

RESOURCES FOR OUR COLLEAGUES

NHN
EDUCATIONAL

Resources available to all
NHN clinics, hospitals
and systems

NEBRASKA
HEALTH
NETWORK



RESOURCES

The Nebraska Health Network provides a number of educational resources to help our physicians and providers advance our mission of delivering patient-centered, high-value care.

Diabetes	1-2
Cardiology/Heart	3
Chronic Care Management	4
Pulmonary	5
Medicare Annual Wellness Visits	6
Medical Risk Adjustment	7-8
General Health, Prevention & Screenings	
Antibiotics	9
Colon Cancer	10
Site-of-Care	11
Other	12
NHN Strategy 2020	13
Community Relay	14
Z codes	15

DIABETES

Diabetes Screening Guide

Health screenings are a great way for your medical team to identify patient health problems early and to assist in the treatment of many health conditions.

This Diabetes Screening Guide can help track and schedule annual screenings, exams and vaccinations that are important elements for a diabetic care plan.

Common Diabetic Screening Definitions

Dilated Eye Exam
This exam screens for diabetic retinopathy (swelling or leaking of blood vessels in the retina), which is the most common diabetic eye disease and a leading cause of blindness in the United States. For an eye exam, your vision may be tested with a dilated eye exam or a contact screen may be used.

Foot Exam
During this exam, your physician will look for problems signs, including blood flow, sensation or skin changes.

A1C Test
This blood test provides information about your average level of blood sugar over the past three months.

Kidney Function Test
This screening examines your urine (looking for protein in your urine or blood basic or comprehensive metabolic panel) to determine how your kidneys are performing.

Fasting Cholesterol Test
This panel measures your total cholesterol, triglycerides, good and bad cholesterol levels to provide insight on possible risks of developing conditions like heart attack, stroke or coronary artery disease.

Blood Pressure
In order to control your blood pressure, you need to know your numbers and receive advice on healthy lifestyle changes. The higher your blood pressure is, the greater your risk for health problems in the future.

Weight
Some people don't get weighed at their doctor's office, but it is extremely important in monitoring your diabetes. Uncontrolled diabetes may cause weight loss or weight gain, due to your body not converting the foods you eat into the proper energy correctly.

Vaccines
Influenza (flu) is a recommended vaccine, which is a live vaccine. The recommended vaccine is recommended for people under 65 years old. Pneumococcal vaccine helps protect against pneumonia, which is a leading cause of death in people with diabetes. It is recommended for people under 65 years old. Tetanus (Td) vaccine helps protect against tetanus, which is a leading cause of death in people with diabetes. It is recommended for people under 65 years old. Shingles vaccine helps protect against shingles, which is a leading cause of death in people with diabetes. It is recommended for people under 65 years old. Tdap vaccine helps protect against tetanus, diphtheria, and pertussis, which is a leading cause of death in people with diabetes. It is recommended for people under 65 years old.

A Preventive Screening Guide to Manage Your Diabetes

Health screenings are a great way for your medical team to identify health problems early and to assist you in the treatment of many health conditions. Use the resource below to track and schedule annual screenings, exams and vaccinations that are important elements in your diabetic care plan.

Screening or Test	Check if Completed	Record Your Results	Date Completed or Date You are Scheduled
A1C test			
Blood Pressure			
Cholesterol test			
Dilated Eye Exam			
Foot exam			
Influenza (flu) vaccine			
Kidney function test			
Pneumococcal vaccine			
Shingles vaccine			
Tdap vaccine			
Weight			

The screenings and tests above are typically completed on an annual basis. However, speak with your healthcare professional regarding which vaccines and tests are best for you. Some vaccines may occur for individuals with life-threatening allergies, a weakened immune system or those who are pregnant.

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Available in Spanish!

Understanding Type 2 Diabetes

This educational document is designed to help patients understand Type 2 Diabetes and proactive steps they can take to help manage their care. Available in English and Spanish.

Partnering with Your Health-care Team

It is important that you work with your healthcare team to proactively manage your diabetes. Here is a guide to help understand how often you should see your provider and which screenings, tests or vaccinations might be needed.

Every Medical Visit	Every Year	As Directed by Provider
<ul style="list-style-type: none"> Foot exam Blood pressure Weight/BMI (body mass index) Review all medications 	<ul style="list-style-type: none"> Dilated eye exam Cholesterol panel HbA1c Kidney function tests Urine A1C blood 	<ul style="list-style-type: none"> Meet with dietitian A1C test Pneumonia Shingles Colorectal cancer Tetanus

Why is an A1C test important?

The A1C test result reflects your average blood sugar levels over three months. The higher your A1C level, the more sugar is in your blood, which increases your risk of diabetes.

An A1C Test can help you manage your diabetes by:

- Confirming self-testing blood sugar results
- Judging whether a treatment plan is working
- Showing you how healthy choices can make a difference in controlling your diabetes

The table below shows the average sugar levels:

A1C (%)	Estimated Average Sugar Levels (mg/dL)	My risk
12	289	Very high
11	240	High
10	212	High
9	183	High
8	154	High
7	125	High

What is Type 2 diabetes?

Type 2 diabetes is the most common form of diabetes. If you have type 2 diabetes, your body does not use insulin properly, which causes your blood glucose (sugar) levels to rise higher than normal. Over time, high blood sugar levels can cause serious health problems.

Common Diabetes Complications

- Heart disease
- Stroke
- Nerve damage (neuropathy), which can lead to amputations and skin ulcers
- Vision loss
- Kidney failure, which can require dialysis

How can I help manage my diabetes?

