

ILLUSTRATIVE SCENARIO

BonaCura Children’s Hospital – Urology Postoperative Video Visits*

AMA Return on Health

STRATEGIC GOALS

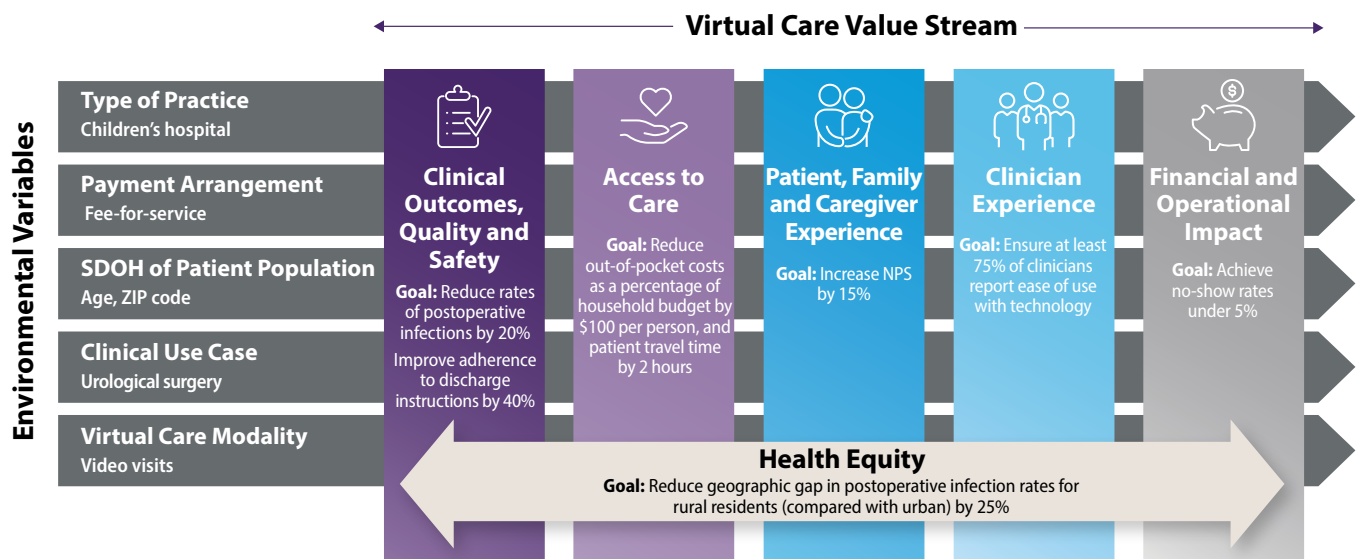
BonaCura Children’s Hospital will utilize postoperative video visits in order to:

- Address inequities in postoperative outcomes for rural patients.
- Optimize clinical space and resources.
- Enhance patient/family experience by reducing out-of-pocket costs and unnecessary travel.

DESCRIPTION

BonaCura Children’s Hospital is a large pediatric specialty hospital serving a broad catchment area covering both urban and rural geographies. The BonaCura Urology Department has decided to adopt video visits to provide postoperative care, particularly for patients located in rural areas.

FIGURE 16. BONACURA UROLOGICAL POSTOPERATIVE FOLLOW-UP PROGRAM AND IMPACT TARGETS



BonaCura conducts approximately 1,200 urological surgeries annually. A claims analysis conducted by the hospital’s research department found that a significant proportion of BonaCura’s patients were not coming back to the hospital for postoperative follow-up visits. The analysis revealed that a greater percentage of rural patients were experiencing postoperative complications

and returning to the hospital for subsequent postoperative care compared with urban patients. To address this disparity, BonaCura has decided to implement a re-engineered, technology-enabled discharge protocol.

Before discharge, the patient’s physician assesses whether the patient’s family member or caregiver has the necessary devices







and broadband connection to participate in post-discharge video visits for follow-up care. If they can participate, the physician initiates consent and scheduling for the follow-up video visit. Those who lack the necessary technology to participate in virtual care will be provided with a connection to local resources that can support their efforts to acquire needed technologies.

Two or three days after discharge, a nurse or medical assistant will reach out to the family member or caregiver via telephone to review discharge instructions, remind them of the patient's upcoming video

visit, and answer any technology-related questions. During the video visit, a clinician will assess the patient's postoperative status with the help of a family member or caregiver and address any

issues or complaints related to the surgery. After the video visit, the physician will contact the patient's pediatrician to update them on their patient's status.

IMPACT GOALS

VALUE STREAM	PRIMARY DRIVER	RELEVANT MEASURES	IMPACT GOALS
 <p>Clinical Outcomes, Quality and Safety</p>	Clinical quality and safety outcomes	Postoperative infections requiring ED visit or inpatient readmission	Reduce rates of postoperative infections requiring ED visit or inpatient readmission within 90 days by 20%
	Clinical processes	Adherence to evidence-based guidelines	Improve adherence to discharge instructions by 40%
 <p>Access to Care</p>	Affordability of care	Out-of-pocket costs as a percentage of household budget	Reduce patient-reported out-of-pocket costs for follow-up care (including travel, time off work, etc.) by \$100 per person
	Availability of care	Patient travel time saved	Reduce patient travel time by two hours
 <p>Patient, Family and Caregiver Experience</p>	Clinical and/or technology experience	NPS	Increase NPS by 15%
 <p>Clinician Experience</p>	Technology experience	Reported ease of using technology	Ensure that at least 75% of clinicians find the technology easy to use
 <p>Financial and Operational Impact</p>	Operational efficiencies	No-show rate	Achieve no-show rates of under 5%
 <p>Health Equity</p>	Equity in clinical outcomes, quality and safety	Relative reduction in adverse postoperative outcomes by geography	Reduce the geographic gap in postoperative infection rates for rural versus urban residents by 25%



EXAMPLES OF VIRTUAL UROLOGICAL POSTOPERATIVE FOLLOW-UP PROGRAMS	
ORGANIZATION EXAMPLES	PROGRAM DESCRIPTION
<u>Arkansas Children’s Hospital</u>	The Arkansas Children’s Hospital Urology Department delivers postoperative follow-up telehealth visits for patients located in Springdale, Jonesboro, Texarkana and Fort Smith.
<u>Mayo Clinic</u>	At the onset of the COVID-19 pandemic, the Mayo Clinic Center for Connected Care launched a program to enable video and telephone visits for pediatric urology.
<u>Mount Sinai</u>	Mount Sinai’s Department of Urology conducts telehealth primarily for postoperative follow-up and has scaled up the program during the COVID-19 pandemic to address select other visit types.

Relevant Literature Supporting Illustrative Impact Estimates



ACCESS TO CARE

- In a systematic [review](#) of 21 studies evaluating telehealth use in the postoperative setting, round-trip miles and travel time saved directly translated into monetary savings for families, ranging from \$36 to \$357 saved on travel.
- A 2020 [study](#) on the use of telehealth for postoperative video visits found that less work and school were missed by parents and children, respectively. The opportunity costs associated with an in-person visit were computed at \$23.75 per minute of face time with a physician, compared with \$1.14 for a virtual visit.
- A 2020 [study](#) assessed the impact of introducing video visits in a tertiary academic pediatric urology practice, serving primarily rural patients during the COVID-19 pandemic. On average, 2.25 hours of travel time was saved per patient.

*The entity referenced in this Illustrative Case is fictional. Individuals, business, events, and scenarios referenced are influenced by interviews and review of publicly available literature. Any resemblance to actual individuals, entities, or events is purely coincidental.