Navigating the Healthcare System in Changing Times

LGBT HealthLink, a program of CenterLink
Community Advisory Council 2017 E-Summit, Session 6
Wednesday, May 17, 2017, 2pm EST
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The following individuals have disclosed a relevant financial interest/arrangement or affiliation with a commercial interest who provides products or services relating to their presentation(s) in the continuing education activity. All conflicts of interest have been resolved in accordance with the ACCME Standards for Commercial Support:

Sheryl Zayas, DO - Gilead
Patient Navigation for Cancer Control

BRAD BELNAP
COMPREHENSIVE CANCER CONTROL
UTAH DEPARTMENT OF HEALTH
Being Healthy is Hard...
Comprehensive Cancer Control

“All Utahns deserve equal opportunity and access to achieving good health”

“An individual’s health is in part a product of the social, physical, and economic burden they face, including the quality and safety of our communities, access to education and affordable housing, availability of healthy food, access to healthcare, and the presence of discrimination.”
Understanding the Continuum of Care

**Prevention**
- Tobacco control
- Diet
- Physical activity
- UV protection
- HPV vaccine
- Alcohol use
- Chemoprevention

**Detection**
- Pap/HPV testing
- Mammography
- FIT Testing
- Colonoscopy
- Lung cancer screening

**Diagnosis**
- Shared and informed decision making

**Treatment**
- Health care delivery and outcomes research

**Survivorship**
- Coping
- Health promotion for survivors

Adapted from David B. Abrams. See [http://cancercontrol.cancer.gov](http://cancercontrol.cancer.gov)
What is Cancer Patient Navigation?

Moving a patient across the entire continuum from prevention, detection, diagnosis, treatment, to survivorship or end-of-life care.

- “A Patient Navigator... take[s] individual patients through the continuum of health care as it pertains to their specific disease, ensuring that any and all barriers to that care are resolved and that each stage of care is as quick and seamless as possible”¹
- “Patient navigation in cancer care refers to specialized assistance for the community, patients, families, and caregivers to assist in overcoming barriers to receiving care and facilitating timely access to clinical services and resources. Navigation processes encompass prediagnosis through all phases of the cancer experience.”²

What Does Patient Navigation Look Like?

Seeks to address or eliminate frequently occurring barriers to patients accessing care.¹
- Financial barriers
- Communication barriers
- Medical system barriers
- Psychological barriers
- Other barriers

Does Patient Navigation Work?
The Breast Imaging Nurse Navigator: Measuring the Impact on Coordinated Care Delivery - Results After the First Year

Sharon Lieb Inzetta RN, MS, CBCN®, CN-BN; Laura Musarra BS, MBA
Summa Health System – Akron Campus, Akron, Ohio

Background
Historically, Cancer Care has been identified as fragmented, with barriers for access, timeliness, and coordinated care being problematic. Delays and barriers in breast care delivery may impact patient satisfaction and outcomes, surrounding a breast cancer diagnosis.

The Imaging Nurse Navigator Role was added in October 2014 and challenged to develop a Navigational Model of Care that would impact access, timeliness, and retention across the breast care continuum. Patients were dissatisfied with care delivery and wait time was measured at 35% in 2014.

The Imaging Nurse Navigator would be responsible for improving access and timeliness for breast care, which in 2014, measured 26 days from an abnormal diagnostic finding to a breast biopsy.

Objectives
The Imaging Nurse Navigator would provide education to patients referred for breast follow-up at diagnostic mammogram, coordinate a Diagnostic Plan of Care and a surgical referral - targeting the 48-hour time line established by the Breast Program. The Imaging Nurse Navigator began tracking all patients receiving follow-up recommendations in the breast centers in 2015.

The Imaging Nurse Navigator initially needed to develop a Navigational Model of Care that would define scope of practice and gain support and approval across the interdisciplinary breast team. The Model was presented and approved by the Breast Program Leadership. Support from leadership was recognized as key to successful navigational care process.

The Imaging Nurse Navigator would provide navigational support and care by assessing barriers for access, timeliness, decreasing outmigration and empowering and advocating for breast care that is patient centered and evidence based. Additionally, the imaging Navigator has an important role in outreach, prevention and Survivorship Programming targeting healthy lifestyle behaviors, cancer prevention and decreasing cancer recurrence.

