

# The Doctor Is In!

## Referrals to Wellness Programs

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# Partnership for Health Promotion

- Collaborate Efforts to increase the reach of California of Evidence Based Programs
  - California Department of Aging
  - California Department of Public Health
  - Partners in Care Foundation
  - California Association of Physician Groups



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# Aging Services Network

## ■ Vision

To transform the focus of the aging service network to help keep people well

## ■ Goal

To empower the aging service network to direct their efforts on increasing the impact of its programs and services to promote health and prevent decline



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# The Path to Health Promotion

- Funding through grants to implement Evidence-based health promotion programs
  - NCOA/Administration on Aging
  - Atlantic Philanthropies
  - California Wellness Foundation
  - Kaiser Permanente



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## Initial Lessons Learned

- EBHP programs are labor intensive
- Need a coordinating entity to provide technical assistance, oversee program fidelity, coordinate training opportunities & share resources
- Need organizational program sponsors with the infrastructure to support this long term



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# California Evidence-Based Programs

## COMMUNITY BASED

- Chronic Disease Self-Management Program
- A Matter of Balance
- Savvy Caregiver

## CARE MANAGEMENT

- Healthy Moves for Aging Well
- Medication Management Improvement System





# Evidence-Based Programs

Promising Practice



Best Practice



Evidence-Based Model

- Are supported by extensive research and have been proven to work
- Clear, structured, detailed description of the program
- Have measurable outcomes
- Easier to market the program and engage partners
- Increases effective use of resources to enhance programming

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# Participating California Counties

## ★ Original 5 Counties

Los Angeles, Fresno, Madera,  
San Diego, Sonoma

## ★ Additional 9 Counties

Kern, Orange, Riverside,  
Sacramento, San  
Bernardino, San Francisco,  
Santa Clara, Ventura, Yolo



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# Target Sectors for Program/Engagement



## Chronic Conditions: The Scope of the Problem

- Chronic diseases affect the quality of life of 133 million Americans (nearly 1 in 2 adults)
  - More than 14 million of these are in California
- Chronic Diseases represent almost 80% of the health care dollar
- 80% of Americans 65 and older have at least one chronic condition
- 50% have at least two chronic conditions



## Chronic Conditions: The Scope of the Problem

- Chronic conditions account for:
  - 81% of inpatient hospitalizations
  - 91% of all prescriptions filled
  - 76% of all physician visits
  - 7 out of 10 deaths each year in the U.S.
- 99% of Medicare spending is on behalf of beneficiaries with at least one chronic condition



# Chronic Conditions

- Arthritis
- Chronic lung disease
- Diabetes
- Heart condition
- Cardiovascular disease
- Chronic pain
- Depression
- Cancer
- Stroke
- HIV/AIDS
- Any ongoing health condition



# High Costs and Poor Outcomes

- Spend twice than any other developed country
- Ranked 37<sup>th</sup> in world on health outcomes
- 40 million uninsured
- Little prevention/lots of expensive late care
- Growing role for community and family caregiving and self-care





## Background – CDSMP aka Healthier Living

- Developed in the early 1990s by the Stanford Center for Research in Patient Education
- A credible, “evidence-based” program with broad experience and demonstrated results in a variety of settings, populations, and chronic conditions.
- Consists of six, 2 ½ hour workshops.
- Now used internationally in 15 countries and over 39 U.S. states.

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# Healthcare Utilization Effects

- Fewer outpatient visits
- Fewer emergency room (ER) visits
- Fewer hospitalizations
- Fewer days in hospital
- More appropriate utilization of healthcare resources





## CDSMP/Healthier Living Workshops: The Basics

- A practical, interactive curriculum including:

- Exercise and nutrition
- Medication usage
- Stress management
- Talking with your doctor or health professional
- Dealing with emotions and depression

- Opportunities for discussion and problem solving

- Mutually supportive setting

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# Empowerment Through a Self-Management Program

- Participant learns how to identify problems
- Participant learns how to act on problems
- Participant learns problem-solving skills related to chronic conditions
- Participant learns how to generate short-term action plans

