

2016 Defense Health Information Technology Symposium

Population Health & IT – Marriage Made in Heaven



“Medically Ready Force...Ready Medical Force”

Learning Objectives

- Explain the six major components of the Military Health System (MHS) Population Health Model
- List and describe uses for at least 3 IT systems that support population health
- Describe the 3 components of Medical Management

Agenda

- Brief Introduction to Population Health
- MHS Population Health Model: Review the six key steps including how information technology is essential in achieving them

Medical Officer Functions



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Misconceptions as to the functions of the Medical Department are not uncommon even in the Army. Since, in the time of peace, the medical officer is best known through his relation to the sick, his more important duties may be overlooked. ***His prime function is, in peace or war, not the cure, but the prevention of disease...*** The care of the sick, essential though it is from ethical and political considerations, thus assumes relative insignificance from the military standpoint.

Military Hygiene (1914) by Frank Keefer

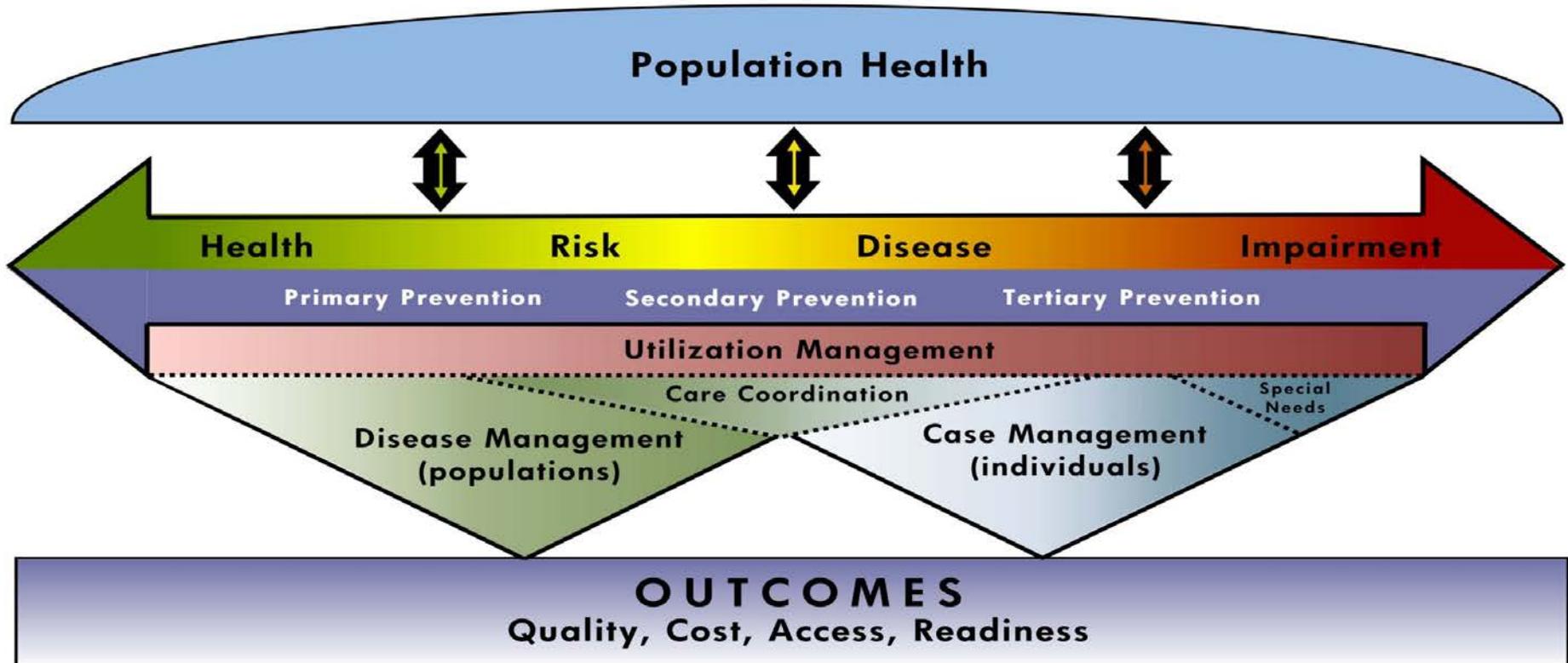
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What is Population Health?