Methods
In 2015, 951 patients were navigated and tracked for follow-up after Diagnostic Imaging/Biopsy in the Imaging Nurse Navigational Data Base. Data analysis for the imaging navigational process has been shown to have measurable impact on timeliness, access, and outmigration for breast care.

The Imaging Nurse Navigator met with patients receiving a referral for breast follow-up after biopsy or surgical referral was made by the radiologist. A Diagnostic Plan of Care was developed, piloted and provided to patients and faxed to the referring physician.

The surgical referral for follow-up was targeted at 48 hours. The Imaging Nurse Navigator has been able to impact timeliness for care often coordinating same or next day follow-up. Navigational care has impacted patient satisfaction and resulted in decreased outmigration and increased referrals for breast care.

The Imaging Nurse Navigator has developed Survivorship Programming including a pre-operative educational class, Interdisciplinary Breast Journal Club, and an Exercise group.

Results

**Figure 1**

<table>
<thead>
<tr>
<th>Days Between Diagnostic Mammogram to Surgical Consult</th>
<th>Days Between Surgical Consult to Biopsy</th>
<th>Total Days Between Diagnostic Mammogram to Biopsy</th>
</tr>
</thead>
<tbody>
<tr>
<td>24.8 (2015 Calendar Days)</td>
<td>10.6</td>
<td>35.4 (2015 Calendar Days)</td>
</tr>
</tbody>
</table>

*Includes 223 cases with consult prior to diagnostic mammogram, 23 refused/biopsy in 2015.

*Days were not removed i.e. patient delay, medical delay, etc.*

**Figure 2**

- Outmigration Declined 4%
- Implies: 38 Incremental Cases Retained

**Figure 3**

- # of Cases Referred for Navigation Increased 32%

**Figure 4**

- Breast Cancer 951
- 2014: 531
- 2015: 420

**Access** - Measurable improvements were demonstrated as a result of navigational care. Consults for patients improved from 12.9 days in 2014 to 3.5 days in 2015. Some day consults increased for 2015 at 38% as compared to 4% in 2014. With the navigational imaging process 74% of patients were now being seen within 2 days for follow-up with a breast specialist.

**Timeliness** - Marked improvements were measured for time from abnormal diagnostic finding to biopsy. In 2014 patients were waiting 25.9 days for biopsy, with navigational imaging care the results reflect 11.3 calendar days.

**Coordination of Care** - Navigational care has improved patient satisfaction, decreased outmigration and increased overall adherence in 2015. The Imaging Nurse Navigator compared to 2014. Increased navigational referrals were up 32%, with 951 patients in 2015 as compared to 717 in 2014. Increased volumes combined with decreased outmigration 1% in 2015 compared to 5% in 2014 have validated the financial increases attributed to navigational care. Increased volumes should result in increased cancer diagnosis, with 12 additional cancers this would generate an added $250,000 in revenue for cancer programming.

**Additional Benefits** - of a nurse navigator resulted in developing Survivorship Programming providing navigational support across an ongoing care continuum: (1) a pre-operative Breast Cancer 101 Class, (2) an Integrative Survivorship Journal Club and (3) a Ready SET Go - Survivors Exercising Together. (Figure 4)

**Conclusion**
Implementation of the Imaging Nurse Navigator Role has helped remove barriers for breast care delivery surrounding access, timeliness, volumes, and outmigration. The Imaging Nurse Navigator has been shown to be integral to breast care delivery improving patient and provider satisfaction and increasing financial success of the breast program.

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ACSN Chapter Leader
Eileen Fleming, MSN, RN, NE-BC
Nursing Research, Summa Health
Does PN work?

Results

Figure 1

Timeliness to Care Improved: Days to Biopsy Declined

Figure 2

Outmigration Declined 4%
Implies: 38 Incremental Cases Retained

Figure 3

# of Cases Referred for Navigation Increased 32%
Does Patient Navigation Work?

• Although there were no demographic differences across intensity groups, Neighbor Island patients...were more likely to need help with arranging travel, care coordination, and costs associated with getting treatment (all at $P=0.05$), and patients on public insurance were more likely to have stage 4 cancer ($P=0.001$) and to need help with costs ($P=0.006$). Findings suggest that this hospital-based navigation program is filling a real need of patients across the cancer care continuum.¹

• Statistically significant difference ($p<0.05$) found between patients receiving intervention and reporting receiving annual rescreening mammograms (55%) and those not receiving the intervention and reporting having had annual rescreening mammograms (1.5%)²

• 54% of the intervention group and 13% of control group completed screening colonoscopy ($p=0.058$)³

1- Helping Cancer Patients Across the Care Continuum: The Navigation Program at The Queen’s Medical Center, https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3689506/
Patient Navigation in Utah

Patient navigation is an increasing priority around the state.

