



2017 Patient-Centered Primary Care Home (PCPCH) Recognition Standards Technical Specifications and Reporting Guide (TA Guide): COVID-19 Considerations

PCPCH program leaders and staff understand the impact of COVID-19 on our primary care system and have proactively taken steps to ensure challenges due to COVID-19 are considered as practices apply or re-apply for PCPCH recognition. PCPCH Program leaders and staff reviewed the PCPCH standards to identify those that may be more difficult for a practice to meet due to COVID-19 (e.g., if they made operational changes or because of decreased visit volume). This document is a supplement to the [2017 Patient-Centered Primary Care Home Recognition Standards Technical Specifications and Reporting Guide](#) (TA Guide) and includes alternative technical specifications practices may use to meet the identified standards.

In January 2021, the PCPCH program will implement revised PCPCH recognition standards. All practices applying or re-applying for PCPCH recognition after January 2021 must apply under the revised standards. Alternative technical specifications for the revised standards will be included in the updated TA Guide which will be published in August 2020.

The [PCPCH Standards Advisory Committee](#) reviewed and provided feedback on the alternative technical specifications.

Please contact the PCPCH program at pcpch@dhsosha.state.or.us if you need further guidance.

Updated August 11, 2020

2017 PCPCH Recognition Standards: alternative technical specifications

Please refer to the 2017 PCPCH TA Guide for the complete specifications: <https://www.oregon.gov/oha/HPA/dsi-pcpch/Documents/TA-Guide.pdf>

Standard	Measure	Alternative technical specifications
1.A. – In-person Access	1.A.1 - PCPCH surveys a sample of its population on satisfaction with in-person access to care.	Practices that have made operational changes or experienced a decrease in patient volume because of COVID-19 may use an alternative reporting timeframe when submitting data to meet the 25 survey per provider minimum requirement. Surveys administered in 2018, 2019 and 2020 may be used to obtain the 25 surveys per provider minimum requirement.
	1.A.2 - PCPCH surveys a sample of its population using one of the Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey tools on patient satisfaction with access to care.	Practices that have made operational changes or experienced a decrease in patient volume because of COVID-19 may use an alternative reporting timeframe when submitting data to meet the 25 survey per provider minimum requirement. Surveys administered in 2018, 2019 and 2020 may be used to obtain the 25 surveys per provider minimum requirement.
	1.A.3 - PCPCH surveys a sample of its population using one of the CAHPS survey tools, and meets a benchmark on patient satisfaction with access to care.	Practices that have made operational changes or experienced a decrease in patient volume because of COVID-19 may use an alternative reporting timeframe when submitting data to meet the intent of this measure and to meet the 25 survey per provider minimum requirement. <ul style="list-style-type: none"> • Surveys administered in 2018, 2019 and 2020 may be used to obtain the 25 surveys per provider minimum requirement. • 1 report - 12 months of consecutive data, minus months impacted by COVID (For example: 3/1/2019 - 3/1/2020)

		<ul style="list-style-type: none"> • 2 reports - 6-months of non-consecutive data, minus months impacted by COVID, to total 12 months of data. (For example: 9/1/2019-3/1/2020 and 7/1/2020-2/1/2021)
1.B – After Hours Access	1.B.1 -PCPCH offers access to in-person care at least 4 hours weekly outside traditional business hours.	<p>Practices that have made operational changes or experienced a decrease in patient volume because of COVID-19 may use telehealth to meet the intent of this measure.</p> <p>Practices only offering acute care or routine preventive care after-hours to mitigate patient and staff risk of exposure to COVID-19 are meeting the intent of this measure as long as the four-hour minimum is met.</p>
1.D – Same Day Access	1.D.1 - PCPCH provides same day appointments.	Practices that have made operational changes or experienced a decrease in patient volume because of COVID-19 may use telehealth to meet the intent of this measure.
2.A – Performance & Clinical Quality	2.A.2 PCPCH demonstrates improvement on two measures from core set and one measure from the menu set of PCPCH Quality Measures.	<p>Practices that have made operational changes or experienced a decrease in patient volume because of COVID-19 may use an alternative reporting timeframe when submitting data to meet the intent of this measure.</p> <ul style="list-style-type: none"> • 1 report - 12 months of consecutive data, minus months impacted by COVID (For example: 3/1/2019 - 3/1/2020) • 2 reports - 6-months of non-consecutive data, minus months impacted by COVID, to total 12 months of data. (For example: 9/1/2019-3/1/2020 and 7/1/2020-2/1/2021)
	2.A.3 - PCPCH tracks, reports to the OHA and meets benchmarks on two measures from the core set and one measure from the menu set of PCPCH Quality Measures.	<p>Practices that have made operational changes or experienced a decrease in patient volume because of COVID-19 may use an alternative reporting timeframe when submitting data to meet the intent of this measure.</p> <ul style="list-style-type: none"> • 1 report - 12 months of consecutive data, minus months impacted by COVID (For example: 3/1/2019 - 3/1/2020) • 2 reports - 6-months of non-consecutive data, minus months impacted by COVID, to total 12 months of data. (For example: 9/1/2019-3/1/2020 and 7/1/2020-2/1/2021)

