

Five Healthcare Fails and What We're Doing in Cincinnati to Fix Them

	Slide
<i>As attendees enter, hand out wristbands, capture email/sign in</i>	<i>Welcome – title slide/sponsors</i>
Craig Brammer	
Welcome and thanks for coming today. I'm Craig Brammer. CEO of The Health Collaborative. Healthcare is complex. The Health Collaborative is a social enterprise and regional health improvement collaborative based right here in Cincinnati. We work with those who provide care, pay for care, and receive care, to find mutual solutions to healthcare's most challenging problems. Allow us to take you on a little journey highlighting 5 of those most challenging problems and what we're doing in Cincinnati to fix them.	<i>4 pillars slide</i>
Your tour guides for this healthcare journey: Tiffany Mattingly - Director, Clinical Quality Improvement, Mary Maune - Senior Project Manager, Consumer Programs Tim Polsinelli - Director, Informatics Sara Bolton - Director, Programs and Services Operations, Laura Randall - SVP, External Affairs	<i>Pics and titles</i>
You all received a colored wristband when you arrived. That wristband is just like a hospital wristband you'd receive upon being admitted to the ER.	<i>ICD-10 codes and meanings with visuals</i>

Within the healthcare industry, providers, coders, IT professionals, insurance carriers, government agencies and others use International Classification of Disease codes to properly note diseases on health records, track public health trends, and assist in medical reimbursement decisions. There are some 70,000 ICD-10 codes intended to smooth billing processes and assist in population health and cost reduction across the healthcare delivery system.

You have your very own ICD-10 code on your wrist band. And I bet you'd like to know what your code means.

If your code is:

V97.33XD: Sucked into jet engine, subsequent encounter

Sucked into a jet engine, survived, and then sucked in again? That really, really sucks. I should note that technically that means subsequent encounter with physician and NOT a jet engine but that's far less dramatic.

Z63.1: Problems in relationship with in-laws

You heard that correctly. So just remember next time you're with your in-laws, "this could land me in the emergency room."

Y93.D: V91.07XD: Burn due to water-skis on fire, subsequent encounter.

How does this happen? Are water skis even flammable?

V9542XA: Spacecraft crash injuring occupant This does not bode well for NASA. W61.12XA: Struck by macaw, initial encounter Macaws are endangered—some are extinct in the wild—so if you’ve been struck by a macaw, chances are, it was likely payback. So now that you’ve sustained a bizarre injury and healthcare crisis that has you racing off to the ER, we’ll get started on your healthcare journey. If everyone could please stand up.	
Tiffany Mattingly Being discharged from the hospital could be hazardous to your health	
So, you found yourself in the ER. Whether by macaw or a spacecraft collision, your visit to the ER is inevitable. You find yourself being poked and prodded, have blood drawn, pee in a cup, get an IV and had some pictures taken of your head and limbs. You’re determined fit to be discharged and are asked to get follow up care with your doctor. Here’s where things get tricky and could potentially be hazardous to your health... The riskiest part of your healthcare transition is after you leave the ER. Once you leave, what happens to your health information? Who do you call? Do they know you were in a spacecraft collision? Do you understand your follow up care and medications? Or, the minute you exit the ER doors does all your health care information enter a portal to a galaxy far, far away never to be seen again?	<i>ER visual</i>

Furthermore, is there anything you could have done to prevent yourself from landing in the ER in the first place? You find yourself with a lot of questions and anxiety as you walk out the ER doors, but it doesn't have to be this way. At The Health Collaborative, one of our jobs is to get healthcare providers from different health systems to solve these kinds of problems associated with transitions of care settings. But this is just one piece of the puzzle. Here's what else we're doing...	here's what we're doing to fix that...
Mary Maune It's a lot easier to find the best restaurant in town than it is to find a good doctor	
How many of you know how to use yelp to find a restaurant within walking distance to this building? And how many of could find out where the nearest Poke-stop is? Now how many of you know how to find a quality doctor within your plan on your smart phone? Right. So shouldn't we able to find a good doctor in the same way we can find a restaurant (or a Pokemon)? So those of you with blue wristbands: You were not able to find a good doctor within your plan. Please sit down. The rest of you found a good doctor and will live to see another day or at least get to continue on our little healthcare journey.	

