





HIT & Patient Relationship Management

The power and potential of Consumer-Focused Health Information Technology to contribute to sustainable models for behavioral health providers while achieving the Triple Aim.

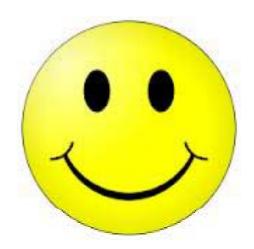
February 6, 2013



The Triple Aim



- Improve Outcomes
- Reduce the Cost of Healthcare
- Increase Participation & Opportunity





Meaningful Use Stage 2

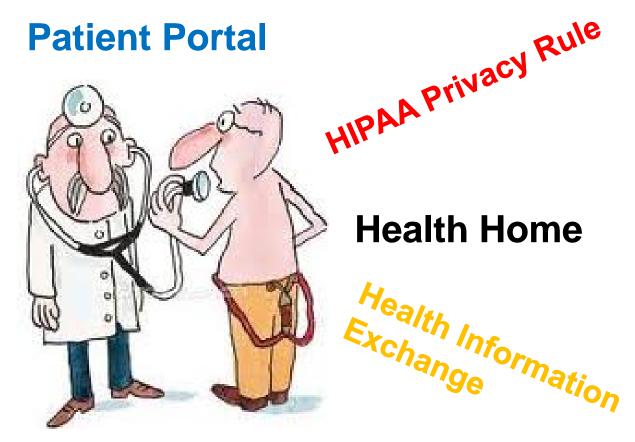




Personal Health Record

PAP VS ACO

Patient Portal



Patient Communication

Affordable Care Act



What's in it for Me?



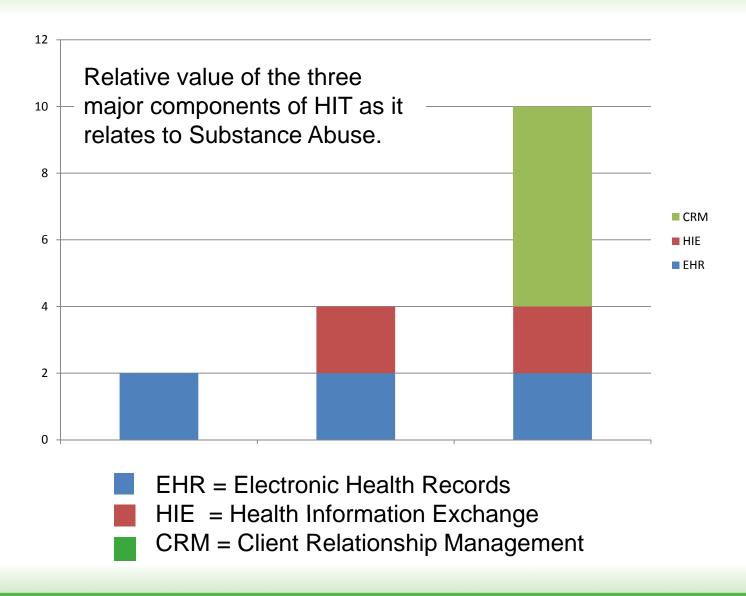
- Improved Operational Efficiency
- Increased Revenue

Improved Outcomes and Satisfaction for all Stakeholders



VALUE



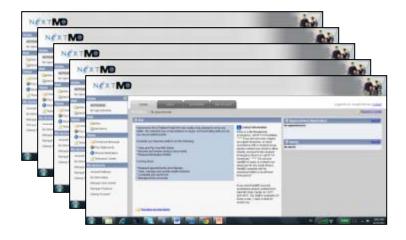




The Problem



Transactional Portals



- Pay your bill
- Request med refills
- View lab results
- Schedule appointments
- Limited medical history

Lessons learned

- Generic one-size-fits-all solutions do not work.
- Must include all PHI
- Must give new value
- A Public Health IT challenge

\$20 billion per year potential savings, yet only <u>7%</u> of public have access to these tools



Integrated Health



- HIV/AIDS
- Diabetes
- Hypertension
- Hepatitis C
- Adverse Pregnancy Outcomes
- PTSD
- Depression ...



