

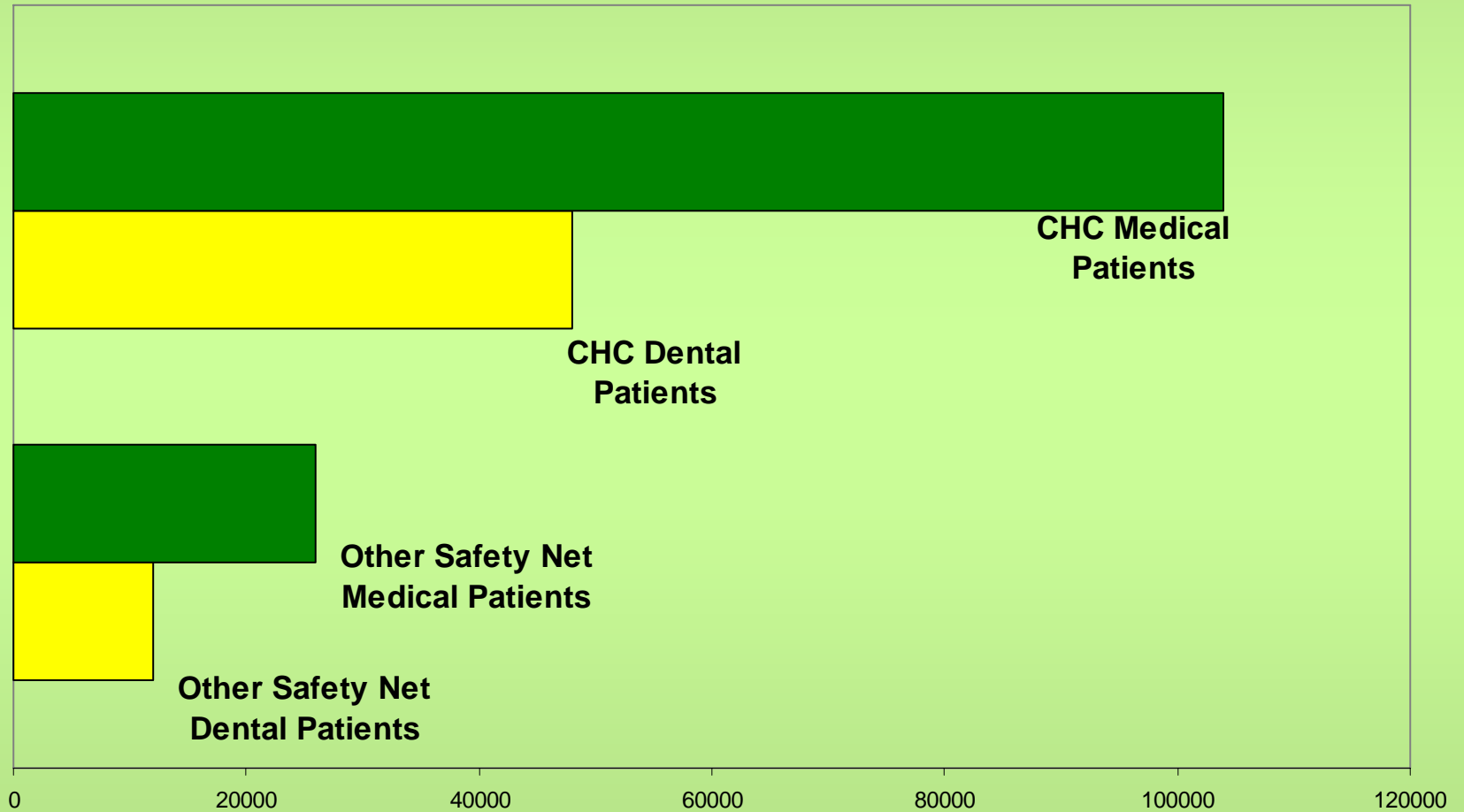
# CHCs in Seattle/King County

Thomas Trompeter, CEO  
Community Health Centers of King County  
Renton, Washington

