

Guided Care Message Framework

[MESSAGE/ CONTEXT]

- More than 125 million Americans have at least one chronic condition and 60 million have more than one. By the year 2020, 25% of the population will be living with multiple chronic conditions, and costs for managing these conditions will reach \$1.07 trillion.
- Two thirds of Medicare's budget is spent on patients with five or more chronic conditions. These conditions can be better controlled when they are closely managed, in consideration with each other, and when the social and personal aspects of the patients' life are also considered.

However, the average primary care physician has an intensive patient load and cannot allocate the time needed to improve the quality of care, and quality of life, for older adults with complex health care needs.

The Guided Care model has proven that a prepared, proactive team, interacting productively with an involved, active patient, can improve healthcare outcomes.

[MESSAGES/ DESCRIPTION]

- Guided Care is a proven solution to a critical medical issue: the healthcare problems faced by many older Americans with multiple chronic conditions.
 - Guided Care patients get the unique support of a specially trained registered nurse who helps their primary care physicians provide coordinated, comprehensive health care.
 - Guided Care nurses coordinate all the efforts of a patient's doctors, caregivers and family support, monitoring, coaching families and caregivers. The nurse is responsible for:
 - Assessing the patient's health status and preferences
 - Creating a comprehensive, evidence-based care plan
 - Coordinating efforts of all the patient's doctors and caregivers
 - Educating and coaching patients and families
 - Monitoring chronic conditions
 - Smoothing transitions between sites of care
 - Helping the patient access community services.

The nurse is supported by an electronic health record, which helps create the care guides, action plans and reminder systems, and provides information on drug interaction and patient/caregiver encounters.

- After initial success in a small trial conducted in Baltimore, Maryland from 2003-2004, the program is now being tested in a broad, five year study across multiple suburban and urban sites in Maryland and Northern Virginia.
- The current study is enrolling 850 patients in multiple physician practices in both control and participant groups. Outcomes will be evaluated at baseline and at 12 and 24 months. The study will conclude in early 2010.
- In initial pilot study, the average 6 month insurance cost dropped by 25% (from \$6K to \$4.4K). Patients in the study also rated their quality of care significantly higher than patients in the control group.