



Focus less on technology, more on workflow and people

Intel-GE Care Innovations has developed a four-phase approach to help healthcare organizations prepare for and implement new technology.

By Julie Cheitlin Cherry

In the fight to improve the health of our population, CIOs and other technology executives are being asked to provide solutions. The focus of healthcare technology can be simplified into two mandates: improve quality of care and create efficiencies, especially as it relates to caring for the 20 percent of people that consume 80 percent of the healthcare dollars spent.

Ironically, success will rely upon the combined ability of providers, payers and technology companies to focus less on the technology and what a specific product can do. Instead, the key to achieving measurable results is to integrate technology into process redesign from the ground up in a way that produces new and improved care-delivery models, processes, relationships and interactions.

Assessment and planning phases are critical

Based on years of experience building successful telehealth programs, Intel-GE Care Innovations has developed a four-phase approach to help healthcare organizations prepare for and implement new technology: assessment, planning, implementation and growth. The phases that are most often overlooked are the assessment and planning phases.

During the assessment, there are two questions providers and payers should ask themselves:

1. What problem are you trying to solve, and what is the right target population?
2. What is your overall, long-term strategy for care delivery?

Oftentimes, providers and payers will make two critical mistakes when implementing technology. The first is using technology to care for a patient population that provides little opportunity for clinical or economic gains because the group is either too sick or not sick enough. The second critical mistake many organizations make is to purchase new technology, turn it on and add it to an existing care process, rather than understanding how and where they can integrate the technology solution into a new care-delivery model to

ensure effectiveness and efficiency. Going down either of these paths will usually lead to negligible patient benefits and added expense for the care provider or payer.

Let's consider one organization that avoided these critical mistakes and deployed the right technology with the right population, reengineering the approach to care to improve quality care and reduce costs.

Humana Cares reengineers telehealth program for CHF patients

Humana Cares, a national division of Humana, approached Care Innovations about integrating the Intel-GE Care Innovations Guide into a telehealth program with 2,000 congestive heart failure (CHF) patients in 33 states. The Care Innovations Guide is a comprehensive, next-generation remote health management (RHM) solution that provides an online interface allowing clinicians to monitor patients and remotely manage care.

"CHF is one of the most expensive chronic diseases. We knew that if we could increase patient self-management of CHF, the result would be improved health, reduced hospitalization and ER visits, and lower costs," says Kate Marcus, R.N., process manager at Humana Cares. "We just needed to figure out how to go about doing it and tackle the problem in new ways that maximized the reach of technology."

Considering their overall goals and who the right members were to enroll, Marcus and her team decided to focus on CHF patients who had ER events or hospitalizations within the past year. Some of these members lived in remote areas with limited access to healthcare.

Humana's team, which included Jean Bisio, president; Marge Van Gilder, director of finance; Debra Kleesattel, director of operations; Rick Schoppenhorst, director of information management; Kate Marcus, process manager; and Linda Bierbrier, QA and process improvement manager, worked collaboratively to ensure the organization's readiness to implement a new model of care during the assessment phase.

Workflow Management

"After we knew we had dedicated staffing, the technical infrastructure and a group committed to the project, we entered the planning phase," Marcus says. "From there,

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we had to reengineer our workflow."

Rather than training all Humana Cares nurses to use the Guide with a fraction of their patients, Humana restructured the telehealth program to include "Guide-only" nurses who only managed patients that had the Guide in their home. Workflow, target patient population and technology all came together to produce the desired results.

"The nurses who managed patients that had the Guide in their homes completely changed how they worked. Instead of calling these patients at a pre-determined interval to check in with them as they would in their traditional work process, these nurses were able to prioritize their efforts and deliver personalized care based on the daily needs of their patients," says Marcus.

The Guide can transmit patient biometrics on a daily basis and allows nurses to identify any abnormalities, such as a patient gaining three pounds in a day. At the first sign of trouble, the nurse can intervene in a variety of ways, including videoconferencing with the patient to discuss why the change may have occurred and obtaining visual cues that would indicate the seriousness of the situation. Moments like these encourage what Humana Cares calls "just-in-time"

opportunities, which are extremely effective in producing long-term behavior change.

"Achieving our goals will require more informed clinical care and changing patient behavior, and these 'just-in-time' opportunities are instrumental to our success," says Marcus. "We increase our chances of catching a problem before it becomes a true emergency. Our nurses also found these moments are especially powerful in changing behavior because the nurses can talk with the patients at a time when they are motivated and engaged about what exacerbated the CHF symptoms, and then determine solutions that fit their lives, to avoid the problem happening again."

Humana has seen significant results among CHF patients. While it's too early to quantitatively measure these results, Humana Cares is optimistic about the program's effectiveness. Humana has deployed 1,000 Guides, and the nurses report the device is valuable and truly having an impact on patient care. The program has high patient adherence rates – 80 percent by members who opted to have daily biometric measurements taken. Humana also reports high patient-satisfaction rates, including 94 percent of members saying the Guide was easy to use, 90 percent reporting they felt more connected to their nurse and 93 percent saying they would recommend it to their friends.

Shifting the mindset to focus on the people implementing and using the technology, rather than the technology itself, will make all the difference in developing a successful program that incorporates a sustainable, new model of care. **HMT**

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