- Take your medication(s) as prescribed
- Check your blood sugar level regularly and keep a log as directed
- Exercise at least 30 minutes per day and stay active. Sample activities include walking, water aerobics or yoga.
- Consult a registered dietitian to develop a healthy, well-balanced diet of:
 - Lean protein
 - Whole grains
 - Low fat dairy
 - Vegetables, fruits and nuts
- Limit foods such as:
 - Sugary drinks
 - Sugary snacks
 - Alcohol
 - High fat foods
 - Trans fats
- Stop or avoid smoking or using tobacco products
- Stay up to date with your health screenings
- Work with your healthcare team to set and maintain healthy living goals

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Frequently asked questions about Diabetic Eye Exams & Retinopathy

Why are regular eye exams so important for patients with diabetes?

Diabetic eye exams are important for patients with diabetes because they can help detect and prevent vision loss before it becomes permanent. Regular eye exams can also help detect and prevent other health problems that can affect your vision.

How does an eye doctor detect retinopathy?

Retinopathy is a complication of diabetes that can damage the blood vessels in the back of the eye. An eye doctor can detect retinopathy by looking at the back of the eye with a special light. They can also take pictures of the back of the eye to help monitor the disease.

How is this different from a "normal" eye exam?

A normal eye exam is a comprehensive eye exam that checks your vision, eye health, and the health of the structures in your eye. A diabetic eye exam is a more thorough exam that specifically looks for signs of retinopathy and other complications of diabetes.

What will this cost me?

The cost of a diabetic eye exam varies depending on your insurance coverage. Some insurance plans cover the cost of a diabetic eye exam, while others may not. It is important to check with your insurance provider to see what is covered.

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Poster Available

Diabetic Eye Exams and Retinopathy

Eye exams are critically important for diabetic patients. This one-page overview addresses Frequently Asked Questions.

Diabetes - Daily Self Check

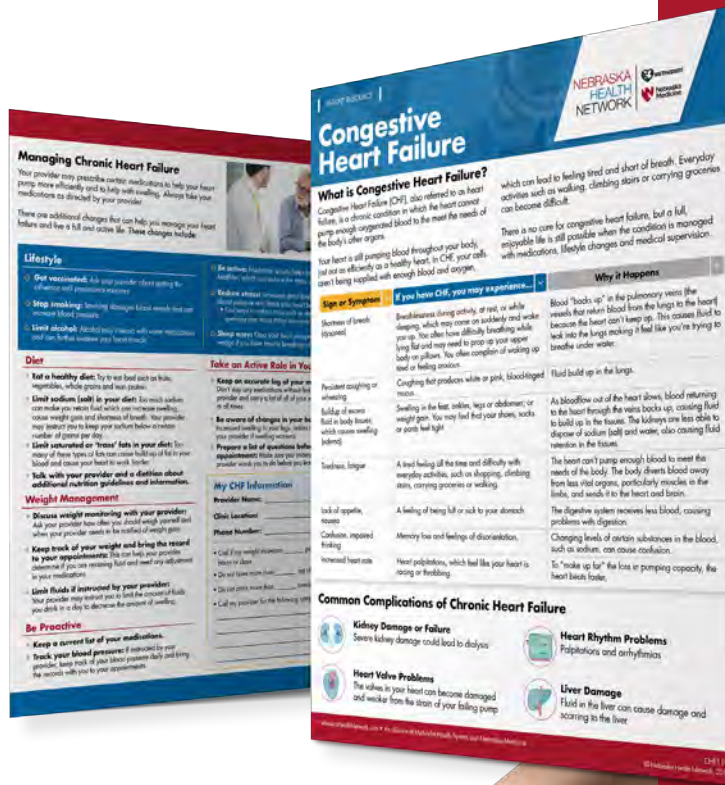
Featured in our Daily Self Check Series, this educational handout helps patients conduct a daily self check to monitor their condition. At-a-glance, patients can see whether they are in the Green, Yellow or Red Zone and what the recommended next steps are.



Type 2 Diabetes Patient Communication Campaign

NHN has developed a number of resources to help supplement your patient outreach efforts. Choose from a series of social media messages that are formatted for use on Facebook, Twitter and LinkedIn; or customize our patient education article that can be used within your practice newsletter, on your blog or sent directly to patients.

CARDIOLOGY



Congestive Heart Failure Overview

This educational resource helps CHF patients understand their symptoms, associated complications and ways to proactively manage their disease and health.



Daily Self Checks: Hypertension and Congestive Heart Failure

Featured in our Daily Self Check Series, these educational handouts help patients understand Congestive Heart Failure and Hypertension. At-a-glance, patients can see whether they are in the Green, Yellow or Red Zone and what the recommended next steps are.

Blood Pressure Card

This pocket card helps accurately measure and monitor blood pressure.

CHRONIC CARE MANAGEMENT

CCM Overview

CCM offers personal support to patients with complex needs. This added level of care and service leads patients to a healthier lifestyle by proactively managing their care and providing a trusted clinical resource they can reach around-the-clock.



Chronic Care Management
- OVERVIEW -

What is Chronic Care Management?

Chronic Care Management offers personal support to patients with complex needs. This added level of care and service leads patients to a healthier lifestyle by proactively managing their care and providing a trusted clinical resource they can reach around-the-clock.

CCM is designed for patients with two or more chronic conditions that are anticipated to last at least 12 months or until the patient's death. Patients enrolled in CCM services benefit from an entire care team focused on their needs, increased communication with their provider and improved care coordination.

Who can perform CCM services?

- Registered Nurses
- Licensed Practical Nurses
- Medical Assistants
- MDs
- PACs
- APRNs
- Contracted third party vendors

Note: The RN, LPN or MA must be employed in the same clinic as the billing clinician. MD, PAC and APRN can only perform CCM services under billing code 99491.

*Clinical Staff (receptionist) cannot perform CCM services

Chronic Care Management

What is Chronic Care Management?

