# Welcome—the CIE webinar will begin shortly

- Please mute yourself when not speaking, there will be opportunities for questions
- Webinar will be recorded



# **Community Information Exchange (CIE) Webinar**

April 29, 2021



# Logistics

- This meeting is being <u>recorded</u> and will be posted on OHA's website\*
- Please mute yourself when not speaking
- Feel free to use the 'Chat' feature if you have questions or comments



# Who's talking today

#### **Oregon Health Authority (OHA):**

- Lisa Parker, Director of Health IT Policy
- Hope Peskin-Shepherd, Policy Analyst
- Dawn Mautner, Medicaid Medical Director, Senior Health Advisor COVID-19 Response

#### **Oregon Department of Human Services (ODHS):**

Bill Baney, Self-Sufficiency Programs Design and Implementation Manager

#### 211info

Cara Kangas, Director of Partnerships



# Who's talking today (continued)

#### **AllCare Health:**

Susan Fischer-Maki, Director of Community Benefit Initiatives

#### **Project Access NOW**

- Claudia Acosta, Outreach, Enrollment & Access Program Specialist
- Katia Ariceaga, Outreach, Enrollment & Access Program Manager

#### **Cascade Health Alliance**

- Maria Ramirez, Community Engagement and Public Relations
- Michael Donarski, Director of Decision Support & Business Intelligence

#### **Sky Lakes Medical Center**

- Martha Decker-Hall, Supervisor, Outpatient Care Management
- Brenda Monroe-Sierra, Intake Specialist, Outpatient Care Management



# Agenda

Time	Topic
1:30 pm	Overview of CIE
1:40 pm	Connect Oregon/Unite Us users:  • AllCare CCO  • Project Access Now
2:15 pm	<ul><li>Aunt Bertha users:</li><li>Cascade Health Alliance</li><li>Sky Lakes Medical Center</li></ul>
2:40pm	211info Q&A
2:45 pm	General Q&A



# **Goals for today**

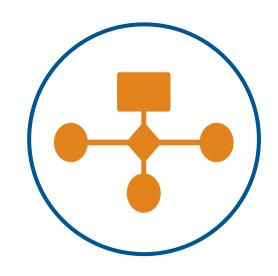
- 1. Learn what CIE is
- 2. Understand possible uses and value of CIE
- 3. Know how to get involved
- 4. Share thoughts about challenges and usefulness

Poll: Who is familiar with CIE? (never heard of it, heard of it don't know anything, slightly familiar, very familiar, use it)



# What is Community Information Exchange (CIE)?

CIE is a network of healthcare and human/social service partners using a technology platform to electronically connect people to social services and supports.





### **Functions of CIE**

- 1. Consent
- 2. Social needs screening/assessment
- 3. Shared resource directory
- 4. "Closed loop" referrals
- 5. Analysis and reporting
- 6. Privacy and security
- 7. Interoperable with other technologies





# Why is OHA interested in CIE?

- OHA views CIE as part of a broader strategy to address social determinants of health (SDOH)
- During COVID, OHA sought to promote progress communities have made investing in CIE



## Value of CIE



- Connects people with the services and resources they need
  - Meet cultural and linguistic service needs
- Coordinate more easily across organizations
  - Save time, connect more efficiently, improve outcomes
- Use data to inform policy and identify gaps in services



# **Overall CIE Landscape**

#### **Efforts in Oregon:**

- Connect Oregon/Unite Us
- Aunt Bertha
- Other efforts: Activate Care, local community resource networks/lists

#### **Current participants include:**

- Community-based organizations (CBOs)
- Clinics and other providers
- Local public health authorities (LPHAs)
- Coordinated Care Organizations (CCOs), health plans, and integrated health systems



# Landscape: Connect Oregon/Unite Us

Free tools available for CBOs, LPHAs, and Tribes in these counties:

- Benton
- Clackamas
- Clatsop
- Columbia
- Crook
- Deschutes
- Hood River

- Jackson
- Jefferson
- Josephine
- Klamath
- Lane
- Lincoln
- Linn

- Marion
- Multnomah
- Polk
- Tillamook
- Wasco
- Washington
- Yamhill

Connect Oregon is working with AllCare CCO, Central Oregon Health Council, Columbia Pacific CCO, HealthShare of Oregon, InterCommunity Health Network/Samaritan, Jackson Care Connect, Kaiser Permanente, and PacificSource Community Solutions.



