Welcome to the 2019 Summit!

Dick Thompson, QHN Executive Director



We're Happy you're here!







Thank You for Sharing Your Knowledge & Expertise



Inspirational Speakers!

• Kim Bimestefer-

Executive Director for the Colorado Department of Health Care Policy and Financing

• Len Nichols-

Director of the Center for Health Policy Research and Ethics, George Mason University

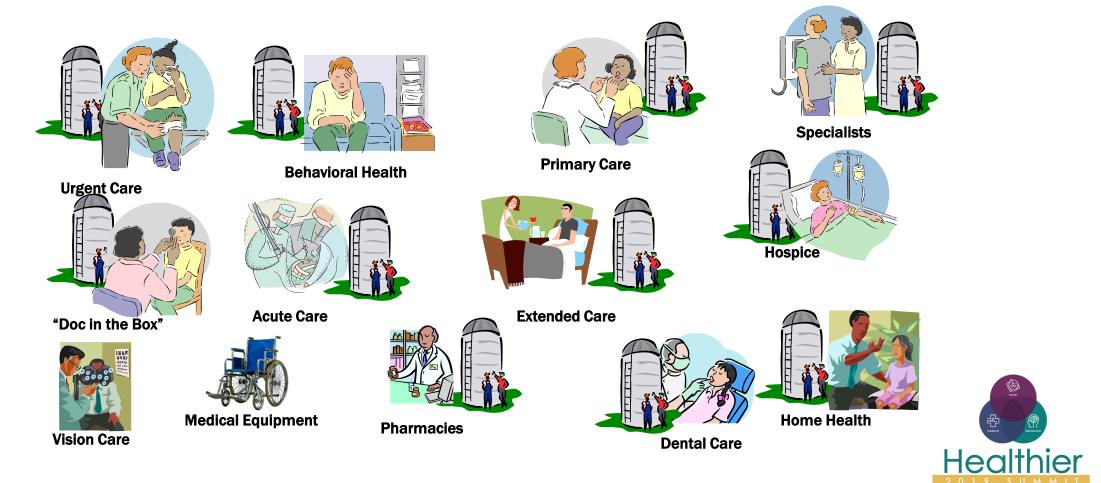
• Stacy Bare-

National Geographic Adventure of the Year, US Army Veteran, and a co-founder of the Great Outdoors Lab



QHN 2004 Job: Connect the silos

Patients Move between Providers . . . But their Data Doesn't!



Together

QHN: <u>Sharing</u> Information to Improve Outcomes

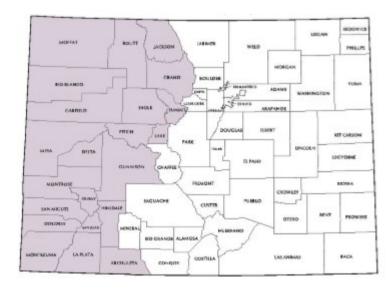
- +94% of providers
- 100% of hospitals
- 3550+ active users
- 750,000 lives with data
- Millions of messages

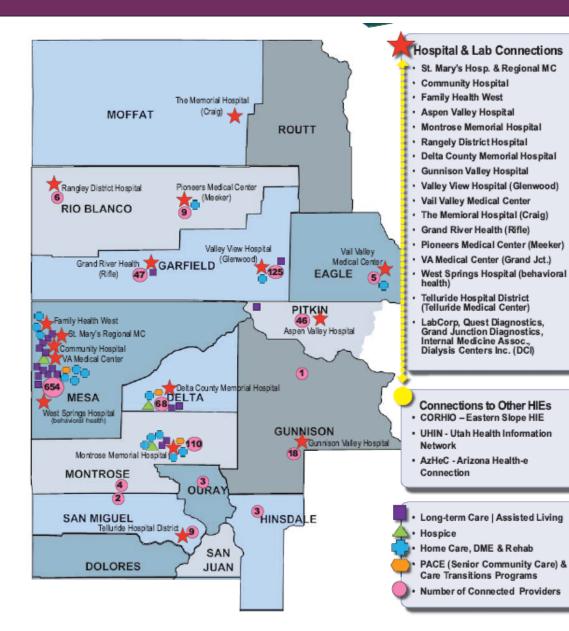


QHN: <u>Sharing</u> Information to Improve Outcomes

"Solid Market Penetration"

