Using Independa to Enable Smarter Care Transitions

By Laurie M. Orlov

SIZING THE POPULATION: PATIENTS LEAVE ACUTE CARE – TO GO WHERE?

According to the Center for Disease Control, acute care, defined as overnight stays in the hospital, are a reality for approximately 10% of the US population each year. The most common reasons for admission to the hospital were heart-related, followed pneumonia.[1] The most recent data shows hospitalization results in an average stay of 4.8 days and 35.1 million discharges.[2]

In 2011, almost 15,000 SNFs furnished Medicare-covered care to 1.7 million fee-for-service (FFS) beneficiaries during 2.4 million stays. The Office of the Actuary estimates that Medicare spending for 2011 was $31.3 billion and comprised about 6 percent of Medicare's spending.[3] Approximately 350,000 of these patients are discharged to in-patient rehabilitation facilities, 80% of which are hospital-based, with the remainder operated as freestanding facilities.[4]

Preventing hospital readmission is a national goal. Most recent data indicates that hospital readmission of Medicare patients alone costs $2 billion annually.[5] Penalties and incentives have been introduced that are designed to reduce the volume of these 'revolving door' patients, with much of the focus aimed at improving the discharge planning process.[6] The result is an increased focus on ensuring better care transitions, often described as 'care coordination' – meaning oversight of transitions from hospital to rehab facility, hospital to home, rehab to home, and follow-up care, all aiming to keep a person from returning to the prior care setting or back to the hospital.

Goals for reducing readmissions enabled the systemization of care coordination. The Centers for Medicare and Medicaid Services (CMS) has defined and formalized this medical oversight care coordination process. Recently the process of following the patient beyond the doors of the hospital has

become known as 'transitional care management.[7] This is a billable set of process steps encompassing discharge planning and documentation, continuing care coordination and follow-up communication and visits. Multiple organizations have been engaged to help lead policy work on standardization of care information, including the development of the Care Coordination Record (CCR).[8] But even if the information that underpins these care transitions becomes more standardized, experts observe that it has its limitations. As Richard Della Penna MD, Chief Medical Officer of Independa, notes: "Even with best practice transfer processes, while information transfer is critical, it may be seriously lacking. What's needed should include medical information, responsible parties, care and personal goals, medications, orders, wound care instructions, and special diets. Hospital EMRs will spew out reams of information, overwhelming to the receiver, who may insist on re-assessing the patient anyway. But the reams of paper still may not clearly identify the social and family contacts or even cognitive status of the patient."

Care coordination doesn't address the whole person. Through multiple transitions under the best of circumstances, the whole patient's plan of care and circle of caregivers may be lost in translation. Family members and care providers may encounter as many as six or seven different physicians and multiple nurses, any of whom is involved for just a portion of the time. Professor Mary Naylor of the University of Pennsylvania School of Nursing observes: "Medical information is part of what we need to know, but not all. We must ask -- how can we also support the family caregiver and social network to interrupt preventable, negative outcomes?"

INDEPENDA HELPS PUT THE PERSON AT THE CENTER OF CARE

Better information puts the patient front and center during care transitions. Patients are fearful when they are discharged from a hospital, especially at times of day that they may be separated from family and are the most isolated. Using a TV-enabled system like Independa helps mitigate a patient's isolation and fear. When an acute health condition sends a person to a hospital, followed by

transitions to a rehabilitation SNF (Skilled Nursing Facility) and/or to home, health care providers need to make sure the patient's family and care providers are included in the information loop and thus present with the patient, whether they are standing alongside in the hospital or are long-distance. Says Kian Saneii, CEO of Independa: "Healthcare providers can utilize Independa's TV-based technology platform for remote care, enabling visibility from a distance. Instead of the health care system at the center, this places the person at the center of the care universe."

Families and care recipients expect care AND information. When the person is at the center, the care they are offered is not just medical, but includes emotional support and the information connections that enable families – local and long distance – to engage. Says Kian: "This empowering care is complementary to the prescribed care, enabling faster and more effective healing. The opposite is also true – with less social interaction, there is less healing, more anguish, and ultimately, more cost. For most effective care transitions, the concept of a patient in the hospital or other episodic care setting must give way to the person, with the technology supporting this person enabling full empowerment for their circle of care to support them from a distance." Adds Mary Naylor: "Beyond the patient, we also need to understand the risk of isolated family caregivers. They need to be empowered with tools and resources, enabling them to connect socially, especially if they are geographically remote."

