



***Final Report Summary:
Engaging the Entire Care Team to Facilitate
a Comprehensive Pain Management
Program in the Primary Care Setting***

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Program Overview

Purpose: Increase primary care physician and team member knowledge, expertise and confidence in utilizing health information technology to implement a population health management program that utilizes evidence-based (EB) guidelines to appropriately and cost-effectively treat new and existing patients who present with pain.

Key Objectives:

1. Increase widespread use of chronic pain evidence-based guidelines and assessment tools in primary care practices, using health technology for documentation and population health management;
2. Establishment of a primary care practice environment that fosters coordination and communication among providers and community partners/resources to support effective non-pharmacological/pharmacological approaches to pain management;
3. Increase patient satisfaction and quality of life for those with pain; and
4. Reduction in healthcare costs associated with avoidable emergency department/hospital admissions, inappropriate referrals and need for additional inpatient/outpatient services



Program Measures

1. Number of patients who have documentation of a care plan that addresses personal goals, sleep, physical activities, stress management and pain reduction in the medical record and identifies potential barriers to patient
2. Number of patients with pain assessment completed at the initial visit using standardized tool that addresses pain intensity, location, mechanism, current functional status and follow up plan
3. Number of patients with referrals to physical rehab and or behavioral management therapy
4. Number of patients with documentation of reassessment of pain at follow up visits using a standardized tool
5. Number of patients with documentation of reassessment of pain at follow up visits using a standardized tool who had a reduction in pain severity
6. Number of patients diagnosed with chronic pain who are screened for chemical dependency before being prescribe opioid medications
7. Number of patients who are prescribed an opioid who have opioid agreement form and urine toxicology in medical record



Program Participants

Participating Practices					
Practice	# Providers	Specialty	Region	Setting Type	Ownership
1	2	Family Medicine	West	Rural	Private/IPA
2	5	Internal Medicine	South	Suburban	Hospital-Owned
3	2	Family Medicine	South	Suburban	Hospital-Owned
4	3	Family Medicine	South	Suburban	Hospital-Owned
5	5	Family Medicine	Central	Rural	Private
6	2	Family Medicine	Central	Suburban	Private
7	2	Family Medicine	West	Rural	Private/IPA
8	2	Internal Medicine	North	Urban	Private
9	2	Family Medicine	East	Suburban	Private
10	2	Family Medicine	East	Suburban	Private



Program Results

