

# Living Well and the Self-Management Hub

Oregon Public Health Association October 14, 2013

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## What we'll cover today

- Background on self-management
  - Program structure, content & outcomes
  - Program delivery in Oregon
- The LW Business Plan and the Self-Management Hub









## What is self-management?

- The tasks that individuals must undertake to live with one or more chronic conditions.
- What people with a chronic condition do 99.9% of the time.
  - Taking care of the health issue
  - Carrying out normal life activities
  - Managing emotional changes







# Stanford self-management programs available in Oregon

- Living Well with Chronic Conditions Chronic Disease Self-Management Program
- Tomando Control de su Salud Spanish language and culturally adapted version of Living Well
- Positive Self-Management Program Living Well curriculum tailored for people living with HIV/AIDS
- Diabetes Self-Management Program
- Chronic Pain Self-Management Program









# Other community-based self-management programs

- National Diabetes Prevention Program 12-month intensive prediabetes lifestyle intervention
- Walk With Ease Spanish language and culturally adapted version of Living Well
- Arthritis Foundation Exercise Program lowimpact, gentle exercise for adults with joint pain or deconditioning











## **Program benefits**

- Patient-centered, whole-person approach
- Effective intervention for patients with multiple chronic conditions
  - Addresses complex needs, compliments diseasespecific care
  - Innovative, culturally appropriate
  - Focused on prevention
- Empowers patients to become active partners
  - Improved self-efficacy and skills for healthy living
  - Improved patient/provider communication
  - More appropriate utilization of health care









### **Program structure**

- Small groups of 10-15 participants
- Variety of chronic conditions represented, including people with multiple chronic conditions
- Delivered for two and a half hours per week for six weeks
- Facilitated by two trained leaders, at least one of whom is a peer living with a chronic condition
- Programs are licensed by Stanford University voluntary quality & fidelity monitoring









## Participant outcomes: Living Well

CDC meta-analysis<sup>1</sup> and original three-year, randomized controlled trial<sup>2</sup> showed improved self-reported health and quality of life

- –Greater self-efficacy
- -Improved aerobic exercise
- -Improved energy levels
- -Better ability to manager cognitive symptoms
- -Improved communication with physicians
- Decreased fatigue and health distress
- Reduced depression
- -Fewer social role limitations







<sup>&</sup>lt;sup>1</sup> Brady, TJ et al. (2011). Centers for Disease Control and Prevention. Available at http://www.cdc.gov/arthritis/docs/ASMP-executive-summary.pdf.

<sup>&</sup>lt;sup>2</sup> Lorig, KR et al. (1999). Medical Care 37(1)5-14. Available at http://patienteducation.stanford.edu/bibliog.html.



## **Estimated impact: Living Well**

Programs can significantly improve quality of life and may reduce medical costs

Among the 3,919 participants in Living Well between 2005 and 2009, estimates indicate:

- -107 quality adjusted life years gained
- -557 emergency department visits avoided
  - Est. savings \$634,980
- -2,783 hospital days avoided
  - Est. savings \$6,501,088

