

AgeOptions + NowPow December 2020



Agenda

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- Nutrition Innovations Outcomes and Learnings
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AgeOptions Nutrition Innovations Initiative and Research





Setting the Stage



AgeOptions was one of five agencies awarded an Administration for Community Living (ACL) Nutrition Innovations' two-year grant in 2018; AgeOptions is the Suburban Area Agency on Aging in Cook County, IL

- Grants were given to projects to demonstrate and enhance the quality, effectiveness, and outcomes of nutrition services programs provided by the national aging services network
- Grants were given to identify innovative and promising practices that can be scaled across the country and to increase use of evidence-informed practices within nutrition programs
- Our proposal and grant utilizes a closed-loop online resource and referral platform and evaluates the benefit of having this information
- We are continuing our demonstration for at least one more year



Project Conception: What We Noticed



A disconnect exists between health care providers and community-based organizations regarding Social Determinants of Health including food insecurity

- When referrals for nutritional services are given, health care providers most often do not know the outcome of the referral;
 - Did the patient get linked with the service?
- Studies on closed-loop referral systems to-date have focused-on physicians referring to medical specialists, but not for community-based services
 - A closed loop is both acknowledging the referral and informing the referring entity of the outcome of the referral



Project Partners

- Project Coordination AgeOptions
- Health Care Providers
 - Chicagoland Healthcare and Hospital system primarily suburban Cook County location
 - Local offices of a national/regional healthcare clinics
 - Second Illinois regional hospital and healthcare system Added in 2020
- Technology for Closed Loop System
- Meal Resources
 - Array of our grantee Home Delivered Meal providers; Congregant Dining sites; food pantries;
 farmer's markets; during Pandemic added box meal deliveries.
- Education Regional organization
 - Telephone based webinar/discussion for education and addressing social isolation



NowPow Overview





What we do

Whole Person Care, Whole Communities

NowPow is a personalized community referral solution.

We make it easy to connect people to the right community resources so everyone can stay well, meet basic needs, manage with illness and care for others.





Why NowPow

Referral Quality Really Matters

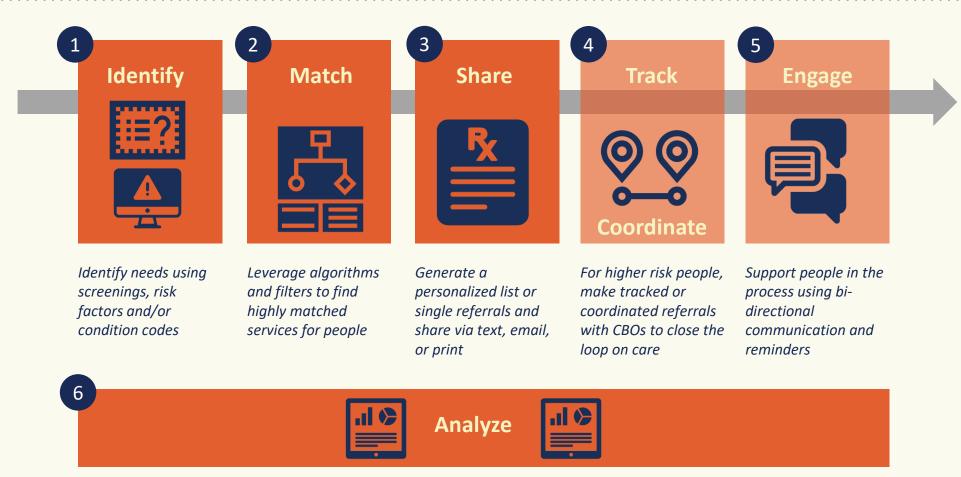
The risk of making a poor quality referral is high.

At NowPow, we know poor quality wastes time and erodes trust.

We relentlessly focus on three components: referral fit, referral efficiency and referral success to drive intervention outcomes.



How it works



We relentlessly focus on three components: referral fit, referral efficiency and referral success to drive intervention outcomes.



Nutrition Innovations NowPow Workflow



SDOH Screening: SDOH screening results in EHR sent to NowPow to map needs to services



Shared Referral Generation: Auto generation of personalized resource list to share with patients via text, email, print and sent back to EHR



Send Closed Loop Referrals: For individuals 60+ with identified food need, closed-loop referrals are sent to AgeOptions to follow up with patient directly



Outcomes Recorded: AgeOptions document referral milestones, notes, and overall service receipt and outcome success in NowPow for providers



