January 19, 2022

THE DOWNLOAD

A monthly webinar diving into the intersection of healthcare and technology

MiHIN
MICHIGAN HEALTH INFORMATION NETWORK SHARED SERVICES

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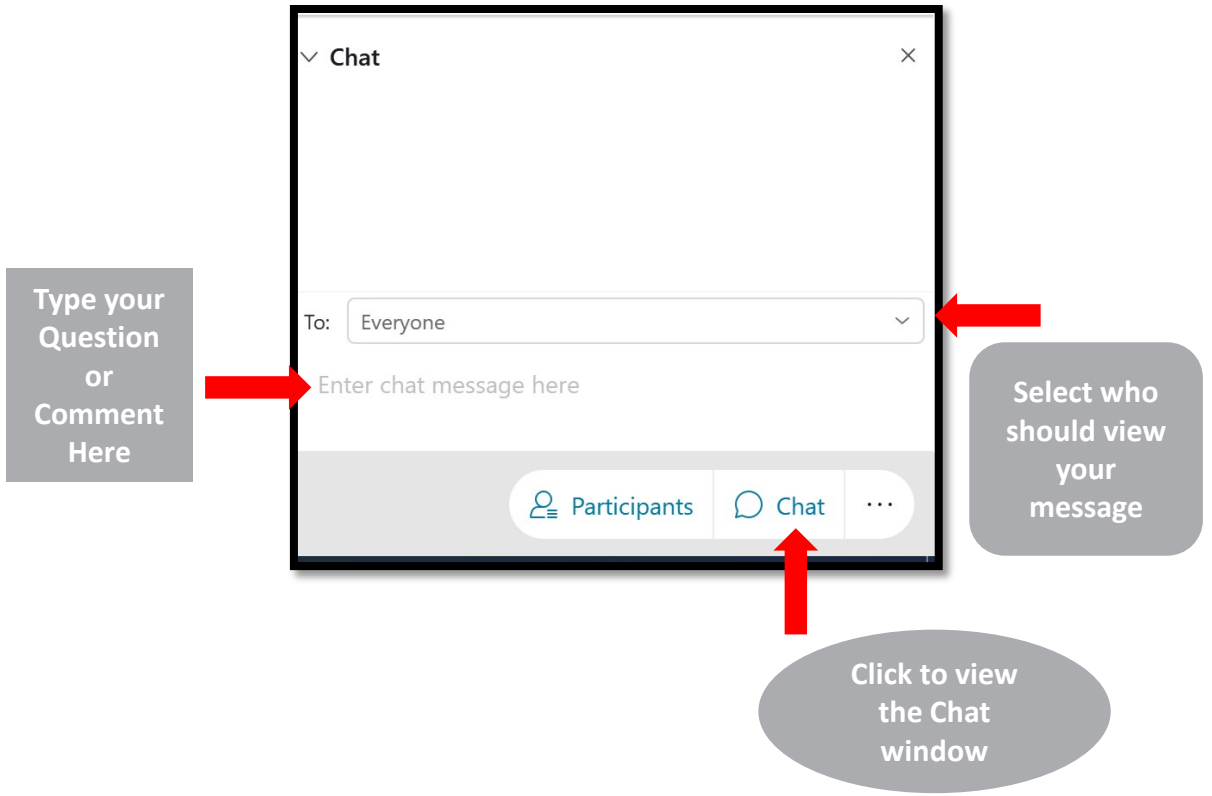
MiHIN

- **Joanne Jarvi (**Facilitator**)**
- **Katelyn Lewis (**Webex Chat Moderator**)**

