Azara Patient Outreach

Raising the Sails of Cancer Screenings

PRESENTED BY:

Dr. Jennifer Scoufos, D.O.Chief Medical Officer

Health & Wellness Center, Inc.

Kaitlyn Gordon

Clinical Improvement Specialist Azara Healthcare **Brooke Lattimore, MBA**

Chief Operating Officer

Health & Wellness Center, Inc.



Today's Presenters





Dr. Jennifer Scoufos, D.O.Chief Medical OfficerHealth & Wellness Center, Inc.



Brooke Lattimore, MBA
Chief Operating Officer
Health & Wellness Center, Inc.



Kaitlyn Gordon
Clinical Improvement Specialist
Azara Healthcare

Today's Agenda



AZARA PATIENT OUTREACH OVERVIEW

APO AT HWC: THE NEED

IMPROVEMENT STRATEGIES

THE AZARA TOOLS

RESULTS & LESSONS LEARNED

Azara Patient Outreach: Overview



Automated Patient Outreach Why Do We Need It?





More customized outreach capabilities



Increased appointment bookings



Higher treatment plan adherence & fewer unplanned hospital admissions



Improved patient satisfaction



Improved healthcare outcomes

Mobile Phone Statistics

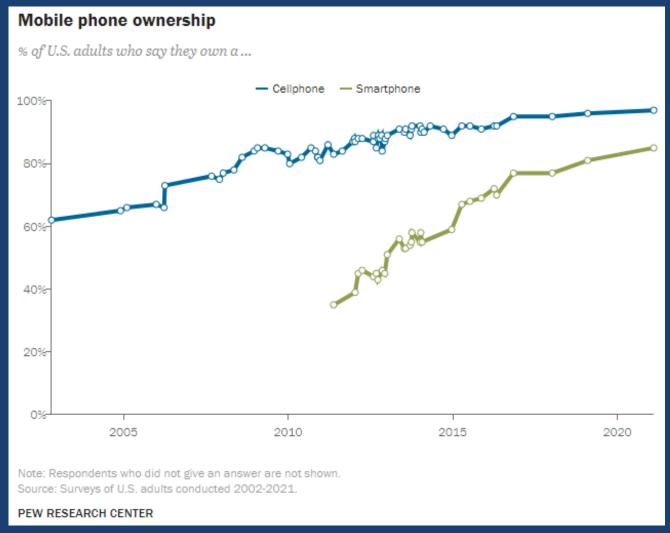


97%

Percent of people in the United States who have a cell phone

85%

Percent of people in the United States who have a smartphone



Promoting Patient Engagement





Automated and targeted campaigns

Text messaging is most effective

Use analytics to reach the right people at the right time with the right message

Data humanizes and drives meaningful experiences

Track results and adjust campaigns

Utilize flexible solutions to reach diverse populations

Available SiFi Campaigns



Cancer Screening

Breast

Cervical

Colorectal

Unreturned FIT Kits

Chronic Disease

Diabetes A1c

Comprehensive Diabetes

Undiagnosed Hypertension

Hypertension Control

CKD Screening Patients w/ HTN

CKD Screening Patients w/ Diabetes **Pediatrics**

Childhood Immunizations

Well-Child Visits

Adolescent Immunizations

HPV Vaccination

Preventative Visits

Patients Without Visits

Members Without Visits

Unmatched Patients

Transitions of Care

Seasonal Flu

Chlamydia Screening COVID-19

Immunization Availability

> 2nd Dose Reminder

Booster Dose Reminder Medicaid Eligibility

Initial Redetermination

Follow-Up Redetermination

