



# Care Management Plus: Using Technology to Improve the Care of Older Adults

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## A Primary Care Solution for Challenging Patients

Ten percent of older patients—more than three million nationwide—live with five or more chronic illnesses such as arthritis, diabetes, and heart disease. Two-thirds of Medicare dollars, including costly hospitalizations and emergency room visits, are spent on this frail fraction.

Effective primary care can improve older adults' health and manage these costs, but most practices are not organized to respond efficiently or effectively to the broad and time-intensive range of medical, social, and psychological issues these patients present.

CM+ can help.



## Beyond Care Management

Developed by Intermountain Healthcare Medical Group and research team through funding from The John A. Hartford Foundation, CM+ provides your practice with the tools and support it needs to implement this innovative model. These include an intensive training for designated staff, technology-

based enhancements to patient tracking, and ongoing consulting. This comprehensive package is currently available at no cost from the Oregon Health and Science University. CM+ is already helping practices around the country make measurable improvements in how they care for their older patients.

## Measurable Benefits for Patients and Practices

In peer-reviewed studies, CM+ has demonstrated a wide range of benefits. For example, CM+ patients, particularly those with diabetes and depression, have shown improved adherence to disease guidelines. Most dramatically, CM+ patients reduced their odds of hospital admission by 24-40 percent and their annual mortality rates by more than 20 percent compared to a control group.<sup>1</sup>



<sup>1</sup> Dorr DA, Wilcox AB, Brunker CP, Burdon RE, Donnelly SM. The Effect of Technology Supported, Multidisease Care Management on the Mortality and Hospitalization of Seniors. J Am Geriatr Soc. 2008 Dec; 56 (12): 2195-2202.

## Hands On Care

At the heart of CM+ is a care manager (usually a nurse, social worker, or physician assistant), who teams with primary care physicians to serve high-need older patients. CM+ care managers complete a free, two-day training. This is complemented by a series of online learning modules that cover the fundamentals of care management, special issues in geriatric syndromes and concepts, and chronic disease management, including diabetes, depression, asthma and COPD, heart failure, sleep disturbances, and palliative care, among others.

## On Target Information Technology

CM+ fosters an ongoing, collaborative relationship with your primary care practice to help integrate special care management technology software and solutions into your clinic's workflow. CM+ tools include:

- A unique care manager tracking database;
- A patient summary sheet; and
- Messaging systems to help your clinicians access care plans, receive reminders about best practices, and facilitate communication among the health care team.

## Program Costs—Benefits

Additional research has also shown that physicians are able to create a more efficient practice through better use of documentation, a slight increase in patient visits, and a change in practice pattern. With this increase in productivity and the right clinic environment, CM+ is not only effective in improving patient outcomes, it is also cost-effective.

Costs/Clinic	
Salary + training + admin	\$92,077
Benefits/Clinic	
Productivity (7 MDs)	\$99,986
Hospitalizations	\$0
Nurse visits	\$10,394
<b>Total (benefits – cost)</b>	<b>\$18,303</b>



## Is CM+ Right For You?

Wondering if CM+ could work in your clinic? The following questions can give you a quick sense of whether CM+ makes sense for you. If you answer yes to most or all, then you are a good candidate for CM+.

- Does your practice see a lot of older patients or patients with chronic diseases?
- Are your physicians and other clinical staff interested in redesigning care for chronically ill, complex, or time-consuming patients?
- Does the clinic have a care manager who could be trained to participate in CM+?
- Would your physicians refer patients to a care manager to coach them in self-management of their chronic diseases?
- Does your practice use an electronic medical record (EMR) or have plans to use one?
- Does your EMR have the ability to track patients by disease category?
- Do you have one key physician or clinical leader who would champion this program in your clinic?



*"The care manager definitely makes my life easier. I can see more patients. I can see them more efficiently, and the patients get better care."*

David Tensmeyer, MD, FAAP



Learn more about CM+ Please visit us at: [caremanagementplus.org](http://caremanagementplus.org)

Contact us at: Care Management + Oregon Health & Science University Tel: 503.494.2567 E-mail: [radican@ohsu.edu](mailto:radican@ohsu.edu)

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## Slide 1

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A3 I still need to add %s and p-values in adherence rate column

Anna, 6/19/2010