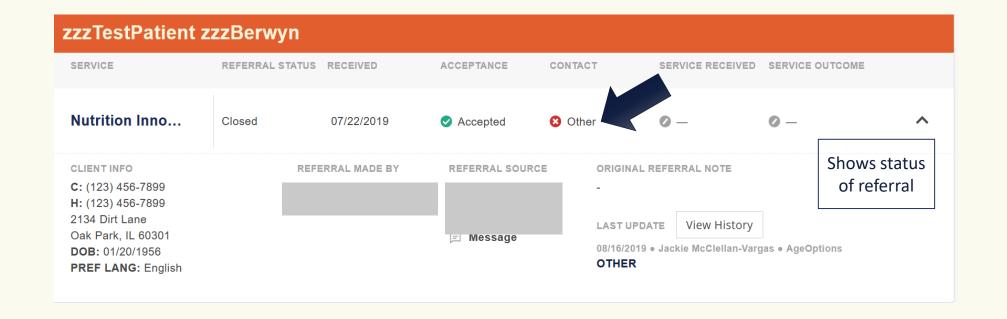
NowPow Demo





Opened Referral

Information is revealed with which to contact the patient/client.





Example of Status of Referral and Closing the Loop

ORIGINAL REFERRAL NOTE	
UPDATE	DETAILS
Successful Outcome	07/01/2020 • 12:54 pm • Paul Bennett • AgeOptions Patient reports receiving home delivered meals
Contacted	04/23/2020 • 1:58 pm • Paul Bennett • AgeOptions Spoke with pt. He appears eligible for home delivered meals and plan to refer to CNN Proviso (312) 207-5290 for meals and to Solutions for Care (708) 447-2448 for an assessment of eligibility
Note Added	04/15/2020 • 1:15 pm • Eileen Flores • AgeOptions Attempted to communicate with the patient. Left a voicemail and call back number to AgeOptions. We will send a letter to patient regarding the referral to receive home delivered meals.
Note Added	04/13/2020 • 2:22 pm • Eileen Flores • AgeOptions Attempted to communicate with the patient regarding the nutrition innovation referrals. Left a voicemail, and will try again the next business day to communicate with the patient.



Sample of NowPow Reports

Tracked Referral Overall Status

N2Mb5M

Report Run Date: 10/27/2020 | Report Date Period: 07/01/2018 - 10/25/2020

Assess Referrals Sent During Selected Date Period											
Referral Sender	Referral Receiver	Zip Code 🔻	Service Type ▼	Service Name	Referrals Sent In Period	Referrals Not Contacted	Referrals In Progress	Referrals Closed	Average Days To Close		
	AgeOptions	60301	Health education classes	Take Charge of Your Diabetes	5	0	1	4	96		
	AgeOptions	60301	Health education classes	Take Charge of Your Health	1	0	0	1	1		
	AgeOptions	60301	Nutrition counseling	Nutrition Innovations	60	0	14	46	54		
	AgeOptions	60301	Nutrition counseling	Nutrition Innovations	30	0	13	17	58		
	AgeOptions	60301	Nutrition counseling	Nutrition Innovations	12	0	5	7	72		
	AgeOptions	60301	Health education classes	Take Charge of Your Diabetes	16	0	5	11	85		
	AgeOptions	60301	Injury and fall prevention classes	Falls Prevention Program	1	0	1	0			
	AgeOptions	60301	Nutrition counseling	Nutrition Innovations	13	0	1	12	56		
	AgeOptions	60301	Nutrition counseling	Nutrition Innovations	3	0	0	3	6		
	AgeOptions	60301	Nutrition counseling	Nutrition Innovations	4	0	2	2	27		
1	AgeOptions	60301	Health education classes	Take Charge of Your Diabetes	1	0	0	1	7		



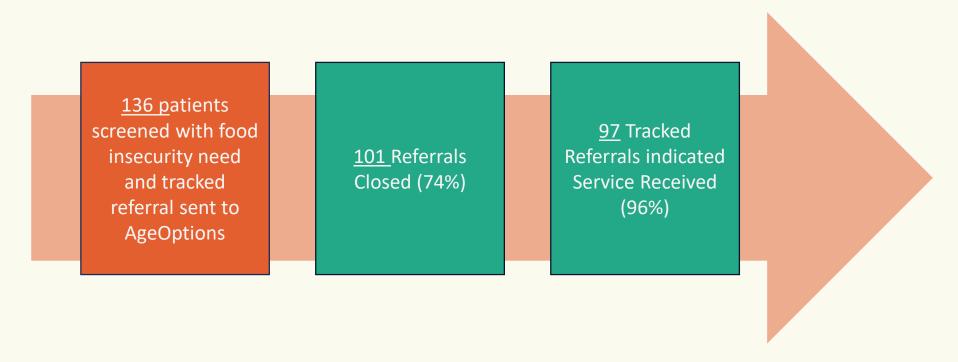
AgeOptions Nutrition Innovation Outcomes and Learnings





Nutrition Innovation Workflow

Intervention: patients screened and identified with food insecurity need 60+ in suburban Cook County, sent tracked referral to AgeOptions

