

1 **Tulsa City-County Board of Health (TCCBH)**
2 **Oklahoma State Board of Health (OSBH)**
3 **Oklahoma City-County Board of Health (OCCBH)**

4
5 **North Regional Health and Wellness Center**
6 **5635 N. Martin Luther King, Jr. Blvd**
7 **Tulsa, OK 74126**

8
9 **Tuesday, October 7, 2014 1:00 p.m.**

10
11 Dr. Geraldine Ellison, Tulsa City-County Board of Health Chair; Dr. Stephen Cagle, Oklahoma City-
12 County Board of Health Chair; and Dr. Ronald Woodson, Oklahoma State Board of Health President called
13 the Tri-Board meeting to order on Tuesday, October 7, 2014 at 1:03 p.m. The final agenda was posted on
14 October 3, 2014 on respective Board websites as well the building entrance on October 3, 2014 at 1:00 p.m.

15
16 **ROLL CALL**

17 **TCCBH Members in Attendance:** Dr. Patrick Grogan, Dr. Geraldine Ellison, Ms. Nancy Keithline.

18
19 **OCCBH Members in Attendance:** Dr. Cagle, Dr. Hill, Scott Mitchell, Dr. Raskob and Dr. Gray.

20
21 **OSBH Members in Attendance:** Ronald Woodson, M.D., President; Martha Burger, M.B.A., Vice-President;
22 Charles W. Grim, D.D.S.; Timothy E. Starkey, M.B.A.; Jenny Alexopoulos, D.O.

23 **Absent:** Cris Hart-Wolfe, Secretary-Treasurer; R. Murali Krishna, M.D.; Terry Gerard, D.O.; Robert S. Stewart,
24 M.D.

25
26 **OCCHD Staff in Attendance:** Gary Cox, Bob Jamison, Myron Coleman, Tony Miller, Alicia Meadows,
27 Jackie Shawnee, Shannon Welch, Laura Holmes, Phil Maytubby, John Gogets, Dave Cox, and Patrick
28 McGough.

29
30 **OSDH Staff in Attendance:** Terry Cline, Commissioner; Henry F. Hartsell, Deputy Commissioner, Protective
31 Health Services; Steve Ronck, Deputy Commissioner, Community and Family Health Services; Toni Frioux,
32 Deputy Commissioner, Prevention and Preparedness Services; Mark Newman, Director of Office of State and
33 Federal Policy; Don Maisch, Office of General Counsel; Jay Holland, Director of Internal Audit and Office of
34 Accountability Systems; Tony Sellars, Office of Communications; Melissa Lange, Chief Financial Officer;
35 Kathy Aebischer, Business Officer; VaLauna Grissom, Secretary to the State Board of Health; Janice Hiner, Sr.
36 Advisor to the Commissioner of Health.

37
38 **Visitors in attendance:** (see sign in sheet)

39
40 **Opening Remarks**

41 Dr. Ellison welcomed everyone to the 3rd Annual Tri-Board meeting held this year at the Tulsa City-
42 County Health Department's North Regional Health and Wellness Center. Dr. Ellison expressed the
43 importance of the meeting including efforts to improve the overall health status in the State. She also
44 discussed the importance of local health departments (as mentioned by the media) and thanked the staff
45 for their efforts.

46 Dr. Cagle, Chair, Oklahoma City-County Board of Health (OCCBH), thanked the staff for their work.

1
2 Dr. Woodson, President, Oklahoma State Board of Health (OSBH) thanked the Tulsa Health Department
3 for hosting and sharing the new Wellness facility. The annual Tri-Board meeting is a great opportunity
4 for the three boards to collaborate.

5
6 **REVIEW OF MINUTES – TCCBH**

7 Dr. Ellison requested the agenda be amended to allow for approval of the September 17, 2014 minutes of the
8 OCCBH Board meeting as presented during the Chair's Report.

9
10 **AYE: Unanimous consent.**

11
12 **REVIEW OF MINUTES – OSBH**

13 Dr. Woodson directed attention to the minutes of the July 8, 2014 regular meeting and the August 15-17, 2014
14 Annual Board of Health Retreat for review and approval.

15
16 **Ms. Burger moved Board approval of the July 8, 2014 meeting minutes as presented. Second Mr.**
17 **Starkey. Motion carried.**

18
19 **AYE: Alexopulos, Burger, Grim, Starkey, Woodson**

20 **ABSENT: Gerard, Krishna, Stewart, Wolfe**

21
22 **Ms. Burger moved Board approval of the August 15-17, 2014 meeting minutes as presented. Second Dr.**
23 **Grim. Motion carried.**

24
25 **AYE: Alexopulos, Burger, Grim, Starkey, Woodson**

26 **ABSENT: Gerard, Krishna, Stewart, Wolfe**

27
28 **REVIEW OF MINUTES – OCCBH**

29 Dr. Cagle entertained a motion to approve the September 16, 2014 meeting minutes. Dr. Hill made a motion
30 to approve the September 16, 2014 meeting minutes. Scott Mitchell seconded this motion. Vote taken: Dr.
31 Cagle, Dr. Hill, Scott Mitchell, Dr. Raskob and Dr. Gray. Motion carried.

32
33 **PUBLIC HEALTH ENTERPRISE – DATA INTEGRATION, EHR'S AND MYHEALTH**

34 David C. Kendrick, M.D., M.P.H, Chief Executive Officer for MyHealth Access Network
35 *See Attachment A.*

36
37 **STRATEGIC PLAN UPDATES / OKLAHOMA HEALTH IMPROVEMENT PLAN**

38 Terry Cline, Ph.D. (OSDH), Gary Cox, J.D. (OCCHD), Bruce Dart, Ph.D. (THD)
39 *See Attachments B, C, and D.*

40
41 Dr. Cline presented an update to the Oklahoma Health Improvement Plan (OHIP) from a state level
42 perspective. He addressed success and challenged to date for the plan's three flagship issues: tobacco:
43 children's health; and obesity. OHIP is currently in the process of being updated and the updated plan is
44 scheduled to be published in January of 2015. Dr. Cline shared the results from the statewide community
45 chats which sought to obtain input from communities regarding challenges and barriers to achieving
46 health. Oklahoma intends to meet that challenge through the engagement of private and public

1 partnerships and through the involvement of communities in shaping positive health strategies. Priorities
2 identified in OHIP when accomplished, will address key risk factors contributing to negative health
3 outcomes. The plan also addresses individual conditions, health behaviors and key populations through a
4 focus on flagship issues targeting tobacco, obesity, children's health and behavioral health. Moving
5 forward, there are more exciting public private partnerships seeking to address OHIP recommendations,
6 such as the Parks Passport Initiative, Fitnessgram, the Governor's Get Fit Challenge, NGA Policy
7 Academy, and the State Innovation Model Grant.

8
9 Gary Cox presented on Robert Wood Johnson's RESOLVE report, which makes recommendations for public
10 health agencies to prepare for the future. He spoke on OCCHD's efforts to reallocate resources to focus areas
11 that will result in shift towards wellness for the community. This includes focusing on the importance of big
12 data, forming both traditional and non-traditional partnerships, strengthening internal management systems,
13 and delivering and evaluating promising and best practice programs and interventions. For more information
14 on this see the attached document.

15
16 Dr. Dart reviewed the original strategic plan for Tulsa County and how it translates to reality;
17 administration and the Board narrowed the original plan down from 128 measures to 22. He also
18 reviewed the strategic plan statistics as of June 30, 2014 which include 100% completion of
19 product/process producing objectives and 81% overall completion; the Department is on target to
20 complete all objectives by June 30, 2015. He also reviewed the intranet dashboard which provides real
21 time data and updates on progress.

22
23 Dr. Ellison requested the agenda be amended to allow Kimberly Schutz and Tina Burdett to address the Tri-
24 Board prior to Policy Agenda Discussion.

25
26 **AYE: Unanimous consent.**

27
28 **PUBLIC / PRIVATE PARTNERSHIPS TO IMPROVE ADOLESCENT HEALTH**

29 Kimberly Schutz, J.D., Campaign to Prevent Teen Pregnancy; Tina Burdett, Kirkpatrick Foundation
30 *See Attachments E and F.*

31
32 Kimberly Shutz, Campaign to Prevent Teen Pregnancy, provided an overview on their partnership with
33 the Tulsa Health Department in support of OHIP goals around Children's Health. The Campaign seeks to
34 address Oklahoma's high teen birth rate (2nd highest in nation) through education, outreach, and improved
35 access to healthcare for young people.