The Stakeholders



Improved health, convenience, cost

Patients & Family (PHRs)

Payers,
Lower cost,
reduced
absenteeism,
Improved
health

Patient Relationship Management

Health Information
Exchanges (HIEs)
& Accountable
Care Organizations
(ACOs)

Providers

Regulatory
compliance,
Revenue
Efficiency



Three Domains

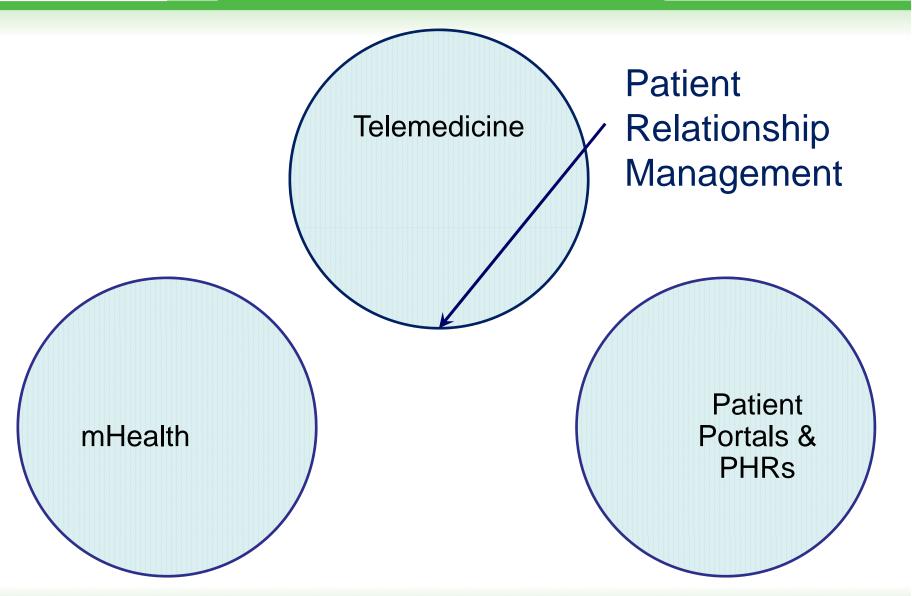


Patient Social Media Relationship Management Personal Clinical Health information Information



What's in a name?







Opportunities for Integrated Health



- ✓ Medicaid is sometimes a capitated payment model
- ✓ Growth of Accountable Care Organizations
- ✓ Change in insurer payment models (Physician Group Incentive Programs)
- ✓ Behavioral health is all about client communication
- ✓ SAMHSA grants reduce initial risk
- ✓ High correlation between BH and physical health (National Council report 6/12/2012)
- ✓ Emerging Health Home model is focused on patient engagement
- ✓ Patient engagement can be achieved without dependence on EHR installation first.



Objectives



Four Functional Objectives:

- 1) For Participants, improve outcomes and satisfaction.
- 2) For healthcare providers,
 - a) Improve operational efficiency,
 - b) Expand revenue,
 - c) Meet Meaningful Use Stage 2,
 - d) Support new payment models.
- 3) For payers, reduce costs particularly for the Medicaid population.
- 4) <u>For communities</u>, promote integration between behavioral health and physical healthcare.

Are we entering the age of **Community Connection Tools?**



e-ROSC & Integrated Health













Health Information Exchange

Recovery Tools

Recovery Plan

Weekly Update

Secure Messages

Personal Calendar

Recovery Capital Scale

Behavioral Health

Substance Abuse

Depression

PTSD

Chronic Pain

My Personal Health Record

Physical Health

Diabetes

COPD

Hypertension

Hep C & Pregnancy



Linda Grove Paul

Vice President, Recovery & Innovation Services

Centerstone of Indiana

Siloed Resources and Siloed Funding



Blended, individualized, and recovery oriented supports allow us to cut through silos.

- A cost-effective, communitybased, whole-health approach to addictions treatment
- Focus on increasing "Recovery Capital" in addition to meeting "treatment need"
- Focus on "Targeted Treatment"
- Uses Recovery Coaches,
 Recovery Engagement Centers,
 volunteers, and community
 resources to meet the need of
 each individual



Recovery Capital & Treatment Need

High **Specialty Addiction** and Mental Health Practices. EBPs. Life Specialty, EBPs, Mental Health Treatments. Skill Groups. Recovery Coaching. Peer **Treatment Need** Support. **ROSC.** Recovery No Treatment. Other Coaches. Peer Linkages. Support. Low

