

Patient recall can be a solution for many common practice management obstacles: slow schedules, low immunization rates, and gaps in well visits. Did you know that a robust recall can also save and earn you stable revenue? A strong recall program protects a practice from financial set-backs and fosters patient relationships, opening the door to many opportunities.

Getting Started With Patient Recall

Patient recall is a process, not a one-step solution to an issue. It requires a commitment to workflow change that will help promote growth long term. To learn how to keep patients coming through your door all year long, first, you'll need to identify the obstacles you're facing and/or your practice's recall goals. This way, you can more closely tailor your recall system to your practice's opportunities for growth.

We've created 3 patient recall worksheets to help you outline a plan of action. Select the worksheet below that most closely matches your practice's current objectives for improving or starting a patient recall system and complete the sheet with your most recent available data. Then we'll recommend strategies, PCC tools, and options for you to get started with your brand-new (or new-and-improved) patient recall system.

BUILD YOUR OWN PATIENT RECALL SYSTEM

For practices just getting started with patient recall or if you'd like to start with the basics. This worksheet covers key tools for collecting patient recall data and identifying opportunities for process improvement.

IMPROVE HEDIS® MEASURES WITH PATIENT RECALL

This option is great for practices focused on improving HEDIS® measures for PCMH certification.

CLOSE CLINICAL CARE GAPS WITH PATIENT RECALL

This worksheet is most useful for practices seeking to build on opportunities to improve rates such as immunizations, well-care visits, chronic care cases, and more.

Build Your Own Patient Recall System

Complete the below questions with your practice's most recent available data. To ensure your answers are most helpful for your patient recall strategy, try to be as specific in your answers as possible. PCC clients can access much of this information via the [**Practice Vitals Dashboard**](#).

Why do you want to start a patient recall system? Why is it important for your practice, staff, and patients? (For example, "I want to improve our immunization rates for a state program," or "I want to qualify for PCMH.")

Building a patient recall system from the ground up requires a commitment of time and effort. Who will own/champion the patient recall process project?

If applicable, who are the stakeholders in this project? For example, who will the project owner report their findings to? Whose work will the project change? How will changes affect parents? Patients?

Identify the clinical conditions you'd like to improve. For example, missing vaccines, missing well visits, obesity, ADHD, or asthma.

Build Your Own Patient Recall System

Identify one goal you want to prioritize first. There's no wrong answer! Starting with a smaller goal will help you practice process improvement and succeed in long-term goals.

Examine your goal and determine how to measure it. Typically, you can measure your practice's analytics to see your progress on goals like increased newborn visits, well-visit rate, and HPV rates. If you do not have a practice analytics tool, prioritize your goals based on what you perceive to be the highest need for your practice – for example, if you need to fill the schedule and you suspect you have lots of missing screenings, focus on these first.

Now that you know your goals, you'll need to record your performance history up to the current date. What is a reasonable baseline target for your goal? This will be unique to your practice and community: for example, a well-visit rate of 60% may be great for one practice just OK for another. We've written an example for you.

Build Your Own Patient Recall System

What date will the project be “finished” and returned to stakeholders for review? A good target is a timeline that feels reasonable for the work involved, but not so far in the future that stakeholders can’t easily recall mistakes, challenges, or successes.

If applicable, who are the stakeholders in this project? For example, who will the project owner report their findings to? Whose work will the project change? How will changes affect parents? Patients?

Identify the steps necessary to accomplish your target goal. For example, a practice who wants to improve follow up visits for patients under 2 could:

- Identify CPTs for patient visits under 2 to track improvement
- Make reminder phone calls to 200 lapsed patients per week
- Draft an email newsletter with reminders to make appointments
- Update practice website and social media
- Implement next appointment reminders at the close of every visit

How many staff members are required to implement your strategy? What time commitments will they need? What workflows might change?

Build Your Own Patient Recall System

Record your process below.

Goal 1: **Target Rate:** **Owner:**

Project Due Date: **Successful?**

What to improve next time:

Keep Going!

You've completed one part of a successful recall system! Whether you decide to keep, tweak, or toss this project, don't stop here. Return to steps 4 and 5 to choose a new goal or adjust your strategy and continue to build your project plan.

Learn more about filling in the essential patient recall visits with our webinar: [Preventive Care is the Most Important Work Pediatricians Do.](#)

WHAT NEXT?

If you successfully completed your first goal, congratulations. Return to steps 4 and 5 and choose another from your list. If you weren't successful the first time, don't worry – process improvement is just that: a process.

You can look at these improvements as mini quality improvement projects: as such, you should take the opportunity to consistently check your work and improve where necessary. Make sure that your quality check includes input from stakeholders, identifies strengths and weaknesses, and includes any updates in healthcare guidelines or policy from the AAP, Bright Futures, or the NCQA.

Improve HEDIS® Measures with Patient Recall

To qualify as a Patient-Centered Medical Home (PCMH), you'll need to meet the required HEDIS® measures for your state. More information about certification is available [here](#). Patient recall is a tool that can help you improve care quality measures, one component of PCMH standards which can get you ready for certification or maintenance of certification.

Complete the below questions with your practice's most recent available data. To ensure your answers are most helpful for your goal of improving or maintaining HEDIS® measures, try to be as specific in your answers as possible. PCC clients can access much of this information via the [Practice Vitals Dashboard](#).

Why do you want to improve HEDIS® scores or qualify for PCMH? Why is it important for your practice, staff, and patients? (For example: "Financial incentives," "More cohesive teamwork," or "Marketability to families".)

Who owns or will own the HEDIS® measures improvement project?

