

Improving Integrated Care with Digital Technology Tools September 15, 2015 2:00 p.m. Eastern

David Brody, Denver Health Medical Plan Dara Hessee, The Colorado Health Foundation Steven Lesky, Cambia Health Foundation Pat Millar, Weber Human Services Starr Stratford, Utah SmartCare Tanya Weinberg, The Colorado Health Foundation



Improving Integrated Care with Digital Technology Tools

Grantmakers in Health Webinar

September 15, 2015

Based in Portland, Oregon, Cambia Health Foundation is the corporate foundation of Cambia Health Solutions, a total health solutions company dedicated to transforming the way people experience health care.

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Improving Patient Engagement & Outcomes Through An Innovative Care Model



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UTAH SMARTCARE BEGINNINGS

How do we bridge the gap between **behavioral health** and **physical health care**?



Co-location



Technology



UTAH SMARTCARE PARTNERS



















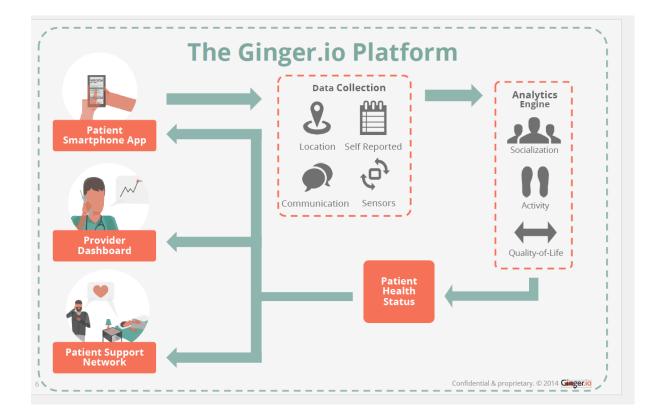


What is the **benefit**?

What is the **risk**?

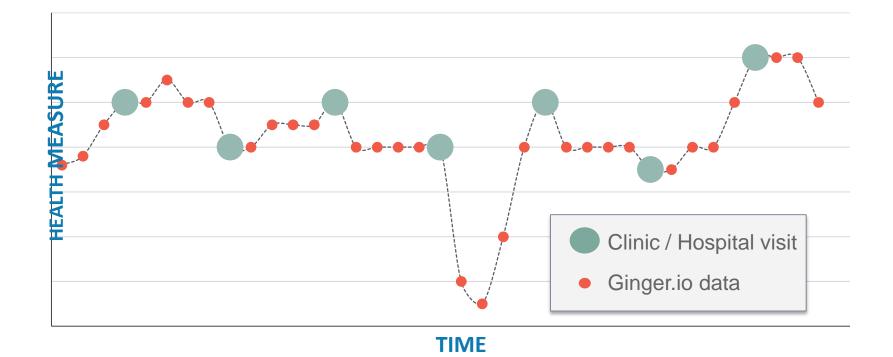
What are your strategies for **risk mitigation**?





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Ginger.io Transitions Care from Episodic Data to Continuous Insight



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EXPECTED OUTCOMES

Triple Aim + Provider Satisfaction

- Improved Patient Care
 - Patient satisfaction, patient engagement
- Improved Health Outcomes (behavioral and physical)
 - Improved PHQ 9 and OQ scores, labs and vitals, hospitalizations
- Cost Savings
 - Reduced ED visits, reduced hospitalizations, total patient cost



USER EXPERIENCE

Benefits

Patients

- Connection to caregiver(s)
- Insight into physical/mental health

Care Providers

- Alert(s)
- Pattern(s) identified

Barriers

Patients

 Access to smartphone(s)

Care Providers

• Limited access to information

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Monthly Progress Report

Utah Smart Care in Weber County

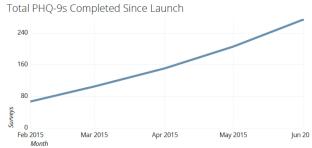
Last 30 Days To Da 88 12 20 1* Active* Patients New Patients Average Weekly Patient Alerts 1* Enrollment Surve Surve Monthly Patient Enrollment To tal 24 Invited Activated

To Date



142 ×

Survey volume



* "Active" = patients currently with the app.