36
37 Tina Burdett, Kirkpatrick Foundation, spoke about the important partnership that the Foundation has with
38 the Wellness Now Coalition Adolescent Health workgroup. She shared data for OK County teen births
39 and stressed the importance of the need for more comprehensive, up to date data to better evaluate efforts.
40 For more information on this see the attached document.

41
42 The presentation concluded.

43
44 **POLICY AGENDA DISCUSSION**

45 Mark Newman, Ph.D. (OSDH), Bruce Dart, Ph.D. (THD)

1 Dr. Newman provided historical context for the policy agenda discussion, highlighting policy topics
2 including 1) smoking in the work place and 2) texting while driving. He reminded the Tri-Board of the
3 recent policy adopted to prohibit the sale of vapor tobacco products to minors as well as the lack of policy
4 regarding texting while driving (current law is framed as *distracted or impaired driver*). Dr. Newman
5 expressed the importance of partnerships among community agencies to adopt policies for these issues.
6

7 Dr. Dart shared the importance of the power that exists among all boards (collectively). He shared
8 information about repealing preemption as relates to smoking in the work place. Discussions are needed
9 among all board members about which questions will garner greater public response among voters;
10 consensus - statewide ban on smoking in the work place. Dr. Ellison queried Tri-Board support for the
11 Adolescent Health/Teen Pregnancy funding. The Tri-Board responded with unanimous consent. The
12 next steps include proposed Board of Health executive committee meetings (on a regular basis) to discuss
13 initiatives that affect the entire state.
14

15 The presentation concluded.
16

17 **CHAIRMAN'S REPORT – TCCBH**

18 Dr. Ellison shared that the 2013-2014 Annual Report for TCCHD has been released. The branding and
19 marketing efforts of the Department have been recognized nationally prompting a visit from the
20 University of Kansas and the Lawrence-Douglas County Health Department to discuss best practices in
21 Marketing. The Department is participating in planning efforts for the ACA fall enrollment period. An
22 Immediate Assembly Drill is scheduled for November and will test the activation of public health
23 emergency operations and demonstrate the ability to rapidly assemble public health staff to fulfill lead
24 roles under the Incident Command System structure. The 3rd Annual *Food Glorious Food Day* is
25 scheduled for October 11 at the North Regional Center. The event, a partnership with several area
26 agencies brings awareness to healthy eating and food insecurities; it also includes activities and
27 demonstrations for the whole family
28

29 **CHAIRMAN'S REPORT – OCCBH**

30 Dr. Cagle shared his enthusiasm with regards to having quarterly meetings between the OKC, Tulsa and State
31 Boards of Health. He indicated this would be a good time to discuss the opportunity to collaboratively
32 implement an Electronic Health Record.
33

34 **PRESIDENT'S REPORT – OSBH**

35 In Dr. Woodson's absence, Martha Burger, thanked TCCHD for hosting the 2014 Annual Tri-Board
36 meeting. Due to lack of a sustained quorum, the OSBH will approve 2015 Board of Health meeting dates
37 and locations during the December Board meeting. She encouraged Board members to complete the post
38 retreat survey prior to October 13th.
39


40 **NEW BUSINESS**

41 No new business.
42

43 **ADJOURNMENT**

44 The meeting adjourned by unanimous consent at 3:17 p.m.
45

46 Approved

1
2 
3 Ronald Woodson,
4 President, Oklahoma State Board of Health
5 December 9, 2014

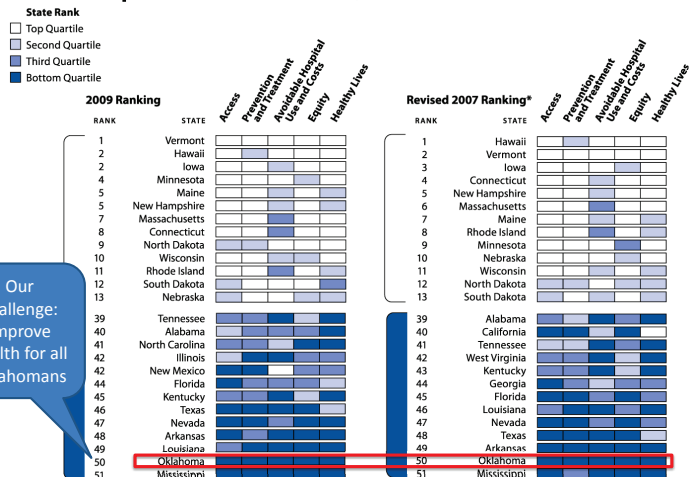
Public Health Enterprise: Data Integration, EHR's and MyHealth

A Proposal for
Infrastructure to support Public Health improvement

David Kendrick, MD, MPH



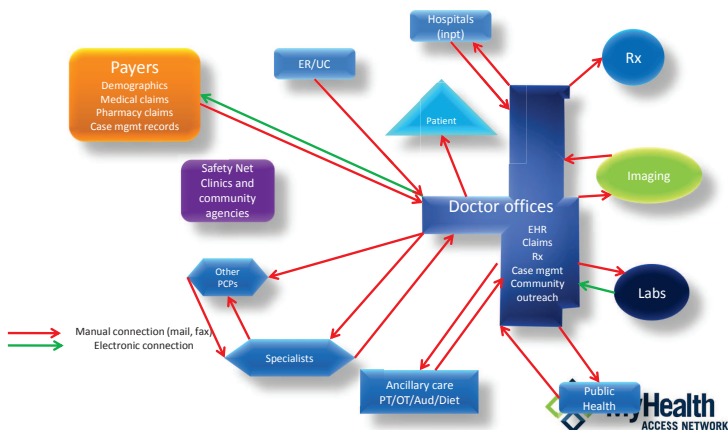
States in Top and Bottom Quartiles, 2009 and 2007



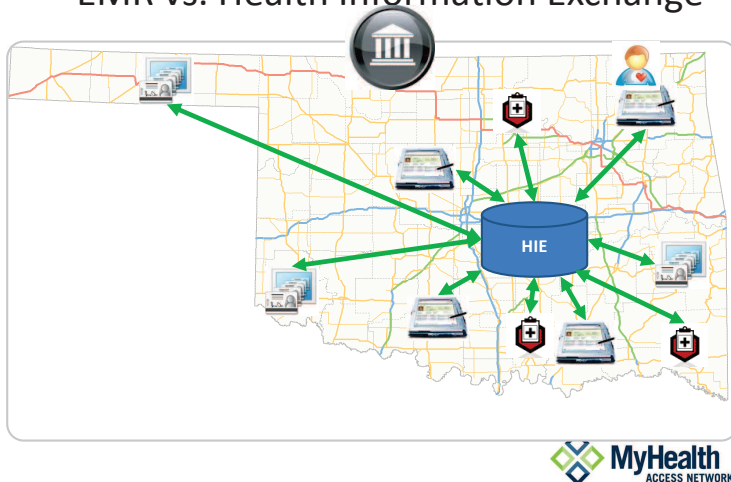
Our challenge: Improve health for all Oklahomans

ACCESS NETWORK

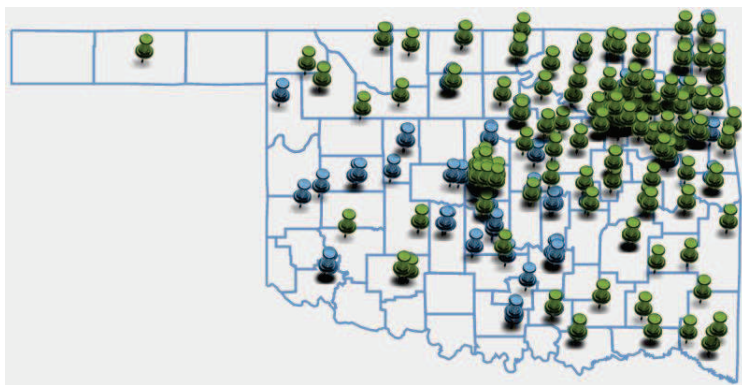
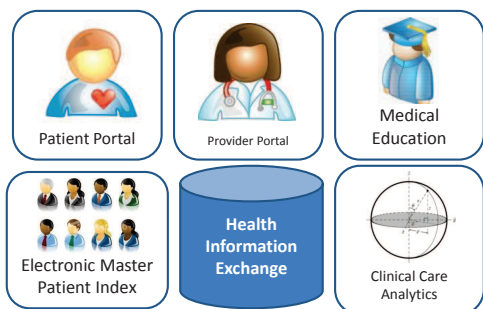
2008