	Clinical Medicine	Epidemiology	Population Health
Focus	Individuals	Populations	Populations
Main Goal	Diagnosis and Treatment	Prevention and Control	Improving population health Decreasing health disparities
Questions	What is wrong with this patient? What treatment is appropriate?	What are the leading causes of death or disability in this population? What can be done to reduce them?	How do we increase years of life and quality of those years? How do we decrease disparities among population subgroups?

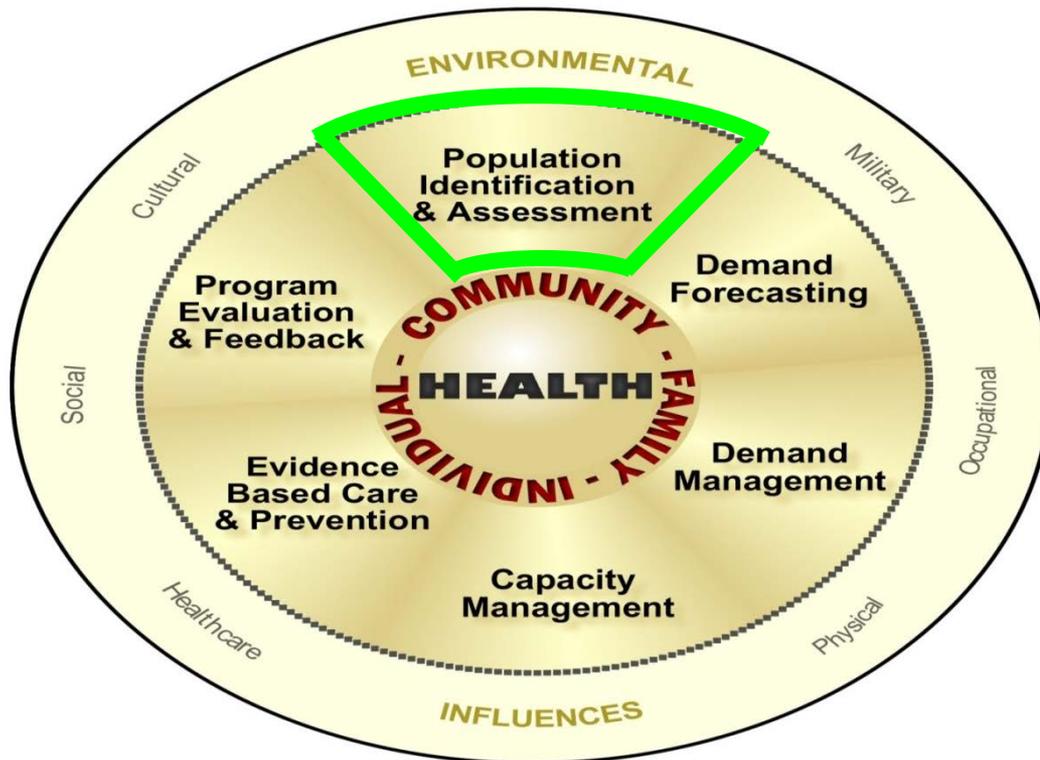
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Integrated Medical Management Model



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MHS Population Health Model



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Population Identification and Assessment



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Identification

- Who are...
 - The eligible beneficiaries?
- Who is...
 - Enrolled to the MTF?
- Who is...
 - Enrolled to your clinic?
- Who is...
 - Being seen in your clinic?

Assessment

- What is the health status?
- What are the lifestyle risk factors (behaviors)?
- Who needs clinical preventive services?
- What is the prevalence of chronic disease?
- Who are the high utilizers of services?