** "Engaged" = person engaging with the app after 30 days.

*** Confidence = person answered positively to "Does Ginger.io help vou feel more confident that vou are able to manage your mental health condition?"

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LESSONS FOR SIMILAR PROJECTS











SUGGESTIONS FOR GRANT MAKERS

Health IT Changes Daily

How Funders Can Add Value (beyond funding)

- Assist grantees with contracts and negotiations
- Review sustainability of technology and project
- Consider other non-financial resources or support you can provide



SUGGESTIONS FOR GRANT MAKERS

Technology Sector vs. Health & Human Services

The Challenges of Aligning Paradigms

- Funding
- Timeframe
- Priorities





Flexibility and Adaptability

- Are you ready for a pivot?
- Be a flexible grant maker
- Prepare your grantees for change
- Ensure end users are supported through change





The Colorado Health Foundation"

Together

Technology & Integrated Care GIH Webinar

September 15, 2015

Together, we will make Colorado the healthiest state in the nation.

By investing in our three community outcomes...



Health Care



Goal

All Coloradans achieve health with support from a network of primary health care and community services

Strategies

- Support communities to prevent disease and improve population health
- Strengthen the delivery of comprehensive, person-centered primary care
- Empower individuals and families to manage their own health

Grants to Denver Health

November 2010

Integrated Behavioral Health Specialists

- Care Management Software
- > Telephonic Counseling
- Interactive Voice Recognition (IVR) Follow up

July 2014

- Integrated Behavioral Health Specialists
- 'Improve Your Health'
- > Telephonic Counseling
- Self-Management Technologies





The Colorado Health Foundation

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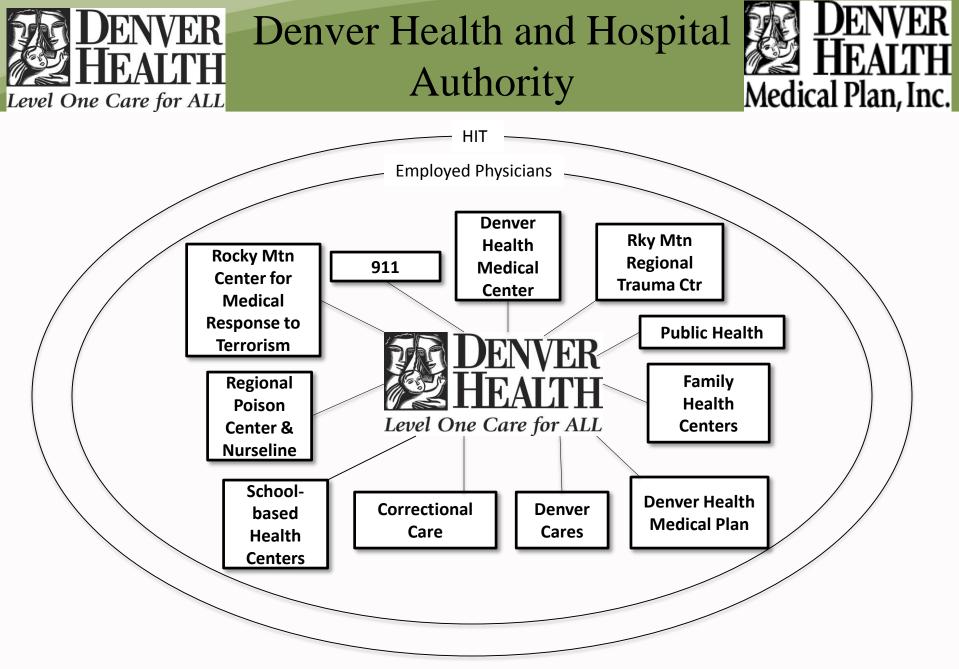
Dara Hessee senior program officer <u>dhessee@coloradohealth.org</u> 303.953.3641

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The Development of Technology Facilitated Behavioral Health Care at Denver Health

David Brody, MD Medical Director Denver Health Managed Care Plans Professor of Medicine University of Colorado School of Medicine