Who are the stakeholders in this project? For example, who will the project owner report their findings to? Whose work will the project change?

Improve HEDIS® Measures with Patient Recall

Track the results for all the HEDIS® measures required. If you have not begun tracking measures, use the most recent data you have for the measures suggested for your state.

Identify the HEDIS® measures you need to improve. Where are there gaps, and what changes are necessary to meet HEDIS® criteria?

Are the HEDIS® measures you intend to improve consistent across insurance companies? If not, make note of the differences below. After this step, you may wish to update your answers to step 5 with the highest measures required to ensure your measures qualify across all payers.

Payer

Measure Required

Improve HEDIS® Measures with Patient Recall

Identify a goal you want to prioritize first. There's no wrong answer! Choose your current biggest challenge, a staff favorite, or an easy win. We recommend choosing one measure to improve at a time. Slow and steady progress helps ensure that your improved measures are reflections of changes in your practice's systems, which are more likely to last...

What is a reasonable baseline target for your goal? This will be unique to your practice and community. For example, if you currently perform ADHD follow-up visits once a year but HEDIS® measures in your state require 2 or more visits, success is increasing ADHD follow-up visits by at least 100%.

What date will the project be "finished" and returned to stakeholders for review? A good target is a timeline that feels reasonable for the work involved, but not so far in the future that stakeholders can't easily recall mistakes, challenges, or successes.

How will you determine if your project is successful? Who decides?

Improve HEDIS® Measures with Patient Recall

Identify the steps necessary to accomplish your target goal. For example, a practice who wants to improve follow up visits for patients under 2 could:

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- Draft an email newsletter with reminders to make appointments
- Update practice website and social media
- Implement next appointment reminders at the close of every visit

How many staff members are required to implement your strategy? What time commitments will they need? What workflows might change?

Improve HEDIS® Measures with Patient Recall

Record your process below.

Goal 1:

Target Rate:

Owner:

Project Due Date:

Successful?

What to improve next time:

On the Road to PCMH

Congratulations on improving HEDIS® measures! You're on the way to achieving or maintaining PCMH certification. While HEDIS® measures are just one component of qualification, they are also great strides toward improving care for patients according to **Bright Futures Guidelines**.

PCC embeds Bright Futures guidelines into PCC EHR, which means your practice can easily track your progress towards your goals.

WHAT NEXT?

If you successfully completed your first goal, congratulations. Return to step 7 and choose another from your list. If you weren't successful the first time, don't worry – process improvement is just that: a process.

You can look at HEDIS® improvements as mini quality improvement projects: as such, you should take the opportunity to consistently check your work and improve where necessary. Make sure that your quality check includes input from stakeholders, identifies strengths and weaknesses, and includes any updates in healthcare guidelines or policy from the AAP, Bright Futures, or the NCQA.

Close Clinical Care Gaps with Patient Recall

This worksheet is most useful for practices seeking to build on known opportunities to improve rates such as immunizations, well-care visits, chronic care cases, and more.

Complete the below questions with your practice's most recent available data. To ensure your answers are most helpful for your patient recall strategy, try to be as specific in your answers as possible. PCC clients can access much of this information via the [Practice Vitals Dashboard](#).

List the rates your practice aims to improve with patient recall. We recommend starting with 1-2 goals to ensure your improvement process remains manageable.

Why does your practice need to improve this goal? List the reasons below. It may also be helpful to identify the obstacles currently preventing your practice from reaching this goal. We've added an example for you.

Why

Obstacles

Who will own/champion the patient recall process project?

Close Clinical Care Gaps with Patient Recall

If applicable, who are the stakeholders in this project? For example, who will the project owner report their findings to? Whose work will the project change?

Identify your potential obstacles in completing this patient recall effort and brainstorm solutions with your team. This may help identify underlying problems that you can address. For example:

"Vaccine hesitancy and low patient engagement may contribute to our low HPV rates. We can: vaccine resources to our website and social media, practice vaccine engagement conversations, and commit to spending extra time with families to talk about vaccines."

What is a reasonable baseline target for your goal? This will be unique to your practice and community: for example, a well-visit rate of 60% may be great for one practice just OK for another. We've written an example for you: *Improve WVR by 5% every 3 months.*

What date will the project be "finished" and returned to stakeholders for review? A good target is a timeline that feels reasonable for the work involved, but not so far in the future that stakeholders can't easily recall mistakes, challenges, or successes.

Close Clinical Care Gaps with Patient Recall

How will you determine if your project is successful? Who decides?

Identify the steps necessary to accomplish your target goal. For example, a practice who wants to improve follow up visits for patients under 2 could:

- Identify CPTs for patient visits under 2 to track improvement
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How many staff members are required to implement your strategy? What time commitments will they need? What workflows might change?

Close Clinical Care Gaps with Patient Recall

Record your process below.

Goal 1:

Target Rate:

Owner:

Project Due Date:

Successful?

What to improve next time:

Keep Going!

You're on the way to improving gaps in care at your pediatric practice and improving access to medical care for kids. Whether you decide to keep, tweak, or toss this project, don't stop here.

WHAT NEXT?

If you successfully completed your first goal, congratulations. Return to steps 4 and 5 and choose another from your list. If you weren't successful the first time, don't worry – process improvement is just that: a process.

You can look at these improvements as mini quality improvement projects: as such, you should take the opportunity to consistently check your work and improve where necessary. Make sure that your quality check includes input from stakeholders, identifies strengths and weaknesses, and includes any updates in healthcare guidelines or policy from the AAP, Bright Futures, or the NCQA.