

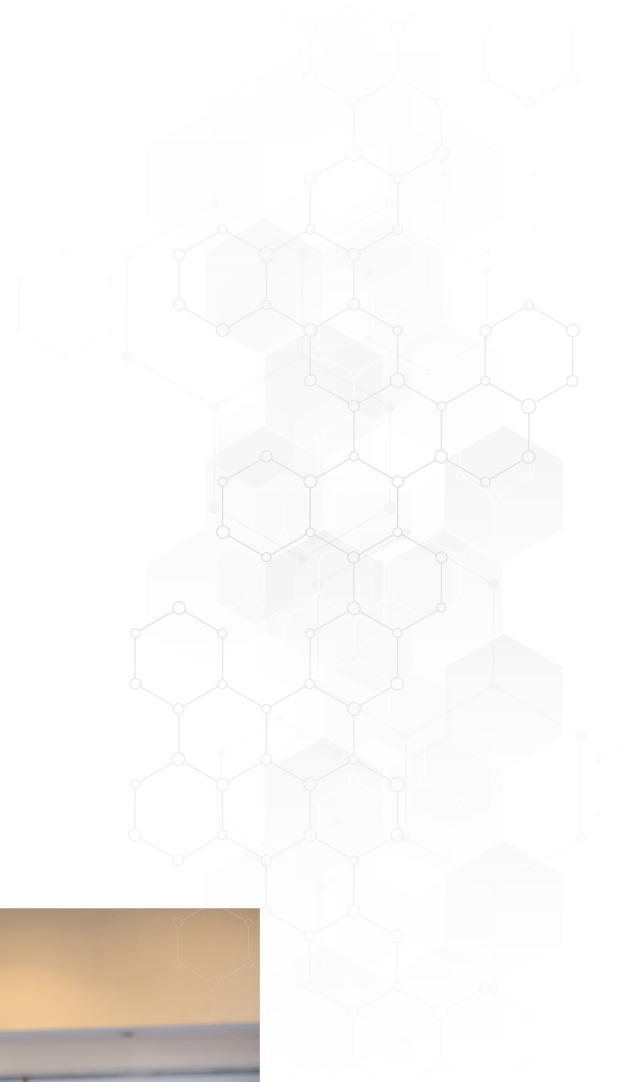


How Hippo Virtual Care™ is Driving Post-Acute Care Innovation

Table of Contents

- 3** Introduction
 - 4** A New Virtual Care Delivery Model
 - 6** Helping Providers Make Better Decisions
 - 8** Case Study: Hippo Virtual Care™ at The Carpenter Health Network
-

- 12** Sources



Hippo Virtual Care™ can help post-acute care organizations overcome many of their current barriers to improved patient outcomes, staffing shortages, patient access delays, satisfaction scores, and cost efficiencies.

While patients often leave the hospital with an after-visit summary [AVS] print-out containing hospitalization details and prescriptions, they seldom leave with a comprehensive recovery plan — which requires additional post-acute clinician intervention and care planning that can take days to arrange and complete.

Patients lacking a care plan, education, and prompt intervention can face care delays in the critical 48 hours post hospitalization, which can trigger startling health declines and poor outcomes. For example, skilled nursing facility [SNF] patients' average a rate of 11% ER visits, 22% readmissions, and 33% adverse events in their first 30 days.¹

Post-acute care facilities are dealing with **high staffing shortages and turnover** that limit available caregiver talent.

The average tenure of post-acute care staff is one to two years, ranging from 40% turnover at long-term acute care [LTAC] facilities to 128% at nursing homes.² With such high turnover, staff require ongoing training and proctoring by clinical staff to ensure they provide quality care. Yet, with clinical supervision often limited to one nurse per shift in nursing homes, it is difficult to provide effective on-the-job training to improve patient care skills.





In addition, post-acute care facilities currently lag five to 10 years behind hospitals in terms of information, operation, and organizational capabilities. This gap magnifies the pervasive healthcare challenges facing the post-acute care industry, including not only staffing shortages, but also technology barriers, access limitations, and financial pressures.

That said, these are just the symptoms of the root cause: access to physicians.

If post-acute patients and care teams had immediate access to physician guidance, many of these problems would be greatly reduced.

A [Coactive Care™](#) approach anchored by [Hippo Virtual Care](#) can help provide that guidance.

01

A New Virtual Care Delivery Model

While telehealth applications have claimed to solve the physician access problem in recent years, primary telehealth services based on one-to-one web conferences between patients and physicians have fallen from a high of 27% of all visits during COVID to an ongoing decline of less than 6% today.³ Surprisingly, only 6% of telehealth visits are video-based — most are telephone calls — further limiting physicians' information and ability to intervene. The answer has to be more than just technology.