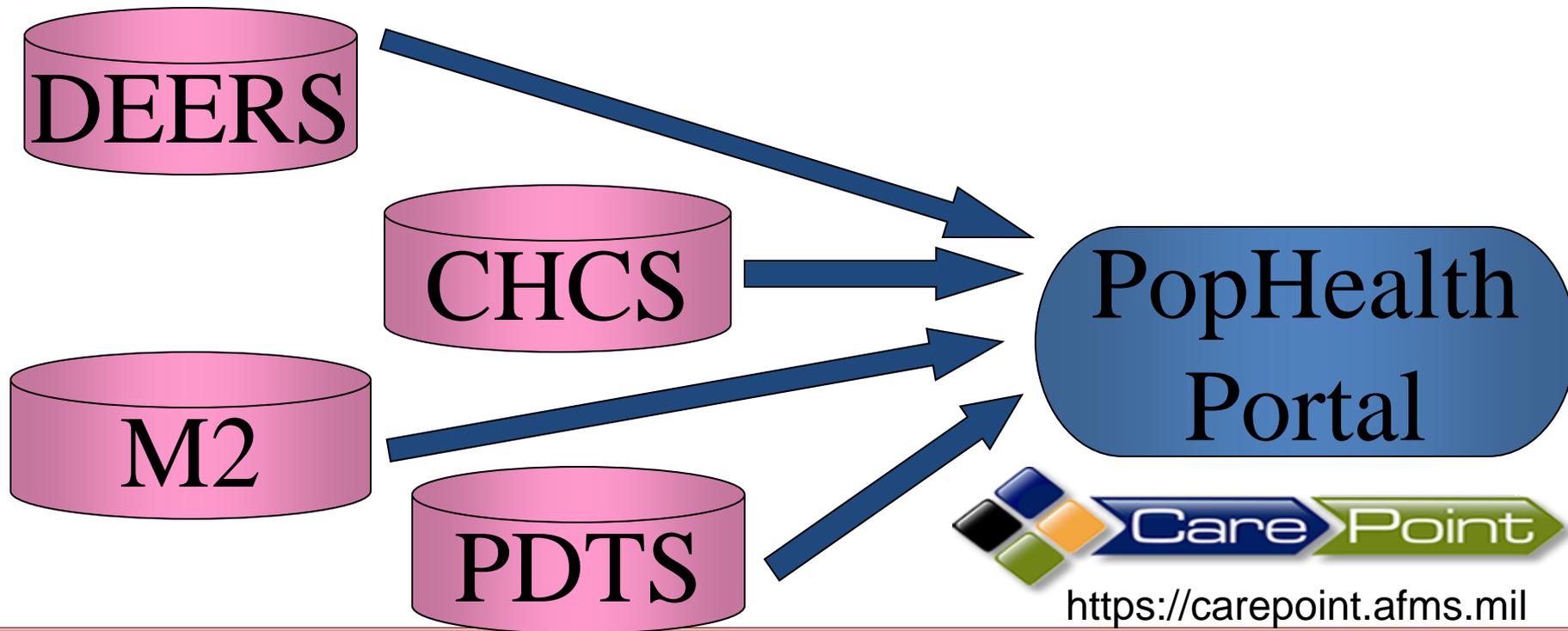
Data resources

- Medical record reviews
- Health risk assessment
- Health related behavior survey
- MHS Population Health Portal/CarePoint

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CarePoint/Population Health Portal

Summarizes data from . . .



