



# Hospital at Home Patient Acquisition

March 2022

# INTEGRIS Health @ Home Scope

## Initial Go-live: Jan 31

- INTEGRIS Baptist
- INTEGRIS Southwest

## Qt. 4 Go-lives:

- INTEGRIS Edmond Hospital – June 6<sup>th</sup>
- INTEGRIS Canadian Valley – June 6<sup>th</sup>



**Hospital at Home Program:** Acute Substitution and reduced LOS (MS patients); Restorative Care through 30-day Episodes

### Target Payers:

- Initially Medicare, Medicaid and INTEGRIS Health PHO, United MA, Humana MA, AARP, INTEGRIS WebTPA
- Expanding to Commercial Payors such as Blue Cross Blue Shield, United Healthcare, Humana, and Aetna

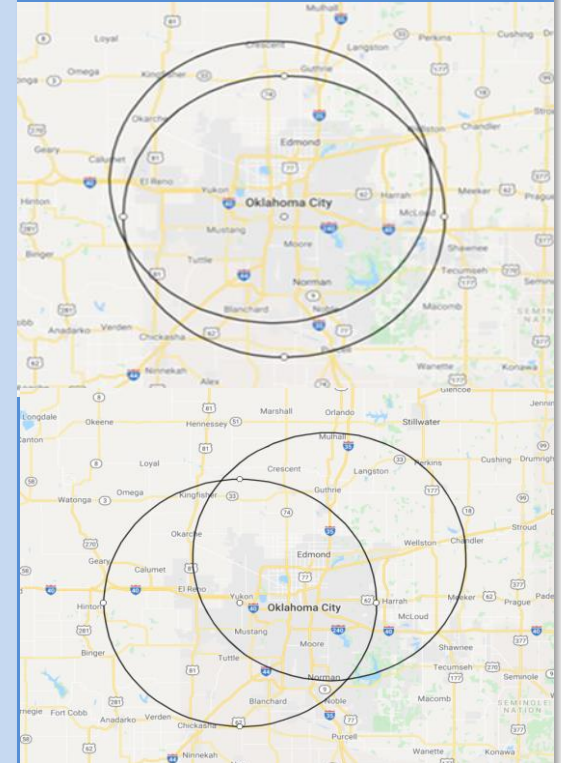
**Target Population:** Must meet inpatient admission criteria for Acute Substitution DRGs

**Referrals:** ED & Med/Surg depts

**Service Providers:** Hybrid of both Internal/ External Providers

**Bed Capacity:** Initially 10 Beds expanding to 30 beds in **July 2022**, ADC: 26+  
**Jan 2023:** 50 beds, ADC: ~29+  
**FY24:** 100+ beds

**Patient Geography:** 30-mile radius from sourcing facilities



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HEALTH



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Considering Inpatient Admission?

**405-200-1999**

24 hours-a-day, 7 days-a-week for  
any questions you may have.

**integrisk.com**



[The Patient Experience](#)

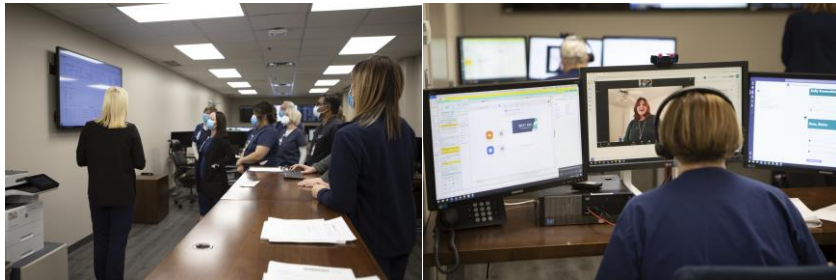
[The Provider Experience](#)

# The INTEGRIS Health @ Home Command Center



Location: IBMC PA Annex, 2<sup>nd</sup> Floor above Surgery

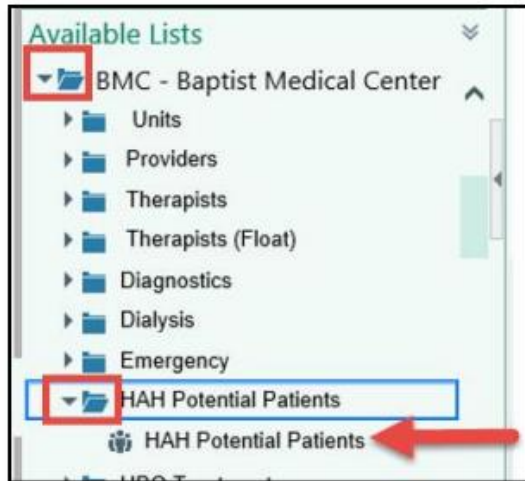
- Designed for high acuity care at home enabled by Cesia™ software, Epic and RPM technology.
- Provide care 24/7/365
- Staffed by INTEGRIS Health hospitalists, APPs and RNs
- Tethered to other INTEGRIS Health and contracted caregivers who are dispatched to the home.
- Seamless team providing care throughout acute and restorative phases



