

# Nuts, Bolts, and a Few Loose Screws

Creating Person-Centered Solutions in Complex Environments

*Sharing Experiences to Promote Progress*

All In National Conference

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Austin, Texas

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# Nuts and Bolts



children's  
optimal health

Visible changes for a healthy future

Data Across  
Sectors for Health



Promoting connected systems and person-centered care

- Potentially transformational (if done correctly)
- Disruptive to established business practices, requires deconstruction
- Takes a few loose screws willing to break things and innovate

**What does a small scale targeted clinical innovation have to do with a community level data integration effort being used as a national model and use case?**

# Meet the Loose Screws:



Collaborative  
story telling is  
what care is all  
about



## **Rahel Berhane, MD; Pediatric Gastroenterology Dell Children's Medical Center; Austin, TX Comprehensive Care Clinic, Medical Home**

- Integrated care for medically complex children
- 800 patients

### Health Resources and Services Admin (HRSA)

- Multi-state pilot to transform care for the most complex pediatric patients

### Stakeholders:

- TX Medicaid; BCBS, Title V
- Parent Organizations
- Providers: physicians, private duty nurses, OP/PT/Speech therapists, durable medical equip., school nurses, parent-identified supports

### STORY App health transformation philosophy

- Person-centered design
- Patient narrative has equal standing
- Patient-centric shared record, enabling tech for those lacking electronic medical record
- Now piloting multi-disciplinary telemed visits with bundled payment scheme

# Meet the Loose Screws:



We are investing upstream with kids to avoid downstream costs



**Kristine McCoy, MD, MPH; Family Physician  
VNA Health Group; central New Jersey**

## **Integrated Care for Kids federal grant (InCK)**

Centers for Medicare and Medicaid Innovation (CMMI)

Alternative Payment Model/Medicaid

### **Multi-sector Integrated Case Management**

- 2 years planning + 5 years implementation
- All Medicaid enrollees, age 0-20
- 2 suburban/rural NJ counties

- 134,000 children
- Social sector involvement is key
  - Governed by Partnership Council (Educ, Child Care, Child Welfare, Food, Housing, Title V, in addition to health care)
  - Situations caused by or alleviated by action in SDOH sector
- Risk stratified for health complexity
  - Medical Complexity + Social Complexity + Risk of being placed outside of home
  - Top 7% get Advanced Case Mgt via Medicaid
  - PCPs, CBOs receive tools for effective response for 93%



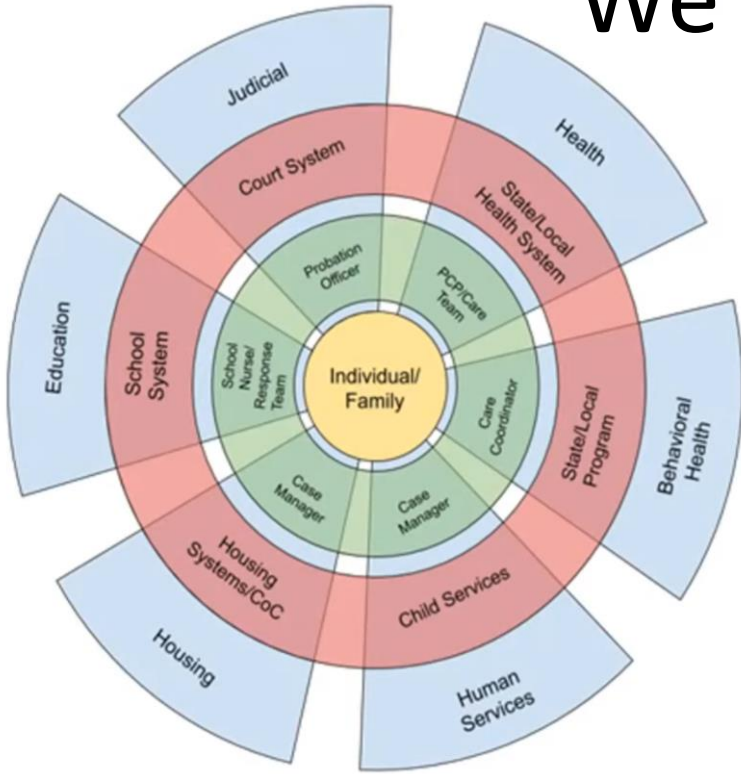


***Context:*** Not Just Nuts, Bolts and Loose Screws  
***We are trying to build something useful!***



# Getting the Pieces to Fit Together . . .

## We need models, standards, language for replicability



### Integrated Approach

Based on SDOH & Integrated Care for Kids



[Interoperability Insights: Needs and Benefits of Connecting Health and Human Services](#)

[Gravity Project](#)

[FHIR Technology and SDOH](#)

[SIREN](#)

# The Conversation: A Couple of Loose Screws



- Being disruptive and breaking things to build something better
- Connecting with non-medical providers
- Data ownership and sharing issues
- Learning from integrated data
- Vendor issues related to innovation
- Promoting connected systems and person-centered care

**Please (unmute) jump in and ask your questions!!**