Redetermination Date Passed



Requires Payer Integration



Requires HIE

What's New in DRVS? | Recent APO Updates

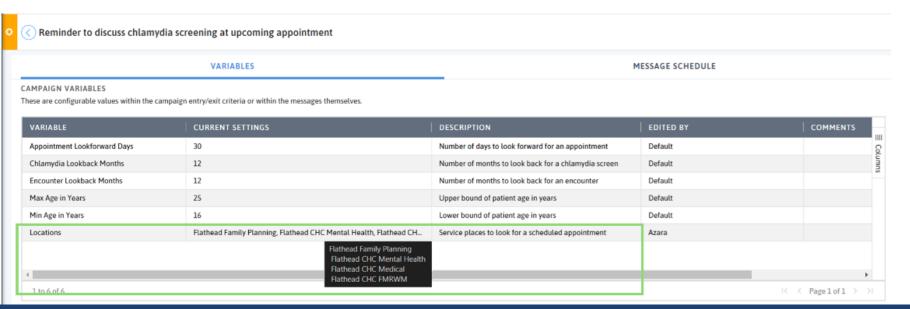


ANNOUNCEMENT

APO Appointment Campaigns now include a Location Variable

Within the Campaigns that require an appointment to be scheduled, a new "Locations" variable is available for use.

- Admins can use this new Locations variable to specify the locations to target in outreach based on the patient's **scheduled appointment location**.
- This is accomplished via a multi-select drop down, allowing you to select a subset of clinic locations (these are the same list of locations that are within the Locations Admin page).
- Location Groups are included in the drop down list and are displayed at the top of the list. You can easily create a Location Group within the Locations Admin specifically for APO, and utilize it with the new Locations variable.







Edit Variable		×
These are configurable values within the campai	ign entry/exit criteria, or within the messages themselves.	
VARIABLE NAME	SELECTED LOCATIONS	
Locations	1400 Cambridge St. V	
Service places to look for a scheduled appointment COMMENTS	t Search Q Select All	
	1400 Cambridge St.	
Canaal	70 Blanchard Rd.	
Cancel	Confirm	
	ACH - Needs Update	К

APO: The Need at Health & Wellness Center, Inc.



PROJECT BEGINNINGS: THE BOW

Why?

Need for improvement in cancer screening rates

Post-pandemic times

Drastic drop in the 3 cancer CQMs



THE UGLY TRUTH: AKA-THE POOP DECK

2020

- Elective colonoscopies suspended
- Mammogram centers closed
- Wellness exams suspended at most centers

2021 UDS

- Colorectal cancer screening rate: 11.3%
- Breast cancer screening rate: 21.3%
- Cervical cancer screening rate: 22.5%



PUTTING IT ALL TOGETHER: STRATEGIC PARTNERSHIPS AT THE HELM



Improvement Strategies



GENERAL STRATEGIES

1. Find care gaps

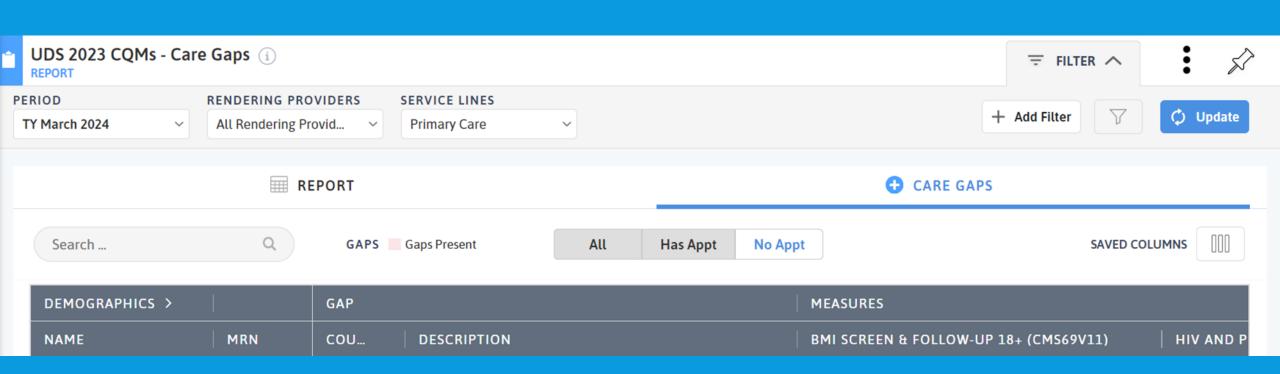
2. Delegate ownership of care gaps

3. Outreach to patients

4. Use ALL tools you have!



GENERAL STRATEGIES | CARE GAPS



GENERAL STRATEGIES | OWNERSHIP DELEGATION

Who owns the responsibility:

- Provider?
- Nurse?
- Navigator?
- Community Health Worker?
- Care Coordinator?

