VA Telehealth Initiative to Reduce CHF Readmission Rates

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The Facts

- CHF is the leading cause of hospitalization in the elderly
- Costs exceeds 12 billion dollars annually
- CHF patients have the highest readmission rates (61%) within the first 2 weeks post discharge due to:

Background

- Prior to January 2013, all RN care coordinators were located four miles from hospital
- Physical location prohibited multidisciplinary face-to-face interaction
- Fragmentation in care: PACT post d/c assessments did not adequately evaluate inpatient changes
- Late detection of fluid overload lead s to decompensation

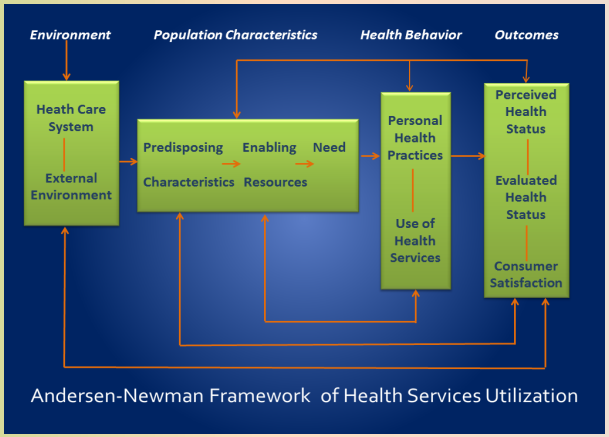
Practice Change

1. Use RN home telehealth technology to monitor patient self management skills
2. Use telephone based care as a means to maintain effective communication with the patient
3. Use evidenced based disease management protocols to safely assess patients condition
4. Develop a post discharge call template that focuses on on the most important aspects of CHF post discharge care:
   - Weight gain
   - Medication management
   - Change in respiratory patterns/difficulties
   - Fluid intake

Methodology

Andersen-Newman Framework of Health Services Utilization

- View of health and motivations to improve it are necessary characteristics for successful implementation of HT & phone care technology.
- HT and phone care potentiates patient self-care ability, autonomy
- Veteran is admitted, HT RN transitions patient from institution to home setting (d/c planning begins on admission)



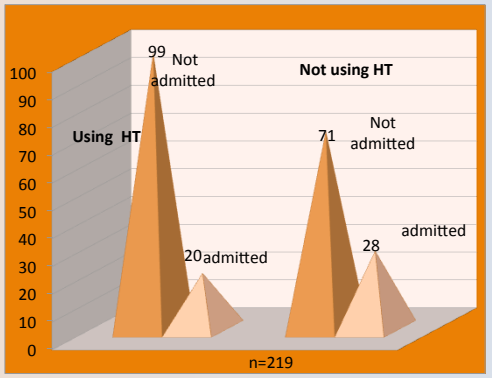
Clinical Outcomes

Based upon the data displayed below, the obtained Chi-square value of 4.14 (df=1, p=.042) indicates a significant difference between the outcomes of patients exposed to HT versus those who elected to use standard treatment (no HT).

CHF Standard Treatment F Home Telehealth (HT) versus Patients ≥ 65 years	Patients who used HT over 4 month period (2013)	Standard Treatment (no HT in 2013) Patients who elected not to participate
# of patients not admitted	**99** Out. Pt. cost= $313,632 ($3,168 x 99)	**71**
# patients re-admitted	**20** In. Pt. cost= $645,560 ($32,278 x20)	**28**
Total CHF Patients n=218	**119**	**99**
Cost avoidance	Cost to admit 99 pts Out patient cost 99 pts **Cost avoidance**	$3,195,522 - $ 313,632 **$2,881.890**

Odds ratio of 1.95 indicates use of HT is twice as likely to be successful versus standard treatment

Benefits of managing CHF patients with HT technology



Conclusion

RN managed telehealth and phone care initiatives reduced CHF hospital readmissions and its cost , improving Veteran satisfaction with their overall care experience

Treating the patient in their home promotes family socialization , community engagement , and is cost effective

For more information