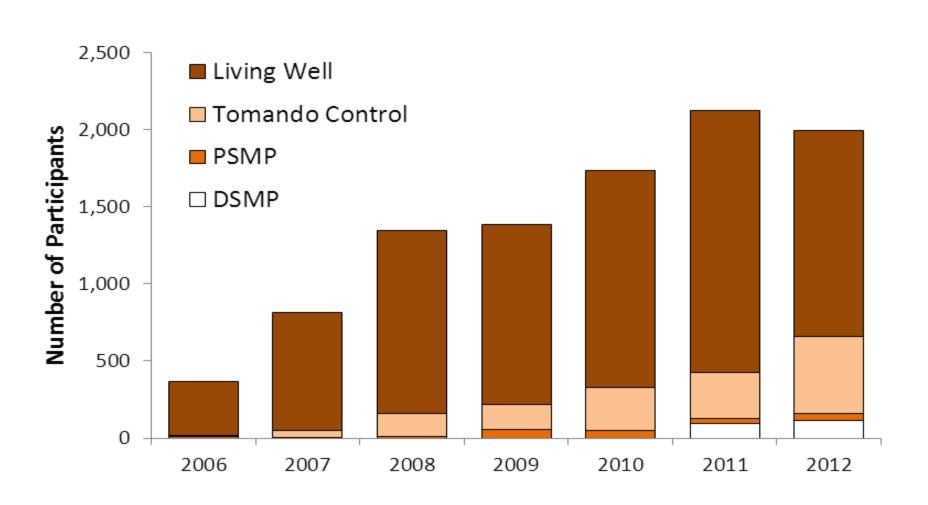




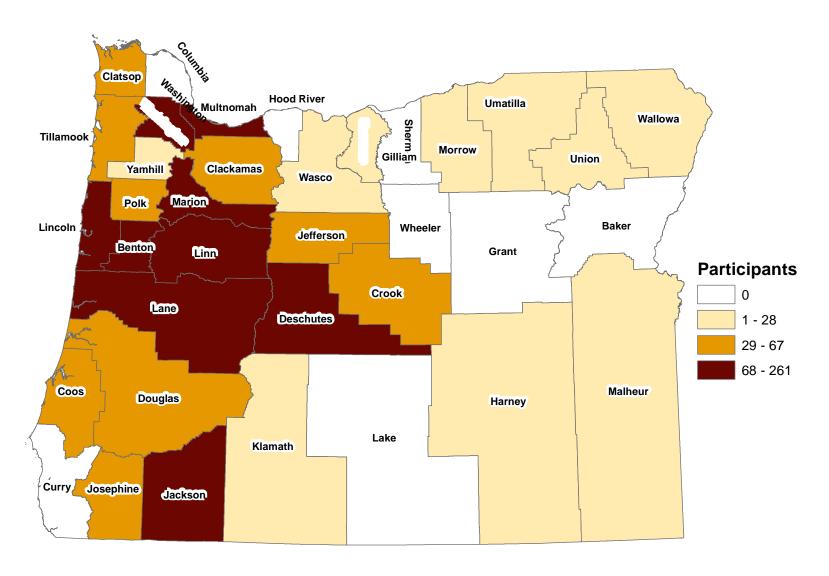


<sup>&</sup>lt;sup>1</sup>Bovbjerg & Kingston. (2010). Living Well impact report. Available at http://public.health.oregon.gov/DiseasesConditions/ChronicDisease/LivingWell/Documents/Living%20Well%20Program%20Impact%20Report%20Final.pdf.

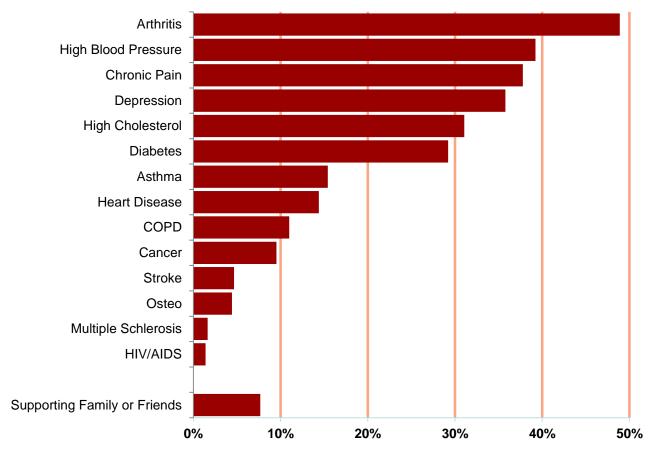
### Participants by program and year, 2006-2012



### Participants by county of residence, 2012



## Self-reported chronic conditions



Percent Responding They Have Select Chronic Conditions

Note: Average of 3.4 conditions per participant. Participants may report more than one chronic condition.

## What participants are saying



"This program has given me the confidence that I can have a future worth living. I have learned there are people like me, not living life to the fullest because of a chronic condition and that we can move forward. Great people teaching us to live again."

