









# Cross-Sector Collaboration: Finding the Win-Win



Pat Luedtke Senior Public Health Officer Chief Medical Officer Lane County Health & Human Services



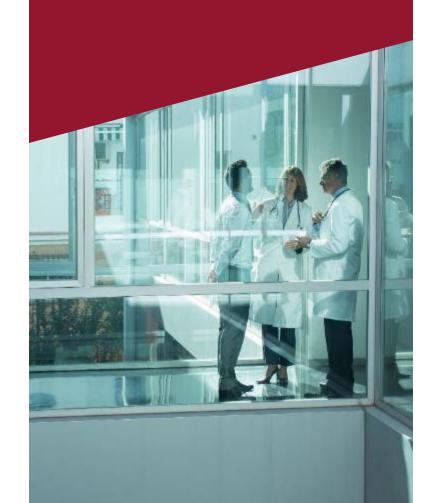
The presenter has **NO** financial disclosures that would be a potential conflict of interest with this presentation.



# How would you rate your organization's current level of cross-sector (primary care and public health) engagement?

- A. Very low
- B. Low
- C. Medium
- D. High
- E. Very high
- F. Other (please type in chat)

Primary Care and Public Health Enterprises



Examples: Short-Term and Long-Term Collaboration



Opportunities for Partnership







## The Landscape



- US health and wellness needs are enormous
- US healthcare spending is also enormous (\$4.9T in 2023)
- Public Health and clinical entities have overlapping responsibilities
- Public health and clinical entities have complementary data
- We each have more "collaboration power" than we realize

### **Collaboration Overview**



### **Primary Care**

- Physical health
- Behavioral health
- Oral health
- Case management

- Case management
- Social determinants
- Health advocacy
- Prevention and Health promotion
- Clinical preventive services

### **Public Health**

- Communicable disease control
- Environmental health
- Assessment and epidemiology
- Policy and planning

# How PH and PC "Think"



Public Health	Primary Care and Payers
Population level	Patient or member level
Programs and reportable diseases	Providers, panels, and problem lists
Assessment, policies, assurance	Workflow, quality metrics, safety
Elected officials and public input	Board of Directors, CMS, FTC

## Opportunities for Collaboration



 Where are the natural opportunities for interaction and collaboration between public health and clinical entities?

• How can we drive collaboration to the benefit of our communities and organizations?





### Collaboration Through Structure



### **Public Health**

HeRo: Health Roundtable

QUID: Quarterly Infectious Diseases Group

WATCH: What About The Community's Health?

### **Primary Care and Payers**

**Board of Directors** 

Committees: clinical, quality, finance, service line work groups

Teams: billing, grant, quality

Connections (e.g., PH and Medicaid) are even more important in a fiscally constrained environment



### Collaboration Through Structure



### What public health has that others may need:

 Data (reportable diseases, immunization registry, vital records), convening authority, mandated advisory committees, legal authorities (e.g., statutes and rules)

# What clinical practices and payers have that others may need:

 Clinical staff and expertise, financial resources, facilities and patients, contractual responsibilities (PFP), clinical data, IT and quality systems (EHRs), billing data



Examples:
Short-Term and
Long-Term
Collaboration



# In what area(s) are you currently conducting cross-sector collaboration between public health and primary care?

- A. Communicable disease
- B. Tobacco/Vaping
- C. Substance use
- D. Preparedness and response
- E. Maternal-child health
- F. Other (please share in chat)
- G. We are not currently engaged in this activity

