Call9 is a technology-enabled healthcare service that delivers immediate care to skilled nursing facility patients from the comfort of their own beds.
Poll

What area of Skilled Nursing Facility (SNF) care do you represent?

- Clinical
- Administrative/Finance
- I’m not involved with SNFs, the speakers were the most interesting on this panel
Poll

There are approximately 890,000 hospital beds in the U.S. How many nursing home beds do you think exist?

- 500,000 SNF Beds
- 750,000 SNF Beds
- 1.1 Million SNF Beds
- 1.7 Million SNF Beds
Poll

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- 1.1 Million SNF Beds
- 1.7 Million SNF Beds
Scope

894,574 registered hospital beds in the U.S.

1.7 million skilled nursing facility beds in the U.S.
Poll

Rehabilitation stroke care and unnecessary hospitalizations cost the healthcare system approximately $40 billion.

True

False
Poll

Stroke care and unnecessary hospitalizations cost the healthcare system approximately $40 billion.

True

False
Problem

- **795,000** incidences of stroke in the U.S. annually and approximately **665,000** survivors
- **80%** experience upper extremity Impairments, resulting in **$34 billion+** to the healthcare system for rehab

- **19%** of ambulance trips to hospitals originate from skilled nursing facilities
- **Two-thirds** of trips from SNFs are avoidable
- **$40 billion** in unnecessary costs
- **64 minutes** to see an EM physician from the moment 911 is called
What Creates the Problem?

1:20 nurse-to-patient ratio

Diagnostic equipment is rarely available

Limited access to high-level medical decision makers

Increasingly higher acuity patients in the SNF
“Do right by the patient and all else will fall into place.”
Care delivered at the comfort of the patient’s nursing home bed

24/7 emergency-trained on-site Clinical Care Specialist

Remote Call9 Medical Provider Team, led by an Emergency Physician

Shared decision making with PCP, SNF staff, patient & family members

Care Coordination

24-48 hours of clinician follow-up to ensure clinical improvement

Call9’s Care Model
Call9 now regularly encounters patients like Mr. D in which early interventions save lives.
Reimbursement Challenges

Senators John Thune (R-SD) and Ben Cardin (D-MD) said during a recent Senate Finance Committee hearing that they are working together to increase opportunities to utilize telehealth for reducing unnecessary senior hospitalizations from nursing homes. They recognize that reimbursement is a challenge.

Video from Senate Finance Committee Hearing on March 6, 2019
“Not Forgotten: Protecting Americans From Neglect and Abuse in Nursing Homes”
The RUSH Act will be introduced later this month with the goal of bringing technological innovation to Medicare. Telehealth gives medical professionals and first responders like those already working in skilled nursing facilities access to doctors who can provide immediate consultation in emergency situations, when appropriate.

- Rep. Adrian Smith (R-NE)

The RUSH (Reducing Unnecessary Senior Hospitalization) Act

RUSH Act - rushact.org

- Will improve quality and access to care for people in nursing homes by avoiding costly and often harmful trips to the ED
- Prioritizes patients, their families and the healthcare system
- Tip-of-the-spear legislation to provide a mechanism for Medicare to support value-based reimbursement rather than fee-for-service billing
- Aligns all stakeholders by creating a value-based shared savings arrangement with Medicare, the physician group and the facility

“The RUSH Act provides an exciting new opportunity to allow technology to bridge the gaps for patients and providers in nursing homes across the country.”

- Rep. Ben Ray Lujan (D-NM)

2,000+ letters from constituents in nearly 345 districts across the country
“The RUSH ACT and telehealth is meant to save the healthcare system by avoiding sending patients needlessly for hospitalization. We watched as residents were bused to the hospital daily. In my case, it saved my Dad’s life. Upon his discharge, Dad was diagnosed with congestive heart failure, and we knew we wouldn’t have much more time with him. I am forever grateful to Call9 and telehealth for giving us another six months with my father. 

If telehealth was available to us the years we were there, I would have slept a lot better at night. 

For our loved ones that are not well and that often feel forgotten, when this bill passes, it will be a very good day.”

Charlie Durdaller, Mr. D’s son; Tracey, Charlie’s wife; John Durdaller, Mr. D’s son
If Call9 were not here, I wouldn't be either. They saved my life to say the least.”

- CALL9 PATIENT

“Your compassion and guidance throughout this time has been invaluable. The fact that (my mother’s) death was peaceful and that every one of our concern was addressed in real time is a blessing.”

- FAMILY MEMBER
Key Learnings

1. Make something people need. Make something people want.

2. Quadruple Aim - Must create a system that provides value to patients/families, clinical team (including Call9 and facility staff), healthcare system, and the population at hand.

3. Reimbursement continues to be both a challenge and an opportunity.
Thank You!

Katherine Davis
MS, RN, ACNP-BC, AFN-BC

Head of Clinical Operations, Founding Team

katie@call9.com
860.841.8100