Welcome to THE **DOWNLOAD**

Let's Get Started…

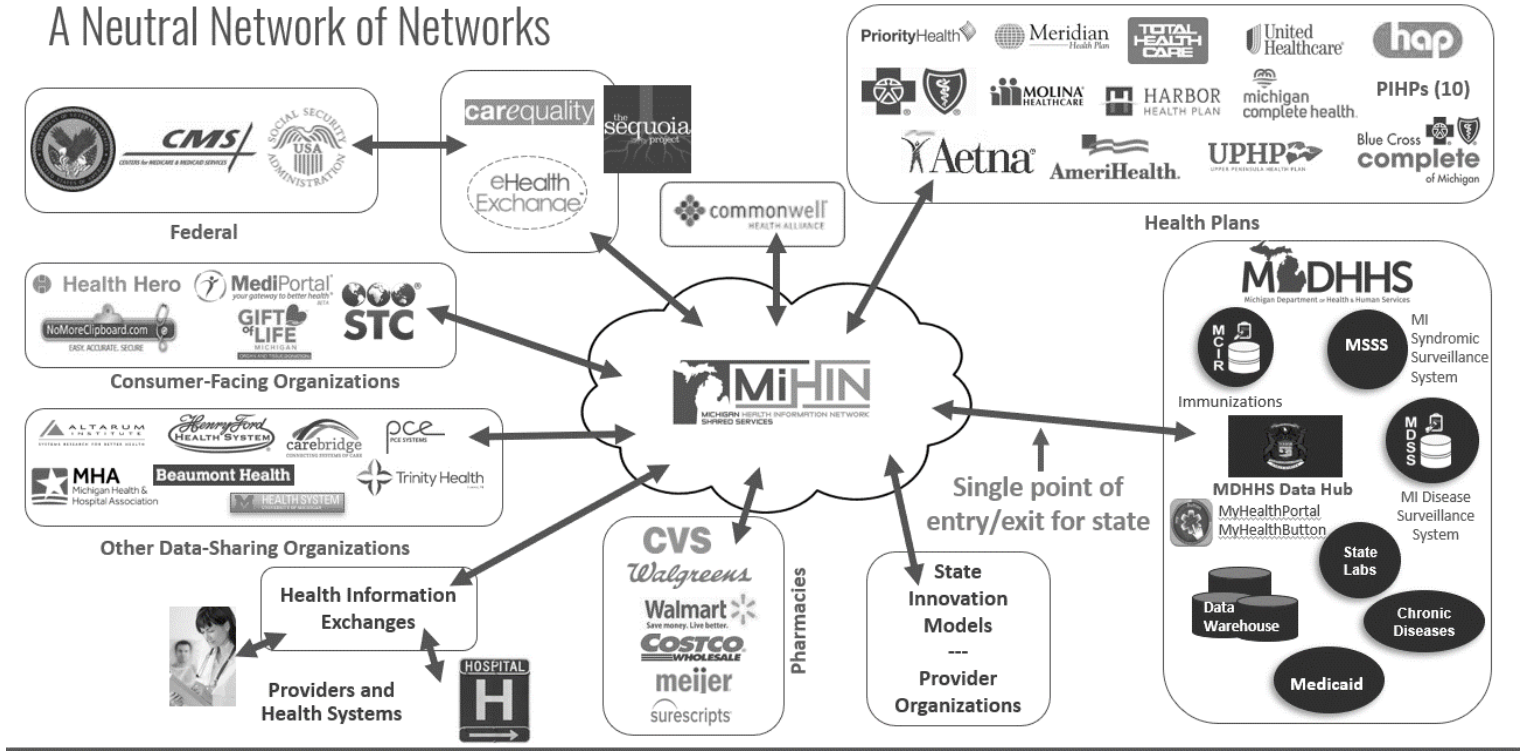
- This session is being recorded and will be available after the meeting on the MiHIN website.
- All attendees are muted
- Participating in the forum
  - Ask questions and make comments using the WebEx Chat
  - Presenters will answer your question via chat after each segment, or the moderator will read your question aloud towards the end of the webinar.
  - All unanswered questions today will be answered via email to all attendees.
- Chat Controls
  - On the right-side of your screen



Michigan Health Information Network Shared Services (MiHIN) is a non-profit organization that provides technology and services to connect disparate sectors, *our stakeholders*, to securely share health information.

An unbiased data trustee, MiHIN does not provide health care services, produce health care data or compete in the marketplace.

Instead, we help convene to share vital health information to advance care, better outcomes and lower costs.



Technology is a tool. Humans are the energy. Technology allows humans to connect, communicate, and collaborate.

Survey Question

Who do we have in the audience today? Which participant/stakeholder are represented today?