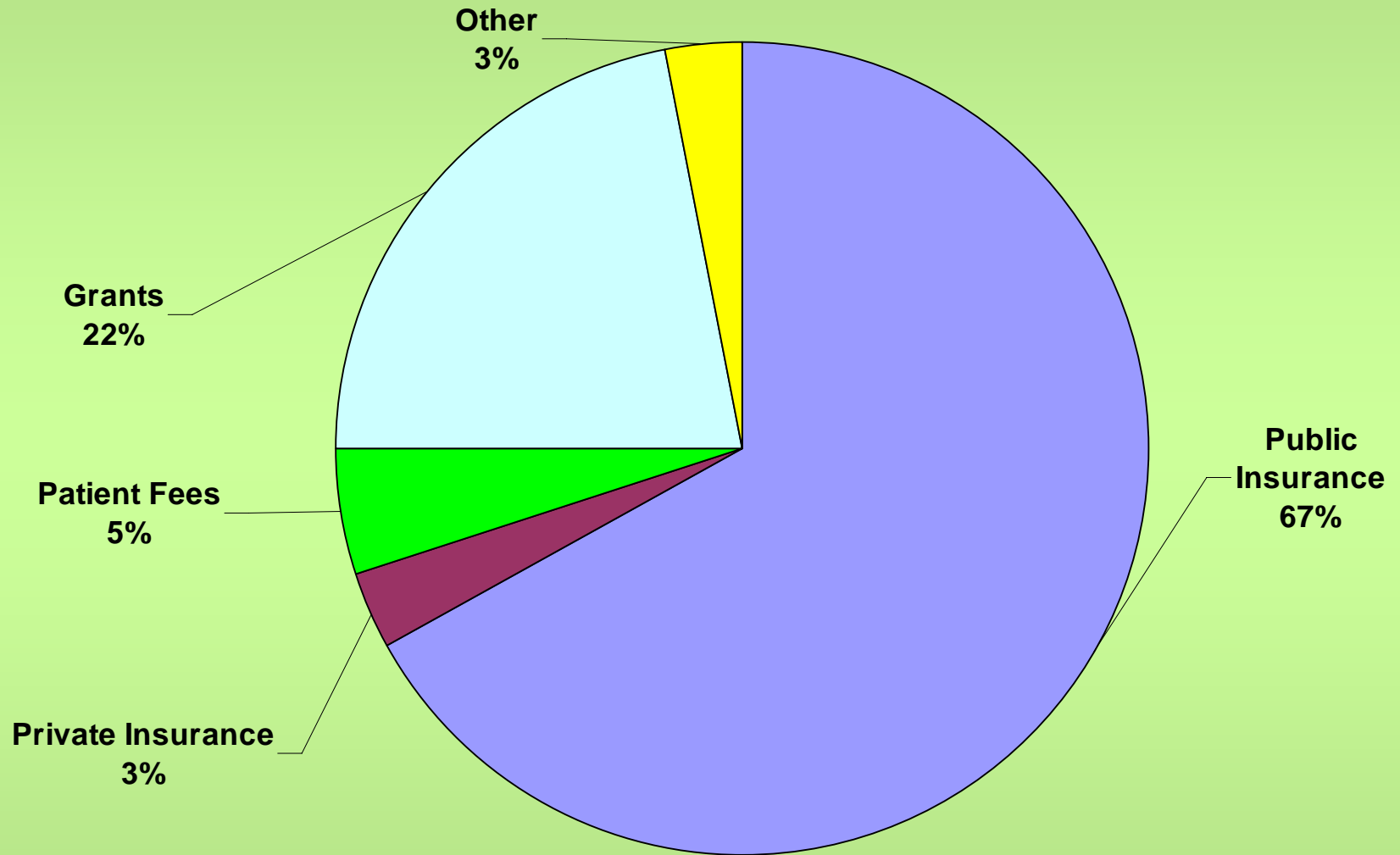
# The Local Safety Net

- CHCs : 6 organizations; 34 locations
- Other primary care: Public Health and 2 hospital-affiliated clinics
- Specialty Referral Network (in development)
- County Hospital (Harborview Medical Center)
- WAMI Residency Programs; AT Still School of Osteopathic Medicine

