
Along the Trail

Katy Trail Community Health

Jan—Mar 2020

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Why do we need Medicaid expansion?

As many of you know, Katy Trail Community Health mostly cares for patients in a four county area: Pettis, Benton, Morgan and Saline. Just under 10,000 people from these counties are uninsured and about 45% of them would be eligible for Medicaid under the expansion proposal slated for the November 2020 election. To put this in real numbers, 4,500 people would be eligible for Medicaid. In 2019, Katy Trail Community Health had 275 more uninsured patients than in 2018. Just over 100 of those patients were children.

Right now, in Missouri, adults with no children must make less than \$3,612 per year to be eligible for Medicaid. The expansion would make adults making up to \$18,000 per year eligible for Medicaid.

Why does Katy Trail Community Health support the expansion of Medicaid? There are two primary reasons why people do not access primary and preventive healthcare. First, there are limited numbers of primary care providers available to them and second people who are either underinsured or uninsured do not want to access care for fear of the cost.

We know that people who get their preventive check-ups, people who have a medical/dental home, are less likely to use an emergency room or urgent care, which are both more expensive to our healthcare system. We also know that early detection results in better health outcomes. Our main purpose at Katy Trail Community Health is to improve the health of the communities we serve. We do that by treating the residents of our communities who are ill and preventing illness in those who have not experienced chronic, or acute illnesses. Let's make sure that insurance status does not prevent our friends and neighbors from accessing care when they need it.

If you want more information about this effort, go to www.healthcareformissouri.org. If you want to sign the petition to get the initiative on the November Ballot, please contact a care coordinator at one of our four main sites. They have petitions available for your signature.

— *Chris Stewart, CEO*

Upcoming Events:

Annual Meeting: April
16th from 6pm-8pm at
the Best Western State
Fair Inn

Trailhead Stops...

What's Going on at K TCH



Dental is progressing towards our goal of managing caries by risk assessment. (CAMBRA). Our goal is to tailor lifestyle and dietary goals and changes as well as implement patient specific education and interventions to decrease the chance the patient will have future tooth decay. We will focus our initial implementation on patients at high risk for tooth decay and utilize different members of the care team to support the patient in achieving their oral health goals. For very young children, our efforts focus on the primary caregiver. For older children and adults, our efforts focus on the patient.

- Dr. Vandevender, DDS



KATY TRAIL COMMUNITY HEALTH Board and Staff

Invites you to join us at our
Annual Meeting
to celebrate our successes and future.

State Fair Motor Inn/Best Western
3120 S Limit
Sedalia, MO 65301

Thursday, April 16, 2020
6:00 to 8:00 p.m.

RSVP: 660-826-1571 ext. 6
sborgmeyer@katyhealth.org



We are pleased to announce that Katy Trail Community Health will be implementing a new HRIS, TPC. The new system will have several enhancements that are unavailable with ADP that we believe will provide greater satisfaction to you the end user and increase efficiency for us as an organization and support our overall growth changes. Some **NEW** features we are excited to rollout for staff include:

- Time Off Calendars to see if dates/times are available BEFORE you request time off
- Training/Learning Library with Reminders
- Licensure Reminders

Thank you in advance for the input that has been given over the past year as we explored options to move us away from ADP. We are excited about the upcoming changes!

- HR



iSolved

Trailhead Stops...

Patient Care & Reminders...

Well-Child Check Reminder:

Please remember when rooming a child for a sick visit it is important to see if they are due for a Well-Child check. If the patient is due consider changing the visit type; we can bill for both. Don't forget dental appointments are needed as well. Also, reminder that all Medicaid plans show the patient due for a Well Child starting the new year, January 1st of a new year; so, if they had a Well Child in November or December of last year they can still be scheduled for this year's appointment. They do this to prevent missed opportunities toward the end of the year. Private insurance does need to be closer to 1 year apart; within 1-2 months is ok. If the patient has already had their appointment this year we can go ahead and schedule their appointment for next year as this will cut down on the amount of work for us next year and will decrease our missed opportunities.



Why It's Important- Medical

Many children with developmental delays or behavior concerns are not identified as early as possible. As a result, these children must wait to get the help they need to do well in social and educational settings (for example, in school, at home, and in the community). In the United States, about 1 in 6 children aged 3 to 17 years have one or more developmental or behavioral disabilities, such as [autism](#), a [learning disorder](#), or [attention-deficit/hyperactivity disorder](#)¹. In addition, many children have delays in language or other areas that can affect how well they do in school. However, many children with [developmental disabilities](#) are not identified until they are in school, by which time significant delays might have occurred and opportunities for treatment might have been missed.

<https://www.cdc.gov/ncbddd/childdevelopment/screening.html>

Why It Matters- Dental

Dental caries (cavities) is one of the most common, preventable childhood diseases.¹ Regular dental visits provide access to cleaning, early diagnosis, treatment and education about caring for teeth to prevent problems.