A. *I am a Michigan resident interested in how MiHIN and its partners work to help improve my health*
B. *I am a medical/healthcare provider*
C. *I work for / represent a healthcare facility (hospital, long-term care facility, ER, pharmacy)*
D. *I work for the state or local government or government agency*
E. *I work for/represent an insurance company*
F. *I work for/respresent a community based organization, social service organization or community action group*

Today's Agenda

01 **Welcome**
Joanne Jarvi

02 **Health Innovations**
Chris Bailey

03 **Adjourn**
Joanne Jarvi

MiHIN
MICHIGAN HEALTH INFORMATION NETWORK SHARED SERVICES

Digital Health Innovations

Chris Bailey
Director of Consumer Health Strategy

Upper Peninsula Health Group – Remote Patient Monitoring (Oncology)
Lee Marana – Manager of HIE & Informatics

The Physician Alliance – Realtime ADT/CCDA Delivery and Telehealth to Improve TOCs
Sharon Kraydich – Director of Quality & Utilization

Access Health – Place-Based & Practice Based Patient Engagement (SDOH)
Jeff Fortenbacher– Executive Director

The Premise:

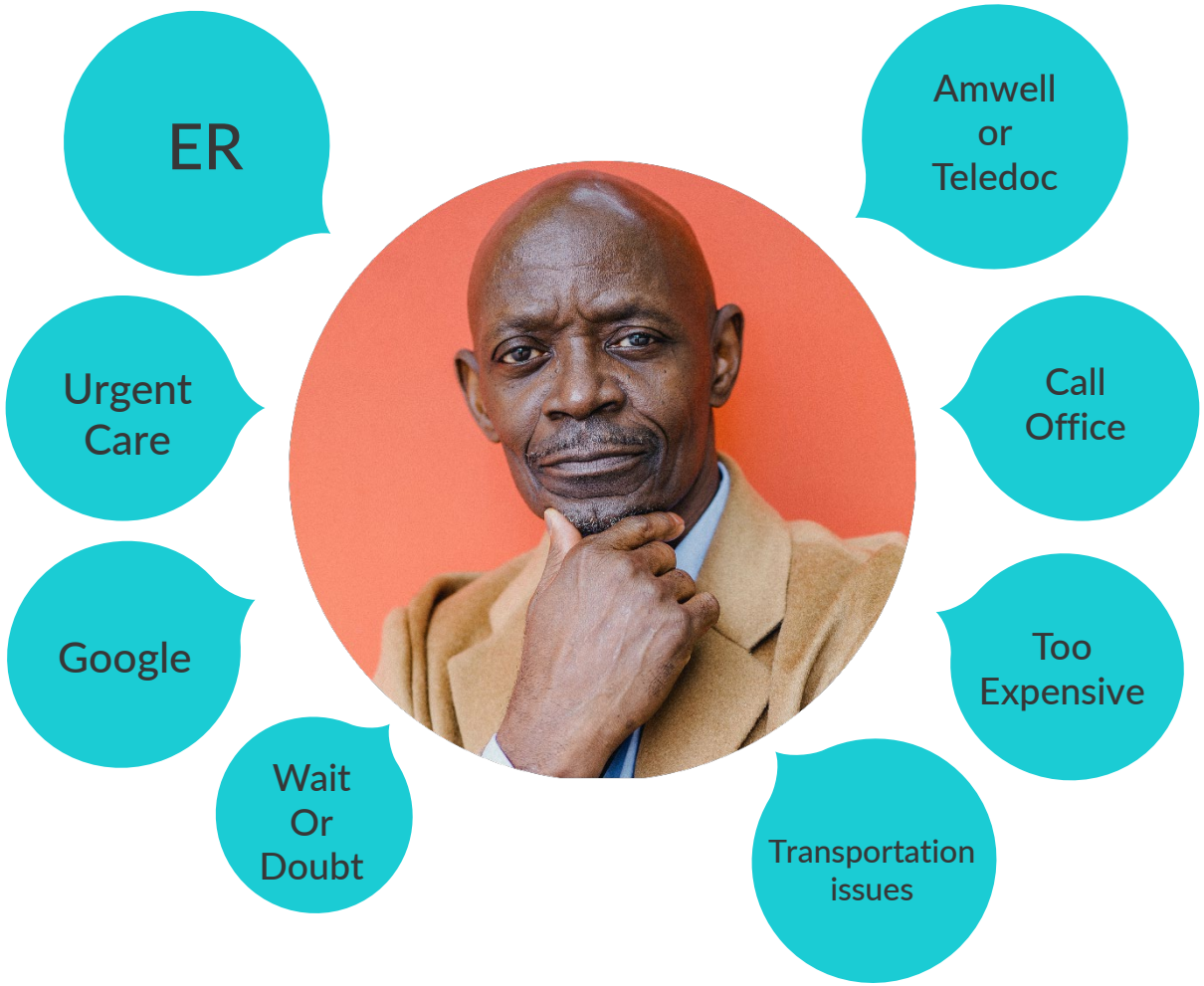
Advancements in health technology & care alone are unlikely to optimally improve health and related outcomes, unless both technology and clinical workflows support improved patient health literacy and convenient access to patient care.