# **Landscape: Aunt Bertha**

Free tools available across Oregon. Working with Cascade Health Alliance and Trillium Community Health Plan, in these counties:

- Clackamas
- Klamath

- Lane
- Multnomah

- Washington
- Statewide tools



# Questions?



# OVERVIEW OF CIE LAUNCH IN SOUTHERN OREGON

Susan Fischer-Maki
Director of Community Benefit Initiatives
AllCare Health



# CONNECT OREGON

#### **BETTER CONNECTIONS, BETTER CARE**

Across the state CCOs have made **significant investments** in the Social Determinants of Health and Equity (SDoH-E).

These investments have led to strong relationships with **Providers** and **Community Based Organizations** (CBOs).

We are committed to building local capacity to better connect and, as a result provide better care to those in need.

#### Improve population health

Our innovative strategies ensure the populations you manage receive evidence-based care

#### Reduce costs

We curb unnecessary costs by ensuring clinically appropriate tests and treatment and optimizing the site of care



#### Enhance patient experience

Our engagement and shared decision-making programs convert your members into savvy self-advocates

#### Improve work life for providers

Our clinician-crafted solutions and superior technology simplify your delivery of evidence-based care

#### A JOURNEY OF COMPLEX CHANGE

**2014:** Community Call for a Solution

**2015:** Initial Community CIE Effort

**2018:** Reinvigoration of Effort

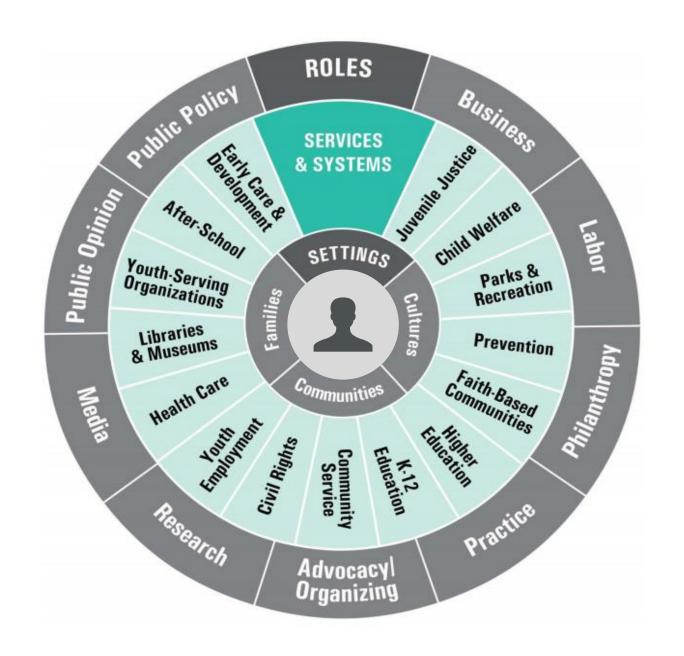
**2019:** Alignment & Acceleration

**2020:** Selection & Contracting

**2021:** Community Socialization



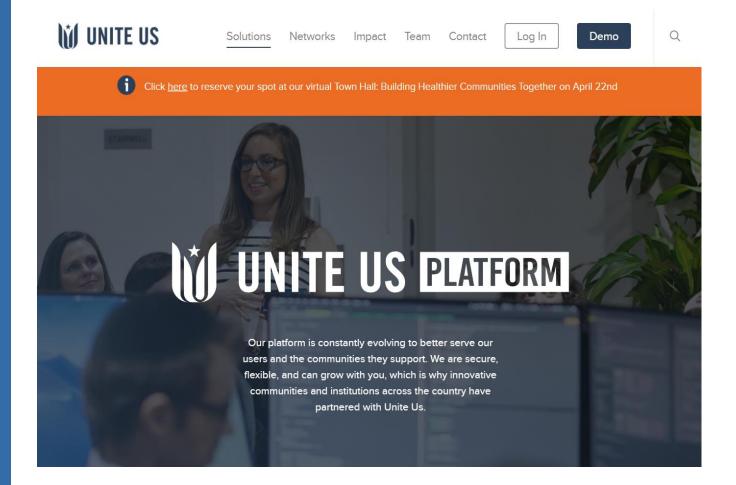
**April 20, 2021:** Launch of Connect Oregon in Jackson & Josephine Counties



