Home My Network Jobs Messaging Notifications Me For Business Network S Try Premiu

Create your own newsletter

Start your own discussion with a newsletter on LinkedIn. Share what you know and build your thought leadership with every new edition.

Try it out

Extending Care Coordination: Redefining the Word Outpatient

The Virtual Health Community
177 followers

September 19, 2022

Open Immersive Reader

Introduction

This blog post is part of an ongoing thought leadership series to outline the Care Anywhere framework. This methodology supports the strategic coordination of care across various locations and modalities to realize a balance between patient, provider, and payer preferences and needs. The framework seeks to drive care to the most appropriate location for a patient to achieve optimized health, access, experience, and cost.

In a previous **blog post**, we explored the application of Care Anywhere in the context of a configurable home/patient mobility setting. This blog post will dive deeper into identifying when an ambulatory/post-acute setting is more appropriate to optimize care.

What's Here and What's on the Horizon

Market Demands

As the world is undergoing a digital revolution, consumers are **recognizing their buying power** and readjusting their spending habits to align with their core values. When COVID-19 caused significant capacity restraints on health systems and created obstacles for patients to access care when they needed it most, **digital disruptors and non-traditional health delivery services exploded** to meet patient needs. Consumers have since shifted their expectations to receive accessible, convenient, and affordable care.

Market Response

As a result of these shifting consumer values, new locations and modalities of care are emerging at exponential rates to meet patients' expectations. In response to this heightened competition and an increase in value-based care contracts, health systems are striving towards **improved performance and access**.

To enable supply to meet the demand for accessible care, health systems are collaborating with each other or an ecosystem of partners to develop a cross-continuum care network of high-quality care solutions and provide consumers with the digital conveniences they want. As the previous **blog post** highlighted, this trend has driven interest in Hospital@Home and other programs. This trend has also caused an opportunity to consider a shift to outpatient care facilities, known as ambulatory care, for non-invasive care delivery needs, diagnostic services, wellness, and rehabilitation. Ambulatory care facilities span

a wide variety of settings such as dialysis clinics, ambulatory surgical centers, hospital outpatient departments, physician offices, urgent care facilities and even retail health clinics such as CVS and Walgreens. These facilities often have more locations, are more convenient, and deliver more personalized care than hospitals. Research has shown that urgent care clinic visits increased by **58%** during the pandemic with almost half of patients being new to the setting. The momentum of ambulatory care growth from the pandemic is an indicator for the growth opportunity for outpatient care delivery.

Care in outpatient settings does not only improve access to care, but it also provides significant savings by avoiding costly inpatient resources on non-invasive care delivery needs. According to **Justin Yeung, MD and CEO of ShareSmart**, "ambulatory care is growing in popularity because it is a money-saving measure for hospitals. Inpatient hospital stays are extremely costly and demand a lot of resources." Additionally, outpatient settings can be leveraged in efforts to reduce health equity disparities and to address social determinants of health. For instance, the benefits of in-home care are not possible in situations where a home does not include sufficient technology, have access to caregiver support, or has weapons in its environment that raise risk to an unacceptable level. The answer for these individuals should not be limited to traditional, distant, and subsequently difficult pathways to care.

While there are many scenarios where hospital care is the most appropriate care setting, systems are recognizing that post-acute care, such as physical therapy or rehabilitation, can be better managed in outpatient facilities to improve patient experience and reduce costs. To do so, hospitals are building post-acute care networks – driven by shared-savings arrangements – to refer patients when appropriate. This **cross-continuum model of care** represents "a significant shift in a hospital administrator's mindset from wanting to fill every bed to ensuring the best care for a population."

As health organizations continue to shift their models to cater to evolving expectations, post-pandemic outpatient momentum is not expected to slow down given that the global ambulatory care market is expected to reach **$118 billion** by 2027.

Challenges

It is no question that today's unique patient consumer demand coupled with healthcare's wave of technological innovation has exponentially expanded the ambulatory/post-acute care ecosystem for the better. However, this astonishing level of growth has created a complex web of challenges for the patient, provider, and payer.

