# Testimony HB2216 - Lindsay Miller, MBA

Thank you Chair Representative Nosse, Vice Chair Navadi and Vice Chair Nelson, and committee members for allowing me to testify today in support of House Bill 2216.

My name is Lindsay Miller. I am a nonprofit consultant based in Hood River, Oregon. I work with Dr. Foster on the Connected Care for Older Adults pilot. As Dr. Foster mentioned, Connected Care uses Community Health Workers who are specially trained in age friendly care and working with older adults. These CHWs are embedded in Primary Care clinics and work in partnership with primary care providers, expanding their capacity to meet the complex needs of this critical patient population.

I wanted to take this chance to share with you how, through a 90-day intervention that costs just $1500 per patient, our Connected Care CHWs have been able to make life changing improvements in the lives of patients and families across our state. I share these stories to emphasize the ability of Community Health Workers to provide high quality, culturally relevant, cost effective care and I urge this committee to seek out sustainable mechanisms to fund their services. Support for HB2216 is an important first step.

Our Community Health Workers are effective system navigators and resource connectors. One patient was at risk for losing his housing and our Connected Care CHW was, together with his doctor, able to get him on a priority list for low-income apartments. Another patient was able to get hearing aids after nearly two years of trying, which was life changing for her!

At another clinic, the Connected Care CHW was able to get a ramp installed with donated materials and labor for one patient who was experiencing social isolation and depression because they couldn't get their walker in and out of the house. This patient shared that the Connected Care program was a "Godsend" to him, helping him get around more easily and connect with his community.

When patients exit the Connected Care program, we ask them for feedback about their experience. What we hear is that working with a Community Health Worker helps patients connect to valuable resources, access the care they need, makes them feel validated and cared for, and gives them peace of mind.

One patient told us "I was able to stay in my residence that I have been living in for the past 12 years without fear of eviction and was able to have the landlord update many of the things in the home that were worse for wear. My Community Health Worker gave me my peace of mind." Another patient shared, "My daughters are more aware that I'm becoming more forgetful, and they are able to make a safety plan for me with lovely support from all my family members."

We also ask primary care providers for feedback on our program. Many of these clinicians have not had Community Health Workers in their clinics before this program, and their input is overwhelmingly positive. One physician told us, "Having a Connected Care CHW has expanded our ability to address patient needs in a personal, timely, and specific manner."

Another shared, “Our Community Health Worker’s ability to meet patients in their home, identify community resources that I'm not aware of, and help patients complete the Advanced Directive has been incredibly helpful!”

In summary, Community Health Workers working at the top of their practice have a significant and positive impact on patient experience, access, and outcomes. They increase the capacity of higher level clinicians to do their work, at a time when clinical workforce shortages are a major issue, especially in rural areas. I urge this committee to develop and mandate sustainable payment solutions to support the work of Community Health Workers in our state. Passing HB2216 is an important first step in this direction.

Thank you for your time,

Lindsay Miller, MBA

CONNECTED CARE

Connected Care is an innovative pilot program that uses Community Health Workers (CHWs) in Primary Care settings to improve care for frail older adults in rural areas.

- **For patients 55+ and living independently** (not in an assisted living facility or receiving home health services) identified as frail by a Primary Care Provider.
- **CHWs conduct home visits** and implement the Connected Care Protocols based on the 4Ms - What Matters, Medication, Mentation, and Mobility.
- CHWs provide **information and education** to patients and families, connect them with existing **community services**, and refer them for **further assessment and support**.
- CHWs chart **directly in the EMR, and route important information** or actions needed back to the patient's Primary Care Clinician and health care team.
- Patients leave the program when relevant protocols are complete - **roughly 90-days**.

The Connected Care Protocols are based on the 4Ms of the IHI's Age-Friendly Health Systems Framework. Each protocol includes tools, scripts, and resources that help CHWs discover important information about a patient's well being, wishes, and priorities.

Institute *for* Healthcare Improvement

Age-Friendly Health Systems

## What Matters

- What Matters Conversation
- Support to complete the Advance Directive

## Mentation

- Info on normal brain aging
- Pre -screening for dementia, anxiety, depression, and social isolation

## Medication

- Compare in-home med review and current med list
- Flag issues with med list on file for RN/PCP review

## Mobility

- STEADI fall risk assessment
- Footwear review
- In-home fall risk assessment
- Exercise plan

# What are the goals of Connected Care?

1. Improve patient, caregiver, and provider experience
2. Improve health outcomes and quality of life
3. Integrate the 4Ms into Primary Care
4. Help patients maintain their independence
5. Decrease low-value/high-cost care
6. Improve health equity and access to care

CONNECTED CARE

**Better care for older adults in rural areas**

# Patient impact stories


One patient was at risk for losing his housing and our Connected Care CHW was, together with his doctor, able to get him on a priority list for low-income apartments.

Another patient was able to get hearing aids after nearly two years of trying, which was life changing for her!

# Patient impact stories, cont...

The Connected Care CHW was able to get a ramp installed with donated materials and labor for one patient who was experiencing social isolation and depression because they couldn't get their walker in and out of the house. This patient shared that the Connected Care program has been a "Godsend" to him, helping connect him to resources and get around more easily.

# What we're hearing from participating patients...

"I was able to stay in my residence that I have been living for the past 12 years without fear of eviction and was able to have the landlord update many of the things in the home that were worse for wear. My Community Health Worker gave me my peace of mind."

"This program gave me peace of mind for my husband and me with resources for two people that have high medical needs."

"I had major surgery and was able to get assistance for transportation and I was worried about that because my husband could not drive me. It was comforting having the help."

"My daughters are more aware that I'm becoming more forgetful, and they are able to make a safety plan for me with lovely support from all my family members."

# What we're hearing from participating providers...

"The CHW's ability to meet patients in their home, identify community resources that I'm not aware of, and help patients complete the advanced directive paperwork has been incredibly helpful!"

"Having a Connected Care CHW has expanded our ability to address patient needs in a personal, timely, and specific manner."

"I absolutely want to see this program thrive and grow in order to help increase access to services for some of our most vulnerable patients. I love it!"

"Our Connected Care CHW has helped navigate support systems for a caregiver, in order for the caregiver to continue to care for the patient! That was a really profound improvement and impact on the patient's health and I believe is preventing readmission to the hospital."

# For more information

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