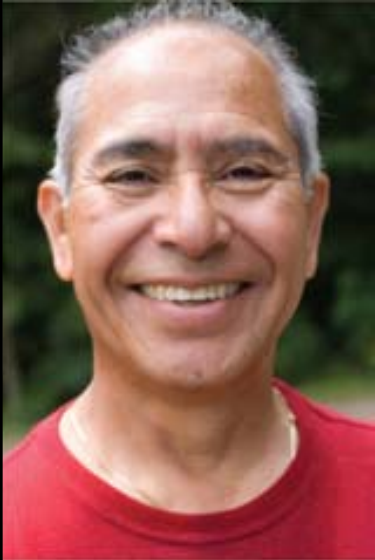


## Parts of an Action Plan

- Something the SENIOR wants to do
- Achievable
- Action-specific
- Answer the questions:
  - What?
  - How much?
  - When?
  - How often?
- Confidence level of 7 or more



# Keys to Success



- The format addresses specific problems and goals for people with ongoing health problems. It is not a drop-in support group.
- The workshops are not prescriptive. Participants choose their own goals and track their own progress toward success.
- Trained peer leaders offer guidance and support, but participants find practical solutions individually and together.



# Why Engage Physicians

## ■ Physicians are a key to success

- Patients are much more likely to follow up on a referral from their physician.
- Physicians have direct access and knowledge regarding patients who will most benefit from CDSMP.
- Physician buy-in can influence their entire organization to adopt the program.





California Association  
of Physician Groups

*Improving Healthcare for Californians*

# California Evidence-based Initiative – Partnership Opportunities Lura Hawkins, MBA

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# CAPG

- Non-profit Trade Association
- Represent approximately 150 physician organizations
  - 59,000\* Physicians
  - 15 million Californians



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# Mission

- CAPG is the Voice of Organized Medicine
- Nation's largest professional association representing physician groups practicing in managed care
- Committed to the delivery of coordinated, quality, affordable and accessible healthcare



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# Primary Roles

## ■ Advocacy

- Office in Sacramento
- Federal & State

## ■ Training & Education

- Conference
- CAPG Health
- Special Programs

## ■ Committees & Workgroups

- Pharmacy
- Medical Management
- Contracting
- Medi-Cal Managed Care
- Others



# Why “CDSMP/Healthier Living”?

- Impacts patients health
- Creates engaged patient
- Supplements healthcare services
- Cost savings/limited resources
- Physicians want to help their patients



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# Key Partners

- Partners in Care Foundation
- California Department of Aging
- Community Health Departments
- Community Colleges
- Current Programs
  - CHW
  - Kaiser
  - Healthcare Partners



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# Models of Delivery

- Partnership with Community (External Model)
  - Referral
  - Accesses community based network
  - create mini-networks

- Examples
  - Santa Cruz
  - LA Medi-Cal groups

- Hosted on Site (Internal Model)
  - Incorporate into health education or case management
  - Larger groups, some with hospital systems

- Examples
  - Healthcare Partners
  - Sharp Healthcare



# Communication about Program

## ■ Presentations at Meetings

- Inland Empire, San Diego, General Membership, Medi-Cal Managed Care
- Article in CAPG Health
- California Quality Collaborative (CQC)
- CAPG Standards of Excellence (SOE)



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# Challenges

- Identifying Physician Organizations
- Sustainability
- Linking to Community Based Organization
  - Timing of program
  - Referral process
  - Communication/Documentation



# Solutions

- Selection process
- Tools being developed
- Pace of program implementation
- Engagement of all partners
- Creating excitement



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# Tools

- Physician group readiness assessment
- Patient screening and referral criteria
- Education tools for office/clinical staff
- Referral forms
- Fax back form for Community Based Organization



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# CAPG Groups Engaged

## Inland Empire

- Riverside Physicians Network
- Riverside Medical Clinic
- Desert Oasis Healthcare
- St. Mary Choice Medical Group IPA
- CQC

## Other Areas

- Facey Medical Group
- San Jose Medical Group
- HealthCare Partners
- Sharp Community Medical Group
- AltaMed Health Services Corporation



# Contact Information

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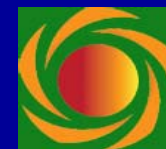
# How to Engage Physicians, or “WIIFM” (“what’s in it for me”)

- Keep it simple and be prepared, physicians have limited time.
- Have research on program efficacy readily available.
- Anticipate their questions such as “How will it work for and benefit my patients?”
- Conduct presentations at physician attended meetings/conferences.
- Partner with organizations who have established relationships with physicians (For example CAPG).