### Project Example: Who Pneu?

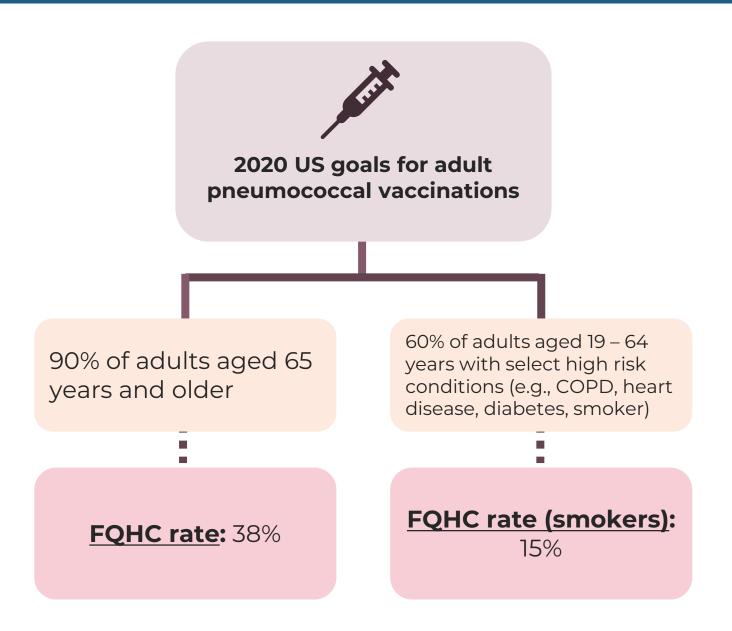




Patrick F. Luedtke MD, MPH Senior Public Health Officer Chief Medical Officer Luis Pimentel, MPH Community Health Analyst AKA: "The Man Who Pneu"

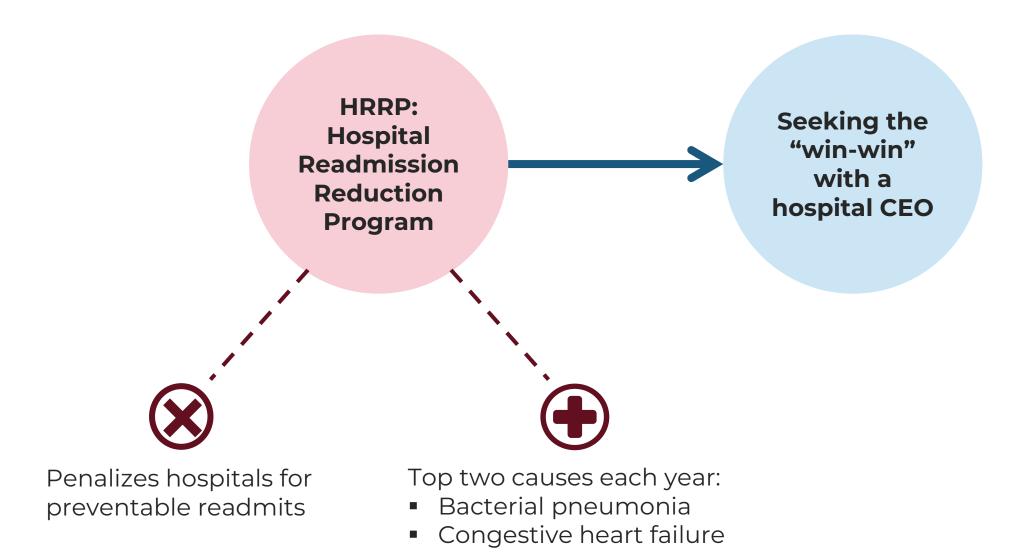
### Raising Adult Pneumococcal Vax Rate





## Project Background





# In the Beginning...





QUID's recognition of "adult vaccine challenges and opportunities"



