

Managing Chronic Obstructive Pulmonary Disease

A Collaborative to Develop Effective Care Management Programs



CALL FOR PARTICIPATION

AMIGA





THE AMERICAN MEDICAL GROUP ASSOCIATION

(AMGA) and the American Medical Group Foundation (AMGF) are pleased to announce an opportunity for AMGA members to participate in a learning collaborative on care management for patients with COPD. The Best Practices Learning Collaborative is for organizations that are striving to improve the care of patients with COPD. Working together, we will develop an optimal care framework that includes a comprehensive, patient-centered, value-based approach to chronic care. Participating project teams will be able to regularly network with peers, participate in bi-monthly conference calls on relevant project topics, attend two in-person meetings, and have timely access to industry experts. Through a yearlong series of activities, participating organizations will have the opportunity to test approaches and design care processes that are relevant to their clinical and operational models.

Chronic Obstructive Pulmonary Disease (COPD) is a preventable and treatable disease which is characterized by chronic airflow limitation and a range of pathological changes in the lung, significant extra-pulmonary effects, and important comorbidities which may contribute to the severity of the disease in individual patients. COPD refers to a disease that causes airflow blockage and breathing-related problems including emphysema, chronic bronchitis, or both.¹

COPD is a leading cause of morbidity and mortality worldwide and results in an economic and social burden that is both substantial and increasing. In the United States, an estimated 10 million adults had a diagnosis of COPD in 2000, contributing to 119,000 deaths, 726,000 hospitalizations, and 1.5 million hospital emergency department visits. Data from a more recent national health survey suggest that as many as 24 million Americans may have impaired lung function. The prevalence and burden of COPD are projected to increase in the coming decade due to continued exposure to risk factors and the changing age structure of our population.²

A Call for Collaborative Participants

Medical groups, IPAs, academic practices, and integrated delivery systems that wish to incorporate the management of COPD into their chronic care models are encouraged to submit an application. Whether your organization is interested in a population-based effort or wants to launch a pilot program, we welcome your participation.

The learning collaborative will support improvements in chronic care management systems that focus on improving the care of patients across care settings. Up to fifteen groups will be invited to participate in the collaborative; five will receive \$10,000 in educational support over a one-year period; an additional ten organizations will receive travel stipends to attend the collaborative meetings.

The learning collaborative will be supported through conference calls, online resources, consultation with experts in the field, and two in-person meetings. All participants will be expected to share their experiences, materials, tools, and results with all involved in the collaborative as part of the project, as well as packaged materials and programs produced following the conclusion of the initiative.

An expert panel of judges will review each application for commitment to common goals such as:

- Early identification and diagnosis of patients at risk for or currently suffering with symptoms of COPD
- Improved medication adherence and compliance
- Continuity of care across settings and transitions of care
- Increased efficiency and reduction of unnecessary or duplicative services and waste
- Increased ability to self-manage symptoms and disease progression through healthier lifestyles
- Improved health and well-being, and patient satisfaction
- Improved physician/patient relationships
- Overall impact on patient care in the community or region

Submissions Due October 8, 2010

Instructions for Preparing Your Application

Applicants must be direct providers of care, such as medical groups, IPAs, and academic medical centers, or integrated delivery systems. Provide an organizational profile and a brief narrative that includes the following:

Aims and Measures

- Describe the goals and objectives of your current chronic care management program.
- Specify organizational imperatives that led you to focus on the management of COPD as a strategic initiative.
- What national clinical standards, if any, are you currently using in caring for patients with COPD?
- What would you hope to accomplish with a well-defined and -executed care management program for patients with COPD?
- Describe data sources and data collection processes and measures that will allow you to measure success?

Population Identification

- Describe your target populations and how you intend to identify them (e.g., ICD-d-CM diagnosis or procedure codes, CPT codes, HCC scores, risk stratification models, etc.).
- Provide demographics on target populations (e.g., age, gender, stages of COPD).
- Describe any registries used to identify and manage patients. Describe how your registry is populated and maintained.

The Intervention

- If possible, please provide a gap analysis of current processes of care and optimal care. Describe what needs to happen to move from usual and customary care to optimal care. What changes, if any, were required in workflow, distribution of resources, staffing assignments, etc.?
- Describe how healthcare information technology will be used to facilitate process redesign.
- Describe staff members who will be involved in the collaborative. Please provide job titles, qualifications, and FTEs where possible.
- Include an organizational chart that depicts how quality initiatives relate to your structure.



Leadership Involvement

- What specifically will senior leaders do to support your initiative?
- Describe internal or external financial incentives, if applicable, tied to the outcomes.

Electronic Submission Process

Remove patient, provider, and all clinic identifiers, including logos from your submission except for the cover sheet with the contact information. Applications will be evaluated in a blinded review process.

To apply, send your case study by e-mail to COPD@amga.org by close of business on Friday, October 8, 2010, and include the following attachments:

Cover Sheet

Include project title, organization, primary contact information (name, title, e-mail address, phone number, and address).

Supporting Information

- **Include an organizational profile that gives the reader an understanding of the size and scope of your organization, including population served, without revealing your organization.**
- **Please cite and label the supporting documents in an appendix. It is highly preferred that supporting documents be included in the same file and clearly labeled as appendices.**

Project Timeline

October 8, 2010 Applications Due to AMGA

October 21, 2010 Managing COPD Learning Collaborative Applicants Notified

November 2010 Managing COPD Learning Collaborative Kick-Off Meeting (Location TBD)

Questions or Comments?

Visit the AMGA website at www.amga.org or contact Danielle Flowers at (703) 838-0033, ext. 347 or dflowers@amga.org.

References:

1. Global Initiative for Chronic Obstructive Lung Disease Executive Committee. Global strategy for the diagnosis, managements, and prevention of chronic obstructive pulmonary disease. Medical Communications Resources, Inc; 2009.
2. Centers for Disease Control and Prevention. Chronic obstructive pulmonary disease surveillance-United States, 1971-2000. MMWR. 2002; 51:1-16



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