



Thank you for attending!

All materials can be found on SNI link:
www.safetynetinstitute.org/techforhealth

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<https://www.surveymonkey.com/r/techforhealth>



TECHNOLOGY FOR HEALTH IN THE SAFETY NET

Thursday, August 31, 2017

Los Angeles Marriott Burbank Airport
2500 North Hollywood Way
Burbank, CA



End of Day Reflections

Notes:

In partnership with:



Supported by:



The California Health Care Safety Net Institute (SNI) designs and directs programs that accelerate the spread of innovative practices among public health care systems, public clinics, and beyond. SNI’s work helps these providers deliver more effective, efficient and patient-centered health care to the communities they serve.

<https://safetyinstitute.org/>

Resource Round-Up: Tablets

Purpose:

Tablets can be used in both the inpatient and outpatient settings for activities such as screening, registration and education.

Why?

- Increased efficiency
- Streamlining of workflows
- Patient engagement

Other considerations:

- Technology literacy
- Training and acceptance
- Changes in workflow

Implemented:

CCRMC
KMC
LACDHS
NMC
SMMC
SJGH
VCMC

Resources:

- California Health Care Foundation: [Webinar: Patient registration, surveys and more with digital tools](#)



WELCOME!

Name: _____

System: _____

LEARNING OBJECTIVES:

- ◆ Consider strategic implications in the use of tech-enabled non-traditional services
- ◆ Understand implementation and tracking approaches for local operations
- ◆ Learn from and share experiences with tech-enabled platforms that support the Global Payment Program



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Resource Round-Up: Portals & Emails

What?

Means of enhancing healthcare delivery through the use of digital communication technology



Why?

- Patient satisfaction
- Improved disease management
- Reduced cost

Other considerations:

- Patient access to technology
- Training and acceptance
- Changes to workflow

Implemented:

CCRMC: Epic
LACDHS: Cerner
NMC: Epic
*RUHS**
ZSFGH: Office 365
SJGH: eCW
SCVMC: Epic
VCMC: Cerner

**Vendor unknown*

Resources:

California Health Care Foundation

- [Patient Portal Resource Center](#): includes resources on planning, implementation & optimization
- [Webinar: Top 10 Ideas for Optimizing Use of Your Patient Portal](#)

CCI

- [Webinar: Increasing User Engagement in Patient Portals](#)
- [Webinar: Patient Portal Minor Access and Issues](#)
- [Health Affairs Blog: Lessons from Over a Decade of Portals](#)
- [HIMMS: Integrating Secure Messaging into Provider Workflow](#)



Resource Round-Up: Telehealth

What?

Means of enhancing healthcare delivery through the use of digital communication technology

Examples:

- Real time video conferencing
- Remote patient monitoring
- Mobile Health (mHealth)



Other considerations:

- Patient access to technology
- Training and acceptance
- Changes to workflow

Resources:

- [Center for Connected Health Policy: an overview of telehealth projects across the state and policies supporting telehealth](#)
- CCI: [Video on Telehealth and Video Collaboration \(Petaluma Health\)](#)
- Commonwealth Fund: [Case Studies in Telehealth Adoption - Lessons from Early Adopters](#)

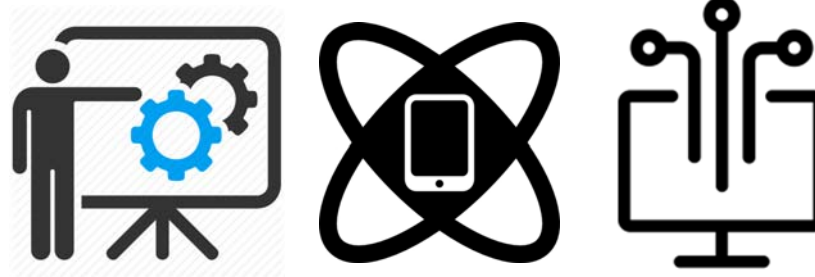
Implemented:

CCRMC*
 KMC: Telehealth Docs
 LACDHS: EyePACS and mental health*
 NMC: Radiology*
 RUHS: Epic
 SJGH*
 SCVMC*
 VCMC: Netsmart, CTN & Cerner