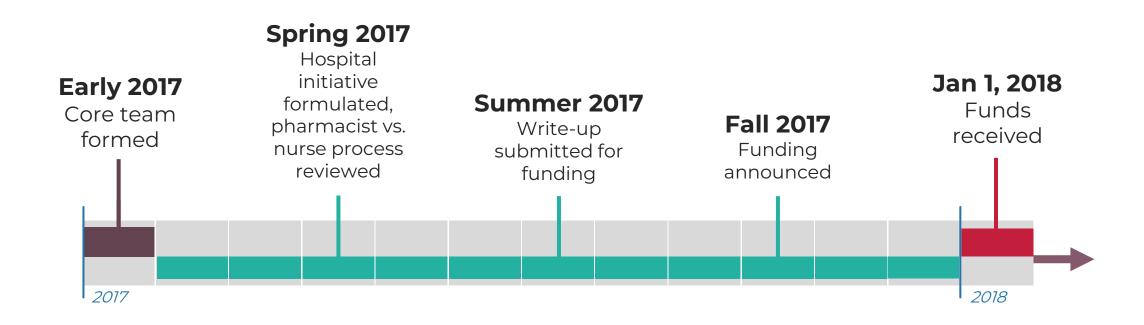
Formal FQHC pneumococcal assessment



Longstanding flu vaccine assessments (40%)

# Application Timeline: Later in the Beginning...





### Hospital Leadership





Rand O'Leary
Chief Executive
PeaceHealth Oregon



Robert Blake Chief Operating Officer PeaceHealth Oregon



Dr. Steven Wolinsky Chief Medical Officer PeaceHealth Oregon



Dan Kelly Chief Nursing Officer PeaceHealth Oregon



Mary Anne McMurren Chief Administrative Officer PeaceHealth Sacred Heart University District



Dr. David Duffey
VP Medical Director
PeaceHealth Medical Group



Dr. Robert Pelz Infectious Diseases Director PeaceHealth Medical Group

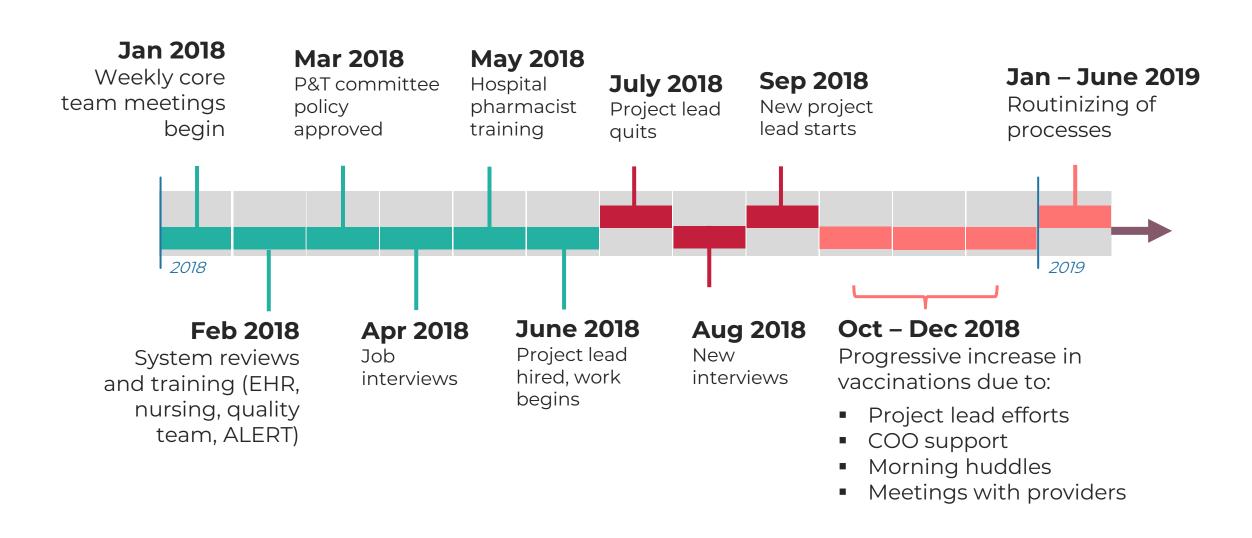
# Program Timeline: Moving to the Middle...





### Program Timeline: Later in the Middle...





### Program Timeline: In the End...



- **1,969** vaccines ordered by pharmacy
- **745** pneumococcal vaccines administered
- 16 patients vaccinated per week on average
- 38% vaccine administration rate
- From 58% to 70% increased pneumococcal vaccination rate of high-risk patients

The Goal: Healthy People 2020 goal calls for 90% of people 65 and older and 60% of highrisk individuals 19 to 64 to receive at least one pneumococcal vaccine.

