# MiCMRC CM 101- Roadmap

Step 1: CM Introduction

Step 2: CM Basics

Step 3: CM Intermediate Step 4: Ongoing Development

## CM Introduction

## Webinar

CM 101
 Webinar

## **CCM Training**

## Implementation

- MiPCT Implementation Guide
- CM Visit
   Documentation
   Templates
- CM Orientation roles and responsibilities

#### Experiences:

- Shadow CM
- Shadow other team members

### Recorded Webinars:

- 5 Step CM process
- Case load Management
- Leadership
- Educational Advocacy
- Motivational Interviewing
- Depression
- Hypertension
- Obesity
- TOC and the LACE Tool
- Diabetes
- Management of Pain
- Gaps in Care Process Improvement
- Advanced Care Planning
- Case Closure

#### Resources:

- Explore role of Care Managers as leaders and change agents
- West Front Primary Care CM Workflow (PDF)
- Self-Management, The Value and Application with Chronic Condition Populations (PDF)
- Diabetes for Care Manager Part I
- Diabetes for Care Manager
  Part II
- Hypertension Part I
- Depression
- Depression Management Slides
- LACE Tool (MS Word)
- Patient Health Questionnaire (PHQ -9) (PDF)
- Spectrum Health Self Management Prevention Tool (PDF)
- Care Management Case Closure (PDF)
- Spectrum Health Case Closure Guideline (PDF)
- Transitioning patient from Care Management to Practice Management
- Gaps in Care Process
   Management in a Primary Care Setting
- Advance Care Planning

#### Resources:

- PGIP-Physician Group Incentive Program
- PCMH-Patient Centered Medical Home
- PCMH-N- Patient Centered Medical Home Neighborhood
- Quality/HEDIS
- Population Health Management/Registry
- Palliative Care
- Team based Care
- Pediatric Care Management
- Michigan Department Community Health – Community Resources

- Care
   Management
   Connection
   Newsletter
- Highlight Team Best Practices
- Care Manager
   Success Stories
- Team Based
   Success Stories
- Live CMRC Webinars