Telehealth: A potent tool in preventing re-hospitalizations in the chronically ill population.

Presented by
Erin Denholm, CEO
Centura Health at Home
About Centura Health

- Largest health system in Colorado
- 12 Hospitals
- Senior Living Communities
- Home Health
- Faith based organization
- 12,000+ Associates
About Centura Health at Home

- Largest home health agency in Colorado
- 4 business lines
  - Home Care
  - Hospice
  - Infusion
  - Oxygen & HME
- 460+ Associates
- Net revenue = $70M
Where Hospital Industry Falls on the S Curve

Hospital Share of U.S. Personal Health Expenditures (1926-2000)

The S Curve

Results/Effort

Time

Ready

Ramp-Up

Refine

Reinvent
Where we’ve been . . .
Where we are . . .
Where we’re going
Healthcare’s Perfect Storm

<table>
<thead>
<tr>
<th>Medicare</th>
<th>1965</th>
<th>2008</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age of Eligibility</td>
<td>65 years old</td>
<td>65 years old</td>
</tr>
<tr>
<td>Ave lifespan &gt;65</td>
<td>4 years</td>
<td>20 years</td>
</tr>
<tr>
<td>Ratio Tax Payers to CMS Recipients</td>
<td>10:1</td>
<td>3:1</td>
</tr>
<tr>
<td>Number of 65+</td>
<td>&lt; 10 million</td>
<td>44 million</td>
</tr>
</tbody>
</table>
Indicator: Number of Older Americans

Number of people age 65 and over, by age group, selected years 1900–2006 and projected 2010–2050

Note: Data for 2010–2050 are projections of the population.
Reference population: These data refer to the resident population.
Indicator: Chronic Health Conditions

Percentage of people age 65 and over who reported having selected chronic conditions, by sex, 2005–2006

Note: Data are based on a 2-year average from 2005–2006.
Reference population: These data refer to the civilian noninstitutionalized population.
Source: Centers for Disease Control and Prevention, National Center for Health Statistics. National Health Interview Survey.
Program Growth in Spending vs. GDP

Growth in constant dollars 2005-2030

- GDP: 72%
- Social Security Spending: 147%
- Medicaid Spending: 166%
- Medicare Spending: 331%

Source: GAO analysis based on data from the Office of the Chief Actuary, Social Security Administration, Office of the Actuary, Centers for Medicare and Medicaid Services, and the Congressional Budget Office.
Medicare Will Go Broke By 2018, Trustees Report

By Amy Goldstein
Washington Post Staff Writer
Tuesday, May 2, 2006; A03

The financial troubles daunting the Medicare system have deepened during the past year, according to a government forecast that says the federal fund that pays for hospital care for older Americans will become unable to cover all its bills a dozen years from now.

The annual report, issued yesterday by the trustees who monitor the fiscal health of the Medicare and Social Security programs, said the trust fund for the health insurance system for the elderly will run out of money in 2018 -- two years sooner than predicted a year ago and
Consumer-Centered Healthcare

Quality of Life

HOME CARE
- Healthy, Independent Living
- Chronic Disease Management

COMMUNITY CARE
- Assisted Living
- Skilled Nursing Facility
- Specialty Pharmacy
- Community Clinic
- Doctor's Office

ACUTE CARE
- Specialty Clinic
- Community Hospital
- ICU

Cost of Care per Day

$1,000,000
$1,000
$100
$10
$1
0%
100%
SHIFT LEFT
So Now What . . .
re-defining homecare and preventing re-hospitalizations

HOME CARE

THE SILVER BULLET
## Challenging Areas in Hospitals Become Value Propositions in Home Care

<table>
<thead>
<tr>
<th>Challenges</th>
<th>Value Propositions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chronic Disease Management</td>
<td>Telehealth</td>
</tr>
<tr>
<td>Bed Day Management</td>
<td>Palliative Care</td>
</tr>
</tbody>
</table>
Case for Telehealth

- 90% of Americans over 65 have 1 or more chronic diseases
- 70% have 2 or more
- 95% of total medical expenses for Americans over 65 are spent on chronic diseases
Our Inferences about Video Monitoring

- CHAH cares for the sickest population
- Able to reach the top 5% of patients that use 70% of health care dollars
- A more comprehensive tool to care for this type of patient
- Health care provider forms better relationship with patient
- Ability to do immediate visit if patients status has changed
Centura Health at Home Telehealth Pilot

- 6 Month pilot
- Partnered with Penrose Hospital in Colorado Springs
- Targeted CHF patients
- Used ATI telehealth equipment to monitor patients
Penrose Patient Population

Patient Population Appropriate for Telehealth

- 67% No Need
- 33% Could use TH
Telehealth Pilot Objectives

- Decrease Hospital readmission with a goal of 60% reduction
- Decrease ER visits with a goal of 60% reduction
- Increase patient’s understanding of CHF, medications, diet and activities
- Increase patient satisfaction on Telehealth
Follow Up on Original 16

- 1 year prior to Telehealth, 100% of the patients had at least 1 hospitalization
- 1 year post Telehealth, 81% remained out of the hospital
- 2 years post Telehealth, 88% remained out of the hospital
After the Pilot

- Expanded Telehealth program statewide
- Expanded Telehealth diagnosis beyond CHF

Added:
- CAD
- Associated Cardiac Diagnosis
- COPD
- Diabetes
- Hypertension
FY 2008 Statistics – North State Program

- Total unduplicated patients: 104
- Average age: 80
- 58% female, 42% male
- 65% had co-morbidities
- Average LOS: 68 days

Decreased hospitalizations by 74% for patients who had at least one hospitalization in the prior year
FY 2008 Statistics – South State Program

- Total unduplicated patients: 82
- Average age: 82
- 72% female, 28% male
- 62% had co-morbidities
- Average LOS: 91 days

13% Hospitalization rate for patients who had at least one hospitalization in the prior year before Telehealth.

No patient had more than 1 hospitalization
Thank you!

Questions?