Approximately 25% of our nation's children have multiple cavities. Tooth decay is a major cause of tooth loss in children.² Oral health is essential to overall health. Dental diseases have negative effect on quality of life in childhood and in older age.³ Annual dental visits and oral care throughout childhood and adolescence can significantly reduce the risks of developing oral disease.⁴

<https://www.ncqa.org/hedis/measures/annual-dental-visit/>

- Kirstin Bright, RN Case Manager

COO News-

Enhancing the role of the RN Case Manager – Implementation of the RN Care Team Model

Our RN Case Managers have been working behind the scenes to:

- Assist patients with the coordination and management of their chronic conditions
- Identifying and resolving care gaps for routine and preventive medical services
- Working directly with health insurance plans on the specific initiatives that improve the health outcomes for the KTCH patients enrolled in these plans

To support our focus on patient engagement and to use our RNs as active members of the care team, the Versailles site began a pilot on November 14, 2019 called the RN Care Team Model. This model identifies Jennifer Buckingham, RN as the “panel manager.” Jennifer will assist patients in achieving timely access to needed care with the patient's PCP. As an extension of the patient-centered medical home model (PCMH) the panel manager (RN) identifies patients in need of preventive and chronic disease management services, and completes pre-visit planning through multiple methods of obtaining and collecting visit specific information. The RN also assists with managing a small panel of patients with more complex health care needs. Managing these patients will include sharing population metrics at the bi-monthly care team meetings. The next phase of this RN care team model is to implement the RN led visits. These visits will require the RN to independently handles portions of the visit, or to complete the Medicare Annual Wellness exams.

The pilot has been successful at our Versailles site because of the engagement from the care team members and site manager. Megan Rowland as the Provider has been extremely involved in communicating the pros and cons of the pilot, supporting her team through the change of adding the RN case manager, and providing the vision of how she believes the team can expand further. The LPN, Steffanie Durand is considered the “flow manager” and is responsible for monitoring the flow of the schedule by rooming patients according to their scheduled appointments, completing the rooming process, which includes informing the patient of care gap closures, and handling the nursing task box. The Medical Assistant, Torrey Meloy is responsible for completing the care gap closures by performing point of care testing and reviewing and closing pending preventive orders with each patient, and assisting with the nursing task box. Tory Kroeschen as the Site Manager has actively participated in the roll out of the model by keeping everyone updated of the progress.

Consideration for implementing this model will be given as the pilot continues. Kirstin Bright, as the Patient Centered Health Home Case Manager for Versailles and Warsaw has expanded her role to support the pilot of the model at our Warsaw site with Megan Yonker and Dr. Tedrow. The completion of the pilots and successful implementation of the model will help with confirming expansion of the RN Care Team Model.


- Tracy Simmons, COO



Spam Email Awareness

Please be mindful of emails, especially if they are in the Barracuda filter. Our internal email is not filter and you should **never** receive an email notification within Barracuda from a real KTCH email account. If you are receiving emails from personal accounts impersonating an employee, please report those, unless you know for a fact they are legit and from the employee. If you do not recognized the sender and email address, do not release the messages, click on links or open attachments. If you do by mistake click on a link or open an attachment within an email that is spam, please reach out to JMark or myself so we can make sure that your computer has not been infected by a virus or malware. Not all messages with be caught in the spam filter(Barracuda), so please pay attention to email that you receive, especially if you do not recognize the sender/email address, are not expecting it or it seems strange.

- Haley McNeeley, IT Support Specialist

 **Barracuda
Essentials**

MANAGE QUARANTINE

1 Inbound Quarantine Emails

From	Date	Subject	Actions
Chris Stewart < michealcolle n147@gmail.com >	02/07/20 07:57 AM	GET BACK TO ME	DELIVER WHITELIST



Trailhead Stops...

Tips & Trainings...

American Heart Month

JNC 7: Guidelines for Hypertension

Goal: To reduce cardiovascular and renal morbidity and mortality through prevention and management of hypertension

Classification of Blood Pressure

Category	SBP (mm Hg)	DBP (mm Hg)
Normal	<120	<80
Prehypertension	120-139	80-89
Hypertension, Stage 1	140-159	90-99
Hypertension, Stage 2	≥160	≥100

When taking a Blood Pressure, if the systolic or diastolic number either or is greater than 140/90 a second Blood Pressure needs to be obtained a minimum of 5 minutes later

EHR Tip



Always remember to **Add** an additional row in vital signs for the second Blood Pressure taken and to edit to the correct

Vital	
Taken Time*	11:21 AM

What does taking a second blood pressure have to do with being a PCMH?

Knowing and Managing Your Patients (KM)

The practice captures and analyzes information about the patients and community it serves and uses the information to deliver evidence-based care that supports population needs and provision of culturally and linguistically appropriate services.

Dental's BP Guidelines: Blood pressures are taken on all patients 18+

139/89 or below: no contraindications to elective treatment

140-159/90-99: Retake to confirm, proceed with elective treatment

160-179/100-109: Retake to confirm, ER or non-invasive treatment only, monitor BP throughout appointment, refer patient to PCP

180-209/110-114: Retake to confirm, ER treatment only for patients with no prior history of heart attack or stroke, refer to PCP, epi restrictions

210/115 or higher: Retake and confirm with separate device. Immediate referral to PCP or ER. No treatment of any type. Medical consult required prior to any dental treatment.