#### WHAT WE HAVE LEARNED

- √ Community Driven Change
- ✓ Alignment & Acceleration
- ✓ Selection & Contracting
- **✓** Community Socialization
- ✓ Platform Adoption & Launch
- ✓ Ongoing Governance

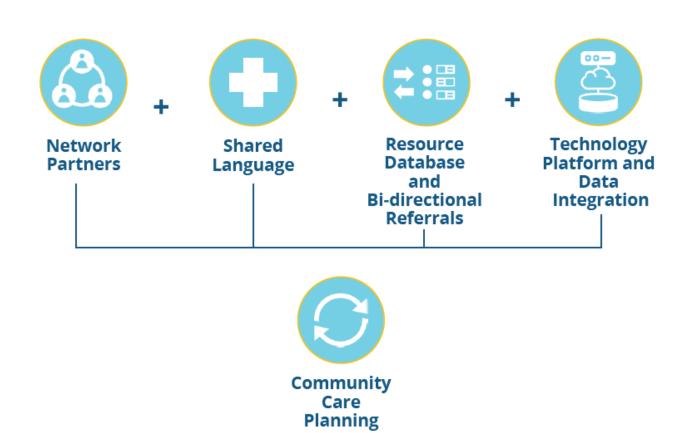




#### **MEASURING IMPACT & OUTCOMES**

- ✓ Network Adequacy
- **✓** Partner Adoption
- ✓ Access to Care
- **✓** Sustainability.
- ✓ Community Impact

Figure 1: Core Components of a CIE





#### **LEARN MORE**

www.oregon.uniteus.com

#### **SOUTHERN OREGON CCO LEADS**

Susan Fischer-Maki

AllCare Health

susan.fischer-maki@allcarehealth.com

Meg Wills

**Jackson Care Connect** 

willsm@careoregon.com





























# PANOW & Connect Oregon

## In Numbers

#### How many clients

- 12 total users, one super user
- 45 client served
  - 71 referrals

#### **Services**

Services we most refer to

- Housing and shelter
- Food assistance



## Who we are

# Project Access NOW is a Portland, Oregon-based 501(c)(3) nonprofit organization working to improve the health and well-being of our communities.

• The mission of Project Access NOW is to improve the health and well-being of our communities by ensuring access to care, services and resources for those most in need

#### **Outreach Enrollment & Access Program**

- Katia Ariceaga and Ellie Solares-Solis Managers
- 8 application assisters

#### What do we do?

- Assist underserved communities to apply + enroll in Medicaid or other Qualified Health Plans through the Federal Marketplace
- Conduct outreach efforts in order to reach and inform uninsured citizens.
- Educate clients about what their plan covers and assist clients with navigating the system.



# Why was important for us

- PANOW and Unite Us (Connect Oregon) mission is the same, to connect individuals to services for a healthy community. Connect Oregon has been a resource for us to accomplish our mission.
- Historically the PANOW enrollment team, has always helped beyond connecting people to insurance only. Having one place where we can do that additional coordination, makes our work much easier. When someone applies to health insurance you learn about all of their life and their family.
- Also, our clients already have a level of trust with us, and because of that, they feel comfortable
  their needs with us, so then having a platform allows us to support and take the next steps.
  COVID has also exacerbated community needs, having a tool that coordinates and connects has
  been incredibly helpful. Having everything online made it so much easier. There is no need to call
  back and forth.
- At the same time, when everything moved online because of COVID, it exacerbated people's ability to access services, since many of the people we serve do not have internet, so they fact that we can inquire for those services via Untie Us, and not have the client to that first step, makes it much easier kind, and trauma informed for everyone.

