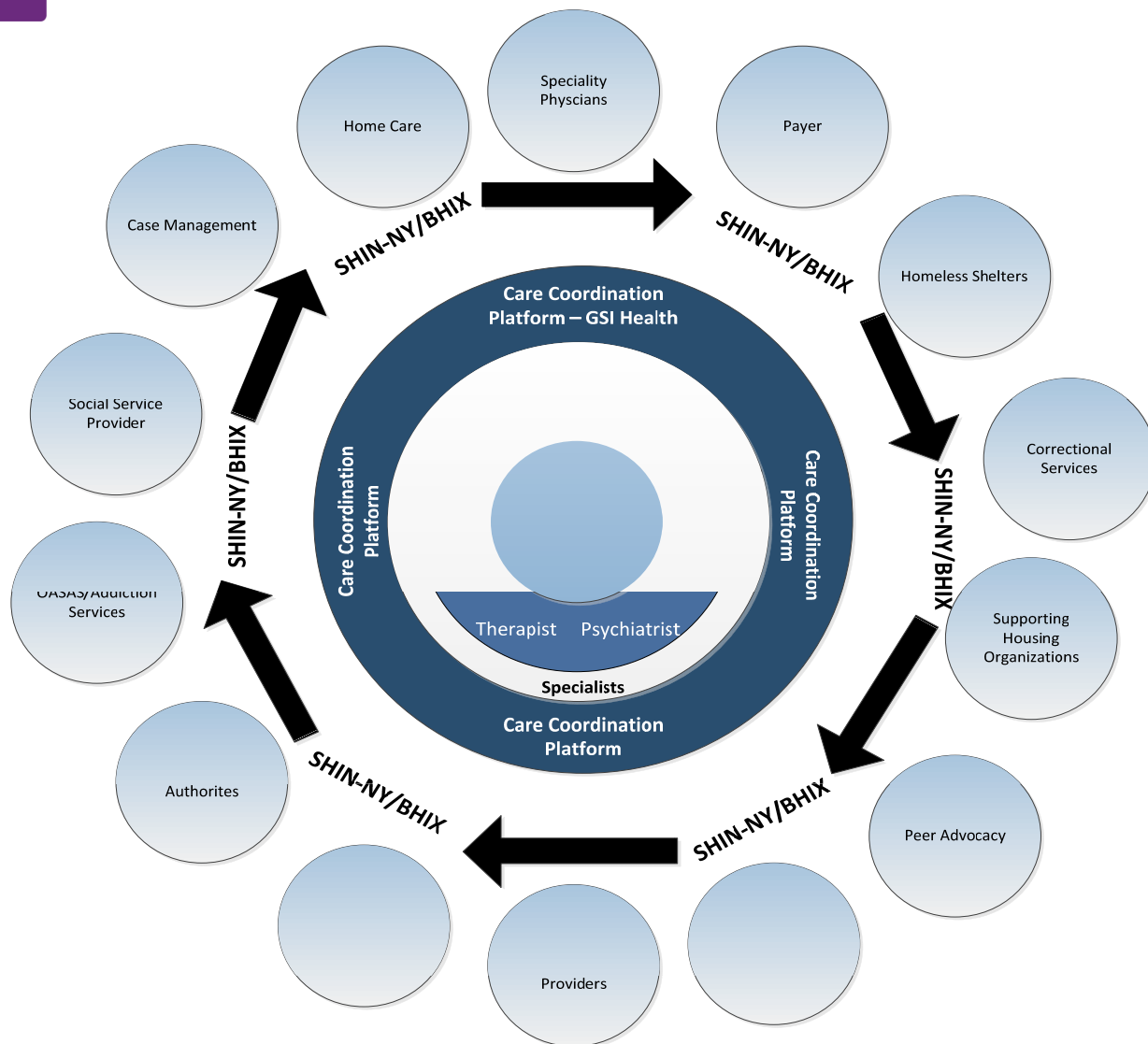


Patient and Family Engagement: Strategies to Improve Health

**UHF & GNYHA 24th Annual Symposium on
Health Care Services in New York:
Research and Practice**

David Cohen, MD, Maimonides Medical Center

Overview of the Clinical Model



Key Feature of the BHH model: Virtual co-location of providers and services enabled by health IT and coordination of services



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Model Engages the Member

The Core Team consists of:

- Care Manager (CM)
- Care Navigator (CN)
- Primary care provider (PCP)
- Psychiatrist (if needed)
- Therapist (if needed)

Other potential team members:

- Specialty care physicians
- Peers
- Home care nurses
- Residence managers
- Social workers
- Substance abuse providers
- Other caregivers in Health Home