-- Laura Furrey



Vision: Ensure that self-management programs are available and paid for statewide, long term

Develop systems and infrastructure to bring programs to scale

- Reach a greater proportion of Oregonians with chronic conditions
- Generate revenue -- reinvest to support program growth and access for all











- Business document for recruiting a partner organization to create the Oregon Self-Management Hub
  - Demonstrates potential financial feasibility
  - 5-year, high-level plan
- Outlines structure, systems, partnerships, markets, customers and delivery networks needed for sustainability









Oregon's Proposed Self-Management Delivery & Financing Structure

## Oregon Self Management Hub

Coordinates workshop scheduling & payments
Tracks & reports data
Monitors quality & fidelity
Leader training
Marketing

OHA
Assures
statewide
reach &
equity

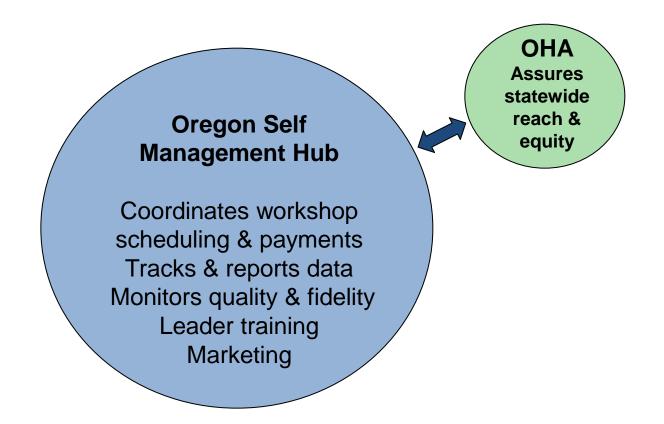
Program Delivery
Network Partners
Provide workshops

Receive payments

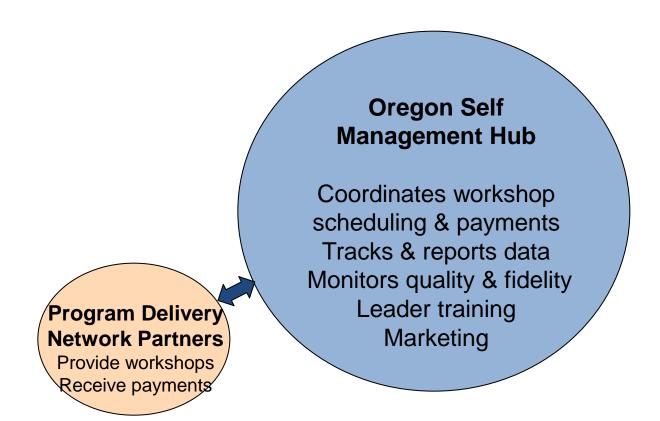
#### **Stand-Alones**

Provide workshops for specific populations Access to scheduling/payment system

**Purchasers** 



#### **Centralized coordination**



### **Program Delivery Network**

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#### **Stand-Alones**

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## **Support for Self- Contained Programs**

## **Oregon Self Management Hub** Coordinates workshop scheduling & payments Tracks & reports data Monitors quality & fidelity Leader training Marketing **Purchasers**

Statewide resource for purchasers

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**Purchasers** 

## In the coming months we'll...

- Get implementation contractor on board
- Conduct a state contracting process to identify Hub partner organization
  - Develop scope of work
  - Release a competitive request for proposals
  - Score proposals against criteria & select the Hub contractor
  - Develop the Hub contract & begin implementation











#### After that we'll...

- Develop contracting networks
  - Program delivery contractors
  - Stand-alones
- Secure purchasers
  - PEBB/OEBB, CCOs, Medicare Advantage
  - Develop marketing package & develop contracts
- Implement information technology infrastructure (data collection/registration/payment platform)









#### Transition key functions from OHA to Hub

- Data collection & reporting
- Training coordination & support
- Technical assistance to licensed organizations
- Quality assurance & fidelity monitoring
- Marketing & recruitment support
- Program licensing











## Benefits we hope to achieve

#### Access to programs statewide

- Single point of contact for purchasers
- Centralized licensing, billing and contracting
- Sustainable funding source

#### Increased efficiency through coordination

- Statewide marketing of programs
- Online systems to streamline registration
- Increased program reach, especially in rural areas









#### For more information

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