Integrated Practice Models: Kaiser Permanente

Inter-Professional Education to Practice
HSDM Initiative to Integrate Oral Health and Medicine
Center for Integration of Primary Care and Oral Health (CIPCOH)

June 5, 2019

Dr. Kenneth Wright, DMD, MPH
Vice President, Dental Services
KP Dental has operated in Northwest region for 45 years.

- First office opened in 1974.
- More than 290,000 members today.
- Dental providers extend primary care, share responsibility for member’s total health.
MDI Strategy

A unique system that fosters health and well-being – where you experience easy, convenient, personalized, affordable care, everywhere, every day.

“Core Strategies are designed to fully leverage program strengths while overcoming challenges to achieving the vision

“We do what it takes to make total health easy”
MDI Vision

A holistic approach to health care, recognizing that what happens in the mouth affects the rest of the body and vice versa.

Experienced by:

• Members have their total health needs addressed when they visit
• Members receive coordinated care and greater value when they choose us for medical and dental coverage with an integrated health record
• Meeting members’ needs is easier because bridges have been built between departments
• Medical and dental have shared responsibility for the member’s total health
MDI Essentials

- Process
- People
- Place
- Culture Change
Value Proposition

TOTAL HEALTH
- Integrate oral health and medical care in the care delivery setting and member experience

CARE EXPERIENCE
- Leverage a shared health record for a total health approach and convenient one stop care; driving member satisfaction

QUALITY
- Utilizing dental touchpoints to support initiatives for Medicare 5 Star, HEDIS performance and health outcomes

• Members with asthma, diabetes, kidney disease, heart disease, tobacco use, and prenatal

*Members with asthma, diabetes, kidney disease, heart disease, tobacco use, and prenatal
One Integrated IT Platform: EPIC Wisdom

KP HealthConnect Integrated Health Record

- One single platform and supporting infrastructure for the KP EHR
- Integration of appointing, billing and claims functions
- View and cancel upcoming dental appointments
- Scalable and flexible technology supporting growing membership, integrated facilities and new care delivery models (mobile, worksite, teledentistry, virtual dental home)

Snapshot View
## MDI Models

<table>
<thead>
<tr>
<th>Tier 1</th>
<th>Cedar Hills</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current State</td>
<td>Co-located with embedded nurse + physician</td>
</tr>
<tr>
<td>Stand alone dental without LPN</td>
<td></td>
</tr>
</tbody>
</table>

Tier 1 has no embedded medical staff and currently it relies on patient engagement and education through the patient friendly handout at a stand alone dental office.

<table>
<thead>
<tr>
<th>Tier 2</th>
<th>Salmon Creek</th>
</tr>
</thead>
<tbody>
<tr>
<td>Co-located dental + medical with no nurse</td>
<td></td>
</tr>
</tbody>
</table>

Tier 2 has no embedded medical staff, it relies on the dental team engaging the patient in a co-located facility.

**Care Gaps Addressed in this Tier:**
1. Nurse Facing:
   - Immunizations
   - Lab Work
   - DM Foot Exam
   *The dental team coordinates patient care through a warm handoff to lab or Nurse Treatment Room (NTR) in the co-located medical office building.

<table>
<thead>
<tr>
<th>Tier 3</th>
<th>Beaverton/Gilsan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Co-located or stand alone with embedded nurse</td>
<td></td>
</tr>
<tr>
<td>Tier 3 has two different models:</td>
<td></td>
</tr>
<tr>
<td>A) Co-located with regular LPN and B) Stand alone with LPN</td>
<td></td>
</tr>
<tr>
<td><strong>Care Gaps Addressed in this Tier:</strong></td>
<td></td>
</tr>
<tr>
<td>1. Nurse Facing:</td>
<td></td>
</tr>
<tr>
<td>- Immunizations</td>
<td></td>
</tr>
<tr>
<td>- Lab Work: Only Lead LPNs</td>
<td></td>
</tr>
<tr>
<td>- DM Foot Exam</td>
<td></td>
</tr>
<tr>
<td>2. Scheduling Clinician Facing</td>
<td></td>
</tr>
<tr>
<td>- Appointments for Patients</td>
<td></td>
</tr>
<tr>
<td>3. New Diagnosis</td>
<td></td>
</tr>
<tr>
<td>4. Patient Education</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Tier 4</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Tier 4 Cedar Hills</td>
<td></td>
</tr>
<tr>
<td>Co-located with embedded nurse + physician</td>
<td></td>
</tr>
</tbody>
</table>

Care Gaps Addressed in this Tier:

1. PC Clinician Facing (through the embedded Clinician)
   - Well-child
   - Physicals
   - Cervical Cancer Screenings
   - BP screening
2. Nurse Facing:
   - Immunizations
   - Lab Work: Only Lead LPNs
   - DM Foot Exam
3. New Diagnosis
4. Patient Education
MDI Evaluation: Center for Health Research

The evaluation is focused on providing short-term results to inform the implementation process and long-term effectiveness of the MDI models, specifically:

- Quality outcomes including care gap closure
- Overall health
- Access
- Cost
- Marginal impact of the various levels of MDI
Care Gaps

Care gaps are a selected group of health care reminders for the patient to improve health outcomes.