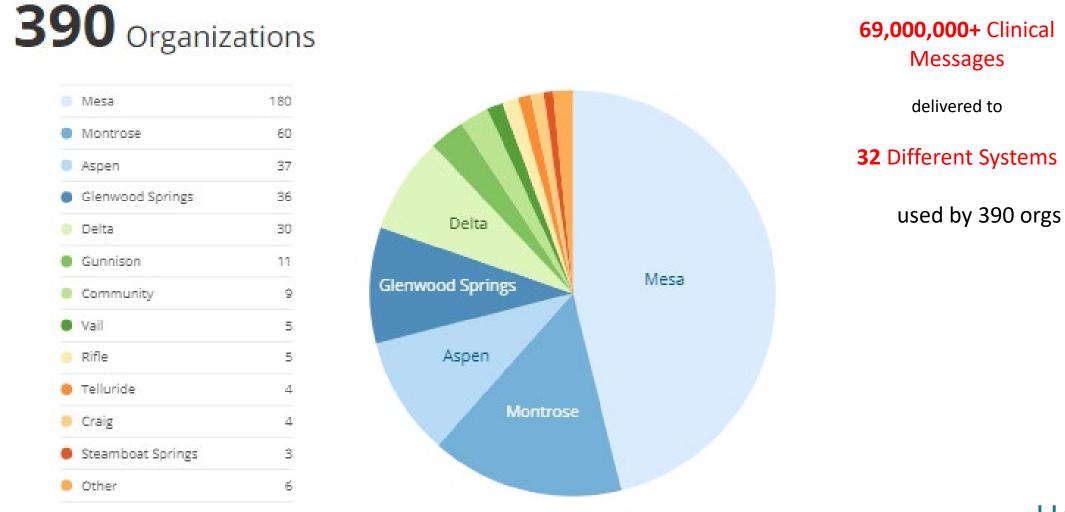
- 100% of Hospitals
- >94% of all medical providers
- 3554 active users







The QHN Network: January 1, 2019





National and Regional Press



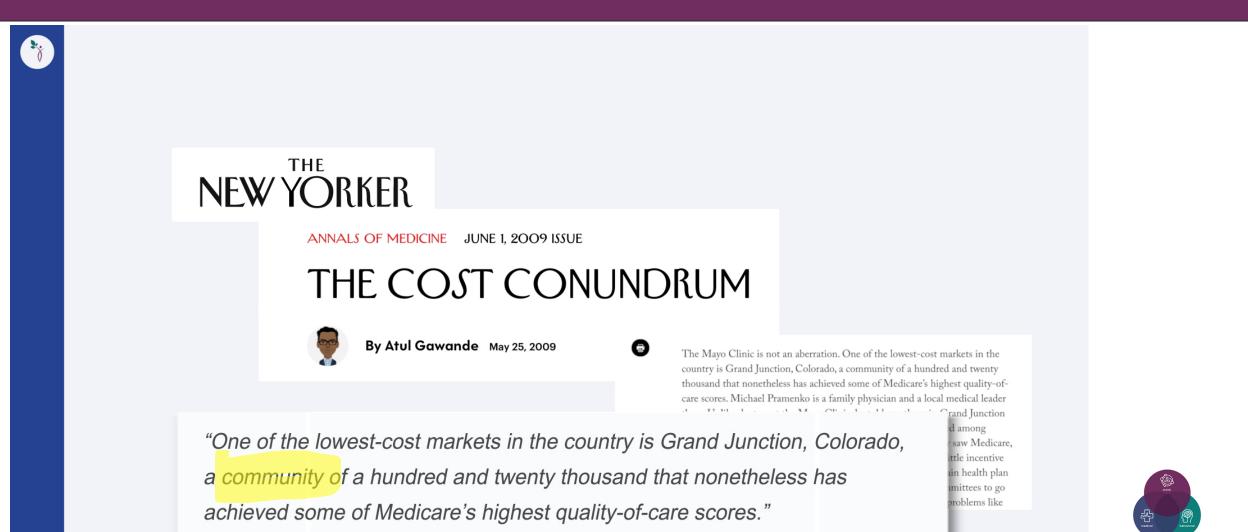






National Awards

National Recognition



Hea

Together

Okay – great. So What?

My Premiums keep going up.

What's next?



Why the Focus on Health Care Costs?

