

BUSINESS
CASESTUDY

Client Profile

- 168 - Bed Hospital within Texas Health System
- AccessNurse Partner since 2013
- Solutions include Single - Call Post Discharge, EMR access and customized surveys
- ROI: Estimated \$1.2M in annual savings

AccessNurse's Post-Discharge Readmission Prevention Program Saves Texas Hospital **\$1.2 Million**



THE CHALLENGE

In 2013 the Centers for Medicare and Medicaid Services (CMS) began assessing financial penalties to hospitals for readmissions of Congestive Heart Failure (CHF), Pneumonia, and Myocardial Infarction (MI) patients.

A 168-bed hospital with a Texas health system needed to improve their current 30-day readmission rates in order to avoid penalties. They wanted to reach patients post discharge and provide a clinical check-in, but the hospital's leadership determined that an in-house program to call patients was not feasible because the nursing staff was already at capacity with their current duties for in-house patient care.

THE SOLUTION

The hospital contacted AccessNurse because THMCC offered a readmission reduction program for discharged patients. As part of this program, AccessNurse RNs provide monitoring and special assistance to high-risk patients. **The program includes:**

- A registered nurse calls each patient within 24 to 32 hours of discharge from the hospital.
- All patients are asked whether they're complying with medications, they've scheduled a follow-up appointment, and they understand or have questions about their discharge instructions.
- High-risk patients are asked condition-specific questions in order to determine any potential areas of concern and to provide education that will help patients manage their conditions.
- Real-time feedback is provided regarding any potential risks and the patient experience.
- AccessNurse RNs provide real-time intervention to clarify medication and discharge instructions, address patient questions or concerns, and reiterate the importance of follow-up appointments.
- Dashboard reporting highlights trend areas that can indicate a need for hospital improvements.
- A monthly recognition report is provided to staff that are recognized by patients for excellent service.

THE RESULTS

The Readmission Reduction Program exceeded anticipated results for the hospital.

- \$1.2M in savings due to a 3% decrease in 30-day readmits -- a 24% improvement -- during the first seven months (based on an \$11,771 per-patient cost of preventable readmission) and an estimated \$2.1mm in annualized.
- 49% cost savings from outsourcing the program plus the intangible value of keeping nurses on the floor to provide patient care rather than being on the phone to discharged patients
- An average of 4.2% increase in HCAHPS questions regarding patient satisfaction and likelihood to recommend the hospital.
- 3% improvement in follow-up appointment compliance
- AccessNurse RNs resolved 94% of all necessary interventions, only 3% required escalation to hospital staff.

30-Day Readmission Rate (168 - Bed Hospital)	
BEFORE	AFTER
12.49%	9.53%

Estimated Savings of \$1.2M in Preventable Readmissions

