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IUCAR ENews November 2015

IU Center for Aging Research News

November 1, 2015

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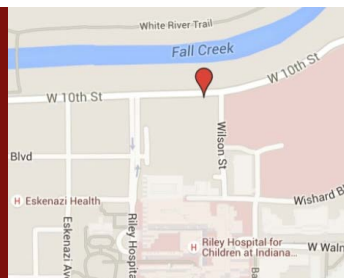
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IUCAR-Regenstrief is moving on November 20th!

Our new headquarters is located at 1101 West Tenth Street Indianapolis, IN 46202.

Web and email addresses, and phone numbers will remain the same.



FEATURES

IUCAR Scientist to Lead \$46.4 million CMS clinical transformation project

Dr. Malaz Boustani, IUCAR Scientist and COO of IUCAR partner organization, Center for Health Innovation & Implementation Science, is set to lead the Great Lakes Practice Transformation Network. IU School of Medicine is one of 29 organizations to receive federal funding for the Transforming Clinical Practices Initiative.

10/1/2015 [Read more »](#)

IUCAR Scientists, LaMantia and Unroe, Honored by American Geriatrics Society

Drs. Mike LaMantia and Kathleen Unroe received awards at the annual American Geriatrics Society meeting this past May.

5/13/2015 [Read more »](#)

IUCAR based eMR-ABC Software Licensed to Preferred Population Health Management and is Now Serving all of Indiana's 16 Area Agencies on Aging

The Electronic Medical Record Aging Brain Care Software (eMR-ABC), developed and tested by the Indiana University Center for Aging Research and the Regenstrief Institute, has been licensed to Indianapolis based company Preferred Population Health Management and is being implemented throughout the state by Indiana's 16 Area Agencies on Aging. Area Agencies on Aging, of which there are 650 nationwide, oversee state and federal funds and private donations to provide information, advocacy and support services to older adults and family caregivers.

5/7/2015 [Read more »](#)

TOP HEADLINES

Callahan named interim President and CEO of Regenstrief Institute as Tierney departs for Texas

Chris Callahan, M.D., Regenstrief investigator and director of the Indiana University Center for Aging Research, has been appointed interim president and CEO of the Regenstrief Institute.



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IUCAR Partner Organization, Daniel F. Evans Center for Spiritual and Religious Values in Health Care, launches new site!

Learn more about the Daniel F. Evans Center at IU Health, under the direction of IUCAR Scientist Dr. Alexia Torke.



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Feds select IUSM to lead Midwest portion of national clinical-transformation program

October 1, 2015

The Indiana University School of Medicine will lead a four-year, \$46.4 million federally-funded project to support 11,500 physicians, advance practice providers and clinical pharmacists in Indiana, Illinois and Michigan to facilitate the transformation of their practices in providing the triple aim of better health and better care at lower costs.

The Great Lakes Practice Transformation Network, led by Malaz A. Boustani, chief operating officer of the Center for Health Innovation and Implementation Science at the IU School of Medicine, is a coalition of 33 partners including the three states' health departments and eight universities, among others.

The Great Lakes network is one of just 29 organizations to receive funding as part of the \$685 million Transforming Clinical Practices Initiative created to help drive changes in the practice of medicine by the Centers for Medicare and Medicaid in the U.S. Department of Health and Human Services.



IU School of Medicine leads \$46 million Federal program to transform clinical practice in the Midwest.

11,500 clinicians engaged in practice transformation
10 million Americans to receive better health outcomes
410,000 hospitalizations to be prevented
17% reduction in unnecessary testing
\$1 billion expected savings in health costs

IUSM is one 29 organizations to receive funding as part of the \$685 million Transforming Clinical Practices Initiative | PHOTO BY IU SCHOOL OF MEDICINE

"Our healthcare system is rapidly changing. In order to deliver improved value to our patients, we need to support our clinicians in their journey of improving patient care while driving down costs. The Great Lakes Practice Transformation Network will provide clinicians with personalized and locally sensitive tools needed to accomplish this," said Dr. Boustani, Richard M. Fairbanks Professor of Aging Research and professor of medicine at IU Center for Aging Research.

