



A Need to Get More Individuals to Treatment Faster

Like many states, Oklahoma faced significant challenges in getting the growing number of individuals with substance use disorder (SUD) into treatment quickly. Providers and other organizations lacked an electronic referral process, referral tracking, or any means to stay engaged with the individual or their family following the referral.

Typical referral complaints included playing phone tag, incomplete referral information, long delays in receipt and acknowledgement, lost or ignored referrals, and little feedback to the referring entity, all of which contributed to significant systemic issues.

The state of Oklahoma's Department of Human Services (OKDHS) had a vision of connecting all of the parties that touch SUD patients to make the referral and care coordination process more timely and efficient for all parties. By partnering with CHESS Health, the state was able to rapidly connect referral sources with treatment providers to quickly lay the foundation for a statewide electronic referral network.

Planning the Referral Network Information Super-Highway

ODMHSAS' plan was to implement eIntervention between the state's contracted treatment providers and invited participants. Within 60 days, referrals were being sent in the following workflows:

- Detox providers to residential and outpatient providers
- Outpatient treatment and county jails to MAT providers
- Crisis centers to outpatient providers
- Drug courts to outpatient providers

Despite the challenges posed by COVID-19, over 35 entities have successfully joined the eIntervention platform within the first six months, with many more expected to join in the coming months

Required Functionality

To effectively address the challenges within the referral process, the organization sought a solution that encompassed a range of core functionalities designed to enhance efficiency, ensure compliance, and improve communication among all stakeholders involved in the treatment of individuals with substance use disorder. These functionalities included:

- Web-based referral submission and receipt dashboards
- Email notification of incoming referrals
- Provider finder logic that identifies applicable treatment providers or resources based on services offered, health plans accepted, and geographic location
- 42 CFR Part 2 compliant patient attestation
- Feedback mechanisms for referral senders
- Online chat capabilities between providers
- Document attachment functionality
- A patient smartphone app for referral notifications, secure messaging, and access to informational videos
- Network referral analytics

This comprehensive set of features was essential for creating a seamless and user-friendly experience throughout the referral and treatment coordination process.

Streamlined Implementation: A Necessity

A crucial consideration was the implementation process, particularly regarding staff workload. Provider and state staff were already overloaded, so ease of implementation was essential to accommodate their limited availability.

CHESS Health addressed this need through a well-defined implementation process and timeline, ensuring a smooth transition with minimal disruption to staff responsibilities.

- Discovery – 30 minutes
- Database build – 30 minutes
- Web based training – 30 minutes
- Live!
- Ongoing support

A Focus on Expansion

With the program established in certain segments, the focus is now turned to adding major constituents to the network including the following key statewide organizations:

- Oklahoma Department of Health
- Oklahoma Department of Mental Health and Substance Abuse Services
- University of Oklahoma Health Science Center
- Oklahoma Perinatal Quality Improvement Collaborative