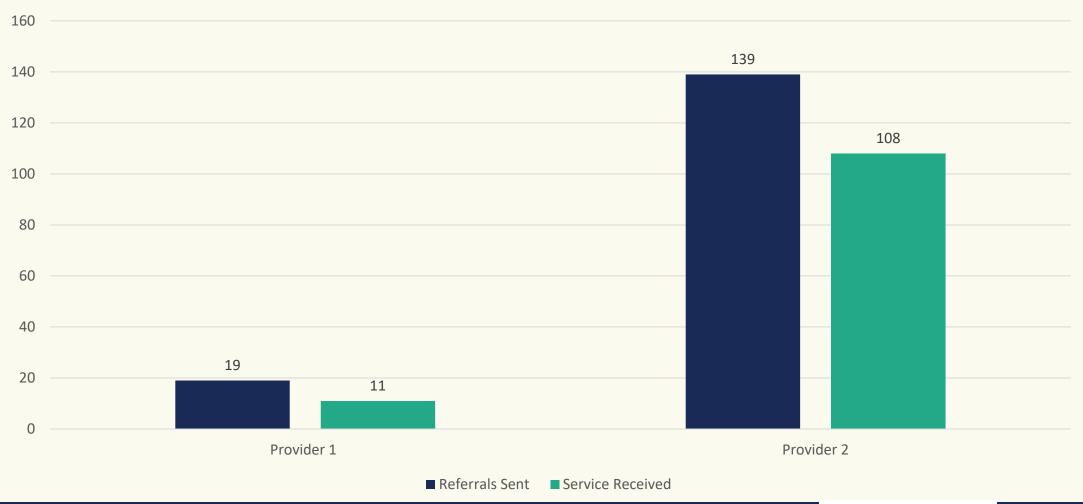


Referrals for Nutrition Innovations project only



Tracked Referrals Overview

Referrals breakdown for **all** services to AgeOptions







Qualitative Outcomes







- Healthcare entities want to keep people out of the hospital

 addressing root causes of illness with tracked referrals enable whole person care
- Providers satisfaction increase due to confirmation when need is addressed

- Patient gets referred to the right resources seamlessly
- Short- and long-term food needs are addressed
- Patient satisfaction increases due to wrap around needs being identified and connected

- High quality referrals are generated due to screening and eligibility flagging in tool
- High success rate due to curated partnerships with identified criteria

Lessons Learned



Referring entities like the ease of making an electronic referral; Referrals were made primarily by social workers



Referring entities like the information . . . As long as they read it! Continuing education is needed; staff change; sites benefit from a champion



Appears to have most value for primary care physician practices Reported less value for Emergency Room



Establishment of when one should be screened; More to learn regarding when and what to screen

- Healthcare entities envisioned this as part of their Medicare/Medicaid annual healthcare
 Assessment
- We added specific HDM/MOW criteria question to screening



Lessons Learned



Integration capabilities differed across providers and availability of technical resources



Need to educate referring entities on the cost/benefit of referral process and importance of addressing Social Determinants of Health



Closed-Loop referrals have value at several levels:

- Referring entity
- Information & Assistance Level
- Provider level
- Client level



We are still learning!



Questions?





Appendix





HealthCare Partnership Potential

- Healthcare entities have realized the importance of Social Determinants of Health and treatment of presenting illness is not enough. We need to address the causes of the illness. Food is medicine.
- Healthcare entities including hospitals, clinics and insurance companies want to keep people out of the hospital. Linkage with HCBS services should be viewed as helpful.
- Providing information on programs such as a patient's participation in home delivered meals should be helpful in the treatment of a presenting illness. It is hoped that just as the physician looks at a patient's A1-C levels that he/she also looks at the information provided to them showing that his/her patient is receiving home delivered meals.
- Healthcare entities and insurance companies are adding these online referral and closed-loop systems to their electronic medical platforms. There are several platforms to-date.
- From our experience, the best targeted groups for development may be primary care physician groups, dialysis centers and any outpatient setting where there is an on-going treatment relationship.



Dr. Stacy Lindau and her proof of concept, CommunityRx, pioneered the idea of generating self care "e-prescriptions"



- √ \$5.8M CMMI Innovation Award to University of Chicago from 2012-2015
- ✓ Demonstrated in 33 clinical sites on Chicago's South Side
- ✓ Connected with EHRs: Epic, GE Centricity, and NextGen
- ✓ Generated 350,000 HealtheRxs
- Medicare beneficiaries had significantly fewer inpatient stays and unplanned readmissions *
- ✓ Medicaid beneficiaries had significantly fewer ED visits *

^{*} Source: Third Annual Report Addendum, RTI, CMMI Third Party Evaluator, August 2017