Integrated Care Grants



Activity	Funder
Telephonic Depression Intervention	RWJF
Telephonic Depression/Anxiety Intervention	CHF
Telephonic Adolescent/Depression/Self Harm Pilot	CHF
Integrated Care at Lowry, Eastside & Westside	CHF
Improve Your Health Behavioral Risk Factor Screening Intervention	CHF (ACT grant)

Telephonic Depression Intervention



Phone Calls	Week 2	Week 3	Week 5	Week 7	Week 9	Week 11
Diagnostic assessment	Full	PHQ9	PHQ9	PHQ9	PHQ9	PHQ9
Medication adherence	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark
Behavioral activation		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark
Developing self care plan					\checkmark	\checkmark
Patients receive copy of depression coping plan		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark

Outcomes assessed at baseline, 6, 12, and 24 weeks



Benefits for Patients

Telehealth benefits patients by:

- Eliminating need for *transportation* and *child care*
- Increasing access to care through lower costs, provider availability, extended coverage to underserved populations and underserved geographical regions
- ▶ Reducing *stigma* associated with being seen in a mental health clinic
- ➢ Facilitating willingness to disclose personal information



Outcomes

Improvement in PHQ-9*	UC	ТС	p-value
6 Week	3.349	3.627	0.665
12 Week	5.348	6.976	0.036
24 Week	7.499	9.109	0.058
Improvement in Hopkins* (HSCL)			
6 Week	0.048	0.094	0.559
12 Week	0.072	0.390	0.001
24 Week	0.272	0.578	0.013



TDI Changes

- Patients with just anxiety can be included
- Primarily enrolling patients referred by PCP or self-referred
- No control group
- Patients may select up to 3 modules from a total of 12 available modules
- Number of therapy sessions increased from 5 to 8 plus booster sessions for patients who have relapsed
- Improved PCP feedback process which includes algorithm based medication recommendations



Module Choices

Patients can chose at least <u>3</u> call topics



- Getting Going
- Grief and Loss
- ➤ Healthy Eating
- Healthy Relationships
- Improve Sleep Patterns
- Manage Stress Better
- Mind Tricks for Pain
- > Overcoming Illness
- Physical Activity
- Positive Thinking
- Problem-Solving
- Worrying Less
- ➢ Next up-Trauma

DENVER HEALTH MEDICAL CENTER

Telephonic Counseling for Depression and Anxiety Provider Feedback Report – Follow-Up Calls

6 Week Evaluation	12 Week Evaluation	24 Week Evaluation	

Baseline:	6 week:	12 week:	24 week:
No depression	No depression	No depression	No depression
Mild	Mild	Mild	Mild
Moderate	Moderate	Moderate	Moderate
Moderately Severe	Moderately Severe	Moderately Severe	Moderately Severe
Severe	Severe	Severe	Severe

GAD-7 Scores

PHQ-9 Scores

Baseline:	6 week:	12 week:	24 week:
No anxiety	No anxiety	No anxiety	No anxiety
Mild	Mild	Mild	Mild
Moderate	Moderate	Moderate	Moderate
Severe	Severe	Severe	Severe

Moderately Severe 15-19 Severe 20-27 GAD-7 SCORING KEY No anxiety < 5 Mild 5-9 Moderate 10-14

PHQ-9 SCORING KEY

< 5

5-9

10-14

15-21

No depression

Mild

Moderate

Severe

Suicide Assessment

No safety concerns at this time

Concern of harm to self/others including: Thoughts Plan Means Intent Past Attempt(s)

Protective factors include: Goal-directed behavior

Religious/spiritual beliefs Motivated for treatment Other:

MRN:

DOB:

Date:

Encounter #:

Reviewed case with supervisor and notified PCP

Medication Adherence:

N/A – patient not currently prescribed psychotropic medications.

Patient reports taking psychotropic medication as prescribed.

Patient reports taking psychotropic medication inconsistently or differently than prescribed.

Behavioral Health Clinician Signature

Patient denies taking prescribed psychotropic medication secondary to:

Patient no longer interested in pharmacotherapy.

