

*Treating More than the Patient In-front of You*

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# Population Health

Steven E. Waldren, MD MS

April 3, 2014

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Heart of America HIMSS  
Education Event  
April 3, 2014

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# Agenda

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- ❖ Why it important
- ❖ What is population health
- ❖ How - what is required
- ❖ Future potentials



*Evidence continues to move forward*

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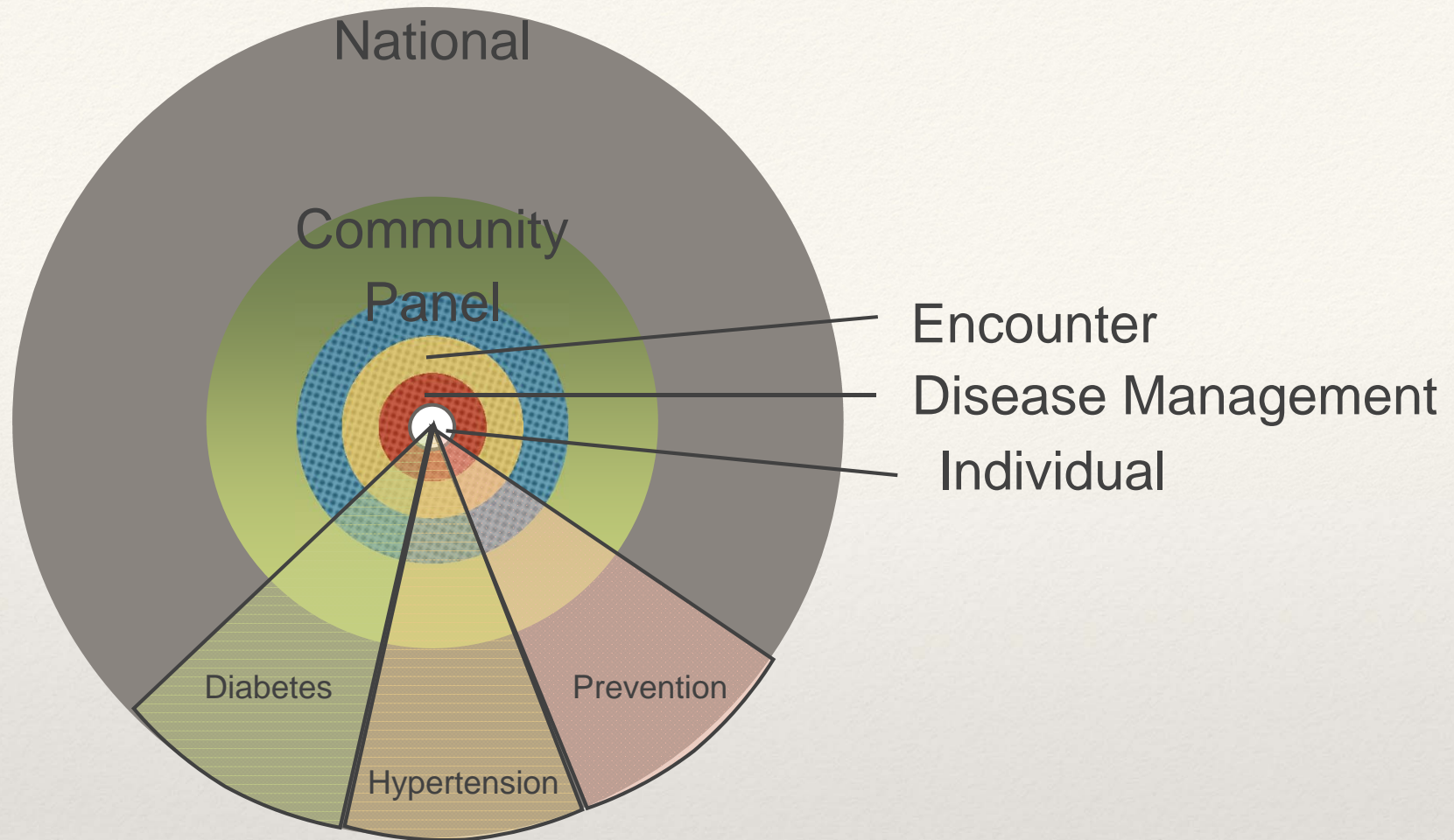
# Falling Behind