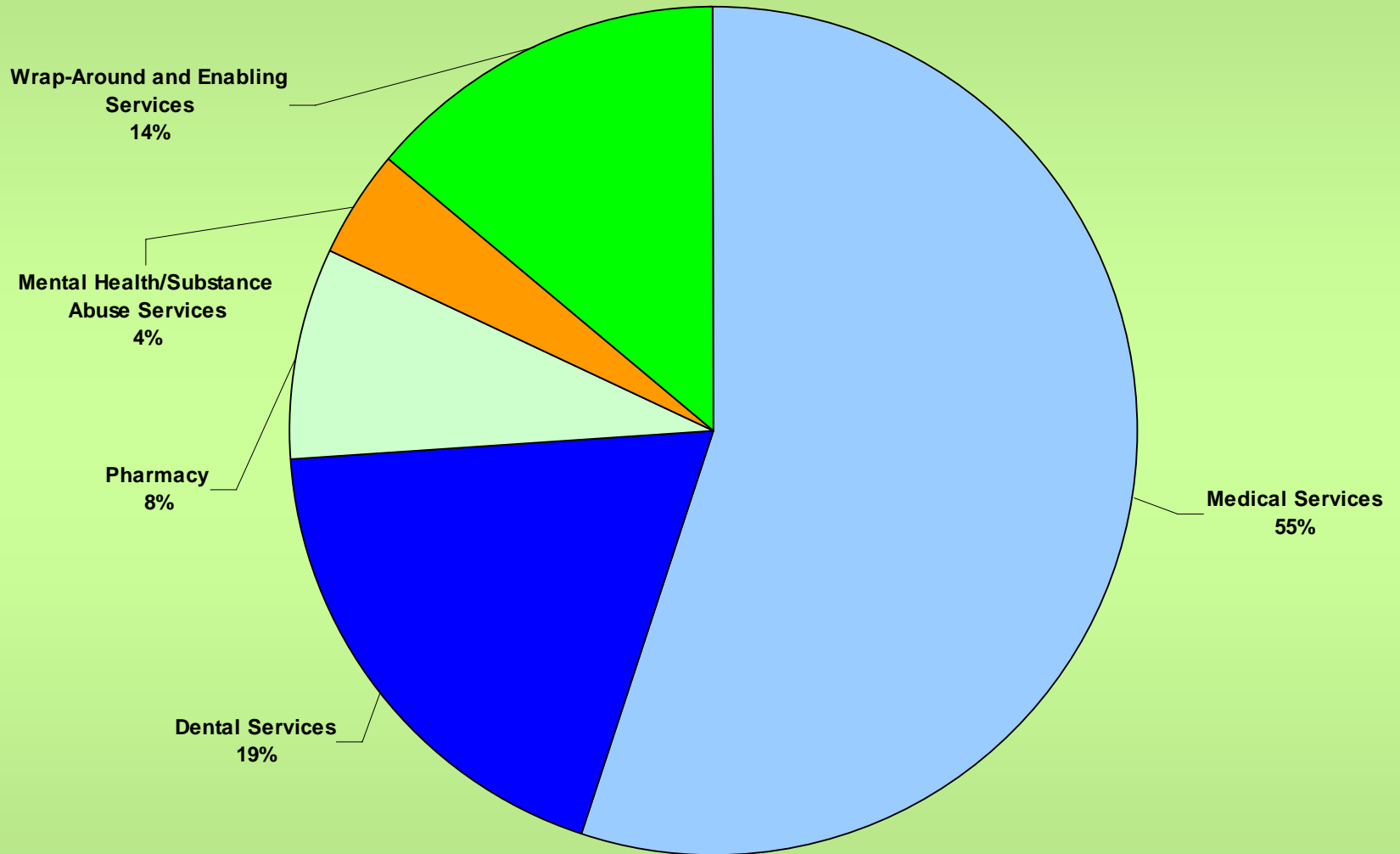
# SAFETY NET PATIENTS: CHCs and Other Safety Net Providers