Chronic Care Management (CCM) is a care coordination service that is completed outside of your regular visits with your health-care provider. This program provides you with around-the-clock access to care that will help you stay on track with your treatments and overall care plan.

Are You Eligible?

If you live with two or more chronic conditions, CCM can help you manage your care. Some examples of chronic conditions include, but are not limited to:

- Alzheimer's and Related
- Dementia
- Arthritis
- Asthma
- Cancer
- COPD
- Depression
- Diabetes
- Heart Failure
- Hypertension
- Osteoporosis

Continuous Care

When you have more than one chronic condition, there may be times when you need immediate answers to your health needs and questions. CCM grants you 24-hour access to a qualified health individual who can help you. You will be provided with multiple methods of communication beyond just your phone, such as a secure email portal.

Chronic Care Management
- PATIENT SCENARIOS -

Chronic Care Management (CCM) offers personal support to patients with complex needs. This added level of care and service leads patients to a healthier lifestyle by proactively managing their care and providing a trusted clinical resource they can reach around-the-clock.

CCM is designed for patients with two or more chronic conditions that are anticipated to last at least 12 months or until the patient's death. Patients enrolled in CCM services benefit from an entire care team focused on their needs, increased communication with their provider and improved care coordination.

CCM demonstrates how CCM services and billing work on a monthly basis:

Billing code for each example	Minimum Time	Aug. 2019 Reimbursement
First visit only (initial care visit)	20 min.	\$43
	40 min.	\$194
Additional 30 min.	30 min.	\$47
MD, DO, PAC or APRN	30 min.	\$83
PA consulting visit	N/A	\$64

Each code, please reference CMS billing guidelines.

67 years old • Medicare

Diabetes and hypertension. Sam began CCM services at his Medicine Annual Wellness Visit.

Time Spent

- 10 minutes
- 20 minutes
- 20 minutes • Bill 99490
- 10 minutes
- 7 minutes
- 10 minutes
- 17 minutes • General Bill
- 25 minutes
- 10 minutes
- 35 minutes • Bill 99490



CCM Patient Scenarios

Take a look at Chronic Care Management in action. This patient scenario resource walks you through three sample patients, the types of activities that qualify for CCM and the appropriate billing codes.

CCM Patient Resource

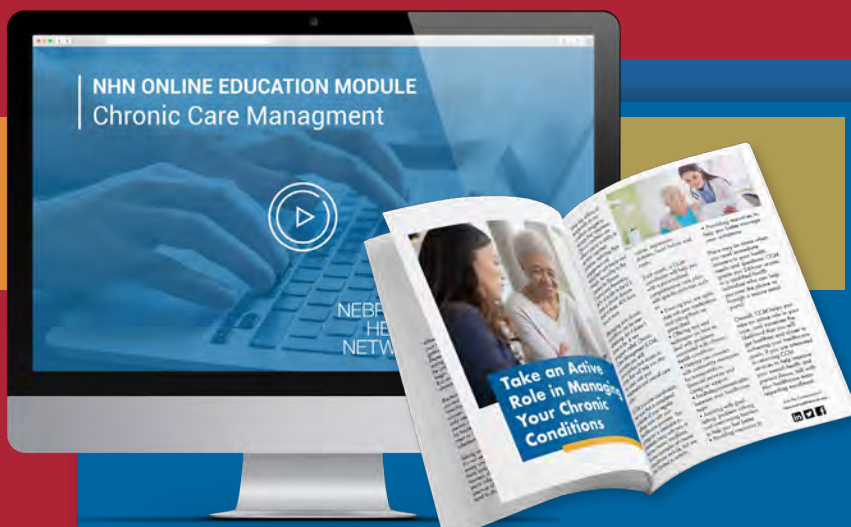
This educational resource introduces patients to Chronic Care Management, how the program works and how they will benefit.

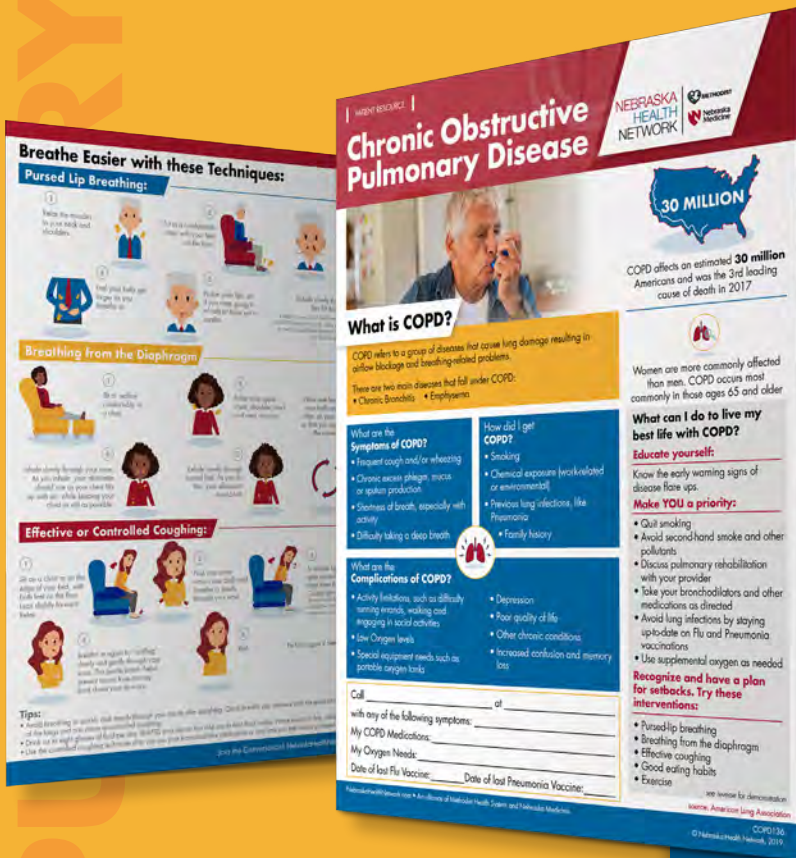
CCM Educational Module

This module explains how patients and providers benefit, billing resources and features sample patient scenarios.

