

## **Independence** at home program national demonstration saves more than \$25 million

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House calls, a long-running option dating back to the early days of medicine, can be used in a new way to improve geriatric care and lower costs, says a report issued last week from the Centers for Medicare and Medicaid Services (CMS).

Using first year results from Penn Medicine's Truman G. Schnabel In-Home Primary Care Program and its partners in the Mid Atlantic Consortium, Medstar Washington Hospital Center and Virginia Commonwealth University (VCU) along with the 16 other IAH practices nationwide, CMS announced last week more than \$25 million was saved during the first year of the national Independence at Home Medicare (IAH) demonstration, averaging \$3,070 per participating beneficiary while improving care and achieving high satisfaction levels for the patients. During the first year, 8,400 Medicare beneficiaries participated in the national demonstration.

The national Independence at Home Medicare (IAH) demonstration delivers home-based medical care through house calls and personalized care to Medicare beneficiaries who face limited mobility and are burdened with advanced chronic illness. Nurse practitioners and physicians work with community agencies to provide primary care and supportive services for these patients who may otherwise not be able to travel to critical medical appointments, risking deteriorating health, threatening their ability to remain in their homes.

'IAH is a clinical model that focuses the resources of an integrated



provider team on the five percent of Medicare beneficiaries that drive nearly 50 percent of Medicare spending,' said Bruce Kinosian, M.D., an associate professor in the division of geriatric medicine and senior fellow at the Leonard Davis Institute of Health Economics. 'With our partnership with the Philadelphia Corporation on Aging, we have a truly integrated, effective and efficient care program providing complex medical care and the social supports that frail elders need to remain in the community, while preserving patient choice.'

While improving care and achieving high patient satisfaction, these programs reduced overall health care costs; in some cases by 20 to 30 percent. Penn Medicine, the only IAH program in the Philadelphia region, worked with its partners in the Mid-Atlantic collaborative and the Philadelphia Corporation on Aging. 'We've known for years that an integrated provider team working with patients provides effective care for medically complex, frail elders,' said Mary Ann Forciea, M.D., medical director of the in-home primary care program. 'The IAH demonstration's financing model now pays providers to deliver that type of care.'

The Penn Medicine house call team, supported for 20 years by the division of geriatric medicine, served alongside Medstar and VCU in a central role in creating and designing the demonstration to create the new option for patients. Data from the Penn team helped encourage lawmakers to include the three-year program in the Affordable Care Act.

During the first year as an Independence at Home practice, Medicare beneficiaries in the Truman G Schnabel In-Home Primary Care Program on average, had:

- Fewer hospital readmissions within 30 days
- Follow-up contact from their provider within 48 hours of a



hospital admission, discharge, or emergency department visit

- Their medications reviewed by their provider within 48 hours of discharge from a hospital or emergency room
- Their preferences documented by their provider
- Decreased use of hospital and emergency department services for conditions such as diabetes, congestive heart failure and COPD

'It's gratifying that our inter-professional team of geriatricians, nurse practitioners, social workers, and nurses has been so effective in serving frail elders over time, and across medical settings, to allow them to remain in the community,' said Jean Yudin, CRNP, nurse practitioner and program director of the Schnabel in-home primary care program.

## Provided by University of Pennsylvania School of Medicine

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