GENERAL STRATEGIES | PATIENT OUTREACH

- Provider: at time of visit, portal
- Nurse: at intake, over phone, letter, portal
- Navigator: over phone, CareMessage, postcard
- Community Health Worker: at time of visit
- Care Manager: over phone, CareMessage

GENERAL STRATEGIES | USEYOUR TOOLS!

CareMessage + Azara DRVS = Azara APO

COLORECTAL CANCER SCREENING | IDEAS FOR IMPROVEMENT



Azara

- Care Gaps
- APO/Outreach
- Next Steps: Azara Care Connect

Staff & Education

- Nurse navigators
- Pins, Buttons,& Bracelets
- Patient Checkin Questions
- Inflatable Colon

Process

- FIT Test Mailings
- Standing Orders
- Exact Sciences
 Partnership

BREAST CANCER SCREENING | IDEAS FOR IMPROVEMENT



Azara

- Care Gaps
- APO/Outreach
- Next Steps: Azara
 Care Connect

Staff & Education

- Incentives for Patients & Staff
- Make it convenient!
- T-shirts for Staff
- Social Media
- Awareness Months

Process

- Standing Orders
- MobileMammography
- State Sponsored BCC Program

CERVICAL CANCER SCREENING | IDEAS FOR IMPROVEMENT



Azara

- Care Gaps
- APO/Outreach
- Next Steps: Azara Care Connect

Staff & Education

Exam Room Posters

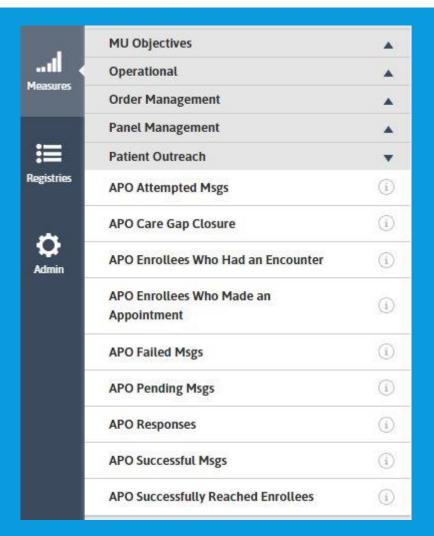
Process

- Home HPV Testing
- Find Outside Paps!
- IncorporateInto Every Visit

The Azara Tools!

