



MAYO CLINIC
Medical Transport

Community Paramedic Program Northwest Wisconsin

Gold Cross Ambulance

Mayo Clinic Medical Transport
June 2017

Lucas Myers



Barron County, Wisconsin
Population: 45,676
Square Miles: 890

Setting



Gold Cross Ambulance – Barron, WI

- Employs nine full-time Advanced Care Paramedics
- Receives approximately 1,500 combined emergent and nonemergent requests annually



Mayo Clinic Health System Northland

- 25-bed critical access hospital with a primary care clinic

How Patients are Enrolled

- Initially
 - Six primary care physicians offered Community Paramedic referrals to patients they believed would benefit
- Referral's now coming from
 - Emergency department patients
 - Hospitalist's
 - Fall prevention program

Community Paramedic Visits

- Using a defined care plan developed by the primary care provider, Community Paramedics visit the patient home to review
 - Current history and physical exam
 - Medication compliance
 - Home safety
 - Social inhibitors
 - Engagement of family members in care plan
 - Opportunities to engage with other resources

Documentation and Physician Communication

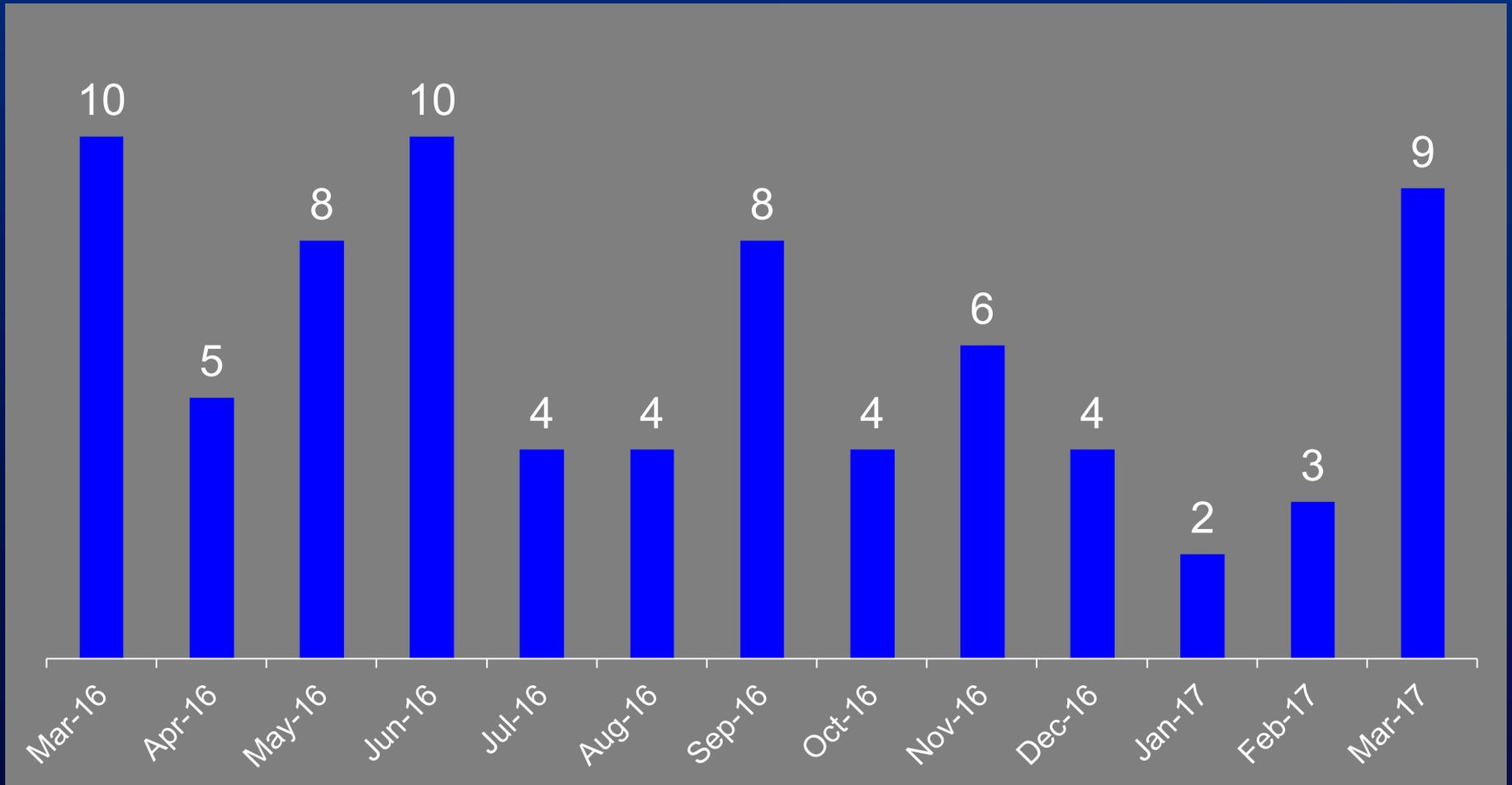
- Community Paramedics communicate with the primary care provider by
 - Use of the clinical note for visits in the medical record
 - Note to Medical Director and primary care provider for quality review and signature
 - Use of on-call physicians for adjustment to medications or care plan