Independa powers transitions to home and home health care. In conjunction with its strategic partnership with LG Electronics, the worlds leading commercial TV manufacturer, Independa offers a TV-based system that can be installed in a hospital or Rehab Skilled Nursing Facility. Through Independa's global, strategic partnership with Samsung Electronics, a special tablet based version is also available. By taking that system home, individuals have access to reminders and calendars, participation in social connections, automated phone calls for follow-up, and escalation of interactions when a person does not respond, or otherwise something is not quite right. In addition, the system can connect wireless devices, for example, connections for tracking blood pressure and changes in weight.

Dr. Della Penna notes: "People can get the information they need through their most recognizable form factor to get information – the TV. No computer knowledge or new training required – there's no app to launch or learn. The system is embedded inside the TV, and engages the care recipient as necessary, regardless of the content provider or channel being watched."

ENTERPRISES BENEFIT FROM SERVICE DIFFERENTIATION

Healthcare organizations today must manage during a time of significant change – Independa's flexible and holistic system enables them to adapt and more easily:

Response to new pressures. . . Hospitals and post-acute rehab facilities are in the midst of ever-tightening constraints and competitive forces – improving 'customer' service, delivering better outcomes, reducing readmissions AND lowering overall costs are just a few of today's pressure points. In this growing competitive environment, TV-enabled Independa becomes both a service differentiator for health care enterprises and a means to better outcomes. For health care organizations that span hospitals, short stay rehab facilities and home healthcare, families and patients will benefit from the same compelling user experience after each of those transitions – with the data following the person to each next transitional point blurring the walls of care silos. Besides a common system solution across environments, the most important result is better care because of the involvement, empowerment and engagement of family and friends. Furthermore, provider systems are engaged in becoming and/or serving new Accountable Care Organizations – these ACOs know that they must manage their transition care business with better care AND more relevant data. Observes Kian: "One of the key benefits to these enterprises is the way that Independa's platform enables powerful, healing social engagement for their care recipients, with minimal staff involvement. Friends and family can "visit" mom without coming in, especially if visiting from great distances. The staff doesn't need to receive as many calls about Mom … friends and family are connecting with her via the TV. This makes for more

efficient use of staff, while enabling more effective family engagement and healing for the care recipient."

…Offer competitive advantages for winning the discharge business from providers. Independa's platform becomes another tool for short-stay rehabilitation businesses to improve their chances for being selected by discharge planners when a patient is ready to leave the hospital. WellBridge of Brighton, Michigan is a provider of post-acute short stay rehabilitation – and believes the use of Independa is a key differentiator to its growing success. Equipped with 88 TVs , all Independa-enabled, the technology is included in this Medicare-certified business, where the average age of patient is 77. Mike Perry, WellBridge COO, notes: "When our guests come in and feel connected with families, loved ones, and friends through the Skype application, they are more relaxed and comfortable. It's a great selling point to them and to the provider organization choosing where to send their patients."

BENEFITS BY STAKEHOLDER

Hospital	• Provides the mechanism for patients and primary caregivers to understand the post-acute care plan • Provides the mechanism to initiate the management of transitions and reduce the risk of readmission • Provides an additional resource for auditing care quality
Discharge Executive	• Communicates clear care instructions and required follow-up beyond the door of the hospital
Rehabilitation/SNF	• Offers competitive differentiation of short-stay rehab – services, linking patients to families and friends • Patients feel more connected, less anxious, focus is on recovery
Home Health Care	• Ability to augment visits with video calls and interactions • Ability to remind patient at home about care, follow-ups
Patient/Care Recipient	• Can stay connected with those who care and provide care • Enables a focus on recovery, mitigating fear and uncertainty
Primary Family Caregiver	• Greater peace of mind when unable to be physically present • Ability to provide real-time status check-ins with long-distance family – direct from the patient
Circle of Care	• Can be part of the care process – eliminating telephone call chains and delays • Can help arrange and provide post-discharge planning and visits

WHY INDEPENDA?

