

Trillium Talks
Chronic Pain
By Rick Finkelstein

When Coordinated Care Organizations were formed over three years ago, part of the foundational wisdom of their creation was that barriers would come down. No longer would providers of physical health, mental health, chemical dependency, and dental health be separated in their own silos. Rather, leaders in each of these arenas would meet regularly and develop relationships, and these relationships would create opportunities to improve the care we offer to our patients.

Last Spring, the Clinical Advisory Panel of the Trillium CCO voted to create a Chronic Pain Subcommittee (CPS), and I was asked to be its Chair. This article is a report on the progress to date of the CPS, whose work is illustrative of the promise CCO's have.

In addition to Trillium employees Dr. Coleen Connolly, Jim Connolly, and Lucy Zammarelli, other CPS members include Dr. Doug Bovee (LIPP), Dr. Jill Chaplin (Peace Health), Dr. Jim Morris (Pain Management Partners), Dr. Scott Pengelly (Pain Consultants of Oregon), and Dr. Bill Walter (County). These individuals represent a diversity of primary care organizations and pain management specialists, as well as provide expertise in the realms of physical health, behavioral health, and chemical dependency. Together, they have met for early morning meetings regularly since the spring, and have worked tirelessly to improve patient care and respond to the needs of primary care providers.

The CPS's goals were defined largely by the CAP, which is a Committee with broad representation from throughout the healthcare community, including all four primary care organizations. The first goal for the CPS was the creation of a set of guidelines for primary care providers for the evaluation and treatment of chronic pain. This document has been created, endorsed by the CAP, and a laminated copy has been sent to primary care offices. If you have not received a copy, please feel free to request one at sneff@trilliumchp.com. The CPS has also created a set of guidelines for emergency room and urgent care providers for the management of chronic pain.

The CPS next determined to offer a menu of educational opportunities to local providers. Dr. Chaplin gave a presentation on the evaluation and management of chronic pain at a conference last spring, and a video of her talk is available on Trillium's website at <http://trilliumchp.com/providers.php>. Furthermore, Trillium representatives will be calling your offices to offer to arrange a meeting with your providers and a member of a "speakers' panel" of chronic pain experts. The expectation is that such meetings would provide a forum to discuss the CPS guidelines and any other related topics. Finally, formal educational conferences will be arranged. The first meeting occurred on October 21 and was co-sponsored by Trillium and the Oregon Pain Society. Looking ahead, Trillium University is planning on hosting a meeting focused on chronic pain in 2016. Among other topics, expect to learn about the Oregon Health Authority's recently issued guidelines for the management of back pain, which will be implemented beginning in 2017.

The CPS recognizes that even with everyone's best efforts, there will remain a cohort of patients who will best be cared for not in a primary care setting, but in a multidisciplinary Pain Center. New analytics will help assess the need for one or more pain centers to address the complex needs of this subpopulation of patients and may lead to a Trillium RFP process in the future.

Finally, the CPS will direct future efforts to an educational campaign to explain to Trillium patients the upcoming changes in how chronic pain will be managed.

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