REIMAGINING HOME-BASED CARE

Managing Complex Chronic Diseases Demands a Whole-person Approach

Patients with multiple chronic needs drive your highest costs.

Chronic diseases are the leading drivers of our nation's **$4.1 trillion** in annual healthcare costs. Out of every 10 adults, 6 have a chronic disease, and 4 have 2 or more. To add to this alarming number, most do not see their primary care doctor more than once a year – for an average of **15 minutes**.

As a value-based provider of care for over 7 years, Spiras Health has been at the forefront of delivering nurse practitioner-led care at home. Our program provides **36 touchpoints a year** for members with complex conditions to increase their access to care, reduce ER visits, and improve overall health outcomes.

"Before I started my Spiras Health treatment plan, I was in and out of the hospital all the time. They helped me feel better. I haven't been back! Thank you!"

— Kelly P., age 67

The Spiras Health Home-Centered Approach:

Patient Engagement

Our whole-person approach encompasses the patient's lived experience. We work with patients and their caregivers to educate and motivate, fostering better self-management.

Addressing SDoH Barriers

While bringing personalized care to the patient, we identify life challenges that can become obstacles and then track our findings and work toward resolutions.

Complex Chronic Care Specialists

Our specialized clinicians help members understand their conditions, recognize when symptoms are worsening, and manage acute events in the home.

On-going Collaboration

We encourage patients to attend doctor appointments, collaborate with their physicians to further personalize care plans, and work with caregivers to enable better support of the patient at home.

"Visiting patients in their homes gives them someone they can confide in and trust. This allows us to deliver more personalized care."

– Amy Padilla, RN, MSN, FNP-C, Spiras Health Director, Clinical Ops

Spiras Health reduces high-cost utilization of the ER and hospital

Nurse practitioner-driven care – Our team of respiratory therapists, registered nurses, and licensed practical nurses deliver in-home care augmented with 24/7 access, smart technology, and remote monitoring.

Medication adherence – All scheduled Spiras interactions include patient medication adherence check-ups with industry standard assessment tools. We measure on-going improvement while encouraging patient compliance.

Collaboration with providers – We support your provider network by notifying doctors of changes in patients' condition and medication. We then follow up with visit notes and updated care plans.

> *"I credit Spiras Health for keeping me out of the hospital for COPD exacerbations over the past 3 years. They taught me how to control my symptoms and manage early signs and symptoms."*
>
> **— Cherokee J., age 75**

Spiras Health delivers high satisfaction and compliance:

MEDICATION ADHERENCE

50% ↑ improvement at ***30 days***

82% ↑ improvement at ***60 days***

87% ↑ improvement at ***120 days***

ENROLLMENT SUCCESS

46%

of members we reach schedule an initial visit and ***99% of those enroll***

MEMBER LOYALTY

94%

of patients reported "***highly likely***" to re-enroll with health plan as a result of care from Spiras Health

PATIENT EXPERIENCE

95%

of patients rated Spiras Health "***5 out of 5***" on their experience with clinicians

Reimagine home-based care by giving your complex chronic members a higher quality of life – at home.

Contact Spiras Health at ***getinfo@spirashealth.com*** or visit ***spirashealth.com***.

1. https://www.politico.com/agenda/story/2018/09/12/medicare-baby-boomers-trust-fund-000694/
2. https://www.cdc.gov/chronicdisease/about/costs/index.htm

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