### The Project:



Lane County Public Health and PeaceHealth Sacred Heart Medical Center partnered to pilot a hospital pneumococcal vaccination project. The aim of this project was to increase pneumococcal vaccination rates among high-risk adult hospitalized patients between July 2018 and June 2019. The ultimate goal was to improve the health of patients and the community, and reduce medical costs.



#### The Process:

 Screening: Lane County employee electronically screened patients for vaccine history/eligibility

Ordering: PeaceHealth pharmacy verified eligibility and ordered the vaccine to be administered prior to patient discharge

3. Administration: the vaccine was available for nursing staff to administer prior to patient discharge

4. Tracking: vaccination administration rates were tracked and shared weekly

### The Results, July 2018-June 2019:

Most common reasons adult patients are at high-risk of pneumococcal disease:



vaccines ordered by

pharmacy

745

pneumococcal vaccines

Age #2 Smoking #3 Diabetes #4 Alcoholism #5 Asthma

patients vaccinated

per week, on average

administration rate

After 12 months, the pneumococcal vaccination rate of high-risk patients increased from









### Successes



- ✓ Hospital support at the highest level
- ✓ OHA support for vaccine and ALERT training
- ✓ New relationship with hospital foundation
- ✓ New relationship with and understanding of hospital environment\*
- ✓ Improved preventive care access for at-risk adults

\*An unexpected positive outcome: hospital competition



# Challenges



- Staffing
- Lack of education and awareness of the vaccine
- Steering committee stability
- Capture and reinvest
- The clash and mash-up of two systems (PH PH)

### Hospital Leadership





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VP Medical Director
PeaceHealth Medical Group



Dr. Robert Pelz Infectious Diseases Director PeaceHealth Medical Group

# Finding a "Win - Win"





Focus on the problem, not the person



Focus on interests, not positions



Do your research



Give lots of different opinions



Use objective criteria

### Opportunities to Collaborate, State by State



#### Alaska Section of Epidemiology Infectious Diseases Reportable by LABORATORIES

#### IMMEDIATE REPORTING (PUBLIC HEALTH EMERGENCIES)

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Middle East Respiratory Syndrome (MERS) caronavirus

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To report a Public Health Emergency: Business Hours 907-269-8000 \* After Hours 800-478-0084

#### ROUTINE REPORTING (WITHIN 2 WORKING DAYS)

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#### Oregon Public Health Division Reporting for Laboratories | Oct. 2024

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#### **Notifiable Conditions** LABORATORIES

Notifiable to the local health jurisdiction (LHJ) of the patient's residence





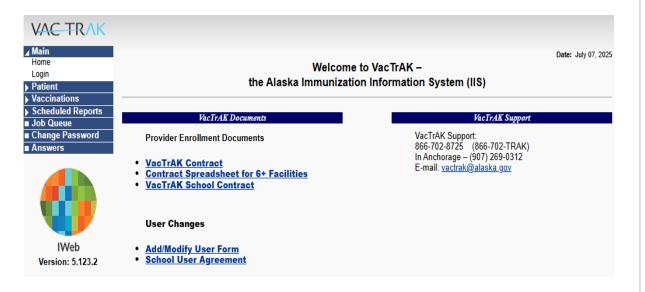


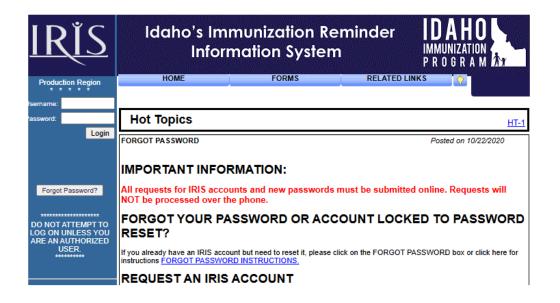
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### Opportunities to Collaborate, State by State











