Engaging Patients in Digital Communications During the COVID-19 Pandemic

HIMSS Summer 2020 Quarterly Interoperability & HIE Community Roundtable
Wednesday, July 22 | 10:30 am – 12:00 pm CT
Upcoming HIMSS Events

- **HIMSS Global Consortium for eHealth Interoperability Listening Session**
  - Wednesday, July 29 | 2:00 – 3:30 pm CT
  - Register Online

- **Getting Value from Blockchain in Healthcare Webinar**
  - Wednesday, August 5 | 12:00 pm – 1:00 pm CT
  - Register Online
  - Sponsored by Synaptic Health Alliance

- **Adding Meaning to Interoperable Exchange Webinar**
  - Tuesday, August 18 | 11:00 am – 12:00 pm CT
  - Register Online
  - Sponsored by Cerner
Meet Our Speakers

Susie Hull, MSN, RN-BC, NEA, FAMIA
Chief Health Information Officer, Care Loop

Adam Darkins, MD, MPHМ
Chief Strategy Officer, LifeWIRE

Grace Cordovano, PhD, BCPA
Co-founder, Unblock Health

Stacy Lindau, MD, MAPP
Founder & Chief Innovation Officer, NowPow
Learning Objectives

• Discuss how effective communication and education between patients, caregivers and care teams are essential to providing safe, quality care.

• Recognize the challenges in achieving this standard of care and communication as a result of the COVID-19 pandemic.

• Describe digital strategies and avenues used to enhance real-time communications between individuals, caregivers and care teams that provide critical information throughout the COVID-19 pandemic.

• Explore ways in which standards-based interoperability can have a direct impact on empowering patients and their caregivers.

• Discover innovative platforms that can help direct people to relevant and validated resources in their community.
Unblock Health

Grace Cordovano, PhD, BCPA
Board-Certified Patient Advocate
Co-Founder, Unblock Health
@GraceCordovano
It’s Time to Unblock Health
Actual Footage of 2020 Patient Engagement Strategies:
WHAT HAPPENS NOW?
Patient Experience Spectrum: Pre-COVID

Healthy/Proactive Wellness Seeker

Acute Episode

Chronic Illness(es)

Life-Altering Dx, Rare Disease(s)
Patient Experience Spectrum: COVID19

THE WORLD IS TEMPORARILY CLOSED
Do you know where we routinely fail to engage and communicate with patients at essentially every hospital, healthcare delivery organization, and physician practice?
FACT: Patients need more than telemedicine to be successful in their care.
FACT: Patients need access to their health information to complete the work they need to do to be successful in their care.
FACT: Patients & carepartners work remotely.
FACT: We must continuously improve the patient experience AND patient access workflows.
Unblock Health is a first-in-class patient advocacy tool designed for patients and consumers who are determined to be empowered in their health care journey and are no longer willing to accept traditional barriers to their information.
Digital Patient Access Front Door

- Real-world spectrum of access requests have been comprehensively mapped
- Medical records request & addendum request processes have been fully digitized
- All necessary authorization forms are digitized & enabled with electronic signature capture
- Chat feature improves real-time communication between a health care delivery organizations & the patient
- Reduces & potentially prevents information blocking and administrative burden
Realities of Our Post-COVID World

• The need for patient access to all health information is undeniable.
• The need for educating patients about the importance of their medical and health information is indisputable.
• The need to support hospitals to provide tools to best support patients and their carepartners is of essence.
NowPow

Stacy Lindau, MD, MAPP
Founder & Chief Innovation Officer, NowPow
@stacylindau
ePrescribing Community

NowPow’s proof of concept, CommunityRx, pioneered the idea of generating self-care “e-prescriptions”

- **$5.8M** CMMI Innovation Award to University of Chicago from 2012-2015
- Demonstrated in **33 clinical sites** on Chicago’s South Side
- Connected with EHRs: Epic, GE Centricity, and NextGen
- Generated **350,000 HealtheRxs**
- Medicare beneficiaries had **significantly fewer** inpatient stays and unplanned readmissions*
- Medicaid beneficiaries had **significantly fewer** ED visits*

* Source: Third Annual Report Addendum, RTI, CMMI Third Party Evaluator, August 2017
Whole Person Care, Whole Communities

NowPow is a personalized community referral platform.