Patient would like to change psychotropic medications due to:

Medication Management Recommendations*

Response	PHQ-9 or GAD-7	Treatment Plan		
nesponse	score after 4-6 weeks	Depression	Anxiety	
Remission	Score < 5	No treatment change needed. Follow-	up again after an additional 4 weeks.	
Partially responsive	Decrease in score but still ≥ 5	Consider increasing dose and continue to increase until max. Then consider augmenting with another antidepressant (i.e., Wellbuttin if currently on an SSRI or possibly Remeron if on SNRI).	Consider increasing dose and continue to increase until max. Then consider augmenting with antianxiety (i.e., Buspar, Hydroxyzine, etc.). May add antianxiety earlier if very symptomatic.	
		Consider starting anti-depressant or antianxie or increase dose. Review psychologica		
Non- responsive	Drop ≤ 1 point or increase in score	Consider switching meds (i.e., change SSRI to SNRI) or augmenting with another anti-depressant (Wellbutrin if currently on an SSRI or possibly Remeron if on SNRI). Consider informal or formal psychiatric consultation (ECT an option for depression in some cases).	Consider switching meds (i.e., change SSRI to SNRI) or augmenting with anti-anxiety (i.e., Buspar, Hydroxyzine, etc.). Consider informal or formal psychiatric consultation.	

*Adapted from the HealthTeamWorks and APA Depression Guideline to assist primary care providers in diagnosis and treatment of depression. It is not intended to replace a clinician's judgment or establish a protocol for all patients.

Getting Going Getting Going Healthy Eating Healthy Relationships Improve Sleep Patterns Life Changes/Grief & Loss	Manage Stress Better Mind Tricks for Pain Overcoming Illness Physical Activity Positive Thinking	Problem-Solving Worrying Less Other: Other: Other:
Program Status		Unable to Contact



Phone #

Time (00:00)

Telephonic Counseling for Depression and Anxiety (TCDA)



Point Improvement (95% Cl) in PHQ-9 Score from Baseline

	TCDA	RWJ <u>Intervention</u> Control	p-value
6 Week	6.05 (4.85, 7.26)	2.11 (1.23, 3)	<0.001
40.04		1.71 (0.84, 2.59)	<0.001
12 Week	7.26 (5.75, 8.76)	3.31 (2.33, 4.29)	<0.001
		2.13 (1.16, 3.1)	<0.001
24 Week	6.52 (4.51, 8.53)	4.07 (3.03, 5.1)	0.036
		3.33 (2.3, 4.36)	0.006

TCDA Impact on Utilization



Measure	Intervention (m= 219)	Control (m=40)
# of Hospitalizations	B) 575/1000/year A) 342/1000/year	275/1000/year 500/1000/year
# of ED visits	B) 680/1000/year A) 656/1000/year	1025/1000/year 1100/1000/year
# of PCP visits	B) 6.03/year A) 5.67/year	5.15/year 4.31/year



TCDA: Combining Telephonic Calls with Technology

- Automated between visit outreach
 - Complementary educational videos
 - Homework reporting
 - Symptom tracking
 - Motivational messaging
 - Patient stories
- Automated Post Program outreach
 - PHQ9, GAD7 with responses based on results
 - Motivational messaging
 - Helpful tips
- Access to myStrength (a behavioral health website)



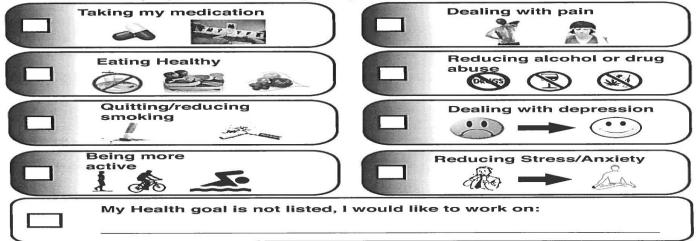


IMPROVE YOUR HEALTH

Do not write in this box

1) IF YOU HAVE FILLED THIS OUT BEFORE:

- □ I would like to update my health goal (select below)
- □ I am still working on my previous goal (select below)
- 2) Please check (2) ONE health goal you might want to work on:



3) Circle the letter for the sentence that best describes you:

- A) I have not started and do not intend to start working on this health goal in the next six months
- B) I have not started, but I intend to start working on this health goal in the next 30 days
- C) I have a plan or I am ready to start working on this health goal
- D) I have recently started working on this health goal