CCM Article

This article provides an in-depth look into why CCM might be right for a patient.





Chronic Obstructive Pulmonary Disease Patient Resource

This guide helps patients understand COPD symptoms and provides resources to help them manage the condition including step-by-step guides to common interventions including:

- Pursed-lip breathing
- Breathing from the diaphragm
- Effective coughing
- Good eating habits
- Exercise



Daily Self Checks: Chronic Obstructive Pulmonary Disease

The NHN Self Check Series guides patients on understanding their condition. At-a-glance, patients with Chronic Obstructive Pulmonary Disease can see whether they are in the Green, Yellow or Red Zone and what the recommended next steps are.

PULMONARY

MEDICARE ANNUAL WELLNESS VISITS

The Basics of Medicare Annual Wellness Visits

There are three types of preventive wellness visits covered by Medicare. This one-page resource helps you learn more about each visit and which one is best for your patient.

Focus on Quality Care

Medicare AWWs are an opportune time to complete or schedule necessary screenings and immunizations. Review this one-page workflow to learn more.

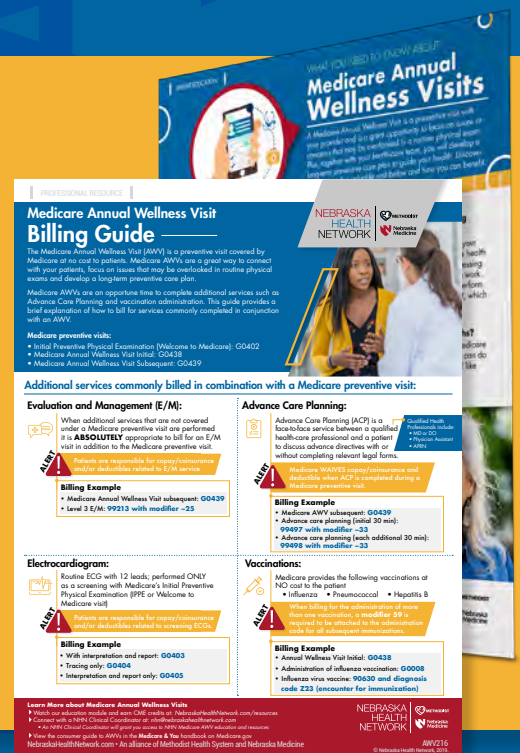
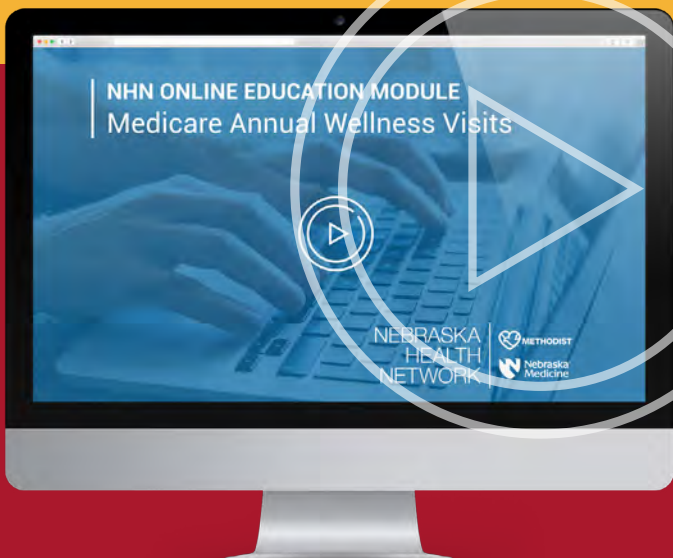


Medicare AWW Billing Guide

This guide provides a brief explanation of how to bill for services completed in conjunction with a Medicare Annual Wellness Visit.

Medicare AWW Patient Overview

Educating your patients on Medicare AWWs can be a daunting task. This patient facing one-pager and poster are designed to help your patients understand Medicare AWW better



Medicare AWW Educational Module

The Medicare Annual Wellness visit module walks through how the visit connects patients and providers to review health records, discuss preventive health-care services, such as screenings and vaccinations and to develop an overall care plan.

MEDICAL RISK ADJUSTMENT

PHYSICIAN AND PROVIDER RESOURCE

Medical Risk Adjustment PROVIDER QUICK REFERENCE GUIDE

Following each Hierarchical Condition Category (HCC) is the corresponding risk adjustment value (ie, 0.318) for that condition.

* Best practice is to also document and code for related complication(s).

Diabetes with Chronic Complications (0.307)

- E11.69 Type 2 diabetes mellitus with hypertensive without coma
- E11.65 Type 2 diabetes mellitus with hypertensive
- E11.69 Type 2 diabetes mellitus with other specified complication
- E11.18 Type 2 diabetes mellitus with unspecified complications
- E11.60 Type 2 diabetes mellitus with diabetic neuropathy, unspecified
- E11.42 Type 2 diabetes mellitus with diabetic polyneuropathy
- E11.51 Type 2 diabetes mellitus with diabetic peripheral angiopathy without gangrene
- E11.59 Type 2 diabetes mellitus with other circulatory complications
- E11.23 Type 2 diabetes mellitus with diabetic nephropathy
- E11.22 Type 2 diabetes mellitus with diabetic chronic kidney disease
- E11.63 Type 2 diabetes mellitus with foot ulcer
- E11.42 Type 2 diabetes mellitus with other skin ulcer
- E11.428 Type 2 diabetes mellitus with other skin complications

