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EasCare Mobile Health Service

GREAT PARTNERSHIP:
FILLING THE HEALTHCARE GAP

Objectives:

- Identifying gaps in healthcare
- Defining a "community" partner
- Building Trust
- Importance of a free thinking environment
- Early involvement of key departments
- Review of Lessons learned

Paramedics branch into home care

By Priyanka Dayal McCluskey | GLOBE STAFF MAY 31, 2014

12 COMMENTS

SUZANNE KREITER/GLOBE STAFF

Paramedic Ruben Torres will undergo training at EasCare LLC, one of several Massachusetts ambulance companies that plan to branch into home health care.

Identifying Gaps in Healthcare

- Evaluate existing healthcare systems
  - Each community will be unique
- Identify needs based upon experiences
  - Frequent flyers
  - High risk / acuity patients
  - Underserved communities
  - Limited hours of coverage for existing systems
  - Lack of 24/7/365 Communication Center

Defining a "Community" Partner

- How do you define a Community?
  - Geographic boundaries?
  - Service Area of agency?
  - County based systems?
  - Healthcare catchment area?

Finding a "Community" Partner

- Marketing to appropriate groups
  - ACO/ICO
  - Hospitals
  - Allied Health Services
  - Local E-911 agencies
  - Any group with a financial stake

Finding a "Community" Partner

- Sell an idea, not a product
  - Allow for evolution as a group
  - Partner may have better ideas or different needs

Our "Community" Partner

- Commonwealth Care Alliance
  - Large care delivery group
  - Pre-paid care (Flat fee)
  - Care coordination & extension of care into community
    - 10 years experience with in home care
- Specific subset of patient population
  - 2,200 High Acuity patients

Commonwealth Care Alliance

Building Trust

- Transparency
  - Healthcare is not typically transparent
  - Sharing strengths & opportunities
    - Honest about weaknesses & threats
- Leads to trust and free flowing of ideas
  - Partners assist in finding resolutions
  - Future goals and growth of program

Proof of Concept

- Proof of Concept to build trust
  - Gap identified
  - Created innovative "Discharge Program"
    - Home safety
    - Medication inventory review
    - Clarification of discharge summaries
    - Assurance that home needs are met

Data: Discharge Program

- 51 patient discharges
  - Involving 40 different patients
  - Fee for Service program

- Likely readmissions averted: 8 (16%)
- Frequency of med discrepancy: 41 (80.4%)
  - Mean # of medication changes at D/C: 2

Free Thinking: "Can do"

- Right players given the ability to think outside the box
  - Operations teams
  - Clinical Teams
  - Community Partners

- Always a can do thought process
  - Not an "if we can do it", but "how can we do it"

Gaining Approvals:

- Hurdles, obstacles, and obstructionist
  - Internal and external
- Process
  - Early meetings with State agencies
    - Peer review process
- Involvement of Partner Organization
  - Extremely beneficial!!!

Our Program:

- Single dedicated ACP coverage
  - 8 hours per day (6 p.m. to 2 a.m.)
    - Gap analysis: extend existing services
  - In home care with Primary Physician support
- Educational partnership
  - Clinical rotations with practitioners (160 hours)
  - Didactic presentations (140 hours)

Our Program:

- Call flow:
  - Triaged by CCA call center
  - ACP scheduled
  - Assessment on arrival
    - Access EMR
    - Collaborate with CCA team
      - Create individualized care plan
      - Implement care
      - Document in EMR
      - Schedule necessary follow up

Our Program:

- Oversight
  - Three level Review
    - Clinical Department
    - Medical Director
    - CCA Physicians
  - Monthly M&M
    - Each team member to present a case scenario
    - Discussion of identified growth experiences

Our Program:

- Data collection
  - Satisfaction: Patient, CCA Practitioner & Paramedic
  - Financial impact
  - Healthcare improvement
  - Admission aversions
    - "observation" unit admission
  - Provider skills
- Data set?

Reimbursement

Our Program

- Financial Components
  - Established relationships
    - Proof of Concept
  - Transparency of cost and risks
    - From both sides
  - Break even goal to prove cost savings
    - Long term shared savings goal

Lessons Learned:

- Everyone is important
  - Do not exclude any input
- Creating Financial Pro Forma
  - Numbers will surprise you
- Politically charged topic… BE PREPARED
  - Identify potential threats
  - Transparency is critical
    - Even to adversaries