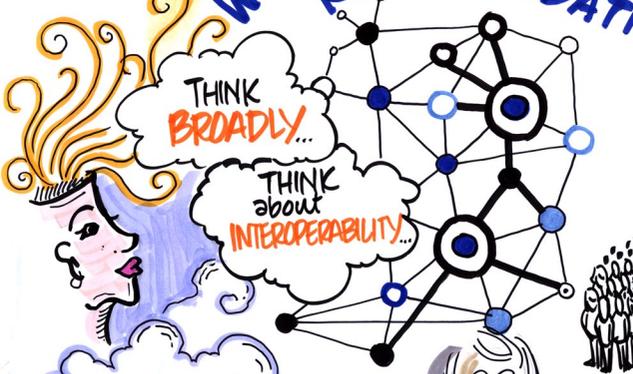


Case Study: PART 2

WHAT ARE YOUR RECOMMENDATIONS?



THINK BROADLY...

THINK about INTEROPERABILITY...



MOBILIZE A COALITION!

GATHER and LINK DATA we already have

as well as RESOURCES we already have. i.e. PRESCRIPTION DRUG MONITORING PROGRAM

LOOK FOR "DOCTOR SHOPPING."

WHERE are the HOT SPOTS?

...and HOW CAN WE DEPLOY WORKERS?

the OPIOID/HEROIN EPIDEMIC?

INITIATE LEGISLATION to MANDATE REPORTING.

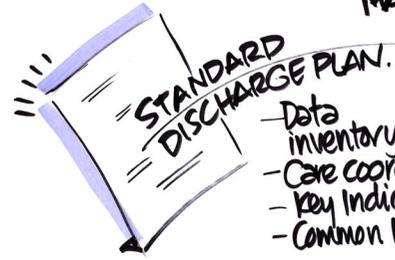


REVISIONS to ACA, MEDICAID EXPANSION.

"THERE HAS TO BE SOMEONE WITH THEIR FINGER ON THE PULSE!"

REFERRALS for CASE MANAGEMENT...

...at DISCHARGE? ...at TIME of REFERRAL?



- Data inventory
- Care coordination
- Key indicators
- Common identifiers

Algorithms analyze data and TRIGGER FLAGS if necessary.

TREATMENT ON DEMAND!

...including COUNSELING and CRISIS LINES.

LOOK at MODELS THAT WORK...

Look NATIONALLY for SUCCESS MODELS.

i.e. CONTROLLED SUBSTANCE PROGRAMS in CA, MN

PREVENTION and HARM REDUCTION. TALK ABOUT NUMBER OF DEATHS / PEOPLE ARE DYING.

TIGHTEN THE SPIGOT! STOP CREATING ADDICTS!

TAX on PHARMA MONITORING and TRACKING. EDUCATION on more appropriate DISPENSING.

Can we SIMULATE potential SOLUTIONS?

What do we already KNOW?

WHAT IS THE TOTAL COST?



PREVENT THE SYSTEM FROM BREAKING.

WE NEED TO BE AWARE OF THE IMPACT OF THE PROBLEM!

WHO WILL HAVE TO SPEND MONEY ON THIS?

EDUCATION!

- PUBLIC HEALTH ADVERTISING.
- PRO. BONO SUPPORT.
- CRISIS FIRST RESPONDERS

QUANTIFY the ISSUE!

MAKE EPI PENS MORE AVAILABLE? TARGETED MESSAGING

RAISE AWARENESS but WHO ARE THE RIGHT PEOPLE? ...PROVIDERS?

TRAINING and EDUCATION for DOCTORS...



"This is a PUBLIC HEALTH CRISIS!"

This is NOT BUSINESS as USUAL!

LOOK AT METADATA...

SCOPE THE PROBLEM!

...and HOW CAN WE PULL TOGETHER DATA FROM DISPARATE SOURCES?

WHERE are the ARRESTS?

WHERE are the PRESCRIPTIONS being made?

...and HOW CAN WE TRACK MEDS BY BATCH/ID NUMBER.

CREATE ACTIONABLE INTELLIGENCE! ...through FUSION CENTERS.

HOW DO OUR SYSTEMS TOUCH THE SAME PEOPLE AT RISK?

IDENTIFY DATA ACCESS POINTS

WE NEED BETTER DATA!

HOW DO WE CONNECT THE STAKEHOLDERS?

Increased CAPACITY for CARE COORDINATION.

EXCHANGE THE DATA?

INFRASTRUCTURE and WORKFORCE...

Do we have WHAT WE NEED to ADDRESS THIS?

- MATERIALS
- PSAs
- WORKERS
- EDUCATION
- DATA



"WE'RE OVERWHELMED!"

We can't address this epidemic adequately with current resources!

PDMPs — "they take too much time!"

PDMP automatically queries the EHR?

MAKE PDMP PART of the HIE!

WHAT IS THE TRIGGER FOR INTERVENTION?

- RISK SCORE?
- DEVELOP METRICS.
- TARGETED MESSAGING and INTERVENTION for PEOPLE from HIGH-RISK GROUPS.

ABOUT MEDICAID EXPANSION...

"You can't TREAT PEOPLE and DELIVER SERVICES if you can't even get them in the door."

EXECUTIVE ORDERS?

...by MAYOR? ...by GOVERNOR?

- PEER INTERVENTIONS, BEHAVIORAL INTERVENTIONS, CLINICAL INTERVENTIONS.

INTEROPERABILITY JUNE 14, 2016 ANTHONY WEEKS