The plethora of ambulatory/post-acute care delivery options has become so robust that it can be overwhelming for the patient to select an option. The process of navigating this growing sea of options is especially burdensome when **selecting transitional post-acute care**. The lack of a streamlined and automated referral process only further complicates the situation. A network scope that is too large and difficult to manage often leads to patients avoiding care altogether, which can have detrimental long-term effects resulting in unnecessary inpatient care.

Providers face their own unique challenges. As previously mentioned, COVID-19 has upended the entire healthcare system. Uneven resource volume distribution is one of the leading issues ambulatory care providers face today. As mentioned previously, in 2020 alone, urgent care visit volumes increased 58%. This increase was brought upon by COVID-19 cases inundating hospitals and other emergency care settings. Given the rise of multiple new variants over the course of the last two years, these numbers can only be greater today. Thus, uncertainty around volumes makes it difficult to estimate demand and staff appropriately; that is, *if* the labor supply was as stable as it was pre-pandemic. When it comes to pandemic related staffing challenges, the healthcare industry continues to struggle to retain enough resources to meet demand. Ambulatory care providers are burnt out from **enduring trauma and little hazard pay**

while simultaneously grappling with the influx of patient demand. The ambulatory and post-acute care industry is no exception to the "great resignation."

Lastly, the payer is also positioned in unsatisfactory circumstances. Historically, the transition from acute to post-acute care settings has been a troublesome journey due to continuous changes in regulations and reimbursement policies. Layer that on top of today's overcrowded hospitals and COVID-19 outbreaks in post-acute care settings and we see a new set of obstacles to overcome when planning post-acute patient placement. As a result, receiving the ideal and appropriate level of post-acute care comes down to the payer's willingness to pay.

There is a clear need to improve ambulatory and post-acute care coordination while also ensuring costs remain manageable. However, doing so is time consuming, labor intensive and requires a steep learning curve for patients, providers, and payers.

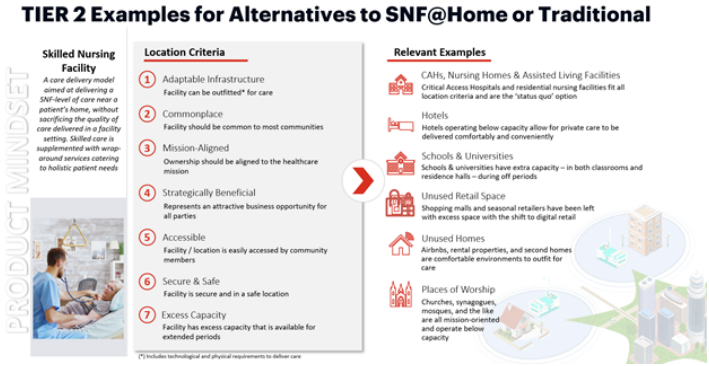
How Can Care Anywhere Provide a Solution?

A multifaced approach is required to combat the unique set of challenges facing health providers. Part of that approach calls for leveraging ambulatory and post-acute care facilities differently. The Care Anywhere methodology provides a new solution that addresses the concerns and needs of each stakeholder throughout a health journey. By taking the patient, provider, and payer's preferences into consideration when selecting which ambulatory/post-acute care setting is optimal, access to care is improved, patient experience is unmatched, and cost is optimized.

The Care Anywhere methodology deviates from a one-size fits all care delivery approach. It provides a mechanism to make sense of the everchanging sea of possible ambulatory/post-acute care setting options that are available to a patient given a specific health need. Within this framework, the necessary resources meet the patient where they are, not the other way around. For example, the illustration below demonstrates how ambulatory and post-

acute care facilities are part of an overall strategy to offer skilled nursing services.

In this example, while the home is an option and traditional provider facilities fit for the most complex situations, there could be a myriad of ambulatory/post-acute options ranging from those that are built for purpose to options that are more flexible. The diagram below highlights some of those options and the criteria that can be used to consider an option.



Interested in learning how Care Anywhere can provide a tactical solution? Stay tuned for Part 2 of this article which will walk through a Care Anywhere use case.

Published by

The Virtual Health Community
177 followers
Published • 1y

What does Ambulatory/Post-Acute care mean in the midst of an ongoing pandemic? Find out in our latest #CareAnywhere blogpost.
#telehealth, #ruralhealth, #virtualfirst, and #virtualnursing

---

Like Comment Share 1

Reactions

0 Comments

Add a comment...

The Virtual Health Community