# Epic Flag and Lists for Potential HAH Patients

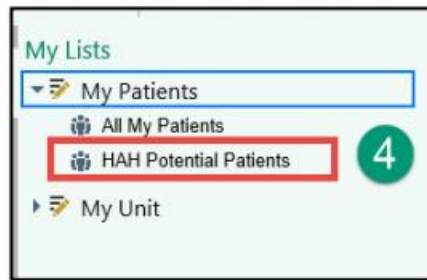
## Finding Patients

1. From **Available lists** on the left side of your screen, there is a **HAH Potential Patients list**. To find this list Select your **Facilities Folder**.
2. Select the **HAH Potential Patient folder**.



3. To find this list easier **right click** on the list, **Hover over Sent to**, then select **My Patients** list.

4. This will anchor the list to your **My Patient My list**.

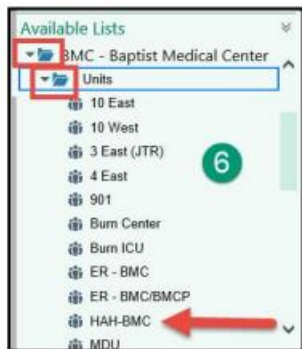


5. Next locate the **HAH unit** and anchor it to the **My Units List**.

6. Select your **Facility folder**, then select the **Units Folder**.

7. **Right click** on the **HAH-BMC unit**, hover over **Send to**, then Select **My Unit** list.

8. This will anchor the unit list to your **My Patients My Unit list**.







## Patient List Columns

### 1. Add the Following Columns to your Patients List.

- Add to My Patients list or If you created a My List with Potential Patients: Hosp at Home? And HAH Clinical Screening Pass.
- The Hosp at Home? Column displays a Purple icon if the patient is a potential candidate for Hospital at home or a House Icon if the patient will be admitted to Hospital at Home.
- The HAH Clinical Screening Pass Column will display the documentation, date, time, and caregiver that documented the Patient passed this clinical Screen question.

Potential Patients 2 Patients Refreshed just now Search All BMC Input

Location/Rooms/Bed	Admission Date	Patient Name/Age/Gender	Hosp at Home?	HAH Clinical Screening Pass
Location: 0601-02 Room/Bed: 0601/0601-02	11/9/17	Orders, P (33 y.o. M)		No@1/24/2022 1547 by Teresa L Barney, RN
Location: 0905-A Room/Bed: 0905/0905-A	10/8/18	Midnight, O (51 y.o. F)		—

Buttons: Flowsheets, MAR, Notes, Orders, Work List

# HAH Identification & Referrals with Rapid Rounds

Identifying potential hospital at home patients should be a standard process during daily rapid rounds/TCPs. As each patient is presented during rapid rounds, identify potential patients to transfer to Hospital at Home:

- 1) **Does the patient have a purple dot in the Hospital at Home column on your patient list?**
- 2) **Has the patient been clinical stable on the current treatment plan?** Hospital at Home can safely manage the care for patients with services provided in the home for patients who have hemodynamically stable vital signs and if dyspnea is controlled with O2 saturation >92% on < 5% O2?
  - For long-term COVID recovery patients, if requiring 5% or > O2, the patient may be a candidate for Hospital at Home if history of stable oxygen saturation and/or weaning down. Call the Command Center Hospitalist at 405-200-1999 for further evaluation.
- 3) **Does the patient have a safe, stable environment to continue their hospitalization in a home? Exclusions include:**
  - Patients who admitted from a long-term care facility.
  - Patients who are totally dependent on assistance for routine ADLs and do NOT have a caregiver in the home to assist them. If the patient has a caregiver who assists them at home prior to admission, he/she may still be a candidate for Hospital at Home
  - Patients who indicate there is ongoing illicit drug use in the home.
  - Patients who indicate there is violence occurring in the home.
  - Patients who are homeless or who do not have a stable place to stay.