# Our Experience

- When at first I heard about Unite Us, it sounded great, but I was sort of confused about how a link could help all. But then I understood that it was a coordination tool, and the value is to know the outcome of when a referrals is sent, in order to best do our work.
- Also, some other things have happened, like when we have people calling out of Portland Metro, including someone in CA, and I was able to connect them to other regions and even the California Network.
- The first presentation that we heard about Unite Us was in october, and while we were interested we did not join. But then when COVID hit, the increase need to do things online, really kick started the process of joining. We also asked Unite Us about training in Spanish, which they created to accommodate our staff.
- We use the chat box to get questions answers, and we fell that their approach is the same as ours, always available to help.
- At one point I became slightly overwhelmed with all of the notification, but then I learned that I could modify the updates, and now I find value in knowing all of the steps in someone care coordination journey.

# Challenges

- While not directly related to the platform, COVID had a huge impact in care coordination and service availability. I could see how I was getting more rejected referrals for key services because the need was higher.
- There is an initial learning curve to understand the software, but there is lots of help along the way
- We need more and more organizations joining the network, the more services we have, it will make it easier for people to get what they need
- We also need to grow across the State so no matter where you live you can get the right resource
- One person cannot help everyone, but everyone can help someone



### Successes

- It works! To send a referral and see the outcome makes your work meaningful
- It allows us to address health in a holistic way, beyond only medical needs and health insurance
- The coordination center (211info) is a huge support, being able to refer to it through Connect Oregon simplifies our work
- Our clients can tell the difference for when we refer through Connect Oregon, because it makes it easier for them to get services.







# Cascade Health Alliance, LLC

**Implementing Community Information Exchange** 



### Community Integration Goals

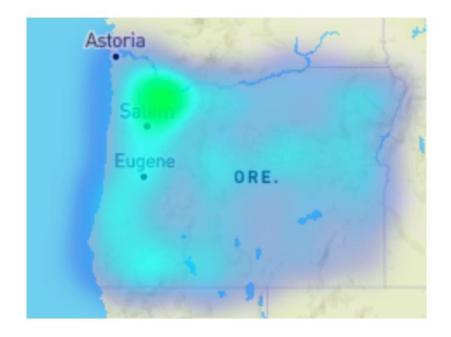




#### **Statewide Social Care Referral** Network

Aunt Bertha social care network in **Oregon**, by the numbers:

- **45,000+** users; **269,000+** searches, **11,000+** connections
- 29 customers serving Oregon residents
- 454 in-network CBOs serving residents of Oregon in need on our platform.
- **4,274** available programs to residents of Oregon.



#### **Aunt Bertha Customers serving Oregon:**

















Savers"













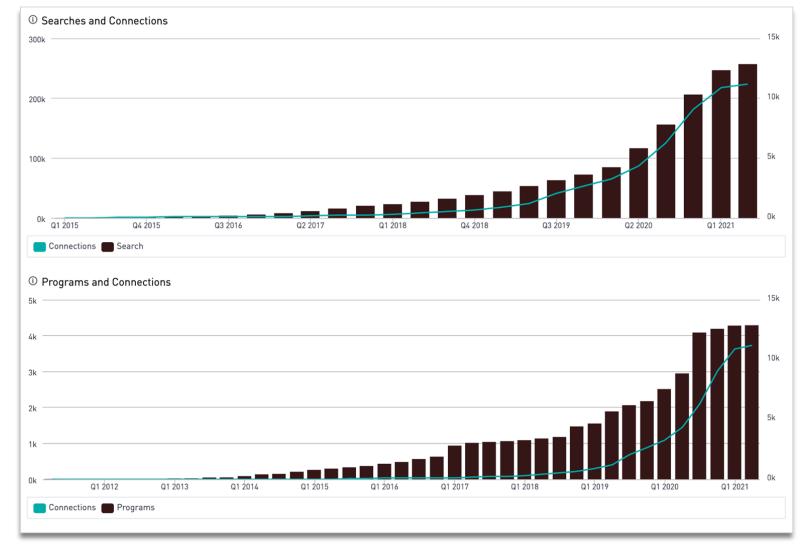






#### **Network Growth in Oregon**

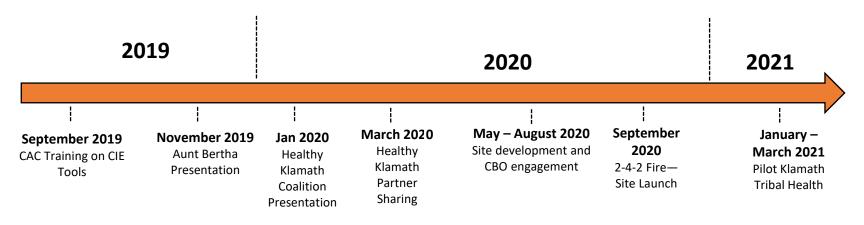
Graphs illustrate
the growth of
searches, programs
and their impact on
connections to
CBO's across across
Oregon on the Aunt
Bertha Platform.