Simply put,

- Patients suffering from chronic conditions must be able to identify their chronic symptoms and have the confidence to understand the severity of those symptoms.

- Patients and clinicians all need a convenient method to initiate communications between each other.

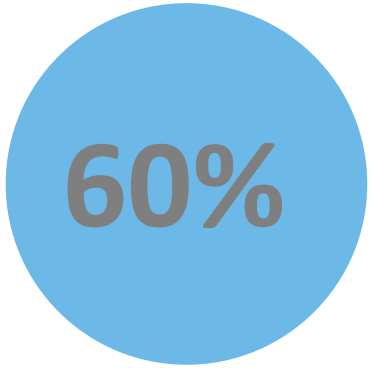
The Patient Dilemma



Decision Break-Points

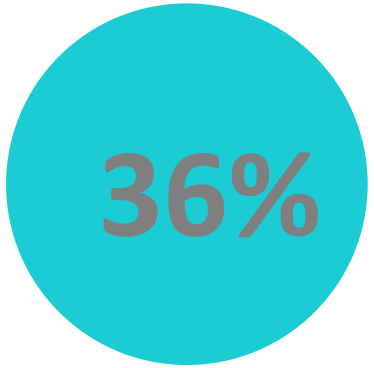
- Many options and limited navigation skills
- Perceived barriers to certain access points
- Responsible for assessing health severity
- Limited price transparency
- Unaware of disease and age-based health maintenance needs

Patient Literacy Statistics



In a study of 500 cardiac patients, nearly 60% of patients had some sort of misunderstanding about the purpose, frequency, or dosage instructions for their medications.

51% of patients report they don't have a clear understanding of next steps after their appointment.

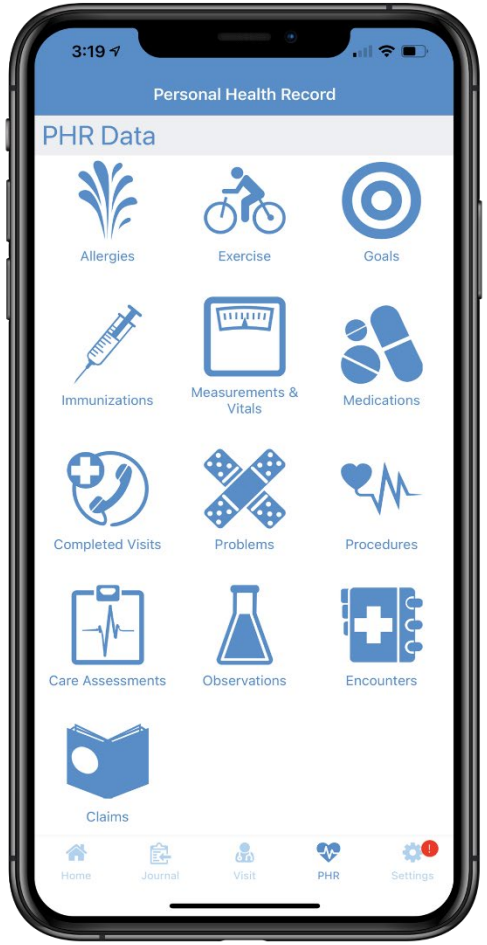


Patients only recalled 36% of information without a prompt from the provider.

