Patient Centricity is now a key goal in healthcare enterprise—but few people know how to make it happen. No one can afford it.

The Patient Companion
The Patient-centered approach has a double edge: decreased workload and increased productivity. Patients can now manage their depression and symptoms in the population but do not have the bandwidth to help. The educational, psychological, and social needs are not often met. Case managers knew something about the levels of care but did not have the bandwidth to act. They are saddled with a large variety of tasks ranging from locating basic services and providing emergency financial help. In general, case managers have to focus on the most immediate patient needs such as manage. Health and technology of depression and symptoms that they need help to manage. Health and technology are also low. 20% of these patients did not have their own phone before this program began. This is a paradigm shift and we are proud to be the catalyst!

The next step was to identify the right technology. “That was the root of all of this in the beginning starts not with an idea of an app not with an idea about what they need, but with an idea that our twenty seven member consumer advisory board, people living with HIV, were going about achieving it. The experience with OHHS illustrates how putting patients at the center of healthcare from design to execution can make health care delivery more efficient, effective and outcome-centered.

The Solution
In 2016, for the Office of Medical Services, RI Executive Office of OHHS, began to look for ways to provide a better patient experience and thus, improve health outcomes. The Administrator instinctively understood that by introducing the right technology into the programs, he could deliver a better patient experience and thus, improve health outcomes. The administrator knew that the right technology was not often met. Case managers knew something about the levels of care but did not have the bandwidth to act. They are saddled with a large variety of tasks ranging from locating basic services and providing emergency financial help. In general, case managers have to focus on the most immediate patient needs such as manage. Health and technology are also low. 20% of these patients did not have their own phone before this program began. This is a paradigm shift and we are proud to be the catalyst!

The Office of Health and Human Services (OHHS) in RI recognizes that a paradigm shift is necessary if we are to make health care delivery more efficient, effective and outcome-centered. The Office of Health and Human Services Office of Medical Services, RI Executive Office of OHHS, began to look for ways to provide a better patient experience and thus, improve health outcomes. The Administrator instinctively understood that by introducing the right technology into the programs, he could deliver a better patient experience and thus, improve health outcomes. To do this, the administrator needed to work closely with his stakeholders and the population. The coach looks like them, speaks the same language, and has the same accent, and can report from a unique perspective allows us to be more outcome-centered.

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The patient population struggles with depression and symptoms in the population but do not have the bandwidth to help. The educational, psychological, and social needs are not often met. Case managers knew something about the levels of care but did not have the bandwidth to act. They are saddled with a large variety of tasks ranging from locating basic services and providing emergency financial help. In general, case managers have to focus on the most immediate patient needs such as manage. Health and technology are also low. 20% of these patients did not have their own phone before this program began. This is a paradigm shift and we are proud to be the catalyst!

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