Recovery Capital

High

Recovery Capital

Personal Recovery Capital

- **Physical Capital** = Health, shelter, food, transportation, etc.
- **Human Capital** = Life skills, values, knowledge, credentials, self-awareness, self-esteem, optimism, purpose

Family/Social Recovery Capital

- Family Capital = Family and family of choice, social relationships
- **Community capital** = Access to resources in the community

Cultural Recovery Capital

• **Cultural Capital** = Local availability of culturally-prescribed pathways of recovery

Recovery Planning

- Recovery plans should drive the services, and actions of both providers and consumers.
- The service provider takes the role of a consultant.
- Recovery plans meet a person where he/she is at.
 - Designed to meet any stage of change
- Recovery plans are holistic
 - Looking at the whole person and meeting their needs
- Recovery Plans identify a recovery team through the consumer's eyes.
- Recovery plans are a living document, meant to be reviewed and adjusted.

Community Engagement REC Usage Data



With approximately 4200 walk-in's per year, service requests include:

20% Support Service

8% Employment

7% Housing

20% Support Groups

20% Recovery Coaching

4% Service Inquiries

35% Informal Support

The Recovery Engagement
Center offers a low-barrier
point of entry into Recovery
Systems: The REC serves as a
community HUB FOR
RECOVERY

The ability to partner and leverage other community resources and supports allows us to provide comprehensive services and address the diverse needs and interests of clients and the community. You do not need to be a Centerstone client to use the REC. We are gatekeepers for Centerstone and community builders!

REC Service Offerings

- Recovery Coaching
- Safe Space / Sober Supports
- Transitional Living Program
- Employment Supports
- Health and Wellness groups, activities, testing, etc.
- 12 Step Meetings (AA, NA, AL-ANON)
- Medical Supports
- Faith Based and Other Support Groups
- Life Skills Training
- Gardening
- Events and Socialization Opportunities
- 3 Tier Volunteer System
- Peer Mentors / Peer Support Specialists
- (this is home, health, community and Purpose)

Barriers to Accessing Supports

Geographic and transportation barriers to accessing the REC.

- Some clients lack the resources to make it to a physical location consistently.
- Some clients need basic support in domains of scheduling and follow-up.
- Some clients are reluctant to seek help.



Virtual Engagement is the next step in increasing community connections, encouraging engagement, and offering a diversity of supports.

V-REC Content / Levels of Access

Community Level Open Access to Resources Facebook, Youtube, Twitter, Second **Public Social Media** Life, etc. V-REC Hosted social media Moderated Discussion & & Private Chat Live Chat **Direct Link to** Request an Appointment **Services Client Level Restricted Access to Treatment Resources** (Username and Password Required) E-ROSC **Owned by Client** My Personal Recovery Health Record **Controlled by Recovery Tools Centerstone / Used** by Client **Controlled by** Electronic Health Record Centerstone

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Recovery Support Tools

Recovery Capital Scale

Domains Assessed

Career / Education
Leisure/Recreation
Independence from Legal Problems
Employment / Financial Independence
Drug & Alcohol Recovery
Relationship/Social Support
Medical Health
Mental Wellness Spirituality
Mood / Confidence / Problem Solving

Treatment / Recovery Support

TMAC

Risk v. Protective Scores
Work Made Toward Goals
Planning for Future Work
Informs Modifications to Recover Plan

Recovery Plan

Goals Established in EACH DOMAIN for Recovery Planning, based on RCS Results

Priority Goals

Tools Continually Inform Each
Other

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DEMONSTRATION

Doug Dormer
Founder & CEO
White Pine Systems
(dba "SPINN")

Linda Grove-Paul VP, Recovery & Innovation Centerstone of Indiana

Recovery Engagement Center



Request Appointment









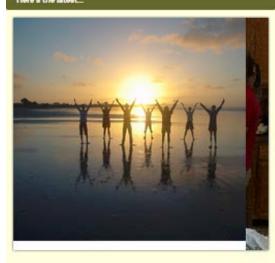
Helping you along your path to recovery

OUR VIEW WHAT WE PROVIDE RESOURCES / NEED HELP?

CALENDAR RESOURCES REAL RECOVERY

GALLERY THE STAFF

Here's the latest



JOIN THE DISCUSSION

Let's talk Recovery! Join with other community members like you and share motivation, inspirational quotes, stories, or encouragement. Are you in need of help with something? We are in this together. Mention it to the group and watch your local community of recovery rally around you!

