Issues in Aging: Innovations in Health Care

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A typical patient: Marian Chen

- 79 year old widow
- Retired teacher, lives alone
- Income: SS, pension and Medicare
- Daughter, lives 10 m away with three teenagers
- Five chronic conditions
- Three physicians
- Eight medications
In one year, Mrs. Chen needed...

- 6 community referrals
- 2 home care agencies
- 5 months homecare
- 2 nursing homes
- 8 meds
- 19 outpatient visits
- 3 hospital admissions
- 6 weeks sub-acute care
- 22 scripts
- 19 hospital admissions
Providers

8 Physicians
6 Social workers
5 Physical therapists
4 Occupational therapists
37 RNs
Mrs. Chen

- Confused by care and meds
- Poor quality of life
- High out-of-pocket costs

Medicare paid $39,400 to providers for her care (not including medications)
Health care for persons with chronic conditions is “a nightmare to navigate.”

*Crossing the Quality Chasm, IOM 2001*
80% of Medicare Spending is on Older People with 4 or More Chronic Conditions

- One condition (3%)
- Two conditions (6%)
- Three conditions (10%)
- Four conditions (12%)
- Five+ conditions (68%)
By 2010, 70 Million Americans Will Have Multiple Chronic Conditions
“Every system is designed perfectly to produce the results it gets.”

- Donald Berwick
What’s Wrong Here?

Chronic conditions

Acute care system
What Innovations are Needed?

• Coordination of care provided by hospitals, nursing homes, rehab, home care, and community physicians
• Alternatives to traditional hospital care
• Empowerment for self-care
• Support for caregivers
• Nurse-physician teams in clinics, NHs
• Patient-centered care at the end of life