Health information skills that patients need to take an active role in self management

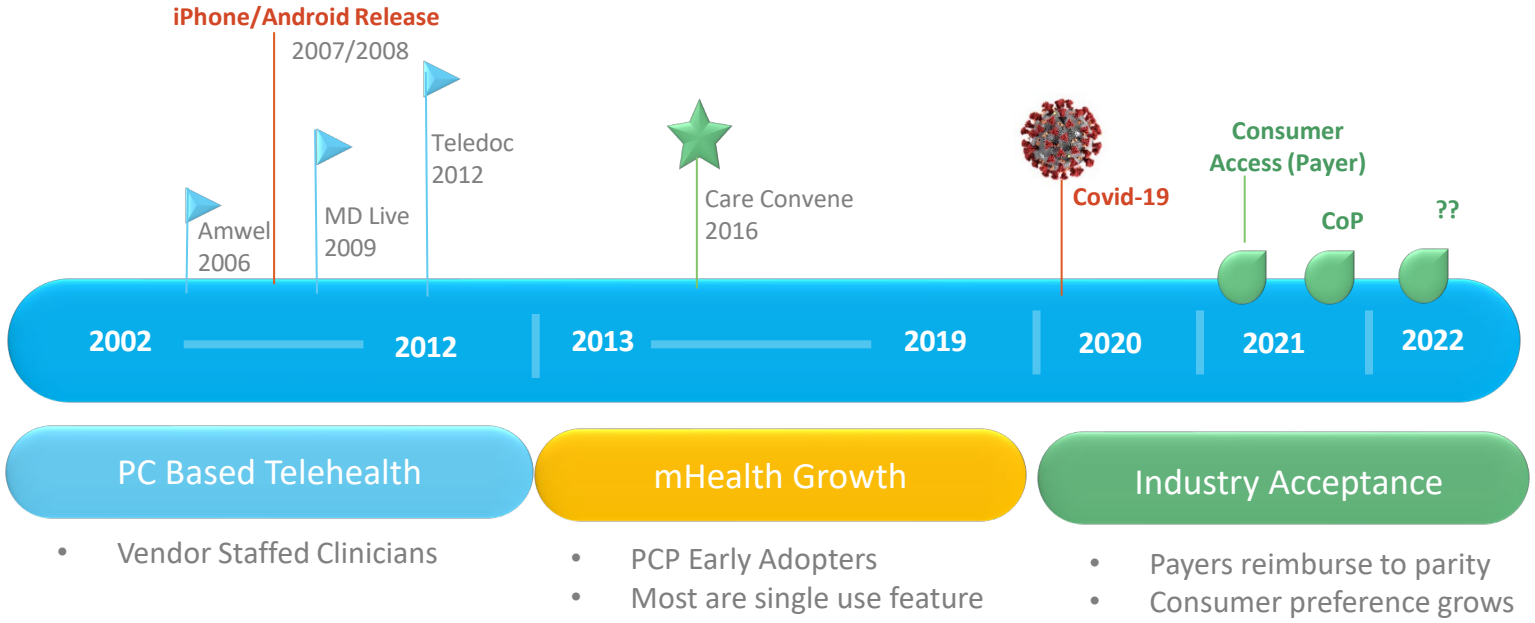
Helping patients become self-actualized effective health care partners

- Access health care services
- Analyze relative risks and benefits
- Calculate medication dosages
- Communicate with health care providers
- Evaluate information for credibility and quality
- Interpret test results
- Locate health information



Digital Health

Past, Present, & Near Future



Summary:

- Post Covid-19 consumers demand the conveniences of virtual health.
- Providers and patients accept virtual health as a standard care delivery option and convenience, respectively.
- Payers are reimbursing telehealth at office visit levels.
- The future will entail consolidating or “convening” patient data and provider-patient loyalty.

Maturity Model

Virtual Health Maturity Adoption Model

CONSUMER VALUE

Pre-Covid

Limited Utilization!
Use of Non-HIPAA compliant tools and outsourcing of telehealth.

Covid -19

Emerging Discipline!
Utilization driven by need for business continuity and new reimbursement during COVID-19 pandemic.
Practice initiated visits only.

Patient-Provider Partnership!