Utahns face challenges related to insurance coverage, distance to care, and cultural barriers.

Goal of linking patients to needed resources through warm handoff to a network of community and health system partners.
Community Health Centers

In process of establishing community health workers at 2 community health centers

- Focus on cancer through the continuum-prevention, screening, and navigating through the clinic system and out to broader health systems
- Address cultural needs of the target population
- Navigate to known community resources to address social needs
- Building out a network of patient navigators to warm handoff into other systems
- The CHWs will be doing case management

Build relationships with Local Health Departments to handoff between systems
Community Organizations

Utah AIDS Foundation

- Connecting gay men to needed screenings and services
- Works with PNs at large health systems to address cancer screenings, HPV-related cancers, education around rectal and other cancers, getting them into screenings.
- Build a network of trust to bridge patients between systems
  - Identify “LGBT friendly” providers
  - Tobacco cessation referral
  - Community health centers
Connecting to Resources

Utah’s on-line resource for info on dangers of tobacco and nicotine use

Connects Utahns to free resources and services

Provides healthcare professionals with the resources they need to help their patients quit tobacco use

way to quit.org
Patient receives assistance, with follow-up counseling arranged, from other resources such as the Utah Tobacco Quit Line.
Smokers are **13 times** more likely to enroll in treatment when they are directly connected to the Quit Line, as opposed to being encouraged to call on their own.

Patient Navigation in LGBT Communities

Distinct role for a Navigator in a LGBT Health Centers

- Establishing trust with LGBT clients
- Connecting to “LGBT friendly” resources
  - Welcoming, friendly, affirming
- Specific medical needs relative to this population
  - Healthcare access
  - Cancer screenings
  - Tobacco use
Paying for Patient Navigation Services

Case management reimbursement
- Can bill directly for some services including face-to-face consultations and physician directed managed care
- Not all patient navigation services may qualify

Patient navigation services
- Many providers do not charge for PN services
- Those that do will charge as part of other case management services as appropriate
- Most costs offset by getting more patients into screening and treatment services
  - Summa Health, Ohio: Outmigration dropped and cases referred for PN increased by offering these services
Conclusion

- Cancer Patient Navigation programs work!
- Few patients are educated enough, motivated enough, and omniscient enough to navigate themselves through the health care system.
- Disparate populations face significant challenges to accessing appropriate care.
- Health care providers would benefit from offering comprehensive navigation services.
- Patient Navigation in LGBT health centers can build trust and reduce barriers to care.
Thank you!

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Health Care System Access and Navigation in the Era of Health Care Reform: An LGBTQ* Focus

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Keisa Fallin-Bennett, MD, MPH
Associate Professor, University of Kentucky Department of Family and Community Medicine
Director, Transform Health
Session Learning Objectives

- Discuss key Affordable Care Act (ACA) provisions that may impact the health care of sexual and gender minorities

- Utilize evidence-based strategies to promote health care access for LGBTQ* communities

- Leverage existing resources to maximize LGBTQ* health care access
Disclosure

Mollie E. Aleshire, DNP, MSN, BSN, RN, APRN, FNP-BC, PPCNP-BC
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• Employer: College of Nursing, University of Kentucky
• Sponsorship / Commercial Support: American Nurses Foundation
  University of Kentucky Markey Cancer Center

Keisa Fallin-Bennett, MD, MPH
• Conflicts of Interest: None
• Employer: Department of Family and Community Medicine,
  University of Kentucky
• Sponsorship / Commercial Support: None
High Rates of LGBTQ* Health Disparities

SOURCES:
Key ACA Provisions Affecting LGBTQ* People

Key ACA Provisions Affecting LGBTQ* People

- Expanded access to coverage and market reforms
- Preventive services/benefits standards
- Nondiscrimination protection
- Data collection and research

**SOURCES:**
- Baker K, Durso L, Cray A. Moving the Needle: The Impact of the Affordable Care Act on LGBT Communities. Center for American Progress, November 2014.
- Enrollment Assistance for LGBT Communities: A Resource for Behavioral Health Providers, Substance Abuse and Mental Health Services Administration, 2014.
Key ACA Provisions Affecting LGBTQ* People