4) Please check how we can help you:

- □ I am not ready to work on this goal right now
- I would like a handout
- □ I would like to work with a behavior change expert
 - In the clinic
 On the telephone



Thank you for filling out this form





(2) improve your health

Already a Member? Login Now >

🛍 User Login

The Free Health Behavior Improvement Program

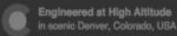
A program designed specifically for Denver Health patients

How It Works:

A. Choose A Health Behavior		C. Complete Tasks			
Reduce Stress, Depression or Anxiety		Brief Health Surveys			
Lose Weight		View Online Articles, Video and Audio		ilo	
Quit Smoking			D. Earn Entries In	es Into Prize Drawings	
Reduce Alcohol or Street Drug Use		amazon.com		— -	
B. Choose How To Participate		Target Gift Card	Amazon Gift Card	iPad	
in-Clinic	Telephonic	Online	How Do I Participate?		te?

Healthcare Professionals: Learn More About How RxAssurance Can Work For You

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123456	Doe, John	barcode
GOAL	PERSONAL IMPORTANCE	PERSONAL CONFIDENCE
Reducing alcohol or street drug use	8 1-10 Scale	4 1-10 Scale
PROGRAMS	CONTACTS	MONITORING
In-Clinic Telephonic	Email Phone	Yes



PCP Role: Tips

Provide support

"It's really great that you picked (patient's goal). Is there anything you feel I can do to help you with this goal?"

Reinforce benefits

- "I agree that working on this goal will help you to (mention benefits patient selected)."
- "Are there any other ways you think you might benefit from (patient's goal)."
- Mention other possible benefits as appropriate.

Increase confidence

- Discuss things patient feels will help him/her feel more confident
- "What might make (patient's goals) hard for you?"
 - "How do you feel you might be able to Ο overcome this barrier?"
 - Ask if patient would be interested in hearing 0 your suggestions.

Closer

- "You will be getting a text message or email in the next day or two so we can get a baseline assessment of where you are now with your (patient's goal) and then monthly brief assessment to check on your progress. Please make sure you complete these assessments so I will be able to keep up to date on how you are doing."
- "The next time I see you let me know if there is anything else I can do to help you with (patient's goals).



123456

Doe, John

barcode

2

GOAL

Reducing alcohol or street drug use

Improve Your Health Assessment History

Question	01/01/2015	02/01/2015	03/01/2015	04/01/2015
	(Baseline)			
Participation	N/A	N	Y	Y
Program Helpful	N/A	-	Y	Y
Improve Behavior	N/A	-	N	Y
Importance	7	6	7	8
Health Benefits	I feel better	I feel better	I feel better	I feel better
	I feel better about myself		I feel better about myself	I feel better about myself
Confidence	5	6	6	7
Help Areas	Learning ways to avoid alcohol or drug use when I am under stress	Learning where I can go for help	Learning ways to avoid alcohol or drug use when I am under stress	Learning ways to avoid alcohol or drug use when I am under stress
	Learning where I can go for help		Learning where I can go for help	

Assessments Assessment 01/01/2015 02/01/2015 03/01/2015 04/01/2015 (Baseline) PHQ-9 6 2 1

Ideal Integrated Care System



- Automated pre-visit screening via Improve Your Health
 - Depression
 - Anxiety
 - Substance abuse
 - Other behavioral risk factors
- Treatment choices guided by Shared Decision Making Tool
 - Medications
 - Therapy
 - Location
 - In clinic
 - Over the phone
 - Type of Therapy
 - Watchful waiting
 - With self management support vice DVD, printed materials etc.
- Between visit care through automated outreach
- Use of navigators to maintain patient engagement and track outcomes



Conclusion

- Program development is an iterative process
- Repeated funding from the Robert Wood Johnson Foundation and the Colorado Health Foundation have enabled us to use technology to continue to innovate and improve behavioral health outcomes at Denver Health.

Nationally Ranked. Locally Trusted.

Thank you!

David Brody, MD David.Brody@dhha.org 303.602.2192





Question?

Please type your question into the Chat Box or press *6 to unmute your phone line and ask a question