

2010 Performance Benchmarks in Managing Care Transitions

Target Populations • Target Conditions • Care Models
Home Visits • Training • ROI

Note: This is an authorized excerpt from *2010 Performance Benchmarks in Care Transition Management*.
To download the entire report, go to <http://store.hin.com/product.asp?itemid=4092> or call 888-446-3530.

The Healthcare Intelligence Network
800 State Highway 71, Suite 2
Sea Girt, NJ 08750

Table of Contents

About the Healthcare Intelligence Network	7
Executive Summary	7
Key Findings	9
Program Details	9
Impact and ROI	9
Methodology	10
Respondent Demographics	10
Analysis of Responses	10
Respondent Demographics.....	11
Tools and Technology.....	12
Comparison of 2009 Activity to 2010 Activity	12
Program Challenges and Barriers	13
Physician Organization Perspective	14
The Health Plan Perspective	17
Respondents in Their Own Words	19
Most Successful Strategy to Improve Care Transitions.....	19
Future Programs	20
Biggest Challenge of Care Transitions and How to Overcome It	20
Conclusion	22
Responses to Questions	23
Part I: Overall Survey Responses	23
1:01: Existing Care Transition Programs.....	23
1:02: Care Transitions Addressed by Programs.....	24
1:03: Targeted Population	24
1:04: Risk Factors.....	25
1:05: Critical Care Transitions.....	25
1:06: Care Transition Program Model	26
1:07: Included in a Care Transition Program	26
1:08: Care Transition Coordinator	27
1:09: Required Training	27
1:10: Home Visits	28
1:11: Home Visit Occurrence	28
1:12: Conducting a Home Visit.....	29
1:13: What Occurs During a Home Visit.....	29
1:15: Program Impacts	30
1:14: Future Care Transitions Programs	30
1:16: Measuring Success.....	31
1:17: Program ROI	31
1:18: Program Implementation Barriers	32

Part II: Responses from Physician Organizations	33
1:20: Physician Organizations - Existing Care Transition Programs	33
1:21: Physician Organizations - Care Transitions Addressed by Programs	33
1:22: Physician Organizations - Targeted Population	34
1:23: Physician Organizations - Risk Factors.....	34
1:24: Physician Organizations - Critical Care Transitions.....	35
1:25: Physician Organizations - Care Transition Program Model	35
1:26: Physician Organizations - Included in a Care Transition Program	36
1:27: Physician Organizations - Care Transition Coordinator	36
1:28: Physician Organizations - Required Training	37
1:29: Physician Organizations - Home Visits	37
1:30: Physician Organizations - Home Visit Occurrence	38
1:31: Physician Organizations - Conducting a Home Visit.....	38
1:32: Physician Organizations - What Occurs During a Home Visit.....	39
1:33: Physician Organizations - Future Care Transitions Programs	39
1:34: Physician Organizations - Program Impacts	40
1:35: Physician Organizations - Measuring Success	40
1:36: Physician Organizations - Program ROI	41
1:37: Physician Organizations - Program Implementation Barriers	41
Part III: Responses from Health Plans.....	42
1:38: Health Plans - Existing Care Transition Programs	42
1:39: Health Plans - Care Transitions Addressed by Programs	42
1:40: Health Plans - Targeted Population.....	43
1:41: Health Plans - Risk Factors	43
1:42: Health Plans - Critical Care Transitions	44
1:43: Health Plans - Care Transition Program Model.....	44
1:44: Health Plans - Included in a Care Transition Program	45
1:45: Health Plans - Care Transition Coordinator.....	45
1:46: Health Plans - Required Training.....	46
1:47: Health Plans - Home Visits	46
1:48: Health Plans - Home Visit Occurrence	47
1:49: Health Plans - Conducting a Home Visit	47
1:50: Health Plans - What Occurs During a Home Visit	48
1:51: Health Plans - Future Care Transitions Programs.....	48
1:52: Health Plans - Program Impacts.....	49
1:53: Health Plans - Measuring Success.....	49
1:54: Health Plans - Program ROI.....	50
1:55: Health Plans - Program Implementation Barriers	50
Glossary	51
Appendix A: 2010 Care Transitions Management Benchmark Survey Tool	52
About the Authors.....	56

About the Healthcare Intelligence Network

The Healthcare Intelligence Network (HIN) is an electronic publishing company providing high-quality information on the business of healthcare. In one place, healthcare executives can receive exclusive, customized up-to-the-minute information in five key areas: the healthcare and managed care industry, hospital and health system management, health law and regulation, behavioral healthcare and long-term care.