Patient Scheduling

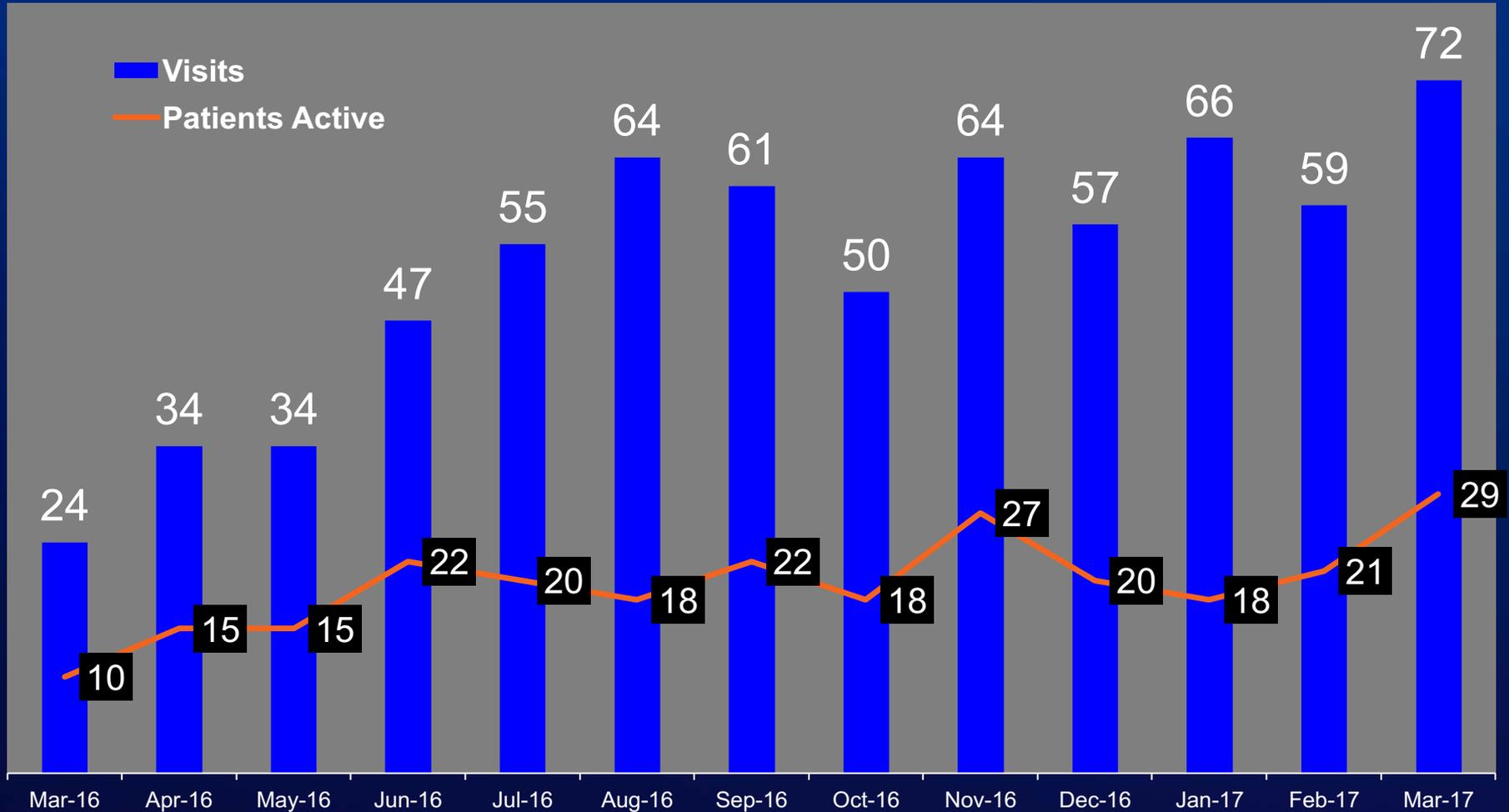
- Community Paramedic reviews order in medical record
- Visit is scheduled during normal business hours Monday through Friday