# CHC Resources - Where the Money Comes From



# CHCs - Where The Resources Go



# Community Health Centers of King County



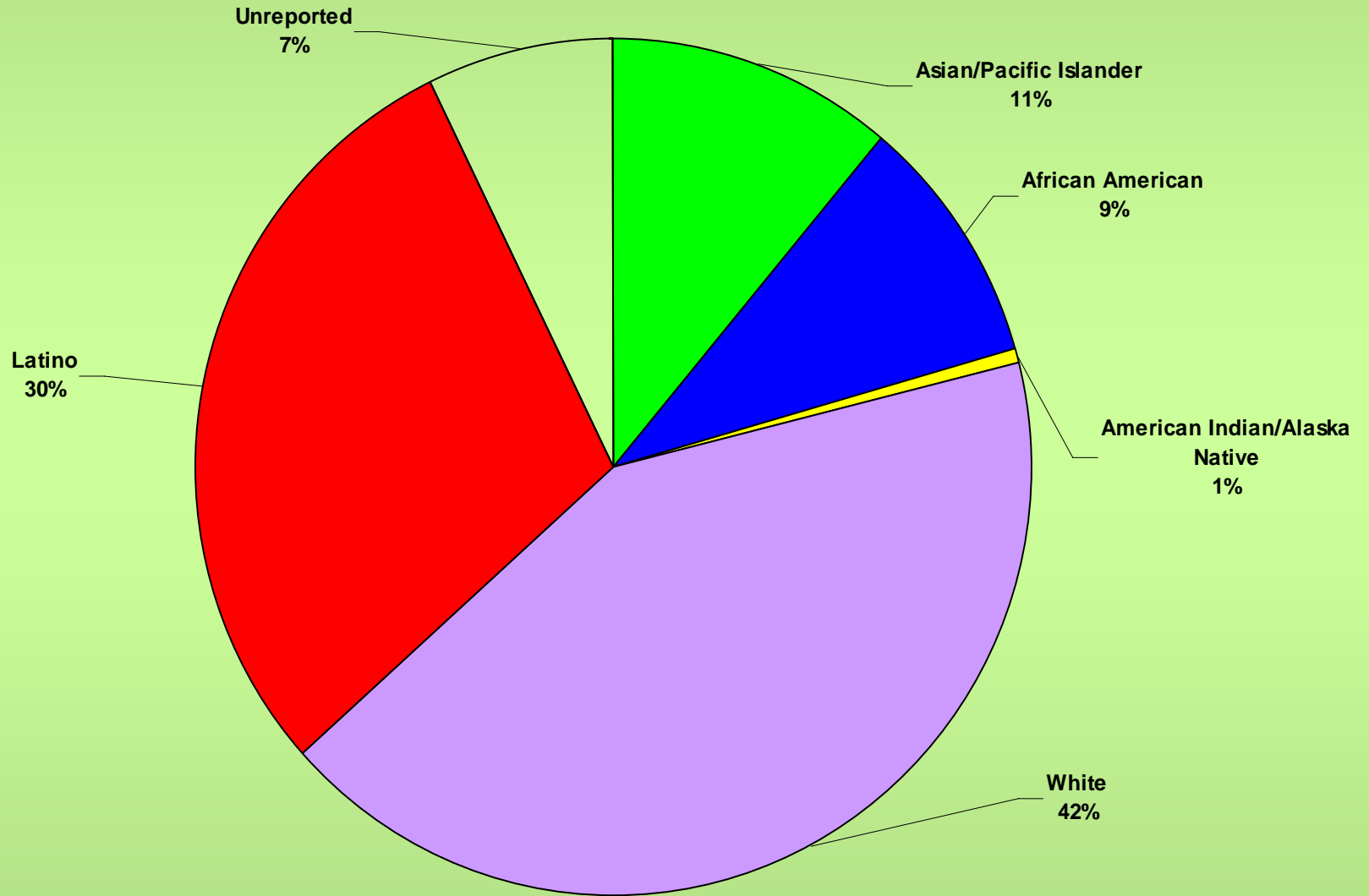
**A ADMINISTRATION**  
 955 Powell Ave. SW, Renton, WA 98057  
 Phone: 425-277-1311 • Fax: 425-277-1566

