



COMPASS Intervention Guide

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Annotation 2: Registry Documentation

To manage the patient population, a registry tool is required. There are many examples of registries and decision support tools that will help the care team meet the health needs of patients. It is very helpful to have an electronic health information tracking system modified to use specific data fields to proactively track populations.

A registry is intended to facilitate the following:

1. Direct care of patients on an individual basis
2. Population management of patient panels by care managers and other site clinicians and leaders
3. Provide outcomes data at the level of partners, medical groups, clinics, clinicians, and care managers
4. Provide quality improvement data that assess implementation and fidelity to the model
5. Evaluation of care in meeting outcomes

Once a patient has been identified and engaged in COMPASS, care managers must note their enrollment in a registry (or electronic health record). A computerized registry of care-monitoring information including dates of visits and initial and most recent PHQ-9, HbA1c, SBP, and LDL values is used to closely track and monitor processes, severity, follow-up needs and care plan adjustments. The care manager will document patient progress and use this tracking system throughout the course of COMPASS care. Registries should include alerts to care managers regarding patients who have not been contacted in a reasonable time period as well as patients who have not reached control of disease parameters.

As an example, the Care Management Tracking System (CMTS) is a sophisticated disease management registry developed by the AIMS Center. The CMTS facilitates collaborative care by tracking a population of patients and facilitating their care. It does this by alerting clinicians when a patient hasn't been seen for a long time or when the patient hasn't adequately improved. The CMTS also facilitates measurement-based treatment-to-target (treatments are actively changed until the clinical goals are achieved) and accountable care (providers are accountable and reimbursed for quality of care and clinical outcomes, not just the volume of care provided) (*Aims Center, 2014*).

To assess COMPASS implementation and fidelity to the model, data from the registry should be pulled regularly and processed using the Aims and Measures listed in Appendix B. The feedback from these reports should be used to improve both the care of individual patients and also the health of the population.

Supporting Documents

- *AIMS Care Management Tracking System (Registry)*
- *Registry: What's My Role?*
- *COMPASS Registry Technical Specifications*
- *COMPASS Registry Requirements*
- *COMPASS Registry Tools and Templates for Care Management*
- *COMPASS CMTS Screenshots*