2.C – Patient and Family Involvement in Quality Improvement	2.C.2- PCPCH has established a formal mechanism to integrate patient, family, and caregiver advisors as key members of quality, safety, program development, and/or educational improvement activities.	Practices that have made operational changes or experienced a decrease in patient volume because of COVID-19 may use video, phone or other virtual technologies to engage with patients to meet the intent of this measure.
	2.C.3-Patient, family, and caregiver advisors are integrated into the PCPCH and function in peer support or training roles.	Practices that have made operational changes or experienced a decrease in patient volume because of COVID-19 may use video, phone or other virtual technologies to engage with patients to meet the intent of this measure.
2.E – Ambulatory Sensitive Utilization	2.E.3 - PCPCH tracks selected utilization measures and shows improvement or meets a benchmark on selected utilization measures.	Practices that have made operational changes or experienced a decrease in patient volume because of COVID-19 may use an alternative reporting timeframe when submitting data to meet the intent of this measure. <ul style="list-style-type: none"> • 1 report - 12 months of consecutive data, minus months impacted by COVID (For example: 3/1/2019 - 3/1/2020) • 2 reports - 6-months of non-consecutive data, minus months impacted by COVID, to total 12 months of data. (For example: 9/1/2019-3/1/2020 and 7/1/2020-2/1/2021)
3.C – Behavioral Health Services	3.C.2 - PCPCH has a cooperative referral process with specialty mental health, substance abuse, and developmental providers including a mechanism for co-management as needed or is co-located with specialty mental health, substance abuse, and developmental providers	Practices that have made operational changes or experienced a decrease in patient volume because of COVID-19 may use telehealth to meet the intent of this measure.
	3.C.3 - PCPCH provides integrated behavioral health services, including population-based, same-day consultations by behavioral health providers	Practices that have made operational changes or experienced a decrease in patient volume because of COVID-19 may use telehealth to meet the intent of this measure. The behavior health providers must still be integrated into the practice, as described in the TA Guide.
	4.B.2 - PCPCH tracks and improves the percent of patient visits with assigned clinician or team.	Practices that have made operational changes or experienced a decrease in patient volume because of COVID-19 may use an alternative

4.B – Personal Clinician Continuity		<p>reporting timeframe when submitting data to meet the intent of this measure.</p> <ul style="list-style-type: none"> • 1 report - 12 months of consecutive data, minus months impacted by COVID (For example: 3/1/2019 - 3/1/2020) • 2 reports - 6-months of non-consecutive data, minus months impacted by COVID, to total 12 months of data. (For example: 9/1/2019-3/1/2020 and 7/1/2020-2/1/2021)
	4.B.3 - PCPCH meets a benchmark in the percent of patient visits with assigned clinician or team	<p>Practices that have made operational changes or experienced a decrease in patient volume because of COVID-19 may use an alternative reporting timeframe when submitting data to meet the intent of this measure.</p> <ul style="list-style-type: none"> • 1 report - 12 months of consecutive data, minus months impacted by COVID (For example: 3/1/2019 - 3/1/2020) • 2 reports - 6-months of non-consecutive data, minus months impacted by COVID, to total 12 months of data. (For example: 9/1/2019-3/1/2020 and 7/1/2020-2/1/2021)
4.G. - Medication Reconciliation and Management	4.G.2 - PCPCH develops a process, tracks and reports the percentage of patients whose medication regimen is reconciled at each relevant patient encounter.	<p>Practices that have made operational changes or experienced a decrease in patient volume because of COVID-19 may use an alternative reporting timeframe when submitting data to meet the intent of this measure.</p> <ul style="list-style-type: none"> • 1 report - 12 months of consecutive data, minus months impacted by COVID (For example: 3/1/2019 - 3/1/2020) • 2 reports - 6-months of non-consecutive data, minus months impacted by COVID, to total 12 months of data. (For example: 9/1/2019-3/1/2020 and 7/1/2020-2/1/2021) <p>Practices that have made operational changes or experienced a decrease in patient volume because of COVID-19 may use telehealth to meet the intent of this measure.</p>
	4.G.3 – PCPCH provides Comprehensive Medication Management for appropriate patients and families.	<p>Practices that have made operational changes or experienced a decrease in patient volume because of COVID-19 may use telehealth to</p>