## Office Visit Not Enough

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- ❖ 7 minutes visit
- ❖ 0-4 times per year
- ❖ Acute Management
- ❖ Chronic Disease Management
- ❖ Prevention
- ❖ Quality Measures / Cost Control





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# Populations

Responsibility  
Circle of Influence  
Alignment of Incentives

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Simple Tickler File

Simple Spreadsheet

diabetesregistry.xls

**Diabetes Tracking Worksheet**

NOTE: DO NOT COPY AND PASTE DATA FROM CELL TO CELL AS THIS MAY UNDO IMPORTANT FORMATTING

KEY: A1c = hemoglobin A1c; OGTT = diluted tolterope exam; BMP = basic metabolic panel; BP = blood pressure

Patient name	Sex	Date of birth	ID number	Provider	A1c	Date of test	Date of test	Date of test	Date of test	Date of test	Date of test	Date of test	Date of test	Date of test	Comorbidities
Adams, Jane	F	02/14/58	111-11-1111	CRP	5.8	1-Mar-06	12-Jan-05	1-Mar-06	1-Mar-06	75	22-Dec-05	100	75	23-Nov-05	HTN, obesity
Bauer, John	M	10/05/70	222-22-2222	CRP	5.7	24-Feb-06	12-Dec-05	24-Feb-06	24-Feb-06	80	24-Feb-06	110	75	12-Dec-05	
Brown, Jane	F	03/23/63	333-33-3333	CRP	6.3	23-Jan-06	24-Jul-05	23-Jan-06	23-Jan-06	100	23-Jan-06	105	85	23-Jan-06	HTN, Retinopathy, E/D
Carst, John	M	07/05/72	444-44-4444	CRP	6.7	18-Feb-06	20-Mar-04	18-Feb-06	18-Feb-06	99	12-Nov-05	113	75	19-Feb-06	
Doe, Jane	F	06/05/68	555-55-5555	CRP	6.8	14-Jul-05	21-Jul-05	14-Jul-05	14-Jul-05	99	24-Oct-05	120	80	24-Oct-05	
Dougherty, John	M	07/01/48	666-66-6666	CRP	6.8	18-Mar-06	18-Mar-06	18-Mar-06	18-Mar-06	87	9-Jan-05	130	80	9-Jan-05	HTN
Jones, Jane	F	10/01/42	777-77-7777	CRP	6.2	19-Dec-05	19-Mar-05	19-Dec-05	19-Dec-05	99	19-Dec-05	128	77	19-Dec-05	
Lane, John	M	01/01/64	888-88-8888	CRP	6.4	31-Jan-06	31-Jan-06	31-Jan-06	31-Jan-06	87	31-Jan-06	115	80	31-Jan-06	
Smith, Jane	F	07/01/58	999-99-9999	CRP	6	17-Dec-05	17-Dec-05	17-Dec-05	17-Dec-05	100	17-Dec-05	130	80	17-Dec-05	
White, John	M	03/28/52	000-00-0000	CRP	7	29-Dec-05	18-May-05	29-Dec-05	29-Dec-05	75	20-Dec-05	120	75	29-Dec-05	



