

ABOUT THE WEITZMAN INSTITUTE

The Weitzman Institute (WI) is a research and innovation center operated by Community Health Center, Inc. in Middletown, Connecticut. CHCI is the largest Federally Qualified Health Center in Connecticut and a national leader in primary care practice redesign.

The Weitzman Institute provides a broad range of practical tools and creative solutions to health centers providers, and public health institutions and payers to address national public health concerns including the national epidemic of prescription opioid addiction and overdose and to overcome structural challenges in the current healthcare environment.

1. TRAINING AND EDUCATION

1.1. Project ECHO

1.2. Condition-Specific Online Learning Platform

1.2.1. PainNET (www.painNET.net)

1.2.2. LGBT Learning Network

1.2.3. Buprenorphine Page

1.2.4. HepC/HIV Page

1.2.5. Pediatric & Adolescent Behavioral Health Page

1.2.6. Complex Care Management Page

1.2.7. Quality Improvement Learning Network

2. TELEHEALTH CONSULTATIONS

2.1. eConsults (asynchronous virtual consultations PCP to specialist)

2.2. Telehealth visits (synchronous patient to specialist consultations)

3. PRACTICE REDESIGN, EVALUATION, AND MONITORING TOOLS

3.1. Pain Practice Improvement Collaborative

3.2. Practice Audit

3.3. Data analytics

1. TRAINING & EDUCATION

1.1 Project ECHO®: Project ECHO is a video telehealth intervention that joins primary care providers and specialists via teleconferencing to learn best practices in a specific field by discussing actual cases. WI has developed a national Project ECHO® focused on seven different conditions: HepC, HIV, Chronic Pain, Buprenorphine (opioid dependency), LGBT Health, Pediatric & Adolescent Behavioral Health, and Complex Care Management.

Since its inception in 2011, WI's Project ECHO has joined over 530 providers from 170 practices in 23 states with an expert, multidisciplinary team of specialists. Using case-based learning and brief, focused didactics on core topics, Project ECHO provides support and education to primary care providers, enabling them to more effectively manage complex cases and spread their knowledge and expertise to other providers in their practice. By participating regularly, presenting cases and listening to their colleagues' cases, providers gradually gain the expertise and experience needed to manage challenging and complex patients. Project ECHO serves as a "Force Multiplier", spreading knowledge and best practices broadly and efficiently.

1.2 PainNET: PainNET is an online learning community where providers with questions about evidence-based pain care and opioid prescribing can find answers from colleagues across the country. The PainNET community is comprised of pain specialists in various fields as well as primary care providers from across the country. PainNET encourages interprofessional collaboration through peer consults and discussion forums. It also contains a wealth of resources to support providers and practices, including indexed recordings of all past Pain ECHO® sessions, didactic content from ECHO® sessions, patient screening and assessment tools, evidence-based research articles, and a "Pain Care 101" learning module to introduce providers to the basics of effective pain care.

2 TELEHEALTH CONSULTATIONS

2.1 eConsults: eConsults are direct messages exchanged between primary care providers and specialists, using a secure, HIPAA-compliant, web-based platform. WI has developed a flexible platform that allows primary care providers to exchange patient case information with specialists and obtain a consult within no more than two days. eConsults provide an opportunity to obtain a prompt, detailed opinion from expert specialists to directly support the front line provider. The provider is notified within two days when the eConsult has been completed by a board certified specialist. The information can easily be downloaded and transferred to the patient's medical record.

2.2 Telehealth Visits: If an eConsult is not able to resolve a consult question the primary care provider can request a telehealth visit between the patient and the specialist. Scheduling specialist from WI will reach out to the provider's administrative staff and to the patient directly to schedule the visit. WI staff work

directly with individual practices to develop and set up the capacity to deliver such two-way video telehealth visits using tablets or computers with webcams. Telehealth visits are subject to different rules and regulations by state and WI staff will also work with interested practices to understand these rules and develop appropriate credentialing and billing processes to allow patients and providers to benefit from telehealth.

3. PRACTICE REDESIGN, EVALUATION, AND MONITORING TOOLS

3.1 Pain Practice Improvement Collaborative: The Pain Practice Improvement Collaborative (Pain PIC) is designed to help participating primary care teams implement evidence-based best practices for treatment of chronic pain. The Pain PIC utilizes multidisciplinary improvement teams formed from personnel at each participating site to test and implement practice workflow changes for care of patients with chronic pain. The Pain PIC provides personal coaching and feedback from a Practice Improvement Facilitator and allows participating teams collaborate with other peer organizations to implement best practices using established quality improvement tools and methodologies.

