

# Student Health Center as the Patient Centered Medical Home

Did Anyone Tell the Student?

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# Agenda

1. Introduction & Overview
2. Definitions
3. Student Centered Medical Home (SCMH)
4. Challenges of the SCMh
5. Current Status: Where are you on your Journey?
6. Revisiting Value
7. Behavioral Health in the SCMh Setting
8. The Journey to SCMh
9. Student Health Center Advisory Board

# About Dennis Mihale, MD, MBA

Serving as CHP Student Health's Chief Medical Officer, Dr. Mihale leads an industry-best care management team, helping position CHP as an authority in the student health market.

Dr. Mihale's vast experience includes more than 20 years working with executives, Fortune 100 companies, healthcare technology and biomedical firms, and quality improvement committees with a strong focus on strategic planning and working with physicians.

Throughout his career, Dr. Mihale has promoted best outcomes for patients and members while improving relations with network physicians and maintaining regulatory compliance. He has worked in the areas of MA risk adjustment, HEDIS, MLR, physician documentation and coding, utilization, and credentialing.



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# Overview: One Person's Perspective

The Student Health Center (SHC) is in a unique position as part of the university infrastructure due to its presence as an invaluable resource thanks to strong relationships with other departments and divisions such as Academic Affairs, Dean of Students, Student Affairs, Public Safety, and International Affairs.

These relationships can enhance the ability of the Student Health Center to provide seamless and early intervention as part of an interdisciplinary team.

Collaborative interventions for medical and behavioral health challenges often translate into reduced morbidity, mortality, and monetary savings.

# Defining Key Terms

- **The Patient Centered Medical Home (PCMH)**
- **The Triple Aim**
- **The Student Health Center (SHC) as the PCMH**

# Patient Centered Medical Home

According to the AHRQ, the fundamental components of the Patient Centered Medical Home are:

1. Comprehensive care
2. Patient centeredness
3. Care coordination
4. Access
5. Quality and safety

# Patient Centered Medical Home

The Patient-Centered Medical Home is a model that puts patients at the forefront of care. PCMHs build better relationships between people and their clinical care teams.

Goals of the PCMH:

1. Engage the student and teach them to participate in their care
2. Coordinate the care
3. Manage the whole student vs. today's complaint
4. Build safety and trust
5. Seamless and early collaborative intervention with other support and university resources

# The Triple Aim

## *Geared Towards the Student Population*

The term, “Triple Aim” refers to the pursuit of improving:

1. Improve the patient experience: quality and satisfaction
2. Improve the health of populations; and
3. Reduce the per capita cost of health care.

**CHP’s version** is focused on improving the experience for college students:

1. Improve outcomes
2. Increase student satisfaction
3. Reduce the cost of care: due to enhanced efficiency and effectiveness of resource utilization



# The Student Health Center as the PCMH

## *The Student Centered Medical Home*

The Student Centered Medical Home is more than *brick and mortar*. Its efforts center on engaging the student and teaching the student how to participate.

1. Patient Centered Medical Home
2. Integrated into the student's lifestyle
3. Student centric
4. On campus
5. Built for students
6. Integrated into full spectrum of campus resources

# The Student-Centered Medical Home

- **Campus Model vs. Community Model**
- **SHC Professional vs. Student Perspective**
- **Why do this? What is the Value?**

# Student Health Center as PCMH

What are the goals of the Student Health Center?

1. The first place to go for treatment
2. The place that coordinates care
3. Where students learn about healthcare
  - How to navigate the system
  - How to care for themselves
  - How to actively participate in their care
4. Learning the value of primary care

# Student Health Center as PCMH

How can the Student Health Center work to promote itself as the PCMH?

1. Engage students with 24/7 access
2. Talk *with* students not *at* them
3. Make the right thing to do the easy thing to do
4. Provide flexibility in access, hours, venue, tools
5. Leverage students' love of technology
6. Guide student, coordinate care, help with navigation
7. Lead feedback between facilities, out of network providers and students
8. Collaborate with Dean of Students, Academic Affairs and other relevant resources

# Community Model Student Health Center

The community model relies on patients staying healthy, minimizes patient engagement, and may ignore teaching students how to navigate health care system or participate in their own care.

1. Students treated by community physicians
2. SHC acts as triage making holistic view of patient difficult
3. Episodic care vs. care coordination
4. Communication with community physicians is difficult
5. Feedback from community physicians is challenging
6. Patient engagement is extremely difficult
7. Safety and trust is more challenging

# Campus Model Student Health Center

Focus is care coordination, engagement and a partnership with the patient actively involving him or her in their care.

1. Students treated at SHC in partnership with specialists
2. SHC is the center of care coordination
3. Holistic view of patient
4. Focus is care coordination and managing the patient
5. Communication with community physicians is essential
6. Patient engagement is a must
7. Safety and trust becomes realistic
8. Student's Medical and Behavioral Health Care is a component of University Based Support Services

# Student Centered Medical Home

## *SHC Perspective*

### What are the goals and objectives of the SHC?

1. Is it more than just treating the student?
2. Teaching students to be effective healthcare consumers?
3. Can you deliver value even after student leaves school?
4. What about helping students attend classes? Presenteeism
5. How important is graduation?