¹Colorado Private Sector – Consumers and Employers

- 2016, Colorado Median Income: \$65,718
- 2016, Avg Cost of Private Insurance: \$20,940
- Health Care Coverage Consumes 32% of Median Income

²Colorado Public Sector – Medicaid

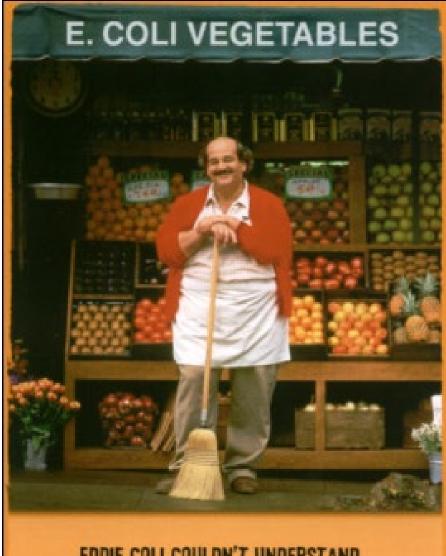
• 2018: Medicaid (which provides health care to low income families) consumes **33%** of the State's Budget

1 Source: Income data from Colorado DOLA LMI Gateway, US Census Median Household Income 2. CO Department of Health Care Policy and Financing





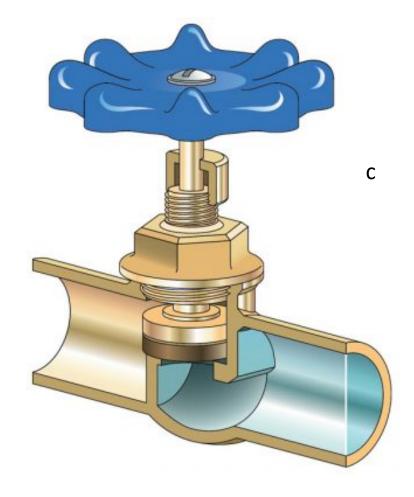
Basic Questions & Answers



EDDIE COLI COULDN'T UNDERSTAND WHY BUSINESS WAS BAD.

We know we need to get better

How do we reduce inappropriate flows of people into the healthcare system?





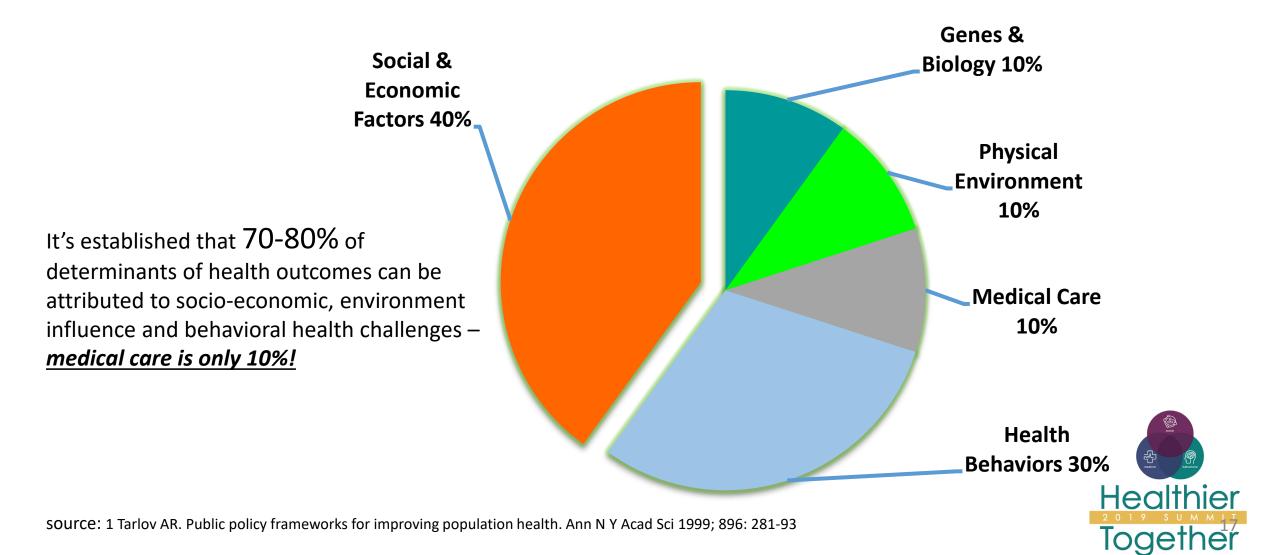
We Know Relationships Matter – especially for those at risk or in crisis

- With Service Providers
- Family
- Friends
- Peers and Colleagues





Social Determinants of Health



Familiar Problem: Silos of Care that don't talk to each other!





What Assets Do We Have?