Click here to see a list of supported browsers





A DISQUS-





and 37 others liked this.

Add New Comment

Login



Type your comment here.

NEWS/BULLETINS

Hi My Name is J.D. and I'm an Addict

I didn't relapse today, nor yesterday, or the day before! I was fortunate I guess. See I don't want to use and for me it's just that simple. I have witnessed more than one relapse this... View in Context »

Can I borrow a cup of sugar?

Last night, a random stranger knocked on my door with a well known yet odd request, "Can I borrow a cup of sugar?" Considering I live about a block away from a grocery store, I found

View in Context »

Showing 5 of 1903 comments

Sort by newest first



lifemoreabundant

I think the hardest thing to deal with is watching one of your family members struggle with addiction. It is level of powerlessness that is hard to accept. Anyone have suggestions on how to deal with this issue?

1 hour ago

Like Reply

Video



UPCOMING EVENTS

TODAY - Feb 5

- 2:30PM 4:30PM REC Walk In's
- 6:00PM 7:00PM AA- Shivering Denizens Outreach
- 6:00PM 7:00PM AA- Women in Recovery more
- 6:30PM 7:30PM AA- Stone City Group more
- 6:30PM 7:30PM AA- Stone City Group more
- 7:00PM 8:00PM AA- Stepping Into Sobriety Group
- 7:30PM 8:30PM AA- Tuesday Evening Group more
- 7:30PM 8:30PM AA- Tuesday Night Candlelight Group more
- 8:00PM 9:00PM AA- One Day at a Time Group more
- 8:00PM 9:00PM AA- Tuesday Night Literature Gro more

Talk to us now! +





Showing 5 of 1903 comments

Sort by newest first





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1 hour ago

Like Reply



lifemoreabundant

Congratulations J.D.

20 hours ago

Like Reply



Melissa Oran

Awesome job J.D.!

23 hours ago

Like Reply



livingthedream46

Heeeelllooooo Monday! Had a great weekend - sober reference weekends are great!

1 day ago

Like Reply



Jax77

By this time of winter, I am done with it! Missing my flip flops and warm breezes :)

1 day ago 2 Likes

Like Reply



X Subscribe by email N RSS



Dashboard

Messages(2)

Public calendar

Private calendar

Live Chat

Moderate Discussion

Participants

Add User

(Logout)

Participant: Jonathan Smolowe

Recovery Coach: Center Stone

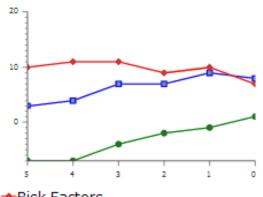
Select questionnaire: 10/12/2012, 10/08/2012 Add questionnaire:

Add

Name: Jonathan Smolowe Birthdate: 07/23/1953 Cell phone: 7346681518 Email: jsmolowe@spinnphr.com Date started: 09/10/2012

Note:

Jonathan has had a hard time finding a job. He thinks he has one but is not sure about its stability.



- →Risk Factors
- Protective Factors
- -Net Risk / Protective Factors

Selected Questionnaire Summary					
Risk Factors					
Legal / Occupational	2				
Triggers	2				
Mood	2				
Cravings	2				
Medical	2				
Confidence	1				
Total Risk Factors	11				
Protective Factors					
Recovery Supports	1				
Sober Support	1				
High Risk Situations	2				
Leisure / Wellness / Spirituality	1				
Sober Activities	2				
General Information	0				
Total Protective Factors	7				
Net Protective(+) Risk(-) /	-4				
Factors	-4				

Session's before current week	5	4	3	2	1	Current
Questionnaire date	09/11/2012	10/08/2012	10/08/2012	12/12/2012	12/17/2012	01/28/2013
Protective Factors	3	4	7	7	9	6
Risk Factors	10	11	11	9	10	7
Net Risk / Protective Factors	-7	-7	-4	-2	-1	-1
Progress score (Change in Risk / Protective Factors)	n/a	0	3	2	1	0