Executive Summary

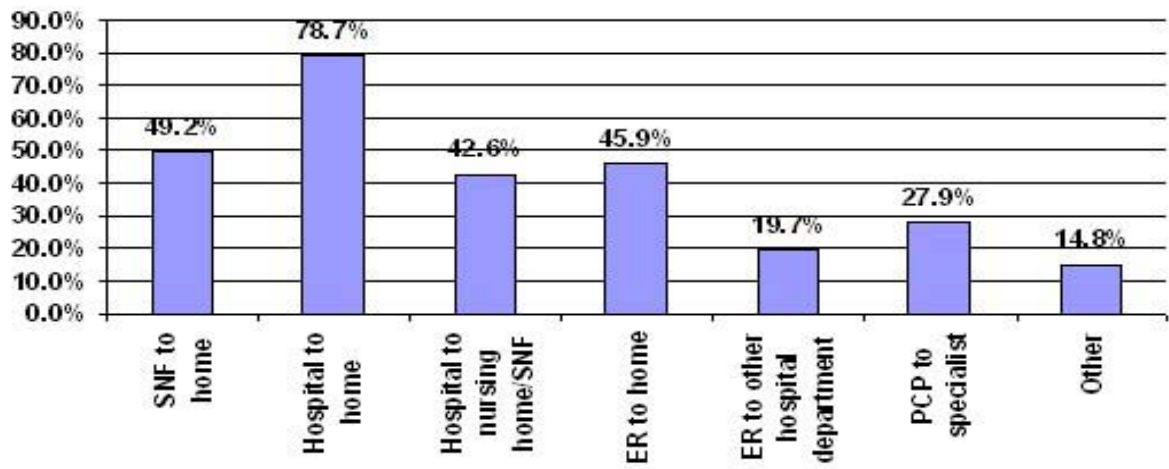
Tighter management of transitions in care — particularly for older adults with complex acute or chronic conditions — can help to close care gaps, avoid unnecessary hospitalizations, readmissions and ER visits, reduce medication errors and raise the bar on care quality.

In its second annual Managing Care Transitions Across Sites e-survey, conducted in May 2010, the Healthcare Intelligence Network set out to capture programs and activities by healthcare organizations to coordinate key care transitions. Through responses provided by 87 healthcare organizations to 26 multiple choice and open-ended questions, the survey results reveal slight increases from 2009 to 2010 in both the number of programs to manage transitions in care and the number of organizations conducting home visits in 2010 to improve care transitions.

In the 2009 survey, 80.2 percent of respondents said they adopted a care transition program, compared to 84.9 percent of respondents in 2010.

Which of the following care transitions are addressed by your program?

1:02: Care Transitions Addressed by Programs

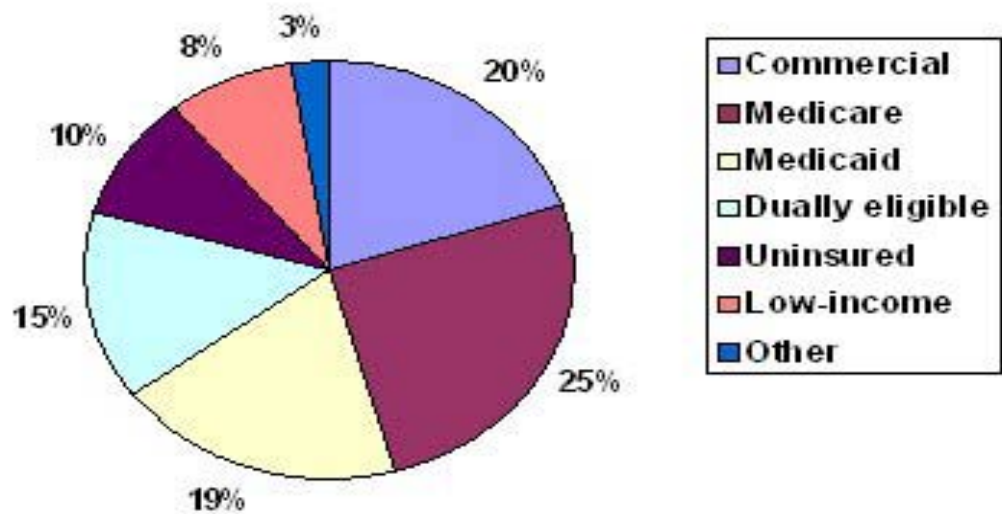


Source: HIN Care Transitions Survey
May 2010



Which population is targeted by your program?

