

2017 Healthcare Benchmarks

Home Visits

Note: This is an authorized excerpt from *2017 Healthcare Benchmarks: Home Visits*.

To download the entire report, go to <http://store.hin.com/product.asp?itemid=5207> or call 888-446-3530.

2017 Healthcare Benchmarks: Home Visits

In this comprehensive analysis of home visits, 107 healthcare organizations weigh in on the latest trends in house calls for medical purposes, from populations visited to top health-related tasks performed in the patient's home to results, challenges and ROI from home interventions, via their responses to a December 2016 survey by the Healthcare Intelligence Network.

"We are in a pilot study for high-risk accountable care organization (ACO) patients from skilled nursing facility (SNF) to home, prior to re-establishing care with their primary care provider. The nurse practitioner who provided care in the SNF follows them to their home."

> **Hospital/Health System**

"Having the home case manager meet the patient while still in the hospital [is our most successful home visit strategy]."

> **Case Management**

"A Transition of Care Coach who follows our member from the inpatient to the post-acute care setting [is our most effective home visit tool]."

> **Health Plan**

"Creation of an operational playbook for clinics and a patient engagement center to drive people to adopt home visits [is our most successful home visit tool]."

> **Hospital/Health System**



2017 Healthcare Benchmarks: Home Visits

This special report, based on results from the Healthcare Intelligence Network's industry survey on Home Visits conducted in December 2016, is the latest installment in HIN'S Healthcare Benchmarks series.

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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

Visiting targeted patients at home can illuminate health-related, socioeconomic or safety determinants that might go undetected during an office visit. Proving that there's no place like home for care management, home visits reduce unplanned hospitalizations or emergency department visits by these individuals.


In fact, hospital readmission rates are the top metric for evaluating the success of home visit initiatives, report eighty-three percent of respondents to the 2016 Home Visits survey by the Healthcare Intelligence Network.

Almost three quarters—72 percent—of respondents to the December 2016 Home Visits survey conduct home visits, with ongoing care management the principal goal of these visits for 46 percent of respondents. Priority populations for home visits include the frail elderly and homebound (69 percent), the medically complex (69 percent) and individuals recently discharged from the hospital (68 percent).

Drilling down to clinical indications, 76 percent flag patients with congestive heart failure (CHF) for home visits. Forty-four percent of respondents visit up to a quarter of their patient population at home.

In more than half of programs—53 percent—a registered nurse conducts the in-home visit, but in rare cases, patients may find a primary care physician (4 percent), a pharmacist (4 percent) or a community paramedic (3 percent) on their doorstep. Once inside the home, the primary task during the visit for 81 percent of respondents is patient and caregiver education, with an emphasis on medication reconciliation (80 percent).

In stratifying patients for home visits, 62 percent rely on care manager referrals. However, other respondents may consult registries, electronic health records (EHRs) and even medication data for this purpose.



**72% of
2017 survey
respondents
visit patients at
home.**

***“Most effective
workflow:
Transition of
Care Coach
follows member
from inpatient
to post-acute
care setting.”***

Respondent Demographics

Responses to the December 2016 Home Visits Survey survey were submitted by 107 organizations. Of 89 identifying their organization type, 37 percent were hospitals or health systems; 16 percent were health plans; 16 percent were case management organizations; 10 percent were physician practices; 9 percent were home health providers; and 22 percent categorized their organization as 'Other.'

Using This Report

This benchmarking report is intended as a resource for healthcare organizations searching for comparable data and means to measure implementation and progress. It is also a helpful planning tool for organizations readying initiatives in this area.

The initial charts and graphs presented here represent results from all respondents; images in subsequent sections depict data from high-responding sectors. (Figure titles begin with the segment they represent: for example, All, Health Plans, Hospitals, etc.)

Often, one of the largest responding sectors is composed of respondents identifying their organization type as "Other." In general, we do not depict results from this segment because it represents a wide range of organization types, including consultants and product vendors. However, you will always find a graph indicating the demographics of respondents.

Here are some additional tips for using this report:

- ✓ See how you measure up: Scan this report for your sector, and see how your program compares to others. Note where you lead and where you lag.
- ✓ Evaluate your efforts: Think about where you have been focusing your efforts in this area. Look for trends in the data in this report. Look for benchmarks set by your sector and others.
- ✓ Set new goals: Use the data in this report to set new goals for your organization, or to raise the bar on existing efforts.
- ✓ Use it as a reference book: Keep this report accessible so you can refer to it in your work. Use these data to support your efforts in this area.