- Legacy of community collaboration
- Trusted Custodian of Data
- Data use and consent agreements
- Disparate systems connectivity
- Automated Data Collection/Distribution
- Assessments, screeners, public data, etc.
- Master Person Index

	social	
medical		behavioral



Our Community's Goals:

- Identify "whole person" needs for those at risk
- Create a self organizing community wide care team
 - Know who is on the care team including family and friends
 - How best to communicate with them
- Leverage the work and relationships already in place
 - What has been done and what needs to be done
- Organize and Prioritize Actions
 - To get the right stuff done, by the right people, at the right times
- Avoid inappropriate use of the healthcare system



It's not the first time we've made a big leap forward!









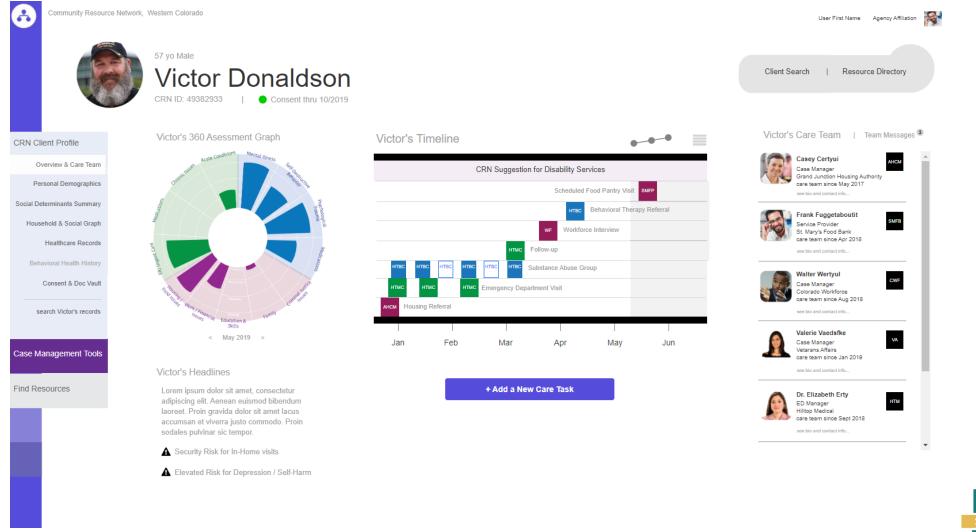




Second Place

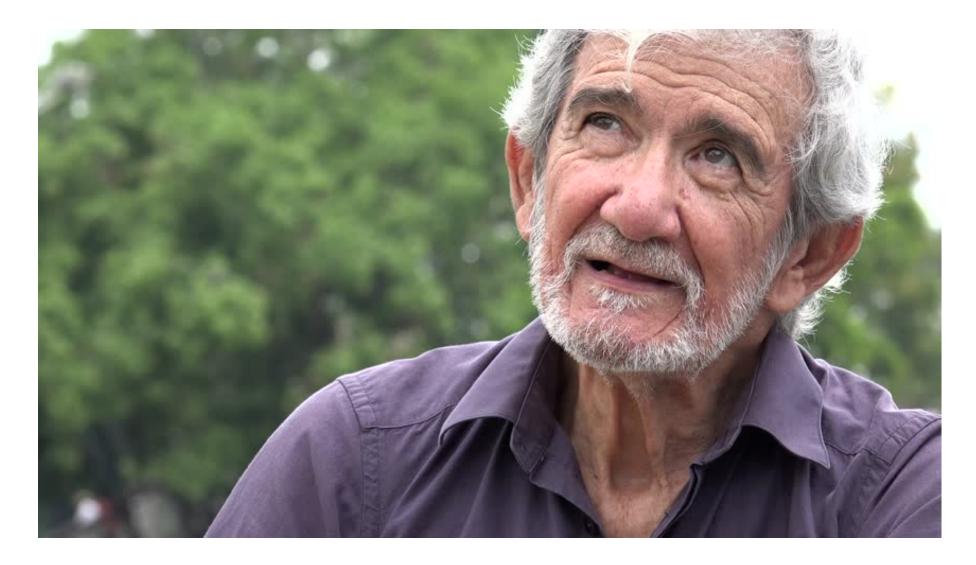
Community Resource Network - The Social Determinants of Health Client Profile, a part of the Community Resource Network, creates a whole-person picture across physical, behavioral, and social domains to expedite help for those most at risk, fill in the gaps in care, and optimize well-being.

CRN Dashboard



Healthier Together

The Problem- Bill's story





Community Resource Network





