Breaking Down Barriers to Care

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MetroHealth Medical Center
Red Carpet Care Goals:

• Improved Outcomes
• Better patient experience
• Improved Communication
• Ease of access
• Lower Cost of care
Red Carpet Care

Focus on the “Super Utilizer”
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Super Utilizer patients have:

• Complex medical and social needs

• Are among the sickest 5 percent of the population and account for 60 percent of the nation’s healthcare costs
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**Super Utilizer** patients have:

- Have one or more chronic conditions that are poorly controlled
- Lack Ties to Primary Care
- Wind up in the ED, driving up costs without better outcomes
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The **Face** of a Super Utilizer:
• History of trauma
• Depression
• Substance abuse
• Personality Disorder
• Family and Social issues
• Limited resources (housing, transportation)

Barry J. Jacobs, Psy.D.
Crozer-Keystone Family Medicine Residency Program
Red Carpet Care Background

- **Population Health**: New approach being implemented throughout the country
- Medicare and Hospital incentives: Focus on preventative care and patient re-hospitalization
  - ACO: MetroHealth Care Partners
  - E-ACO: MetroHealthy
- Red Carpet (2015): Grace Model training
  - Geriatric Resources for Assessment and Care of Elders
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Team Approach:
- Geriatrician
- Nurse Practitioner
- Pharmacist
- Mental Health Nurse Practitioner
- Social Worker
- Care Coordinator
- Care Navigator
Criteria for Inclusion:
• ACO Member
• 2 ED visits within the last 12 months
• 1 inpatient visit within the last 12 months
• Cuyahoga County Residence
• Top 10% risk stratification ranking
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Criteria for Exclusion:

• Dialysis
• Active Cancer Treatment
• Pregnancy
• Safety Concerns due to condition of the patient’s home
• Active substance abuse
  – Dependent on patient compliance
• Non-compliance with Red Carpet Program
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New Patient Home Visit:
• Team visit
  – Nurse Practitioner and Social Work
• Home assessment
• IDT Meeting:
  – Bringing assessment and information to team meeting for discussion and recommendations
• PCP and Specialist notification with recommendations from team
• Recommendations implemented by team and Providers
Nurse Practitioner Role:
• Medical History
• Medication Reconciliation
• Physical examination
• Safety Evaluation
• Chronic Disease Education
• Urgent visits for medical intervention
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Social Worker Role:
- Psychosocial history and assessment
  - Depression Screen (PHQ-9), Mini-Cog, SLUMS, caregiver assessment
- Diagnosis understanding and health goal discussion
- Interventions
  - APS, program resource referral, mental health referral
- End of Life discussion and Advanced Directives
- Inpatient Connection
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Barriers:
- Family support
- Patient knowledge and understanding
- Transportation
- Lack of resources
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Program Features:
• Urgent Access Line
  – 8am-10pm daily access, Monday-Sunday
  – Direct connection to providers, Red Carpet Team
• Cab vouchers
• Red Carpet Care Navigator to assist with appointments
• EMMI Education
Red Carpet Care

ED / Inpatient Stay:
• Team member hospital visits
• Clinical Review meeting:
  – Octane levels: Weekly calls and visits
    • Cruise Control
    • Regular
    • Octane
    • High Octane
• Prevention Plan and new recommendations
Red Carpet Comprehensive Clinic:
• Same day and Urgent appointment access
• Nurse Practitioner and Social Work team
• Extensive chronic disease education
• Varied appointment length
• Disease treatment (IV, wound care, breathing treatments, etc.)
Red Carpet Care

Tools for Success:
• Weight scale
• BP cuff
• Emergency medications
• Medication organization
Red Carpet Care

Results:

• Decrease in ER visits
• Enhanced patient experience
  – Fluid transition between Inpatient and Outpatient
• Lower costs
“You can enjoy diabetes, high cholesterol and hypertension or you can suffer from good health.”