

Expanding Open Access

Lessons learned from three models:

Closed systems: Mt. Sinai and Brooklyn VA

Virtual closed system:
DOHMH/ACS collaboration

Addressing Disparities Expanding Access

- **Challenge** – to expand access
- **Challenge** – to learn from successes of closed systems
- **Challenge** – to create virtual closed systems that work well
- **Challenge** – to promote patient acceptance

GOAL: Screen More Eligible Patients

- Increase referrals
 - from PCPs
 - from Cancer Services Programs
- Efficient referral systems – DERS
 - accepted by patients
 - accepted by clinicians

D_{irect} E_{ndoscopy} R_{eferral} S_{ystem}

- Direct referral from PCP to endoscopy
- Started in NYC in early 2000s
 - Lincoln and Mt. Sinai were early adopters
- Promoted and expanded by C5
- Used in closed, open and virtual closed systems

Systems of Referral

- Closed system
 - Mt. Sinai
 - Brooklyn VA
- Open system
 - HHC
- Virtual closed system
 - FQHCs and collaborating GI offices

Lessons Learned

- Closed systems in operation for several years
- Creating virtual closed systems
- What makes for success?
- What are the challenges?