Overview of the Camden Coalition of Healthcare Providers

Jeffrey Brenner, MD
Dept of Family Medicine
Robert Wood Johnson Medical School
Camden, NJ
Camden-A Very Challenging Healthcare Environment

- One of the poorest cities in the country
- School system, Police department, City government in State takeover
- No history of cooperation between local healthcare stakeholders
Camden Health Data

- New Data Set 2002 - 2007
- 387,000 records with 98,000 patients
- Leading utilizer came 324 visits
- Most expensive patient $3.5 million
- Total revenue to hospitals for Camden residents $460,000,000 + charity care
- 80% costs = 13% patients
- 90% costs = 20% patients
## Top 10 ED Diagnosis 2002-2007 (317,791 visits)

<table>
<thead>
<tr>
<th>Code</th>
<th>Diagnosis</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>465.9</td>
<td>ACUTE URI NOS</td>
<td>12,549</td>
</tr>
<tr>
<td>382.9</td>
<td>OTITIS MEDIA NOS</td>
<td>7,638</td>
</tr>
<tr>
<td>079.99</td>
<td>VIRAL INFECTION NOS</td>
<td>7,577</td>
</tr>
<tr>
<td>462</td>
<td>ACUTE PHARYNGITIS</td>
<td>6,195</td>
</tr>
<tr>
<td>493.92</td>
<td>ASTHMA NOS W/ EXACER</td>
<td>5,393</td>
</tr>
<tr>
<td>558.9</td>
<td>NONINF GASTROENTERIT NEC</td>
<td>5,037</td>
</tr>
<tr>
<td>789.09</td>
<td>ABDOMINAL PAIN-SITE NEC</td>
<td>4,773</td>
</tr>
<tr>
<td>780.6</td>
<td>FEVER</td>
<td>4,219</td>
</tr>
<tr>
<td>786.59</td>
<td>CHEST PAIN NEC</td>
<td>3,711</td>
</tr>
<tr>
<td>784.0</td>
<td>HEADACHE</td>
<td>3,248</td>
</tr>
<tr>
<td>729.5</td>
<td>PAIN IN LIMB</td>
<td>2,908</td>
</tr>
<tr>
<td>724.5</td>
<td>BACKACHE NOS</td>
<td>2,858</td>
</tr>
<tr>
<td>789</td>
<td>ABDOMINAL PAIN</td>
<td>2,836</td>
</tr>
<tr>
<td>599.0</td>
<td>URIN TRACT INFECTION NOS</td>
<td>2,799</td>
</tr>
<tr>
<td>V58.3</td>
<td>ATTENT DRESSING/SUTURE</td>
<td>2,792</td>
</tr>
<tr>
<td>724.2</td>
<td>LUMBAGO</td>
<td>2,704</td>
</tr>
<tr>
<td>920</td>
<td>CONTUSION FACE/SCALP/NCK</td>
<td>2,645</td>
</tr>
<tr>
<td>490</td>
<td>BRONCHITIS NOS</td>
<td>2,526</td>
</tr>
<tr>
<td>V68.9</td>
<td>ADMIN ENCOUNTER NOS</td>
<td>2,475</td>
</tr>
<tr>
<td>786.50</td>
<td>CHEST PAIN NOS</td>
<td>2,455</td>
</tr>
</tbody>
</table>
### Percent of Population 30+ with Diabetes

- **14.6% - 15.2%**
- **17.0%**
- **18.2%**

### Diabetes Visits by Hospital

- **Virtua**: 5,811
- **OLOL**: 17,608
- **Cooper**: 24,581

### Prevalence of Diabetes by Age

- 30 to 39: 4.6%
- 40 to 49: 11.8%
- 50 to 59: 22.2%
- 60 to 69: 29.7%
- 70 to 79: 34.1%

### Diabetes by Hospital:

<table>
<thead>
<tr>
<th>Number of Visits</th>
<th>Total Visits</th>
<th>Total Patients</th>
<th>Charges</th>
<th>Receipts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 to 10</td>
<td>19,930</td>
<td>4,992</td>
<td>$606,910,340</td>
<td>$84,943,020</td>
</tr>
<tr>
<td>11 to 20</td>
<td>12,475</td>
<td>875</td>
<td>$328,629,988</td>
<td>$43,928,131</td>
</tr>
<tr>
<td>Over 20</td>
<td>15,595</td>
<td>428</td>
<td>$278,015,450</td>
<td>$34,729,624</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>48,000</strong></td>
<td><strong>6,295</strong></td>
<td><strong>$1,213,555,777</strong></td>
<td><strong>$163,600,775</strong></td>
</tr>
</tbody>
</table>
Camden Hospital and Emergency Room
Health Data - 2003

Visits that Include a Diagnosis of Falls
- Above City Range
- Within City Range
- Below City Range

Comparisons are based on rate per 100,000 population.

