

2027 PCMH Recognition: Summary of Questions for Public Comment

Updates to 2027 PCMH Recognition

Background

1. How many practice sites does your organization operate?
2. How many clinicians currently practice at your organization?
3. How many patients does your organization serve annually?
4. What percentage of your patients are pediatric?

CM 01: Identifying Patients for Care Management

5. Do you agree with requiring evidence of at least two categories (instead of three) for pediatric-specific sites?
6. Would this change make it easier for your practice to care manage a pediatric population (e.g., relevance, better fit for workflows, impact)?
7. Which of these five categories do you most commonly use to identify patients for care management?

CM 02: Monitoring Patients for Care Management

8. Do you agree with expanding the requirement of 30 patients to “at least 30 patients or 1% of its total patient population, whichever is smaller?”
9. Based on your practice's size and composition, does this change reduce burden for preparing survey evidence?
10. Would the 1% threshold apply to any of your organization's practice sites?

CM 04: Person-Centered Care Plan

11. Do you agree with changing “identified for” with “engaged in” care management in the criterion stem?
12. Do you agree with the inclusion of “Names and roles of care team members” as a required component of all care plans?
13. Do you agree with the inclusion of “barriers to care” (physical, emotional or social) as a required component of all care plans?
14. Which barriers to care does your practice currently document in care plans? Select all that apply.
15. Do you agree with modifying the requirement for a comprehensive problem list by specifying it is “active?”
16. Do you agree with replacing, “expected clinical outcome/prognosis and patient treatment goals to meet the expected clinical outcome” with “a SMART goal (specific, measurable, attainable, relevant, time limited) that is relevant to the care plan and mutually agreed on by the patient/family/caregiver and the primary provider?”
17. Would documenting SMART goals change your current workflows for documenting goals in patient care plans compared to the way this requirement is currently specified? (expected clinical outcome/prognosis, patient treatment goals to meet the expected clinical outcome)
18. Which of these fields do you currently document (or have the capability to document) in your practice’s care plans? Select all that apply.
19. If your organization does not currently document Names and roles of care team members or barriers to care, how much time would you need to begin documenting these fields in care plans?

CM 07: Patient Barriers to Goals

20. Do you agree with retiring CM 07: Barriers to Care as an elective and including its requirements in CM 04 (Core)?

Global Questions

21. Do the proposed updates improve feasibility and applicability for different types of practices, health conditions and populations?
22. Do the proposed updates reduce burden for preparing evidence for survey, compared to documentation practices use daily for care management?
23. Are the proposed updates easily understandable and clearly written?
24. Do you have any other feedback regarding the proposed updates?