Care Team Responsibilities





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Care Manager Training

- Partnering with 1199 Training and Upgrading Fund to develop Care Manager Training Program
- Topics include:
 - Chronic Conditions and Co-morbidities
 - Self-Management and Care Management Interventions
 - Risk Assessment
 - Advocacy and Diplomacy
 - Transitions in Care
 - Managing a Caseload
 - Care Coordination
 - Interdisciplinary Teamwork
 - Interdisciplinary Team Care Planning
 - Ethics, Cultural Competency and Health Disparities
 - Patient-Centered Communication
 - Motivational Interviewing and Health Coaching



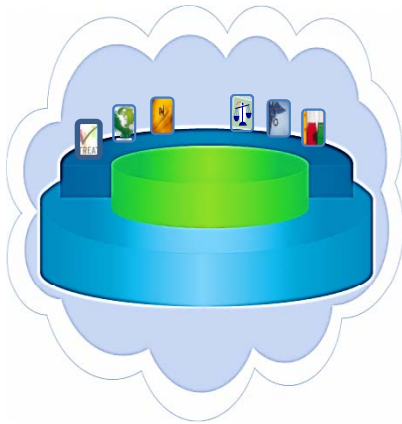
Peers

- Peers are integral part of Care Team
 - Outreach, Engagement, Re-engagement, Ongoing Care Management
- Maimonides partners with Baltic Street and Optum to include Mental Health Peer Counselors in discharge planning process
 - Peer-Centered Services such as Socialization Centers, Recreational and Vocational Programs included in discharge plan
- Peer Counselors highlight the *patient's perspective* about the importance of work, leisure activity and community

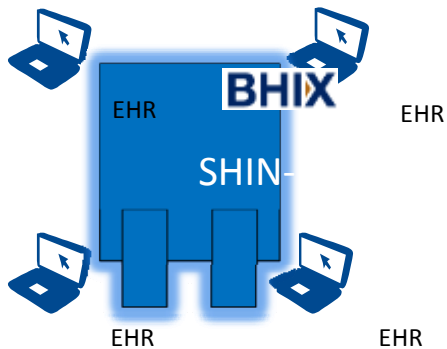


Care Coordination Platform

Platform



GSIHealthCoordinator



User Interface/ HH Dashboard



Apps



Enrollment



Care Teams



Coordinated
Care Plan



Alerts



Messages



Member
Engagement



Population
Manager



Member
Summary/
CareBook

Coordinated Care Plan (CCP)

TREAT 

Home Notifications Client Search Profile Assessments Progress Notes CCP Data Manager

Help Logoff

Care Plan Summary

Amy Koizim, MA/MSH
logged in

Client: **Alfonso Overton** Patient ID: **0000034035**

 Printable Version

✓ 1 Issue Requires Your Co-signature

Client Information/Alerts

Client Participation

Client Summary

Create New CCP Issue/Need

Filter By:

Strengths / Resources / Challenges:

	Issues / Needs Title	Domain	Goals	Goal Status	Last Modified By	Last Modified	Time Limited	Client Goal Priority	Clinician Goal Priority
<input type="checkbox"/>	<input type="checkbox"/> Client has Hyperlipidemia	Metabolic Health (MH)		Auto-Updated		17-Apr-2012 8:34 AM			
<input type="checkbox"/>	<input type="checkbox"/> Clinical Obesity	Metabolic Health (MH)		Auto-Updated		17-Apr-2012 8:34 AM			
<input type="checkbox"/>	<input type="checkbox"/> High Blood Pressure	Metabolic Health (MH)		Auto-Updated		17-Apr-2012 8:34 AM			
<input type="checkbox"/>	<input type="checkbox"/> Substance Abuse	Addictions (A)	Abstain from benzodiazepines for 2 months	In Progress	Amy Koizim, RN	16-Apr-2012 11:07 PM		High	High
<input type="checkbox"/>	<input type="checkbox"/> Needs Permanent Housing	Housing (Hou)	Identify a stable housing situation for 6 months	In Progress	Ryan Walsh, LCSW	16-Apr-2012 3:09 PM		Medium	High
<input type="checkbox"/>	<input type="checkbox"/> Hepatitis C	General Medicine (GM)	Control Hepatitis with medication to prevent liver failure	In Progress	John Smith, MD	16-Apr-2012 10:48 AM		Medium	Urgent
<input type="checkbox"/>	<input type="checkbox"/> COPD	Cardio-Respiratory (CRP)	Control COPD related symptoms with medication to prevent hospital admissions	In Progress	John Smith, MD	16-Apr-2012 10:44 AM		High	High



