

Accelero Helps Elevate Hospital Reputation with Payer Community

Improved discharge distribution greatly reduces joint replacement patient cost of care

AT A GLANCE

- Full service, acute care hospital
- Member of six-facility integrated delivery network
- Serves suburban communities in New England

ISSUES

- · Overall cost of care
- Multiple performance-driven payment models
- · Perceived value of the care provided



RESULTS

Improved the percentage of total hip and knee replacement patients discharged to home from 41% to 62%, saving payers over \$1 million, improving patient satisfaction and reinforcing the mission of providing high value care.

INTRODUCTION

The hospital is a full service, acute care community hospital in suburban New England that is part of a six-facility integrated delivery network (IDN). In New England, the delivery of care is highly integrated with numerous payment models designed to improve care. The hospital, and network as a whole, is focused on providing high value care through high quality care at a low cost. With that in mind, Accelero Health Partners was hired to create and implement a plan to improve the efficiency and effectiveness of the joint replacement program with an emphasis on the overall cost of care.

Accelero provided solutions across the care continuum – inpatient, day of surgery and post-discharge care. Of particular concern, however, was the high percentage of total hip and knee replacement patients that were being discharged to skilled nursing facilities (as compared to the market average). This drove up the cost of care (skilled nursing costs approximately \$5,400 more than home health care, per case) and negatively impacted the perceived value of care the hospital provided to these total joint replacement patients.

At 41%, the hospital's percentage of total hip and knee replacement patients discharged to home was well below the 25th percentile of hospitals in the Accelero database (FIGURE 1). Although somewhat skewed by the healthcare environment in New England, this rate was well below par for the market.

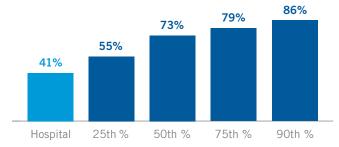


FIGURE 1 | Hospital's percentage of total hip and knee replacement patients discharged to home v. the Accelero database.

SOLUTION

Accelero personnel worked on site to implement process changes aimed at reducing the overall cost of care through patient education, a compressed recovery time and judicious post-discharge care.

Patient education

To improve discharge, patients are required to attend pre-surgical education where expectations and goals are set early in the process. These goals are reinforced throughout the hospital stay via frequent communication with care team members, daily newsletters, and white boards to ensure patients progress as planned. Additionally, Accelero worked with the hospital to institute a coaching model where a friend or family member participates in the patient's education and therapy to provide support and lessen the patient's anxiety.

Recovery time

Critical to improving the discharge disposition was to ensure prompt recovery through early mobilization. Implementing a multi-modal pain management protocol to manage pain early and throughout the acute stay has enabled compliance to the rehabilitation regimen and improved patient care and comfort.

Post-discharge care

Integrating home health into the process was necessary to ensure timely post-discharge care. As part of this process, a home assessment and preparation pre-operatively is now conducted to ensure safety hazards are removed and all necessary supplies are in the home prior to discharge.

SUMMARY

As a part of this project, the percentage of the hospital's total hip and knee replacement patients discharged to home or home care went from 41% to 62% (FIGURE 2). This represents an overall savings to the payers of over \$1 million.

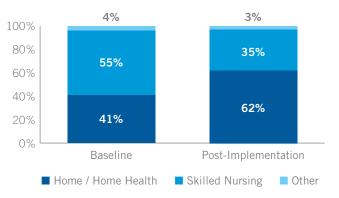


FIGURE 2 | Hospital discharge disposition for total hip and knee replacement patients.

Reducing the overall cost of care for total hip and knee replacement patients has increased the hospital's standing with regional insurance providers while improving patient satisfaction and reinforcing the hospital's mission to provide high value care.

Historically, hospitals in New England rank below national standards with a low percentage of joint replacement patients being discharged to home. However, based on hospital trends there is an opportunity to further increase the percentage of total hip and knee replacement patients discharged to home for even greater savings.



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