# Student Centered Medical Home

## *The Student Perspective*

### **What are the goals and objectives of the student?**

1. Do they have healthcare goals and objectives?
2. Is their perspective: Fix me now so I can go back to class?
3. Do they understand patient engagement? Do they care?
4. They have incredible access to healthcare information.
  - How are they using it?
5. Whose job is it to make them “better?”



# Value of the SCMH: Let Me Count the Ways

For the Student Health Center, the student, and the school, the value of the Student Centered Medical Home is clear.

1. An engaged student
2. Better care
3. Improved adherence to treatment plans
4. Increase patient satisfaction
5. Better outcomes
6. Reduced cost of care – not so fast.
7. Value of SHC as part of student support/care teams
8. Risk reduction
9. Improved student retention rates

# Challenges of the SCMh

- **Engaging the Student**
- **Behavioral Health**
- **Access: Day and Night**
- **ER Utilization**
- **SHC Utilization**
- **Bilateral Sharing of Information with University and Community Resources**

# Behavioral Health Challenges for Students

Is an EAP enough to help students with BH issues? Do we need more to help them attend classes, stay in school and graduate?

1. 50% of college students have BH challenges
2. You cannot treat what you do not know
3. The student must feel safe and trust you
4. Student engagement is critical
5. Early identification is essential
6. Make it easy for student to reach out

# Behavioral Health in SCMH Setting

What is all the fuss?

1. BH interferes with classes and enjoying college life
2. Students arrive with BH issues. Many are unknown
3. There are never enough counselors
4. Students may be reluctant to reach out
5. Are students aware of BH resources?
6. Access is critical: There is a shortage of psychiatrists and BH counselors

# BH in the SCMH Setting: A Case Study

## Exacerbations Happen Every Day

- Help has to be available 24/7 and within arm's reach
- Confidentiality
- Flexible Schedule
- Follow up – Follow up – Follow up
- Treatment that matches the patient

# **Current Status: Where are you on your SCMH Journey?**

- **Where are you on your SCMH Journey?**
- **How to Move it Forward**

# Current Status: CHP's Perspective

Where we think you are. Need your feedback.

- Some are already there
- Some are on their way
- Many are just starting
- Others are figuring out how to start
- How many think PCMH's are a government plot?

***Where do you think you are?***

# The Journey

- **Building a Roadmap**
- **What Should you Expect from your Payor?**



# Building a Roadmap

There are many resources available to you and your school.

1. NCQA
2. AHRQ
3. AAAHC
4. JCAHO (Joint Commission)
5. Schools that have done it
6. PCMH Certification: Good person to have on the team

# The Role of the Payor

CHP's Opinion. Our approach. Not telling others what to do.

1. First Do No Harm: Do not get in the way
2. Ask the SHC what they need
3. Provide resources to meet SCMH Needs
4. Leverage technology
5. Recognize the SCMH (SHC) as the PCMH
6. Don't overuse your network

# The Role of the Payor

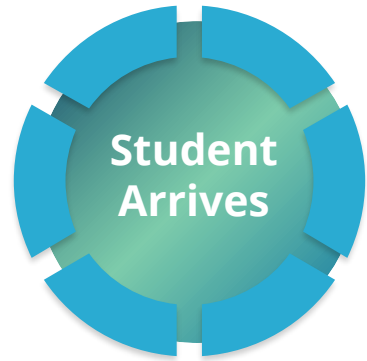
Payors interact with students whether they like it or not. It comes with the territory. How should they engage with the students.

***What about asking the SHC? Heaven forbid.***

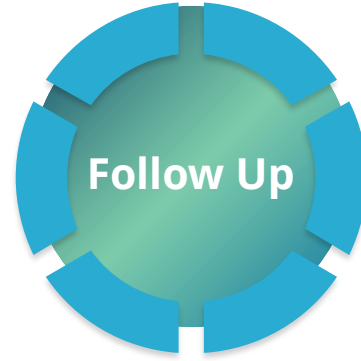
1. Support all students not just health plan members
2. Engage Students in the manner they want
3. Protect Privacy and Anonymity
4. Be supportive but not intrusive
5. Continually Direct Student Back to SCMH
6. Be Available when SHC is Closed or Unavailable
7. Touch the icon on the phone: Make the right thing to do the easy thing to do.

# Becoming a Student-Centered Medical Home

*How would your SCMH workflow compare?*



- Global View
- Education
- Treat patient not symptom



- Safety and Trust
- Did they Understand
- Are they Following



½ of Students Have BH Challenges  
College is Just One of Them



Who Decides When Treatment for a Problem Ends?

# SHC Advisory Board

- Purpose
- Value
- Commitment

# SHC Advisory Board

CHP would like to create value for SHC's by creating an advisory board that shares information between members and helps CHP understand what support SHC's need.

## **Purpose**

Share ideas with colleagues and CHP on ways to improve the delivery of student health care. Allow CHP to understand what is needed and to provide the most appropriate support to SHC/SCMH

## **Value**

The collective intelligence of the group. Better outcomes, improved satisfaction (you and the student) reduced cost.

## **Commitment**

One call a quarter. One in person meeting annually to coincide with annual meetings.

## **Note**

You do not have to be a CHP client to join the advisory board.

*Thank you for your time.*  
**Questions or Comments?**