Patients and Consumers currently don't have many options for finding a high quality doctor using evidence-based data, and they lack understanding of what to expect around receiving high quality care from their doctor. At The Health Collaborative, we created a free website – <i>YourHealthMatters.org</i> – that publicly reports ratings on the quality of care doctors in our region are providing for their patients. The site provides ratings of patients' experiences at primary care practices from surveys that patients complete following their visit. These ratings show the extent to which patients feel they are getting the right care when they need it, how well doctors and office staff communicate with them, and if they would rate their doctor as exceptional. And since patient experiences and care don't always take place in an office setting – we're including ratings on our region's hospitals as well. We get actual clinical data from doctors so we can identify who is performing in a way that science says is best. We are working to build a newer, more dynamic website that will enable more audiences to see more information about the health of our community, and to dive deeper into what external factors are affecting our health outcomes so we can work as a community to address it. Now back to our story. Those of you who were successful in finding a good doctor, you make an appointment...	Screen shot of yourhealthmatters.org You make an appointment...
Tim Polsinelli Amazon knows more about you than your doctor	
You arrive at your new doctor's office. You still haven't gotten all the feathers out of your hair from the macaw attack. It's been awhile since you've seen a doctor, and you're trying to remember your medical history. You think, "I had strep	HIE iconographic

back in college....but they should know all this already, right?"

The sad truth is your doctor probably won't. They'll hand you a clipboard of 5 lbs. worth of paperwork you swear you've filled out before.

Those with yellow wristbands: It could take weeks to track down your medical records, hence your doctor won't have all your information to make the best decisions about your care in real time. Go ahead and sit down.

Those of you who were successful and are still standing, it's because your doctor participates in a health information exchange – a network that allows doctors to exchange patient information electronically.

At The Health Collaborative we're working to make sure that is EVERY doctor.

We're not there yet but our goal is to connect every doctor, nurse, pharmacist in Greater Dayton, Southeast Indiana, Greater Cincinnati, and beyond to ensure better care coordination across all the places a patient may receive care: Your health information where you need it, when you need it.

15M clinical messages flow through The Health Collaborative monthly.

Messages such as electronic notifications to doctors when a patient is admitted to the ER.

And lab results immediately delivered to your doctor for interpretation.

With our uniquely connected technology, we do much more than just exchange information. We make the information meaningful.

We're closing the gap of information sharing between health plans and doctors to improve patient outcomes.

And we are using population health analytics to identify high risk patients and areas of the community to improve health and healthcare. This data exchange was at work back when you were admitted to the ER after your water skis were set ablaze. It's the reason your doctors were able to treat you and discharge you seamlessly with the appropriate care coordination. And it's the reason you've been successful in navigating the healthcare system thus far. But don't get too comfortable...	But don't get too comfortable...
Sara Bolton No one is paying your doctor to keep you well	
After all this, you'd think someone would have the same incentives in making sure you get healthy and stay healthy, as you do. But unfortunately the payment system has not been set up that way. Generally, doctors are great people. They are healers. They are helpers. Sure maybe they've kept you waiting for an hour....but, that's not their fault! Really, it's not. It's the way the payment system has been designed to pay for healthcare. Plain and simple – traditionally doctors have been paid on the amount of services they provide. Not quality. Not outcomes. They run on the proverbial hamster wheel, day in and day out. Orange wristbands: You went to a doctor who is still operating in a traditional payment model. You spent 7 minutes with your new doctor, only scratching the surface of your overall health needs. Sit down. The rest of you got lucky! You go to a doctor that is being paid to keep you healthy. Since your doctor is paid	

differently, they are able to expand their medical team and have more flexible, and longer, hours. They might even be able to take care of that residual jet engine wound virtually, saving you tons of time.