The Pain PIC uses a web-based course site, “Moodle”. This collaborative platform is used by participating practices to review training modules, participate in collaborative activities, post assignments, report on outcomes, and discuss improvement work at each site. The course incorporates materials from Weitzman Institute Quality Improvement trainings and presents them as a series of practice redesign modules hosted on Moodle that teach health centers how to implement the core elements of evidence-based pain care. The modules contain brief recorded didactics about each selected best practice, sample tools, measurement information, and guidance on how to implement these practices using change management tools. Participating practices commit to utilizing this content and reporting monthly on their site’s progress towards adopting six mandatory measurable objectives for pain care. Each improvement team receives targeted asynchronous feedback on each assignment submitted from the Quality Improvement course leader from the Weitzman Institute.

3.2 Practice Audits: WI staff offers individual practices with support to conduct audits of specific patient charts or provider practices to assist with risk management and to identify opportunities to reduce practice variation. WI will work with individual practices to establish an appropriate method for a pain specialty auditor to access and review medical records. The auditor will provide the requesting practice with a customized report identifying relevant findings and making specific suggestions as indicated.

3.3 Data analysis: WI staff have extensive expertise in evaluation, performance metrics, and data analysis regarding pain care and opioid prescribing. WI consultants are available to work with individual practices to create reports and evaluate pain care practices. These reports can be used to improve quality and to assess the impact of various strategies to improve pain care and opioid prescribing.



COST STRUCTURE

Primary care providers in California can conveniently access project ECHO either by:

1. Joining one of our existing Project ECHO clinics:

Practices can join the Project ECHO clinics listed below at anytime. Joining a session is simple; practices can be onboarded within a few days after an MOU is signed between the participating health center and CHCI's WI.

- 1.1. HepC
- 1.2. HIV
- 1.3. Chronic Pain
- 1.4. Buprenorphine – Opioid Dependency
- 1.5. Pediatric & Adolescent Behavioral Health
- 1.6. LGBT Health
- 1.7. Complex Care Management
- 1.8. Quality Improvement

Project ECHO Clinic	Frequency	Cost /Practice Site/Year
Hepatitis C/HIV Care	Weekly	\$6,000
Pain Care	Twice monthly	\$8,000
Opioid Addiction Treatment	Monthly	\$6,000
Pediatric/Adolescent Behavioral Health	Twice monthly	\$6,000
LGBT Health	Twice monthly	Free until 3/31/17
Complex Care Management (for RNs)	Twice monthly	\$6,000
Quality Improvement (5 session suite)	Monthly	TBA

2. Developing and hosting customized Project ECHO clinics.

2.1. Hosting one of our existing clinics specifically for CA practices

2.1.1. WI's Faculty or other

Project ECHO Clinic	Frequency	Developing & Hosting Cost/Year	Cost /Practice Site/Year (Total 40 practices)
Hepatitis C	Twice monthly	\$80,000	\$2,000
HIV Care	Twice Monthly	\$80,000	\$2,000
Pain Care with Suite of services using PainNET	Twice monthly	\$140,000	\$3,500
Opioid Addiction Treatment	Monthly	\$60,000	\$1,500

Pediatric/Adolescent Behavioral Health	Twice monthly	\$80,000	\$2,000
LGBT Health	Twice monthly		Free until 3/31/17
Complex Care Management (for RNs)	Twice monthly	\$70,000	\$1,750
Quality Improvement	Every three weeks		Free 5 sessions starting 4/27/16

2.2. Hosting the specialty of choice

2.2.1. Faculty from WI or of your choice

Project ECHO Clinic	Frequency	Developing & Hosting Cost/Year	Cost per Practice Site/Year (Total 40 practices)
Specialty of choice	Twice monthly	\$140,000	\$3,500

eConsultations

The WI has access to a large variety of board certified specialists. The cost for eConsultation is based on a per consult. Each completed eConsult costing \$85

Practice Improvement Collaborative:

Practice Improvement Collaborative	Developing & Hosting Cost/Year	Number of Practices in the Collaborative
Pain	\$150,000	20