

5.1C PROVIDER OUTREACH SOP

Z-CAN PROVIDER OUTREACH STANDARD OPERATING PROCEDURE (SOP)

1. Outreach to top providers

- a. CDC team will generate report of providers performing in the top 90% each month. Z-CAN PR Outreach Team will contact these top performing providers (clinics) to schedule a site visit (the total number of visits to top performers will be determined based on the number of other priority visits that need to be conducted). The purpose of the site visit is to observe how Z-CAN services have been incorporated into the clinic flow. If a site visit cannot be scheduled, the Z-CAN PR Outreach Team should schedule a phone call. At the site visit (or the phone call if necessary) please complete the Z-CAN site visit form and return it to the CDC and CDC Foundation.
 - i. CDC, CDC-F and PR-based teams will review all Z-CAN high-performer site visit forms and compile list of tips for successful implementation of services.
 - ii. This list of tips for implementation of services will be shared in the newsletter and with low performing clinics. The Z-CAN PR Outreach Team could consider taking pictures at these site visits (and be sure to obtain photo release) to share in the Z-CAN newsletter.
 - iii. If sites are identified as high performers multiple months consecutively, only one site visit is required.

2. Outreach to low performing providers

- a. CDC team will generate report of providers performing in the bottom 10-15% each month. Z-CAN PR Outreach Team will contact these low performing providers (clinics) and schedule a site visit to observe Z-CAN service provision at these sites. At the site visit, Outreach Team will complete the Z-CAN site visit form and return completed form to the CDC and CDC Foundation.
 - i. If the clinic refuses to schedule a site visit (without a valid excuse and doesn't provide suggested alternate visit dates) within 4 weeks of being contacted, please notify CDC and CDC Foundation.
 - ii. Within 1 week of this visit the Z-CAN PR Outreach Team will work with CDC to generate a report of suggested tips for improving or increasing services at that clinic. The ZCAN PR team will send this report to the provider via e-mail. The Z-CAN PR outreach team will also review the report over the phone with the clinic manager and Z-CAN provider as soon as possible.
 - iii. Within 4 weeks after the site visit, the Z-CAN PR Outreach Team will follow up with the clinic via the phone to address any questions/concerns and document any changes that have been made.
 - iv. If the clinic is identified as a low performer multiple months consecutively, site visits will be conducted once every three months.

3. Outreach based on adverse events

- a. See adverse event SOP

4. Outreach based on charge complaints

- a. For a specific complaint from a patient (via Facebook/email/phone call) or survey reports of charges
 - i. See Reported Charges SOP
 - ii. Log complaint and actions taken to address the complaint on an Investigation of Charge Form and in the Charge Monitoring Log
 - iii. Monitor survey reports of charges and document actions taken to address reports in the Charge Monitoring Log
- b. For a suspicion that a clinic is charging patients inappropriately
 - i. If a clinic is suspected of charging for Z-CAN services the following should occur
 1. **“Secret Shopper”** call to see if patients are being told they need to pay for Z-CAN services (or to be eligible for Z-CAN services).
 - a. If patients are being told there is a charge over the phone, this immediately triggers a site visit and notification to the CDC Foundation.
 - i. **Charge Investigation Site Visit.** To occur within 2 weeks of complaints. Site visit should include: explanation to physicians and staff, including front desk and schedulers, about Z-CAN eligibility and explanation that although a patient may be due for routine GYN care, she must not have to pay for /get those services completed to receive free Z-CAN services. All staff and providers need to demonstrate understanding of appropriate vs. inappropriate charges for Z-CAN patients depending on clinic type. Complete Z-CAN site visit form.
 - b. If there is no mention of a charge over the phone by the secret shopper, log the activity in the charge investigation log. The Medical Director will call the provider within 2 weeks to review appropriate versus inappropriate charges in Z-CAN and the importance of making sure patients understand what they are being charged for. Log activities in charge investigation log. No further action is required at this time. If a second complaint of suspicious charges for that clinic is received, this will trigger a charge investigation site visit (see above).
 2. **CDC-F will call the provider personal within 1 week** and review the Z-CAN billing policy. CDC-F will review the Z-CAN contract and explain if the clinic continues to charge patients inappropriately, it will be removed as a Z-CAN provider.
 3. **Log investigation** activities and outcomes in the charge investigation log.
 4. **Schedule follow-up** (phone or in person) in 2-3 weeks to document changes that have occurred

5. Outreach based on re-order status

- a. Once per month CDC will provide a list of provider/clinic combinations that have not placed an order in the past 6 weeks.
 - i. Call each of these clinics to inquire about supply status and need for re-order.
 - ii. Assess the clinic’s process for inventory tracking, PAR levels and re-ordering. Provide advice tailored to that clinic.
 - iii. Call the clinic in 4-6 weeks to follow-up on what changes have been made (if any needed).
 - iv. If issue is that the clinic is a low-volume clinic and it do not go through product quickly: see section above on Outreach to low-volume clinics.

6. Random Outreach

- a. Random "Secret Shopper"
 - i. Use random digit generator to select 2 CHCs/university/public clinics and 5 private clinics each week.
 - ii. Use script to call these clinics to ask about Z-CAN and try to schedule an appointment for Z-CAN services. Calls should ask:
 - 1) how long it will take to get an initial Z-CAN appointment
 - 2) are there any costs associated with getting contraception at a Z-CAN visit?
 - 3) is a screening visit required?