*Vendor unknown

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AGENDA

- 9:00-10:00am **Breakfast, Networking & Registration**
- 10:00-10:15am **Welcome**
Overview of how GPP presents an opportunity to support the movement to alternative care via technology
Giovanna Giuliani, Executive Director, SNI
- 10:15-10:35am **Lessons Learned Adopting Tech for Health in the Safety Net**
Presentation on what makes for the successful use of technology in healthcare
Veenu Aulakh, Executive Director, CCI
- 10:35-11:15am **Making the Business Case for Technology**
Panel discussion moderated by Veenu Aulakh (CCI) on the development of a strategic planning framework for making HIT decisions and making a business case for tech-enabled services
 - ◆ *Mike Aratow, MD, CMIO, San Mateo*
 - ◆ *Jennifer Tong, MD, CMIO, Contra Costa*
 - ◆ *Michael Yoo, MD, CMIO, Olive View-UCLA*
- 11:15-12:25pm **Case Studies: Implementing Tech-Based Non-Traditional Services**
Breakout sessions: system perspectives and lessons on implementing tech-based non-traditional services
Phone Visits (Riverside University Health System)
 - ◆ *Geoffrey Leung, MD, Ambulatory Medical Director*
 - ◆ *Mahbuba Khan, MD, Associate Medical Director, Central and Eastern Region*Texting (Natividad Medical Center/Monterey County)
 - ◆ *Julie Edgcomb, Ambulatory Services Director*
 - ◆ *Adriana Velez, Outpatient Services Manager*
 - ◆ *Denise Vasquez, Quality Manager*Portals/Emails (Southern California Permanente Medical Group)
 - ◆ *Kalvin Yu, MD, Chief Integration Officer*

Resource Round-Up: Texting

What?

Texting can be used as a way to send reminders to patients about upcoming appointments, care needs (such as upcoming cancer screenings) or to assist with disease management.



Why?

- Improve the transition from acute care to outpatient care
- Enhance chronic disease management and help patients achieve self-management goals
- Improve access to care
- Enhance patient engagement

Other

considerations:

- Patient access to technology
- Staff training and acceptance
- Changes to workflow

Implemented:

ARMC: PatientPrompt
CCRMC: Televox
NMC: CareMessage
RUHS: Ellipsis
ZSFGH: eCW
SJGH: TigerText
VCMC: TigerText & CareMessage

Resources:

CCI

- [Toolkit: Texting for Better Care](#), including resources on Selecting a Vendor, Messaging Content, Consent, Implementation Case Studies, Resources, and Research
- [Presentation: Texting for Diabetes Self Management](#) (Riverside)
- [Presentation: Texting for Appointment Confirmation](#) (Golden Valley Health Center)
- California Health Care Foundation: [1/26/17 webinar: Interactive Text Messaging for a Healthier Population](#)



Resource Round-Up: Phone Visits

What?

Medical evaluation and management conducted by a physician or other qualified healthcare professional via phone.

Why?

- Increase patient access
- Improve patient satisfaction
- Enhance provider engagement
- Cost-effective model of care



Implemented:

ARMC	RUHS
CCRMC	SMMC
KMC	ZSFGH
LACDHS	SJGH
NMC	SCVMC

Resources:

CCI

- [Toolkit \(by Riverside\): Virtual Telephone Visits](#)
- [Innovation Spotlight: Virtual Telephone Visits at Riverside](#)
- [Video: How Telephone Visits Improve Care at Riverside](#)
- [Innovation Challenge: Telephone Urgent Care Visits at San Francisco](#)
- California Health Care Foundation: [CIN Partner Report \(August 2016\): Virtual Care at SCPMG \(pages 3-4\)](#)

AGENDA

12:25-1:00pm

Lunch & Networking

1:00-1:45pm

Designing a Patient-Centered Experience

Activity based on understanding the patient perspective during the implementation of tech-based non-traditional services

Veenu Aulakh, Executive Director, CCI
Los Angeles County CCI Catalyst Team

- ◆ **Karen Kim, MD**, Division Chief, Internal Medicine, Olive View-UCLA
- ◆ **Rhonda Polzin, RN**, Primary Care Nurse Manager, Olive View-UCLA
- ◆ **Heather Schickedanz, MD**, Hospital Director, Internal Medicine, Olive View-UCLA

1:45-2:30pm

Talking Tracking

Presentation on approaches for tracking and coding non-traditional services relevant to GPP

David Lown, MD, Chief Medical Officer, SNI

2:30-2:45 pm

Break, Snacks & Stretch

2:45-3:50pm

Non-Traditional Services in Action

- ◆ Hands-on demos of tools used by members for tech-enabled services
- ◆ Telehealth landscape presented by BluePath Health
- ◆ Discussion tables led by CAPH/SNI staff

3:50-4:00pm

What's Next & Closing

Giovanna Giuliani, Executive Director, SNI



Lessons Learned Adopting Tech for Health in the Safety Net

Veenu Aulakh, Executive Director, Center for Care Innovations (CCI);
veenu@careinnovations.org

What are the 10 lessons outlined?



Resource Round Up: eConsult/eReferral

What?

Electronic message exchange (including clinical question and related diagnostic data) initiated by the primary care physician to a specialist using store and forward technology. Specialist can convert an eConsult to a referral if necessary.