- DENTAL CENTERS**
- 1 Auburn Community Dental Center**  
 126 Auburn Ave., Ste 100, Auburn, WA 98002  
 Phone: 253-804-8713 • Fax: 253-804-8755
  - 2 Eastside Community Dental Center**  
 16345 NE 87th Street, #C2, Redmond, WA 98052  
 Phone: 425-883-8000 • Fax: 425-883-7580
  - 3 Kent Community Dental Center**  
 403 E. Meeker St., Ste 100, Kent, WA 98030-5904  
 Phone: 253-796-4071 • Fax: 253-796-4076
  - 4 Federal Way Community Dental Center**  
 33431 13th Pl. S., Federal Way, WA 98003  
 Phone: 253-874-7646 • Fax: 253-838-8364

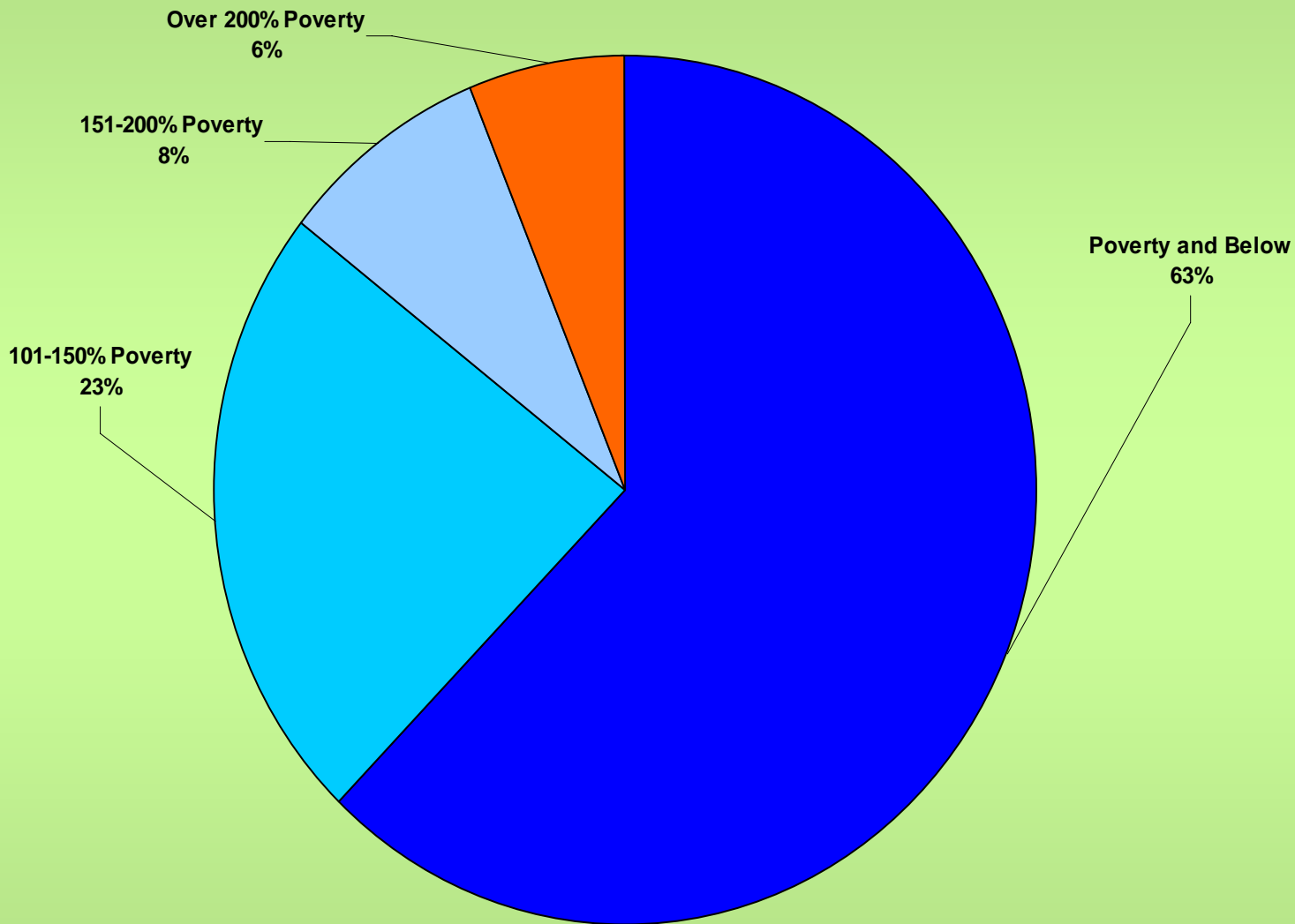
- MEDICAL CENTERS**
- 1 Auburn Community Health Center**  
 126 Auburn Ave., Suite 300, Auburn, WA 98002  
 Phone: 253-735-0166 • Fax: 253-833-8987
  - 2 Bothell-Kenmore Community Health Center**  
 6016 NE Bothell Way, Ste G, Kenmore, WA 98028  
 Phone: 425-486-0658 • Fax: 425-487-6761
  - 3 Eastside Community Health Center**  
 16215 NE 87th St., #B6, Redmond, WA 98052  
 Phone: 425-882-1697 • Fax: 425-885-4179
  - 4 Federal Way Community Health Center**  
 33431 13th Pl. S., Federal Way, WA 98003  
 Phone: 253-874-7634 • Fax: 253-874-7635
  - 5 Kent Community Health Center**  
 403 E. Meeker St., Suite 200, Kent, WA 98030-5904  
 Phone: 253-852-2866 • Fax: 253-852-3102
  - 6 Renton Community Health Center**  
 200 S. 2nd Street, Renton, WA 98055  
 Phone: 425-226-5536 • Fax: 425-226-0354
  - 7 SeaTac Community Health Center**  
 4040 S. 188th St., Suite 201, SeaTac, WA 98188  
 Phone: 206-277-7200 • Fax: 206-277-7202
  - 8 Tye Campus Health Center**  
 4424 S. 188th St., SeaTac, WA 98188  
 Phone: 206-444-7746 • Fax: 206-444-7748



