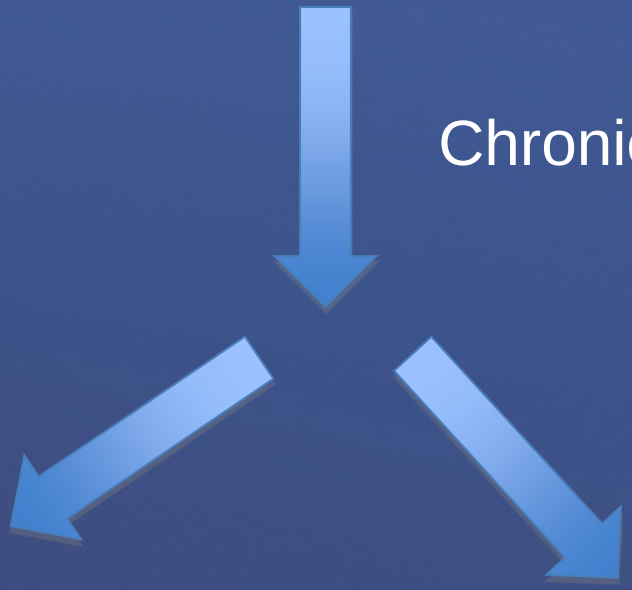
TMH *Your Hospital for Life.*

Innovative Hospital Diversion Plan

Transforming Medicine
and
Enhancing Care for the Underserved

TMH *Your Hospital for Life.*

Hospital Diversion Plan



Transitional Care Center

Medical Symptom Reduction Clinic

Target Populations of the TMHFMRP MSRC and TC

- Indigents
- Cultural minorities
- Disadvantaged persons with chronic disease burden: diabetes, congestive heart failure, chronic obstructive pulmonary disease, asthma, obesity, heart disease
- Frail elderly

Key Objectives of the TC and the TMHFMRP MSRC

Identify and address the treatment needs of patients in the domains of:

- Specific acute measures/medical home to prevent ER utilizations and hospitalizations (TC)
- Routine preventive primary care & stress-related disorders (MSRC)

Transitional Care Center

Transitional Care Center

- Whole person patient-centered care
- Care in a community context
- Team approach
- Elimination of barriers to access
- Reduction of chronic disease burden
- Protocols for reducing Emergency Room visits and hospitalizations

Design and Development of the TMH Transitional Care Center

Tallahassee Health Partners - a collaborative partnership between:

- **Capital Health Plan (CHP)**, a not-for-profit health maintenance organization
- **Tallahassee Memorial HealthCare (TMH)**, a not-for-profit community health system

Other Aligned Relationships

Within TMH:

Diabetes Center

Home Health Care

Behavioral Health

Laboratories

Radiology

Recovery Center Internship

Community Partners:

Bond Community Center

Neighborhood Health Services

North Florida Medical Centers, Inc

Area Agency on Aging

Big Bend AHEC

Walgreens Pharmacy

University Community Partners

Florida A&M

- College of Pharmacy

Florida State University

- College of Medicine
- College of Social Work
- College of Nursing
- College of Psychology

Purpose of the TC

Provide a safety net for those with limited access to care

Physician within 5-7 days of discharge

Team approach to meet needs across the continuum of care

TC Cost-savings Progress

Patient Admits: over 450

Cost Savings: cost savings of $10/dollar spent

High Utilizers	Costs: 0-7 Days		Costs: 0-30 Days	
	Pre-TC	Post-TC	Pre-TC	Post-TC
19	$432,665	$12,827	$1,102,842	$152,961
Savings		**$419,838**		**$949,881**

Medical Symptom Reduction Clinic

Family Medicine Residency Program

FMRP Focus for Hospital Diversion Plan (MSRC)

Equip the next generation of family physicians with:

- Knowledge, skills and attitudes in Lifestyle and Preventive medical interventions and hospital diversion plans

- Role of Preventive and Lifestyle medicine in whole person care and chronic disease management

The Need

2007:

Type 2 Diabetes

16.5 million people

$105.7 Billion in medical costs

58% reduction projected from use of preventive/lifestyle interventions

2005:

Hypertension

56 million adults

$59.7 Billion in medical costs

53% reduction projected from use of preventive/lifestyle interventions

The Need

2006:

Heart Disease

16.8 million people

$165.4 Billion in medical costs

67% reduction projected from use of preventive/lifestyle interventions

2005:

Metabolic Syndrome

50 million adults

$200 Billion in medical costs

70% reduction projected from use of preventive/lifestyle interventions

MSRC

- Cohort of vulnerable patients selected by Family Medicine residents/faculty for inclusion
- Chronic Care Team: Physician, Genetic Nutritionist, Psychiatrist, Psychologist, Yoga Instructor, Accupuncturist/physician
- MBTLC Program: 22 week program focused on Lifestyle/Nutrition

Patient Stories

A. SJ

B. SB

C. RC

Next Steps

Medical Education protocols in chronic disease management for:

- Diabetes
- Chronic obstructive pulmonary disease
- Obesity
- Heart disease

Questions?