#### Background

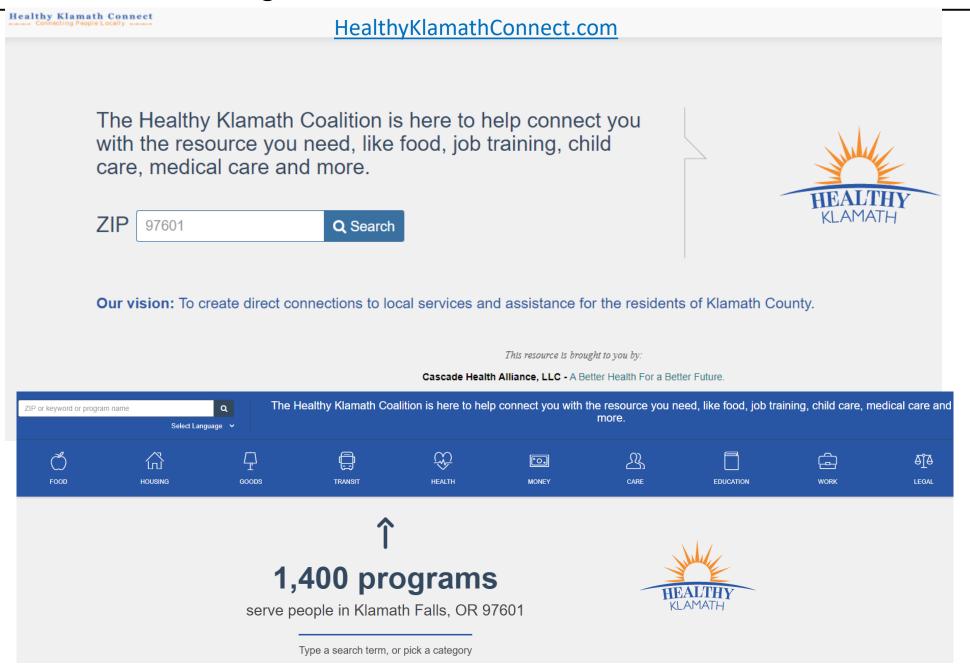
- ➤ Healthy Klamath Connect (HKC), powered by Aunt Bertha is an online social service directory designed to connect health care and social service sectors.
  - Site creation May through August 2020
  - Launched September 1, 2020



Aligning your community assets, challenges, and shared goals with your community partners