We make it easy to connect people to the right community resources so everyone can stay well, meet basic needs, manage with illness and care for others.

We uniquely support all people and networks of all sizes and sectors to comprehensively advance population health.
# Powering Comprehensive, Continuous Care Across Communities

<table>
<thead>
<tr>
<th>Audience</th>
<th>Objective</th>
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<tbody>
<tr>
<td><strong>Critical Care</strong></td>
<td>Facilitate easy access to help and resources to stay well and stay at home</td>
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<tr>
<td>Homebound, COVID-19 Discharge and/or High Risk</td>
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<tr>
<td><strong>Community Care</strong></td>
<td>Drive awareness of needs and expand access to vital services</td>
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<td>People coming into contact with Public Health Departments, Contact Tracers, Health Systems, Providers, Health Plans, or Large Community or Member Organizations</td>
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<tr>
<td><strong>Self Care</strong></td>
<td>Empower people to self serve to address vital needs</td>
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<td>People who are digitally seeking vital services for themselves and those for whom they care</td>
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COVID-19 Community Referral Strategies

COVID-19 stretches both our health systems and our human and social service organizations.

Digital community referral platforms drive critical communication and connection in communities.

We are up-to-date. High fidelity information is critical to building confidence.
- 67K community services with COVID-19 operation statuses

We get referrals into as many hands as possible, expanding care quickly in a time of rising need.
- 3x the number of users

We make sure the data are available and actionable.
- 256K+ referrals inform areas of need
NowPow has seen a 34% increase in demand for food-related service support in NYC.

More than half of NYC’s food-related services shut down at the start of the pandemic.

NowPow worked with its partners (e.g., Healthfirst) to identify gaps in service supply.

With addition of emergency food-related services, NYC is up to 149% pre-pandemic baseline.
NowPow’s COVID-19 Interesting Interventions

1. **Meeting Social Needs for a City in Lockdown**
   - **New York City Health + Hospitals***
     - Largest public health system in the United States
     - 5.5K local nonprofit and public organizations
     - Week one: 1K patients identified as food insecure
       - 50% were reached
       - 25% were provided with assistance to secure food

2. **Health System Powers Remote Care and Supports Employees**
   - **Allina Health**
     - 12 hospital health systems, 30K employees
     - Nearly 9K screenings and 5K eRxs shared since COVID-19

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NowPow’s COVID-19 Interesting Interventions

3. Payer Establishes a Statewide Cross-Sector Collaboration
   Horizon (BCBSNJ)
   - Brings together 6 major players (large health systems, HIE)
   - NowPow was brought in to support program expansion after a successful pilot:
     • 24% reduction in ER visits
     • 35% increase in behavioral care visits
     • 25% decrease in care costs

4. FQHC Uses Telehealth to Effect Community Connection
   Erie Family Health Centers
   - 5.1K patients connected with needed services
   - Nearly 80% referral success rate among patients wanting to be connected with resources
What We Do

Improve Healthcare Communication

CareLoop is a secure, patient-centric, social network that loops in all the data, information, and people, including anyone the patient chooses, around any clinical encounter, dramatically improving healthcare.
The problem is worse than before

43% of U.S. Coronavirus Deaths Are Linked to Nursing Homes

By The New York Times  June 27, 2020

43%  
OF ALL U.S. DEATHS  
54,000+

11%  
OF ALL U.S. CASES  
282,000+

CMS announced new regulatory requirements that will require nursing homes to inform residents, their families and representatives of COVID-19 cases in their facilities. Failure to report could result in an enforcement action.
Why being in the loop matters

Healthcare as we know it has changed

Care is more than a transaction and must be extended before, during & after care episodes.

People want to be in the loop, informed about their care and loved ones, no matter where care is received.

HIT can provide personalized and context specific communication, health data and conversations at the point of need, rather than simply at the point of service.