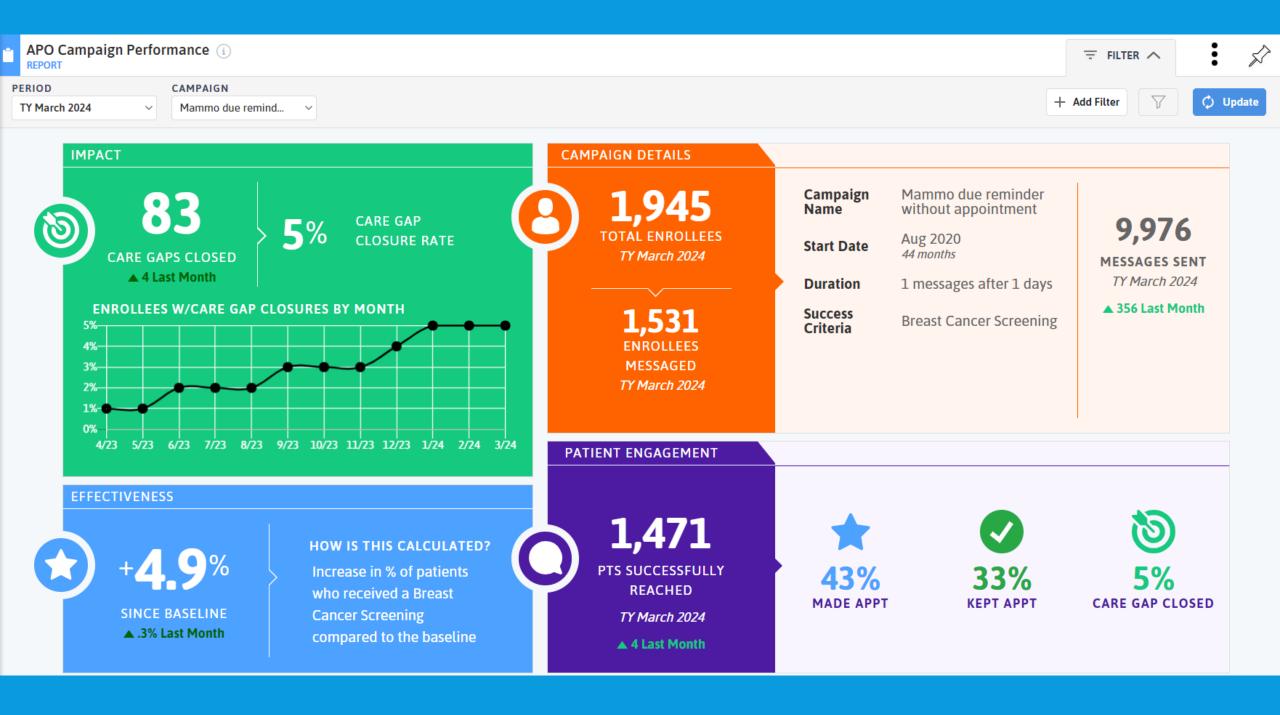


THE TOOLS | APO MEASURES AND REPORTS



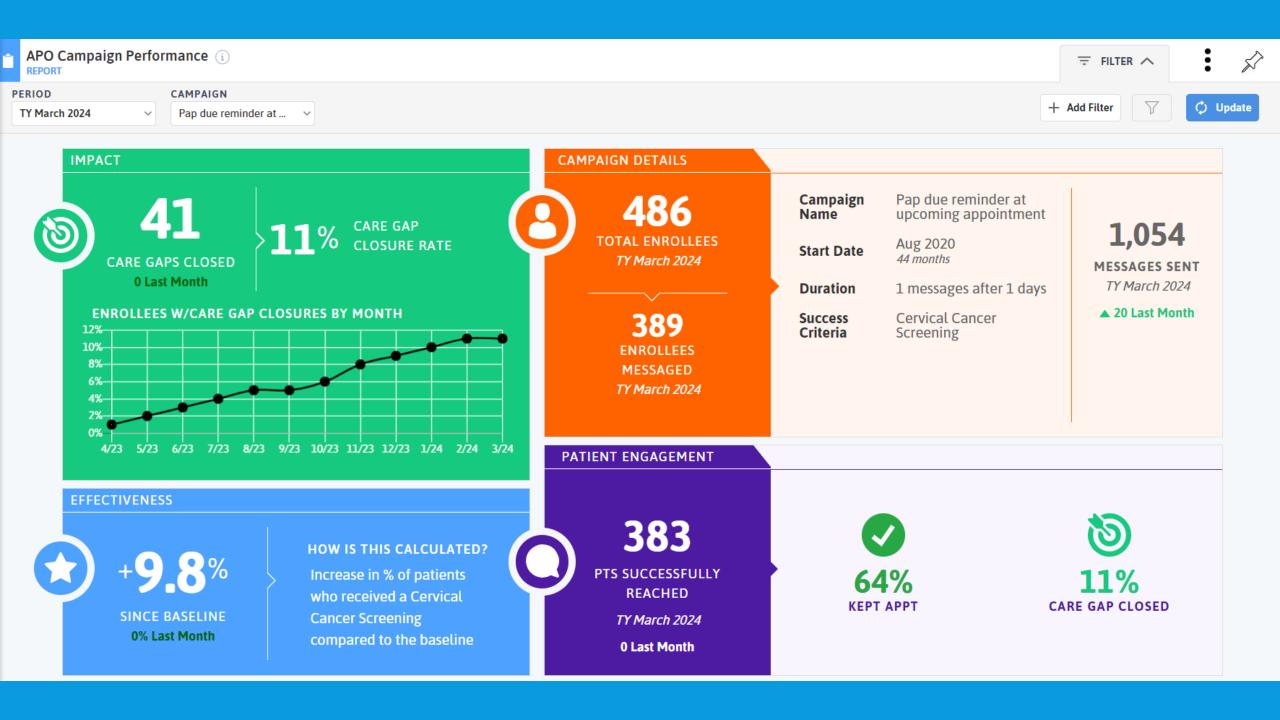
APO REPORTS | BREAST

Mammo Due Reminder Without Appointment



APO REPORTS | CERVICAL

Pap Due Reminder at Upcoming Appointment



CAMPAIGN PARAMETERS

Variables & Settings

Mammo due reminder without appointment

VARIABLES MESSAGE SCHEDULE

CAMPAIGN VARIABLES

These are configurable values within the campaign entry/exit criteria or within the messages themselves.