- Practice builds a virtual brand to extend patient medical home
- Patient-initiated visits
- Practice-initiated visits
- Symptom reporting
- Health journal

Clinic Integration!
Simplify patient and provider access to health information.

- Provider-HIE: ADT, CCD, etc.
- Remote Patient Monitoring: – Alert patients and provider care teams, improve patient health awareness.

Consumer Autonomy!

- Consumer integration to access payer claims data and EMR personal data.
- Consumer Data Exchange/Sharing
- ACP & Advanced Directives

EARLY ADOPTERS → REACTIVE & DEFENSIVE → INITIAL COORDINATION → EFFECTIVE INTEGRATION → EFFECTIVE TRANSFORMATION

HEALTHCARE DELIVERY TRANSFORMATION

MODERN SOLUTION

Patient Centered Digital Practice

Patient Initiated Virtual Care

- Treatment
- Triage and Rule Out
- Navigation and Referrals

Patient Self-Maintenance

- Symptom Reporting (chronic disease/ post procedure)
- Home-based Device Monitoring (Hospital at Home)
- Centralized Personal Health Record and Journal

Practice Initiated Patient Engagement

- Screenings – CCM, Discharge, SDOH, Care Gaps
- Surveys – Patient Satisfaction

Innovation Challenges: Three Peaks

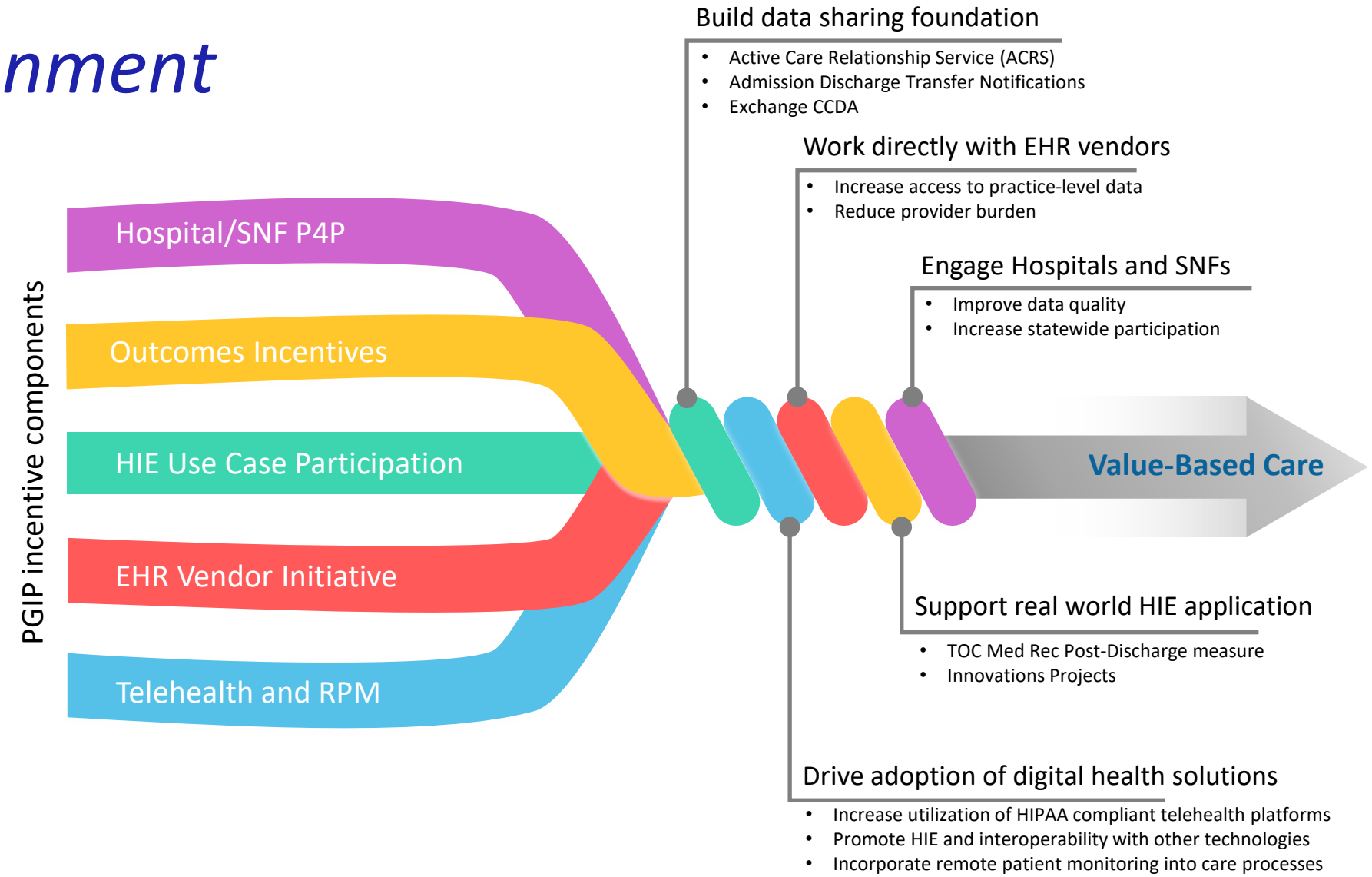
- Clinical Coordination
- Data Sharing & EMR Integration
- Longitudinal Relevance

