

History Button and Medical Neighborhood Report

Arkansas PCMH Portal

Arkansas Medicaid

Activity Questions Year: 2017 [Contact Us](#)

Next tracked activity is due by **March 31, 2017** [Change Payer](#)

PCMH Information

- [PCMH and its benefits](#)
- [Requirements for becoming a PCMH](#)
- [Basic facts about your practice](#)

Enrollment

- [Download PCMH forms](#)

FAQ

- [Frequently asked questions](#)
- [Portal usage FAQs](#)

Medical Neighborhood

- [Performance Reports](#)

Receive & Submit Data

- [Submit high-priority & excluded patients - due by 03/31/17](#)
- [Submit care plan attestation](#)
- [Download reports](#)
- [Submit 13-month activity - due by 01/31/17](#)
- [Submit 6-month activities - due by 06/30/17](#)
- [Submit 12-month activities - due by 12/31/17](#)
- [2017 Quality Metrics Data - due by 01/31/18](#)

Click here for history button

Medical Neighborhood Report:
Report provides PCMH providers a data analysis of other providers – currently URI in emergency rooms

Medical Neighborhood Report



Health Care Payment Improvement Initiative
Building a Healthier Future for all Arkansans

[Home](#) | [About Us](#) | [Why Payment Improvement?](#) | [How it Works](#) | [Episodes of Care](#) | [Patient Centered Medical Homes](#) | [Health Homes](#)

Search Site  [Contact Us](#)

Home

Medical Neighborhood Performance Reports

As the Arkansas Payment Improvement Initiative (APII) finishes its fifth year of activities, the DHS Division of Medical Services (Arkansas Medicaid) is preparing a data transparency initiative for 2017 called the Medical Neighborhood.

The Patient Centered Medical Home (PCMH) program has grown substantially since 2014 and provides services for over 80% of eligible Medicaid beneficiaries, administered by 900 physicians in 180 clinical sites. To facilitate PCMH stewardship of health-system resources and manage per beneficiary per year costs, Arkansas Medicaid has been providing quarterly data profiles on a web portal. Primary care providers highly value this information and have requested even more detailed information to manage their practices. Providers are increasingly interested in knowing the performance of their “medical neighborhood” to guide referrals and provide feedback to their consultants and local acute-care facilities.

Below is the first *Medical Neighborhood Performance Report* for PCMH providers. Data analysis from the Episode of Care for upper respiratory tract infections (URI) has created a spreadsheet documenting antibiotic prescribing rates for emergency departments. This report will allow performance comparisons of all emergency departments in the state.

URI is the first of several planned reports to be given the PCMH community in the near future. Fully transparent information will include hospital performance as well as that of clinical consultants on a variety of topics.

If you have questions about this report please contact the Arkansas Medicaid APII Help Desk at 1-866-322-4696, locally at 501-301-8311 or via email ARKPII@hpe.com.

Current Reports

-  [URI ED Antibiotic Metrics](#)

[Accessibility](#) | [Privacy](#) | [Security](#) | [Acceptable Use](#) Copyright © 2012 State of Arkansas. All Rights Reserved.

Click
for
report



History Button

PCMH Information
PCMH and its benefits
Requirements for becoming a PCMH
Basic facts about your practice
Enroll
Download PCMH forms
FAQ
Frequently asked questions
Portal usage FAQs
Receive & Submit Data
Submit high-priority & excluded patients
Submit care plan attestation
Download reports
Submit 13-month activity
Submit 6-month activities
Submit 12-month activities

Identification of High Priority Patients and Physician-Selected Exclusions

Arkansas Medicaid Change Payer

Provider ID Number/NPI:

Please identify both your high priority patients and your physician-selected exclusions.

- High priority patients are those patients you feel will require increased attention and upon whom certain practice support metrics will be tracked
- Physician-selected exclusions are patients that will be removed from your total cost of care calculations at the end of the performance period
- This list must be submitted within 90 days of beginning of the performance period

Attributed beneficiaries: 3600
 # beneficiaries that must be indicated as high priority: 360
 # currently identified as high priority: 360
 # beneficiaries outside high risk score: 0
 Allowed exclusions: 4
 Exclusions currently selected: 4

Beneficiary ID Beneficiary Name PCP: [All] Reset Search

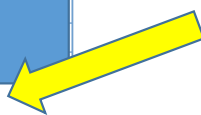
Number of Beneficiaries Per Page: 10

Showing 1 to 10 of 3600

Beneficiary ID	Beneficiary Name	ST	Include in High Priority Group	Excluded Beneficiaries	DOB	Age	Last Four SSN	Sex	# IP Visits	Most Recent IP Visit	# ED Visits	Is Beneficiary in HH?	Risk Score	Is Risk Score Historical?	PCP
			<input type="checkbox"/>	<input type="checkbox"/>		2		F	0		0	N/A	0.11	Y	
			<input type="checkbox"/>	<input type="checkbox"/>		3		M	0		0	N/A	0.00	Y	
			<input type="checkbox"/>	<input type="checkbox"/>		5		M	0		0	N/A	0.71	Y	
			<input type="checkbox"/>	<input type="checkbox"/>		14		M	0		0	N/A	0.17	Y	
			<input type="checkbox"/>	<input type="checkbox"/>		10		F	0		0	N/A	0.17	Y	
			<input type="checkbox"/>	<input type="checkbox"/>		1		M	0		0	N/A	0.17	Y	
			<input type="checkbox"/>	<input type="checkbox"/>		14		M	0		0	N/A	0.03	Y	
			<input type="checkbox"/>	<input type="checkbox"/>		16		M	0		0	N/A	0.68	Y	
			<input type="checkbox"/>	<input type="checkbox"/>		16		F	0		0	N/A	0.00	Y	
			<input type="checkbox"/>	<input type="checkbox"/>		8		F	0		0	N/A	0.71	Y	

Download PDF attributed beneficiaries
Choose top 10% by risk score
Save list
Selection Statistics
History

Download CSV attributed beneficiaries



History Button:

The history button can be found on the AHIN portal under your High Priority Beneficiary Tab. It allows you to see the beneficiaries that have been added and/or removed from your PCP's caseload. It will update on the AHIN portal quarterly with your caseload listing.