OAKLAND, Calif., July 19, 2010 – The Center for Technology and Aging today announced grants to five organizations for remote patient monitoring (RPM) technology projects that will demonstrate how RPM improves the quality and efficiency of chronic disease management and post-acute care of older adults. Each project involves a coordinated effort among patients, families and caregivers.

“RPM technologies make a huge difference in the quality of life for those living with chronic conditions,” said David Lindeman, PhD, director of the Center for Technology and Aging. “These projects will underscore the need to reform reimbursement policies and make possible wider adoption of these technologies in public programs – Medicare and Medicaid – as well as among private insurers and health care systems.”

The U.S. health care system could reduce costs by nearly $200 billion during the next 25 years if RPM tools were utilized to care for patients with congestive heart failure (CHF), diabetes, chronic obstructive pulmonary disease (COPD), and chronic wounds or skin ulcers. Eight of 10 older Americans have one or more chronic diseases.

The Center's RPM initiative goals are to demonstrate that these technologies can be used more widely because they reduce: the use of ER's and hospitals by older adults, the need for those with chronic illness to move to intensive higher-cost care settings, and the burden on family and professional caregivers.

RPM includes a wide variety of technology, such as point-of-care monitoring devices – weight scales, glucometers, implantable cardioverter-defibrillators, and blood pressure monitors – which become part of a fully integrated health data collection, analysis, and reporting system between the devices, patients, and clinicians.

The grantees are:

- Sharp HealthCare Foundation (www.sharp.com/sharp-foundation) – Working with senior and home health agencies, this project will monitor patients who have five or more chronic conditions – which may include CHF, peripheral artery disease, COPD, atherosclerosis, hypertension, diabetes, and chronic kidney disease – with the goal of reducing unplanned hospital readmission rates.
• New England Healthcare Institute (www.nehi.net) – Using the Electronic House Call System (ExpressMD Solutions) and in collaboration with the Massachusetts Technology Collaborative, Atrius Health, and Blue Cross Blue Shield of Massachusetts, this Massachusetts-based project seeks to demonstrate clinical and financial benefits from the use of RPM technologies as evidenced by reducing hospital readmissions.

• Centura Health At Home (www.centurahealthathome.org) – In collaboration with an internal physician group, telehealth video technologies (inLife and Life View, made by American TeleCare) will be used to enhance 24/7/365 call center response for Centura Health at Home patients in Denver, Colorado. The goal is to reduce re-hospitalizations and to improve quality of life for patients who have diabetes, COPD, or CHF.

• AltaMed Health Services (www.altamed.org) and Stamford Hospital (www.stamfordhospital.org) – This project will expand use of RPM technology (HoneyWell’s HomMed device) with low-income seniors in East Los Angeles, California and Stamford, Connecticut who have CHF, diabetes, COPD, or hypertension. The goal is to promote better self-management habits and healthy behaviors while also establishing a new healthcare para-professional position, the “Telehealth Technician,” through community college training programs.

• California Association for Health Services at Home Foundation (www.cahsah.org) – In collaboration with several home care agencies, this project will use Intel's Health Guide to monitor patients with chronic disease conditions or those needing post-acute care follow-up. The goal is to reduce avoidable 30-day readmissions, hospitalizations, and emergency department visits for Medi-Cal patients; and to inform public policy concerning RPM technology and Medi-Cal programs operating under federal waivers.

“One of the Center’s goals is to assure that funded projects aren’t ‘one and done’, but are designed to be replicated,” said Lindeman. “Each grantee has identified ways to make sure their project can continue beyond the one-year grant period, can be broadly adopted by others, and is integrated within our long-term care system.”

The five $100,000 grants will be supplemented with a total of over $1,746,000 in matching funds. Individual project details and the Center’s RPM Position Paper are available at the Web site, www.techandaging.org.

The Center for Technology and Aging (www.techandaging.org) supports the rapid adoption and diffusion of technologies that enhance independence and improve home and community-based care for older adults. Through grants, research, and development of practical tools and best practice guidelines, the Center serves as an independent, non-profit resource for improving the quality and cost-effectiveness of long-term care services. The Center was established with funding from The SCAN Foundation (thescanfoundation.org) and is affiliated with the Public Health Institute (phi.org) in Oakland, CA.

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