



## CoxHealth

### Decreasing Readmission with Prescriptive Patient Education in a Bundled Payments for Care Improvement Initiative

#### The Challenge

Hospitals are faced with numerous obstacles to comply with regulatory mandates, meet community expectations, and provide fiscally responsible care to remain viable within a complex and rapidly changing healthcare environment.

The Bundled Payments for Care Improvement (BPCI) initiative was introduced by the Centers for Medicare and Medicaid Innovation in 2011 to help hospitals coordinate care, deliver efficient, cost effective care, improve overall quality of care, and improve patient outcomes. Selected diagnosis groups are studied from hospitalization through the post-acute period on care, fees, and services. Actual expenses are reconciled against a target price for an episode of care. Payments or recoupment amounts are made by Medicare based on the episode of care up to 90 days post discharge<sup>1</sup>. As of late 2017, 352 acute care facilities have participated in the BPCI Model 2 program that focuses on care design.

CoxHealth is a five-hospital system with clinics, walk-in facilities, and urgent care facilities. They have affiliations with many post-acute facilities that allow and assist patients to access a full continuum of care. The healthcare system's Population Health Committee launched the (BPCI) initiative at CoxHealth in 2014 as one part of their outreach to improve healthcare and outcomes in the Springfield, MO area.

#### The Solution

The BPCI initiative at CoxHealth demonstrated a successful interdisciplinary project using TeleHealth's advanced functions to augment and evaluate interventions that would impact patients with condition-specific education during hospitalization and post-discharge. These interventions were integrated into the workflow of daily care to patients with Congestive Heart Failure (CHF), Stroke, Pneumonia, or Acute Myocardial Infarction (AMI), as well as patients who had undergone Joint Replacement Surgery. According to Tina Tarter-Hamlet, MSN, RN, Patient Education Coordinator for CoxHealth, the BPCI initiative was implemented as a proactive step to avert some of the costly readmission penalties for key diagnosis groups.

CoxHealth's Electronic Medical Record (EMR) "flags" the record of newly admitted patients with one or more of the above diagnoses. This marker is visible in the EMR to set in motion an interdisciplinary approach to educate and evaluate the patient during their hospitalization. Care redesign teams determine the patient's likelihood of readmission with a high, moderate, or low probability. Pharmacists can zero in on necessary medication communication and teaching for the BPCI patients. Using TeleHealth's interactive patient engagement solution, patient-specific education plans are "prescribed" and delivered to patients via their in-room television. Patients and family can view access and view their education plans, including educational videos and comprehension surveys on-demand, as many times as needed during hospitalization. Comprehension surveys are automatically linked to education videos and administered after their viewing to assess retention and need for more information before discharge. If a negative or "no" response is received from the assessment, teach-back methods are employed by the hospital staff to reinforce important information.

#### Client:

CoxHealth  
www.coxhealth.com

#### Location:

Springfield, MO

#### Size:

- 814 Licensed Beds
- 1,199 Physicians
- 7,108 Employees

#### Customer since:

2013

#### TeleHealth Solutions:

- TeleHealth's Interactive Patient Engagement Solution
- Samsung Healthcare Grade LED Televisions
- Curbell Gen4 Direct Access Pillow Speakers
- Multi-lingual Patient Education Videos
- TeleHealth 360° Service

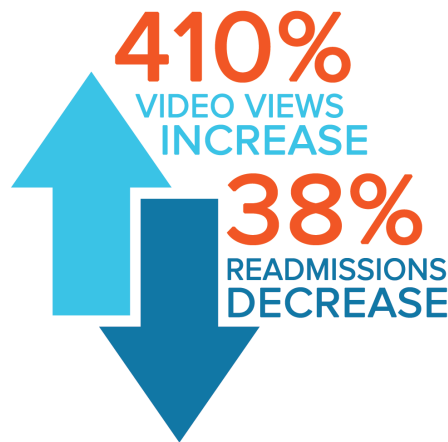
#### The Client:

CoxHealth is a locally owned, not-for-profit five-hospital health system serving 25 counties in southwestern Missouri. CoxHealth offers nationally recognized quality care and the latest in medical technology and services to improve the community's health and wellness. CoxHealth has many awards and accreditations that demonstrate their commitment to quality and service.

Patients who do not fully understand their post-discharge instructions are at a higher risk for being re-hospitalized. Teach-back is a valuable evidenced-based strategy to improve retention of essential self-care interventions and clarify concepts that may be misunderstood by the patient<sup>2</sup>. Often standard approaches to patient education may be inconsistent and difficult to deliver in a timely fashion for patients with complex conditions. Nurses are expected to have an in-depth knowledge of condition causes and self-care interventions that are integral in a home care situation as well as the time to perform in-depth teaching necessary for post-discharge patient success. Patients also pose multiple challenges with their level of acuity, literacy, and receptiveness to learning. “TeleHealth’s interactive patient engagement system, with automated education plans and comprehension assessments offers our staff the support, convenience, and necessary patient education frequency necessary to improve outcomes for our more complex patients,” says Ms. Tarter-Hamlet. Evidence shows that successful education and patient engagement strategies improve satisfaction and outcomes<sup>4</sup>.

## The Results

At CoxHealth, case management teams and post-discharge calls to the patients assure timely patient-physician follow up and treatment plan adherence. Readmission data is tracked and evaluated by the Patient Education Coordinator for education provision in previous hospital admissions. The data is compiled and reported to Population Health teams surveying factors and trends relevant to readmissions causes.



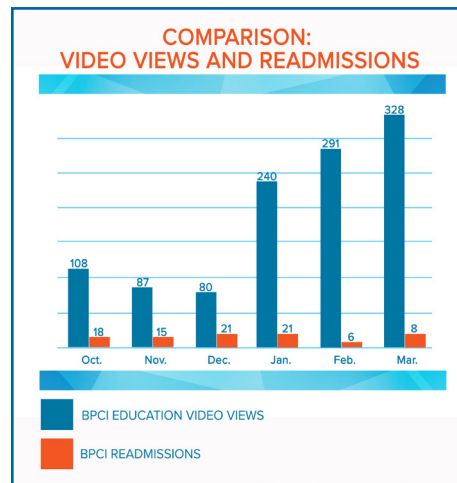
Data analysis from October 2016 to March 2017 showed a rapid rise in BCPI-specific video usage at CoxHealth, with an increase of 410%. Correspondingly, the data indicated a downward trend in BPCI readmissions by 38% for the same period.

Readmissions can be costly to patients, their families, and healthcare facilities. Reducing avoidable admissions to acute care facilities continues to be an important focus of quality improvement across healthcare systems<sup>6</sup>. Readmissions in 2016 cost facilities \$420 million dollars in fines and penalties<sup>7</sup>.

By implementing a strategic plan to reduce readmissions that incorporates standardized education, evaluation, and teach-back, CoxHealth is demonstrating a focused approach to reduce readmissions. Best practices, evidence-based solutions, care pathways, and a technology-based approach can augment and improve these critical diagnosis groups susceptible to costly readmissions. CoxHealth’s Bundled Payments for Care Improvement strategy is demonstrating remarkable results for this challenging issue.

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Tina Tarter-Hamlet, MSN, RN,  
Patient Education Coordinator  
CoxHealth



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