

# Panel management and population-based care

Panel management and population-based care is a proactive approach to health care that makes sure everyone assigned to a clinic is up to date on basic preventive care. It also focuses on the entire population of patients, rather than only on patients who happen to come in for appointments.

Medical assistants, health workers and nurses play a critical role in providing panel management.

## Key benefits:

### Better health outcomes:

The ultimate goal of population-based care is simple — improving the quality of care while reducing costs.

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### Disease management:

Population-based care improves the care of those with chronic and costly disease by using IT solutions that track and manage their care.

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### Closing the care gap:

A fully integrated electronic medical record helps close gaps in care by allowing organizations and physicians to have real-time access to track and address patient needs. Laboratory, billing, electronic health record and prescription data can easily pinpoint unmet needs and gaps in data or service delivery.

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### Cost savings for providers:

By leveraging data analytics, panel management and population-based care improves clinical outcomes while reducing costs.



Established processes in the practice ensure the sustainability of managing patient panels over time. The use of the member deletion form should be the last step in population management. Make all efforts to engage the member prior to the use of the member deletion form.

**A provider should never request disenrollment of a member:**

- For adverse change in the member's health status or utilization of services that are medically necessary for the treatment of a member's condition.
- On the basis of the member's race, color, national origin, sex, age, disability, political beliefs or religion.

**Tips:**

- Pull member panel from Availity monthly
- Outreach to nonactive panel members to determine status:
  - Appropriate usage of member deletion form: death or moved
  - Being seen by another PMP: have member call Member Services to have PMP changed in system
- Schedule for annual visit and determine health needs
- Identify barriers/needs:
  - Transportation
  - Case management
  - SafeLink (cellphone)

**Provider Services:**

Hoosier Healthwise: 1-866-408-6132

Healthy Indiana Plan: 1-844-533-1995

Hoosier Care Connect: 1-844-284-1798

[www.anthem.com/inmedicaiddoc](http://www.anthem.com/inmedicaiddoc)

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