Why?

- Timely access to specialty care
- Higher quality coordinated care
- Enhanced communication
- Increased efficiency
- Patient satisfaction

Implemented:

Alameda: RubiconMD & NextGen
LA: SafetyNet Connect
Natividad: RubiconMD
Riverside: Epic
San Mateo: AristaMD
Santa Clara: Epic
ZSFGH: RubiconMD
Ventura: Netsmart

Resources:

Blue Shield of California Foundation [has a host of resources, including:](#)

- [Checklist for Implementation](#)
- [eConsult Market Scan & Vendor Profiles](#)
- [eConsult Policy & Reimbursement Roadmap](#)

SNI

- [7/18/16 PRIME Manager Webinar: LA & SF presentation on eConsult/eReferral](#)
- [PRIME Project 1.3 Implementation Resources](#)
- [CCI Innovator Highlight: San Francisco's eReferral System](#)
- [Health Affairs article: "Los Angeles Safety-Net Program eConsult System Was Rapidly Adopted And Decreased Wait Times To See Specialists" \(March 2017\)](#)



Non-Traditional Services in Action

Telehealth Overview

BluePath Health



Questions to Consider:

What are your system's opportunities for telehealth?
What are challenges to consider?

Additional notes:

Making the Business Case for Technology

Moderator: Veenu Aulakh, Executive Director, CCI

Presenters:

- ◆ **Mike Aratow, MD, CMIO**, San Mateo Medical Center; maratow@smcgov.org
- ◆ **Jennifer Tong, MD, CMIO**, Contra Costa Regional Medical Center; jennifer.tong@hsd.cccounty.us
- ◆ **Michael Yoo, MD, CMIO**, Olive View-UCLA; myoo@dhs.lacounty.gov

How to develop a strategic planning framework for HIT decisions

How to align decisions for GPP

How to plan for sustainability

Identify one key takeaway:

Phone Visits

Riverside University Health System

Geoffrey Leung, MD, Ambulatory Medical Director; geoleung@rivcocha.org
Mahbuba Khan, MD, Associate Medical Director, Central and Eastern Region

Key Questions to Consider:

1. How can you apply the lessons learned during the roll out and adoption process to your own system?
2. What are some ways that you can think about sustainability and spread in your own system?



Non-Traditional Services in Action

Questions to Consider

What technology-enabled services are you considering?



What is the process for considering whether or not to implement these services? What is your vendor selection process? What barriers have you experienced?

What are your next steps?

Non-Traditional Services in Action

Technology	Leveraging Technology for Effective, Fast, Safe, Low-Cost Multi-Modal Monitoring for Patients with Chronic Illness
System	Los Angeles
Platform	
Impact	
Workflow	
Plans for spread & sustainability	
Other notes	

Texting

Natividad Medical Center/Monterey County
Julie Edgcomb, Ambulatory Medical Director; edgcombj@co.monterey.ca.us
Adriana Velez, Outpatient Services Manager; veleza@co.monterey.ca.us
Denise Vasquez, Quality Manager; vasquezd2@co.monterey.ca.us

Key Questions to Consider:

1. How can you apply the lessons learned during the roll out and adoption process to your own system?
2. What are some ways that you can think about sustainability and spread in your own system?



Provider Emails

Southern California Permanente Medical Group
Kalvin Yu, MD, Chief Integration Officer; kalvin.c.yu@kp.org

Key Questions to Consider:

1. How can you apply the lessons learned during the roll out and adoption process to your own system?
2. What are some ways that you can think about sustainability and spread in your own system?



Non-Traditional Services in Action

<i>Technology</i>	<i>eConsult/eReferral</i>	
<i>System</i>		
<i>Platform</i>		
<i>Use/Impact</i>		
<i>Workflow</i>		
<i>Plans for spread & sustainability</i>		
<i>Other notes</i>		

Non-Traditional Services in Action

<i>Technology</i>	<i>eConsult/eReferral</i>	
<i>System</i>	San Francisco	Los Angeles
<i>Platform</i>	RubiconMD	Safety Net Connect
<i>Use/impact</i>		
<i>Workflow</i>		
<i>Plans for spread & sustainability</i>		
<i>Other notes</i>		

Implementing Technology-Based Non-Traditional Services

Additional Notes:



Designing a Patient-Centered Experience

Veenu Aulakh, Executive Director, Center for Care Innovations (CCI);
veenu@careinnovations.org

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Heather Schickedanz, MD, Hospital Director, Internal Medicine, Olive View-UCLA;
hSchickedanz@dhs.lacounty.gov




























Notes:

Non-Traditional Services in Action

<i>Technology</i>	Tablets	
<i>System</i>	Kern	San Mateo
<i>Platform</i>	Tonic for screening	iPad for screening
<i>Use/Impact</i>		
<i>Workflow</i>		
<i>Plans for spread & sustainability</i>		
<i>Other notes</i>		