Schedule Meeting

RCS Recovery Plan Coach View

Print



Triggers

Messages(2) Public calendar Private calendar Live Chat Moderate Discussion Add User (Logout) Dashboard Participants Support Questionnaire - Coach View for: Smolowe, Jonathan Participant Questionnaire Summary RCS Recovery Plan Select questionnaire: test891, 01/28/2013 Add questionnaire: Add General Information Medical ▶ Legal / Occupational Mood ► Confidence ✓ ▼ Cravings 🚩 How often have you had thoughts of using, even if you did not want to use? 7 How intense were these thoughts? TMAC score guide Strong 1x or Less/Week = 0, 2-3x/Week = 1, and >3x/Week = 2. If Moderate Question 2 is rated as "Strong" add 1 point for a maximum score of 2. Save Close Score: 2 scoring quide Note: Save score

Recovery Engagement Center



Request Appointment





Helping you along your path to recovery

OUR VIEW WHAT WE PROVIDE RESOURCES / NEED HELP? CALENDAR RESOURCES REAL RECOVERY GALLERY THE STAFF Hi Mario Logout

My Top Goals/My Top Priorities (What I'm working on now) Recovery Tools 1) Get a Job Recovery Plan LOW: It is critical that you change your Recovery Capital Scale (Read Only) management of this recovery risk. Questionnaire Find an Apartment MODERATE: You could improve your Personal calendar management of this recovery goal. My Personal Health Record 3) Seek Company from Support Groups HIGH: You are succeeding in your management of this recovery goal. Click here to access the PHR tide / Show Feb 3 - Feb 9, 2013 Month Next 3 Days Work Week Agenda Find an Apartment Wed, Feb 6 Thu, Feb 7 Fri, Feb 8 Sat. Feb 9 1.Objective: Figure out my price range Progress measure:52% 25% 75% 0% 100% 2.Objective: Put ads in 5 places to find roommate Progress measure:96% AM | 9:15 AM - 9:30 AM 0% 25% 50% 75% 3.Objective: :00 | 10:15 AM - 11:00 100,000 recurrences 100,000 recurrences 100,000 recurrences 100,000 recurrence Get recommendations (3) Progress measure:73% 25% 50% 100%

Personal Health Record

Helping you along your path to recover

Hi Sean! Logout





Your Records Privacy & Security

Sean's home ID: 7A4-559-60F (Switch)

* Personal Info

Medications

Conditions

Allergies

<u>Immunizations</u>

Appointments

Procedures

Notifications

Providers

Health Plans

Be Well

- * Observations
- * Tools
- * Optional

	Your Home Pag	ge: Be Well		Per	sonalize: E	ie Well	ř.		
Metabolic	Risk Factors	Activites	of Daily	Living					
<<<1>>>>		<u>ld lw lm ly</u> Fr	rom: 1/6/13		To: 2/5/13	Ap	oply		
	Blood Presure mmHg	Heart Rate bpm	Weight lbs	Height in	BMI kg/m2	Wast circ. in	Cigarette Use #/day	Body Fat %	Author
01/07/2013	137/78	57	218						
01/09/2013 <<< I >>>	124/84	60	215	72					



Personal Health Records

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e-ROSC Terms of Service and Privacy Policy

The Text Message Authorization Form

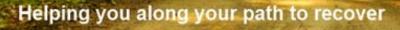
Talk to us now! +



Personal Health Record

Hi Sean! Logout







Your Records Privacy & Security About Your Home Page: Anti-Personalize: Choose One Coagulation Dashboard Blood Pressure Heart Rate Reminders Add INR Sean's home ID: 7A4-559-60F 1d 1w 1m 1y From: 12/24/2012 TO: 1/24/2013 17 apply (Switch) 140 Systolic Diastolio 130 * Personal Info Medications 120 Conditions Allergies 110 **Immunizations** Appointments 100 Procedures 90 Notifications Providers 80 Health Plans Be Well 70 Jan 3 Jan 4 Jan 5 Jan 6 Jan 7 Jan 8 Jan 9 Jan 1 Observations * Tools Date * Optional 124 84 1/9/2013 Sean Kenney × 137 78 1/7/2013 × Sean Kenney 127 81 1/5/2013 Sean Kenney 119 79 1/3/2013 Sean Kenney 122 79 1/1/2013 Sean Kenney



Personal Health Records

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What's in it for Me?



