



Care Coordination Model

Team Experimental Design

Experiment	Our Question	Our Hypothesis	Our Findings	Our Decisions
Base Case	How do we see more care coordination patients in our team without reducing the quality of care for our existing patients? What would happen in our team over the next two years if we make no new decisions.	If we make no new decisions in our team, then over the next two years our referral rate and patients waiting to start CC, and our starting, number of patients in CC, and ending rate would all stay the same.	Because of the balancing feedback, we found that patients waiting to start would go up 4-5 months, and then drop back down and level out over the next two.	If we increase our appointment supply what happens to our care coordination service for both new patients waiting to start and our existing patients. We may also want to turn off our team data and start the model without to see what impact that has.

Experiment 1	How would it impact our patient care in CC, if we increase our appointment supply? What happens to our care coordination service for both new patients waiting to start and our existing patients over the two years.	If we increase the appointment supply for CC in our Team from 32 to 36., and we increase our referral rate to CC from 3.34 to 6 ppw. I'm going to turn off the Team Data for Starting Rate.	With changing the appointment supply and the referral rate we are increasing the number of Veterans in CC from ~210 Veterans today to 240 Veterans in CC over two years. We've freed up 4-5 new appointments per week. But, we found that the patients waiting to start would get better (drop zero) before it got worse (increase to 25 to 30 patients waiting). Referral drops after a few months the starting rate would increase (nearly double) and then return nearly to we started today.	We have more work to do to make sure that we don't have unintended consequences of this change. We should look at the RVI and our other interrelated variables, the referral rate to find a better optimum for team and our Veterans.
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Experiment 2	How does increasing RVI interact with our other interrelated variables, to influence overall CC services in our team?	If we increase the RVI for CC in our Team from 11 to 12, that it would decrease Patients waiting to start.	Initially we were able to see the additional 6 patients per week, but then it returns to the basecase level. We do increase the number of Veterans who receive CC by 20 over two years. Patients waiting to start goes back to the base case over time.	Next time we will combined exp 1 and 2 so that we are seeing the impacts of changes in appointment supply, referral rate, and RVI.
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Experiment 3	How does increasing RVI and increasing appointment supply interact with our other interrelated variables, to influence overall CC services in our team?	If we increase the RVI for CC in our Team from 11 to 12, and we increase the appointment supply from 32 to 36 appointments week, and we increase the referral rate in ppw from 3 to 6, then it would decrease Patients waiting to start while also increasing the number of patients in CC over the next two years, as compared the base case.	With these changes we would increase the number of patients in CC rather quickly within the first 6 month from 210 to 250 over two years. But we also see that the balancing feedbacks of wait times affects referrals, and the impact of RVI on the balancing feedback for new and existing patients, leads to better before worse system behavior for patients waiting to start, we level back at approximately one year for patients waiting to start and starting rate at higher level of 4 ppw.	We could continue to adjust the variables in this experiment. We could adjust our clinics to more hours for appointment supply and make RVI decisions informed by what we learned. We also know that we have to account for or think through the tendency to return to the status quo due balancing feedbacks.
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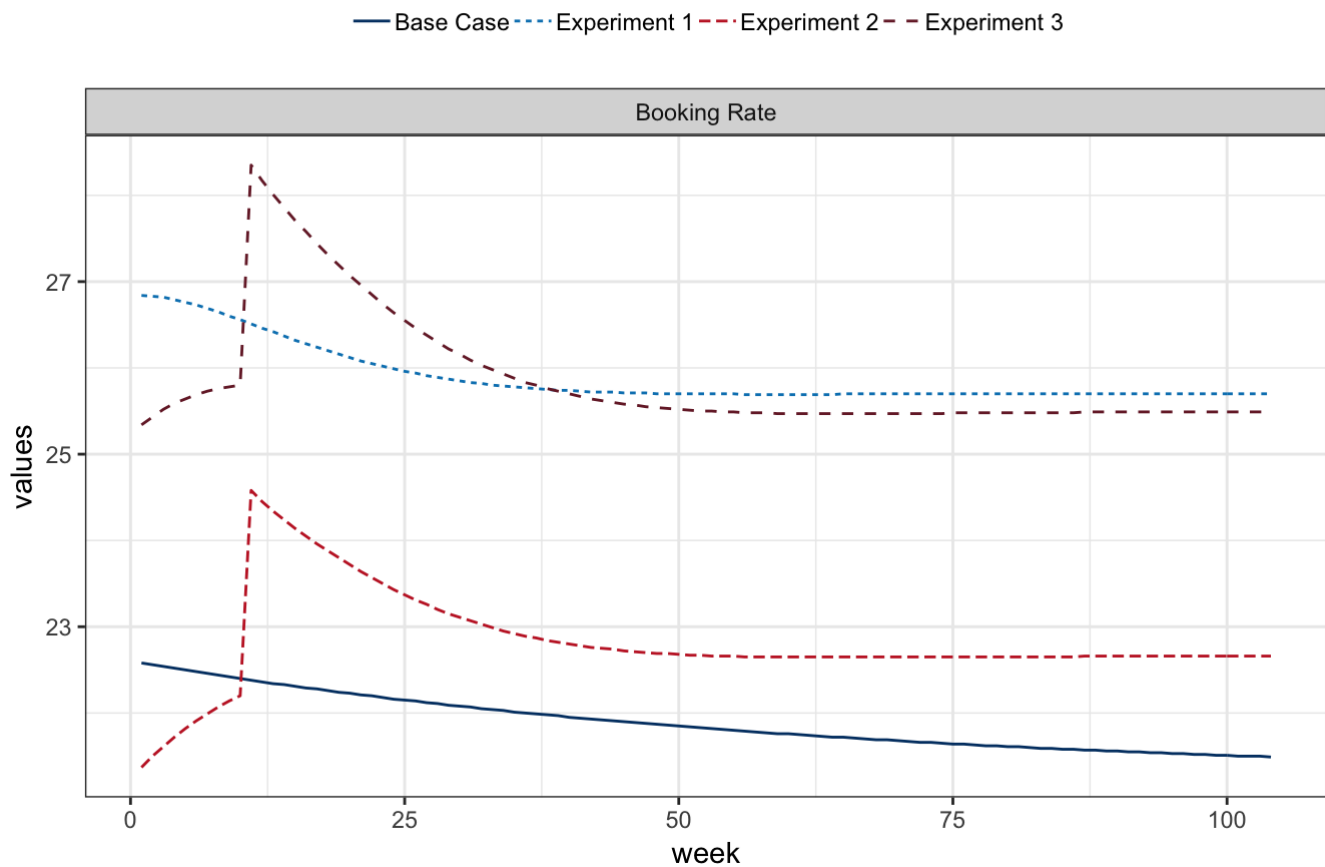
Changes to Model Parameters Relative to Base Case