Patients aged 65 and up use more than 80% of all post-acute services.² These high-risk, multi-chronic condition patients require complex assessments and care that is hard to provide over the phone or with a video call. They need a care team who can actively assist remote physicians with hands-on patient assessments, treatment, and education. This requires more than EMR-based “collaborative care.”

FIGURE 1.1

Barriers to Effective Post-Acute Care

Here is a quick rundown of healthcare's most pervasive problems...



Unavailable Physicians

Physician Shortages

Attending physicians find it difficult to travel to long-term care facilities and patient homes.

Specialty Care Deficit

Post-acute facilities lack the specialty physician coverage to address complications.



Staff Productivity

Staff Shortages

Care professionals are hard to attract, with 24%+ vacancies and 40-128% annual turnover.

Patient Care Complexity

Increased complexity of caring for post-acute patients who are often 65+ with multi-chronic conditions make care more costly and labor intensive.



Technology Barriers

Ineffective Telehealth

Patients and providers only use telehealth for basic primary care (declining to less than 6% of visits).⁴

Lagging Technology

Post-acute care is five to 10 years behind hospital EMR and clinical automation, missing out on the productivity and performance improvement opportunities.



Poor Access to Care

Lack of Mobility

Outpatient care models require patients to travel to specialist offices for care, yet 44% of elderly, multi-chronic care patients have mobility challenges and barriers to travel.⁵

Readmissions and ER Care

Without sufficient access to care and long physician appointment wait times, post-acute care patients often resort to ER visits for urgent care, resulting in hospital admissions (and readmissions).



Financial Pressures

Inflation

Labor and supply price increases outweigh reimbursement adjustments, leading to shrinking margins.

Reimbursement Pressures

Ongoing payer pricing pressures are not keeping up with costs.

Value-Based Care Transition

Lack of risk-share and effective value-based care (VBC) schemes leave post-acute care providers without the potential upside of new VBC payment opportunities.

Coactive Care anchored by Hippo Virtual Care provides a new virtual care delivery model that trains **Clinician Extenders** — including medical assistants, nurses, and other caregivers — to assist patients under the active guidance of remote physicians. This model of care focuses on improving care actions and outcomes by providing remote clinician supervision via the right team at the right place and time to meet patients’ immediate needs.

Hippo’s augmented reality platform helps professionals from different disciplines, including caregivers and family, form a “circle of care” to work together to deliver comprehensive care for patients. This method builds trust and improves accountability in point-of-care decision-making by providing immediate remote support and including the care circle in patients’ care plans, goals, activities, and outcomes. Strong caregiver relationships, clear and timely communication, and in-person support encourage patient commitment and adherence while reducing errors and complaints.

02

Helping Providers Make Better Decisions

The Carpenter Health Network recently implemented the Hippo Virtual Care platform, which allows remote physicians to manage the care of nursing home patients using a Coactive Care model with local nurse practitioners [NPs]. Using the Hippo platform, one remote physician can assess patients within an hour of admission, immediately respond to patient conditions, and support nursing care across five nursing homes. This approach provides more than twice the coverage and responsiveness — as well as superior patient quality outcomes and costs — compared to the current model of physicians driving between physical locations.

“Hippo has played a very large role in our ability to increase the quality of care that we provide here in the facility, mainly because of continuity of care. Each provider is able to ultimately make a better decision based on the equipment that we’re utilizing.”

Justin Lindsey

Administrator of Center Point Health and Rehab



The Hippo Coactive Care delivery model can overcome many of the barriers in post-acute care that lead to performance problems, like staffing shortages, poor patient access, physician burnout, cost pressures, and financial growth. Using the Hippo Virtual Care headset and software, caregivers can provide care to patients anywhere under the guidance of remote physicians. Initial patient assessment, care planning, and orders are completed within hours of patient need, not days. This real-time intervention works within and across all post-acute care venues, reducing care delays, handoffs, coordination, hassles, and the risk of patient care complications to improve transitions, patient outcomes, and operational effectiveness.

“(Hippo) allows us to extend our skillset to folks that don’t have the same skillset, but are capable of providing quality medical care at our direction. It will help those folks to develop in their ability to treat people,” says James Ratliff, MD, Chief Medical Officer at Carpenter Health Network. “The solution allows us to be able to cover more, help more, and be in places that we wouldn’t have been able to be, given the time and distance of delivering that care. It brings us all together into that circle of care right when patients need it — not at a later point in time.”