Socio-technical System

Data Management & Collaboration

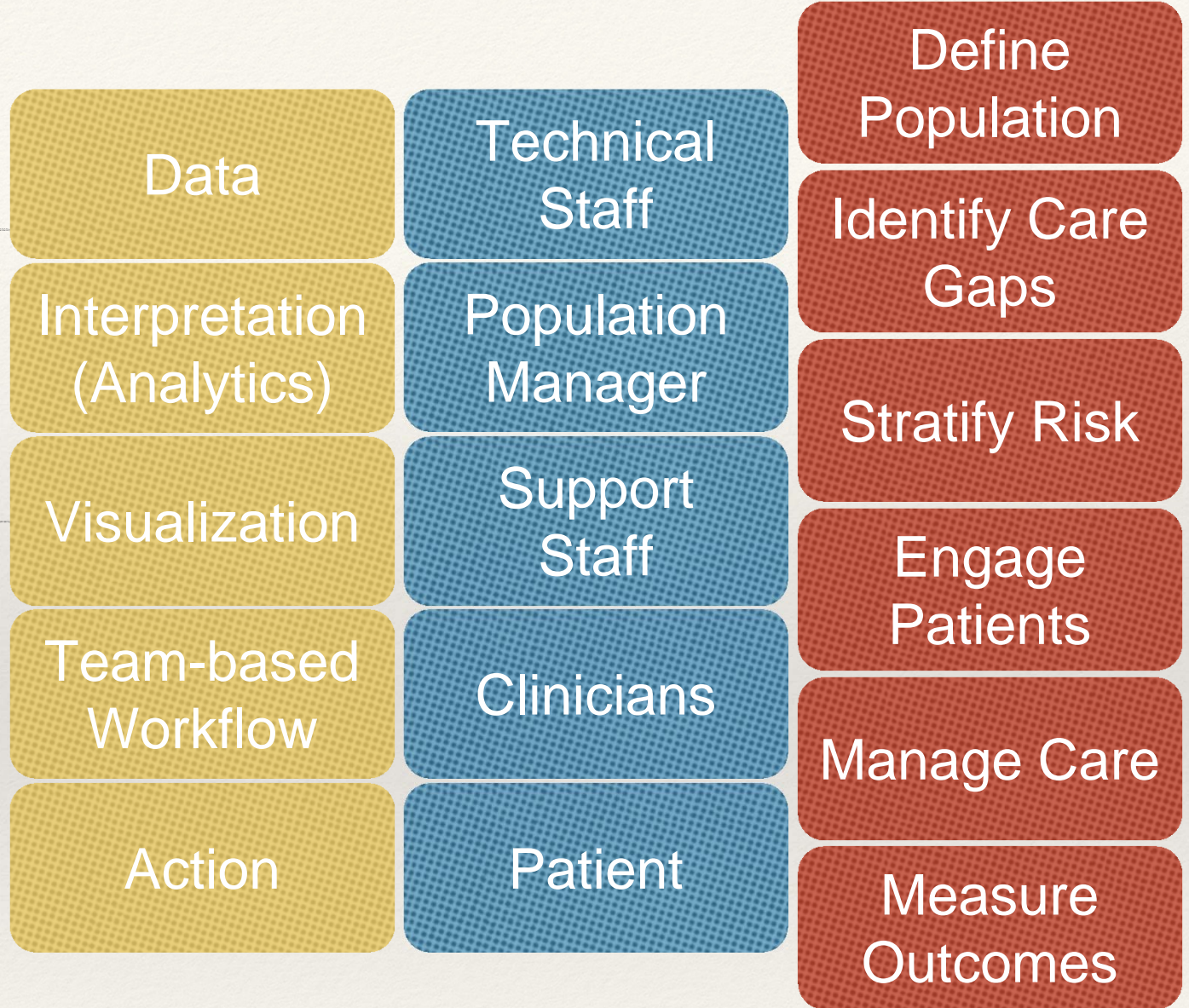
# Solution Spectrum

Simple to Complex  
 Stand-alone to Integrated  
 Individual to Team-based



# Pieces

Technology, Roles,  
Process





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# What Might Pop Health Look Like?

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- ❖ Population Manager reviews dashboard on a daily basis
- ❖ Patients needing intervention are risk/severity stratified
- ❖ Appropriate action is identified by patient and tasked to staff for action
- ❖ Tasks are tracked to assure completion of tasks
- ❖ Routinely scheduled meeting to address process, evidence, and outcomes
- ❖ Patient shows up for appointment
- ❖ Patient dashboard prompts for missing data
- ❖ EHR prompts for needed disease & prevention management - stratified by impact on pt's health
- ❖ Provider conducts visit, reinforces needed actions by patient & team
- ❖ Shared care plan is updated and sync'ed to portal
- ❖ Task reminders set for patient and team

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# Future?

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- ❖ Inclusion of social determinants of health
- ❖ Real-time analytics and push notification to patients
- ❖ Expanded data sources
- ❖ Continued movement to value based payment



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# Population Health

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- ❖ Does not replace individual care
- ❖ Used to enhance individual care
- ❖ Population health workflow happens in parallel with individual care
- ❖ Additional processes and work to be successful with population health
- ❖ New tools are needed to efficiently implement population health
- ❖ Managing data and care are central to population health
- ❖ Cannot improve what you do not measure

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# Questions?

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