"Our network will deploy quality improvement advisors to support clinicians in their transformation journey. This journey will provide high value and personalized care for 10 million people in the three states and reduce inappropriate hospitalization, emergency department visits, and unnecessary testing. Such high valued care will produce \$1 billion in cost savings for federal government spending on Medicare, Medicaid and the Children's Health Insurance program," he said.

At the heart of the project, the network will train 52 quality improvement advisors to coach the 11,500 clinicians on patient-centered transformation of their practices, incorporating three key approaches:

- Implementation science to develop tools, process and strategies for rapid implementation of evidence based medicine into the local real world.
- Lean and Six Sigma process improvement tools.
- Patient-centric, personalized population health management. The network will focus on implementing evidence-based practices and evidence-based management to improve care for high blood pressure, chronic obstructive pulmonary disease, congestive heart failure, depression and diabetes management amongst other clinical areas.

The operations of the network will be led by Nadia Adams, executive director of the Center for Health Innovation and Implementation Science at the IU School of Medicine. Adams will work with the board of directors to execute the overall strategies. Each state will have a localized operations team overseeing daily activities of the program, supported by a central consortium of faculty experts in such fields as preventive health, chronic disease management and pediatrics health services research. There will also be a stakeholders advisory board including patient and family representatives from each state.

To learn more about the Transforming Clinical Practices Initiative and its supporting networks, [visit the CMS.gov website](#).



[IUSM Newsroom](#) »

IU, Regenstrief investigators LaMantia and Unroe honored by American Geriatrics Society

May 13, 2015

INDIANAPOLIS -- Indiana University Center for Aging Research and Regenstrief Institute investigators Michael LaMantia, M.D., MPH, and Kathleen Unroe, M.D., MHA, will be honored by the American Geriatrics Society at its annual scientific meeting May 15 to 17.

Dr. LaMantia will receive an AGS New Investigator Award, one of only five to be presented by the national organization this year. This award honors individuals whose original research reflects new insights in geriatrics and a commitment to academics in aging. He was previously honored by the AGS with a 2010 Annual Scientific Meeting Presidential Poster Award.

Dr. LaMantia focuses on the coordination of care for older, vulnerable patients as they transition across sites of health care delivery. He has a particular interest in the care of seniors in hospital emergency departments and especially the care provided there to seniors with dementia and delirium.

Delirium affects approximately 10 percent of older adults who seek care in the emergency department, yet it is unrecognized in the majority of cases. In 2014 Dr. LaMantia received a K23 award from the National Institute on Aging of the National Institutes of Health to support "DEEDS: Delirium Evaluation in the Emergency Department for Seniors." Also in 2014 he published an analysis of the problem in the *Annals of Emergency Medicine*.

Dr. Unroe will be named an AGS fellow, a status bestowed on AGS members who have demonstrated a professional commitment to geriatrics, contributed to the progress of geriatrics care, and are active participants in the society's activities. AGS fellows are health care providers who are dedicated to geriatrics education, clinical care and research, as well as to their own continuing professional development.

She has previously been honored by the AGS with the organization's 2003 Edward Henderson Student Award and a 2011 Annual Scientific Meeting Presidential Poster Award. Dr. Unroe currently serves as vice chair of the AGS Public Policy Committee.

Dr. Unroe is focused on health policy relevant research in the long-term nursing home care of millions of individuals, including the use of palliative care and hospice in this setting, transitions of care, and the quality of medical care in nursing homes.

She is the co-principal investigator of a long-term nursing home resident care model called OPTIMISTIC, an acronym for "Optimizing Patient Transfers, Impacting Medical Quality and Improving Symptoms: Transforming Institutional Care. OPTIMISTIC is supported by a 4-year, 2012 award of \$13.4 million from the Centers for Medicare and Medicaid Services. Dr. Unroe and colleagues recently received an award from the John A. Hartford Foundation to prepare for the expansion of OPTIMISTIC. She is a co-author of several peer reviewed papers on OPTIMISTIC and of a recent editorial in the *Journal of the American Medical Directors*

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Michael LaMantia, M.D., MPH

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Kathleen Unroe, M.D., MHA

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Association that issued a call to action for end-of-life care of older adults in nursing homes.