- Data vs Information (ie. Both)
- Clinical Data Consumption
  - What, How, When..
- Clinical Compliance (Value)

- Problem/Hypothesis
- Patient Qualification
- Patient Onboarding & Training
- Patient Compliance (Value)

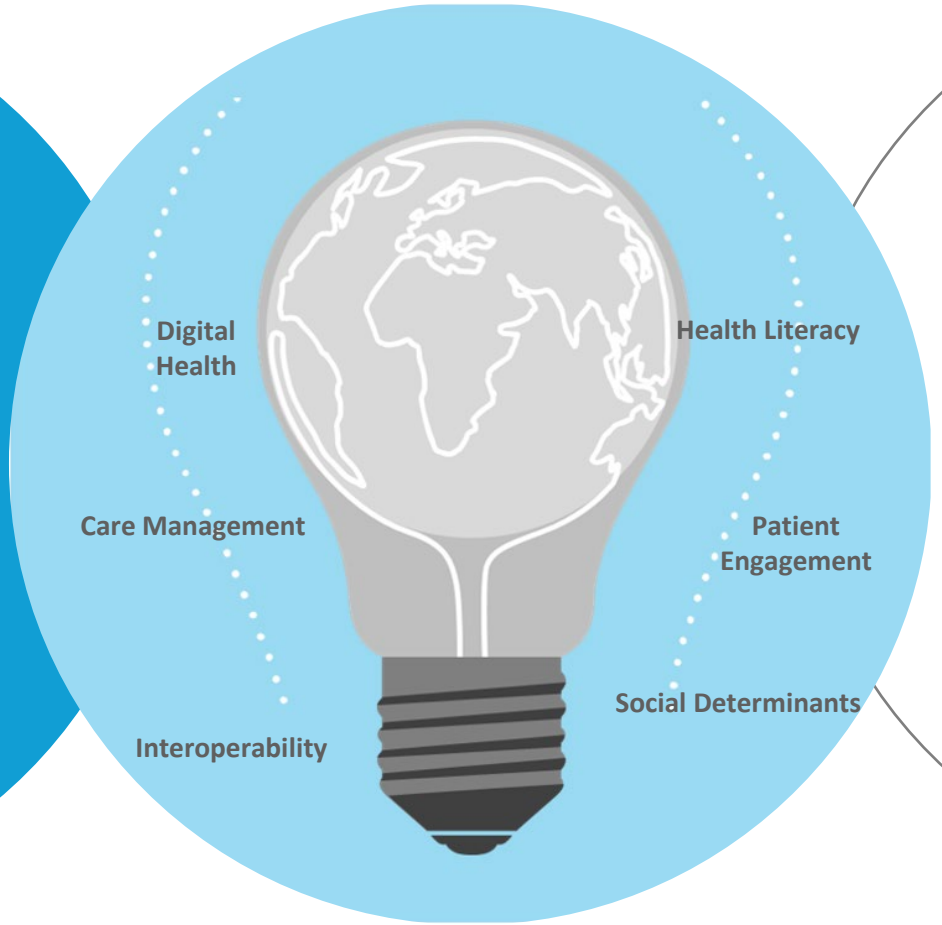
Incentive alignment

HIE incentive components enable cost and quality outcomes through provider engagement, data sharing and problem solving



Digital Health Innovations

Enable the future of efficient healthcare delivery and convenient patient engagement using digital technology to better connect patients and care teams.