# Medicaid Incentive Metrics: Oregon 2025



### **2025 CCO Incentive Measures and Benchmarks**

#	Measure	NQF Number	Measure Description	Data Source
1	Childhood Immunization Status (Combo 3)	0038	Percentage of children that turned 2 years old during the measurement year and had the Dtap, IPV, MMR, HiB, HepB, VZV, and PCV vaccines by their second birthday.	Claims/ Immunization Registry
2	Immunizations for Adolescents (Combo 2)	1407	Percentage of adolescents that turned 13 years old during the measurement year and had the meningococcal, Tdap, and HPV vaccines by their 13 <sup>th</sup> birthday.	Claims/ Immunization Registry
3	Child and Adolescent Well-Care Visits (incentivized for children ages 3-6, kindergarten readiness)	1516	Percentage of children ages 3 to 6 that had one or more well-child visits with a PCP during the measurement year.	Claims/ Clinical Data
4	Prenatal & Postpartum Care – Postpartum Care	1518	Percentage of deliveries of live births between October 8 of the year prior to the measurement year and October 7 of the measurement year that had a postpartum visit on or between 7 and 84 days after delivery.	Claims/ Clinical Data

### **Possible collaborations:**

- Shared PSAs
- Shared pt. education
- IQIP
- Nurse home visiting
- L&D referrals

# Vax, Tobax, and Ca\$h: Oh My!



### **CCO Quality Incentive Funds Payout:**

	Vax metric	Vax + Tobacco metric	
Clinic #1	\$314,601	\$629,202	
Clinic # 2	\$306,865	\$613,731	
<b>Clinic # 3</b> \$237,693		\$475,386	
Clinic # 4	\$159,965	\$319,930	

Data source: Trilllium-HealthNet, CFO



### **Future Collaborations?**



Cannabis prevention: where dollars meet disease

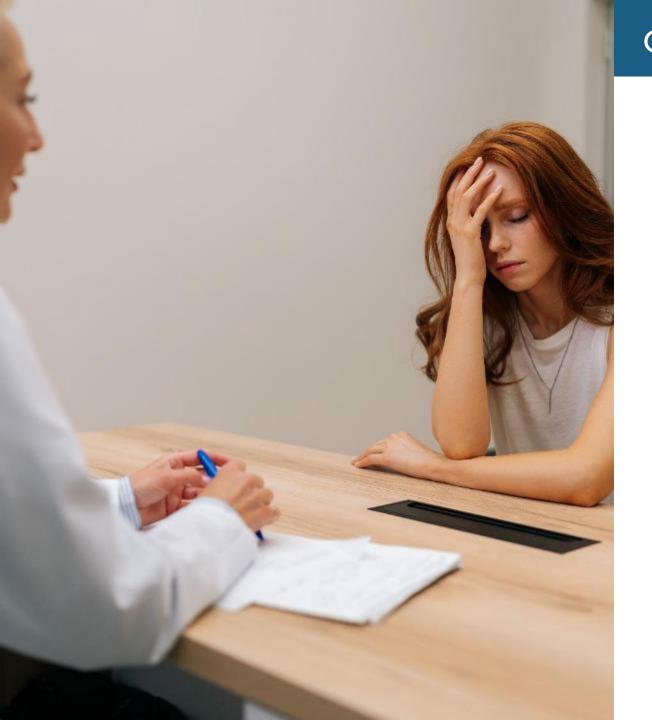


Vaccines (2025 - 26 influenza prevention)