If you have questions about the data in this report, or have feedback for our team, don't hesitate to contact us at info@hin.com or 732-449-4468.

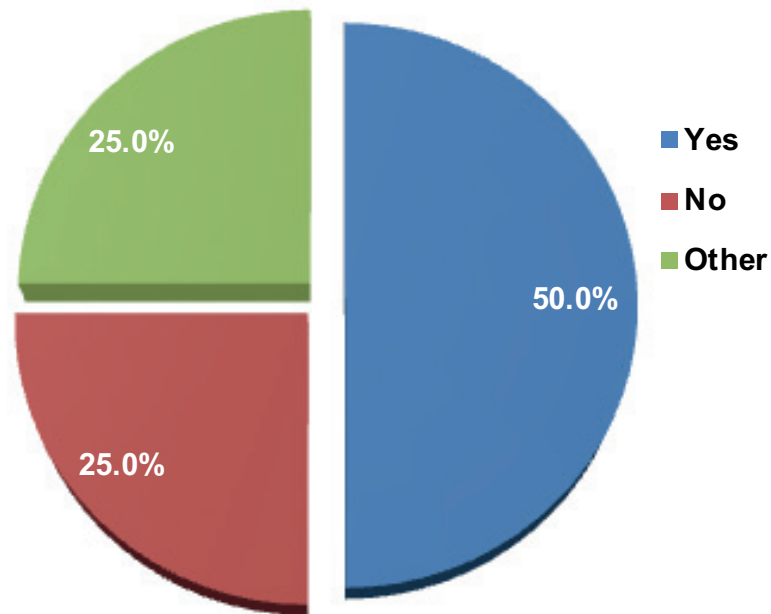


46% say ongoing care management is the primary purpose of home visits.

"Most effective workflow: Home-grown evaluation program and workflow processes."

Figure 31: Health Plans - Planned Home Visits Program

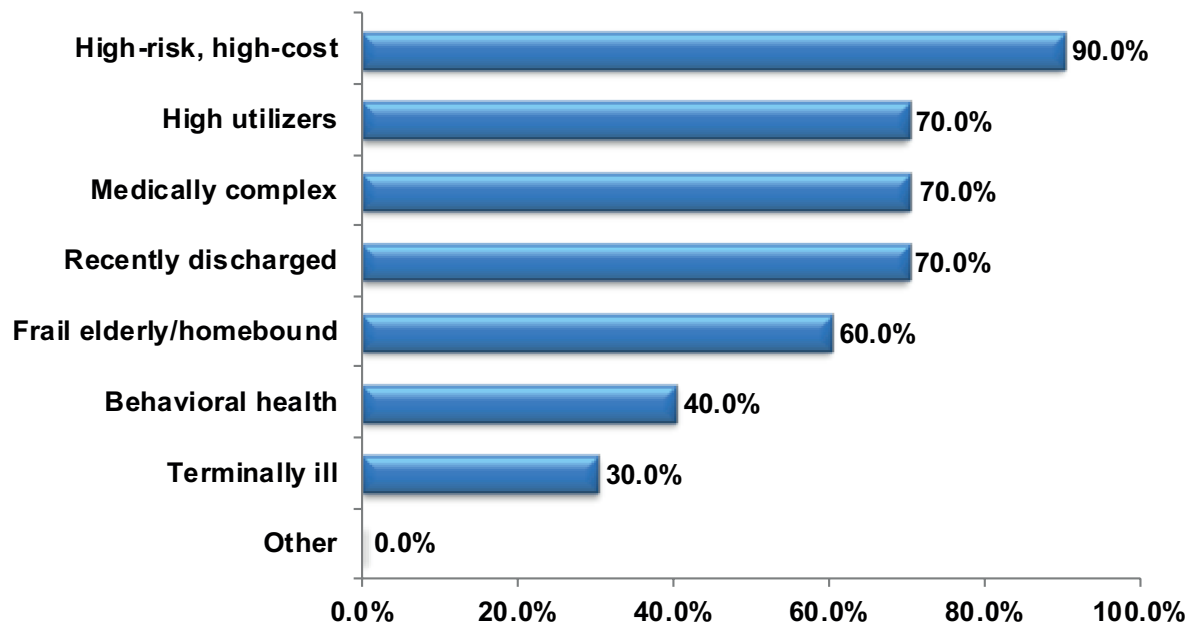
Will you launch a home visit program in the next twelve months?



*HIN Home Visits Survey
December, 2016*

Figure 32: Health Plans - Populations Targeted for Home Visits

Which populations do you target for home visits?



*HIN Home Visits Survey
December, 2016*

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