





By 2030, an estimated

100 MILLION

Americans will have

HIGH BLOOD PRESSURE



RIGHTHEALTH® THE FUTURE OF HEALTH CARE



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home health

telehealth

righthealth®

WHAT IS RIGHTHEALTH®?

RightHealth is a population health delivery model with leading edge technologies, such as remote monitoring (including bi-directional video), and medication management that powers tiered, longitudinal, chronic care coordination across health service settings through:

- A focus on chronic disease management
- A proprietary patient stratification tool that utilizes predictive analytics
- Physician-led multi-discipline teams
- A focus on care transitions that allows patients to move smoothly from one care setting to another

The Power of RightHealth®





A Collaborative Population Health Delivery Model Project: CMS "Bundled Payments Care Improvement Initiative (BPCI)"

THA Group is creating partnerships that will increase provider collaboration to improve post-acute quality of care and reduce spending. Partners will share in the savings generated from reductions in health care costs.



THA Group Partnering Proposal for The Innovative Payment Program

Initiative Purpose:

Link payments for multiple services that Medicare beneficiaries receive during 90 days of Post Acute Care (Bundled Payment)

Initiative Benefits:

- Overall: Encourage collaboration across all settings and specialties
- Patients: Higher quality care
- Partners:
 - a) Better track patient care and outcomes after hospital discharge and between physician office visits
 - b) Financial incentive for increased coordination
- CMS: Lower costs for the Medicare program

Initiative Mechanism:

 Align physician, hospital and post-acute care provider incentives with payer incentives

Gainsharing Partnership Members

- THA Group RightHealth
- Medtronic/Cardiocom
- Physicians

THA Group Partnering Proposal for The Innovative Payment Program (cont'd)

BPCI Model 3

"Retrospective Post-Acute Care Only"

- A retrospective bundled care arrangement
- Actual expenditures reconciled against an episode of care target price (Target Price = total cost of the 60-day home care episode plus 30 additional days)
- Triggered by an in-patient hospital stay.
 Included post-acute care services must begin within 30 days of discharge from hospital and end 90 days after initiation of episode.

Proposal Aims

Monitor, track, and prevent re-hospitalization over the 90-day episode for the following clinical conditions (DRGs):

- Acute Myocardial Infarction
- Coronary Artery Bypass Graft
- Cardiac Defibrillator
- Percutaneous Coronary Intervention
- Diabetes



By 2030, an estimated

100 MILLION AMERICANS

will have one or more

CHRONIC CONDITIONS



Telehealth Improves Patient Outcomes and Reduces Financial Expenses

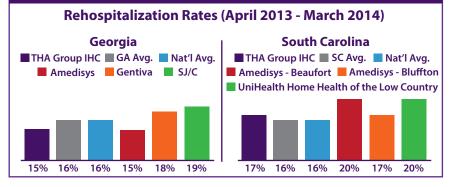
THA Group was the first home health company in the Coastal Empire and Low Country to implement telehealth as a standard of care. To this day, it is critical to our practice.

THA Group was featured as the model of successful implementation of telehealth best practices in the article, "Dynamic Capabilities in Home Health: IT-Enabled Transformation of Post-Acute Care," published in the February 2011 issue of the Journal of the Association of Information Systems.

Using a longitudinal study over the period 2001-2006, researchers followed THA Group's early adaptation of technology, particularly remote patient monitoring (RPM), to analyze its relative effectiveness in improving patient care at reduced financial expense. The study found that THA Group reduced re-hospitalization rates from 38% to 19% and reduced its emergent care rate from 27% to 17% in its Georgia operations. In South Carolina, the company also reduced its patient re-hospitalization rates from 27% to 19%, and its emergent care rate remained stable at 18%.

Throughout the practice of Telehealth, THA Group succeeded in reducing its number of skilled nurse visits per-patient per 60-day episode over 40% from 2001-2006. Finally, the study proved that in the five-year period after THA Group first implemented RPM, it saved \$760,000 in direct costs attributable to making only necessary targeted nursing visits.

Currently, THA Group's Georgia Rehospitalization Rate is 15% while South Carolina's Rehospitalization Rate is 17%.





of all healthcare dollars

are due to

CHRONIC DISEASE



NOTES

CONTACT

For information on how to address key value-based purchasing challenges, please contact:

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