In these innovative practices, every member of the staff plays a key role in keeping you well.

The doctor has time to focus on your most complex needs, while nurses and care coordinators focus on helping you set health goals and navigate a complicated system.

They have the time and resources to look at the whole you, allowing you to discuss your health and wellness goals. Together. As a team.

For those of you that sat down, don't despair, luckily you live in a community that has an advantage on this front.

Cincinnati/Northern Kentucky is one of only 7 communities in the country participating in a national experiment to change how doctors are paid – to keep people well.

At the Health Collaborative, we work with the Health Insurers, the Health Systems and Doctors, and Consumers to implement these changes.

As a trusted and neutral partner, we provide data to measure outcomes. We coach medical teams on how to use this data to identify areas for improvement and suggest simplified ways to improve.

We work with the Insurers of healthcare to measure return on investment for this important work, to ensure it has legs and is sustainable.

And Medicare is taking our learnings to apply them more broadly across the country. Some may call our region a "model," ...we prefer the term "Learning Lab."

But what if still, there is something more each of us can do to make Cincinnati an epicenter of stellar health and healthcare.

But what if still, there is still something each of us can do...

Laura Randall

Doctors can't fix what's making Cincinnati one of the least health communities in the country

Congratulations – the lucky few still standing have successfully navigated an ideal healthcare system. Except we still have a problem. So go ahead and sit down.

The care you got was what we sometimes refer to as “sick care.”

And 30% of what makes us need sick care are the choices we make every day. The decision to stay in and Netflix rather than get active, play kickball or do your own yardwork. That quest for the best burger and fries in town, KFC, fast food.

Who here is Pepsi? Hands up if you're Coke? - I definitely used to be Coke.

But that was before I knew that the increase in sugary beverage consumption in the US that began to hockey stick in the 80's correlates exactly to the increase in obesity.

Here's the embarrassing part. We live in one of the sickest cities in one of the sickest states in the country. When it comes to wellness, a measure of physical and behavioral health, Ohio ranks 42 in the country, Kentucky is 48th. Of the top 100 cities, Greater Cincinnati is 91st for Wellness. 29% of us are obese, 12% have diabetes.

Remember I said 30% of what makes us sick is behavior. 40% is attributable to social determinants. That means income and education, financial wellbeing, and access to fresh food. Those with a high school degree or less, are twice as likely to have diabetes as College graduates.

Adults living in poverty are 35% more likely to have high blood pressure and twice as likely to have heart disease. And the life expectancy for our neighbors in South Fairmont is 20 years lower than those in Mt. Lookout.

Screen shot of Gen-H website

Poor health is costing our region over 15-billion dollars a year in medical expenses alone. Another 2.5 billion in lost workforce productivity. It's choking our economy and limiting our ability to harness all of the human potential available to us as a community. That hurts you, no matter how healthy you are. So what do we do? We need to say, we are better than this. We are Gen-H: The generation that values health. And how do we do that? At The Health Collaborative, we're the backbone organization for Greater Cincinnati and Northern Kentucky's Collective Impact on Health Initiative. With an unprecedented number of diverse stakeholders, from the region's major employers and health systems to public health and community organizations like United Way, we're working to make the healthy choice an easier choice. We're addressing equity and other factors that stifle dreams and keep people from realizing their full potential. Cincinnati is a leader in so many ways. Why shouldn't health and healthcare be one of them? Help us make the healthy choice the easy choice. So, this time, all of you, with any kind of wristband: Join us in becoming Gen-H.	#WeAreGenH Play Gen-H video
Craig facilitates Q&A Healthcare is a team sport and we want to invite you to be on our team. This sector represents 20% of our economy and we need the collaborative minds, entrepreneurs, and our region's creative spirit to solve these problems together. We'd like to take the opportunity now to do a two-way Q&A on how we might work further to solve healthcare's biggest fails.	Thank you! Social media icons