Diabetes without Complication (0.106)

- E10.9 Type 1 diabetes mellitus without complications
- E11.9 Type 2 diabetes mellitus without complications
- E11.9 Long-term [unspecified] use of insulin

Vascular Disease (0.305)

- I70.9 Peripheral vascular disease, unspecified
- I70.20 Unspecified atherosclerosis of native arteries of extremities, bilateral legs
- I70.21 Atherosclerosis of native arteries of extremities with intermittent claudication, right leg
- I70.22 Atherosclerosis of native arteries of extremities with intermittent claudication, left leg
- I70.23 Atherosclerosis of native arteries of extremities with intermittent claudication, bilateral legs
- I70.29 Other atherosclerosis of native arteries of extremities, bilateral legs
- I70.0 Atherosclerosis of aorta
- I71.2 Thoracic aortic aneurysm, without rupture
- I71.4 Abdominal aortic aneurysm, without rupture
- E11.51 Type 2 diabetes mellitus with diabetic peripheral angiopathy without gangrene

Chronic Obstructive Pulmonary Disease (0.335)

- J44.0 Chronic obstructive pulmonary disease with acute lower respiratory infection
- J44.1 Chronic obstructive pulmonary disease with [acute] exacerbation
- J44.9 Chronic obstructive pulmonary disease, unspecified
- J43.0 Simple chronic bronchitis
- J43.1 Unspecified chronic bronchitis
- J43.9 Emphysema, unspecified

Code only and do not include any other condition(s) that are included in the same category.

2019 CMS-HCC Risk Adjustment Manual (see 2.8)

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PHYSICIAN AND PROVIDER RESOURCE

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2019 CMS-HCC Risk Adjustment Manual (see 2.8)

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Medical Risk Adjustment M-E-A-T

A common acronym utilized by coders to identify documentation that supports coding accuracy is MEAT. You can utilize this handy tool as you complete your documentation. Including one or more of the MEAT details at a branch visit for each condition that requires an effect patient care treatment or management will put you on the path to success in capturing risk.

M monitor signs, symptoms, ordering or reviewing and re-evaluating of tests, disease progression or disease regression.

E evaluate test results, medication effectiveness, physical exam findings, and response to treatment.

A assess or address by discussion, acknowledging, reviewing records, documenting status, and counseling.

T treat with prescribing/adjustment of medications, referral to specialist for treatment/consultation, surgical/other therapeutic intervention and plan for management of condition(s).

Make sure your face-to-face visit documentation is comprehensive enough to reflect all on audit. Including one or more of the MEAT details for each condition you are coding will put you on the path to success!

2019 CMS-HCC Risk Adjustment Manual (see 2.8)

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MRA Quick Reference Guide

This resource is an overview of Hierarchical Condition Category codes and is available in both one-page and pocket guide formats.

MRA Documentation & Coding Best Practices

Documentation Tips & Hints

All chronic conditions need to be documented at least once annually. The patient's status is wiped clean on Jan. 1, annually.

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MRA Coding Best Practices

These resources provide helpful coding and documentation tips, hints and reminders.

Documentation & Coding Best Practices

Documentation Tips & Hints

I code for other chronic conditions

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Diabetes Documentation and Coding Best Practices

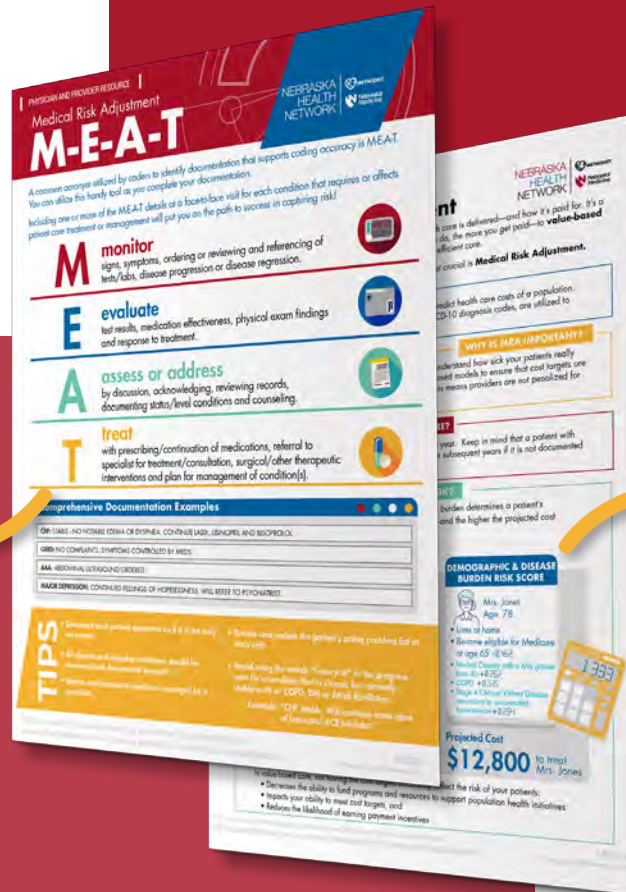
Discover best practices for documentation and coding related to diabetes.

Cardiology Documentation and Coding Best Practices

Discover best practices for documentation and coding related to cardiology.

M-E-A-T

Incorporating one or more of the M-E-A-T (Monitor, Evaluate, Assess or Address, Treat) details at a face-to-face visit for each condition that requires or impacts patient care treatment or management will put you on the path to success in capturing risk.



Basics of MRA

This quick, one-page document helps you or your fellow providers and coders understand WHAT MRA is, WHY it's important, HOW to optimize risk capture and a quick example on how MRA works.