- Real-time ADT delivery
- Coupled RPM data with patient assessment
- Gaps-in-care reminders for patients
- Scope of practice and resource optimization for digital care delivery

One of toughest thing about delivering healthcare value is understanding how to transform data and leverage health information to better engage patients and support clinicians

Integrating RPM & HIE into the Clinicians Workflow

Partner with physician organizations across the state to leverage Real-Time ADT, ACRS Care Team, Provider Directory, CCDA, & Mobile Telehealth App

- Advanced Transitions of Care to Reduce Readmissions
  - **Enhance care management workflow by providing frictionless access to discharge ADTs in a mobile app**
  - **Connecting with the patients virtually to perform the transition of care**
- Electronic postpartum depression screening
  - **Postpartum depression screenings for mothers at a pediatric visit to decrease barriers to families seeking care, increase referrals to behavioral health providers for families with positive PPD results, and sharing of results with primary care**
  - **Behavioral health follow-up care provided via telehealth visits**
- Remote patient monitoring pilots
  - **Increase chronic disease specific symptom awareness, improve symptom management and coordination between patients and physician care teams**
  - **Improve disease monitoring compliance, education and patient interpretation of reported device data**
  - **Streamline and expedite biometric device data into notifications for actionable clinical responses**

Innovation Projects

Upper Peninsula Health Group – Remote Patient Monitoring (Oncology)

Lee Marana – Manager of HIE & Informatics

This pilot will focus on improving patient activation, engagement and health literacy to help patients communicate ongoing health status, specific to daily activity, physical ability, as well as changes in wellbeing to their oncologist and primary care provider team. Remote patient monitoring tools will be used to help patients assess general vitals based on disease specific conditions.

The Physician Alliance – Realtime ADT/CCDA Delivery and Telehealth to Improve TOCs

Sharon Kraydich – Director of Quality & Utilization

The purpose of this pilot is to build a sustainable care model that leverages health information exchange services and telehealth technologies to promote and enable patient engagement of chronic symptom management, strengthen patient-provider connectivity, and efficiently drive increased use of transitions of care (TOC) visits

Access Health – Place-Based & Practice Based Patient Engagement (SDOH)

Jeff Fortenbacher– Executive Director

Current methods of patient engagement are based on the sporadic utilization of health information exchange data and telemedicine. This approach lacks standardization and misses many opportunities to integrate patient engagement. This intentional linkage with patients is an important component of successful population health management as it can identify and address significant barriers to patient compliance and personal wellbeing.

Key Takeaways

- *Consider the patient as a "consumer" for purposes of improving access and convenience*
- *Practice based HIE and digital health model must include the entire care team and utilize members at their highest licensure*
- *Technology needs to be adaptable to the clinical processes, practice workflows and variable sized practice teams with unique resource models.*

"Communication done right is at the root of most every positive experience in medicine. Conversely, communication done wrong is at the root of most every negative experience in medicine."
Jeff VanWingen, MD

QUESTIONS?
FEEDBACK?
DYNAMIC DISCUSSION?

Join us for **BITS & BYTES**

Care Convene:

Virtual health platform allowing for greater patient access to quality care via a secure platform; HIE enabled, easily integrated into a providers practice flow, and can provide longitudinal and episodic care information; supports bi-directional communication between patient and provider via text or chat functionality

Solution for*: Providers, Payers, HIEs as a reseller, POs*

Message Delivery

Allows for electronic sending & receiving of a variety of message types including ADTs, CCDs, Laboratory Orders/Results, Radiology Studies, Transcribed Documents, & Pathology results utilizing a variety of transport mechanisms

Solution for*: ACOs, Health Departments, HIEs, Home Health Agencies, Hospitals, LTC, Payers, POs, Providers, SNFs, Gov't*

Wednesday, January 26, 2:00-3:00 PM

Join us for the next **The Download** on

Wednesday, February 16, 10:00-11:00 AM

THANK YOU!