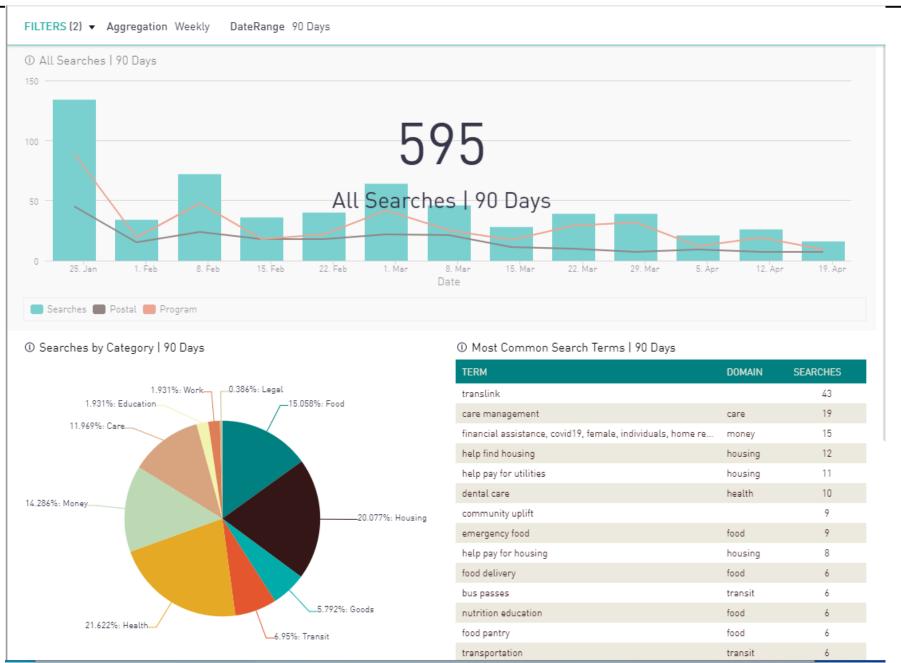
#### Community Information Exchange





#### Search Activity Reports







#### Objectives

- Enhance communication and service delivery across systems.
  - Mobilize Healthy Klamath Coalition service groups
    - Local Governments, Public Health, Klamath Tribes, Healthcare Provider, Community-Based
       Organizations, and CHIP Workgroups
  - Engage System of Care Network
  - Implement in K-12 Education Districts
  - Quality Metrics and Care Coordinator



- Successes
  - ➤ Cross-Sector Collaboration
  - **≻**Community Plan
  - ▶ 25 local users managing 62 programs
  - ➤ Klamath Tribal Health Pilot
    - Foster clinic-community linkages



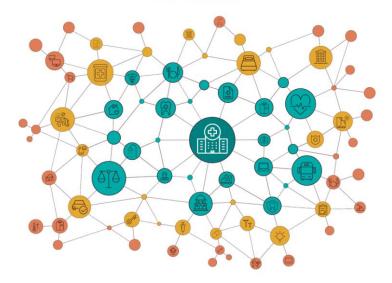
- Challenges
  - ➤ Community-Based Organizational Capacity
  - ➤ Limiting groups settings
  - Competing community efforts trying to accomplish connecting SDOH needs



## **Network Approach**

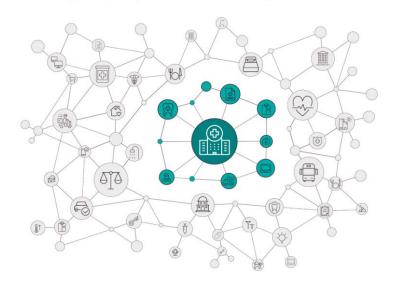
#### **Open and Focused**

You can focus the network on priority partners and covered benefits programs while still providing access to the full range of national, state and local programs with self-service.



#### Closed

These networks often rely on financial arrangements and contracts with CBOs. This industry-driven approach means that Seekers do not have access to a broader range of programs nor can they self-serve.





# **Serving CBOs**

#### **CBO Choice**

CBOs should be able to receive referrals in their chosen system of record. They can control how they share data and keep Seeker information private. This leads to significantly greater adoption across the community.











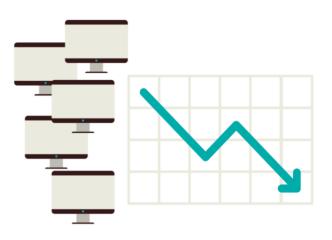






#### **Government-Granted Monopoly**

When states or communities require using a specific vendor, control over privacy and data is no longer in the hands of the CBO or the Seeker, leading to more limited adoption.





# **Seekers-First: Privacy & Consent**

#### Per-Referral Consent and Permission-Based Access

CBOs should be able to access referrals based on care coordination responsibilities. Private referrals should remain private, with the Seeker having the choice to share.



#### One All-In Consent

Once a consent is signed, social care data can be looked up, shared and accessed by anyone in the "network." As that network adds new entities, the Seeker has no idea where their information is being accessed. This is an industry-first approach.