Program Analysis

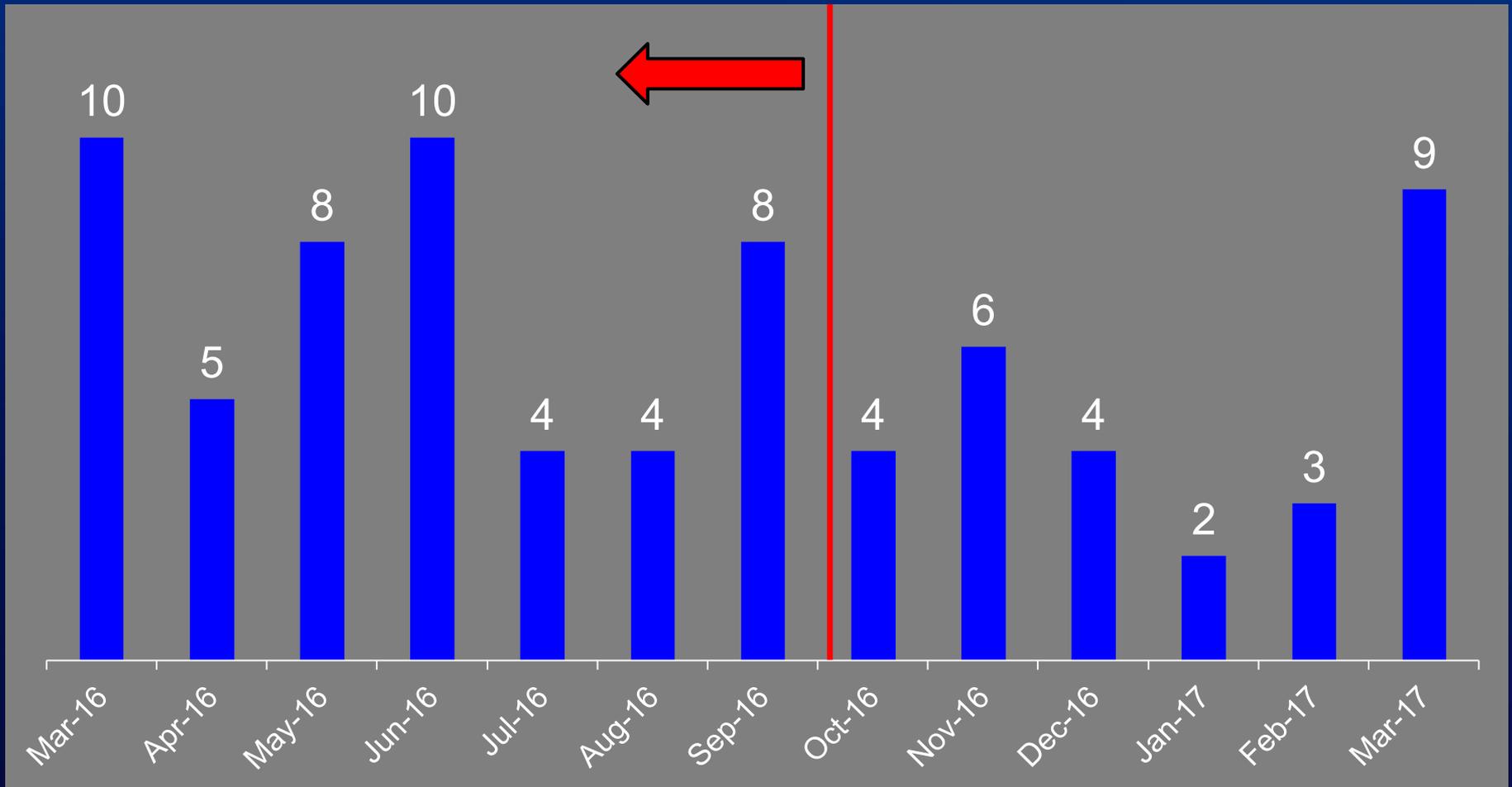
New Patient Referrals by Month



Monthly Visits and Active Patients



New Patient Referrals by Month



Methodology

- Grouped patients into one of two categories
 - Frequent healthcare utilizers
 - High risk for readmission and discharge follow-up

