

## CASE STUDY

# Using Remote Care to Reduce Heart Failure Risk

## THE CHALLENGE

Decrease heart failure risk and emergency events without over-burdening providers

A nationally renowned integrated delivery network (IDN) faced a challenge: delays in optimizing blood pressure and heart failure (HF) medical therapy were creating more emergency department (ED) visits and hospitalizations. These same delays were also inconvenient for patients and decreased their quality of life.

Patients had to frequently visit clinics for blood pressure checks and HF medication titration, which resulted in high clinic and provider utilization and risked patients being lost to follow-up. The cardiology department needed a convenient and affordable way to obtain real-time patient data. They also needed to make that data actionable and accessible by clinicians.

## THE STRATEGY

Care teams implemented a personalized, proactive remote care program for patients challenged by HF symptoms.

The program required buy-in from patients and providers:



### Patients

- **Maintain regular clinical visits** and medication compliance
- **Commit to multi-month remote care program** to optimize BP/HF medications
- **Participate in all required steps**, including medication changes and connecting mobile apps to transmit data



### Providers

- **Use remote BP and HF sets** to monitor patient metrics
- **Ensure staff are comfortable with monitors**, including pairing and troubleshooting
- **Test equipment and check batteries** before patients arrive for clinical visit
- **Guide patients through test submissions** during enrollment and follow up after three days to ensure correct transmissions



66%

of participating patients improved their ejection fraction

69%

of patients fully participated in the guideline-driven medication regimen

74%

of participating patients are stable after successful participation in the remote care program.

+233%

Providers increased their productivity by 233%, caring for 20 patients per hour instead of 6 without compromising treatment quality.



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*"I learned about taking my blood pressure and watching my weight. Since then, I've stopped smoking and my weight is up but that's because I'm eating better. The program was just right for me."*



**Annalisa**

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*"I loved this program and it feels amazing to graduate today knowing that my medications are where they should be."*



**Mary Ellen**

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*"I liked the real-time feedback and the encouragement from staff. I respond well to feedback, so that helped keep me on track with my heart health and general goals. I've started swimming and walking."*



**Eugene**

## THE SOLUTION

### Implement remote care protocols alongside traditional clinical steps

The IDN adopted a biweekly review process to assess the success of the remote patient care program. The cardiology team — NPs, physicians, and the HF case manager — held 60-minute Monday and Thursday briefings to collectively discuss the care strategy, its opportunities, and associated challenges. They continuously reviewed labs, updated dry weight, and revised the patient “graduation” timeline. Staff would up-titrate heart failure medications as necessary.

### Achieve cost-effective roadmap for HF patient recovery

The IDN partnered with Validic to implement a remote care program to optimize each patient’s clinical status and improve their quality of life in a faster, more meaningful way. Validic’s remote care solution integrated directly into the IDN’s EHR, making the HF critical data easily available and accessible to the cardiology team within their existing workflow. Visualizations within the EHR made biometric and lifestyle data trends simple and easy to understand. Alerts within a shared message pool ensured the cardiology team could quickly assess abnormal readings and act accordingly.

## CONCLUSION

The IDN found that implementing a remote care program was a quicker and more efficient way to improve patients’ clinical status and quality of life. These were some of the highest risk patients in the practice who required a high-touch level of care. A proactive care approach that prioritized real-time patient data captured outside the clinic meant better patient outcomes and greater care team efficiency.

Validic is the only EHR-integrated solution that flexes with the needs of your entire patient panel without adding staff resources. We built the largest ecosystem of connected health devices and apps, and an EHR-embedded remote care application, to make personal health data meaningful and actionable for clinicians and patients.

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