1:03: Targeted Population



Source: HIN Care Transitions Survey
May 2010



Order Your Copy Today!

Fax Form to: 732-449-4463

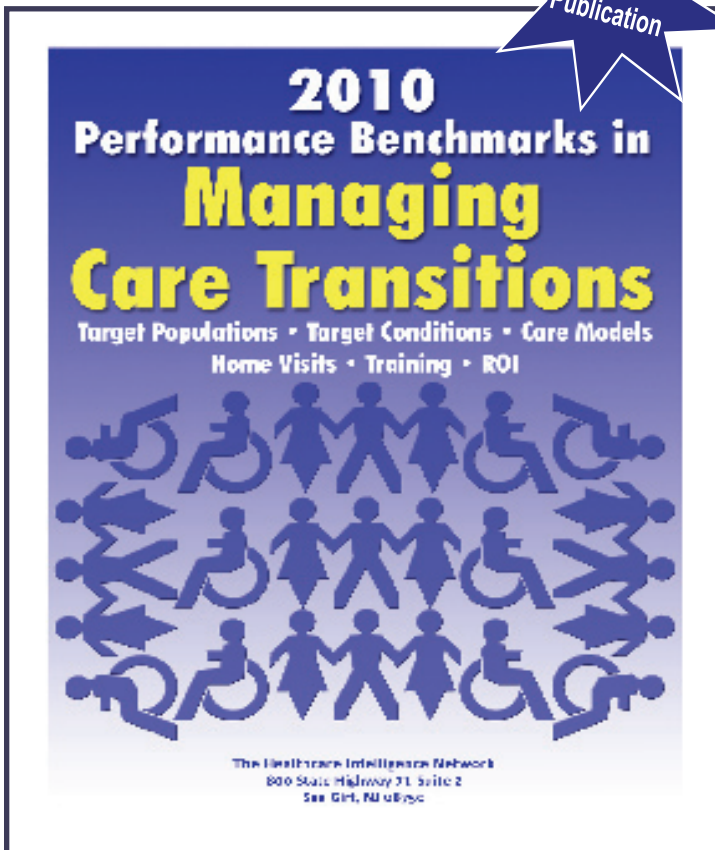


Actionable new data on efforts to better manage care transitions, including a year-over-year analysis of key trends and detailed feedback on the frequency and duration of home visits.

Includes:

- The prevalence of care transition management programs;
- The care transition getting the most attention from healthcare organizations;
- Populations and medical conditions targeted by care transition management;
- The impact of care transition management by healthcare utilization and costs;
- Home visits as part of care transition management;
- Measurements and ROI for care transition management.

Yes, I need the key benchmarks for care transition management and the impact of care transition programs on healthcare costs and utilization to evaluate my organization's initiatives. Please send my copy of **2010 Performance Benchmarks in Managing Care Transitions**, today for \$127.



60 pages

Please select one of the following formats: Print and PDF, \$193.05 Print, \$127 Adobe Acrobat PDF, \$117

THANK YOU FOR YOUR ORDER!

Name & Title _____
Company _____
Address _____
City _____
State _____ Zip _____
Phone _____ Fax _____
Email _____

Five easy ways to order:

1. Online:
<http://store.hin.com/product.asp?itemid=4092>
 2. Phone: 888-446-3530
 3. Fax: 732-449-4463
 4. Email: info@hin.com
 5. **Mail to:**
Healthcare Intelligence Network
PO Box 1442, Wall, NJ 07719-1442
- Check Enclosed - payable to Healthcare Intelligence Network in U.S. dollars - NJ residents, please add 7% sales tax

Tax ID No.
06-1515590

Charge my Visa MC AMX

Account No. _____ Exp. Date _____
Signature _____ Security Code _____