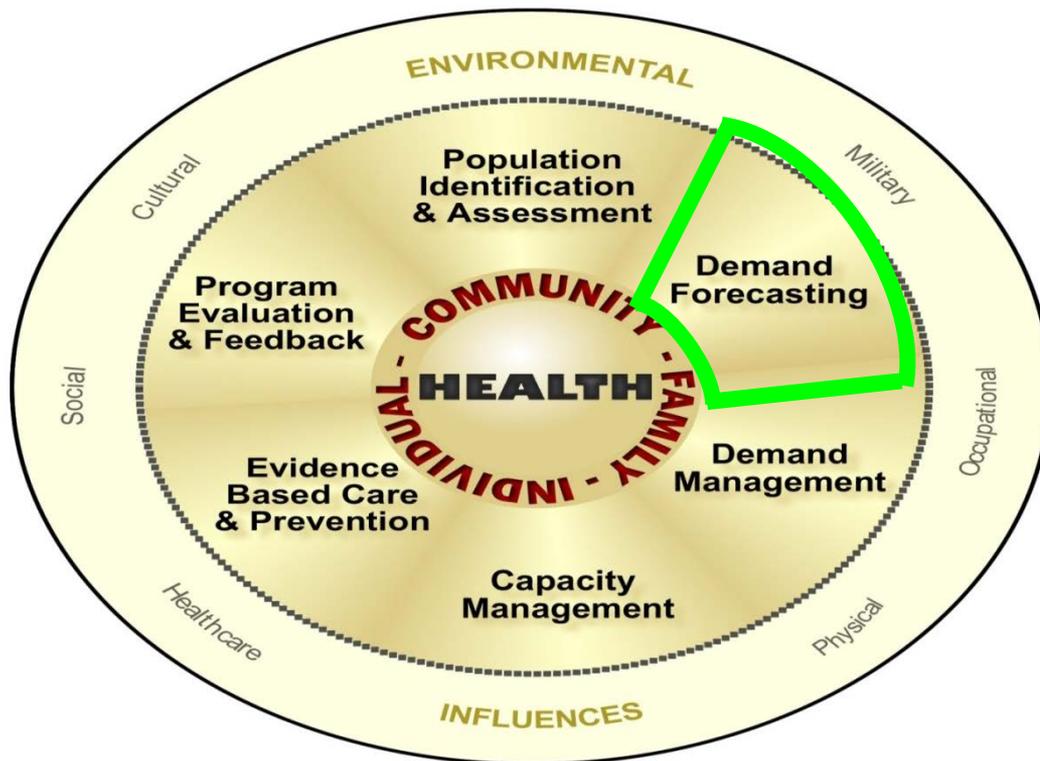
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M2 (Medical Mart)

DIRECT CARE OUTPATIENT Diagnosis and procedures Provider demographics MTF info and MEPRS Associated Rx, lab, rad costs [†]	DIRECT CARE INPATIENT Diagnosis and procedures* Provider demographics MTF info and MEPRS Associated costs
PURCHASED CARE OUTPATIENT Diagnosis and procedures Provider demographics and address Associated Rx, lab, rad costs	PURCHASED CARE INPATIENT Diagnosis and procedures* Provider demographics and address Associated costs

