

Avoiding Hospitalizations with In-Home Care

April 2, 2013 by Rajiv Leventhal

Trial results show that an affordable care management system can dramatically reduce the use of hospital services



Laura Hernandez

Every year, studies indicate that between \$25 and \$45 billion is spent across the U.S. on avoidable complications and hospital readmissions resulting directly from the limitations of current care coordination information and communication systems.

In an effort to turn this unnecessary spending around, the New York-based Morningside House Long Term Home Health Care Program (LTHHCP) partnered with eCaring, a healthcare management technology company also from New York, and demonstrated, over a course of 90 days, the effectiveness of eCaring's low-cost care management solution in significantly reducing the use of expensive hospital services such as preventable emergency room (ER) visits, re-hospitalizations and doctor visits for high-risk geriatric patients.

Morningside House Long Term Home Health Care Program is a member of Aging in America's family of providers, which oversees five subsidiaries delivering care to thousands of people annually in the Bronx, Westchester, Rockland and Long Island. Also known as the "nursing home without walls" program, it is certified by the New York State Department of Health, and offers a coordinated plan of medical, nursing and rehabilitative care provided at home to persons who are medically eligible for placement in a nursing home. Morningside House LTHHCP cares for about 160 frail chronically ill individuals.

During the 90-day trial with Morningside House, officials from eCaring say they prevented nine ER visits, three hospitalizations, 12 doctor visits and three unplanned nurse visits for eight higher-than-average health risk, dual-eligible (Medicare and Medicaid) patients. The savings from services avoided were over \$60,000, or an estimated \$2,500 per patient per month. The eCaring system costs were around \$50 per patient per month.

GETTING REAL-TIME DATA

eCaring's complete cloud-based system generates real-time comprehensive healthcare data about a patient's behaviors (such as eating, toilet patterns, mental and physical state, etc.) as well as his or her activities and daily living. It looks at vital signs such as weight, blood sugar, temperature, and blood pressure. The system generates timely interventions, reduces uses of hospitals (readmissions, ER visits, hospitalizations), and drives better outcomes at lower costs.

The system has two elements to it—a data entry side and a receiving side. On the data side, a program called CareTracker is designed to be easy to use, so home health aides don't need to have computer or English literacy. The aide can enter hundreds of data points about a particular patient, and that process of entering data will trigger an alert for the nurse manager. Over the 90 trial days, eCaring received 824 data points per patient per month about everything from the patient's activities to personal care to his or her mental and physical state.

On the receiving side, there are care management programs, which include modules and dashboards that enable a care manager to review information and see it through a CarePortrait to look at the areas that are of interest to them regarding a particular patient. And through CareAlerts, the care managers get notified immediately that there needs to be a response.

PROVIDING AFFORDABLE CARE

Laura Hernandez, R.N., vice president of home care and director of patient services at Morningside House Long Term Home Health Care, says because of the reimbursement structure currently in New York, Morningside House needs to make sure the care it provides is clinically excellent but can also contain costs. "Many patients can be clinically unstable. If something goes wrong, seemingly as minor as wheezing or dizziness, some patients call 9-1-1 and end up going to the ER. That's a model that has to change. They have to be more mindful of unnecessary and costly trips to the ER and the hospital."

For the trial, eight of Morningside House's "frequent fliers"—a term Hernandez uses for patients who go to the ER as often as once or twice a month when they aren't feeling well—were selected with the goal to keep them at home and avoid unnecessary hospital and ER visits. "We set up the system so that it would alert us when the patient was demonstrating symptoms and would get to the point where he or she would quickly call 9-1-1," says Hernandez, adding that it was necessary for Morningside House to develop a plan of care for the patient in the home. "We would have a nurse go into the home and introduce the aide to the system, and we would then put in the plan of care that we want to be done in the home."

"And the alerts that we want added in are the ones that we were most interested in. For example, if a diabetes patient doesn't want to eat or if he or she is demonstrating dizziness, we will put those alerts right into the system and train the aide to let us know when they appear. The training takes a few minutes and the aides just love it. The nurse in the office is working closely to help develop plan of care, and we monitor it on a regular basis during the day. If we get an alert, we also get an e-mail so we'll know to respond right away."

Hernandez recalls one patient in the trial who would regularly go to the ER once or twice a month for high blood sugar. Before this system, says Hernandez, this patient would regularly call 9-1-1—the patient, family and aide were all frightened when symptoms would arise, and there was no hesitance to call. But through the use of the eCaring system, once it looked like the patient might be having an episode of hypoglycemia, a Morningside nurse would automatically see the alert and call the patient's home to find out what is going on. Sometimes it would be possible to solve the problem over the phone, says Hernandez.

"This has improved our care coordination, clinical outcomes, patient satisfaction, and reduced ER visits," Hernandez boasts. "It's also been wonderful for home health aides, who are often in the home for eight hours a day, and many times, no one really knows what they're doing. With this real-time system, we can now see what they're doing every 30 minutes and we can communicate back and forth with them. They feel like a bigger part of the team and that helps us as well as the patients. Patients feel more blessed that people are trying to care for them."