EMR vs. Health Information Exchange



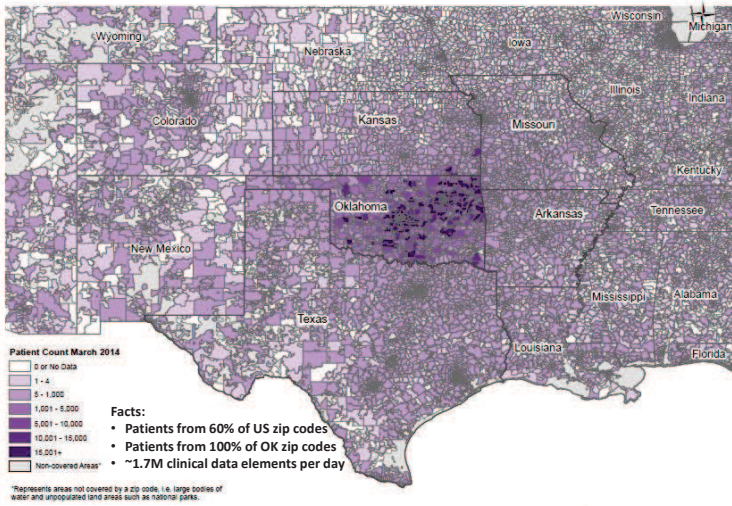
Anatomy of MyHealth HIE



523 Combined Participant locations as of 3/31/2014



Patients in MyHealth Access network by home zip code



MyHealth Participants include . . .

- Physicians
- Hospitals
- Nursing Homes
- LTPACs
- SNFs
- Community agencies
- Community Mental Health Centers
- First responders
- Medical societies
- State Department of Health
- City-County Health Departments
- Commercial Payers
- Employers
- Pharmacies
- Home health
- Hospices
- Academic centers
- Blood Institutes
- Optometrists
- Tribal Health Systems
- Rural Health Networks
- OHCA



Network Participants

246

12 & 12, Inc.	Cherokee Nation Health System	Epic Medical Center
Advanced Eye Care Associates	Chickasaw Nation Health System	Ernie's Pharmacy and Wellness Center
Allen Pharmacy, Inc.	Chickasha Clinic Pharmacy, LLC	Eufala Pharmacy
Allergy Clinic of Tulsa	Choctaw Memorial Hospital	Evans Express Pharmacy
Arkansas Verdigris Valley Health Centers, Inc.	Choctaw Nation Healthcare Center	Evan's Pharmacy
Asbury Group/Inverness Village	City Drug of Davis	Excell Home Care & Hospice, Inc.
Atoka County Medical Center	City Pharmacy	Eye Associates of Miami
Baker Pharmacy, Inc.	Claremore Nursing Home	Fairfax Medical Facilities, Inc.
Bayless Drug	Cleveland Area Hospital	Family & Children Services
Bestyet Healthmart Pharmacy	Cliff's Pharmacy	Family Eye Care
Bintz Pharmacy	Clinic Pharmacy	Family Health and Wellness Center
Blue Cross Blue Shield of Oklahoma	Clinton Vision Source	Family Health Center of Southern Oklahoma
Bunker Hill Pharmacy	Cockrell Eyecare Center	Family Medical Clinic
Canadian Valley Pharmacy	Community Health Center, Inc.	Family Pharmacy
Carl Albert Community Mental Health Center	Community Health Connection	Family Pharmacy #3
Carter Healthcare, Inc.	Community Physician Group (CPG)	Gaddy's Discount Drug
Carter Professional Care, P.C.	CommunityCare	Gastorf Family Medical Clinic
Catoosa Family Pharmacy	Conrad-Marr Drug #6	Gastroenterology Specialists, Inc.
Center Pharmacy	Counseling & Recovery Services of Oklahoma	Gateway to Prevention and Recovery
Central States Orthopedic Specialists	Craig General Hospital	Gateway to Prevention and Recovery
Charles Carter, MD	Creative Care Pharmacy	Geiger Eye Care - Michael Geiger, OD
Checotah Pharmacy	CREOKS Behavioral Health Services, Inc.	Generations Family Medical Clinic
Chelsea Family	Crouch Family Medicine	Good Samaritan Health Services
Cherokee Nation	Dr. Blake A. Badgett, MD	Gore Green Country Drug
	Dr. Stewart Katz	Grand Memorial Health System
	Dr. Thomas Salyer D.O.	Grand Lake Medical Health Center, Inc.
	East Central Oklahoma Family Health Center, Inc.	Grand Lake Primary Care
	Eastside Clinic	Great Plains Regional Medical Center
	Eck Drug & Gift	Great Salt Plains Health Center
	Edwin Fair Community Mental Health Center	Green County Behavioral Health Services, Inc.
	Elgin Discount Pharmacy	
	Elkview General Hospital	
	EMSA	
	Endeavor Healthcare	
	Enid Regional Family Practice	

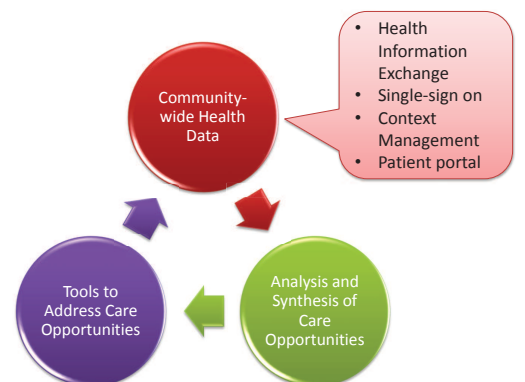


Grinnell Pharmacy	Luckie Drug	Northeastern State University
Guthrie Vision Source	Main Street Drug	Northwest Center for Behavioral Health
Harrel Eye Care	Marlow Medicine	Northwest Eye Associates
Health Alliance for the Uninsured	Martin Eye Center - Don P. Martin, OD	Odom, Coburn & Richardson
Health Express Pharmacy	McAlester Anesthesia and Respiratory Services	Oklahoma Health Care Authority
Health Outreach Prevention Education, Inc.	McAlester Regional Health Center	Oklahoma Spine & Brain Institute
Heart and Medical Center	McAlester Vision Center	Oklahoma State Department of Health
Henry Roberts Express Pharmacy	McCortney's Family Pharmacy	Oklahoma State Department of Mental Health and Substance Abuse
Herod Pharmacy	McCurry Clinic	Oklahoma State University Center for Health Sciences
Hillcrest Health System	McCurry Memorial Hospital	Oklahoma State University Medical Center
HMC/CAH Consolidated, Inc. (Management Company)	McGee, Pickard & Robinson Eye Associates	Okmulgee Memorial Hospital
Homestead Medical Clinic	McLoud Clinic Pharmacy	Osborn Drugs, Miami
Hominy Rexall Drug	Medic Pharmacy & Gifts	Osborn Drugs, Vinita
Hope Community Services, Inc.	Medical Center Pharmacy	OUP Tulsa
Hospice of Green Country	Mental Health Services of Southern Oklahoma	Pawhuska Medical Center
Hugo Medical Clinic	Mike Boeckman, OD PC	Perry Memorial Hospital
Hydro Medical Clinic	Miller Drug	Phoenix Healthcare
Inola Drug	Miller Eye Care	Primary Care Associates, PLLC
Integris	Montereau	Primary Eye Care Associates
Irvin Medical Clinic	More Than Medicine	Purcell Family Practice, Inc.
Jacks Pharmacy	Morton Comprehensive Health Services	Pushmataha County Hospital
Jackson County Memorial Hospital	Muscookee Creek Nation Division of Health	Pushmataha Family Medical Center, Inc.
Jenks Family Physicians	Neighbors Along the Line	R & S Drug #3
Kiamichi Family Medical Clinic	Nelson, Nelson & Nelson OD	Randy's Pharmacy, Inc.
KidzChoice	NEO Health	Razook's Drug
Langley Drug	Nephrology Specialists of Tulsa	Red Rock Behavioral Health Services
Larry's Pharmacy	Newberry Express Pharmacy	Rexco Drug
Latino Community Development Agency	Norman Vision Source	Richard Creed, DO
Len D. Hart, OD	NorthCare	Ritter's Express Pharmacy
Liberty Drug	Northeastern Oklahoma CHC, Inc.	Robert C. Dimski, M.D., PLLC

