Objectives

• Understand how AIHP is using Indian Health Services’ IPC model to bridge care coordination efforts throughout AZ

• ID and discuss lessons learned from a Fee for Service model & what it means for care coordination

• Discuss the concept of a HN/HC member, what is being done to meet their needs
What is AIHP?

Reaching across Arizona to provide comprehensive quality health care for those in need.
American Indian Reservations & ITU Health Facilities

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Arizona Regional Behavioral Health Authorities

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Example of HN/HC

- Break into workgroups
- Review the *scenario* and describe how you might approach care coordination for this individual
- Discuss *solutions* in larger group how you might approach care coordination
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The Four Strategic Areas of Focus

- Staff
- Relationships
- Data
- The Model

AHCCCS
Arizona Health Care Cost Containment System
AHCCCS Care Coordination Staff

- Assistant Director
- Tribal Health Care Coordinator
- Behavioral Health Coordinator
- Case Managers
- Care Coordination Support Staff
- Collaboration with UM Nurses and Techs

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Building and Maintaining Relationships - Outreach Visits

- IHS Areas (Navajo, Phoenix, Tucson)
- IHS/638 Facilities
- 4 RBHAs: on-going meetings, TRBHAs
- Tribally Funded Programs/Urban Programs
- Hospital systems

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Improving Information and Data Sharing Capabilities

• 100 + members identified for care coordination

• Customized Reports- Supporting work already being done
Tribal Care Coordination Model

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COMMUNITY

Health Care Organization

Self-Management Support
Delivery System Design
Clinical Information Systems
Decision Support

Safe Efficient Patient-Centered Effective Timely

Equitable

Activated Family and Community
Informed, Activated Patient

Prepared, Proactive Community Partners
Prepared, Proactive Care Team

Improved health and wellness for American Indian and Alaska Native individuals, families, and communities

AHCCCS
Arizona Health Care Cost Containment System

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Next Steps

Metrics and Evaluation

Track outcomes:

- Decreased ED use
- Reduce avoidable hospital re-admissions
- Improved medication compliance
- Increase timely BH utilization
- Improve member satisfaction

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Lessons Learned

- Members first mindset
- Be honest
- Care coordination v. case management
- Persistence and patience
Application

• How might you use what you learned in this session in your job?
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Questions?
Thank You!

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