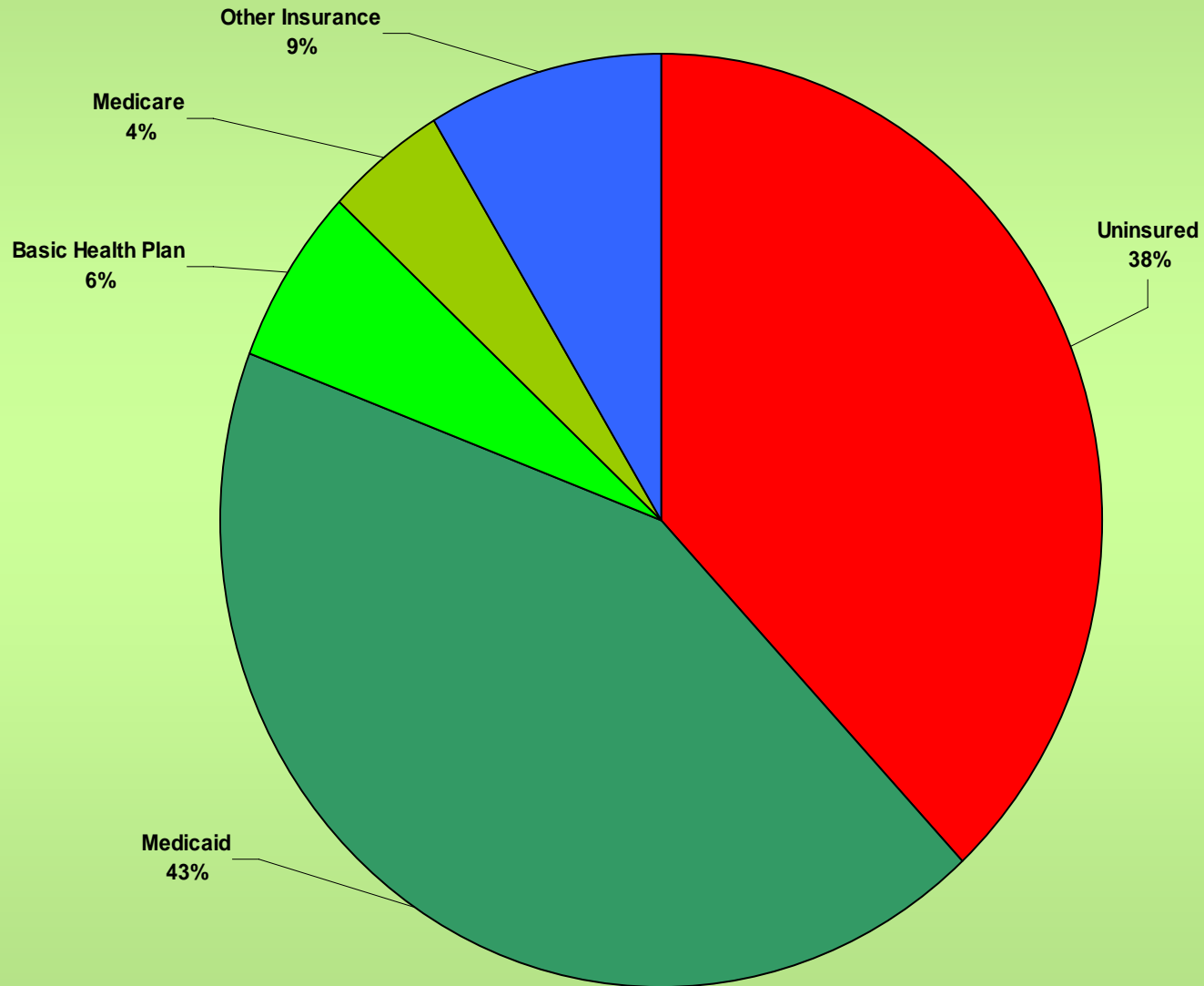
# CHCKC Patients by Race/Ethnicity



# CHCKC Patients by Poverty Level



# CHCKC Patients by Insurance



# THREE KEY TOPICS

- Managing Chronic Disease
- Integrating Behavioral and Medical Care
- Health Information Technology

*but on those notes:*

## **Total service integration = Health Care Home**

Medical Service

Dental Services

Complementary and Alternative Medicine Services

Behavioral Health Services

Chemical Dependency & Mental Health Services

Enabling Services

# Managing Chronic Disease

## Overarching Themes:

- Developing Partnerships with Patients
- Ensuring Necessary Systems Support
- Tracking Health Outcomes Improvement
- Benchmarking Organization Performance

(note: what started as improving care for patients with chronic conditions is now encompassing improving care for all patients)