		EDITED BY	COMMENTS	
0	Number of days to look forward	Azara		
2	Number of months to look back	Default		
4	Number of months to look back	Default		
0	Lower bound of patient age in ye	Default		
5	Upper bound of patient age in y	Default		ľ
2 4 0		Number of months to look back Number of months to look back Lower bound of patient age in ye	Number of months to look back Default Number of months to look back Default Lower bound of patient age in ye Default	Number of months to look back Default Number of months to look back Default Lower bound of patient age in ye Default

1 to 5 of 5

ENTRY CRITERIA

This is how we detect if a patient should ENTER the campaign:

Female patients aged [40y, 75y), who have had a primary care visit in the past 12 month(s), and have no appointment in the next 90 day(s), and have not had a Mammo in the past 24 month(s)

EXIT CRITERIA

This is how we detect if a patient should EXIT the campaign:

Patients who no longer meet generic entry criteria, or have had a Mammo in the past 24 month(s), or have an upcoming appointment in the next 90 day(s)

VARIABLES MESSAGE SCHEDULE

CAMPAIGN VARIABLES

These are configurable values within the campaign entry/exit criteria or within the messages themselves.

VARIABLE	CURRENT SETTINGS	DESCRIPTION	EDITED BY	COMMENTS	l	
Appointment Lookforward Days	90	Number of days to look forward	Azara			Co
Encounter Lookback Months	12	Number of months to look back	Default			nmns
Mammogram Lookback Months	24	Number of months to look back	Default			
Min Age in Years	40	Lower bound of patient age in ye	Default			
Max Age in Years	75	Upper bound of patient age in y	Default		✓	

1 to 5 of 5

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ENTRY CRITERIA

This is how we detect if a patient should ENTER the campaign:

Female patients aged [40y, 75y), who have had a primary care visit in the past 12 month(s), and have an appointment in the next 90 day(s), and have not had a Mammogram in the past 24 month(s)

EXIT CRITERIA

This is how we detect if a patient should EXIT the campaign:

Patients who no longer meet generic entry criteria, or have had a Mammogram in the past 24 month(s), or no longer have an appointment in the next 90 day(s)

Pap due reminder at upcoming appointment

VARIABLES MESSAGE SCHEDULE

CAMPAIGN VARIABLES

These are configurable values within the campaign entry/exit criteria or within the messages themselves.

VARIABLE	CURRENT SETTINGS	DESCRIPTION	EDITED BY	COMMENTS	
Appointment Lookforward Days	90	Number of days to look forward	Azara		ľ
Encounter Lookback Months	12	Number of months to look back	Default		ľ
Pap/HPV Lookback Months	60	Number of months to look back	Default		ľ
Pap Lookback Months	36	Number of months to look back	Default		

1 to 4 of 4

ENTRY CRITERIA

This is how we detect if a patient should ENTER the campaign:

Female patients aged [21y, 65y), who have had a primary care visit in the past 12 month(s), and have an appointment in the next 90 day(s), and have not had a Pap in the past 36 month(s), and have not had a Pap/HPV in the past 60 month(s) if aged >= 30

EXIT CRITERIA

This is how we detect if a patient should EXIT the campaign:

Patients who no longer meet generic entry criteria, or have had a Pap in the past 36 month(s), or have had a Pap/HPV in the past 60 month(s) if aged >= 30, or no longer have an appointment in the next 90 day(s)

Pap due reminder without appointment

VARIABLES MESSAGE SCHEDULE

CAMPAIGN VARIABLES

These are configurable values within the campaign entry/exit criteria or within the messages themselves.