The American Geriatrics Society is a not-for-profit organization of over 6,000 health professionals devoted to improving health, independence and quality of life of all older people. In addition to their IU Center for Aging Research and Regenstrief Institute appointments, both honorees are assistant professors of medicine at the Indiana University School of Medicine.

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IU Center for Aging Research eMR-ABC software improving brain care throughout Indiana

May 7, 2015

INDIANAPOLIS -- Older Indiana adults with dementia or depression will be among the best cared for elders in the nation beginning this month with the statewide roll-out of a unique automated decision-support system that enables their care coordinators to meet the complex bio-psychosocial needs of these individuals as well as those of their family members and other informal caregivers.

Use of the Enhanced Electronic Medical Record Aging Brain Care Software, developed and tested by the Indiana University Center for Aging Research and the Regenstrief Institute, is being implemented throughout the state by Indiana's 16 Area Agencies on Aging. Area Agencies on Aging, of which there are 650 nationwide, oversee state and federal funds and private donations to provide information, advocacy and support services to older adults and family caregivers.

"The number of older adults nationally and in Indiana is growing rapidly. Delivering personalized care to this population is difficult and requires the ability to track a sizeable number of mental and physical indicators," said geriatrician Malaz Boustani, M.D., MPH, associate director of the IU Center for Aging Research, Regenstrief Institute investigator and the Richard M. Fairbanks Professor in Aging Research at the IU School of Medicine. "The software we have developed will help the care coordinators based at Indiana Area Agencies on Aging, who have the expertise and resources needed to measure and meet the many bio-psychosocial needs of these patients and their loved ones and monitor the effectiveness of individualized care plans."

The software, known as eMR-ABC, can be used independently or with most electronic medical record and health information exchange systems. eMR-ABC captures and monitors the cognitive, functional, behavioral and psychological symptoms of older adults suffering from dementia or depression. It also collects information on the burden placed on patients' family caregivers.

Utilizing this information, the software application provides decision support to area agency care coordinators, who, working with physicians, social workers and other members of the older adult's health care team, will create a personalized care plan that includes evidence-based non-pharmacological protocols, self-management handouts and alerts of medications with potentially adverse cognitive effects. The software's built-in engine tracks patient visits and can be used to generate population reports for specified indicators such as cognitive decline or caregiver burnout.

"New models of care, supported by population health management tools such as eMR-ABC, are needed if we are to provide improved quality of care and encourage better health outcomes for our patients in a cost sensitive manner," said Dr. Boustani, who directs the Eskenazi Health Center Healthy Aging Brain Center.

"Simply put, we are using health information technology to manage and monitor a high-risk population while achieving the triple aim of better health and better care at lower cost."

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Malaz Boustani, M.D., MPH

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Area Agencies on Aging are uniquely positioned within communities to enable large numbers of older adults and those who care for them to benefit from this new management tool that improves the ability to manage the complex health care for this vulnerable population.

“The eMR-ABC software gives us a powerful new tool to monitor the health of the people served by CICOA. The eMR will allow our care managers to tailor care plans and social supports to the individual needs of the clients,” said Orion Bell, MBA, president and CEO of CICOA, the largest Area Agency on Aging in Indiana.

The eMR-ABC software was initially developed by the IU Center for Aging Research and Regenstrief Institute scientists for use with Eskenazi Health’s Aging Brain Care Medical Home collaborative care model. The innovative software is a compatible plug-in to most existing electronic medical records systems and health information exchanges. It was recently licensed to Preferred Population Health Management, LLC.