# Managing Chronic Disease

## **The Planned Care Model:6 Elements**

### 1. Decision Support

Using evidence-based medicine; Creating mechanisms for more efficient/effective service delivery (e.g., standing orders for support staff)

### 2. Delivery System Design

Optimizing internal systems; Working in “Care Teams”

### 3. Organization of Internal Systems

Support at the highest levels; Key people in place; PDSAs; Goals and activities included in performance evaluations

# Managing Chronic Disease

## The Planned Care Model: 6 Elements

### 4. Use of Data

Patient Registries; Electronic Health Records

### 5. Community Outreach

Providers and patients

### 6. Self Management Support

Group Visits; Behavioral Health

# Managing Chronic Disease

## Particularly Helpful in Diabetes Management

- Higher percentage of patients with self management goals
- Lower HbA1c levels
- Better preventive service provision (foot exams, eye exams, aspirin therapy)

## Expanding to Other Chronic Conditions

- Asthma
- Depression
- Chronic Pain

# CHCKCs Behavioral Health Program:

## *What we do with patients*

### BH CONSULTATION

- PCP is primary customer
- Brief, problem-focused
- Simple interventions

### PSYCHOTHERAPY

- Patient is primary customer
- Broad focus, long-term
- Complex, multiple

# **Behavioral Health Consultant's Role**

- **Member of the primary care team**
  - Part of routine care, not specialty care
- **Provides consultative (not therapy) visits**
  - Brief visits, limited follow-up
  - Prompt feedback to PCP, w/ supportable plan
- **Immediate access, minimal barriers**
- **Emphasizes population management principles**
- **Focus on improving Quality of Life and Quality of Health Care**
  - Problem-focused, not diagnosis-focused

# BH Goal is to Help PCP

- Assist with high-utilizers
- Handle acute psych crises instead of PCP
- Ideas for non-Rx treatment options
- Help PCP manage time
- Reinforce, monitor, support PCP's tx plan
- 1:1 or classes or group visits

# BH Helps With

- **Chronic medical conditions**
- **Psychiatric disorders**
- **“Sub-threshold” conditions** (bereavement, DV, relationship problems)
- **Somatic complaints** (Headaches, insomnia, IBS)
- **Prevention** (Smoking cessation, exercise or diet change)
- **Difficult Patient Interactions** (talkative or disruptive patients)
- **Behavior Issues** (Adults or Kids)

# Patient Satisfaction

N=221; 86% English; 14% Spanish; 48% 1 BHC visit

- 94% felt BHC understands their problems
- 92% felt seeing BHC was helpful
- Felt BHC helped physical (64%) & mental (67%) health
- 71% of patients attending group visits found them helpful

# Provider Satisfaction

- 95% refer 5+ patients to BHC/month (67% refer 10+ patients).
- 100% are satisfied with BHC & availability.
- 92-100% feel job satisfaction is improved, are more likely to stay at CHCKC, & more patients seen on time because of the BH program.
- Feel better able to recognize (79%) and address (100%) mental/behavioral health concerns.

# Health Information Technology

- A never-ending “journey” that is as much (if not more) about re-designing work than it is about technology and a new tool
- Practice Technology Services Organization of Washington formed in 2005
- Implementation of Electronic Health Record and Practice Management System for 8 CHCs (now 6) representing approximately 500,000 medical visits per year
- Replacement of labor-intensive registries; Improve quality and of care and efficiency of service delivery.
- Data-based best practice modeling: evidence based medicine

# Federal Policy Issues

- Medicaid Cuts and Restrictions
- Preserving/Protecting Health Centers in Medicaid Reform Efforts – Federal and State
- Better Federal Grant Support for Existing CHCs
- Preservation of Successful CHC Model in Authorizing Legislation
- Reimbursement for Needed Services (enabling and wrap around services)
- Support for Health Professions Development
- Support for HIT and other safety net capital needs