Patient Portal: Goals

- Web-based, secure, electronic patient engagement tool
- Support communication between the patient and the patient's care team
- Enable the patient to access the patient's personal health information
- Be available 24 / 7 → convenient for patients
- Meet requirements for Meaningful Use and Medical Home Recognition programs



Patient Portal: Functionality

Patients and the Portal

- Review Care Plan
- Request appointments
- Send secure messages
- Request medication renewal, lab or imaging result
- Educational materials
- Request a referral
- Ask for an electronic copy of patient health information
- Enter key information

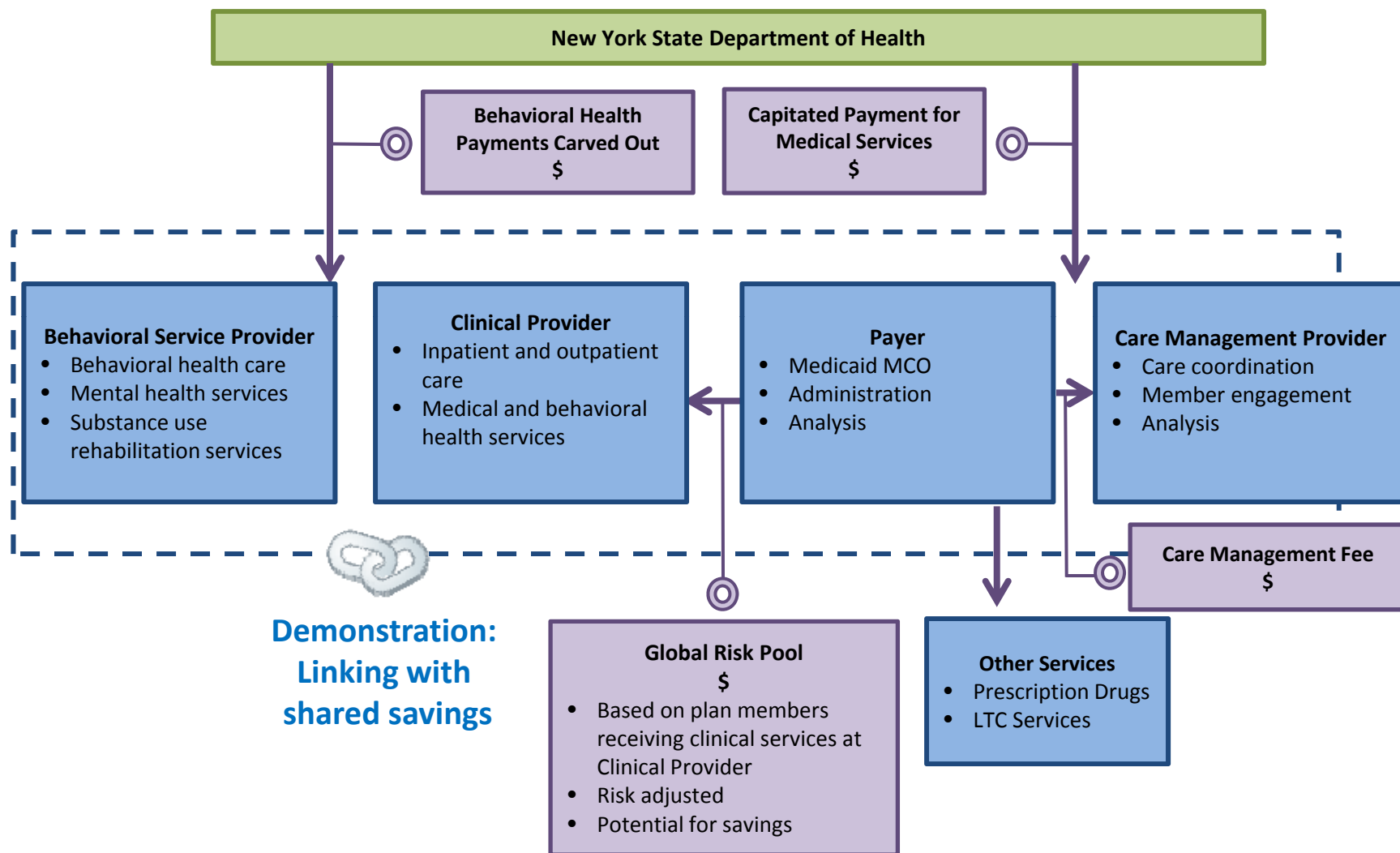
Providers and the Portal

- Communicate with patients
- Verify insurance or demographic information
- Send reminders
- Send referrals
- Change appointments
- Share lab or imaging results
- Send patient-specific health education / information



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Pilot Payment and Service Foundation



Pilot Savings Structure