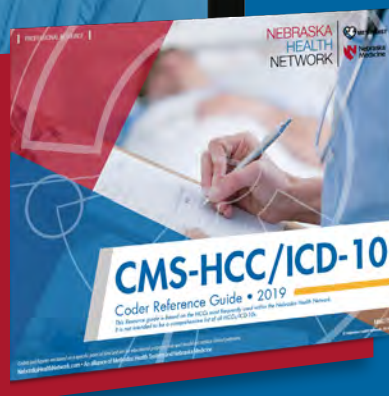
NHN ONLINE EDUCATION MODULE Medical Risk Adjustment



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HEALTH
NETWORK

MRA Education Module

This educational module helps you understand how MRA works and what you can do to insure you are not penalized for taking care of sicker patients.



HCC Coder Reference Guide

This is a digital resource guide based on the HCCs most frequently used within Nebraska Health Network.

PATIENT RESOURCE |

**Why am I sick?
Virus or Bacteria?**

When you don't feel well, your top focus is getting better fast. Depending on your illness, taking an antibiotic may be just what you think you need to begin the healing process.

As you might think, bacterial infections are caused by bacteria, and viral infections are caused by viruses. Antibiotics are only needed for treating certain infections caused by bacteria and **will not treat or cure viral infections.**

Taking an antibiotic when it's not needed can have many unwanted side effects including diarrhea, nausea, dizziness and yeast infections. Plus, overuse of antibiotics can lead to drug resistant infections or "superbugs." Drug resistance means that the usual antibiotics may not work, which can make it more difficult to treat bacterial infections. Knowing what is causing your illness is a good first step in understanding whether an antibiotic is right for you.

What could be causing my illness?

Common Condition	Common Cause			Are Antibiotics Needed?
	Bacteria	Bacteria or Virus	Virus	
Common cold/runny nose			●	No
Sore throat (strep throat)			●	No
Flu			●	No
Bronchitis/chest cold (in otherwise healthy children and adults)		●		No*
Middle ear infection		●		Maybe
Sinus infection		●		Maybe
Strep throat	●			Yes
Urinary tract infection	●			Yes
Whooping cough	●			Yes

*Studies show that in otherwise healthy children and adults, antibiotics for bronchitis won't help you feel better.

What can help me feel better?

- Get plenty of rest
- Drink plenty of fluids
- Use saline nasal spray or drops
- Use a clean humidifier or cool mist vaporizer
- Use cough drops and sore throat lozenges
- Take acetaminophen, ibuprofen or naproxen to relieve pain or fever**

**Take these medications only if directed by your health-care provider.

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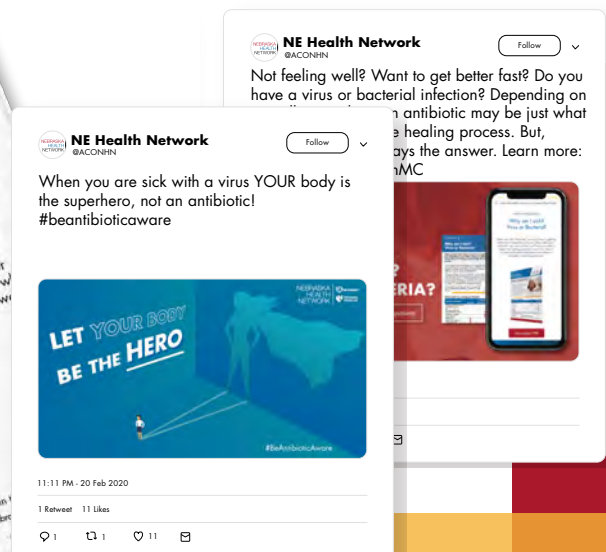
Why am I sick? Virus or Bacteria?

When patients don't feel well, their top focus is getting better fast. This one-page flier helps explain the differences between viruses and bacterial infections and when antibiotics are most important. This patient education is also available as a written article.

GENERAL HEALTH, PREVENTION & SCREENINGS

ANTIBIOTICS**Let Your Body Be the Super Hero**

This social media campaign contains six posts that you can share on your social channels that help communicate the differences between viruses and bacteria.

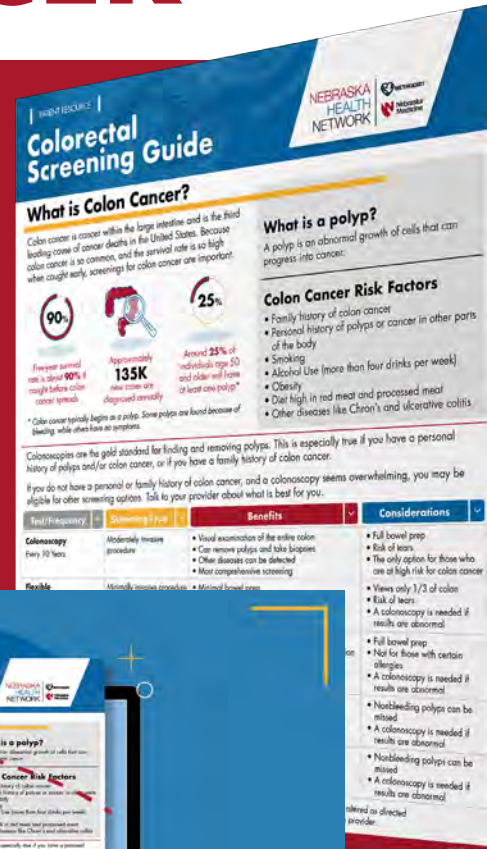


GENERAL HEALTH, PREVENTION & SCREENINGS

COLON CANCER

Colon Cancer Screening Guide

This resource helps patients understand the screening options for colorectal cancer and which methodology is best based on their family history and overall needs.



Colon Cancer Social Campaign

This social campaign encourages patients to download the colon cancer screening guide and learn more about possible screening options.