Experiment	Variable	values
Experiment 1	Referral Rate	6.00

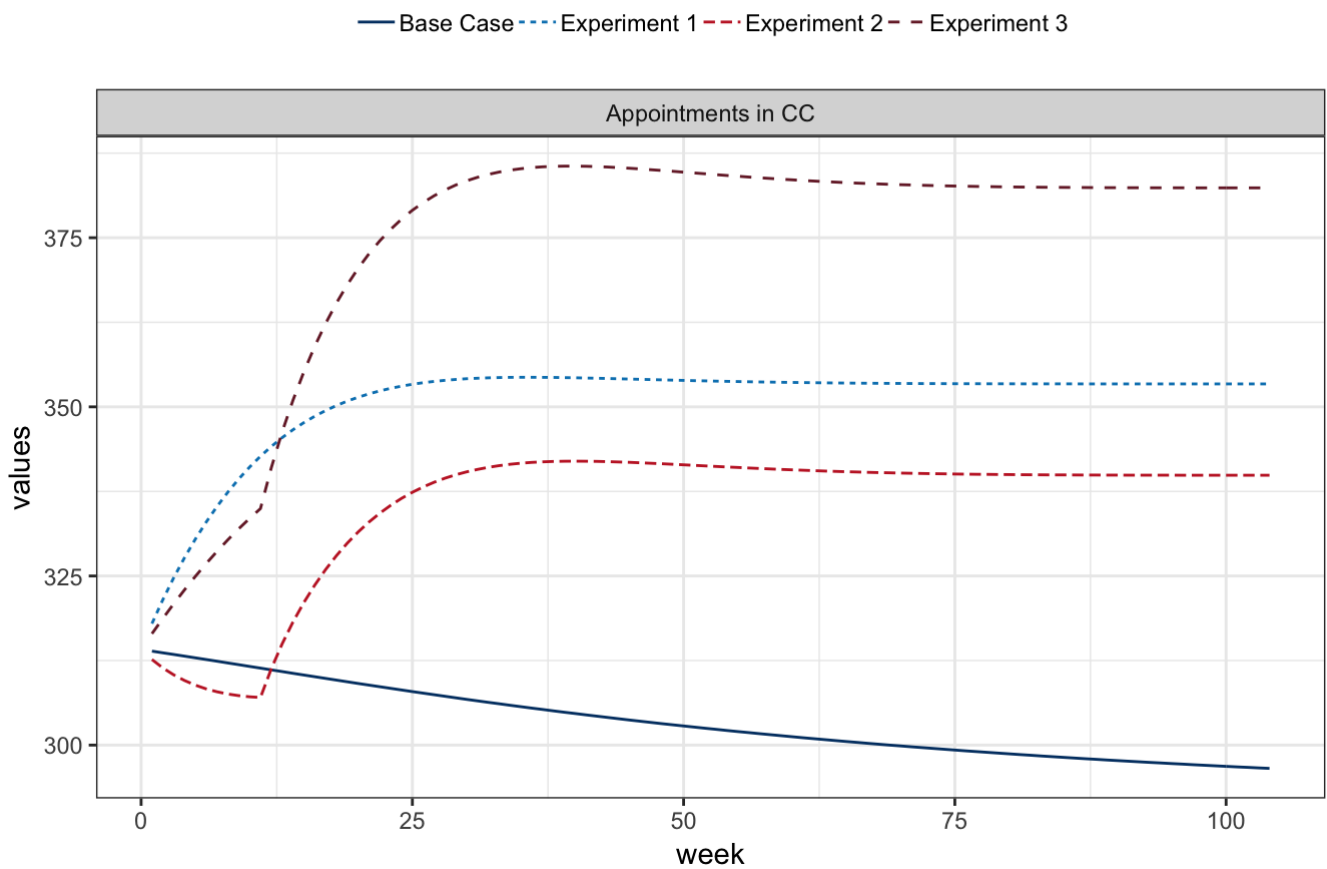
Experiment 1	Appointment Supply	36.00
Experiment 1	Use Team Data for Starting Rate	0.00
Experiment 1	Referral Rate	6.00
Experiment 2	Referral Rate	5.91
Experiment 2	Return Visit Interval	12.00
Experiment 2	Use Team Data for Starting Rate	0.00
Experiment 2	Referral Rate	6.00
Experiment 3	Referral Rate	6.00
Experiment 3	Appointment Supply	36.00
Experiment 3	Return Visit Interval	12.00
Experiment 3	Use Team Data for Starting Rate	0.00
Experiment 3	Referral Rate	6.00