**Tobacco and vaping** 





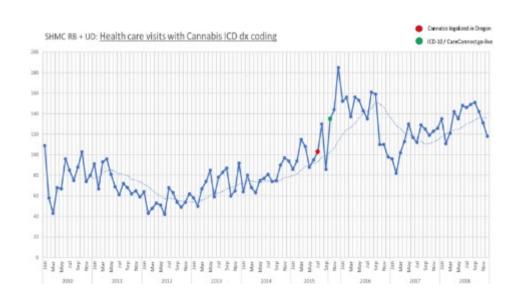
### Cannabis Impact: Hospitals



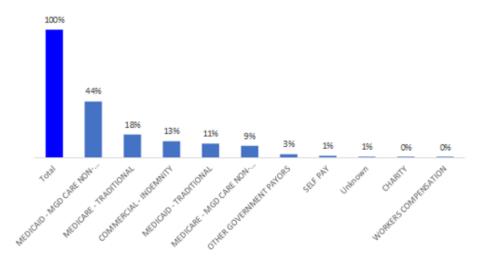
- Leadership at large local hospital brings issue to HeRO
- Recurring "divert status," even outside respiratory season
- Investigation: 350 to 400 bed days per month for cannabis dx
- Outreach to local public health for collaborative prevention work

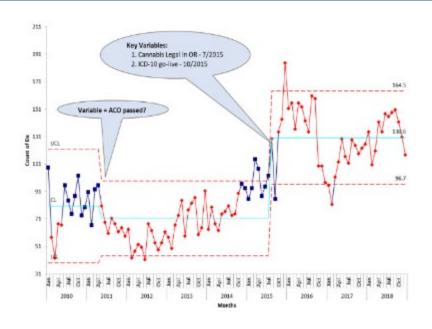
# Cannabis Impact By The Numbers



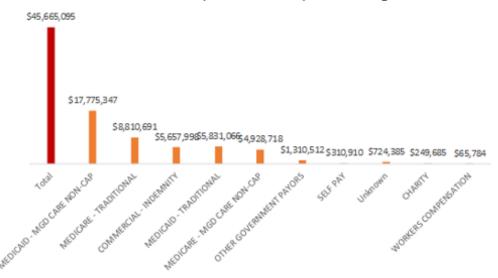


2018 Cannabis Dx by ICD10 F12...Distribution by Payor



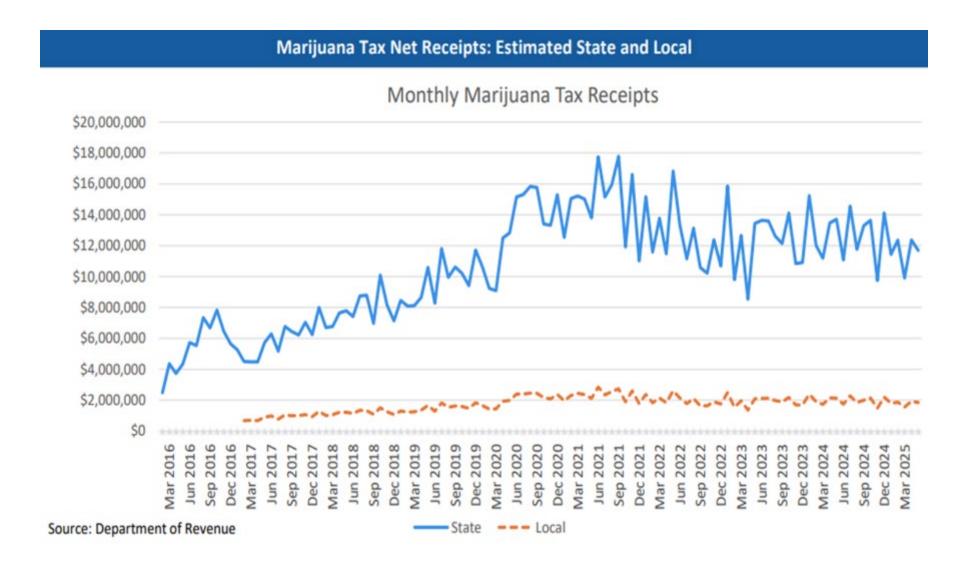


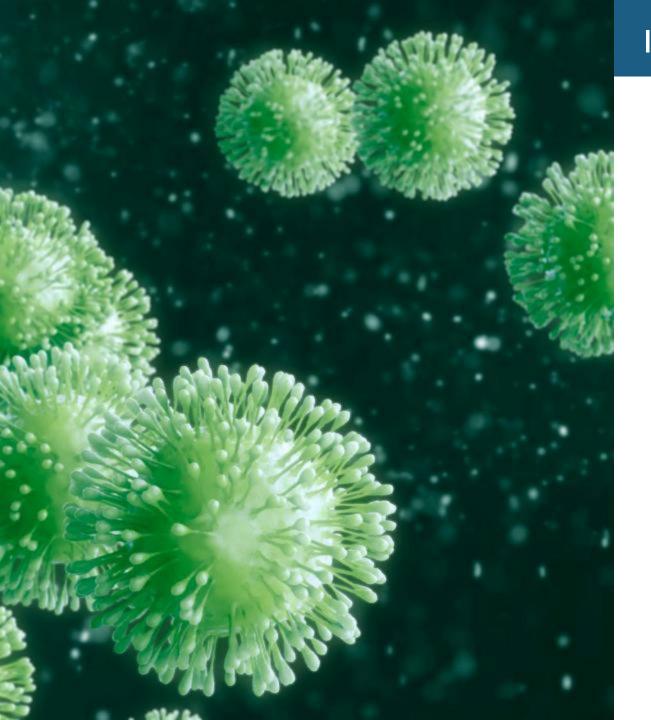
2018 Cannabis Dx by ICD10 F12...by Total Charges



### Leveraging Cannabis Tax Revenue: Oregon







### Influenza Prevention



- QUID and HeRo conversations
- Feared repeat of terrible 2024-2025 hospital Flu experience
- Changes to ACIP, Medicaid, and vax recommendations
- Hospital preparations for "miserable flu season"
- Plans: Joint media messaging, vax clinics, clinical outreach



### Tobacco and Vaping



- January 1, 2021: \$2 per pack tobacco tax increase in Oregon
- January 1, 2021: first ever tax on vaping products
- Collective advocacy: new tax revenue for Medicaid and public health
- Future efforts: vaping "flavor ban", assess/address new products (e.g., nicotine pouches), sport physicals integration

# Key Takeaways: Principles of Collaborative Project Design



- ✓ Set a realistic timeline
- ✓ Prepare for staffing challenges (diversify)
- ✓ Consider short and long-term funding sources
- ✓ Stay ahead of bureaucratic drag
- ✓ Find measurable outcomes