PATIENT RESOURCE

Determining What Level of Care is Best for Your Needs

A Guide to Care Options

NEBRASKA
HEALTH
NETWORK
METHODIST
Nebraska
Medicine

Primary Care

Call your primary care provider first. \$

The primary care office is your first line of defense for medical care. Your current provider and care team have records of your health history, medications and current needs, and often are best suited to handle non-urgent medical care. However, if your primary care team is unavailable or it is after hours, understanding your other options is important.



Urgent Care

\$ \$

Urgent Care facilities are for common health problems that need to be treated soon and cannot wait until the primary care clinic has an appointment available.

Urgent Care is a good solution for minor illnesses and injuries. Although every situation is different, you typically will experience shorter wait times and lower costs at an urgent care facility versus the emergency department.

Please see the back of this page for common conditions that can be seen at an Urgent Care facility.



Emergency Department

\$ \$ \$

Emergency Departments are for serious, **life-threatening** conditions that need to be treated immediately!



Please see the back of this page for common conditions that can be seen in an Emergency Department.

CALL 9-1-1

If you find yourself in a **life-threatening** situation and need assistance, please call 9-1-1.

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NE Health Network
@ACONHN

Ear or sinus pain? Consider calling your primary care provider before heading to an Urgent Care near you. Know where to go. Download our resource. #knowwheretogo #rightsiteofcare



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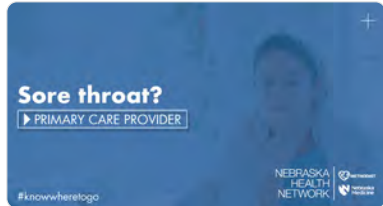
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Sore throat? Consider calling your primary care provider before heading to an Urgent Care near you. Know where to go. Download our resource. #knowwheretogo #rightsiteofcare



Determining What Level of Care is Best for Your Needs: A Guide to Care Options

When patients need medical assistance, it can be difficult to know where to go. These NHN patient resources addresses some common symptoms that patients may experience, and which level of care is most appropriate for them including primary care, urgent care or a trip to the emergency department. The resources include a front/back patient flier as well as a patient-focused article and social campaign that can be shared via your own communication channels.

GENERAL HEALTH, PREVENTION & SCREENINGS SITE-OF-CARE

GENERAL HEALTH, PREVENTION & SCREENINGS

Flu Shot

New flu vaccines are released every year to keep up with rapidly adapting flu viruses. Making sure your patients know flu shots are available in your clinic/system helps keep them healthy throughout flu season.



Personal Information: Name: Date of Birth: Address: Phone: Emergency Contact: Emergency Contact Phone #:	Primary Care Provider: Office Phone #: My Care Team: Provider 1: Office Phone #: Provider 2: Office Phone #: Provider 3: Office Phone #:	Medical History: Allergies: My medical conditions are: <input type="checkbox"/> Heart Failure <input type="checkbox"/> High Blood Pressure <input type="checkbox"/> Diabetes <input type="checkbox"/> Asthma/COPD <input type="checkbox"/> Parkinson's/Dementia <input type="checkbox"/> Breast Prostate: Other:	Health Care Medications: Medication: Dose: Frequency: Start Date: Stop Date: Notes:
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Choosing a Provider: Resources for Medicare Beneficiaries

The Centers for Medicare and Medicaid Services have a number of resources to help Medicare beneficiaries select their primary clinician through a process called Voluntary Alignment.

This resource explains voluntary alignment and the steps to take to complete it.

SPEAK
for YOURSELF



Medication Log

This pocket-size resource helps patients accurately track their medications, provider information and medical history.

Nebraska Emergency Treatment Order (NETO)

The advanced illness work group has developed this program to assist providers in helping patients plan for medical emergencies.

Finding Opportunities to **OPTIMIZE CARE**

2020
STRATEGIC
OVERVIEW

2020 PRIORITIES AND GOALS

2020 STRATEGIC THEME
Empower our partners to excel
in a value-based environment

Population Health & Care Transformation

THE WIN:
We empower network providers to improve the health of patients by identifying opportunities to optimize care.

GOAL 1
Collaborate with network partners to consistently meet quality benchmarks in value-based contracts.

- Project 1.1.1: Substantiate, communicate and monitor the NHN Core Quality Measures.
- Project 1.1.2: Evaluate and assist NHN clinics with supplemental quality data needs.

GOAL 2
Develop and execute strategies to address highneeds individuals.

- Project 1.2.1: Determine an identification process for high-needs individuals and targeted social determinants of health.
- Project 1.2.2: Implement processes to address highneeds individuals.

Cost & Utilization Optimization

THE WIN:
We identify and address opportunities to reduce expense and promote appropriate utilization.

GOAL 1
Utilize NHN data and analytics capabilities to address cost and utilization drivers.

- Project 2.1.1: Implement the Cost and Utilization dashboard network wide.
- Project 2.1.2: Use data to report on cost performance during the contract year.

GOAL 2
Collaborate with partners to execute a Post-Acute Care strategy.

- Project 2.2.1: Create a high-performing Post-Acute Care network.
- Project 2.2.2: Create a process to better manage the Post-Acute Care story.

