Division of Services Improvement, Clinical Technical Assistance Project Targeted Capacity Expansion: Technology-Assisted Care (TCE-TAC) The Centers, Inc.

TA 4085: Information Technology Strategic Development Call August 7, 2014 • 2:00 pm ET

Submitted to: SAMHSA and The Centers, Inc.

Date of Submission: August 7, 2014

Attendees

SAMHSA

Dina Passman, Government Project Officer

The Centers, Inc.

- Alan Alexander, Senior Information Specialist
- Tim Cowart, Chief Executive Officer
- Yvonne Hess, Vice President of Clinical Services
- Robert Mann, Director of Citrus County Services
- JD McFarland, Information Technology Systems Director
- Craig McKittrick, Senior Adult/Child Prevention Specialist
- Penny Napier, Director of Quality Management
- Alma Rosario, Quality Management Clinical Specialist/TCE-TAC Project Director
- Meghan Shay, Director of Mission Advancement
- Shanekia Taylor, Financial Analyst
- Jennifer Wagner, Health Information Supervisor
- Lew Whittiemore, Vice President of Medical Services

JBS International (JBS)

- Iris Chai, Technical Assistance Manager
- Leslie McElligott, Technical Assistance Manager
- Dave Wanser, Technical Expert Lead

Meeting Purpose

As part of technical assistance request 4085, JBS International held a video conference with The Centers' leadership team (identified above) to discuss technology's role in the changing healthcare landscape and the core issues the organization will face as it relates to the Affordable Care Act and the Health Information Technology for Economic and Clinical Health Act (known as HITECH). The call emphasized the policy and financial implications of health information technology (HIT) and encouraged leadership to consider the best path forward to integrate HIT into their operations.

Below are key discussion points from the PowerPoint presentation delivered by Dave Wanser (JBS International) and questions from The Centers' leadership team. A recording of the discussion is available to reference (note: the introductory slide was not captured).

Key Messages from the PowerPoint Presentation:

Information Is the Currency of Health Reform:

Healthcare organizations are heavily influenced by opportunities to expand technology. It is essential to develop a strategic plan to prioritize the selection, adoption, implementation, and maintenance of technology platforms.

The saying "information is the currency of health reform" becomes more true every day. Behavioral health services have a steep hill to climb because they have not received the resources and assistance that others in the healthcare field have had to effectively compete in today's changing landscape.

Integrated care focuses on the whole person. This is the locus for achieving the most desirable health outcomes. There is also a strong focus on quality and outcome data measures to inform payment sources.

Developing An Information Strategic Plan:

When thinking about data, people tend to assume it means collecting information from forms and surveys. Data has evolved into much more. Organizations are being forced to think in terms of data elements - asking questions of the data to elicit specific answers about health outcomes. Bi-directional sharing of findings is critical between the State and providers.

Quality measures have become an essential part of program implementation. The measures look at the whole person and consider various primary and behavioral health risk indictors such as depression, suicide, smoking, and weight management. The Office of the National Coordinator (ONC) is working on an initiative to develop a uniform set of performance measures, and it is expected that payers will be adopting these measures in time.

Five Elements of Change:

Value-based purchasing means that organizations will be paid a certain amount to insure the health of a population of people. Example: Enhanced rates are available for providers that reduce hospital acquired infections and hit quality targets. Organizations that are unable to meet benchmarks may end up costing networks money. This payment mechanism forces providers to manage risks differently.

Care delivery is looking at the whole person. A coordinated care approach is extremely critical. Example: It is common for patients to drop out of service when transitioning between different points of care. Therefore, it is important to emphasize continuity of care across systems. Information needs to be exchanged between providers. Dynamic, continuous communication models are becoming more main stream.

The best way to engage with clients is to get information from them in a much more regular way. Managing client communication means exploring a variety of ways to seek information (e.g., portals, texting, online surveys). There is a big focus on early intervention and prevention, and therefore, we have to learn a lot about clients to help mitigate potential risk.

Health information exchanges (HIE) are springing up all over the country as means of sharing information to coordinate care more effectively. Technology planning must anticipate scalability and should factor future enhancements to platforms to meet evolving needs. Example: Cross-state data exchange pilot of patient information between Florida and Alabama.

Providers will interface with a number of different health professionals, and operational expectations will vary. Adapting to cultural differences across teams is essential.

Provider System Information Planning and Readiness Assessment:

To effectively frame the information strategy, an organization must ask itself: Where are we now and where do we need to go? Are we building sufficient capacity to partner with others?

What is your strategy around meaningful use (MU) stage 2 readiness? Vendors struggle with MU adoption. Information must be shared in a standard format, and many vendors have not built this into their current platforms. A gap analysis is necessary to determine the capabilities of your system so that information can be exchanged seamlessly.

What is the insurance coverage status of the clients you serve? This will vary by patient population. Working with Medicaid to ensure reimbursement will be necessary. Some SAMHSA-funded technology-assisted care grantees have partnered with State trade associations to influence policy reform and change legislation around telehealth.