* Inpatient sections have more diagnoses and procedures than outpatient

MHS Population Health Model

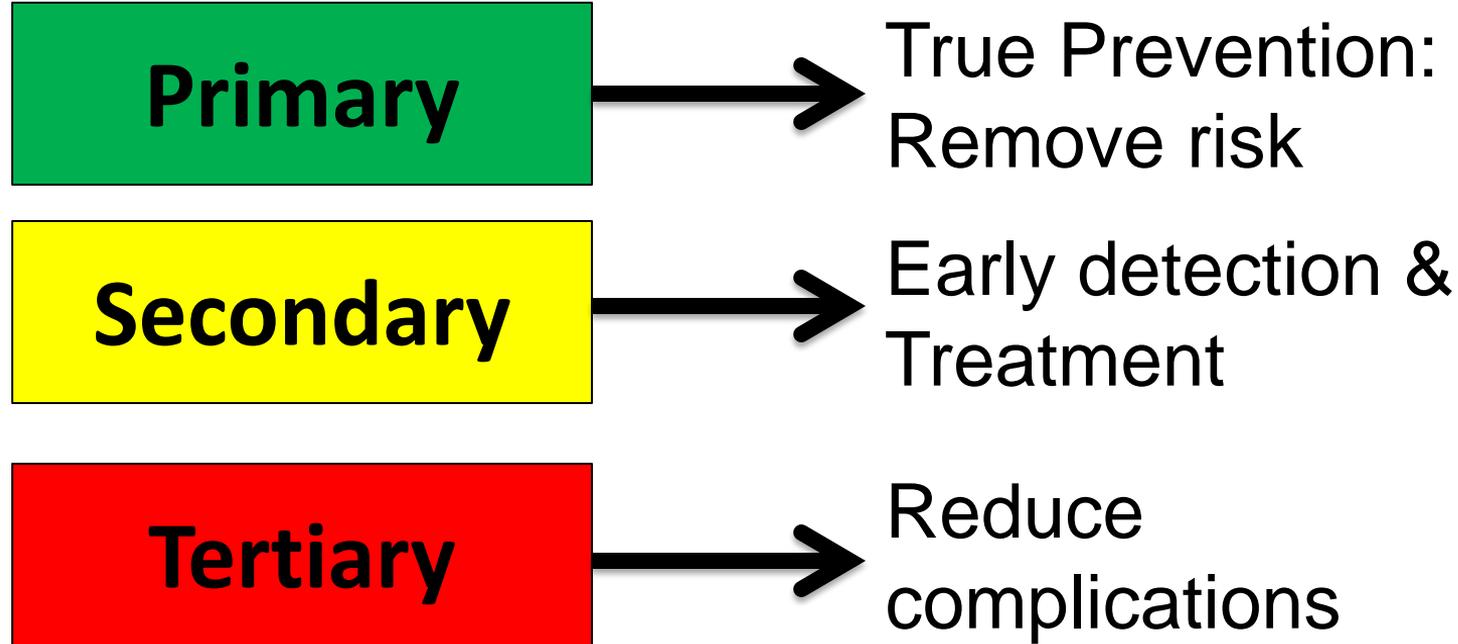


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Demand Forecasting

- Requires:
 - Accurate population identification (size, gender, age)
 - Knowledge of:
 - Health care needs of the population (imms & other CPS)
 - Prevalence of disease/conditions within the population
 - Clinical practice guidelines (including VA/DoD CPGs)
 - Operationally defined & system-required demands (pre-deployment requirements, physical exams, overseas screening, etc.)
- Resources:
 - Utilization Reviews (historical data such as chart reviews and M2 queries)
 - Demand Forecasting models