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Regenstrief CEO Tierney to depart for Texas job

August 20, 2015 | IBJ Staff

KEYWORDS HEALTH CARE / LEADERSHIP TRANSITION / REGENSTRIEF INSTITUTE / HEALTH CARE & LIFE SCIENCES / HEALTH CARE & INSURANCE

COMMENTS

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The CEO of the Indianapolis-based Regenstrief Institute will leave in January to join a new medical school in Austin, Texas, the school announced Thursday.

Dr. Bill Tierney, who has led the Regenstrief medical informatics research operation for five years, will become chair of the department of population health at the Dell Medical School at the University of Texas at Austin. A Regenstrief spokeswoman said a national search for Tierney's replacement will begin in the fall.

Tierney, 64, has been at Regenstrief for 35 years, joining the institute after finishing his medical training at the Indiana University School of Medicine. Regenstrief helped launch one of the nation's first electronic medical record systems at Wishard Memorial Hospital in the 1970s. It has used that system in hundreds of studies since to document the promise of improving medical care by digitizing patient information.

Tierney has been a lead researcher on grants and contracts totaling more than \$32 million and has authored or co-authored 290 articles in peer-reviewed medical journals.

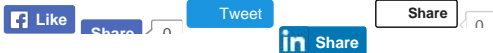
He has also served as chief of the medical school's division of general internal medicine and dermatics as well as chief of internal medicine at Wishard, which is now called Eskenazi Health.

And Tierney led a team in developing an open-source medical resource system for AIDS clinics that IU operates in Kenya. That system, called OpenMRS, is now being used widely in developing nations.

"Through his aspirations for better health, Bill Tierney has advanced the field of healthcare informatics and health services locally and globally," said Thane Peterson, who joined Regenstrief two years ago as its first executive operating officer, in a written statement.

Tierney, in a written statement, said he is looking forward to new challenges. The Dell Medical School was created in 2013 after voters in Travis County, Texas, approved a property tax increase in 2012 to fund it.

"The Dell Medical School has taken on the responsibility of improving the health of the people of Austin and Travis County, Texas—enhancing their health, happiness, and wellbeing," Tierney said. "The residents of Travis County have made a visionary investment in this medical school, and the Department of Population Health will provide dividends on that investment by creating innovative collaborative models to help people get and stay healthy."



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Chip Clark — I wish Ed the best of luck in all of his future endeavors, as well as my condolences to he and his

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Irvingtonguy — If you don't know what I'm talking about then don't comment. I'm talking about GetTV, MeTV,



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DANIEL F. EVANS CENTER

FOR SPIRITUAL AND RELIGIOUS VALUES IN HEALTHCARE

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The Daniel F. Evans Center for Spiritual and Religious Values in Healthcare

was established in 1996 in honor and memory of Indianapolis business leader Daniel F. Evans, Sr. Mr. Evans was a longtime champion of the integration of religious values into healthcare through his service on the Indiana University Health Methodist Hospital Board of Directors.

One of the first centers of its kind to be developed and supported by a major hospital system, the Evans Center for Spiritual and Religious Values in Healthcare focuses on providing a forum for encouragement of interdisciplinary collaboration and support of spirituality in healthcare-related research that furthers the values of Indiana University Health.

Mission

The mission of the Evans Center is to promote the integration of religious and spiritual values in healthcare with a focus upon the mission, values and practices of IU Health.

Vision

The Evans Center will promote and provide resources for initiatives, programs and research that integrate the values of compassion, whole person care, ethical practice and spiritual care services into all patient care, community wellness and staff development activities of IU Health.

Priorities

To facilitate processes related to the **Indiana University Health Values Grant for Religious and Spiritual Integration in Healthcare.**

To conduct high quality research and publish on themes of religious and spiritual integration and ethical development in healthcare.

To strengthen the capabilities of diverse communities of faith to effectively express their whole person ministries.

To address systemic needs for change within IU Health and the community in areas of religious and spiritual wholeness.

To educate IU Health practitioners concerning religious, spiritual and ethical dimensions of healthcare.

To express the IU Health identity as a Conference Related Unit of the United Methodist Church.

[Go to IUHealth.org](http://IUHealth.org)



Indiana University Health

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