The interviewees for this white paper outlined its capabilities that distinguish it in the marketplace of health and wellness solutions, specifically referencing benefits such as its:

- **Integrated, person-centric approach to health, activity, and safety monitoring.** Independa's offering can enable care providers, caregivers, and family to oversee care to stay well-informed about changes in status, and stay engaged with the care recipient along the path to recovery.
- **Embedded TV solution.** At a time when a person is recovering from being in a hospital or rehabilitation facility, the process of staying connected with local and long-distance family and friends uses a technology all can recognize. TVs require no computer knowledge, training or apprehension on the part of the user.

- **Powerful yet simple to use Social Engagement tools.** Healthcare experts recognize that recovery from an acute health issue depends on treating the whole person – not just medical conditions. Per Mary Naylor: "Independa's tools to keep people connected with others are vitally important to providing whole person care." These social features help deliver the overall success of the solution and achievement of ALL stakeholder goals.

CONCLUSION

Penalties and incentives are driving hospitals towards improved care transitions and care coordination. For optimal transitions from the hospital to the residence, person-centric care solutions are required, where friends and family are empowered to reduce the burden on staff and improve the social engagement benefits for the care recipient. Particularly in the Medicare-based, short term rehab settings, such a system is most effective as no learning or computer knowledge is required during the stay, or when discharged to the home. A solution embedded inside the TV is the best approach for effective care transitions for SNFs, and provides the most compelling competitive advantage for them to receive more patients from ever more discretionary hospital discharge coordinators. The system can then follow the care recipient home. The person-centric, unique Independa solution embedded inside the LG TVs or Samsung tablets is integrated across social engagement, health, activity and safety benefits and concerns, providing a unique advantage to SNFs, home health organizations, hospitals, the care recipient's circle of care, and most importantly, to the care recipient themselves.

About Independa

Independa, Inc. offers senior care providers an integrated, easy to use technology-enabled independent living solution, including an option for the world's first and only TV with embedded remote care services -- offered through Independa's strategic partnership with LG Electronics, global leaders in Commercial TVs.

Independa award winning solutions are redefining independence with a unique and compelling blend of proactive technologies, helping organizations and family caregivers extend and enhance the independence of care recipients at their residence of choice. Independa offers a uniquely holistic system – driven by our Caregiver Web Application, "Angela" for the care recipient (offered via a television or a dedicated tablet), and a centrally managed integrated monitoring solution connecting across third party health, home and safety devices and sensors. No computer skills or training are required by the care recipient.

Independa B2B solutions are designed to be enterprise centric, and offer an integrated and proactive approach to remote caregiving. We partner with a broad range of care providers to enable more efficient, yet more effective remote care. Our solutions enable senior care providers to expand care services and enhance profitability, without adding staff. Independa customers include senior living facilities, nursing homes (rehab and long term care focused) homecare organizations, and enterprises offering remote care services for individuals in their residence.

For more information, please see Independa.com.

[1] http://www.hcup-us.ahrq.gov/reports/statbriefs/sb2.pdf

[2] http://www.cdc.gov/nchs/fastats/hospital.htm

[3] http://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=1&ved=0CCgQFjAA&url=http%3A%2F%2Fwww.medpac.gov%2Fchapters%2FMar13_Ch08.pdf&ei=rEsWU9zMHczioASDoYLIDA&usg=AFQjCNHRMXldfouD2bOKCbfdg1fV6_XomA&sig2=T45P2-FoUM-D7KdA9CsrRw&bvm=bv.62333050,d.cGU

[4] From 2010, this statistic is the most recent data. http://www.medpac.gov/chapters/Mar12_Ch09.pdf

[5] http://www.rwjf.org/content/dam/farm/reports/reports/2013/rwjf404178

[6] https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/Discharge-Planning-Booklet-ICN908184.pdf

[7] http://www.aafp.org/dam/AAFP/documents/practice_management/payment/TCMFAQ.pdf

[8] http://www.hrsa.gov/healthit/toolbox/HealthITAdoptiontoolbox/PersonalHealthRecords/aboutccr.html