- Social Determinants
- Diabetes Screenings
- Cancer Screenings
- Blood Pressure Checks
- Lab Tests
- Provider Appointments
- Vaccinations
Care Gap Opportunities

**Between August 2018 and December 2018:**

**2700**
Flu shots given in dental offices

**253**
Family members saw a nurse during their wait at a dental office

**5152**
Members seen by nurses in dental offices

Population Rate for completed recommended Medical Treatment (Aug-Dec 2018)
Care Gap Opportunities

Between August 2018 and March 2019:

787
Appointments Scheduled

491
Labs completed by LPNs: HbA1c, Microalbumin, Potassium, Creatine, Cholesterol and LDL

8,213
Completed Dental MDI Encounters
Care Gap Closures
Glisan, Beaverton, and Cedar Hills Dental Offices

March 2019:
Exam: Diabetes Annual Exam
Adult Physical

Labs: HbA1c, Microalbumin, Potassium, Creatine, Cholesterol, LDL

Cancer: Colorectal, Breast, Cervical Cancer

Nurse: BP, DM Eye, DM Foot

Dental provides a unique touchpoint for those that have not seen their PCP recently.

Percent of Care Gaps Closed in Same Month of PCP Visit With and without Dental/MDI Visit, March 2019

For members who saw their primary care physician in March, the additional contact with an MDI office corresponds with a higher rate of care gap closures across all categories.

Adult PST Entries Only
N = 45,288
Dental Visits as a Medical Touchpoint

Average Months with Open Care Gap, by Category
Time period: August 2018 – March 2019

- Exams
- Labs
- Diabetic Care Gaps
- Immunizations
- Cancer Screenings

Medical + Dental + MDI Contact
Medical + Dental
Medical Only
Medicare Population

Average Months with Open Care Gap, by Category
Time period: August 2018 – March 2019

- **Exams**
  - Medical + Dental + MDI Contact: 2.83
  - Medical + Dental: 3.59
  - Medical Only: 3.98

- **Labs**
  - Medical + Dental + MDI Contact: 3.46
  - Medical + Dental: 3.44
  - Medical Only: 3.72

- **Diabetic Care Gaps**
  - Medical + Dental + MDI Contact: 3.26
  - Medical + Dental: 4.50
  - Medical Only: 5.91

- **Immunizations**
  - Medical + Dental + MDI Contact: 3.64
  - Medical + Dental: 4.87
  - Medical Only: 5.23

- **Cancer Screenings**
  - Medical + Dental + MDI Contact: 4.03
  - Medical + Dental: 3.91
  - Medical Only: 4.00
Meeting our patients where and when they want care. Offering our patients on-demand options to connect with our high quality providers – by phone, email, or in-person.

**NEW TECHNOLOGY**
- Kp.org (& mobile app)
- E-mail your dentist
- Teledentistry
- Schedule appointments online
- Text reminders

**ALL-UNDER-ONE-ROOF**
- Medical-dental co-location
- New care models
- Medical-dental appt in one visit
- Greater level of coordinated care

**ORAL HEALTH MANAGER**
- Member after visit health report card
- Medical assist in dental referrals
- Dentist Panel Management Tool

**Way Ahead**

**Future**

**Self-Serve**

**Supported**

**Virtual Care**

**Co-located Medical & Dental Clinics**

**Robust Member Tools and Reminders**
MDI Lessons Learned

Opportunities
- Expanded role for dentists/extenders of primary care
- Superior and synergistic teamwork
- Better collaboration with medical specialists for treatment of complex medical conditions
- Better way to promote wellness
- Better way to manage costs
- Bundled payment systems
- Inter-Professional Education

Challenges
- Changing Culture
- Demonstrating the value proposition
- Demonstrating total health equity
- Expanding eligibility
- Access to care
- Payment systems
- IT systems
As part of Kaiser Permanente Northwest’s total health approach, dental assistants routinely check patients’ blood pressure. That’s what happened when Eloise Hirata, a seemingly healthy child, came to have a cavity filled at the Cedar Hills Dental and Medical Office in Beaverton, Oregon, in October 2017.

Her blood pressure was extremely high. A registered nurse and a physician assistant double-checked and confirmed Eloise’s elevated blood pressure. They encouraged her mom, Melisa Hirata, to follow up with the girl’s pediatrician and forwarded a consult via Wisdom.

Doctors determined the problem: Eloise was born with her ureters positioned so that urine backed up from her bladder into her kidneys, diminishing their function and causing hypertension.

Eloise had laparoscopic surgery in February 2018 to attach her ureters to her bladder wall in a way that helps prevent further kidney deterioration.

Eloise’s right kidney is severely damaged, but the situation could have been far worse if it had gone undetected.
Medical + Dental

We’re Better Together!