Rolling Hills Care Center	Tahlequah City Hospital	Women's Health Center of Rogers County
Rose Rock Recovery Center	The Family Vision Clinic	Woods Pharmacy & Medical Supply
RX Shoppe, Atoka	The Health and Wellness Center, Inc.	Woodson Family Medical Clinic
RX Shoppe, Grove	The Orthopaedic Center	Yale Drug
S & D Drug	The Physician's Hospital at Anadarko	Youth & Family Services of North Center Oklahoma
Saint Francis Health System	The Referral Center	
Salisbury Pharmacy	The Villages at Southern Hills	
Sallisaw Pharmacy	Thomas Drug & Variety Center	
Sanford Family Clinic	Tiger Drug	
Sayre Memorial Hospital	Toni's Westside Healthmart	
Scheffe Parkview Prescriptions	Tulsa Cancer Institute	
Scheffe Prescription Shop	Tulsa CARES	
Scheffe Prescription Shop West	Tulsa Center for Behavioral Health	
Seminole Vision Center	Tulsa Day Center for the Homeless	
Sequoyah Memorial Hospital	Tulsa Dream Center Medical Clinic	
Shawnee Vision Source	Tulsa Health Department	
Sherrill's Pharmacy	Tulsa Health Group	
Sooner Health Services	United Discount Drug	
Southeastern Oklahoma Eye Clinic	United Discount Drug #2	
Specialized Outpatient Services	United Pharmacy	
Spoon Drug, #2	University of Oklahoma HSC	
St. John Health System	Urology Specialists of Oklahoma	
Stillwater Family Care	Valu-Med Pharmacy	
Stillwater Medical Center	Valu-Med Pharmacy, Ft. Gibson	
Stillwater Medical Physicians Clinic	Vision Source - Muskogee	
Stillwater Vision Clinic, Inc.	Vision Source - Oklahoma City South	
Stillwell Pharmacy	Vision Source of Hugo, Inc.	
Stonegate Senior Living, LLC	Vision Source Tulsa - Dr. Free	
Stroud Regional Medical Center	Wagoner Community Hospital	
Swann's Pharmacy	WellQuest	



Preparing for the new healthcare system



accessnetwork.healthcare.covint.com/web/portal/community_dashboard

PI Manager MyHealth Analytics QA Community Health An... HealthVault MyHealth Analytics Stg Analytics Clinical

Welcome David Kendrick My account Support Sign Out

Jason Klein 53 years (01/22/1959) Male OK 74055 Phone: 555-555-7926

355 Elm St. Owasso

Phone2: -- Phone3: -- PCP: --

Connect to HealthVault

Patient Summary Allergies & Adverse Reactions Clinical Documents Medications Immunizations Lab Problem List Vital Signs

Patient Summary PDF View data sources and demographics Find new patient

All data sources have responded.

Problem List

Problem/Condition status	Onset/Dur...	Problem/C... status	Attending physician	Source
HYPERTENSIVE GOAL BP (BLOOD PRESSURE) < 130/80	09/27/2010	Active	--	GTHAN Facility B Source
NECK PAIN	05/29/2008	Active	--	GTHAN Facility B Source
HYPERTENSIVE GOAL BP (BLOOD PRESSURE) < 130/80	10/24/2007	Active	--	GTHAN Facility B Source

Found: 3 results

Medications

Lab Results

Test name	Collection date	Ordering provider	Res. stat...	Stat
CBC AND COMPLETE DIFF	09/14/2010	ERIC LASALLE, MD	Final res...	--
COMPREHENSIVE METABOLIC	09/14/2010	ERIC LASALLE, MD	Final res...	--
LIPID PROFILE	09/14/2010	ERIC LASALLE, MD	Final res...	--

Found: 4 results

Allergies

Substance	Reaction	Source
Sulfa (Sulfonamide Antibiotics) Group	anaphylaxis	GTHAN Facility A Source

Found: 1 result

Procedures

Procedure	CPT code	Date	Attending physician	So...
COLONOSCOPY	EXAMCOL	10/28...	--	GT... Fa... B So...

Vital Signs

Observation date	Vital type	Reading	Interpret...	Source
04/07/2000	Body weight	88 kg	--	GTHAN Facility B Source
04/07/2000	Body height	177 cm	--	GTHAN Facility B Source
04/07/2000	Blood Pressure	145/88	--	GTHAN Facility B Source

accessnetwork.healthcare.covint.com/web/portal/community_dashboard

PI Manager MyHealth Analytics QA Community Health An... HealthVault MyHealth Analytics Stg Analytics Clinical

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NECK PAIN	05/29/2008	Active	--	GTHAN Facility B Source
HYPERTENSIVE GOAL BP (BLOOD PRESSURE) < 130/80	10/24/2007	Active	--	GTHAN Facility B Source

Found: 3 results

Medications

Medication	Source
Lipitor	GTHAN Facility A Source
Lisinopril	GTHAN Facility A Source
Ultram	GTHAN Facility A Source

Found: 3 results

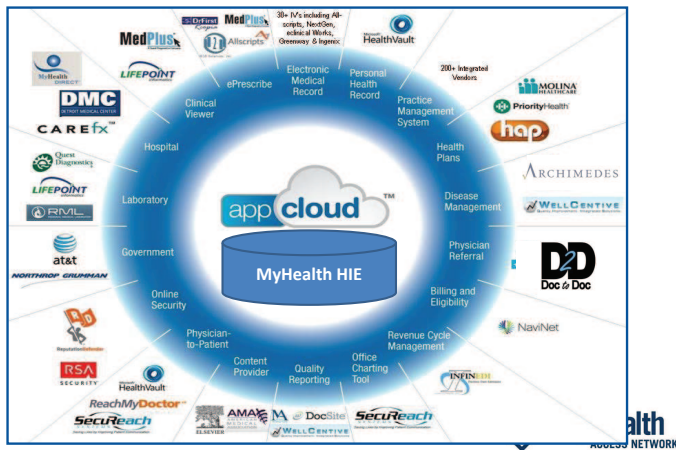
Procedures

Procedure	CPT code	Date	Attending physician	So...
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"App" Architecture to Expand Options



HealthVault

David's health information

Conditions

- Allergy
- Condition
- Emotional State (1)
- Medical Device
- Custom Data: Application-Specific Information (14)

Measurements

- Blood Glucose Measurement
- Blood Pressure Measurement (5)
- Height Measurement (2)
- Lab Test Results
- Peak Flow Measurement
- Weight Measurement (1)

Medications

Blood Pressure Measurement

Get the most out of your HealthVault experience

Some apps you can use with this health information:

HealthVault PrimePATIENT myHealthyfitter

Date	Systolic	Diastolic	Pulse	Details
1/2/2011 9:00:00 AM	120 mmHg	84 mmHg	48 BPM	
1/2/2011 8:50:00 AM	118 mmHg	88 mmHg	48 BPM	
1/1/2011 10:57:00 PM	133 mmHg	79 mmHg	66 BPM	
1/1/2011 10:56:00 PM	139 mmHg	79 mmHg	61 BPM	
1/1/2011 10:55:00 PM	133 mmHg	72 mmHg	60 BPM	

David's weight dashboard

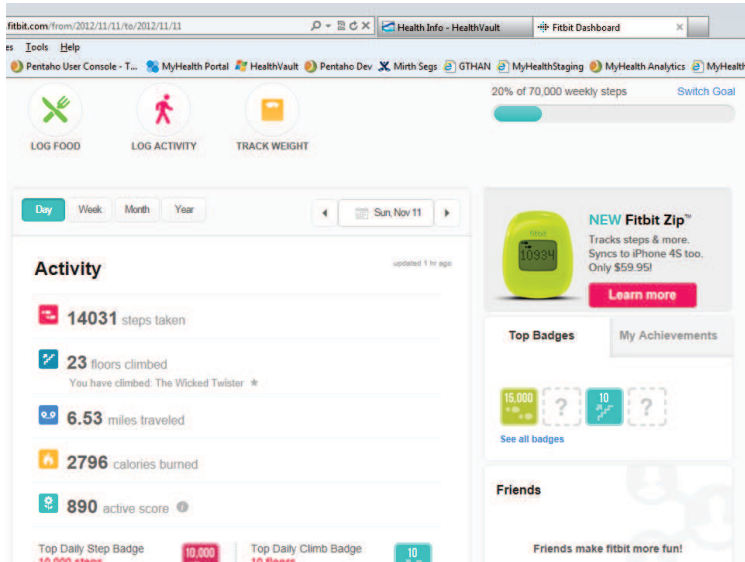
HealthVault does not provide advice on dieting, exercise, or safe weight loss goals. If you have concerns, talk to your doctor.

