BLAST FROM THE PAST: THE HOUSE CALL

I want to begin with apologizing for the hiatus in Outside the Lines postings over the last few weeks. My family and I had a personal experience with the best – and the most difficult – of what doctors, hospitals, nurses, and our healthcare systems provide every day. While we, unfortunately, lost our family member, I am reminded of the incredibly important mission that healthcare providers hold, and I am especially grateful to be a small part of this industry that gives its heart and expertise to benefit people in our communities every day. Through this, and after just returning from presenting two sessions and introducing ZIGZAG Healthcare nationally at the Forum for Healthcare Strategists Summit in Chicago, I am re-inspired to stay the course of “Outside the Lines” thinking in order to transform and evolve the status quo of care for patients and their families.

With that, we move on with Part 7 of our Innovation Series: the House Call, a category we call “Home Sweet Home” in our ZIGZAG Healthcare online library.

Referred to as doctors making house calls,
home-based primary care, or house call medicine, the “everything old is new again” cliché is ever present as a small group of doctors – including some “house call specialty” doctor groups – are bringing themselves, their black bags, and various newfangled technologies to families, children, and elderly patients in their homes or other places of residence (i.e. assisted living facilities). Although a drop in the bucket compared to the number of primary care visits still taking place in physician offices and other care sites, it’s interesting to note that demand for house call medicine is on the rise – especially as a potential primary care model to address the growing elderly population. This sector alone is expected to grow to 72 million by 2038 (to about the population size of California, Florida, and Illinois combined). Also, a recent house call program pilot study of Medicare patients (with a control group of 2,100 patients) demonstrated 17% lower health care costs, 9% fewer hospitalizations, 20% fewer ED visits, 23% fewer subspecialist visits, and 27% fewer stays in skilled nursing facilities.

There are a few interesting doctors in this space. In particular, Dr. Thomas Cornwell in Chicago has made it his life’s work to practice home-based primary care. Also, there are a few new and interesting doctor groups specializing in house call medicine. All are included in our ZIGZAG Healthcare library:

- Heal, based in Los Angeles and started in 2015, combines an on-demand medical practice and smartphone app that promises to deliver doctors to people’s doorsteps within an hour.
- MedZed is a technology-plus-nurses enabled physician house calls company that partners physicians with technology, nurses, and a care approach that extends
their practice into the home. MedZed started in 2014 in Atlanta and has been expanding into other states.

- Pager Health, like Heal, is a smartphone app plus house calls company, a la “ubering for doctors.” Founded by an experienced team of entrepreneurs, including the former chief engineer of Uber, Pager launched in New York in 2014, added San Francisco in 2015, and has partnered with Evolution Health – representing more than 30,000 doctors – to power its plans for national expansion.

For more information on either Heal, MedZed, or Pager Health, become a member of ZIGZAG Healthcare. We are now offering both individual and business memberships. Contact Kala to join: kkascht@strategyadvantage.com.

Ten years ago, in April 2006, Dr. Sanford Brown wrote an editorial in the American Academy of Family Physicians (AAFP) magazine. At that time, he wrote: “We need a new paradigm for a new time. The old models are obsolete.” He recommended “Home Visits” as one of 6 suggestions, noting: “We need to reclaim the house call as our province and have sophisticated systems for caring for our patients in their homes.”

The time may not have been right then. People were not demanding change like they are today. A decade ago, the technologies may not have been evolved enough to support safe care in the home. But is the time right now? Is this – house call medicine – potentially one of the important solutions for delivering better, transformed care today and into the future? Should you get on board, or if not, risk potentially missing the boat? Take a look and make your own decision for your health system.
NEWS ALERT! WHAT'S HAPPENED THIS WEEK

While this news didn’t happen this week, it’s relevant to the home-based topic and important for healthcare. In December 2015, Harvard Business Review (HBR) published a story on the John Hopkins' Hospital at Home (HaH) project. Some 20 years ago, physicians at Johns Hopkins started experimenting with this concept. Since then, according to the HBR author, HaH has been one of the most studied innovations in health care. A 2012 meta-analysis of randomized controlled trials of HaH showed a 38% lower six-month mortality rate for HaH patients than hospitalized patients. More recently, two years ago, Kaiser launched an experimental HaH program run out of Kaisers Permanente's Riverside Medical Center in Southern California. "When you shift the care to the house, believe it or not, it's actually cheaper," says Dr. Kavita Patel, a senior fellow at the Brookings Institution who specializes in health care policy. "Because all the facility costs, infrastructure, none of that exists ... in your home."

WHO WE'RE WATCHING

Other interesting home-based medicine trends are unfolding. These involve in-home, non-medical caregiving and assistance as well as remote patient care and monitoring. We’re watching HomeHero, Honor, and Vivify Health as they continue to develop and expand to see how they evolve in their own individual ways. All three are interesting, very well-funded, and have plans to provide a nationwide network of care providers offering a unique set of services.

WHAT'S TRENDING
In the 1930s, 40% of patient encounters occurred in the home. It was a time that idolized physicians and his / her iconic black bag, however, by 1950, house call visits had all but disappeared. Yet, now they are slowly back on the rise – from 1.4 million visits in 1999 to 2.3 million in 2009. The number of visits today are likely even higher, given the concierge medicine and new house call specialty group trends. Also, the ACA supports the idea of the house call via various care innovation initiatives. The CMS Independence at Home Act's 3-year project demonstrated strong results and other trends are shaping up to indicate that healthcare providers might want to take a close look at the viability of this as an additive practice model.