Source: Camconnect Camden Health Report, 2006
Top 1% of Utilizers (2002-2007)

- 1,035 patients with 39,056 visits
- Between 24 and 324 visits
- Total charges $375 million
- Total receipts $46 million + charity care
- Enough $$ to fund 50 family physicians or 100 nurse practitioners
Mission of the Coalition

The Coalition seeks to improve the health status of Camden City residents through:

- collaboration
- data sharing
- education
- improvements in service delivery
Camden Health Database

Camden Citywide Care Management Committee

Local Care Management Team
- Nurse practitioner
- Social work case manager
- Community health worker
Experience Thus Far

- Started Sept/Oct 2007 enrolling clients
- 115 enrolled so far
- Tremendous challenges in patient issues
- Good progress in communication between stakeholders
Case #1

46 y/o AA male with CAD, morbid obesity, DM, severe CHF (EF 15%)

2 previous admission this year to Kennedy and Virtua

Semi-homeless, lives in welfare motel with girlfriend, evicted from apartment recently

Hx of substance abuse

No consistent primary care
Citywide Care Management System

- Case #1
  - Criminal history requires patient to register with police
  - Admitted to Cooper with dyspnea and abdominal pain, stayed 2 months
  - Cholelithiasis, sepsis, intubation, PEG tube, C Diff infection, staph infection from PIC line
  - Subacute rehabilitation discharge x 10 days
  - Discharged to welfare motel
Citywide Care Management System

Case #1

- Auto assigned to UHP and to Dr. Brenner’s office
- Severe limitations in mobility
- Qualifies for federal disability benefits
- Very poor flow of information across inpatient teams, to rehabilitation, and to my office
Health care from a high utilizers point of view:

Dial **911** for warm bed, food, and shelter
Case Management - Experience Thus Far

- 43 patients matched in database
- Range of visits 1 to 324
- Most expensive patient
  - $4,973,811 charges
  - $661,155 receipts
  - Average receipts $69,653
- Visits 1,663 with average 38.67 visits/patient
- 37% visits are inpatient
- Total 43 patients
  - $25,598,615 charges
  - $2,995,080 receipts
## Preliminary Results

### Charges per month

<table>
<thead>
<tr>
<th>n</th>
<th>Ratio of Before to After</th>
<th>Before</th>
<th>After</th>
<th>Absolute Change</th>
<th>Percent Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>36</td>
<td>1:1</td>
<td>$1,218,009.69</td>
<td>$531,202.91</td>
<td>-$686,806.78</td>
<td>-56.39%</td>
</tr>
</tbody>
</table>

### Receipts per month

<table>
<thead>
<tr>
<th>n</th>
<th>Ratio of Before to After</th>
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<th>Percent Change</th>
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</thead>
<tbody>
<tr>
<td>36</td>
<td>1:1</td>
<td>$83,992.29</td>
<td>$55,641.94</td>
<td>-$28,350.35</td>
<td>-33.75%</td>
</tr>
</tbody>
</table>

### Visits per month

<table>
<thead>
<tr>
<th>n</th>
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<th>After</th>
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</table>

### Percent Reimbursement per month

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<tr>
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<th>Percent Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>36</td>
<td>1:1</td>
<td>6.90%</td>
<td>10.47%</td>
<td>3.58%</td>
<td>51.90%</td>
</tr>
</tbody>
</table>
Camden Diabetes Collaborative

- 10 Practices NCQA certification as Medical Home
- Provider & Staff Education on Chronic Disease Model
- Community-based network of Diabetes Education Programs
- Coordination with Medical Day Programs
- Targeted care of the high cost/high needs DM patients
Observations About Outreach Care Team

- Small 3 person team of CHW, SW, FNP
- Could add one additional CHW without disrupting team structure
- Intakes often done by all three staff or at least 2 staff to increase bonding with pt to entire team and allow for more rapid team-level problem solving for pt
- Lead staff member for a case varies depending on case details and who bonds with patient (relationships are everything)
Observations About Outreach Care Team

- **Efficiency vs Quality of Intervention:** Very difficult patient populations can cause high staff burnout. Important to allow staff to go out together and give time for communal debriefing.

- **Preservation of Team Cohesion:** Team needs to be physically housed together, not with or in vicinity to their own disciplines. (parallel work vs true patient-centered team care)
Community Health Worker

- **Roles**
  - Patient education
  - Care coordination (making appointments, arranging transportation)
  - Emotional support
  - Assistance with benefit applications

- Need close supervision and should be working regularly with same clinician and social worker to model behavior