

Nicholas Cohen, MD; Jonathan Lever, MPH; Stefan Gravenstein, MD, MPH

## Aim

- To identify salient features about two super utilizers
- To describe interventions in a hot-spotting program to reduce utilization
- To determine lessons learned for a hospital from the hot-spotting program

## Case Studies

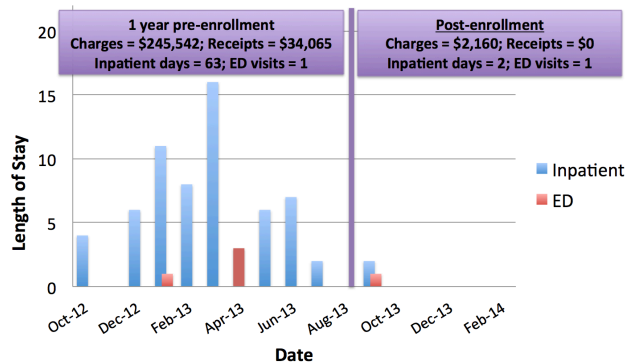
### Case 1

#### Salient features about the case:

- An 81 year-old with shortness of breath
- A multitude of services were being provided at baseline: telehealth, home care, coumadin clinic
- She had multiple different primary care providers

#### Salient features about the intervention:

- Established one consistent primary care provider (PCP)
- Home visit by PCP
- Provided same-day access, and instant cell phone access to PCP
- Rehearsed red flags and action steps for the next episode of shortness of breath



#### Lessons learned from the case:

- High utilization can occur despite having a lot of care if that care isn't coordinated
- High utilization can occur despite having a lot of primary care if that primary care isn't with one provider
- Being prepared to offer an alternative to 911 (a PCP cell phone) is necessary as the best laid plans may fail

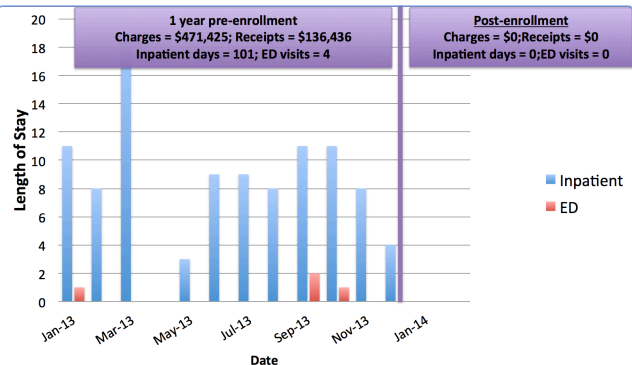
### Case 2

#### Salient features about the case:

- A 58 year-old with shortness of breath
- She was in the process of eviction, had lost her electricity, didn't have a phone, and was struggling to pay for food
- She was using cocaine
- Her mitral valve had been replaced and was causing hemolytic anemia
- She had refused homecare, had consistently no-showed primary care visits, and had refused case management from her managed care company

#### Salient features about the intervention:

- Established on consistent primary care provider (PCP)
- Reached out to family for help engaging patient when she no-showed her appointments and didn't answer phone
- Home visit and dinner by PCP with family
- Managed care facilitated getting lights turned back on, paying for phone, transportation to appointments and food



#### Lessons learned from the case:

- Engaging the mother to engage the daughter was key
- Addressing basic needs first – electricity, transportation, food – before anything else, was important
- Being prepared to bring dinner to the home when all else failed was necessary

## Lessons Learned

- Providing capacity for primary care teams to tailor solutions to individuals is important
- Identify and engaging key stakeholders – social networks, family – is vital