## Additional Tips to Engage Physicians

- Engage the medical system they operate within, i.e. medical groups, hospital systems, IPA's.
- Engage their entire office staff and other professionals they partner with within their organization.
- Have implementation tools in place (such as referral and feedback forms).
- Be prepared to discuss models for implementation and be ready to go.



# Models of Implementation

## ■ Internal Model

- Medical system adopts program internally
- Medical system sends own staff and volunteers to be trained as leaders

## ■ External Model

- Community system provides workshops
- Medical system refers patients to existing external workshops



# Internal Model

## ■ Advantages

- Program costs largely covered by adopting system.
- Greater commitment from medical system likely means a greater likelihood of program sustainability.

## ■ Disadvantages

- Less chance the program would be available to community members outside of medical system.



# External Model

## ■ Advantages

- The program would have a wider reach and impact due to involvement of community organizations.
- Community sites can serve several physicians and physician groups simultaneously.

## ■ Disadvantages

- Lengthier and more complex startup coordination required due to the need to engage several collaborative partners.
- Increased complexity to manage ongoing process.



# Sample Referral Prescription

## HEALTH AND WELLNESS PRESCRIPTION

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Date: \_\_\_\_\_

Medical Diagnosis(es): \_\_\_\_\_

Physician Signature: \_\_\_\_\_

### PROGRAM REFERRAL:

- CDSMP/Healthier Living
- Matter of Balance
- Other \_\_\_\_\_

### (OFFICE USE ONLY)

Referral follow-up:

Date workshop begins: \_\_\_\_\_ Date Patient registered: \_\_\_\_\_

Staff Signature: \_\_\_\_\_

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# Sample Feedback Form

## Workshop Completion Form

Dear Dr. \_\_\_\_\_,

The following information is to inform you that your patient recently completed a workshop at our agency. Please feel free to contact \_\_\_\_\_ at \_\_\_\_\_ with any questions.

**Participant Name:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

Workshop attended:

CDSMP/Healthier Living

Date Workshop Began: \_\_\_\_\_

Matter of Balance

Date Workshop Ended: \_\_\_\_\_

Other \_\_\_\_\_

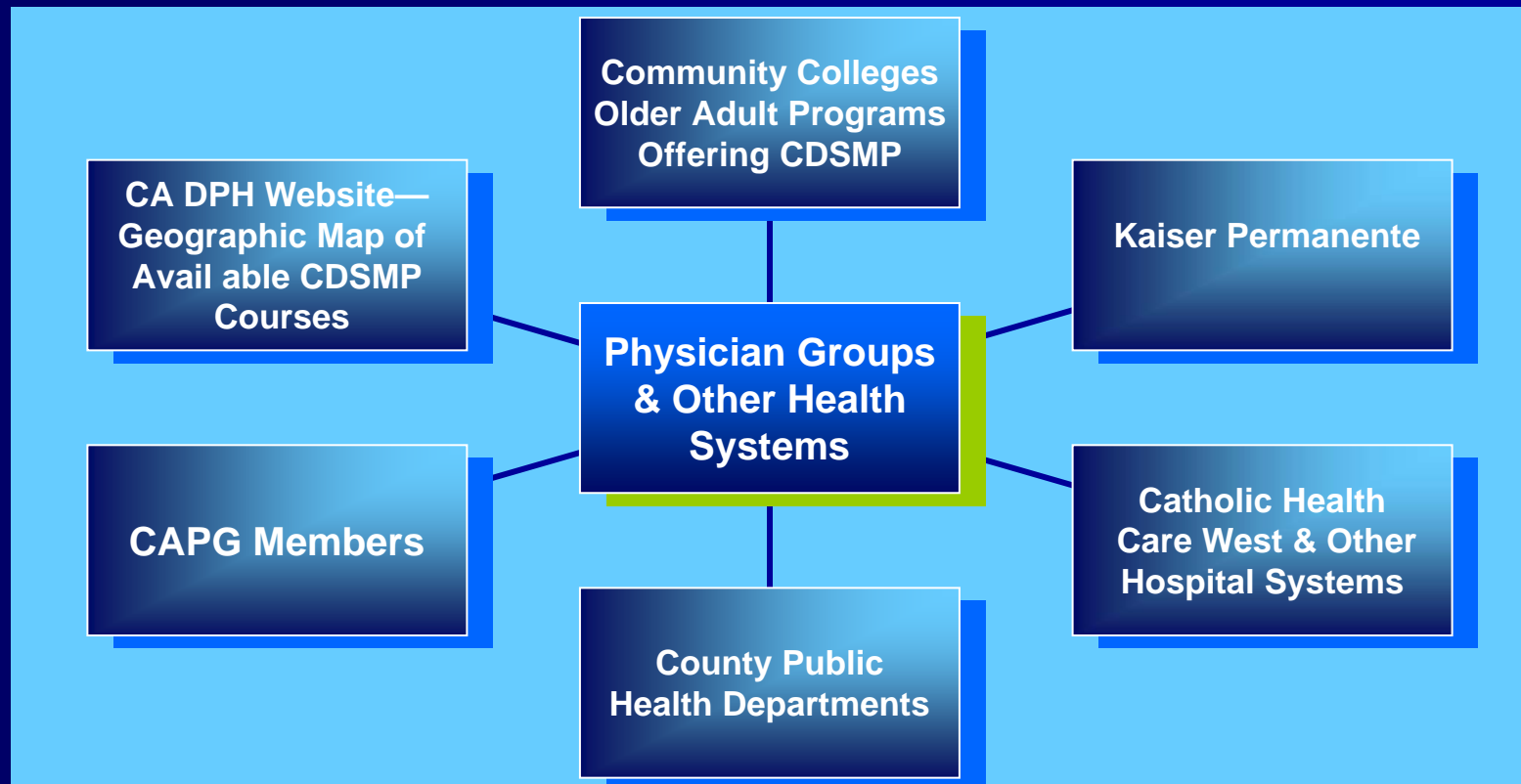
Form completed by: \_\_\_\_\_ Date completed: \_\_\_\_\_

