Heart360
Fishbowl
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Scaling and Spreading Innovation
Strategies to Improve Cardiovascular Health
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Rates of Hypertension Control in the U.S. are Low

• Benefits of hypertension therapy
  – 25% reduction in heart attack
  – 40% reduction in strokes
  – 50% reduction in heart failure

• NHANES (2005-2008)
  – Treatment  70%
  – Control      46%
Focus Groups
Kaiser Colorado Clinics

- Controlling my BP is critical
- Diet, exercise, and medications are important
- Office visits are inconvenient and time-consuming
- Using a home BP cuff is appealing
Provider Meetings
Kaiser Colorado Clinics

Providers Supportive
Guideline driven
Kept Informed
Home BP Monitoring supported by Pharmacists and Heart360
For patients with hypertension, is a clinical pharmacy specialist-led Heart360 home BP monitoring program (HBPM) more effective than usual office-based care?
Study Setting
Study Population

Uncontrolled HTN

Usual Care
- Initial visit
  - Referral To PCP

HBPM-Heart360
- Initial visit
  - Home BP monitoring

six month follow-up visit
Results
HBPM Patients Had Superior 6-month BP Control

Usual Care: 37%

HBPM: 57%

RR = 1.5 (1.2-1.9); p < 0.001
Heart360 HBPM Group Had a Greater Drop in Blood Pressure

Usual Care HBPM

Mean BP drop (mm Hg)

Usual Care HBPM

Systolic

Diastolic

P <0.001
Heart360 HBPM Patients Reported Greater Satisfaction with Care

Usual Care: 61% Very to Extremely Satisfied
HBPM: 90% Very to Extremely Satisfied

P <0.001
What are the cost implications for Heart360 HBPM?

- Intervention Costs
- CV Events Prevented
- Cost of Events Prevented
Cost Benefit over 10 Years

- $0
- $5
- $10
- $15
- $20
- $25
- $30
- $35

Year
- $ Invested
- $ Saved

Millions of $
Implementation Barriers

• Cost of BP cuffs
• Need for computer and internet
• Challenges of getting data into EHR
• Capitation vs. Fee for Service
• Patient Turnover
Translation to Routine Practice: A Tale of Two Regions

Kaiser Colorado

Kaiser Southern California
KP Colorado

• Enthusiastic response to presentations to health plan leaders and stakeholders

• Little movement towards adoption in routine clinical practice
  – Turnover in clinical champion
  – Change in organizational priorities
  – Limited bandwidth
  – Lack of sponsorship
KP Southern California

• Enthusiastic response to presentations to health plan leaders and stakeholders

• Rapid movement towards adoption
  – Stable clinical champion - > 20 years
  – Organizational priority – improve efficiency
  – Sponsorship by Associate Medical Director

• Current Plans
  – Pilot 3 medical centers serving > 600K patients
  – Subsidize cost of cuff, consider BP cuff library
  – Existing infrastructure to support rollout
Lessons Learned

• Clinical champion
• Organizational priorities
• Bandwidth
• Sponsorship
Disclaimer

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