Team Graphs

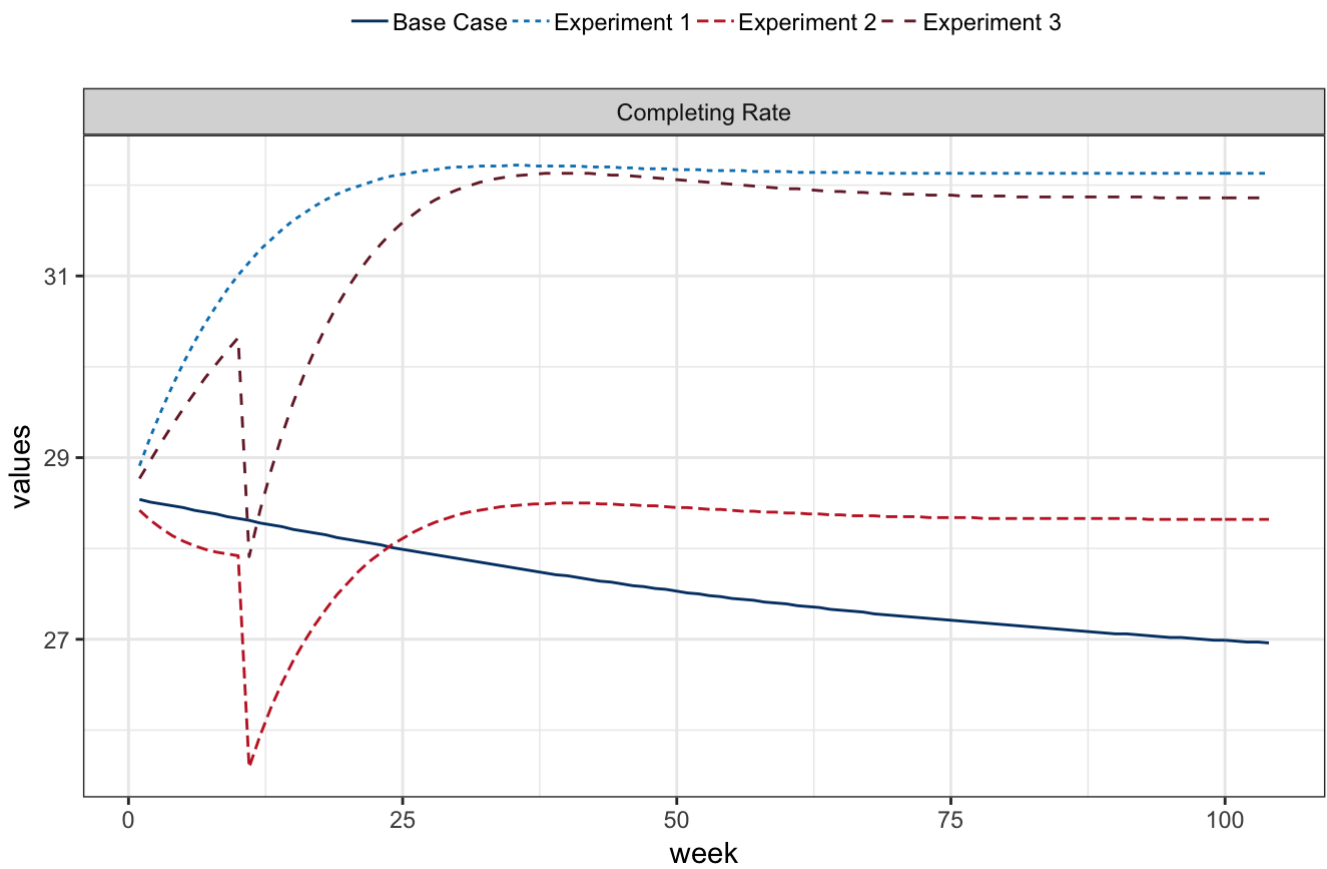
Compare Services: Booking Rate



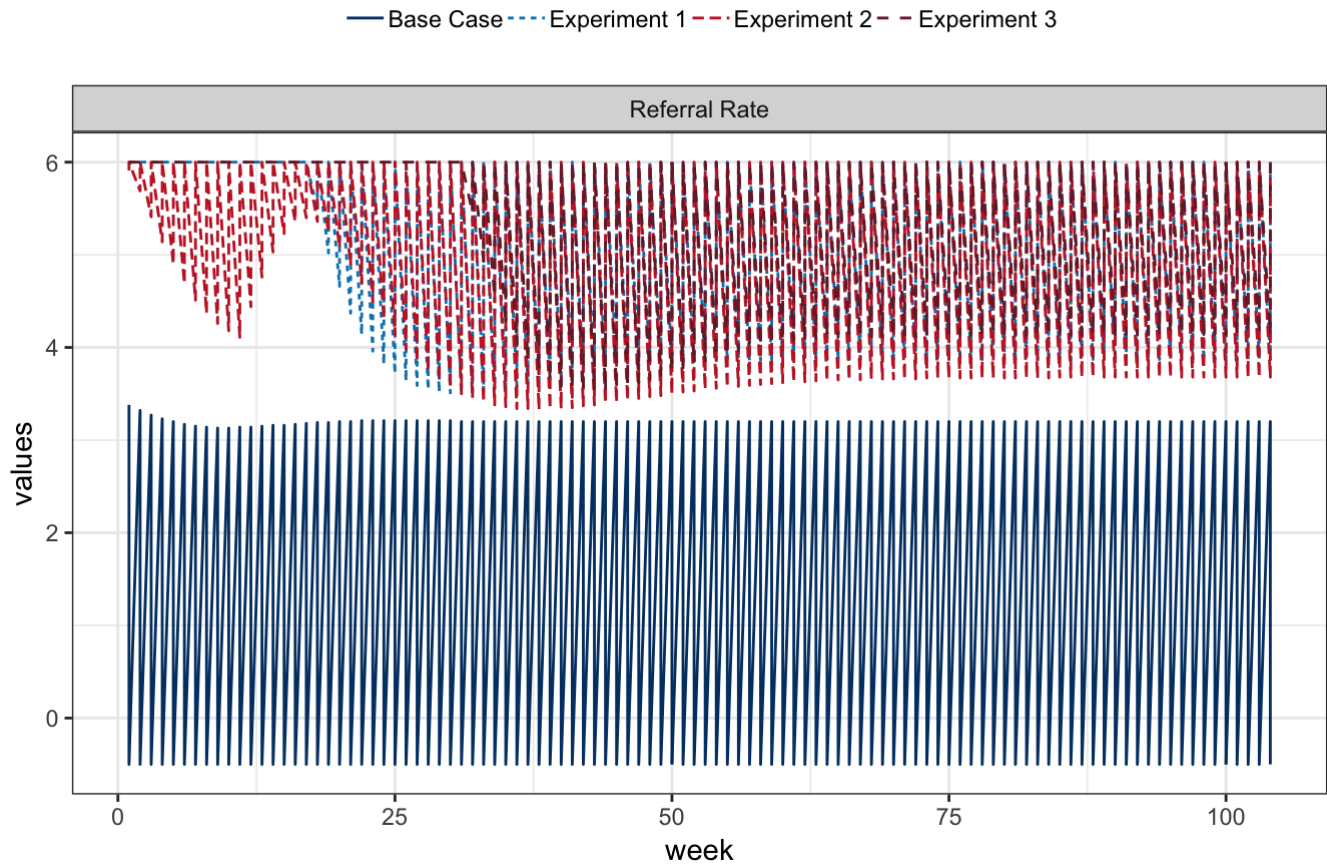
