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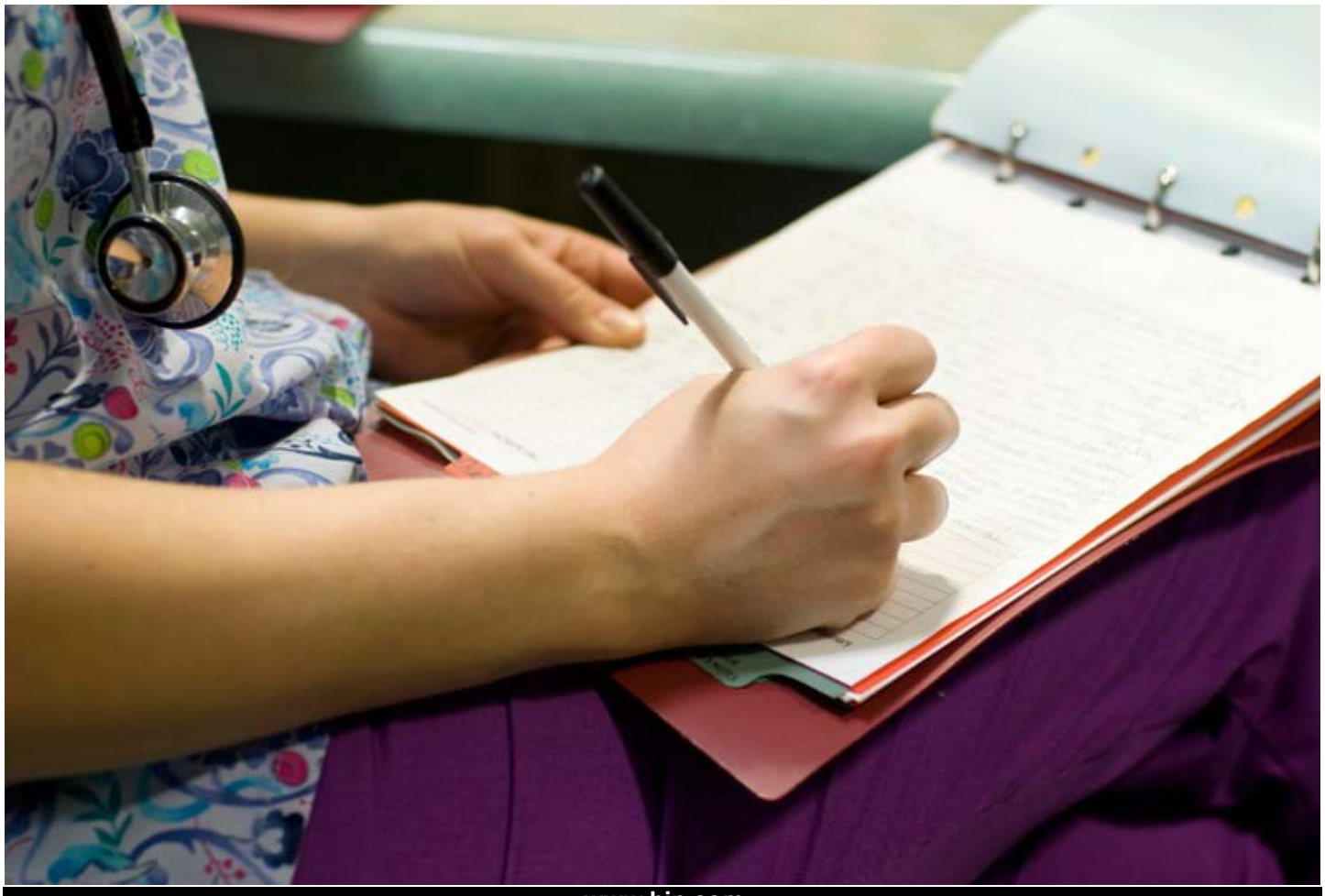
Healthcare Benchmarks and Metrics
January 2016

Care Plans in 2016:

High-Risk Health Markers, Care Transitions Trigger Planning Effort



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Care Plans in 2016: High-Risk Health Markers, Care Transitions Trigger Planning Effort

Detailed evidence-based care plans that follow high-risk patients through episodes and transitions of care help these individuals and their providers assess the necessary level of care, evaluate available services and empower patients with goals of care, impacting care quality and health outcomes and enhancing patient experience and engagement.

A majority of healthcare organizations—83 percent— incorporate care plans into value-based healthcare delivery systems, according to a December 2015 survey by the Healthcare Intelligence Network, with more than half of remaining respondents planning to do so in the coming year.

First and foremost in a care plan strategy is an assessment of needs, say 87 percent of respondents. An electronic health record is the care plan maintenance and distribution tool of choice for almost two-thirds of respondents, although the retention of paper records is reported by nearly half of responding companies.[1]

The chief criterion for classifying patients in need of care plans is data obtained from health risk assessments (HRAs), say nearly two-thirds of respondents, but patients transitioning between care sites also are prioritized for care planning, note 61 percent. The presence of a behavioral health condition poses the greatest challenge to care planning by a large margin, said 39 percent of respondents, as compared to diagnosis of physical health problems.