Being in the loop, connecting data and people, is essential for health.
Before

Infrequent updates by phone or mail

- Family/caregiver frustrated
- Manual calling required to each caregiver
- No follow up communication

After

Always connected, always updated

- CMS mandate compliance
- PCP/family/caregivers in the loop
- Automated follow up
- Automatic updates on medical care or from facility

- CMS mandates not met
- PCP/care-team not in the loop, frustrated
- Less staff burnout, efficient workflows

Long Term Care
Family is looped in, receives automatic updates about her care, room changes, new medications, conditions, etc.

Care-team is looped in, including doctors, physical therapists, nurses, etc. and can communicate with each other and family.

Healthcare facilities have a channel to communicate important updates and information to the patient and family.
The Social Network For Healthcare

CareLoop is the first **clinically connected, social network** that **securely** brings together all the data, information and people around any clinical encounter.

Loops are fully configurable and controllable to align with the needs of caregivers, patients and family.
LifeWIRE

Adam Darkins, MD, MPH M
Chief Strategy Officer, LifeWIRE

Using Algorithmic Based Decision-Support for Self Isolation of ‘At Risk’ Populations and to Generate Epidemiologic Data
In **United States of America**, from Jan 20 to 3:12pm CEST, 13 July 2020, there have been **3,225,950 confirmed cases** of COVID-19 with **134,392 deaths**.
Genesis for Program Development

- **Constraints of Traditional Public Health Approach**
  - Rapidly evolving pandemic
  - No vaccine, no definitive treatment and need to limit R0 to avoid overwhelming hospitals
  - Changed demographics of society and complex supply chains
  - Logistic challenges of call centers in contact tracing and care management

- **Informing “at Risk” and Affected Populations**
  - Adapting approach to changing “evidence”
  - Giving consistent information
  - Alleviating Stress
  - Encouraging compliance with self-isolation
  - Informing “at Risk” and Affected Populations
  - No vaccine, no definitive treatment and need to limit R0 to avoid overwhelming hospitals

- **Generating Population Health Data**
  - Tracking incidence and prevalence of symptoms
  - Understanding mortality morbidity and natural history
  - Safe Triage
CONTINUOUS POPULATION MONITORING PLATFORM

Population management however a patient desires to communicate, whether email, text, app, wearables and more

Enables personalized communication with any and all members of a client population

Manages & tracks insights and activity to improve care

Cloud based, secure, HIPAA Compliant
Public – Private Approach

**Public Health Department**
- Adaptation of CDC and local epidemiologic advice to prevailing local conditions
- Algorithm to triage post Covid-19 test population based on symptom severity and other indices
- Program to support self-isolation for up to 10 days
- Daily data transfer into wider population health information ecosystem

**Health Care Information Technology Company**
- Needed a robust and mature platform capable of expanding to ‘go to scale’
- Privacy and cybersecurity requirements to be met without a Covid-19 waiver
- Accessible via multiple device modalities
- Capable of rapid Agile development – assessment and revision - to ‘prototype’ not ‘pilot’
- Understanding of underlying health issues, population health engagement and re-engineering clinical workflows
‘Product’ Prototyping

- March - May 2020 - Covid-19 self-isolation management program (COVID-19 SIP) used by a consenting group of 182 people from the COVID-19 tested population
- Program accessible via SMS messaging with 60% uptake rate
- Day 1 - initial enrollment survey - completed by 81% of users
- Program completed by 75% of users who received up to ten days self-management support
- Those whose self-reported symptoms suggested need for urgent help were triaged algorithmically
- Seamless transfer of population health data.
Next Steps

• **COVID-19 SIP** now ready for Public Health Departments, Employers, States, Health Systems and Government to implement ‘at scale’ as an isolation self-management tool.

• Deployable on multiple telecommunication modalities and can be provided in over 30 languages.

• Standard application program interfaces for secure and standardized exchange of data with contact tracing, care management and epidemiologic surveillance components of Covid-19 containment ecosystem.

• Designed for implementation as a: i) limited local deployment; ii) regional hub; or iii) comprehensive national installation.

• Agile approach to rapid development of added functionalities needed to supplement ‘core’ Program Module.
Panel Discussion

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