**Expanded Access to Coverage and Market Reforms**

- Medicaid expansion
- Health insurance marketplaces

**Preventive Services/Benefits Standards**

- 10 essential health benefits categories
- Preventive services

**Sources:**
- Baker K, Durso L, Cray A, Moving the Needle: The Impact of the Affordable Care Act on LGBT Communities, Center for American Progress, November 2014
- Enrollment Assistance for LGBT Communities: A Resource for Behavioral Health Providers, Substance Abuse and Mental Health Services Administration, 2014
Current status for each state is based on KCMU tracking and analysis of state executive activity. *AR, AZ, IA, IN, MI, MT, and NH have approved Section 1115 waivers. WI covers adults up to 100% FPL in Medicaid, but did not adopt the ACA expansion.

Key ACA Provisions Affecting LGBTQ* People

Nondiscrimination Provisions

- Banned pre-existing condition exclusions
- Prohibited discrimination based on sexual orientation or gender identity
- Required to offer married same sex spouses equal coverage

Sources:
Key ACA Provisions Affecting LGBTQ* People

Data Collection and Research
Data collection for LGBT populations

Sexual orientation question added to NHIS

Sexual orientation and gender identity questions added to BRFSS

Sexual orientation and gender identity measures in electronic health records

NOTES: NHIS = National Health Interview Survey; BRFSS = Behavioral Risk Factor Surveillance System

Strategies to Promote LGBTQ* Health Care Access

**Targeted Outreach**

**Strategic Partnerships**

**Ongoing Engagement**

**Innovative Approaches**

Resources to Maximize LGBTQ* Health Care Access
Resources to Maximize LGBTQ* Health Care Access

Establish primary care provider

Access health insurance coverage

Utilize Patient Navigators

Survival Toolkit for the Post-ACA Apocalype*

*Hypothetical!
Fundamentals for Providers
Fundamentals for Providers

- Financial Aid programs
- Redouble your targeted marketing
- CQI: Continuous Quality Improvement
- Community Outreach
Fundamentals for Providers

- Limit Testing
- $4 Lists & Rx Discount Cards
- Attention to Coding
- Network
Resources

Id=939&grandparentID=534&parentID=938&nodeID=1

http://www.outcarehealth.org/
Resources

http://www.choosingwisely.org/
http://www.gilead.com/responsibility/us-patient-access/truvada%20for%20prep%20medication%20assistance%20program
Resources


GLMA
Health Professionals
Advancing LGBT Equality

OutCare

Choosing

GoodRx
Resources


GoodRx
GLMA
OutCare
Choosing
AMA
ANA
Fundamentals for Community
Fundamentals for Community

- Partner with your trusted providers
- Educate and advocate for yourself
- Global Online Pharmacies
- Pharmacy Discount Cards
Fundamentals for Community

- Reasonable skepticism about any patient forum
- Critical Reliable Resources
- Get connected now
- Stay connected
Resources

http://www.glma.org/index.cfm?fuseaction=Page.viewPage&pageId=939&grandparentID=534&parentID=938&nodeID=1

http://www.outcarehealth.org/
Resources

GLMA
Health Professionals
Advancing LGBT Equality

OutCare

GoodRx

http://www.gilead.com/responsibility/us-patient-access/truvada%20for%20prep%20medication%20assistance%20program
Resources

http://www.gilead.com/responsibility/us-patient-access/truvada%20for%20prep%20medication%20assistance%20program

GoodRx

OutCare

GLMA

Choosing

Gilead

Canadian Pharmacy Meds.com

Providing Affordable International Medications
Resources

- GLMA
- OutCare
- GoodRx
- GILEAD
- CANADIAN PHARMACY
- THE TREVOR PROJECT

http://www.thetrevorproject.org/
Resources

http://www.thetrevorproject.org/

GoodRx
Inclusivity Best Practices

- Inclusive intake forms, EHR, handouts
- Provider & staff training
- Posted nondiscrimination policies
- LGBTQ* literature, brochures
- Outreach & Advocacy
Inclusivity Best Practices
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www.myLGBThealthlink.org

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• Members-only online networking groups
• Exclusive webinars and resources
• Co-branding opportunities

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