Frequent Healthcare Utilizers

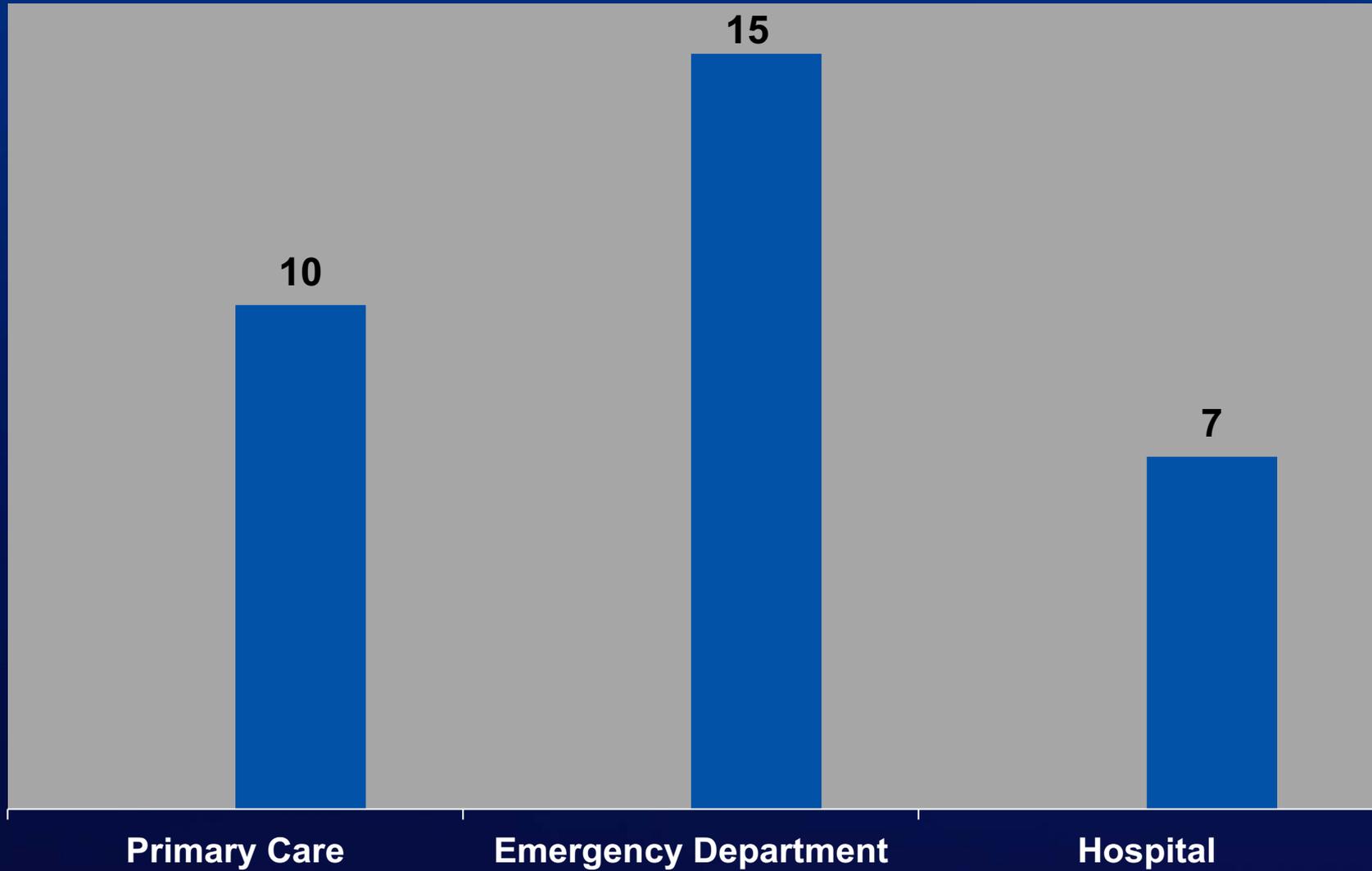
Methods

- Measured the frequency of healthcare utilization based on the primary referral reason for;
 - Primary care charges
 - Emergency department visits
 - Hospitalizations
- Timeframe
 - Six months before referral date
 - Six months after referral date

Demographics

- Patients referred = 32
- Median age = 76 years
 - Range 45 to 94 years
- Gender = 68.8% female (22/32)
- Number of visits = 412
 - Range: 1 to 47

Referrals by Area



Referral Reason

<u>Primary Reason for Referral</u>	<u>Number of Patients</u>
Falls	34% (11)
Chronic Pain	19% (6)
Hypertension	13% (4)
Diabetes	9% (3)
Respiratory	9% (3)
Mental Health	6% (2)
Multiple Comorbidities	6% (2)
Congestive Heart Failure	3% (1)

Individual Patient Use of Service Before and After Referral

N = 32	<u>Primary Care Charge</u>	<u>Emergency Department Visit</u>	<u>Hospitalizations</u>
Six Months Before Referral	30 patients	27 patients	10 patients
Six Months After Referral	14 patients	11 patients	4 patients
Difference	-16 patients p<0.0001	-16 patients p<0.0001	-6 patients p=0.0108
Percentage Change	53% Decrease	59% Decrease	60% Decrease

Total Number Before and After Referral

	<u>Primary Care Charges</u>	<u>Emergency Department Visits</u>	<u>Hospitalizations</u>
Six Months Before Referral	547	60	16
Six Months After Referral	326	45	7
Difference	-221 p<0.0001	-15 p<0.0001	-9 p=0.0008
Percentage Change	40% Decrease	25% Decrease	56% Decrease

Payer Mix