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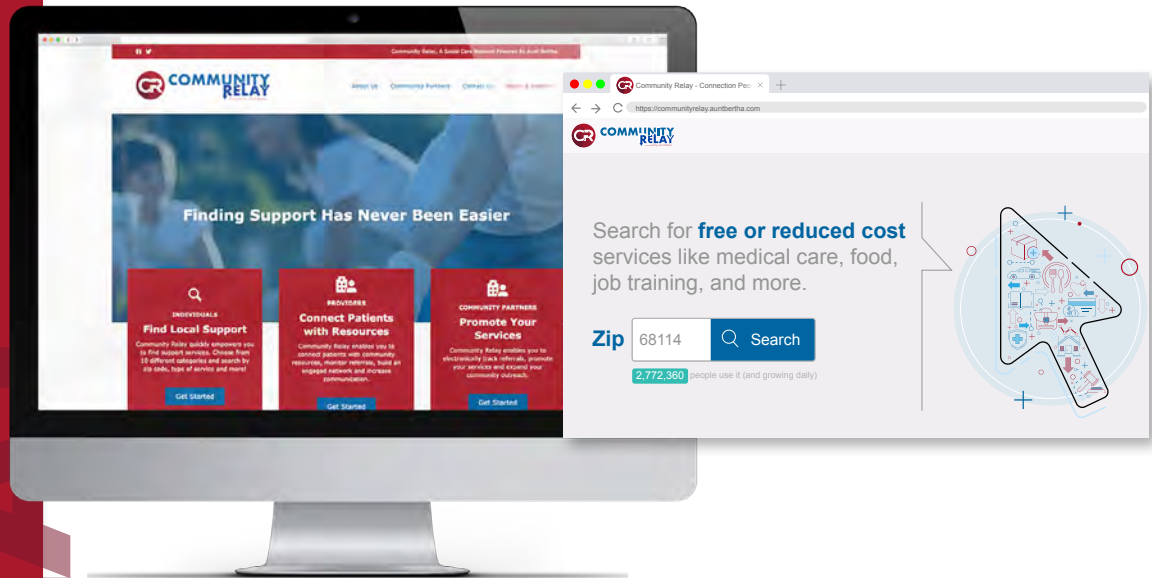
NEBRASKA HEALTH NETWORK STRATEGY 2020

Resources are available upon request.



COMMUNITY RELAY

Powered by Aunt Bertha



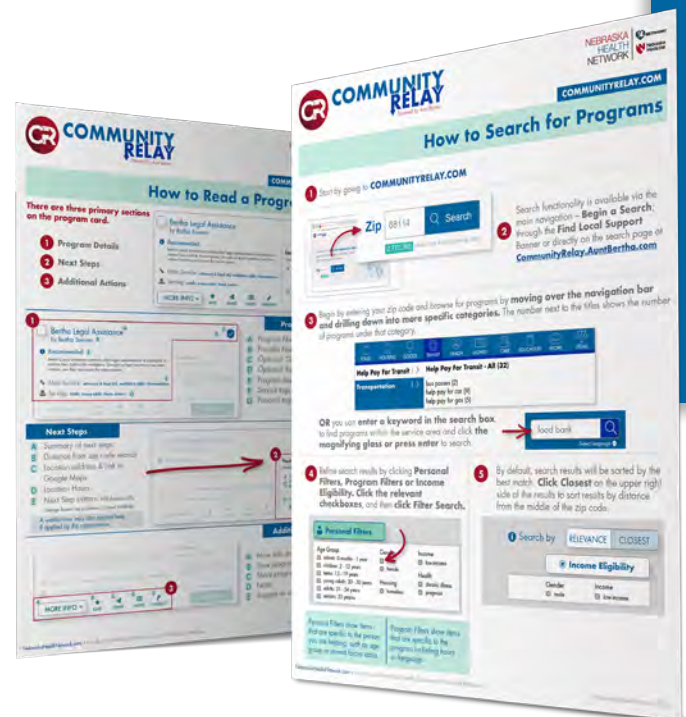
CommunityRelay.com

Together with Methodist Health System and Nebraska Medicine, Nebraska Health Network has created Community Relay, a patient and provider resource powered by Aunt Bertha. Community Relay is a social care network that enables users to search for free or reduced cost services like food, job placement, transportation, legal services and more.

Educational Tip Sheets

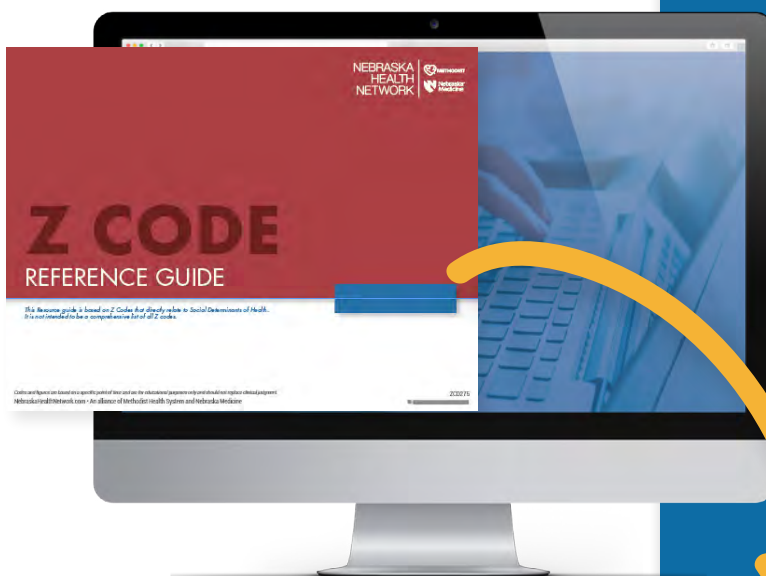
This series of tip sheets helps you discover:

- How to Search for a Program
- How to Read a Program Card
- How to Save Your Favorite Program
- How to Share a Program
- How to Refer Individuals to a Program
- How to See People I am Helping
- How to Suggest a Change or Program
- How to Share Results in a Different Language



VISIT COMMUNITYRELAY.COM

Z CODES



Z code Quick Reference Guide

This digital reference guide is based on Z codes that directly relate to Social Determinants of Health.

COVID-19 Focused Best Practices

Discover examples and best practices when using Z codes regarding COVID-19.



NHN EDUCATIONAL RESOURCES

View and download our entire resource library at:



NebraskaHealthNetwork.com

Join us on social media for updates about new resources and more.