The typical tracking time for care plans ranged from one to two months, said 24 percent, while adherence to care plans is checked monthly by 37 percent of respondents.

Survey Highlights

- Beyond the high-risk identified from HRA data and transitioning patients, individuals with frequent ER visits and/or hospitalizations also are tagged for care planning, say 60 percent of respondents.
- Ninety-one percent believe longitudinal care plans would have a greater impact on patient engagement and improvements in clinical outcomes.
- Patient engagement is the most significant barrier to care plan success, say 44 percent of respondents.
- Sixteen percent report care plan durations from two to four months.

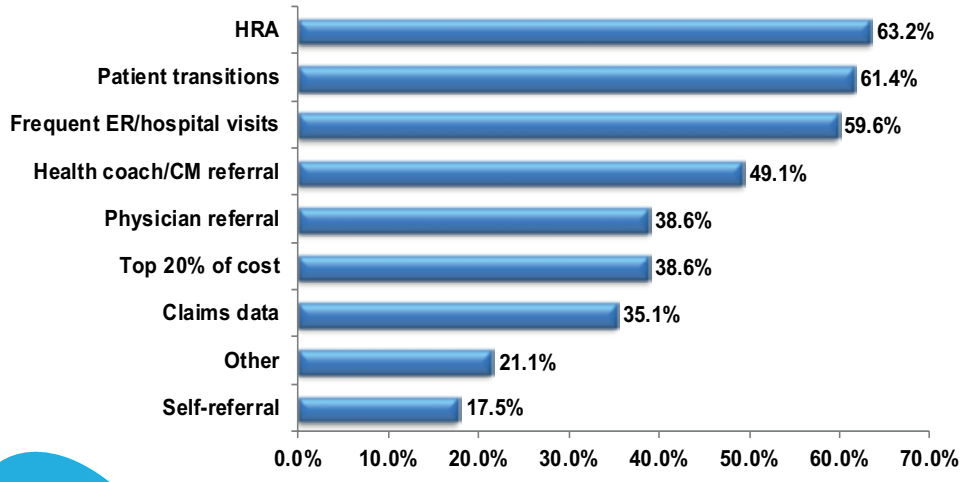
1 Multiple responses were permitted to some questions.

Program Components

- Beyond a needs assessment, a medications list (80 percent) and self-care goals (78 percent) are the top components of a care plan.
- A case manager typically has primary responsibility for ensuring care plan adherence, say 37 percent of respondents.
- Beyond a behavioral health diagnosis, diabetes presents the most significant care planning challenge, say 15 percent of respondents.
- Twenty-six percent of respondents maintain and distribute care plans via patient portals.
- Care plan adherence is verified weekly by 20 percent of respondents.
- Patients with multiple diagnoses or comorbidities present unique challenges to care planning, explained several respondents in open-ended remarks.

Criteria to Identify Patients in Need of Care Plans

What criteria is used to identify patients who need care plans?



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Results and ROI

- Patients' healthcare utilization patterns are the most reliable indicators of care plan adherence, say 29 percent.
- Thirteen percent report ROI from care planning efforts as between 2:1 and 3:1.
- Approximately 70 percent of respondents attribute gains in medication adherence, patient engagement and quality ratings to the use of care plans.

Most Effective Tool, Process or Workflow

Here is a sampling of effective tools and protocols supporting care plan programs, as reported by respondents:

- *"Using an assessment in our clinical software system that auto-generates problems, goals and interventions."*
- *"Completing the care plan at a home visit; using motivational interviewing techniques; providing patient a copy of their plan at the culmination of the home visit."*
- *"Primary care physician engagement with patients and care managers help patients to be more adherent to care plans."*
- *"Patient engagement, teach-back method and health literacy assessment to ensure patient's readiness and ability to adhere to plan of care."*

About the Survey

The 2016 Care Plans survey was administered in December 2015 via the Healthcare Intelligence Network Web site at **http://www.hin.com**. Throughout the month, respondents were invited to take the survey via e-mail, e-newsletter and social media reminders. A total of 78 healthcare companies answered the survey, which asked 23 questions about care plan elements, utilization strategies, delivery tools and technologies, challenges and successes, and more, with multiple responses possible on some questions. Some questions were open-ended, inviting write-in responses. Not all surveys were fully completed. Data is qualitative, with results compiled by the Healthcare Intelligence Network.

Respondent Demographics

Responses to the December 2015 survey on Care Plans were submitted by 78 organizations. Of 52 respondents identifying their organization type, 23 percent were hospitals or health systems; 19 percent were health plans; 15 percent were population health management companies; 12 percent were physician practices, 8 percent were post-acute care providers, and 31 percent categorized their organization type as 'Other.'

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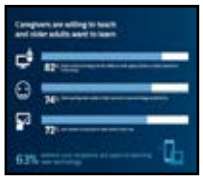

Caregivers Key to Patient Engagement

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The Healthcare Intelligence Network (HIN) curates high-quality information on the business of healthcare. Healthcare executives can receive exclusive, customized real-time news and data in their preferred format in five key areas: healthcare and managed care, hospital and health system management, health law and regulation, behavioral healthcare and long-term care.

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