Chelsea Dorsey

- Stover School Workflow Analysis
- Update Rooming Efficiencies
- Update Monthly Nurse/MA Chart Audit Questions

- Prepared and Held Nurse/MA Meeting
- Completed Shadowing of Sedalia Care Teams

Miranda Schwartz

- Working with JMARK and Haley to resolve lingering server issues
- Learning non-clinical software to work more effectively with Premier Dental Anesthesiology
- Compiling data to move closer to CAMBRA implementation

Training Team Spotlight

Chelsea Otto

- Updated Standing Orders/ Clinical Guidelines
- Set up and assisted with Mayfield Medical at each site
- Attended CMS Webinar



From nervousness and stress to arm positioning and the wrong cuff size, there are several reasons for a blood pressure reading to be high initially.

Along the Trail...

New Editions

Katy Trail is so excited to welcome three new editions to our Katy Trail family!



Congratulations Rocio Morales!

*Rocio introduced
Ezequiel Uriel
to the world on 01/27/2020..*

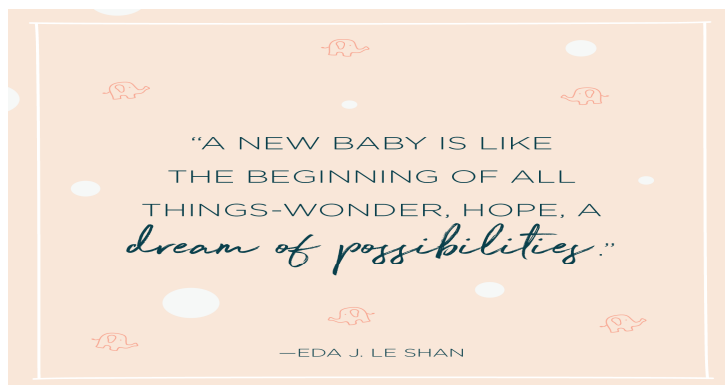
Congratulations Tory Kroeschen!

*Tory introduced
Baelyn James Alan
to the world on 02/10/2020.*



Congratulations Julie Kisner!

*Julie introduced Brianna Marie
to the world on 02/03/2020
at 03:09pm.*



Along the Trail...

Spirit Week at Katy Trail

*Katy Trail participated in Spirit Week while our Chiefs were on the road to winning Super Bowl LIV 2020.
Thank you to everyone for showing your support!*



Pictured (left to right): Tammy Estes, Megan Yonker, Kelsey Krum & Kari Culley

WARSAW



Pictured (left to right): Jessica Burdick, Amy Mebruer & Harley Rumsey



Pictured (left to right): Diann Rice & Kari Culley



MARSHALL



Pictured (left to right): Regena Castaneda & Doris Garcia

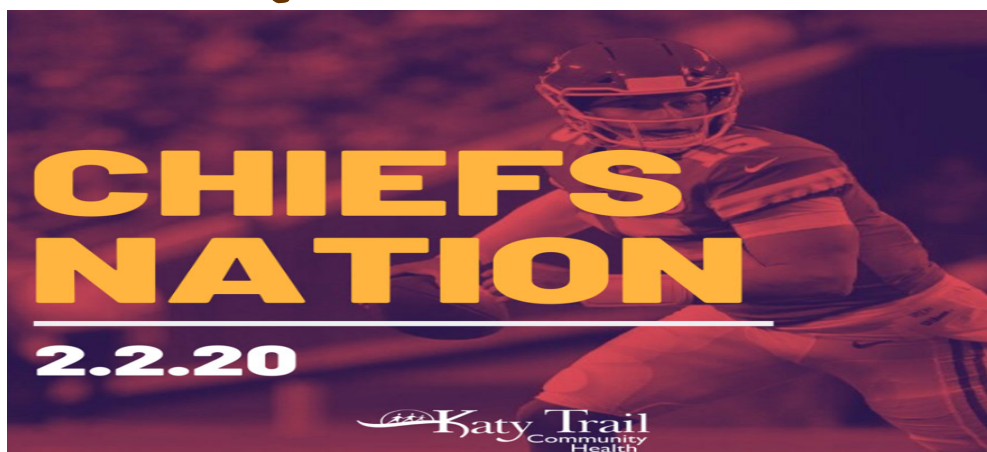
SEDALIA



Pictured (left to right): Kim Cormican, Liliya Tsapok, Katie West & Montana Hedrick



Trailhead Stops... Spirit Week at Katy Trail Cont.



Pictured (left to right): Heather Emilio, Kady Altis, Sarah Albin

SEDALIA



Pictured (left to right): Cheldyn Harvey & Lisa Stanley



Pictured (left to right): Steve Bevans, Sarah Marshall, Albina Oleynik, Chris Stewart, Ashley Meyers, Amy Gilliland & Sue Borgmeyer



Pictured (left to right): Colleen Kline, Chelsey Pottorff, Debbie Reed, Tami Hesseltine, Vanessa Edwards & Courtney Thomlinson