**If answers to all 3 questions are YES, please contact the INTEGRIS Health @ Home Command Center! 405-200-1999 or Epic Secure Chat: HAH Command Center**



# Viewing Referred Patient Screening Outcomes

## Add HAH Patient Acquisition Columns:

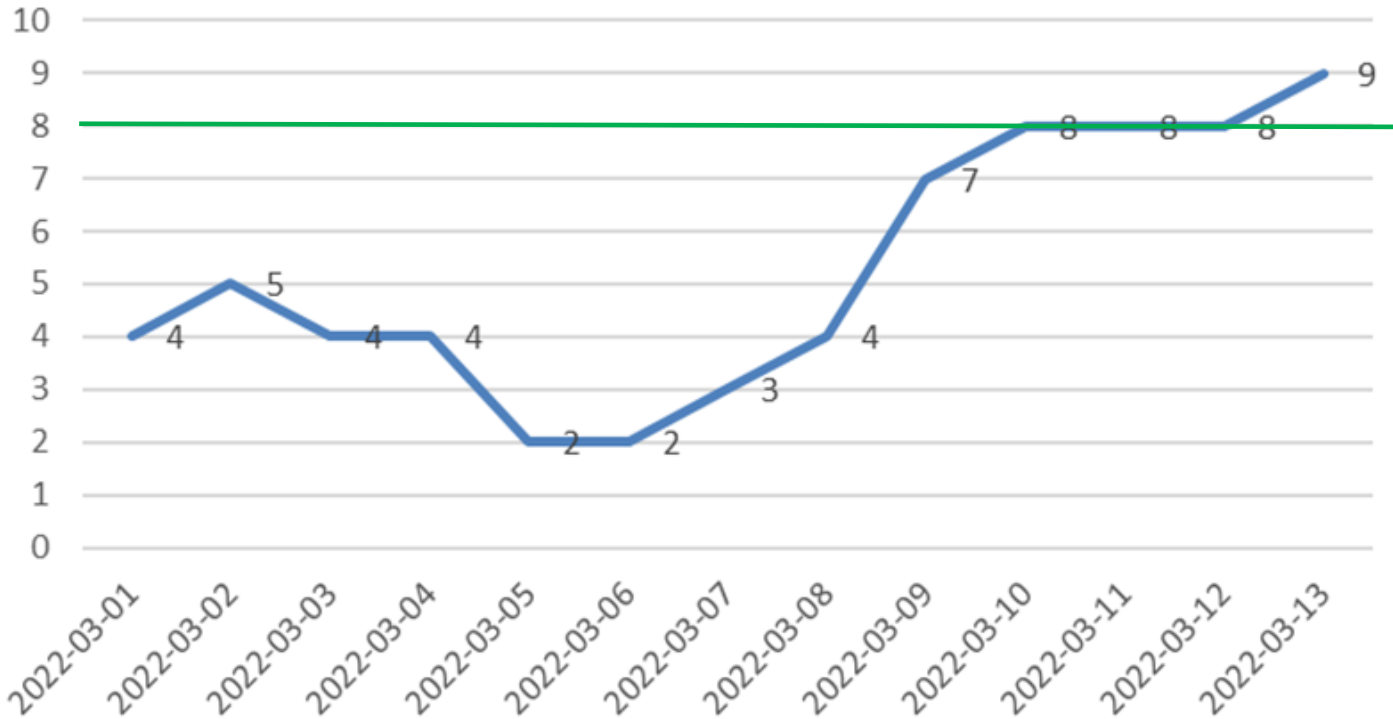


- **Hospital at Home?** Purple Dot indicates approved payor, geographic radius, and does **not** have some of the exclusion criteria
- **HAH Clinical Screening Pass** – includes date, provider name and results of clinical stability screening. **If patient does not pass, may be reconsidered and referred as clinical stability improves.**
- **HAH Social Stab Screening** – includes date, caregiver name and results of social stability screening. **If the patient does not pass, no longer qualified for HAH.**
- **Pt Consent** – patient/home-owner consent to allowing acute care to be delivered in the home.
- **HAH Att. Prov. Approval** – attending provider agrees to transfer patient to this model.
- **HAH Comments** – provides additional details regarding patient acquisition progress.