- ✓ Prepare for the naysayers
- ✓ Communicate concisely and often

### A Chat With Pat Luedtke





Betty Bekemeier



Pat Luedtke

### To ask a question, please click the Q&A icon in your Zoom toolbar!



# Resources & Further Reading



### **Health Affairs**

Strengthening Public Health through Collaboration with Primary Care

https://www.healthaffairs.org/content/forefront/strengthening-public-health-through-collaboration-primary-care-lessons-states

### Office of the US Surgeon General

National Prevention Strategy

https://www.surgeongeneral.gov/priorities/prevention/strategy/index.html

### **Centers for Disease Control and Prevention**

Primary Care and Public Health Initiative

https://www.cdc.gov/ophss/csels/dsepd/academic-partnerships/wip/primarycare.html

### deBeaumont Foundation

Practical Playbook: Public Health and Primary Care Together

http://www.debeaumont.org/practical-playbook/

# Resources & Further Reading



### Kindig, D., and Stoddart, G

What is population health? *American Journal of Public Health*, 93(3), 380-383. <a href="https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1447747/">https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1447747/</a>

### Office of Disease Prevention and Health Promotion

Health People 2030

https://odphp.health.gov/healthypeople

### **National Association of County and City Health Officials**

Public health 3.0 issue brief

https://www.naccho.org/uploads/downloadable-resources/NACCHO-PH-3.0-Issue-Brief-2016.pdf

### **National Association of County and City Health Officials**

2024 forces of change survey

https://www.naccho.org/resources/lhd-research/forces-of-change