Code for America: Health Focus Area

Rebecca Coelius, MD | @RebeccaCoelius
Director of Health, Code for America
Code for America believes government can work for the people, by the people, in the 21st century.
This means Government...

- Starts with people’s needs
- Ensures everyone can participate
- Starts small and continuously improves
- Uses real-time data to inform decisions
- Defaults to open
- Builds the right team
- Chooses the right technology
Organized around Focus Areas

- Health
- Safety and Justice
- Economic Development
- Communication & Engagement

- Practices
- Products
- People

CODE for AMERICA
CfA improves the **delivery** of health and human services by increasing program **access** and **usability**.
What we’ve done + learned
Want to fix things that matter?

Apply for the Fellowship.
2015 Richmond, VA fellowship tool shares patient financial eligibility information between safety net clinics and hospitals, reducing the time to qualify for and receive care.
**Alla Lebsack**

**10/26/1996**

**% 239.57**

**$ 5015/month**

**3**

**0**

---

### You are likely eligible for **Daily Planet**.

You're likely to fall in the **Full fee** section of the sliding scale because your income is **over 200%** of the Federal Poverty Level.

View service ➔

Referral sent! ✅

---

### You are likely not eligible for **CrossOver**.

- Income below 200% of the Federal Poverty Level
- Uninsured

Send Referral ➔

---

### You are likely not eligible for **Access Now**.

- Income below 200% of the Federal Poverty Level
- Uninsured
- Not eligible for Medicaid

---

### You are likely eligible for **RCHD Resource Centers**.

You're likely to fall in the **E** section of the sliding scale because your income is **between 200% and 200% of the Federal Poverty Level**.

View service ➔
2015 West Sacramento, CA fellowship tool FARM STAND increases awareness in the community to encourage seasonal, healthy grocery purchases from local farmers.
Want to Improve your City?

105 Brigades
4500 + Volunteers

codeforamerica.org/brigade
Chicago Brigade -> Deeper Collaboration

➔ early 2012: Chicago hack night project was Chicagoflushots.org
  • Chicago Department of Public Health asked for help
  • Was deployed to three other cities within one month

➔ late 2012: CDPH partnered with Smart Chicago to build Foodborne Chicago
  • app that searches twitter for mentions of food poisoning
  • Tweets become 311 service requests to inspect the restaurant

➔ helped convince the City of Chicago’s Department of Innovation and Technology to launch predictive analytics platform for identifying food violations in 2015
  • Catches critical safety violations 7 days earlier
  • Utilizes their own open data
  • Partnered with Allstate to help crunch numbers

And it’s open source!!
www.github.com/chicago
Current pilots with City Parks departments in Oakland, San Francisco, San Diego, and Morro Bay, CA, and Canton, GA

2013 South Bend, Indiana fellowship tool CityVoice is a place-based call-in or text system to collect and share community feedback.

See it in action: http://www.sbparksplan.com/
Welcome,
This website is a fast and easy way for California residents to learn about and apply for medical, food, and cash assistance programs. MyBenefits CalWIN also provides ongoing access to secure and private benefit information. Select a topic below to get started or sign in to your account.

Community Based Organization, get started here.
Apply for CalFresh in San Francisco

Get extra money for food and groceries every month

Start your application

Get started in under 10 minutes

1. Apply online
2. Take a phone call
3. Receive benefits
What We’ve Learned: User Needs > Open Data

➔ spend as much time with your users as you do with policy + data
➔ prioritize open data by human problems
➔ measure success in human impact, not datasets or “apps”
WE HAVE SOME DATA

MAP ALL THE THINGS!
WE HAVE SOME DATA

Resist!

MAP ALL THE THINGS!
What We’ve Learned: Public health policies fail more often because of poor implementation than poor data.
What We’ve Learned:
Have a clear theory of change for more or better data.
STEP 1: GET MORE DATA

STEP 2: [?]

STEP 3: MORE HEALTH!
The Future
understanding a population will mean understanding individuals

individualized digital prevention + intervention

behavioral science tools as good as the bad guys

crowd-sourced (and driven) data collection + research
More info for decision-making at individual level

More data people want
  ➔ cost/ROI
  ➔ individualized quality data
  ➔ formulary/physician network

Will we have ability or incentive to use it?
Get Involved, Stay in Touch

➔ AddressIQ market research + pilot sites
➔ Improving accessibility + usability of SNAP
➔ Code for America Summit discounts

RebeccaC@codeforamerica.org
Thanks!