WEIGHT

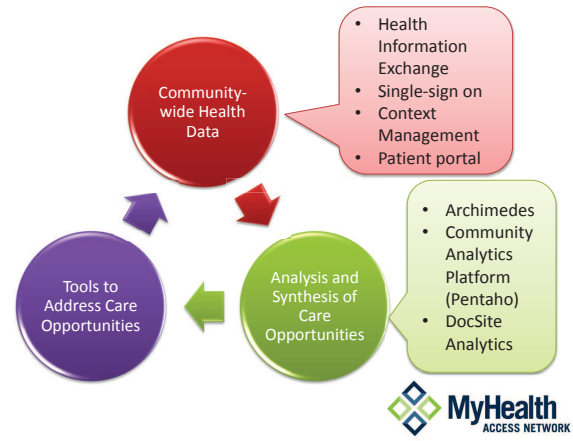
Current: 176.8 lbs

Line graph showing weight over time from 7/20 to 8/9.

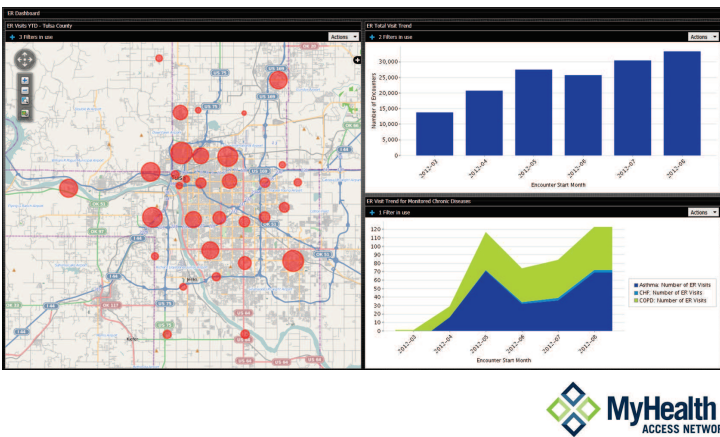
Health views: Emergency profile, Weight management



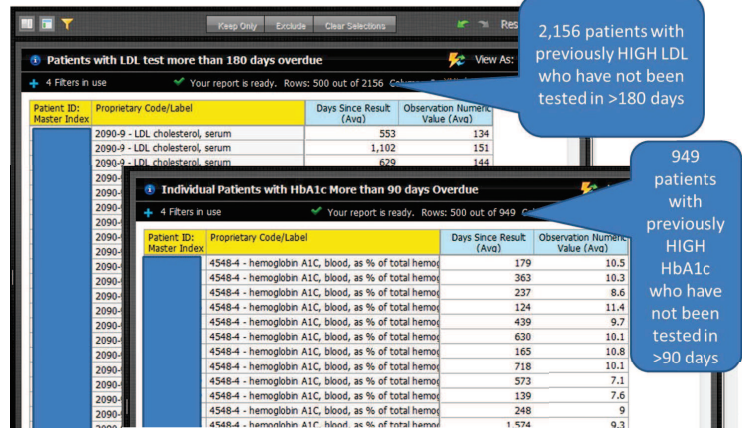
Basic Framework for Health Improvement using MyHealth Interventions



Analytics to Plan Clinical Care



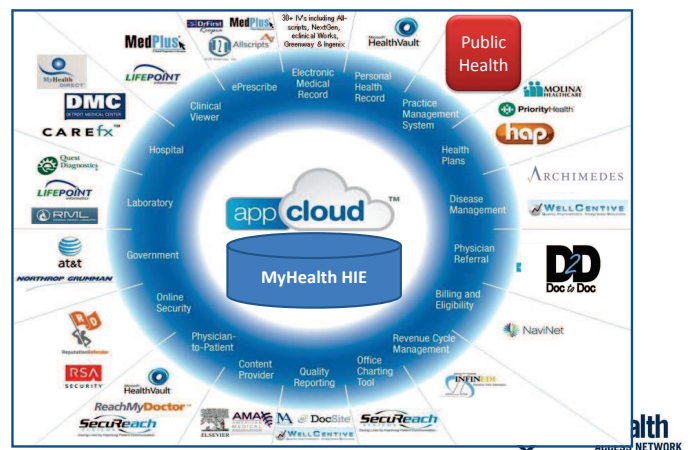
MyHealth identifies needed screening and testing across the population and *notifies providers*



Community Health Analytics



"App" Architecture to Expand Options



Existing Infrastructure to support Public Health

- eMPI: 3.6M lives
- Clinical Data Repository
- Voluntary All-payer Claims database
- Data feeds (Immunizations, Labs, Conditions, ER and Admission data, etc.)
- Clinical and health analytics tools
- Free patient portal
- Provider directories and Usage audit logs
- Policies for data exchange and use



Additional Tools (Apps) for Public Health Proposed

Clinical workflow support to centralize and integrate data for:

- Family Planning
- TB Screening
- Child Health clinic support
- Special Child Health Services
- Immunizations
- Public health monitoring



Additional Program Support Proposed

Data collection and routing to OSDH (where relevant) for:

- Children First
- Consumer protection
- Water Testing
- WIC



Approach

Software as a service model

- Build infrastructure once
 - Cost may be shared
- Each organization pays only their portion of overhead for shared apps and services



Questions?

David C. Kendrick, MD, MPH

David.Kendrick@MyHealthAccess.net

Info@MyHealthAccess.net

918-236-3434

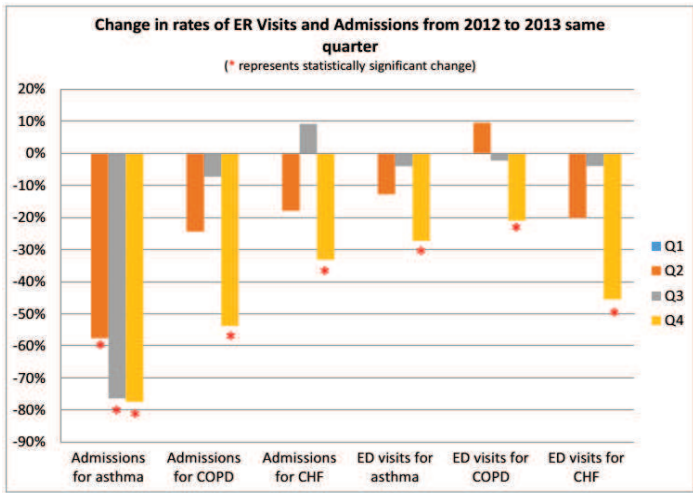


Results

- Patients receiving an online consult had a significant reduction in PMPM cost of care when compared with themselves as historical controls:
 - \$140.53 Pre Consult vs. \$78.16 Post Consult
 - Net savings of **\$62.37, p=0.021**
- Compared with patients who received a referral but NOT a consult:

Cost Type	Mean PMPM Cost Change	Mean Percentage Change
Facility Costs (UB92)	-\$13.00	-20%
Professional Costs (HCFA 1500)	-\$108.04	-34%
Pharmacy Costs (PBM)	-\$9.14	-14%
Total Costs	-\$130.18	





iPhone Screenshots "Heart Health Mobile"

Risk Assessment

Male Female **Heart Risk**

Age: 18 - 85 years

Weight: 80 - 600 lbs

Height: 3 - 7 ft 0 - 12 in

Do you currently smoke? N Y

Have you had a heart attack? N Y

Have you had a stroke? N Y

Do you have...

Risk Assessment Save to History

Estimated Heart Risk Range: **2.8% — 8.4%***

* If you can provide Blood Pressure, Cholesterol and Diabetes HbA1c, we will be able to show accurate risk recommendations for your heart health.

Find the closest Blood Pressure or Cholesterol screening location

8.4%

All the results are for your information, we strongly suggest you to talk with your doctor.

