Disease Risk Reduction Model (Million Hearts® Model) is to prevent first time heart attack and stroke in high risk Medicare beneficiaries. The model aim was supported by primary model drivers. This case study spotlights one of our participant organizations’ innovative implementation of the “Establishing a Team-Based Care” model driver.

Promising Practice: Team-Based Approach Activating Patients and Engaging Peer Support Network

Patient Activation refers to an individual’s understanding of the role they play in their health, their knowledge, skill, and confidence in taking actions to advance health-related goals to lower their cardiovascular risk. Paired with social and peer support, patients who are engaged activated and supported:

- Communicate more often with medical providers¹
- Report better quality of coordination
- Exhibit better medication adherence
- Have greater reductions in Multiple Risk behaviors
- Have greater reductions in Multiple Risk Behaviors (MRD)²



Million Hearts® Model Sustainable Tactics to Improve Patient Communication and Access

Work across your organization to design a vision for how technology can improve:

- Communication in your patient population and access to specialized and team-based care provide ways for patients to **stay engaged**, easily **communicate with their provider**, and **manage medications** and healthcare (e.g., telephonic service, patient portal, EMR)
- Identify unique patient barriers and **coordinate with community members** and resources to provide continued and informed support for patients
- Provide educational information and tools, to **improve patient literacy** (e.g. print/online)



Million Hearts Practical Tools to Educate and Activate Patients

The below resources were made available to intervention group participants in the Million Hearts Connect Library during the active phase of the model. The resource to include peer reviewed scientific research and tools can be found using the links below:



The CREATE Wellness Intervention: Designed as a 3 session, group-based intervention combining proven elements of patient activation, health system engagement skills training, shared decision making, care planning, and identification of lifestyle change barriers



The PAM - 13: A validated 13-item assessment of self-reported measures designed to assess patients’ activation and the extent to which patients are informed and involved in their healthcare



Educational Resources: Leverage Educational Resources to deliver a patient-centered communication approach during clinical care delivery