

Connecting Hospitals and Community-Based Organizations

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Healthcare Economics

- Basics: People and systems respond to incentives
- Incentives = Payment Methodologies
- Common inpatient healthcare payment methodologies:

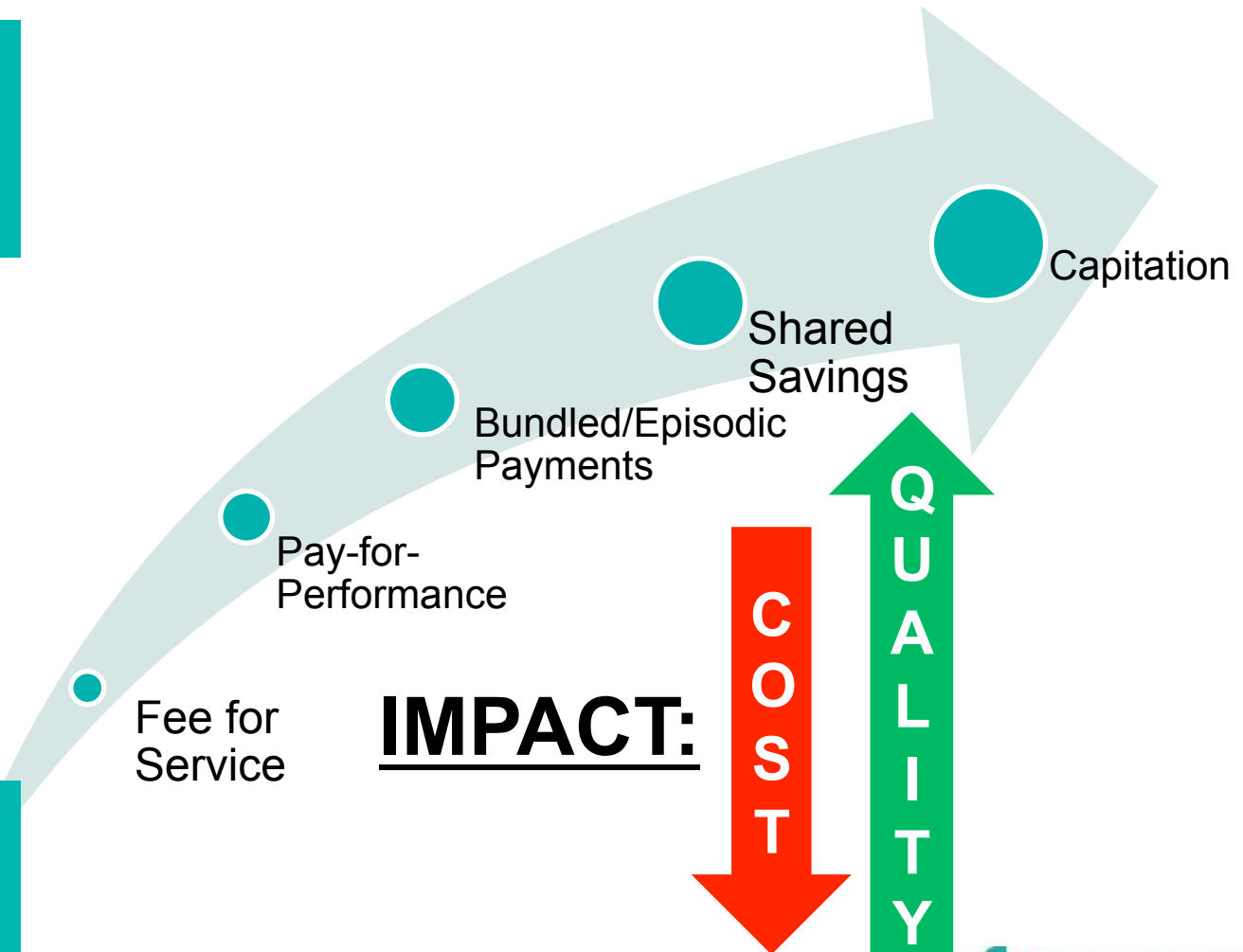
Per Diem
Free-for-Service
DRGs
Capitation
Episodic
Payments
Percent of Charge

Shifting Risk: Work in Progress

Physicians
Hospitals
Medical Groups

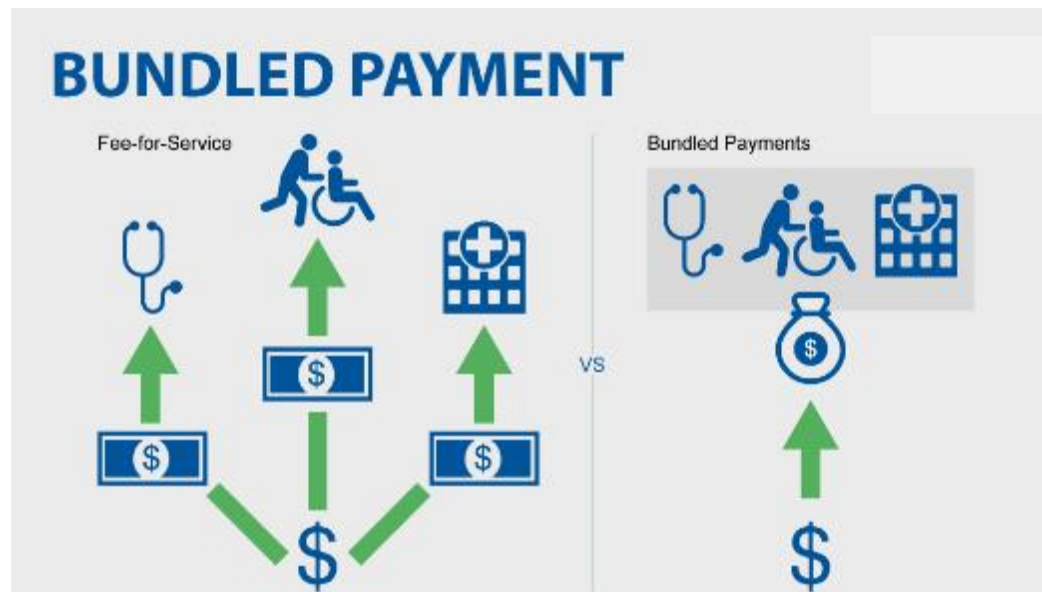
**Risk
Shift**

Employers
Government Payers
Health Plans



Hospital Discharge Planning Impacts

- Length of Stay (LOS): Patients are staying in the hospital for less time
- Hospitals are penalized for readmissions
- Increased need to coordinate care across the continuum with high-quality providers



Case Management Challenges

- Day in the life of a Case Manager
 - Strapped for time, need safe and quick pathways
 - Unfamiliarity with CBOs: It feels overwhelming
 - Discharge planning: How do they think?

**Insurance
benefits**

**Discrete
discharge
dispositions**



Hospital Needs of CBO Partners

1. Where Case Managers struggle with transitions:
 - Patients experiencing homelessness
 - Behavioral/mental health
 - Substance abuse
 - Memory care (dementia/Alzheimer's)
 - Ongoing health engagement
2. Defined program with clear parameters of service to eliminate a barrier to discharge
3. 24/7 operations ideal (at least 7!)