Directs patients to local providers for screening

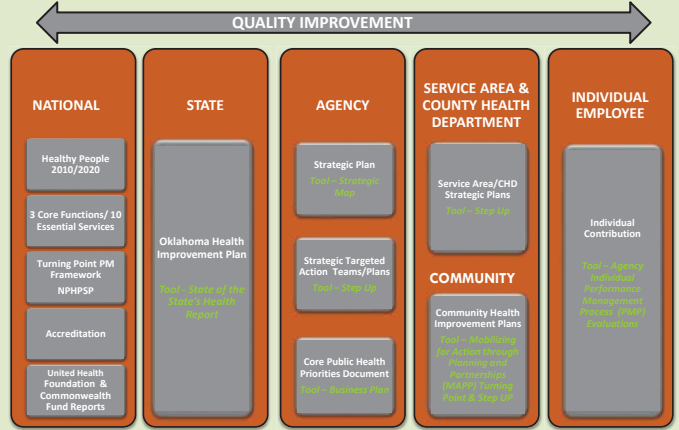
OKLAHOMA HEALTH IMPROVEMENT PLAN



The first wealth is health. - Ralph Waldo Emerson

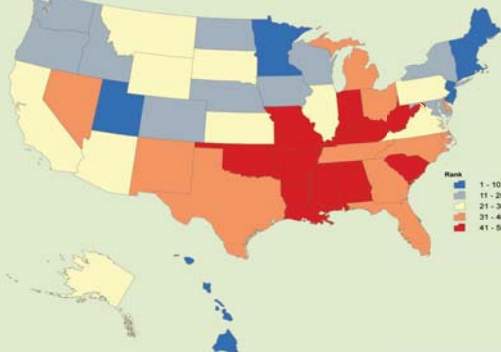
OKLAHOMA STATE BOARD OF HEALTH · TRI BOARD MEETING · 2014

OKLAHOMA STATE DEPARTMENT OF HEALTH
PERFORMANCE MANAGEMENT MODEL



America's Health Rankings
Overall Health Ranking 2013

Oklahoma Ranks 44th



STATE OF THE STATE'S HEALTH · 2014



OKLAHOMA HEALTH IMPROVEMENT PLAN
(OHIP)

2010 - 2014 OHIP FLAGSHIP ISSUES
SUCCESSSES & CHALLENGES



Tobacco

- Adult smoking decreased from 26.1% (2011) to 23.7% (2013) of the population. Oklahoma is currently ranked 45th in the US.
- 85% of Oklahoma children attend schools with 24/7 tobacco free policies.

Obesity

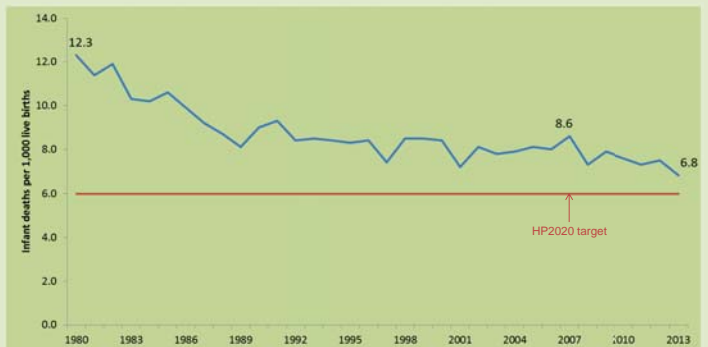
- Percent of public high school students who are obese decreased from 17% (2011) to 11.8% (2013).
- Oklahoma adult obesity prevalence is 32.5% (2013). Oklahoma is currently ranked 44th in the US.

Child Health

- Currently at 6.8/1,000 live births, infant mortality has dropped 21% since 2007.
- Only 8.4% of Oklahoma babies were born with low birth weight, though prevalence in the African American population is 14%.

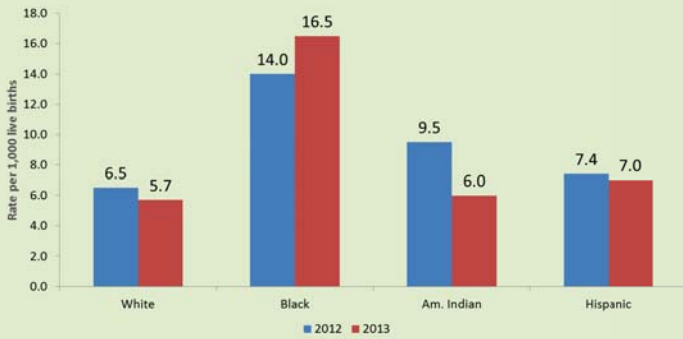
STATE OF THE STATE'S HEALTH · 2014

INFANT MORTALITY RATE:
OKLAHOMA, 1980-2013



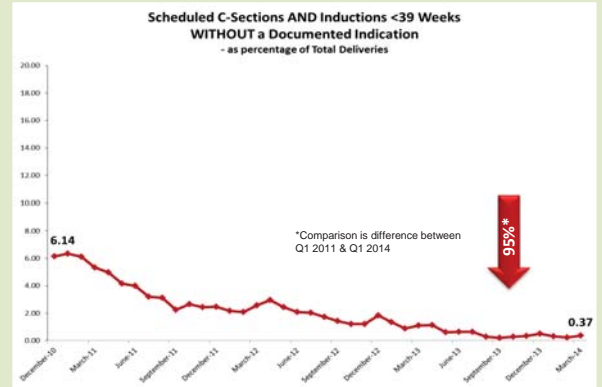
Source: OSDH, Center for Health Statistics, Health Care Information, OK2SHARE

INFANT MORTALITY RATES BY RACE AND HISPANIC ORIGIN: OKLAHOMA, 2012-2013



Source: OSDH, Center for Health Statistics, Health Care Information, OK2SHARE

EVERY WEEK COUNTS INITIATIVE

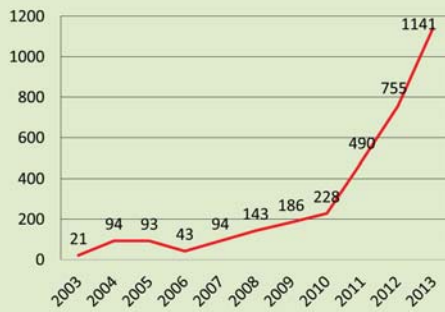


STATE OF THE STATE'S HEALTH · 2014

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CERTIFIED HEALTHY OKLAHOMA

Growth in Number of Certified Healthy Certifications



STATE OF THE STATE'S HEALTH · 2014

OHIP UPDATE 2015 - 2019

PROCESS

- Quantitative Data + Qualitative Data + Evidence Based Practice = OHIP
- State of the State's Health + Community Chats + Workgroups of Content Experts

COMMUNITY CHATS

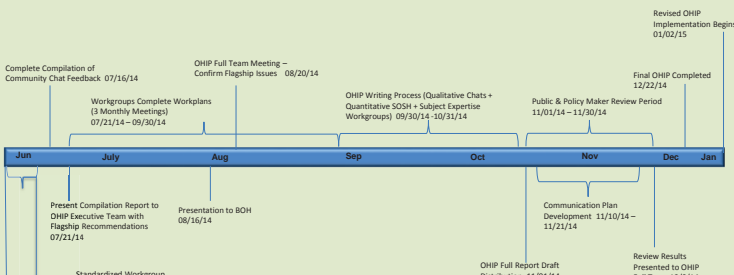
- General: 176
 - African American: 65
 - Hispanic: 82
 - Tribal: 83
 - Grand Total: 406
- Online Surveys
- English - 108
 - Spanish - 23

WHAT WE'VE HEARD/FACTORS IMPACTING FLAGSHIP ISSUES

- Health Access**
- Health Care (Medicaid expansion cited)
 - Preventive Services
 - Healthy Foods
 - Outlets for Physical Activity
 - Health Services/Health Education
- Social Determinants**
- Transportation
 - Economic development / funding
 - Education
- Behavioral Health**

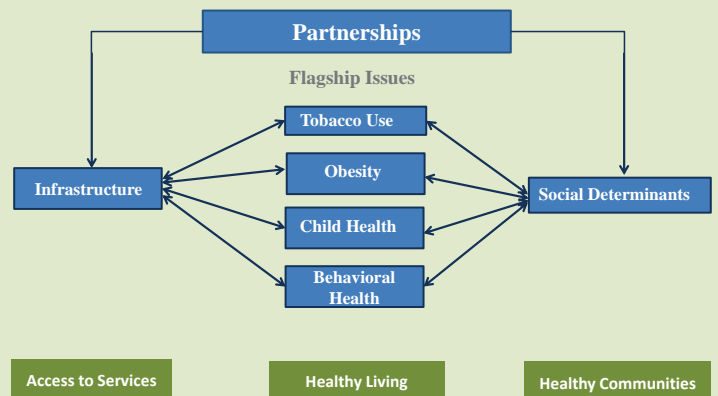
OKLAHOMA HEALTH IMPROVEMENT PLAN

OHIP UPDATE TIMELINE



OHIP Community Chats across Oklahoma - 11 total sessions focusing on communities, special populations and tribes. Additional input through online survey and response cards. 04/2014 - 06/2014