		meet the intent of this measure. The pharmacist must still be integrated into the practice, as described in the TA Guide.
5.F – End of Life Planning	5.F.1 -PCPCH has a process to engage patients in end-of-life planning conversations and completes advance directive and other forms such as POLST that reflect patients’ wishes for end-of-life care; forms are submitted to available registries unless patients opt out.	Practices that have made operational changes or experienced a decrease in patient volume because of COVID-19 may use telehealth to meet the intent of this measure. POLST may be signed by patient electronically.
6.B - Education & Self-Management Support	6.B.2 - More than 10% of unique patients are provided patient-specific education resources.	Practices that have made operational changes or experienced a decrease in patient volume because of COVID-19 may use an alternative reporting timeframe when submitting data to meet the intent of this measure. <ul style="list-style-type: none"> • 1 report - 12 months of consecutive data, minus months impacted by COVID (For example: 3/1/2019 - 3/1/2020) • 2 reports - 6-months of non-consecutive data, minus months impacted by COVID, to total 12 months of data. (For example: 9/1/2019-3/1/2020 and 7/1/2020-2/1/2021)
	6.B.3 - More than 10% of unique patients are provided patient-specific education resources and self-management services.	Practices that have made operational changes or experienced a decrease in patient volume because of COVID-19 may use an alternative reporting timeframe when submitting data to meet the intent of this measure. <ul style="list-style-type: none"> • 1 report - 12 months of consecutive data, minus months impacted by COVID (For example: 3/1/2019 - 3/1/2020) • 2 reports - 6-months of non-consecutive data, minus months impacted by COVID, to total 12 months of data. (For example: 9/1/2019-3/1/2020 and 7/1/2020-2/1/2021)
	6.C.0 - PCPCH surveys a sample of its population on their experience of care. The patient survey must include questions on access to care, provider or health team communication, coordination of care, and staff helpfulness.	Practices that have made operational changes or experienced a decrease in patient volume because of COVID-19 may use an alternative reporting timeframe when submitting data to meet the intent of this measure and to meet the 25 survey per provider minimum

6.C – Experience of Care		<p>requirement. Surveys administered in 2018, 2019 and 2020 may be used to obtain the 25 surveys per provider minimum requirement.</p> <ul style="list-style-type: none"> • 1 report - 12 months of consecutive data, minus months impacted by COVID (For example: 3/1/2019 - 3/1/2020) • 2 reports - 6-months of non-consecutive data, minus months impacted by COVID, to total 12 months of data. (For example: 9/1/2019-3/1/2020 and 7/1/2020-2/1/2021)
	6.C.2 - PCPCH surveys a sample of its population at least every two years on their experience of care using one of the CAHPS survey tools and demonstrates the utilization of survey data in quality improvement process.	<p>Practices that have made operational changes or experienced a decrease in patient volume because of COVID-19 may use an alternative reporting timeframe when submitting data to meet the intent of this measure and to meet the 25 survey per provider minimum requirement. Surveys administered in 2018, 2019 and 2020 may be used to obtain the 25 surveys per provider minimum requirement.</p> <ul style="list-style-type: none"> • 1 report - 12 months of consecutive data, minus months impacted by COVID (For example: 3/1/2019 - 3/1/2020) • 2 reports - 6-months of non-consecutive data, minus months impacted by COVID, to total 12 months of data. (For example: 9/1/2019-3/1/2020 and 7/1/2020-2/1/2021)
	6.C.3 - PCPCH surveys a sample of its population at least every two years on their experience of care using one of the CAHPS survey tools, demonstrates the utilization of survey data in quality improvement process, and meets benchmarks on the majority of the domains regarding provider communication, coordination of care, and practice staff helpfulness.	<p>Practices that have made operational changes or experienced a decrease in patient volume because of COVID-19 may use an alternative reporting timeframe when submitting data to meet the intent of this measure and to meet the 25 survey per provider minimum requirement. Surveys administered in 2018, 2019 and 2020 may be used to obtain the 25 surveys per provider minimum requirement.</p> <ul style="list-style-type: none"> • 1 report - 12 months of consecutive data, minus months impacted by COVID (For example: 3/1/2019 - 3/1/2020) • 2 reports - 6-months of non-consecutive data, minus months impacted by COVID, to total 12 months of data. (For example: 9/1/2019-3/1/2020 and 7/1/2020-2/1/2021)