Levels of Prevention

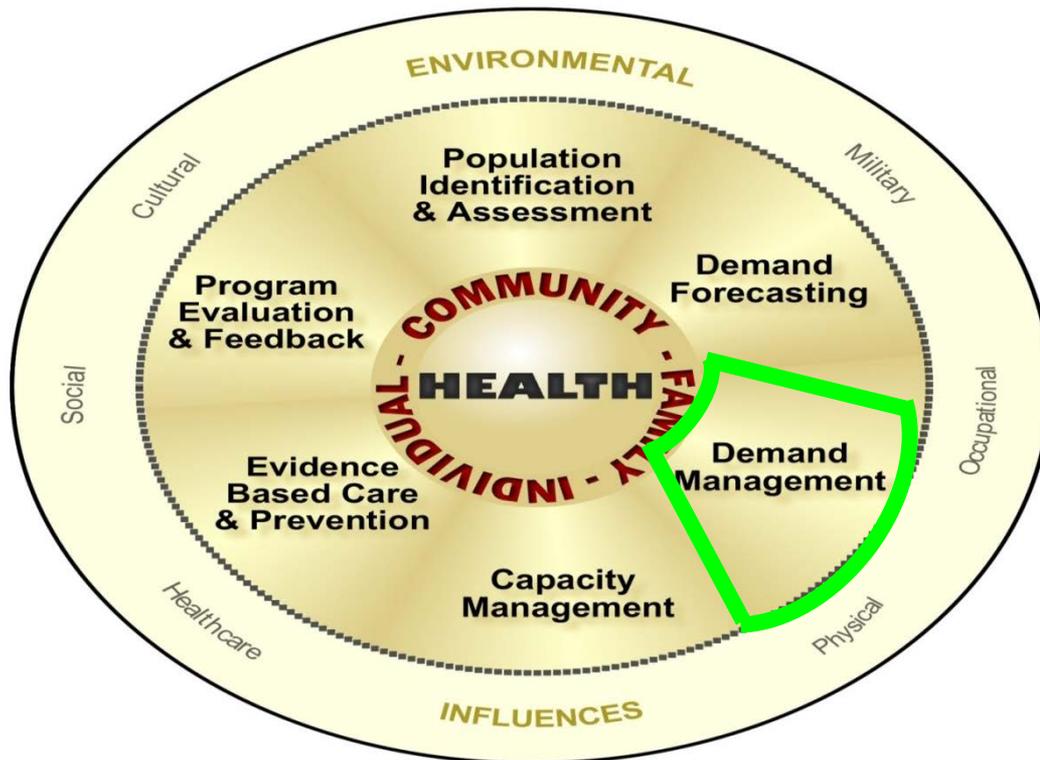


MHS Population Health Model



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Demand Management

- A collection of proactive interventions focused on reducing unnecessary health care utilization while encouraging the appropriate use of health care resources.
- Strategies:
 - Increasing SELF-CARE Strategies & Patient Education
 - PCM Assignments (Right patient mix & distribution)
 - Nurse Triage
 - Message Center
 - Making the most of every visit
 - Immunizations at acute visits
 - Medication refills at every visit
 - Medical Management (CM, UM, and DM)
 - Optimizing ALL team members

Case Management (CM)

- Definition:
 - A collaborative process under the Population Health continuum that assesses, plans, implements, coordinates, monitors, and evaluates options and services to meet an **individual's** health needs through communication and available resources to promote quality, cost-effective outcomes.

– *DoD Medical Management Guide 2009*

Utilization Management (UM)

- Definition:
 - An **organization-wide**, interdisciplinary approach to balancing cost, quality, and risk concerns in the provision of patient care. UM is an expansion of traditional Utilization Review (UR) activities to encompass the management of all available healthcare resources, including Referral Management (RM).

-DoD Medical Management Guide 2009

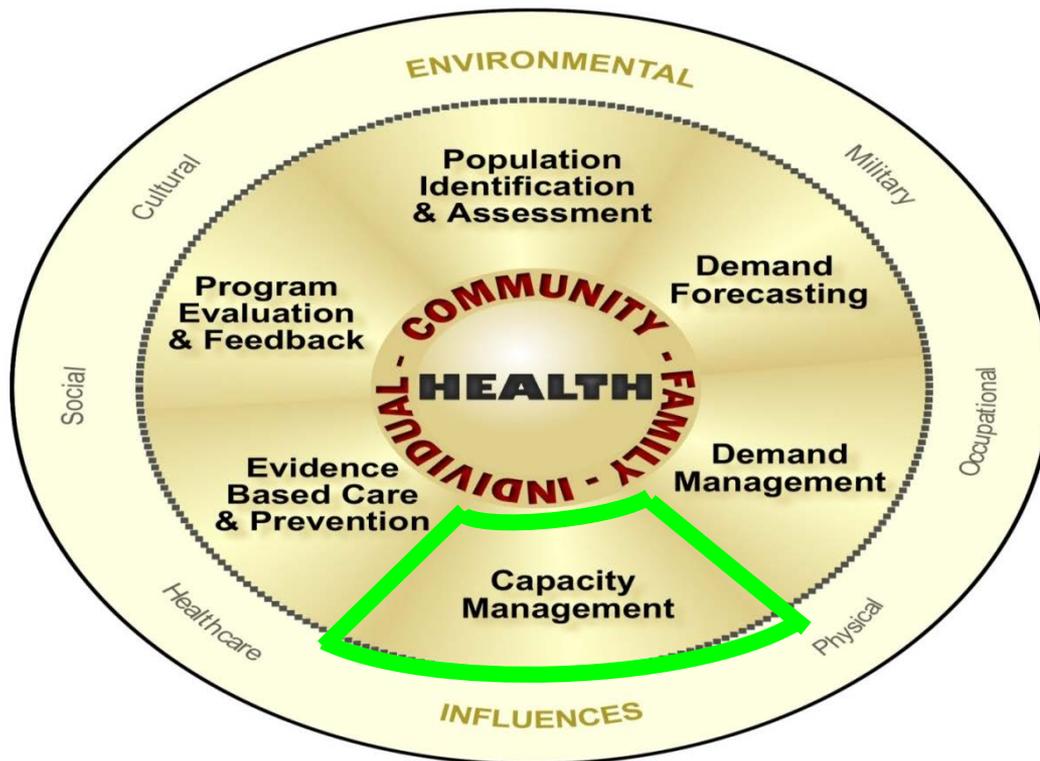
Disease Management (DM)