OKLAHOMA HEALTH IMPROVEMENT PLAN



OKLAHOMA HEALTH IMPROVEMENT PLAN

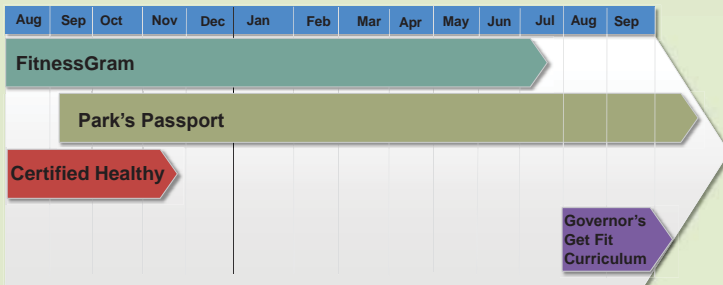
MOVING FORWARD

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governor's
get fit
challenge



GOVERNOR'S GET FIT CHALLENGE TIMELINE



Governor & Kevin Durant Launch Event – September 26, 2014,
Childhood Obesity Month

NGA POLICY ACADEMY CORE AREAS

Purpose: Develop & implement health workforce action plan

Period of Workforce Policy Academy: May 2014 – Oct. 2015

Health Workforce Data Collection and Analysis

- Improve state health workforce data collection and analysis
- Link health workforce and health indicator data
- Establish processes for linking data to program and policy planning

Workforce Redesign

- Analyze new models of care to identify appropriate health workforce strategies
- Define resource requirements for a redesigned health workforce
- Recommend evidence-based strategies that will meet Oklahoma's unique and diverse needs

Pipeline, Recruitment, Retention

- Establish interdisciplinary collaboration to address supply and distribution of health professionals
- Develop broad statewide education and training strategy
- Evaluate and recommend recruitment and retention strategies

Coordination of State Health Workforce Efforts

- Achieve stakeholder consensus for statewide health workforce mission and vision
- Incorporate health workforce, population health, and economic data into research agenda
- Establish formal memorandum of agreements for collaboration and cooperation among stakeholders

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STATE INNOVATION MODEL (SIM) GRANT

- SIM is a public and private sector collaboration to transform the state's delivery system, it is NOT Medicaid expansion nor Medicaid managed care
- SIM is not designed to reduce the number of uninsured nor create programs directed at the uninsured
- SIM is based on the premise that state innovation with broad stakeholder input and engagement, including multi-payer models, will accelerate delivery system transformation to provide better care at lower costs
- CMMI will provide up to \$3 million per state (one-year project period) for up to 15 Model Design cooperative agreements to design new State Health System Innovation Plans
- SIM should facilitate the design, implementation, and evaluation of community-centered health systems that can deliver significantly improved cost, quality, and population health performance results for all state residents

OKLAHOMA STATE INNOVATION MODEL GRANT (OSIM)

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OSIM GOALS

- Coordination of public health & healthcare
- Improvement of population health outcomes
- Alignment of clinical population health measures
- Multi-payer value-based purchases
- Address health disparities (rural, socioeconomic, race/ethnicity, behavioral health)

OSIM OUTCOME MEASURES

- Tobacco Use Assessment & Tobacco Cessation Intervention
- Adult & Youth Obesity
 - Physical Activity
 - Fruit & Vegetable Consumption
 - Food Desert/Food Availability
- Adult Diabetes
- Adult Hypertension

STATE POLICY AND FUNDING

- Governor's initiative petition to expand protections from secondhand smoke in public places

<u>State Budget Request</u>	<u>Amount Requested</u>
• State Public Health Laboratory	• \$49 Million
• Public private partnerships for the improvement of adolescent and children's health	• \$1 Million
• Increasing vaccine availability and the improvement of childhood immunization rates	• \$2.7 Million
• Reducing preventable hospitalizations and avoidable emergency department use for the uninsured	• \$9 Million





RESOLVE: High Achieving Health Departments of 2020

Roadmap to 2020: Becoming a High Achieving Health Department

Gary Cox, JD
October 7th, 2014

- Examine existing and emerging databases
- Convene meetings of clinical providers and insurers
- Collaborate with new non-health-sector partners who have the potential to make an impact on the living conditions
- Initiate and effort to strengthen internal management systems in ways that create transparent goals, and establish ways to measure progress in achieving them



OCCHD: Roadmap to 2020



OCCHD: Roadmap to 2020

- Investing in Big Data infrastructure to strengthen public health protection and prevention efforts statewide:
 - MyHealth Access Network
 - Partnership with Tulsa Health Department and the Oklahoma Health Care Authority

- Engaging non-traditional partnerships to align resources for health improvement:
 - Wellness Now Business Alliance
 - Private-Public funding
 - Oklahoma City Public Schools

<http://m.youtube.com/watch?v=Z6XNTyZmXJA>



OCCHD: Roadmap to 2020



OCCHD: Roadmap to 2020

- Convene meetings of clinical providers and insurers:
 - Integration of existing public health clinical services
 - Integration of primary care and mental health services
 - Enhanced partnerships with local payors including OHCA and BCBS

- Strengthen internal management systems in ways that create transparent goals, and establish ways to measure progress in achieving them:
 - Continuous cycle of evaluation
 - 9 program evaluations completed since September 2012
 - Evaluation findings utilized to improve program delivery and resource allocation



Collaboration is Critical

WELLNESS NOW

- Regular engagement of boards and executive committees at each health department:
 - More robust partnerships between the 3 agencies
 - Alignment of planning and practice implementation for greatest health improvement
 - Resource allocation aligned with highest priorities



THD's Strategic Map Dashboard

Tri-Board of Health Meeting
October 7, 2014
Bruce Dart, Ph.D.



Original Strategic Plan / Map

- Started with a Strategic Map of 128 objectives
- Utilizing Accreditation Standards & Measures, condensed down to 22 measurable objectives during 2013
- Ensured Tulsa City-County BOH approved changes



Measurable Strategic Plan / Map

- Developed a Strategic Map Dashboard in 2014
- Mirrors the Strategic Map
- Messaging geared to all staff, management and the Tulsa City-County BOH
- PowerPoints, Quarterly Meetings, Measurement Updates Quarterly, THD Intranet, and Reports

What???????



Strategic Plan Stats – June 30, 2014

- Objectives that are on target for on-going/maintenance objectives – 77%
 - 100% completion of product/process producing objectives – 33%
 - Increase overall in the previous 6 months – 11%
 - Overall completion – 81%
- Set to reach 100% by June 30, 2015!



Strategic Map Dashboard

Built by Kiran Duggirala, Health Planner, Health Data & Evaluation Division

[Dashboard](#)



Tulsa Campaign to Prevent Teen Pregnancy



Oklahoma has the second highest teen birth rate in the United States for ages 15-19

- **Oklahoma: 42.9**
- **US: 27**

(Teen Birth Rate: The number of births per 1,000 teen girls, age 15-19)

The Tulsa Campaign is a collaborative organization working to make systems-level change to prevent teen pregnancy in Tulsa

Our mission is to improve the health and economic well being of individuals and the city of Tulsa

We bring awareness to the issue of teen pregnancy through education and outreach, and improve access to healthcare for young people

We support institutions, organizations, and policies that have an impact on teen pregnancy prevention

9 in 10 Tulsans from all demographic backgrounds believe comprehensive sex education should be taught in middle school and high school



Research methodology: live telephone poll, 701 adults,
±3.7% margin of error, 95% confidence level

90% of adults favor health services for teens in regards to family planning



Research methodology: live telephone poll, 701 adults, +/-3.7% margin of error, 95% confidence level

Public + Private Partnership

- Partner with THD's PREP Department to bring evidence-based sex education to Tulsa Public Schools with whom we also partner
- Partner with area health centers to increase access to health care for young people
- In communication with Kirkpatrick and Wellness Now coalition to address issues around data and joint fundraising efforts

Campaign Goals = OHIP Goals

Children's Health

- Reduce unintended pregnancies

Workforce Development

- Increase primary and preventative health services

Health Systems Effectiveness

- Identify gaps in our health systems and key and responsible parties to champion these efforts and encourage replication throughout the state

Success in Tulsa

Evidence Based Sex Education
currently implemented in **all**
TPS schools

- 2,800 TPS 7th grade students
- 3,000 TPS 9th grade students

60% reduction in teen births (in 2012-2013) versus Tulsa (in 2009-2010)
1 million

Ever More open - \$1.2B in tax payer savings

Teen birth rate in Tulsa
decreased by **20%**
between 2012-2013

from **46.8** (in 2012)



to **37.3** (in 2013)

20% reduction in teen birthrate from
2012-2013 saves **Tulsa** tax payers
5 million

Every **\$1.00** spent = **\$3.78** in tax payer
savings

The Tulsa Campaign and its partners, in particular the PREP department of THD, are at capacity

Additional funds are required to reach more students and to further reduce the teen birth rate in Tulsa and Oklahoma

Progress is Not Victory

Oklahoma's teen birth rate remains significantly higher than that of most developed nations

Expansion into other Tulsa County school districts (Broken Arrow - Union)

5,800 – currently reaches
to
13,800 – with additional funding

The Tulsa Campaign and its partners, in particular the PREP department of THD, are at capacity

Additional funds are required to reach more students and to further reduce the teen birth rate in Tulsa and Oklahoma

Expansion into other Tulsa County
school districts (Broken Arrow + Union)

5,800 ← currently reaches
to

13,800 ← with additional funding



**TULSA CAMPAIGN TO
PREVENT
TEEN
PREGNANCY**

it's OK to talk about it.

tulsacampaign.org

Target population: Teen and adult residents of Oklahoma County

Priority Area 7: Adolescent Health/Teen Pregnancy Prevention

WHY FOCUS ON TEEN PREGNANCY PREVENTION?