Problem	Code Status	Hosp at Home?	MEWS	EDD	New Notes	Core Meas	HAH Clinical Screening Pass	HAH Comments	HAH Soc Stab Screen Pass	Attending Consent HAH	HAH Pt/Family Consent
Abscess of right groin	FULL	●	●	3/30/2...	📄	HF	—	3/22 awaiting plastics...	—	—	—
Acute ischemic right M...	FULL	●	●	3/22/2...	📄	STK	—	3/17: Recent CVA chronic dysphagi...	—	—	—
Acute kidney failure...	FULL	●	●	3/22/2...	📄	—	—	3/21 - Possible DC today....	—	—	—
Critical lower limb...	FULL	●	●	4/1/2022	📄	—	—	No- needs CABG	—	—	—
Atrial fibrillation with R...	FULL	●	●	3/23/2...	📄	—	—	3/21- Afiv/rvr on cardizem drip	—	—	—
Acute hyperc... respira...	FULL	●	●	None	📄	—	—	3/22: Observation after...	—	—	—

ADC GOAL - 8  
Current ADC 5.23

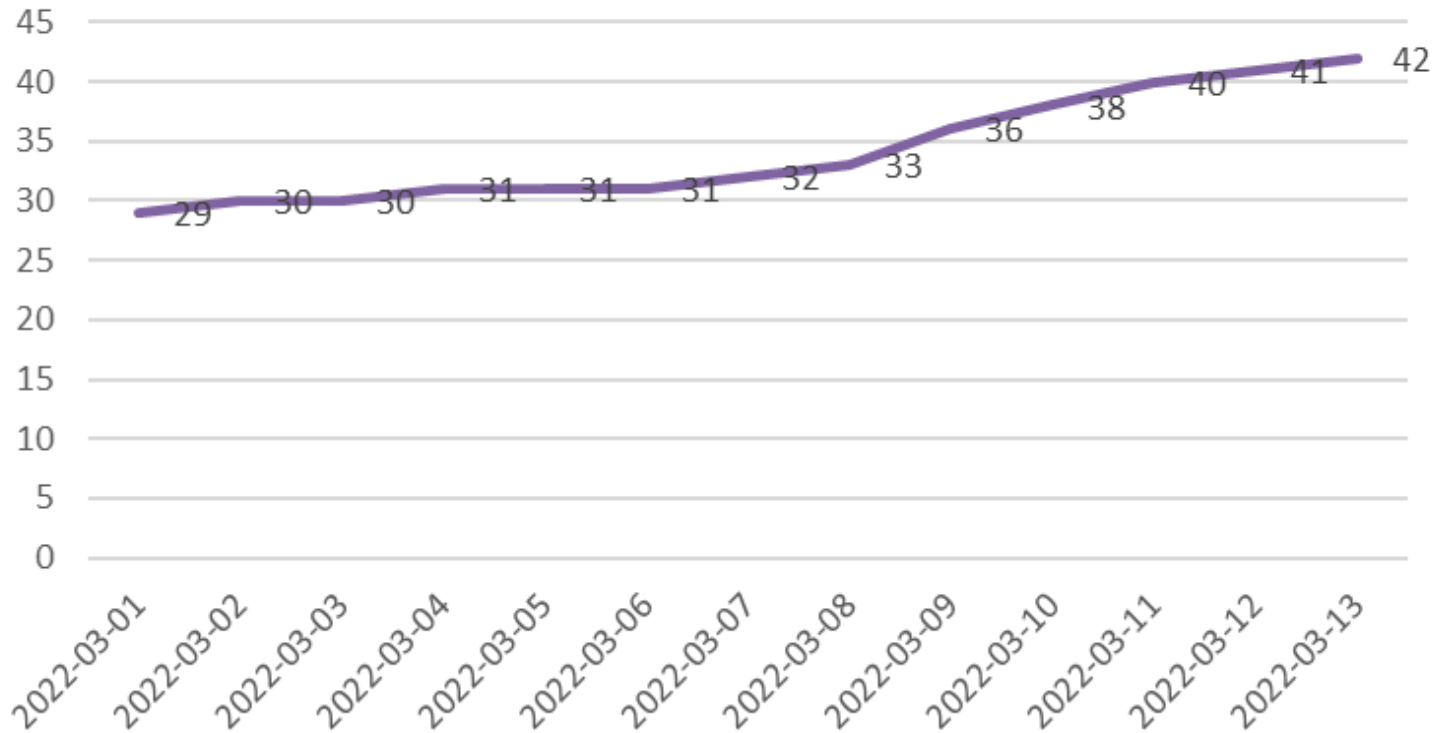
### census



Goal – 2.5 admits/day

Current 1 admit/day

### admissions\_running\_total



# Questions?

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