<u>Insurance</u>	<u>Patients</u>
Medicare	91% (29)
Private Insurance	6% (2)
Medicaid	3% (1)

911 Requests

	Patients Requesting 911	Total Number of Requests
Six Months Before Referral	10	14
Six Months After Referral	10	16

High Risk for Readmission & Discharge Follow-up

High Risk for Readmission

	Emergency Department within 72 Hours	Hospitalized within 72 Hours	Emergency Department within 30 days	Hospitalized within 30 days
High Risk for Discharge (n=7)	0%	0%	14% (1)	14% (1)
Post Discharge Follow-up (n=4)	0%	0%	0%	25%(1)

Referral Physician Survey

Question	Agree %
My expectations of the CP visits are met	100%
Following a CP visit, I see improvements in the patients' health/wellness	80%
Patients are satisfied with the care from CP's	87%
I am satisfied with the ability to communicate with the CP	80%
The CP is responsive to changes to the care plan	93%
The CP provides quality care to the patient	100%
I would recommend this process to other clinicians	100%
The CP program should be expanded in my region	80%

Observed Benefits

- Effective means to reduce the frequency of health services utilization among a variety of primary medical conditions

Continuous Quality Improvement

- Introducing a care planning process to better define patients' health care goals and expedite successful completion of the program
- Analyze and streamline pre-visit stage including a checklist for patient history review
- Introduce 3rd party patient survey tool to gauge patient experience



Questions & Discussion