

Comprehensive Advance Care Planning Patient Identification & Referral Workflow



1. Identify Eligible Patients



- Identifies Medicare-attributed patients at highest need for Comprehensive Advance Care Planning (CACP).
- Creates CACP Worklist in the practice's app.

2. Review & Approve Patients



Primary Care Clinician

- Reviews worklist and determines if referral to Iris is appropriate (patient is alive, not on hospice, etc.)

Timeline: List sent on 1st Monday of every Month.

3. Refer Patient to CACP



Primary Care Staff

- Completes referral to Iris: Warm Introduction is optional

Timeline: Referrals sent to Iris every Friday.

4. Outreach to Patients



Iris Outreach Staff

- Outreach to patient via letter and phone calls in effort to enroll patient in CACP

Timeline: Outreach begins within 14 days for Warm Hand-offs & Direct Referrals and 30 days for all others. It can take 1-4 months to fully engage a patient to enroll in the program.

5a. Enroll in Facilitation



Iris Facilitator

- Schedules facilitation with family
- Holds virtual CACP meeting to explain options, determine choices and draft advance directives
- Provides education on hospice/palliative care as needed



Primary Care Clinician

- Receives report on enrollment of patient

Timeline: Patients are scheduled within 2-3 weeks from contact for their facilitation based on their scheduling needs.

5b. Document Completion



Iris Document Staff

- Draft documents are mailed to the patient & family for signature
- Documentation specialist calls to review and explain draft documents to patient & family to clarify choices
- Revises draft docs if needed
- Instructs patient on state-specific signature and witnessing requirements
- Patient returns executed documents to Iris for quality assurance and distribution

Timeline: Receiving completed documentation from patients can take 1-4 months after initial CACP facilitation.

6. Closing the Loop



Iris Document Staff

- Communicates with practice if documents require clinician signature
- Distributes final copies to patient, family, PCP, hospitals, etc



Primary Care Clinician

- Signs draft medical orders
- Reviews in chart & considers follow up with patient
- Can bill for CACP follow up (including incident to), Iris does not bill CMS

Timeline: Documents are distributed on patient's behalf within 2 weeks.

7. Ongoing Follow Up



Iris FOCUS Staff

- Patient can contact Iris to revise or review documents any time after enrollment
- Continues to proactively outreach to patient and family for 2+ years to updated documents as needed.
- Communicates with practice via fax if documents are updated or amended.

Timeline: Patient can contact Iris at any time. Follow up begins 30-90 days post facilitation.

The entire CACP process from Patient Identification to Document Distribution varies by each patient and can take anywhere from 2-6 months.