Hippo Virtual Care provides ease-of-use, adoption, affordability, and support to provide immediate care delivery improvements in all post-acute facilities:

Skilled Nursing Facilities	Immediate response to patient events by nurses supported by remote specialists can improve recovery time and readmission rates.
Nursing Homes	Urgent remote physician assessment of patient incidents (e.g., fever, chest and abdominal pain, and delirium) can reduce ER transports and hospitalizations.
Long-term Care and Rehabilitation Facilities	Improved transition of care and immediate response to patient events by remote specialists can improve patient recovery and outcomes.
Home Health	Initial remote physician assessment within a day of patient hospital discharge can reduce readmissions by 30% to 50%, as well as support stronger patient commitment to self-care behavior. ⁶
Outpatient Clinics (and Federally Qualified Health Centers)	Remote specialist consultation can reduce diagnosis delays, long-distance specialist trips, ER visits, and complications while patients wait for specialist appointments.
Dialysis Centers	Weekly nurse assessments at dialysis appointments with immediate remote physician intervention reduces renal failure complications and hospitalizations, improving quality of life.
Hospital at Home	Improved remote physician interaction with “I see what you see” precision can improve diagnosis and appropriate interventions for hospital at home patients, leading to faster recovery and fewer complications.

Post-acute care organizations are currently excluded from value-based care risk-sharing (upside payments) because they cannot demonstrate active, effective means to improve patient outcomes and medical loss. Hippo Virtual Care links the physician directly to post-acute patient care guidance and outcomes. This new capability creates a causal connection that payers and risk-bearing providers cannot ignore. Post-acute providers who can demonstrate improved patient outcomes using virtual care can attract and negotiate risk-sharing arrangements that increase revenue and profits.

Hippo Virtual Care is an out-of-the-box solution that overcomes most post-acute barriers by bringing the remote physician to guide local patient care. It improves patient outcomes, increases staff satisfaction, improves staff training/skills, reduces staff shortages, potentially increases revenue, provides new technology, and creates an ability to implement value-based care contracts by including the medical director into the patient care management model to reduce medical loss.

The solution is easy to implement for immediate performance improvements. You can deploy a pilot in just two to four weeks and measure real-world results in one to two months. With minimal equipment investment and a cost of less than \$10 per use case per day, post-acute care organizations can save more than \$1,000 per day in costs, utilization, and productivity. This easy, affordable virtual care solution can quickly improve your patient survey ratings, like your CAHPS scores, and differentiate your patient outcomes to increase hospital placements.

CASE STUDY

Hippo Virtual Care at The Carpenter Health Network

According to a [recent survey](#) of clinicians, clinical leaders, and organization executives in the New England Journal of Medicine (NEJM), post-acute care can resemble a “black hole” for patients due to staffing issues that can compromise the integrated and seamless communication needed to maintain the continuum of care.

Roughly 68% of respondents said staffing shortages were the top challenge facing post-acute care organizations, while 46% said patient handoffs from acute care settings to post-acute care was the second-biggest challenge, followed by organizational structure and management, health information technology, and reimbursement models.

Like virtually all post-acute care providers, **The Carpenter Health Network** regularly faces the pressure of providing superior care with staffing shortages. Carpenter also recognizes that patients’

needs are unique and changing, and is dedicated to providing them with a seamless, compassionate, and convenient transition of care when and where they need it during any phase of illness or injury.

Carpenter provides home health, palliative, hospice, and rehabilitative services across six states, and also owns and manages Homedica HouseCalls, a virtual physician’s office that specializes in house calls. The network provides expert treatment from physicians and nurse practitioners delivered where patients are most at ease – in the comfort and safety of their own homes. This often includes primary care visits for patients who are unable to travel comfortably.

Not only does the continuum of care better meet the needs of both patients and their families, but it also helps reduce hospital admissions and emergency room visits.

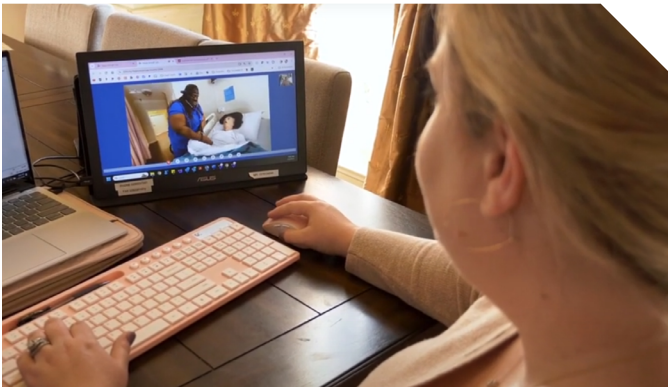


THE SOLUTION

As part of their ongoing commitment to effective and efficient care, Carpenter recently implemented the [Hippo Virtual Care](#) remote collaboration platform, with wearable computing allowing the network's medical directors to work with remote and onsite nurse practitioners in their LTACs, rehabilitation centers, and nursing homes. The partnership will expand to include wound care and hospice care in 2024.

