HOT SPOTTING MEDICALLY COMPLEX SOCIALLY AT-RISK PATIENTS
ACCOMPLISHES THE QUADRUPLE AIM

Keyonna Taylor-Coleman, MD1,2; Glenda Sundberg, FNP-CS1,2 (CONTACT: glenda.sundberg@aurora.org); Zeeshan Yacoob, MD, MPH1,3; Mai L. Thor, MD1,2; Jessica Kram, MPH3
1Department of Family Medicine, Milwaukee WI; 2Aurora St. Luke’s Medical Center, Milwaukee, WI; 3Aurora University of Wisconsin Medical Group, Center for Urban Population Health, Milwaukee, WI

BACKGROUND
Issue: 5% of patients incur 50% of health care costs

Hot spotting: “The collaborative care interdisciplinary team approach put into place in hopes of improving outcomes and decreasing costs.”

The goal of the quadruple aim for health care is to:
1) Improve patients’ experiences
2) Address social determinants of health and health outcomes
3) Reduce health care costs
4) Prioritize the well-being of care team members.

OBJECTIVE
The purpose of this project is to illustrate that hot spotting addresses the ideology behind the quadruple aim.

METHODS
What we did across 3 clinic sites (pre-intervention period 6/1/18-2/28/19; post-intervention period 3/1/19-12/1/19):
• 2 hour interdisciplinary interactive team meeting 3X/year
• A care plan documented in the EMR
• At least 1 home visit
• Increased phone calls from nursing and social work
• Interdisciplinary team interaction
• Comprehensive medication review
• Assessed social determinations of health, as well as hospitalizations and emergency department visits pre/post

Pre/post-intervention surveys were conducted by staff and providers involved in hot spotting

CONCLUSIONS
Hot spotting accomplishes the quadruple aim by:
1) Demonstrating improved patient experiences
2) Addressing underlying SDOH
3) Reducing health care costs
4) Demonstrating an overwhelmingly positive care team response to the intervention.

The stories behind the numbers is the true win!

Next Steps: Better define this unique model and pharmacy cost savings.

REFERENCE

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Patient Demographics (N=64)
Age range: 2-98 y/o, 78% non-White, 69% Female, 100% had Medicare/Medicaid

Themes: Increase Job Satisfaction, Environment, Access, Trust, Holistic Patient Picture
"Home visits are a refreshing experience compared to the usual clinic/hospital experience, they help remind you of why you became a doctor."

Average distance from home to hospital 3.7 miles

For 3rd year in a row ED visits decreased (by 13.1%) implying overall cost savings. However hospitalizations increased 10%

We would like to acknowledge and thank Kayla Heslin for creation of the Map through ARCGIS.

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REFERENCES

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