Date sent to MD office: \_\_\_\_\_

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# Core Strategy Being Tested



## Health Plans Are Increasing Interest

- Exploring pilots to determine and test how to build health plan/medical group partnerships
- Registries may be important
- Evaluation of results – impact on health measures e.g. heart and diabetes – important
- Department of Managed Health Care interested in advancing clinical outcomes



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# California Will Seize the Opportunity

- A time of potential transformation
- Must rise to the occasion
- Going to scale is key
- This will take more time than we planned
- Need commitment at all levels
- It is well worth the journey



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# Transforming Health Care

- Goal is individual & organizational investment in self empowerment in avoiding/managing chronic health conditions
- Mainstreaming access to health promotion tools
- Building a platform to disseminate programs that transform health and quality of life
- This is a **MISSION**, not a **PROJECT**



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# Launching Lasting Change

- Current grants are “seed money” to launch a new movement
- Need to identify and involve many “investors” in order to take this to scale
- Scale = creating a new norm for healthy living
- Scale = new norms for widespread ready access to proven programs and services



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## Join the Evidence-Based Health Promotion Initiative – Outside California

Please visit the National Council on Aging (NCOA) Center for Healthy Aging website to find your state partner:

[www.healthyagingprograms.org](http://www.healthyagingprograms.org)



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# Join the Evidence-Based Health Promotion Initiative – Within California

For more information, please contact:

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# Resources

- **Partners in Care Foundation**

[www.picf.org](http://www.picf.org) 818-837-3775

- **Stanford CDSMP Website**

<http://patienteducation.stanford.edu/programs/cdsmp.html>

- **Center for Healthy Aging of NCOA**

<http://www.healthyagingprograms.org/>

- **Centers for Disease Control and Prevention**

<http://www.cdc.gov/nccdphp/publications/cdnr/pdf/CDNR..une.2007.pdf>

- **The Robert Wood Johnson Foundation**

<http://www.partnershipforsolutions.org/DMS/files/chronicbook2004.pdf>



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## Please Visit Partners in Care's Booth

Be sure to visit us at Booth #310  
for more information and a chance  
to win a free copy of our brand new  
*Healthy Moves* DVD!



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## Conference Presentations Online

- Conference presentations will be available online at [www.picf.org](http://www.picf.org)
- Select EVENTS>PRESENTATIONS AFTER MARCH 23, 2009



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