

Letters

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Twenty-one Questions for Patients

I am a middle-aged internist from Fairfield, Illinois and have just finished looking at the Jan/Feb issue of your publication. I thought I would write some nice feedback to you and your staff. The entire journal was well written, timely, well researched, and very informative.

I thought your "From the Editor" article was loaded with several good suggestions, some of which I've not much considered before. I thought I would use the 12 key tips to formulate questions that could be posted on each exam room wall for our patients to peruse while waiting for us to enter. It would be possible for patients to "customize" their brief time with the doctor to accomplish what they feel is most important. After all, you have to admit doing all of the work suggested in your article is too time-consuming for an individual visit.

Here's the list:

1. What three things would you like the staff to address today?
2. Is there a disease that runs in your family?
3. a. Are there special problems you wish to have examined today?
b. When was your last full examination? (For women, when was your last gynecologic exam?)
4. Are you at risk for heart disease?
5. Are you interested in being screened for diabetes, cholesterol, breast cancer, cervical cancer, colon cancer, hearing loss, anemia, kidney or bladder disease, or peripheral vascular disease?
6. Do you have any bad habits? Any illegal habits? Are you interested in stopping and need help?
7. Do you wear a seatbelt?
8. Do you have working smoke and carbon monoxide detectors in your home?
9. Do you follow a certain diet? Do you wish you had one to follow?
10. Do you exercise? If not, why not? Do you need a cardiac stress test?
11. Do you wish physical, occupational, or speech

therapy? If so, why?

12. Are you anxious or depressed?
13. Do you snore? Do you quit breathing at night? Are you drowsy during the day or while driving?
14. Do you know which medications you take, how much, and why? Are you suffering any side effects? Are you concerned about any of your medications?
15. Are you taking over-the-counter medications?
16. Do you need medication refills? Which ones? Do you mail in your prescriptions? What is your pharmacy? Do you have a formulary?
17. Do you miss many doses of prescribed medication? Do you use a pill reminder?
18. Are there any records you would like us to copy for you?
19. Is there another person with whom you wish us to discuss your health care?
Have you completed a permission form (HIPAA) to allow us to do so?
20. Do you need a referral to another provider?
21. Are you satisfied with our services?

This is a modification of the 12 tips from the US Preventative Services Task Force.

As you are aware, most visits in the fee-for-service arena have centered around management of one acute problem. This has fit into a 15-minute slot just about right. To address all of the above would require a team approach and good organization. If a patient is feeling well, however, I think many of these items can be accomplished and priorities dealt with. At least with the above, we target what is important to the patient.

Do you know of any groups who are using Webcams to monitor their homebound patients? Is there a mechanism to bill this under telemedicine-delivered house calls or visiting nurse calls?

—Bob Cornwell

Southern Illinois Primary Care Associates

Bob—

Your thoughtful letter highlights the problem of a fragmented nonsystem. It makes perfect logic to use home-based monitoring to improve patient outcomes; however, fee-for-service (FFS) Medicare is not equipped to pay for it. Unfortunately, under FFS Medicare, there is a disconnect between getting someone to pay for home monitoring and benefiting from improved outcomes.

—RGS MPM