NRHI High-Value Care SAN Learning Programs At-A-Glance

This calendar reflects upcoming and archived NRHI SAN learning program modules. Calendar subject to change based on program requirements/needs. For archived modules and additional resources, please visit: [https://nrhisan.healthdoers.org/home](https://nrhisan.healthdoers.org/home)

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<thead>
<tr>
<th>Learning Programs</th>
<th>Expert Instructor</th>
<th>Program Launch Date</th>
<th>Change Package Alignment</th>
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<tr>
<td><strong>Designing and Evaluating Quality Improvement Programs</strong></td>
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<tr>
<td>Module 1: Creating Leadership and Culture for QI</td>
<td>Maine Quality Counts</td>
<td>Archived</td>
<td>2.3.1; 2.3.2</td>
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<tr>
<td>Module 2: Understanding QI Strategies and Methods for PTNs &amp; Practices</td>
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<tr>
<td>Module 3: Building the Business Case for QI</td>
<td>Better Health Partnership</td>
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<td>2.1; 2.2; 3.1; 3.3; 3.4</td>
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<tr>
<td>Module 4: Practice Facilitators’ Role in Engaging Clinicians and Practices</td>
<td>Oregon Health Care Quality Corporation</td>
<td>Archived</td>
<td>2.1.1; 2.1.2; 2.13; 2.2.2; 2.2.3; 2.2.4; 2.3.1; 2.3.2</td>
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<tr>
<td><strong>QI Learning Labs Available to PTNs Upon Request</strong></td>
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<tr>
<td>Contact Stacy Donohue: <a href="mailto:sdonohue@nrhi.org">sdonohue@nrhi.org</a></td>
<td></td>
<td>Ongoing</td>
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<tr>
<td><strong>Navigating Payment Reform</strong></td>
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<tr>
<td>Module 1: Beginning to Make Sense of MACRA / Quality Payment Program</td>
<td>Network for Regional Healthcare Improvement</td>
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<td>2.3; 3.3</td>
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<tr>
<td>Module 2: Preparing Providers for MIPS: Focus on Improvement Activities</td>
<td>Maine Quality Counts</td>
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<tr>
<td>Module 3: Building for the Future: What You Need to Know About Patient Reported Outcomes</td>
<td>Minnesota Community Measurement</td>
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<tr>
<td>Module 4: Quality Payment Program: Engaging Your Community to Build for the Future</td>
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<td>Archived</td>
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<td><strong>Primary Care Practice Transformation</strong></td>
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<tr>
<td>Module 1: Primary Care ‘Bright Spots’: Learning from High-Value Providers</td>
<td>CERC Stanford / NRHI SAN</td>
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<tr>
<td>Module 2: Establishing Deeper Patient Relationships</td>
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<tr>
<td>Module 3: Engaging Physicians in Providing High-Value Care</td>
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<td>Module 4: Promoting Effective Team-based Care to Support Behavioral Health Integration</td>
<td>CERC Stanford / NRHI SAN</td>
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<td><strong>Improving Patient and Family Engagement</strong></td>
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<tr>
<td>Module 1: How to Help Clinicians Interpret Their Patient Experience Results</td>
<td>Massachusetts Health Quality Partners</td>
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<td>1.1.1; 1.1.2; 2.1.1; 2.1.2</td>
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<td>Module 2: Using Motivational Interviewing and Shared Decision Making Tools to Facilitate Change</td>
<td>Pittsburgh Regional Health Initiative</td>
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<td>1.1.1; 1.1.2; 1.1.3; 1.1.4; 1.6.2</td>
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<td>Module 3: How to Actively Engage Patients in Their Care</td>
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<td>Module 4: Advanced Care Planning and End of Life Care</td>
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<td><strong>Advancing Care Management</strong></td>
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<td>Module 1: Care Management Through Registries</td>
<td>Institute for Clinical Systems Improvement</td>
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<td>Module 2: Powering Up Your Care Management</td>
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<td>1.3; 1.5</td>
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<td><strong>Total Cost of Care (TCOC) and Understanding and Maximizing the Value of Quality and Resource Use Reports</strong></td>
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<tr>
<td>TCOC Module 1: Understanding and Measuring Total Cost of Care</td>
<td>Minnesota Community Measurement</td>
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<td>TCOC Module 2: Total Cost of Care in Everyday Practice</td>
<td>Institute for Clinical Systems Improvement</td>
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<td>TCOC Module 3: Using Total Cost of Care Reports</td>
<td>Oregon Health Care Quality Corporation</td>
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<td>QRUR Module 1: QRUR 101: Introducing the value of using QRUR</td>
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<td>QRUR Module 2: QRUR 201: Understanding how to use the QRUR</td>
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<td>QRUR Module 3: QRUR 301: Drilling down - how to use the Supplemental QRUR</td>
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<td>QRUR Module 4: QRUR Module 4: Leveraging Your QRUR to Support MIPS Performance</td>
<td>HealthInsight</td>
<td>3/22/18</td>
<td>2.3.1; 2.3.2; 3.3.1; 3.3.4</td>
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- **Getting to Affordability Learning Modules**
  - *A series of short interactive videos on Total Cost of Care (Topics include: What is it, Why is it important, Measuring, Reporting, Stakeholder Engagement, and Physician Tracks)*

- **Reducing Unnecessary Utilization**
  - Module 1: Creating Clinician and Consumer Engagement to Implement Choosing Wisely in Practice
  - Module 2: Creating a Transition Care Model to Improve Care Coordination
  - Module 3: Engaging Front Line Clinicians to Understand and Manage Practice Pattern Variation
  - Module 4: Strategies for Clinics to Address Imaging for Low Back Pain and Cost of Care
  - Module 5: Improving Access to Specialty Care to Reduce Unnecessary ED Visits
  - Module 6: Strategies to Address Re-Admissions

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Last updated 3/12/18
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<th>Module 7: Strategies for Working with Specialists to Address Unnecessary Hospitalizations</th>
<th>Pittsburgh Regional Health Initiative</th>
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<tr>
<td>Behavioral Health Integration</td>
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<tr>
<td>Module 1: Addressing Behavioral Health Issues in Primary Care</td>
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<td>Module 2: Building Internal Capability</td>
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<td>Module 3: Care Processes and Connections</td>
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<td>Module 4: Measuring and Improving Care for Depression</td>
<td>Minnesota Community Measurement</td>
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