

Specialty Care Access Initiative  
**Roundtable Forum #4 Practice Protocols and Guidelines Notes**  
June 17, 2008

1. Opportunities from today's presentations.
  - Tap into some of Kaiser Permanente's referral volumes, show rates, etc.
  - Bilateral communication between PCP and specialist.
  - What data is there for decreasing referrals, decreasing inappropriate referrals, and decreasing demand? Get these stats from KP and other systems that have these reference systems.
  - Ability to learn and share-folks in room
  - Referral patterns by problem, type of specialist, PCP etc.
2. Linking decision support and reference guidelines(e.g. have 3 questions for PCP in referral field)
  - Communication To PCP or specialist
  - Create contact list of resources and folks for organizations that have good specialty access programs
  - Glossary of terms (e.g. e-consult vs. e-referral)
  - Flowchart process of provider needs help to someone who provides that help e.g. white paper on referral management
  - Figuring out various algorithms for referral management
  - Free MD service to get answers to specific questions: [www.sermo.com](http://www.sermo.com)
3. Local opportunities and challenges exist for referral and protocols
  - Curr. Of mini-fellowships for PCP's in orthodontist, dermatologist and podiatry can vary from formal training to shadowing
  - KP sharing CPG's and referral guidelines and protocols
  - Get 3 questions from top 10 diagnoses in top specialties' (maybe from KP?)
  - Need to look at various models to have more sustainable strategies rather than just grant funding. Possibly next roundtable topic?
4. Education & Technical assistance
  - 1 E-app type model for referral system?
  - Is there a role for 1 standard statewide infrastructure for referrals? Look at KP's e-consult platform
  - Can KP do mini-fellowships for community MD's not near academic centers?
  - CAPH/CPCA share promising strategies around specific recruitment and retention?
  - Hold specialist roundtable?