CollectiveMedical

MARQUIS COMPANIES

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LeadingAge® CAST
center for aging services technologies

The LeadingAge Center for Aging Services Technologies (CAST) is focused on accelerating the development, evaluation and adoption of emerging technologies that will transform the aging experience. As an international coalition of more than 400 technology companies, aging-services organizations, businesses, research universities and government representatives, CAST works under the auspices of LeadingAge, an association of 6,000 not-for-profit organizations dedicated to expanding the world of possibilities for aging.

For more information contact:

Reducing Readmission Rates through Care Collaboration

Mode of Interoperability

Vendor Network

Specific Use Case

Discharge	Emergency Room/Transport/Service
Referral	Hospital
Admission	Physician
Transfer	Care Coordination

LTPAC Organization Name

Marquis/Consonus Companies

LTPAC Organization Type

Skilled Nursing Facility (SNF)

LTPAC Organization Description

Marquis/Consonus Companies owns and maintains senior healthcare and assisted living communities in Oregon, California, and Nevada. Operating through a network of home health care, assisted living, post-acute rehabilitation, Alzheimer's disease care, pharmacy and rehabilitation, intermediate care, and residential care communities, Marquis focuses on person-centered care—putting individual's choices and experiences at the forefront of their care. Marquis uses PointClickCare electronic health records to allow for seamless integration with other providers as well as cutting-edge rehab technology platform called MatrixCare LPC.

Trading Organization Name

Collective Medical

Trading Organization Type

Care collaboration platform

Trading Organization Description

Collective Medical provides the nation's largest and most effective network for care collaboration. Our risk-adjusted event notification and care collaboration platform spans across all points of care—including hospitals, payers, behavioral and physical ambulatory, and post-acute settings. The Collective Platform uses the network to identify at-risk, complex patients and share actionable, real-time information with diverse care teams, leading to better care decisions.

Project Description

New payment models that incentivize providers for keeping recently discharged SNF patients out of the hospital and the mounting pressure from Value Based Purchasing (VBP) models leave SNFs in a difficult situation. Marquis/Consonus Companies implemented the Collective platform to gain visibility into their patient's movements and activity across care settings—allowing them to intervene in real time to avoid unnecessary readmissions and fulfilling the Centers for Medicare & Medicaid Services (CMS) penalties.

Implementation Approach

Under VBP, providers automatically receive a 2% cut in Medicare fee for-service rates if they fail to comply with readmission improvement benchmarks.

If they lower their readmission rates, providers can earn back the 2% cut—but that's not easily achievable. CMS reports that almost three-quarters of the providers in the country will receive a cut under VBP, but only 27% earn the "bonus" CMS provides to facilities with the best readmission scores.

After a patient is discharged from a SNF, the 30-day readmission window begins. In many cases, the SNF doesn't have control or visibility over the care the patient receives elsewhere. Additionally, if a patient seeks care at a hospital, the SNF will likely never know about the visit—and that patient could be discharged into a different SNF.

Anthony Laflen, vice president of business intelligence at Marquis, realized the intrinsic flaws of segmented healthcare. Not being able to track patients across care settings places a financial burden on providers and leads to poor patient outcomes.

In early 2018, Marquis joined the Collective Network and implemented the Collective Platform at its communities to gain real-time visibility into patients across care settings. Collective currently supports more than 700 hospitals, every national health plan, and tens of thousands of providers and enables real-time visibility into when a patient is observed, admitted, transferred, or discharged.

If a former resident receives care at a hospital, Marquis care providers get an instant notification seamlessly delivered within their preexisting workflows. This workflow benefits both Marquis and nearby hospitals— SNFs can reach out to the hospital to potentially readmit the resident to the SNF, avoiding a potentially unnecessary and costly hospital readmission, and hospitals are likewise notified of the patient's history and care team contact information, allowing for seamless coordination. Marquis utilizes this invaluable information by collaborating with the hospital on any further care needs to avoid medically unnecessary readmissions.

Outcomes

In May 2018, Marquis implemented the Collective platform across three of its Oregon-based communities. Prior to implementation of the Collective platform, these communities had seen a combined average readmission rate as high as 19%.

- By June 2018, the rate dropped to 15.9%.

- By October 2018, the rate dropped to 6.3%.

- This represents an overall drop of 60% in less than 6 months.

The drop in Marquis' rate places it below CMS requirements. Avoiding this penalty qualifies Marquis to earn nearly $115,000 in reimbursements.

Lessons Learned/ Advice to Share with Others

When working with vulnerable patients, real-time insight into things like ADT feeds can be transformative in care delivery. Before utilizing the Collective platform, Marquis' providers could only see what happened within their four walls. But now they're able to support patients with the best possible care and keep them out of the hospital.

Continued community engagement and collaboration is a critical, yet often overlooked, component of this program's success. Our healthcare system is unnecessarily siloed when every provider should be working together towards the same goal—providing their patients with the best quality of care as possible.

For more information on Collective Medical and other customer use cases, visit: www.collectivemedical.com/perspectives/case-studies/