- Definition:

- An organized effort to achieve desired health outcomes in **populations** with prevalent, often chronic diseases for which care practices may be subject to considerable variation. DM programs use evidence-based interventions to direct patient care. DM programs also equip the patient with information and a self-care plan to manage his/her own health and prevent complications that may result from poor control of the disease process. The term “condition management” includes non-disease states (e.g., pregnancy).

-DoD Medical Management Guide 2009

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Capacity Management

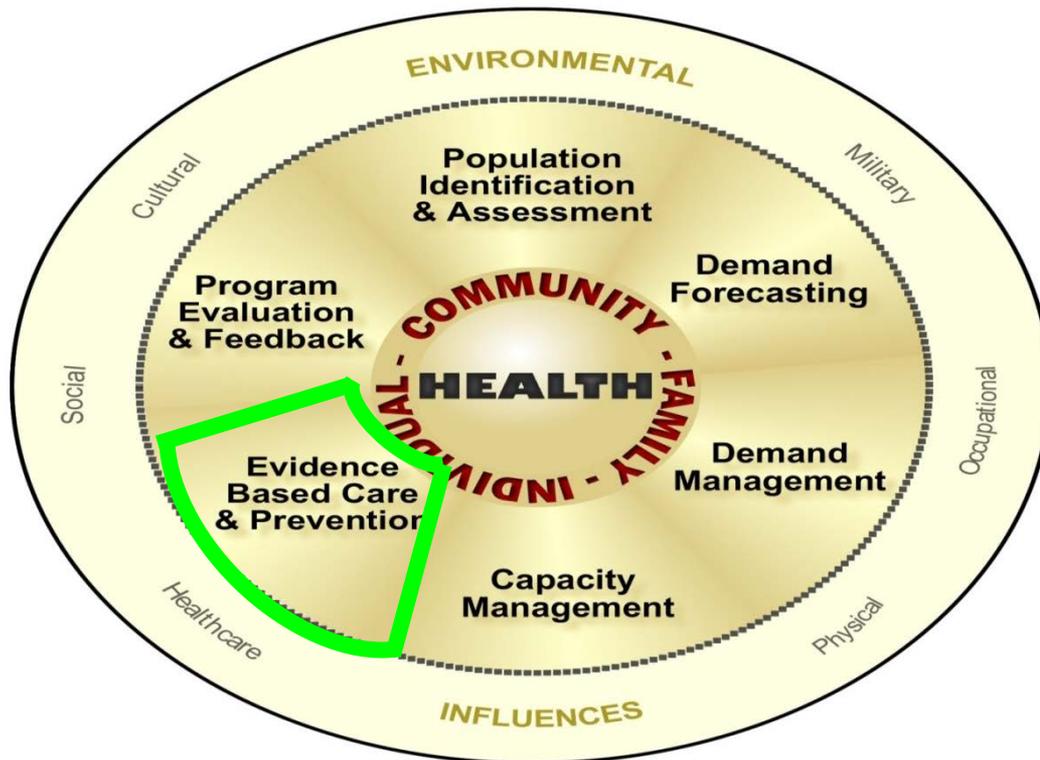
Matching the quantity and quality of healthcare services provided at the MTF with the needs of the population.

