

Program Overview – High Utilizer 9-1-1/Emergency Department Patients

Background

MedStar Mobile Healthcare has been operating a Community Health Program (CHP) using Mobile Healthcare Practitioners (MHP) since July 2009. Patients who have graduated from the CHP have experienced an 84.3% reduction in emergency department (ED) use for the 12 months post-graduation compared to the 12 months pre-enrollment. MedStar works together with the patient and numerous healthcare and community-based providers to reduce the incidence of preventable ambulance responses and ED visits.

Program Components

Patient Education & Scheduled Home Visits:

An enrolled patient receives a series of home visits conducted by a specially trained MedStar Mobile Healthcare Practitioner (MHP). These home visits are designed to:

1. Educate the patient and patient's family on the appropriate ways to manage their healthcare needs. The patient is also assessed for possible enrollment in various healthcare and community-based programs to help meet the patient's clinical, social and/or behavioral health needs. This includes:
 - a. Medication compliance
 - b. Healthy lifestyle changes
 - c. Nutritional support
 - d. Home environment/safety needs
 - e. Behavioral health support
2. Educate the patient how to utilize their primary/specialty care network to help manage their medical needs. This includes:
 - a. When to call for an appointment
 - b. How to call for an appointment
 - c. Important information to share with care providers
 - d. How to utilize transportation services

During the intake visit, the patient is also asked to assess their own health status using the EQ-5D-3L process by EuroQol.

Unscheduled Home Visits:

The patient is provided a 10-digit, non-emergency access number for the MedStar Mobile Healthcare Provider in the event they would like a phone consultation or an unscheduled home visit between scheduled visits.

9-1-1 Responses:

Enrolled patients are tracked in MedStar's 9-1-1 computer aided dispatch (CAD) program. In the event of a 9-1-1 call to the residence, the normal EMS system response is initiated, but the MHP is also dispatched to the scene. Once on-scene, the MHP may be able to intervene and prevent an unnecessary ambulance trip to the emergency department by employing the use of the alternative protocols available to the patient enrolled in this program.



Record Keeping:

Patients enrolled in the program have a continual electronic medical record (EMR) that allows all care providers mobile access to the patient's entire course of assessments and treatments during enrollment, including care notes, vital signs, ECG tracings and treatments initiated. These records can be electronically provided to any care giver with access to a fax or email account.

Care Coordination:

MedStar hosts monthly meetings with all case workers, community service agencies and other care providers to review the program and enrolled patients in an effort to help meet any needs of the enrolled patients and to improve program resource coordination.

Graduation:

After the patient has demonstrated the ability to better manage their healthcare needs, the patient is graduated from the program, provided a graduation certificate, a patient satisfaction survey and the patient is asked to re-assess their own health status using the EQ-5D-3L process by EuroQol. This data is tracked to help measure program effectiveness and identify area of potential improvement.