# Sky Lakes Medical Center

Martha Decker-Hall Supervisor | Outpatient Care Management

Brenda Monroe-Sierra Intake Specialist | Outpatient Care Management



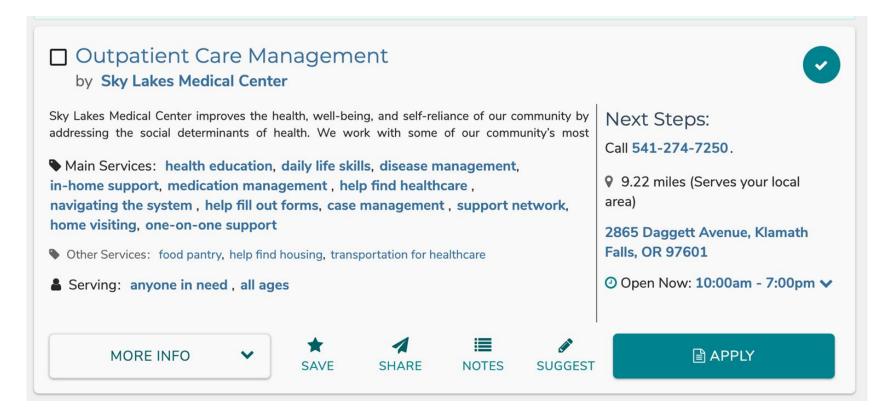
LIFE: HEALING: PEACE

# Setting up our program



## Claiming our program

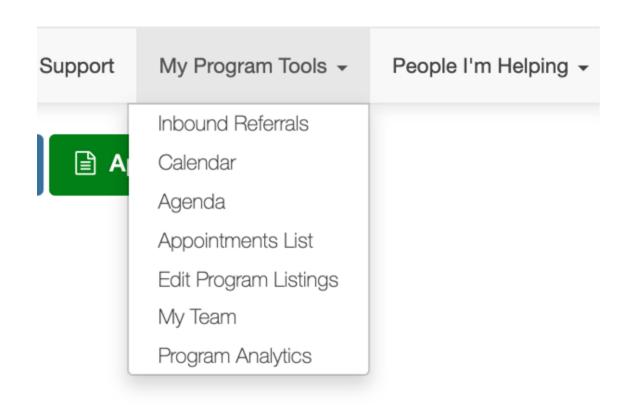
- Connected with Cascade Health Alliance to set up our program
- Created a free account to claim our program





#### Access to free tools

- Update and manage program information.
- Process inbound referrals and applications for services.
- Update referral status by email.
- Reporting tools to measure impact.



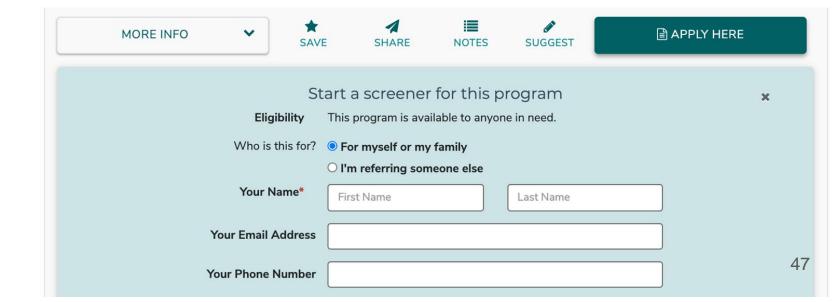


# Receiving/Responding to Referrals



## Setting up our program

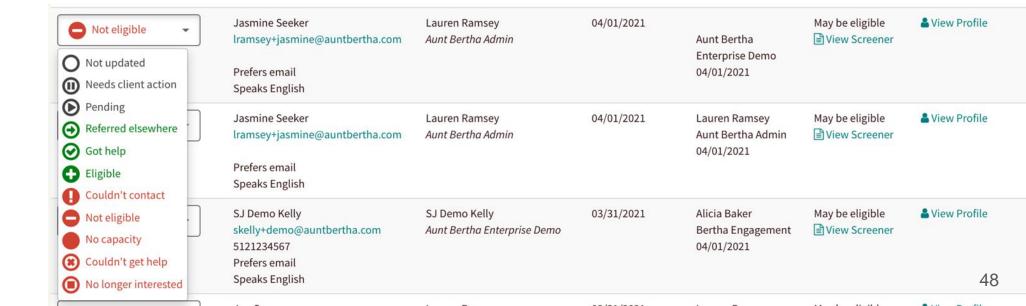
- Connected through one step referrals
  - → Updated status via email
- Needed more information from the person (ex, DOB)
  - → Set up a screening form