Factors affecting capacity management:

- Patient demand
- Appointment types
 - Open Access
 - Group Appointments

- Provider availability
- Provider type needed
- Support staff
- Ancillary support requirements
- Readiness requirements
- Physical space
- Equipment needs

MHS Population Health Model



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Evidence-Based Care and prevention

- The provision of healthcare using a systematically developed, research-based approach
 - Identifies people with or at risk for chronic disease
- Provides patients & families:
 - Evidence-based information & tools (e.g. CPGs)
 - Multidisciplinary team to follow plan of care
 - Referral to resources, as needed (e.g., case management, disease management)
 - Health promotion and/or patient self-management education

- Improved Quality of Life
 - Higher Functional Status
 - Self-Management
 - Fewer Hospitalizations/Acute Visits
- Improved Quality of Care
 - Reduced variation
- Decreased Costs → More Resources Available for Prevention Strategies
- VA/DoD CPGS: www.qmo.amedd.army.mil

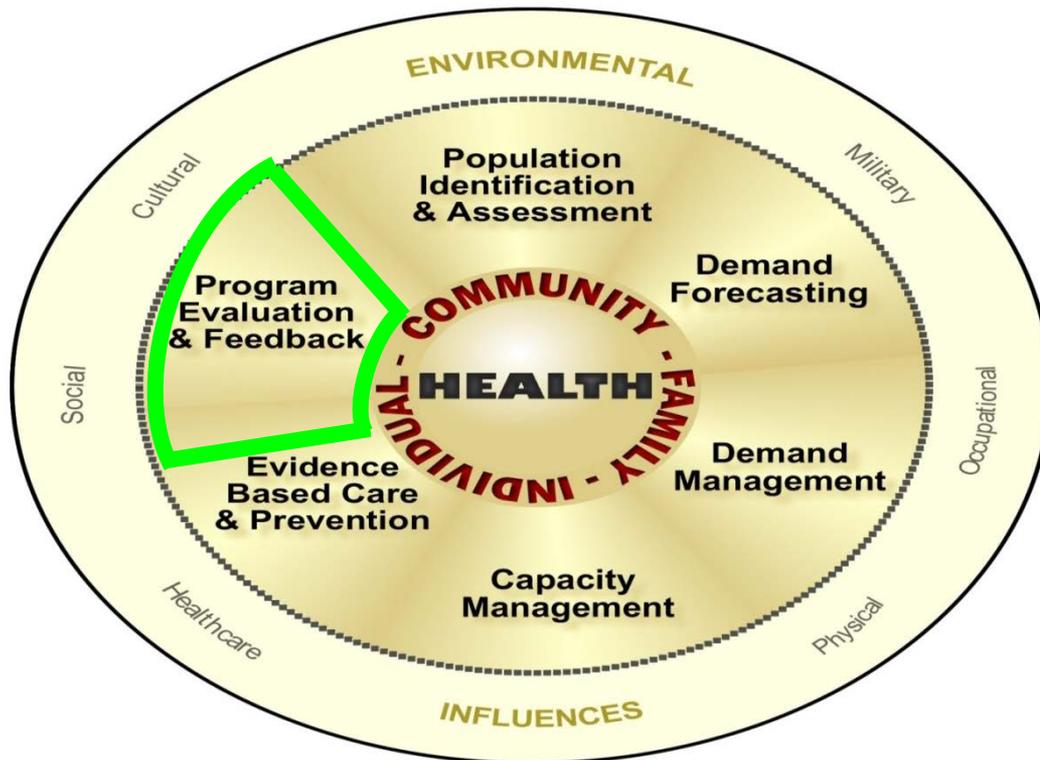


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Program Evaluation and Feedback

- Implementing Clinical Practice Guideline (CPG) is NOT enough
- Measure outcomes to evaluate your program's processes and performance
 - Service required clinical metrics
 - Use the Population Health Portal on CarePoint
- National benchmarks (examples)
 - Healthcare Effectiveness Data and Information Set (HEDIS®)
 - Healthy People 2020
 - Joint Commission-ORYX

Summary

- Introduced the audience to Population Health
- Reviewed the six key steps of the MHS Population Health Model including how information technology is essential in achieving them

Key Takeaways

- Discussed the six major components of the MHS Population Health Model
- There are at least 3 IT systems that support population health
- There are 3 components of Medical Management

Questions?



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Evaluations



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Please complete your evaluations

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Contact Information



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CAPT James Ellzy
Immediate past Navy CMIO
james.a.ellzy.mil@mail.mil