

Health care costs going down? Believe it

Almost two-thirds of Americans said they delayed or avoided medical care in the last year because of the cost. CHI Health responds by giving patients the right care at the right time at the right place.

By KATHY SARANTOS NIVER
CHI HEALTH

It's a frightening fact: Almost two-thirds of Americans say they delayed or avoided medical care in the last year because of how much it would cost.

The health professionals at CHI Health don't want you to feel that way. That's why they're working to slash the cost of health care while improving the care you get. Especially when it comes to keeping you out of the hospital.

The skeptic in you is probably saying, "Yeah, right."

Results show CHI Health really is succeeding: The latest numbers from the Centers for Medicare and Medicaid Services (CMS) show CHI Health is at or below the regional average for seven out of the 10 most common "episodes of care." An episode of care includes a hospital admission and all the costs up to 30 days after discharge.

"Bottom line is that we're outperforming other hospitals and health care systems in the region on the total cost of care for Medicare patients," said CHI Health CEO Cliff Robertson, M.D. "Our teams do this by making sure patients receive the right care at the right time at the right place. This work improves the care and lowers the cost for both Medicare patients and any other patient who receives care within CHI Health."

Taking part in Medicare's "Bundled Payment Initiative" is another way CHI Health is addressing high costs (see Judi Adler's accompanying story). This bundled payment approach means physicians and hospitals are paid based on the quality of the patient's outcome. With bundling, there's less duplicate testing, less unnecessary care and better care after hospitalization. Results

have been so good, CHI Health has been nationally recognized for the program.

Take a patient who's hospitalized for a joint replacement at a CHI Health hospital. This new approach means he's now more likely to go home because the providers prioritize working together as a team for his care. The team uses what are known as best "evidence-based practices," where provider expertise and the latest and the best research is used to guide the patient's treatment plan.

Before CHI Health participated in the CMS Bundled Payment Initiative, only 30 to 40 percent of patients were discharged directly to their home after joint replacement. The rest generally were sent to a nursing home (skilled nursing facility) after leaving the hospital. After CHI Health took part in the initiative, a whopping 70 to 80 percent were discharged to their homes, a result of the team's approach. In other words, better outcomes for the patients and better outcomes for Medicare.

Other successes from CHI Health's embracing CMS' value-based care initiative: Fewer heart failure patients had to be readmitted after their original hospital stay. In fact, the rate was slashed by two-thirds, from 20-25 percent to only 7 percent readmissions. And the percentage of sepsis (severe infection) patients discharged to a skilled nursing facility instead of home shrank from 42 to 25 percent.

"Personalized care plans for higher-risk patients and more coordinated care throughout means we're delivering on our promise to lower health care costs and improve quality," said Dr. Robertson. "And we're just getting started."

Learn more about how CHI Health is working to lower the cost of health care at CHIHealth.com/Results.



PHOTO BY ANDREW JACKSON

Judi Adler is back to caring for her horses at her home in Bennington just three months after a complete knee replacement. She credits her orthopedic team at CHI Health for the best possible outcome.

Bennington woman 'her old self again' after knee replacement surgery

By KATHY SARANTOS NIVER
CHI HEALTH

She hadn't had her knee replacement yet, but Judi Adler was going to physical therapy already.

It was part of her long-term treatment plan — strengthening exercises for both legs before and after surgery — and just one more way her orthopedic team ensured she'd have the best possible outcome.

And she did. Three months after her complete right knee replacement, Judi goes up and down steps easily and doesn't need medications at night.

It was more than she could have hoped for. She'd suffered pain in both knees on and off for years. An active woman with a husband, a two-story house, dogs and a horse, she hated to slow down. When a doctor told her that her knee was "bone on bone," she knew it was time to get a knee replacement.

Judi's story is one example of how CHI Health is working to lower costs and improve quality. Judi's orthopedic team helped her by:

» Spending more time with her before sur-

gery. This included both physical therapy and conversations figuring out barriers after surgery and potential problem areas.

» Having an assigned nurse navigator to collaborate with Judi's doctor, CHI Health orthopedic surgeon Casey Beran. Nurse navigator Katelyn Henriksen made contact with the patient, followed her through her hospitalization and called her at home to help with and answer questions about her discharge plan. Katelyn and Dr. Beran's nurse, Lori Stubbs, were extra sets of "eyes" for Dr. Beran.

Judi was grateful for the teamwork, especially after a couple of setbacks early in her recovery.

She's doing so well she won't have to see Dr. Beran again until November, when she marks the one-year anniversary of her surgery. In the meantime, she's more active than ever and in her words — "her old self again."



Saving Money ...

Treatment	CMS Regional	Average CHI	Savings
Major joint replacement	\$21,823	\$20,387	6.6%
Simple pneumonia	\$13,051	\$12,365	5.3%
Heart failure	\$15,306	\$13,134	14.2%

While Improving Quality ...

Heart failure patients readmitted (before initiative)	20-25%
Heart failure patients readmitted (after initiative)	7%