Compare Services: Appointments in CC



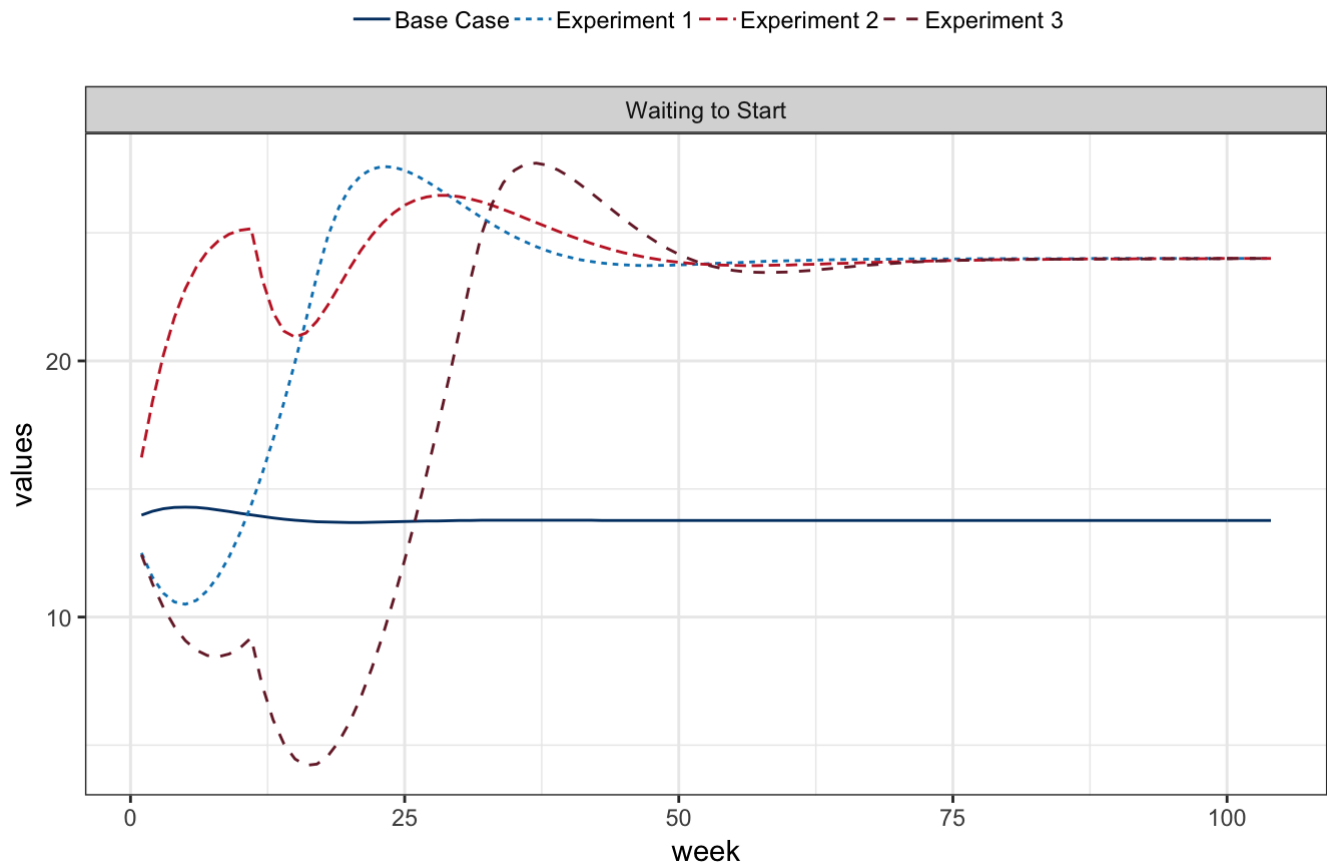
Compare Services: Completing Rate



Compare Services: Referral Rate



Compare Services: Waiting to Start



Compare Services: Starting Rate

