Back to the Future:
Engaging Patients for Better Outcomes
Objectives

- Appreciate current healthcare obstacles to improving clinical outcomes
- Understand evolution of patient experience and medical industry
- Identify opportunities to change clinical outcomes by expanding clinical management options
- Identify opportunities to improve patient outcomes through targeted behavior modification
Where We Are Today
Let’s Play Doctor

- Symptoms: Stomach pain, bloating, constipation
- Over-the-counter remedy attempt
- See primary care doc for ‘prescription strength’
- Dr’s Orders: Labs, Radiology with another Rx?
- Refer to Gastroenterologist
- GI’s Orders: Colonoscopy + more Labs
- Diagnosis: Irritable Bowel Syndrome
- Trial of stronger meds
- Pt’s concern: “Is this the best I can expect?”
- Dr’s answer: “On a good note, it’s not cancer. But, you will just have to live with this.”
- Dr’s thinking: “Maybe, she’s depressed?”
Imagine The Patient Perspective

- Expectations?
- Informed Choices?
- Trust?
- Commitment?
- Leave happy?

“I don’t want urgent care type service for my chronic diseases.”
The Evolution of Consumerism

Case Example: The Birthday Cake Industry
commodities  manufacture  service
service

experienc
What Do Providers Offer Today?

service
Our Service Intention
Perception is Reality
Patient EXPERIENCE?

DISEASE Prominence?
First Era

Drugs are Magic Bullets!
Second Era

Heart
Gastrointestinal
Brain & Nerves
Autoimmune
Lung

More Drugs & More Divisions!
The Proposed Solution

RESTRICTIVE experience, MORE CHRONIC disease

Patient Centered Medical Home
Advanced Care Organization

‘STREAMLINED’ experience, CHRONIC DISEASE EPIDEMIC
Albert Einstein

“A man should look for what is, and not for what he thinks should be.”

“We cannot solve our problems with the same thinking we used when we created them.”
If left unaddressed, the triggers continue to create more disease.
If left unaddressed, the triggers continue to create more disease.
The High Cost of Reactive Medicine

Employees With These Health Problems Can Cost You

Heart Disease = $6,112.00
Depression = $6,667.00

Arthritis = $5,000.00
Diabetes = $5,000.00

Back Pain - Patients spend 60% more on health care costs
Obesity - Absent 2.3 times more than lean employees

* per employee per year
Required PCPs through 2025 to meet utilization needs after the Affordable Care Act passage

2008: 462 million visits  
2025: 565 million visits

2025: 52,000 additional PCPs
- Population growth (33,000)
- Population aging (10,000)
- Insurance expansion (8,000)

Wisdom from Andrew Weil, MD

When asked about the healthcare reform on Larry King Live, he said…

• The real problem is **NOT an ACCESS issue**.
• It’s a **fundamental problem** with the healthcare **focus** itself.
• Health- “*care reform*” should highlight **low cost solutions for healthier outcomes**
We Don’t Prioritize Behavior Change

Three times more obesity in less than one generation!
What Patients Need

- Health
- Symptom
- MD
- Specialists
- Rx/Surgery
- Rx/Surgery
- More Disease
- Death
The truth is, doctor, I've lost faith in western medicine!
THINK Outside the Box

ROOT CAUSE APPROACH

THERAPEUTIC PARTNERSHIP
Treat the Cause
Root Cause & Epigenetics
Protect Health
More good years.
The Body as a Connected Whole!

Third Era
More Time to Engage the Patient
To dispose a soul to action we must upset its equilibrium.

Eric Hoffer

Therapeutic Partnership
Back to the Future: Engaging Patients for Better Outcomes

How We DISENGAGE Patients?
Case Example: Diabetes
FEAR of FUTURE EVENT
Behavior Change Requires TIME
What Inspires Change?

freedom

connection

NOT fear & isolation
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How Can We ENGAGE a Patient?
Bidirectional Focus

PUBLIC HEALTH FOCUS

Personal Health Focus

OUTSIDE In

INSIDE Out
Therapeutic Partnership
Man has free choice... to the extent that he is rational.
Treat the Cause
Education Beyond Medication
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Meet KEVIN & NICOLE
The Possession of Understanding

**RECOMMENDATIONS**

- Disease-focused
- **What we provide** based on our understanding

**INFORMED CHOICES**

- Takes into account their needs and goals
- **What they make based on their understanding**

Experiences:

- ‘good service’

*Buy IN*

*EXPERIENCE*
Unique perspective on CHANGE

- Occurs over time
- Nonlinear
- Recycles or regresses
- Individualized pace
- Usually burst vs. consistent (years in precontemplation and then change in weeks/months)

James Prochaska, PhD
James Prochaska, PhD
Transtheoretical Model for Change

Precontemplation
• not thinking about or intending to change a problem behavior or initiate a healthy behavior (in the near future)

Contemplation
• becomes aware of a desire to change a particular behavior (typically defined as within the next six months)
Transtheoretical Model for Change

**Preparation**
- action is intended in the near future (typically measured as within the next thirty days)

**Action**
- marks the beginning of actual change in the criterion behavior (typically within past six months)
Transtheoretical Model for Change

Maintenance

- successfully attained and maintained behavior change (for at least six months)

THE GOAL

![Image of happy couple brushing teeth]
What People Really Want

Health
Symptom
MD
Specialists
Rx/Surgery
Rx/Surgery
Death
More Disease
A Common Root Cause Timeline

• Abdominal pain, bloating & constipation
• Detailed functional integrative medicine assessment
• Rule out and then eliminate food triggers
• Incorporate 5R as GI system corrective therapy
• Moderate to complete resolution

Education Beyond Medication
Behavior Change

freedom

Did not want to be bound to finger stick blood sugar checks the rest of his life

connection

To a team dedicated to helping him achieve his health goals
What Patients Really Want

- Therapeutic Partnership
- Root Cause Approach
- Emphasis on prevention and reversal of disease
- Expanded options for management of disease
- PERSONALIZED FREEDOM & HAPPINESS
Back to the Future: Engaging Patients for Better Outcomes

Meet SUE
Timeless Advice for Current Crossroads
The Dalai Lama, when asked what surprises him most about humanity, answered…

“Man. Because he sacrifices his health in order to make money. Then he sacrifices money to recuperate his health. And then he is so anxious about the future that he does not enjoy the present; the result being that he does not live in the present or the future; he lives as if he is never going to die, and then dies having never really lived.”
How We Create Experience

n1Health SevaMed Institute
Fitness Center
Teaching Kitchen
Online Education

HUB Events
Community Education

n1Health Corporate Health
Executive Physicals
Employee Wellness

Group Visit Toolkits
Shared Medical Appointments

The Ingredients Matter: India
Educational Cookbook
A Short History of Medicine

2000 B.C. - "Here, eat this root."
1000 B.C. - "That root is heathen, say this prayer."
1850 A.D. - "That prayer is superstition, drink this potion."
1940 A.D. - "That potion is snake oil, swallow this pill."
1985 A.D. - "That pill is ineffective, take this antibiotic."
2000 A.D. - "That antibiotic is artificial. Here, eat this root."

~Author Unknown