Preventing teen pregnancy is vital to increasing graduation rates, maintaining a skilled workforce and ensuring economically stable, self-supporting families. For years, Oklahoma has ranked among the handful of states with the highest (worst) teen birth rates. In 2012, Oklahoma moved to 2nd highest teen birth rate for 15-19 year olds in the U.S., almost tied with New Mexico for highest rate -- and it had THE HIGHEST birth rate for older teens, ages 18-19.

Oklahoma County had the largest number of births to teens -- *one out of every five* teen births in the state is in Oklahoma County. Teen birth rates in some Oklahoma County zip codes are 2-3 times the national average. Nearly one out of every four births in Oklahoma County (23%) was to a girl who was already a mother. Estimates from the National Campaign to Prevent Teen & Unplanned Pregnancy identify the public costs of teen pregnancy in Oklahoma County to be at least \$40 million a year.

The new Adolescent Health work group is committed to making teen pregnancy prevention a priority in Oklahoma County, promoting evidence-based solutions and building a strong, community-wide base of support. This new work group grew out of a public-private partnership of organizations that came together, thanks to the support and leadership provided by the Kirkpatrick Family Fund.

OKLAHOMA CITY & COUNTY RESOURCES

State/Local:

Oklahoma City-County Health Department
www.occhd.org/community/tpp

Oklahoma Institute for Child Advocacy - Healthy Teens OK!
www.healthyteenok.org

Oklahoma Institute for Child Advocacy – Oklahoma KIDS COUNT Data Center
<http://oica.org/kid-count-data-center/>

Oklahoma State Department of Health
www.health.ok.gov

National:

Annie E. Casey Foundation – National KIDS COUNT Data Center
www.aecf.org

Centers for Disease Control & Prevention – Youth Risk Behavior Survey (YRBS)
<http://www.cdc.gov/HealthyYouth/yrbs/index.htm>

National Center for Health Statistics, Centers for Disease Control & Prevention
<http://www.cdc.gov/nchs/>

National Campaign to Prevent Teen & Unplanned Pregnancy
www.thenc.org

Office of Adolescent Health/DHHS
<http://www.hhs.gov/ash/oah/oah-initiatives/tpp>

Teen Pregnancy Prevention Goal:

To reduce the number and rate of births to females ages 19 and younger
in Oklahoma County

Teen pregnancy is far more than just a single issue. It impacts three generations at once – the teen, the baby and the teen’s parents. The impact is often negative for a family’s economic self-sufficiency and stability, and for the outcomes of the teen parent and the baby throughout their lives. The costs and consequences of teen pregnancy and parenting have a direct financial impact on our communities and our state.

Reducing teen births is essential to the economic well-being of our community and its young people, as teen pregnancy and too-early, unprepared parenting influences important early childhood, health, education and economic indicators in our community in profound and costly ways. We can be successful in addressing this issue, only if our community makes it a priority for attention, resource investment and action. There is a role for everyone; our community’s young people deserve our best collective effort.

[1] *More Than Just a Single Issue*, National Campaign to Prevent Teen & Unplanned Pregnancy

INDICATORS:

1) **Teen birth numbers** for the following age ranges, by county and by zip code:

- a) Total births to all ages, 19 and younger
- b) Ages 10-14
- c) Ages 15-17
- d) Ages 18-19

2) **Teen birth rates** for the following age ranges, by county and by zip code:

- a) Ages 15-19 (general range)
- b) Ages 15-17 (younger teens)
- c) Ages 18-19 (older teens)

Data sources: Oklahoma State Department of Health and Oklahoma City-County Health Department

OBJECTIVES:

A collaboration of organizations has been working together in recent years to promote quality, evidence-based, medically accurate, age-appropriate teen pregnancy prevention approaches and curricula; they linked with Wellness Now in February 2014 to form the new Adolescent Health work group. Since last fall, the collaboration has been facilitating community conversations, developing a logic model and creating a structure for planning and action, which is now being incorporated into Wellness Now.

The new Adolescent Health/Teen Pregnancy Prevention work group has four task forces:

- 1) **Education** – expanding evidence-based sexuality education programs in school settings;
- 2) **Medical** – expanding accessible, teen-friendly clinic services;
- 3) **Community Engagement** – involving parents, youth-serving organizations, congregations and private sector partners in on-going, meaningful ways; and
- 4) **Infrastructure** - building a base of support to grow and sustain the effort.

Currently, the task forces are working on their specific objectives and action plans.

<u>Ages/Numbers</u>	<u>2013</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>	<u>2008</u>	<u>2007</u>	<u>2006</u>
14 & Younger	14	17	16	38	34	21	29	26
15-17	353	365	384	439	473	501	544	513
18-19	819	841	875	939	1,027	1,083	1,020	1,020
Total # in OK Co.	<u>1,186</u>	<u>1,223</u>	<u>1,275</u>	<u>1,416</u>	<u>1,534</u>	<u>1,605</u>	<u>1,593</u>	<u>1,559</u>
<hr/>								
Total # OK Teen Births	5,379	5,909	5,949	6,452	7,375	7,475	7,616	7,320
Percentage in OK Co.	22%	21%	21%	22%	21%	21%	21%	21%
<hr/>								
<u>Teen Births in OK Co.</u>	<u>2013</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>	<u>2008</u>	<u>2007</u>	<u>2006</u>
First births: Number	923	941	997	1,100	1,202	1,244	1,216	1,188
Percentage	78%	77%	78%	78%	78%	78%	76%	76%
<hr/>								
<u>Total by Race/Ethnicity:</u>	<u>2013</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>	<u>2008</u>	<u>2007</u>	<u>2006</u>
Hispanic*	414 (35%)	425	425	450	473	436	442	415
White, Non-Hispanic	443 (37%)	761	787	868	982	999	1,023	1,019
Black, Non-Hispanic	265 (22%)	354	399	419	438	475	433	434
American Indian	56 (5%)	84	74	110	100	116	121	94
Asian	8 (1%)	23	15	19	13	19	16	12

*Hispanic can be any race.

Source: Oklahoma State Department of Health, Center for Health Statistics, Vital Statistics

Prepared by: Sharon Rodine, Oklahoma Institute for Child Advocacy, July 2014 (www.oica.org; www.healthyteensok.org)

Changes in Oklahoma County Teen Birth Rates, 2006 to 2013

(Rates are the number of births per 1,000 females of the same age range.)

<u>AGES</u>	<u>2013</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>	<u>2008</u>	<u>2007</u>	<u>2006</u>
15-19	51.8	54.0	56.2	58.9	63.8	67.8	66.8	66.2
15-17	25.8	27.1	28.4	32.6	35.2	37.0	39.0	36.9
18-19	91.7	94.7	98.1	94.5	102.1	110.5	107.7	110.2

Percent decrease in Oklahoma County teen birth rates between 2006 and 2013:

15 – 19 years	=	22%
15 – 17 years	=	30%
18 – 19 years	=	17%

Comparison of 2013 county, state and national birth rates:

	<u>Oklahoma County</u>	<u>State of Oklahoma</u>	<u>U.S. Average</u>
15 – 19 years	51.8	42.9	26.6
15 – 17 years	25.8	20.5	12.3
18 – 19 years	91.6	76.1	47.4

Source: Oklahoma State Department of Health; CDC, National Center for Health Statistics

Prepared by: Sharon Rodine, Oklahoma Institute for Child Advocacy, July 2014 (www.oica.org; www.healthyteensok.org)