



Neeli Thati M.D, Roxas Renato, Department of Internal Medicine M.D Krista Clancy PhD, College of Education  
Mathew J Edick, PhD, Michigan Public Health Institute

## ABSTRACT

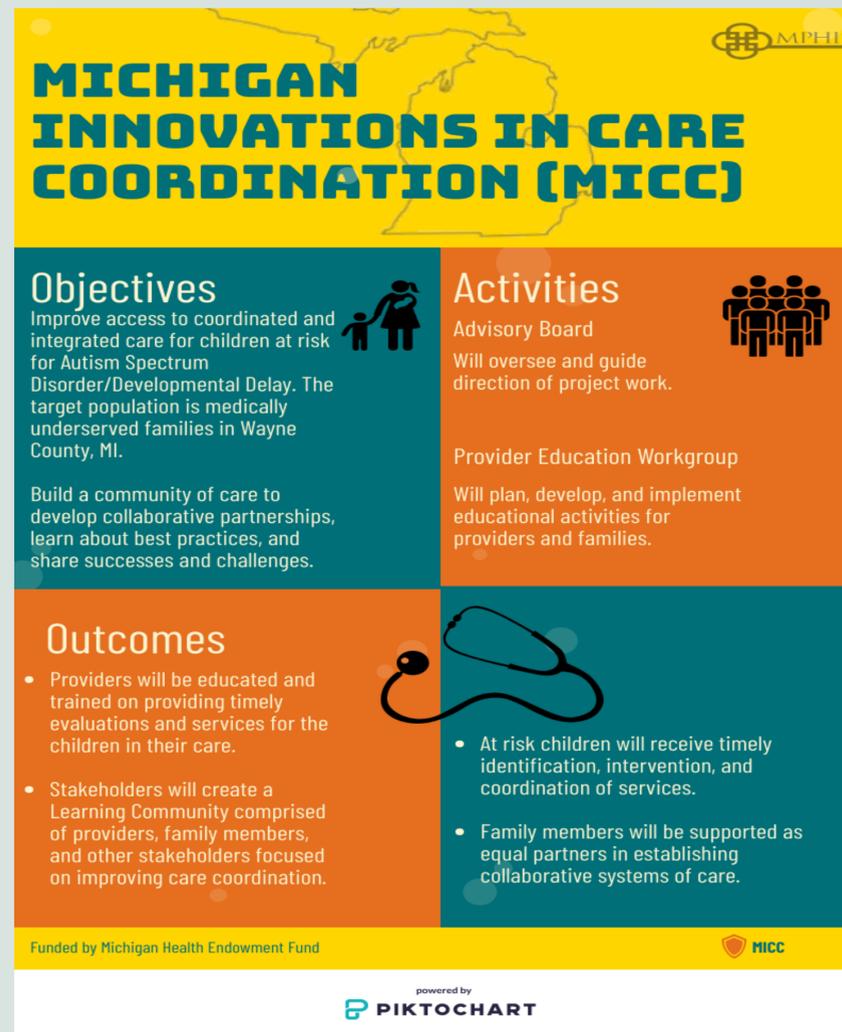
- Care coordination is difficult at best. Systems of care are complicated, and providers lack knowledge and communication amongst each other and with patients. These barriers add hurdles to treatment access.
- This results in attrition and poor treatment adherence. All stakeholders in the system of care (providers, patients, payors, and researchers) must work together to identify barriers and create novel ways to improve the system..
- All stakeholders must be involved in evaluating the problem and implementation of research to improve outcomes patients.
- The goal of the MICC project is to be a successful care coordination model in Wayne County.

## INTRODUCTION

- The Michigan Innovations in Care Coordination (MICC) involves a team of stakeholders that is developing training and tools that will be easily available to physicians and patients.
- The training and tools were developed by determining barriers that each stakeholder encountered in the system of care.
- Then innovative solutions for systemic improvement in Wayne County Michigan focused on parent engagement, parent and provider education, and coordination of care using technology to improve communication between providers and patients and the referral process was implemented.

## METHODS

- Proper implementation of the M-CHAT was identified to be a barrier to assisting families in the physician's office.
- A screening tool integrating the MCHAT and demographic information was developed and log in accounts were created for the stakeholders in the system of care.
- Data will be collected using Patient Education Genius (PEG) that integrates the information the collected at the physician's office with other providers for referral. At the same time patient's receive educational information and resources to help them take the next steps for treatment.



**MICHIGAN INNOVATIONS IN CARE COORDINATION (MICC)**

**Objectives**  
Improve access to coordinated and integrated care for children at risk for Autism Spectrum Disorder/Developmental Delay. The target population is medically underserved families in Wayne County, MI.

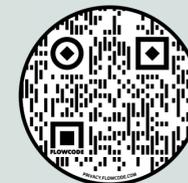
**Activities**  
Advisory Board  
Will oversee and guide direction of project work.  
Provider Education Workgroup  
Will plan, develop, and implement educational activities for providers and families.

**Outcomes**

- Providers will be educated and trained on providing timely evaluations and services for the children in their care.
- Stakeholders will create a Learning Community comprised of providers, family members, and other stakeholders focused on improving care coordination.
- At risk children will receive timely identification, intervention, and coordination of services.
- Family members will be supported as equal partners in establishing collaborative systems of care.

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For more information about the workflow process created for all providers in the system of care scan the flow code seen hear with your camera phone.



### Acknowledgements

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## RESULTS

- \* Data will be collected on the patient referral process including provider and patient engagement, resources sent to patients and how often the patient accessed the resources.
- Next steps in the project is to use the data to provide feedback to the physicians to continue improvement in the patient referral process.
- The goal of the MICC project is to be a successful care coordination model in Wayne County.
- The MICC team will have access to all data in the Medicaid data warehouse in order to determine the overall improvement in care for Wayne County.
- \*Work in progress

## CONCLUSIONS

- Each physician office will have access to the data they collected.
- Physicians will be able to directly link their data to Wayne County Medicaid for referrals.
- This new process improves timeliness of evaluation and support services by allowing the physician to directly connect with the referral rather than waiting for the patient to initiate the contact with the resources outside the physician's office.
- This innovative education model will be disseminated through Michigan with the help of stakeholder partners.

## FUTURE DIRECTIONS

- Create and finalize materials for patients and providers to educate them on the system of care and barriers they may encounter
- Train providers (physicians, social workers, diagnosticians, and behavior analysts) on new workflow process
- Make modifications to workflow process based on data
- Disseminate outcome to providers across Michigan by connecting with grant advisory board partners:

For more information about the Patient Education Genius platform visit their website: <https://dashboard.coherentrx.com/Home/landing>