Number of days	to look forward Azara	
Number of mont	ths to look back Default	
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1 to 4 of 4

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Results & Lessons Learned



TO THE STERN | COLORECTAL

Baseline (Year End 2022)	Year End 2023	Q1 2024
12.1%	17.6%	22.2%







TO THE STERN | BREAST

Baseline (Year End 2022)	Year End 2023	Q1 2024
26.7%	33.0%	37-9%







TO THE STERN | CERVICAL

Baseline (Year End 2022)	Year End 2023	Q1 2024
21.7%	29.7%	32.2%







MAKING WAVES | Q1 2024 IMPROVEMENTS

MEASURE	RESULT	CHANGE	TARGET
Colorectal Cancer Screening (CMS 130v11)	22.2%	+ 7.7% 🔺	30.6%
Cervical Cancer Screening (CMS 124v11)	32.2%	+ 5.9% 🔺	39.3%
Breast Cancer Screening Ages 50-74 (CMS 125v11)	37.9%	+ 6.7% 🔺	37.3%

UDS CHANGES 2023

- August 2023:
 - HRSA included optometry and psychiatry in cancer screening measures
 - oHWC has both optometry and psychiatry services
 - Numbers plummeted
 - Panic ensued
 - ONew plan of action

LESSONS LEARNED

- Be patient, persistent, and consistent!
 - Weekly QI Meetings to review
 - Bi-weekly Leadership Meetings to review
 - Monthly AxCS call with Grant Team & NCI (Stephenson Cancer Center at OU)
- > Rural Challenges:
 - Limited Resources for outpatient mammography and colonoscopy
 - Mobile Mammo down to 1 bus in Oklahoma
 - Patients do not want to get colonoscopies
 - Transportation barriers



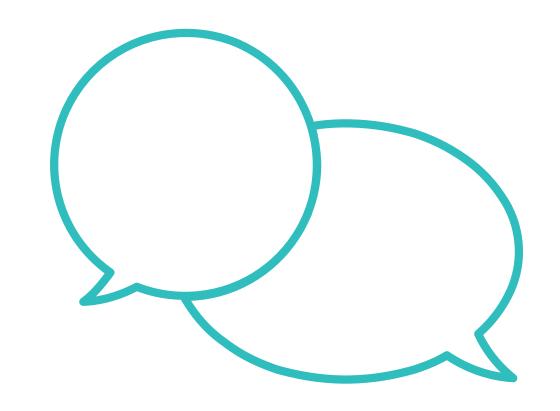


SMOOTH SAILING!

Using a combination of tools offered by AZARA and partners

Questions?







Achieve, Celebrate, Engage!

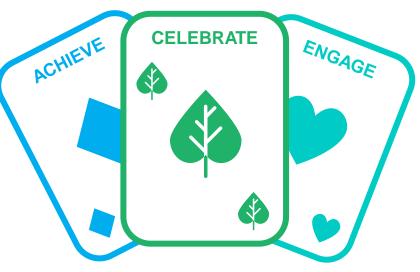
ACE'd it? Share your DRVS success story and become an Azara ACE!

Show your organization has used DRVS to Achieve measurable results, Celebrate improvement in patient health outcomes, and effectively Engage care teams and/or patients. Stories should showcase how DRVS helped your organization overcome a challenge, the tools and solutions used to drive improvement and details of the successes that resulted from your initiatives. ACEs should be able to provide examples that quantify quality improvement, cost savings, operational efficiency or patient health improvement.

Benefits:

- Azara will help tell your story and provide a client-branded version for your use
- Potential to create a 2-4 minute video or hour-long Azara-hosted webinar
- Win Azara swag!





Submit your success story by completing the form at this link or scan our QR code:

See this year's ACE posters in the Ballroom Foyer!

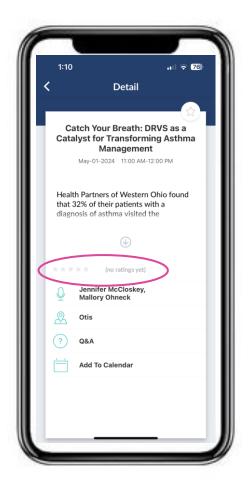


We Want to Hear From You!

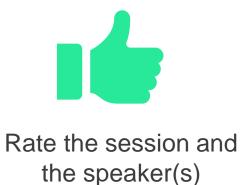


Click on the session from your agenda in the conference app.

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Thanks for attending!