- Improved Operational Efficiency
- Increased Revenue

Improved Outcomes and Satisfaction for all Stakeholders



Clinicians gain new perspectives

- As a recovery coach, the use of the information technology tools has greatly increased the amount of relative information and data I am able to capture on the individuals with whom I work.
- The pre population of scores throughout the toolset, has allowed the individuals to gauge where they see themselves in their progress, and begin to take ownership of their plan, goals, and ultimately their recovery.
- The in depth information I gain as a clinician about high risk situations, triggers and cravings has something to be said about it. The individual is assessing themselves at a time when they are able to reflect, without the pressure of a provider asking them those questions and feeling the need to provide a response within a timely manner. These questionnaires teamed with telephonic support, create a working environment that enables the individual to truly reflect, engage, participate, and gain support on so many more levels.
- One of the individuals I work with was unsure about what activities would increase their HIV risk status. Since this is a question that is asked on the tools, we were able to discuss at great length creating an awareness for that individual (and the clinician) that this is a problem and without these tools this discussion would have likely never come up.
- The calendars have brought a level of competency for the clients to begin tracking their appointments and making the <u>choice</u> as to if they would like reminders, and what goals would like to focus on.
- Julie Haltom, Recovery Coach ☺



Electronic Tools/ Discussion Board

"Bobby" started in this program drinking every day heavily. "Bobby" reported that he would self medicate due to past trauma of watching his brother burn in a fire that his parents set. "Bobby" reported the only way he had ever known to deal with that kind of turmoil was to drink. "Bobby" did not see hope for himself, he could not see another way of dealing with his problems. Through consistent weekly meetings, "Bobby" began to develop coping skills, created a relapse prevention plan, plugged into community meetings and found an online AA meeting as well. Bobby worked through severe anxiety, using the weekly questionnaires to check in on how he was feeling, triggers, high risk situations, and progress. Through "Bobby's" scores providers watched as "Bobby" began to take control of his own recovery. "Bobby" started to connect with people on the v-recover discussion board. As he gained strides in sobriety, "Bobby" soon found himself getting on the discussion board to see how he could encourage someone in their recovery. "Bobby" was able to see progress through weekly scores and feel empowered in who he was becoming. There was a time sitting in Bobby's living room at his computer, as Bobby read something that someone posted back to him on the discussion board. Bobby exclaimed "Man, that is so cool! I'm able to help people with my story. It feels so good to do that. I didn't know I had anything to give." Bobby has recently filled out an application for Certified Recovery Support Training as a possible opportunity where he can give back through his story in new ways, tent weekly efforts



Creating a community

- Dr. Martin Luther King Day Health Fair (promoted through the website)
 - Volunteers requested funding for "day of caring health fair"
 - The volunteers brought together community vendors such as IU Positive Link, IU School of Nursing, Culinary Art of Purdue, Monroe County Health Department
 - The Health Fair Provided free health screens which consisted of HIV/HEP-C screening, BMI, Blood Pressure, nutritional information, smoking cessation, which were promoted locally with partners and through our website
 - Additionally volunteers reached out to local media's and canvassed the city with fliers. While doing so at a local coffee shop, an IU student asked for more information on the event. The student took a picture of the flyer, and posted this on various social media's such as twitter and facebook. Through this outreach, the IU Women's soccer team gained information about the health fair and chose to take this opportunity to give back to their community by coming in the day before and cleaning the Recovery Engagement Center Facility. Not only their efforts, but those of the girl scouts, IU nursing students, and community members- allowed the health fair to have over 100 volunteers. The health fair was a success, allowing doors were open 10-4pm to the community giving free screens, providing free referrals, and providing yet another opportunity for the community to gain holistic care, increase information about community resources and create more opportunities for community participation in health and recovery.



Volunteer Opportunities/Empowerment Through Public Site

- The public site that has been created for e-ROSC has been a platform of ample opportunities for engagement within the community.
- The website is beginning to provide volunteer opportunities individuals to give back, especially in early recovery. In keeping with the e-ROSC core concepts, we are helping to identify people's strengths and areas of interest and given them a platform to use those strengths to give back to the community.
- The resources including places to receive food, shelter/housing, clothing, treatment services, child care, medical care and so forth and calendar events that you see listed have been input by volunteers who enjoy data entry and/or who are continuing to build on their computer skills.
- In the news/bulletins section is increasingly presented from those in recovery, giving their perspective on an aspect of recovery that has been vital in their lives.
- Volunteers and community members are marketing, promoting, discussing, creating, resourcing, and designing. The community is noticing and desiring to engage-It has taken time, but the public page is transitioning into a virtual recovery engagement center, where the recovering individuals are the ones who are managing and maintaining most aspects. This is a vital component to our long-term sustainability.



CONTACTS

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