## Responding to referrals workflow

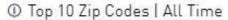
- 1. We receive email notification
- 2. Log into Healthy Klamath Connect/Aunt Bertha
- 3. View new referrals + screening forms
- 4. Call and attempt to engage them in our our program
- 5. Update the status of the referral



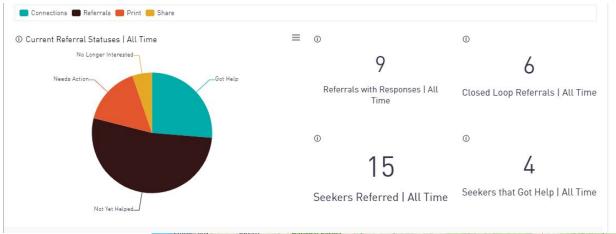


## Impact Reporting

- View different places people are interacting with our programs
- See at a high level, number of:
  - Referrals we received
  - Breakdown of statuses
  - Referral Details
- All reports can easily downloaded



ZIP CODE	СІТУ	REFERRALS
97601	Klamath Falls, OR	14
97603	Klamath Falls, OR	3
28104	Matthews, NC	1
30577	Toccoa, GA	1







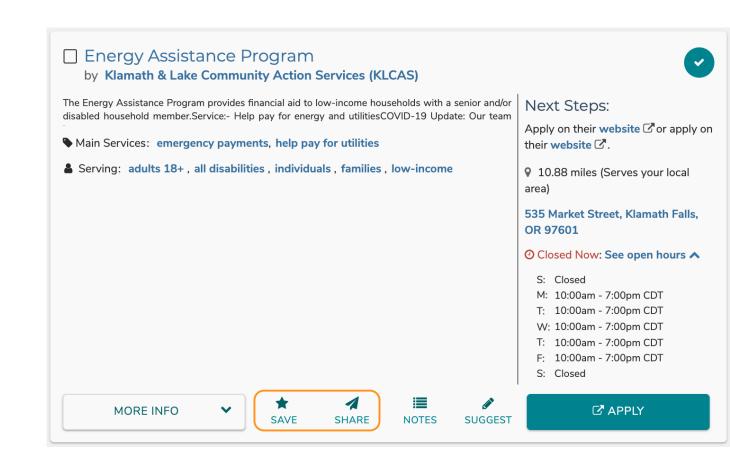
# Supporting Additional Patient Needs



## Connecting patients to other programs

#### Our CHWs can:

- Search for programs for our patients
- Connect to programs
- Share via text, email, Facebook
- Send direct referrals
- Save programs in their favorites folders for quick access





# Questions for Cascade Health Alliance and Sky Lakes Medical Center?





Cascade Health Alliance, LLC

# Q&A with 211info Cara Kangas, Director of Partnerships

1. How does 211info differ from CIE?

2. Does 211info have the same resources as CIEs?

- 3. What is the work 211info is doing with Connect Oregon/Unite Us?
  - 211info staffs the Connect Oregon + SW Washington Coordination Center\*
- 4. Does 211info work with other CIEs?



<sup>\*</sup>https://www.211info.org/coordination-center

# General Q&A



# Reflection and Feedback

- 1. How would CIE work for your organization?
- 2. Who in your organization would use CIE?
- 3. What are possible barriers?
- 4. What languages would your organization's staff need?



# Want to join or find out more?

#### **Aunt Bertha**

**Join:** company.auntbertha.com/for-nonprofits

**Questions:** community@auntbertha.com

**Call:** Emily Storozuk 512-898-9203

**Search Now:** <u>findhelp.org</u>

### **Connect Oregon/Unite Us**

Join: oregon.uniteus.com

**Questions:** oregon.uniteus.com/contact

**Call:** Celia Higueras 971-930-9969

**Get help:** <u>oregon.uniteus.com/get-help</u>

#### OHA

- Recording will be available on our <u>website</u>.
- See OHA CIE <u>Flyer</u> (<u>Español</u>) or <u>CIE maps</u> for more detail on counties using CIE.
- Send additional feedback to <u>hope.peskin-shepherd@dhsoha.state.or.us</u>