Nurse Practitioners wearing the Hippo headset are able to communicate hands-free with remote physicians and livestream the patient encounter with an "I see what you see" perspective, allowing remote physicians to examine the patient and provide real-time guidance to the NP as if they were physically in the room.

Healthcare professionals who used Hippo Virtual Care within The Carpenter Health Network eagerly adopted the platform, praising everything from its ease-of-use and financial benefits to its usefulness in improving responsiveness and quality of care.



DEMONSTRATED BENEFITS



Improving Staff Satisfaction

Care providers at Carpenter were unanimous in touting the easy, plug-and-play nature of the platform. They were particularly impressed by the immediate benefits it provided after just a brief, 20-minute introduction and training session.



Increasing Provider Response and Productivity

Providers called Hippo Virtual Care "an absolute differentiator" that brings "an acute solution to an acute problem." They say the platform improved service times, providing patients with access to specialty providers (or lower-level staff guided by specialty providers) within minutes — without patients needing to leave their rooms or homes.



Enhancing Efficiency and Financial Impact

Not only did professionals within Carpenter cite Hippo's low cost, but they were also quick to note the cost savings generated by the platform's ability to reduce needless patient and provider travel, as well as reduce unnecessary hospitalizations and discharges — especially those that were happening on the weekends — and maintain the network's census.



Delivering Quality Outcomes

Ultimately, Hippo and the healthcare professionals across The Carpenter Health Network share one goal above all others: superior patient care. The Hippo Virtual Care platform has helped the network achieve this goal by allowing providers to make better decisions within Carpenter's complete continuum of care, which includes the participation of the network's full resources — from social workers to those professionals who guide care — after the transitions that occur during their hospital care or recovery journey.



▶ SOURCES

1. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6990757/>JAMA Intern Med. 2020 Mar; 180(3): 385–394. Published online 2019 Dec 30. doi: 10.1001/jamainternmed.2019.6130: 10.1001/jamainternmed.2019.6130
2. <https://www.hcplive.com/view/staff-turnover-rates-nursing-homes-linked-to-lower-quality-care>
3. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7387590/#:~:text=Post%20acute%20care%20is%20a%20key%20element%20of%20the%20healthcare,to%20recover%20from%20acute%20illness.> Ann Geriatr Med Res. 2019 Jun; 23(2): 54–62. Published online 2019 Jun 30. doi: 10.4235/agmr.19.0009 PMCID: PMC7387590 Post-Acute Care as a Key Component in a Healthcare System for Older Adults Yu-Chun Wang,1
4. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10364039/> Overview of telehealth in the United States since the COVID19 public health emergency: a narrative review Juan J. Andino, 1, ^ Nicholas W. Eyrich, 2, ^ and Richard J. Boxer 1 Published online 2023 Jul 15. doi: 10.21037/mhealth-23-15 PMCID: PMC10364039 PMID: 37492124
5. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6140694/#b15-cia-13-1727> Evaluating the impact of a home-based rehabilitation service on older people and their caregivers: a matched-control quasi-experimental study Iris Fung-Kam Lee,¹ Felix Ngok Yau,² Sally Suk-Ha Yim,² and Diana Tze-Fan Lee
6. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6616175/> Future Healthc J. 2019 Jun; 6(2): 114–117. doi: 10.7861/futurehosp.6-2-114 PMCID: PMC6616175 Reducing readmission rates through a discharge follow-up service, Duncan Vernon

Hippo Virtual Care

BRING THE HOSPITAL TO THE HOME AND
EXTEND THE REACH OF SPECIALTY CARE

Supercharge your caregivers with wearable voice-enabled computing

Hippo’s hands-free, voice-activated, Augmented Reality platform delivers a “through the eyes of the caregiver” viewpoint allowing Specialty Physicians to diagnose and treat patients as if they were in the room.

- ▶ Easy to deploy and quick to scale
- ▶ Designed by clinicians, for clinicians for ease-of-use
- ▶ Team-based clinical workflow platform
- ▶ Increases clinician productivity, reduces costs
- ▶ Increases patient and provider satisfaction



Hippo enables seamless collaboration between specialists, nurses and remote caregivers

The Hippo Virtual Care headset delivers a “through the eyes of a caregiver” viewpoint to remote participants and observers.

The Hippo Virtual Care platform allows Specialty Physicians or medical staff to collaborate and conduct real-time patient examinations in the home.

To learn more, contact:

Tom Fee

Director,

Hippo North America

tom.fee@myhippo.life