Are you maximizing elements related to patient access/patient engagement workflow? Cumbersome data collection procedures at the front-end may deter clients from feeling like they are getting the care they need. Continue to map the client experience and set improvement targets as needed.

Managing health status and health risk is important. Consider health risk factors like smoking and weight management. Mitigating risk adds value to your organization and assists with partnership opportunities.

Consider mergers or consortium agreements to maximize service potential and purchasing power.

Recommended Plan Elements:

The information technology (IT) team should not be alone in guiding the strategic planning process. It is necessary to have a cross-functional team composed of clinical, administrative, technology, and other essential members.

Conducting a readiness assessment in advance will help to identify strengths and areas of growth to effectively meet HIT goals and objectives. This exercise will also illuminate data deficits so providers can do a better job of improving patient care. Analytic capabilities and patient engagement strategies are the major themes to touch on (as emphasized during the 2014 Healthcare Information and Management Systems Society (known as HIMSS) trade show).

Define how you plan to expand organizational capacity. This should be based on your plan to identify areas that meet business, reimbursement, and clinical needs.

Talk to partners to know what their roadmap is for increasing capacity. What are people around you doing as you consider putting your plan together? This could open possibilities for partnerships.

Know what is going on with HIE activities in your community. There is a subscription fee associated with using an HIE, but it may be possible to negotiate a reduced rate. HIE adoption is a policy and business decision (not just an IT decision).

It is necessary to for executive leadership to form a governance group. This step may be the most critical structural component of readiness. Senior leadership need to assist with problem solving, prioritization, financing, and other tasks to keep things on track. If senior leadership is not tuned into the issues, your strategy will not play out successfully. The governance group should be a free-standing unit that helps to prioritize items that may require additional guidance or resources.

Open Discussion

Collaborating with Federally Qualified Health Centers (FQHCs)

Are there suggested outlines or paths that The Centers can take to more effectively work with FQHCs? Are there examples of good working relationships with FQHCs among other TAC grantees that The Centers could learn from to develop their partnership plans?

If you have seen one FQHC, you have seen one FQHC. There are many intricacies associated with collaborating with FQHCs. Exploring the <u>Health Resources and Services Administration (HRSA) Website</u> may help inform what guides their behavior. Also – consider talking to neighboring FQHCs about where they are at with their own IT roadmap.

Secure Client Communication Strategies

What are some strategies to ensure secure client communication? Look to establish patient portals that allow for the secure transmission of information between clients and staff. Some have the capacity to exchange texts without divulging patient health information.

There is a concern that using text or email (non-reimbursable transactions) could turn into counseling sessions. In some instances, these mediums be the best way for clients to remain engaged in care. In the absence of actual policy/reimbursement changes, balance these kinds of interactions against the possibility of losing communication with the client altogether.

Many TAC grantees are using phone-based and video-conferencing platforms to help boost client engagement and exchange resources. The extent of use of these modalities will depend on a number of factors. There are many different ways to communicate with clients that do not impose on provider time and ultimately help clients remain in care.

Resources to Consider

Dina Passman (SAMHSA) shared the following link for the <u>Center for Integrated Health Solutions</u> (funded by SAMHSA and HRSA; led by the National Council). The site has HIT resources on topics such as electronic health record platforms, understanding MU, and telehealth systems.

Dina also recommended reviewing ONC's Website.

Consider exploring HIMSS' State and local chapters. The <u>HIMSS Website</u> will have information about groups in The Centers' area which may open the door to partnership and networking opportunities.

Website Development

The Centers has requested technical assistance to support Website redesign. The functionality of The Centers' Website is largely dependent on its readiness assessment and information strategic plan.

The Centers has proceeded with some graphic design elements and has prioritized a list of graphic and resource components. The Centers would like assistance with more technical elements, such as developing their patient portal. JBS is available to advise on Website elements and approaches. The team has already shared a marketing series with program staff. They can also connect The Centers with other TAC grantees that have experience with portal development and understand the functionality features that ought to be present on the site for current and future clients (both on the front and back end). One question to consider is whether the portal should be driven through the Website or stand alone.

When would be the best time to move forward with this activity? The Centers would prefer to wait on receiving Website assistance until the strategic plan is developed and they are ready to focus on building their portal. When the time comes, they will need targeted assistance to help define client engagement strategies that exist beyond the firewall.

Next Steps

How JBS Can Help

The Centers is aware of the recommendations outlined in the PowerPoint presentation. At this point, the organization has not begun the planning process. JBS International can help to inform a readiness assessment, but cannot create the assessment on The Centers' behalf. A technical assistance request for more intensive facilitation may need to be approved.

It may be helpful for The Centers to conduct an environmental scan to think through and identify the resources that are available in their immediate area. The Centers may not have the internal expertise to complete this task on their own, but JBS could assist with pointing program staff in the right direction. For example, consider working with local provider organizations and trade associations. Fellow grantee, Operation PAR, for example, has a robust IT department and has partnered with other healthcare providers to build their IT model.

The Centers requested time to digest the information from the call. They will alert JBS as to the direction they would like to follow. JBS emphasized that they are available to address questions at any time.