Member Use of Technology Survey

 Implemented
  Considering
  Not considering

SYSTEM	Phone visits	Texting
<i>Alameda</i>		
<i>Arrowhead</i>	 N/A	 PatientPrompt
<i>Contra Costa</i>	 Epic	 TigerText, Televox
<i>Kern</i>	 	
<i>Los Angeles</i>	 Cerner, Cisco	 
<i>Natividad</i>	 	 CareMessage, TigerText
<i>Riverside</i>	 Epic	 Ellipsis
<i>San Francisco</i>	 eCW	 eCW
<i>San Joaquin</i>		 TigerText
<i>San Mateo</i>		
<i>Santa Clara</i>	 internal	
<i>Ventura</i>	 Cerner; Netsmart	 CareMessage, TigerText

Designing a Patient-Centered Experience



What is design thinking?

Design thinking utilizes elements from the designer's toolkit like empathy and experimentation to arrive at innovative solutions

Source: IDEO

Talking Tracking




David Lown, MD, Chief Medical Officer,
California Health Care Safety Net Institute; dlownd@caph.org





























Tracking & coding
non-traditional
services for GPP

Journey from local
mapping to coding

Understanding the
importance for
value-based-care

Member Use of Technology Survey

 Implemented  Considering  Not considering

SYSTEM	Tele-health	Emails
<i>Alameda</i>		
<i>Arrowhead</i>	 Dermatology & Neurology	
<i>Contra Costa</i>	  Epic	 Epic
<i>Kern</i>		
<i>Los Angeles</i>	 EyePacs, Mental Health	  Cerner
<i>Natividad</i>	 	
<i>Riverside</i>	 Epic	 Epic
<i>San Francisco</i>		 Office 365
<i>San Joaquin</i>		 eCW
<i>San Mateo</i>	 	
<i>Santa Clara</i>		 Epic
<i>Ventura</i>	 Netsmart; CTN; Cerner	 Cerner

Member Use of Technology Survey



Implemented



Considering



Not considering

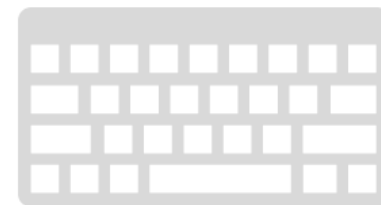
SYSTEM	Tablets	eConsult/ eReferral
Alameda		RubiconMD, NextGen
Arrowhead		
Contra Costa		Epic
Kern		
Los Angeles		Safety Net Connect
Natividad		RubiconMD
Riverside		
San Francisco		RubiconMD
San Joaquin		
San Mateo		AristaMD
Santa Clara		Epic
Ventura		Netsmart

Q: Why are there two answers for some systems in the same service?

A: Attendees may have been answering for a department rather than the whole system.

Talking Tracking

Identify one key takeaway:



Member Use of Technology Survey

SYSTEM	Ambulatory Care IT System
<i>Alameda</i>	NextGen, Practice Fusion
<i>Arrowhead</i>	Meditech
<i>Contra Costa</i>	Epic
<i>Kern</i>	MedSphere Open Vista
<i>Los Angeles</i>	Cerner
<i>Natividad</i>	Meditech/Epic-OCHIN
<i>Riverside</i>	Epic
<i>San Mateo</i>	eCW
<i>San Francisco</i>	eCW, Avatar
<i>San Joaquin</i>	eCW (migrating to Cerner)
<i>Santa Clara</i>	Epic
<i>Ventura</i>	Cerner
<i>UC Davis</i>	Epic
<i>UC Irvine</i>	Epic
<i>UCLA</i>	Epic
<i>UCSD</i>	Epic
<i>UCSF</i>	Epic

Member Use of Technology Survey

SYSTEM	Inpatient IT System
<i>Alameda</i>	Soarian, Meditech MAGIC Client Server
<i>Arrowhead</i>	Meditech
<i>Contra Costa</i>	Epic
<i>Kern</i>	MedSphere Open Vista
<i>Los Angeles</i>	Cerner
<i>Natividad</i>	Meditech
<i>Riverside</i>	Epic
<i>San Mateo</i>	Soarian
<i>San Francisco</i>	Invision, ADL, ICCA, Pulsecheck, Watchchilde
<i>San Joaquin</i>	NTT Data Optimum iMed; migrating to Cerner
<i>Santa Clara</i>	Epic
<i>Ventura</i>	Cerner
<i>UC Davis</i>	Epic
<i>UC Irvine</i>	Epic
<i>UCLA</i>	Epic
<i>UCSD</i>	Epic
<i>UCSF</i>	Epic