

Hospital resurrects practice of making house calls

Sometimes a trip to the doctor's office is too much for the very sick and traveling to the emergency room can be costly, so some doctors are hitting the road

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Marian Graham doesn't need to leave her house to find a medical home. About once a month, Dr. Bill Zafirau checks in on the 91-year-old Akron resident, who is dependent on supplementary oxygen.

"You're here," Graham said with a big smile one recent afternoon, carefully opening the door to avoid the hose for her oxygen. "Come on in!"

During the next hour, Zafirau examined Graham in her living room and peeked into the medicine cabinet.

He discovered she hadn't been taking a medication that her eye doctor prescribed because she couldn't get the lid off.

So Dr. Ferdinand Apolonio, a geriatric fellow with Summa Health System who accompanied Zafirau on the visit, loosened the top. (On previous visits, he's even changed her light bulb.)

"The thing that motivates me is being able to increase access to care," said Zafirau, medical director of the SummaCare Physician House Calls program. "I hopefully am providing higher value health care."

Graham is one of 83 patients enrolled in SummaCare's house calls program.

Some other insurers, physicians, private companies and hospitals also are offering programs that turn back the clock by returning to the days when doctors made house calls.

The idea is to provide more routine and preventive care to a select group of frail patients who struggle to get to their doctor's office, said Annette Ruby, SummaCare's vice president of health services management.

When they need it

The average patient in the SummaCare program has eight chronic diseases and takes a dozen medications, Zafirau said.

"These are patients who are fairly complex and sick — too sick to get to the doctor," Ruby said. "They're getting some real personal, high-touch care at times in their life when they're really sick."

SummaCare uses Summa geriatricians to provide the home care for members of its Medicare managed-care plan referred by their doctors or through a review of their case by the insurer.

The house calls program "changes the whole playing field," said Dr. Kyle Allen, Summa's chief of the Division of Geriatric Medicine. "You're a guest. It changes the dynamics between the patient and the doctor. It also gives you clues about other things that might be affecting their health. It's very rewarding, actually."

On the road

Zafirau packs his Ford Escape with a laptop computer and all the medical equipment he needs to care for his patients in the home. With his mobile office, he can order prescriptions, check oxygen levels and provide other services.

"We can do pretty much everything you can do in a primary-care office," he said.

Several studies nationwide have shown that providing primary health care in the home can cut costs, largely by reducing the need for hospital stays and emergency room visits.

The average ER visit costs about \$1,500 — roughly the same price as 10 house calls, according to the American Academy of Home Care Physicians.

The U.S. Department of Veteran Affairs found that its home-based primary care program saved 63 percent in hospitalizations and reduced nursing home placements by 87 percent.

"If you target the high-cost, high-risk patients and give them what they need — which is ongoing primary care in the home — you will reduce and, in many cases, eliminate unnecessary ER visits and hospitalizations," said Constance Row, executive director of the American Academy of Home Care Physicians.

SummaCare still is studying whether patients enrolled in the program fare better and cost less, Ruby said, but that appears to be the trend.

University Hospitals Case Medical Center in Cleveland has been offering a physician house calls program for five years to patients who live near the hospital in inner-city Cleveland.

A couple hundred seniors are participating in the program, which is used as a teaching tool for medical students from Case Western Reserve University and residents at the hospital, said Dr. George Kikano, chairman of the Department of Family Medicine and founder of the UH house calls program.

Kindness of others

The program relies on charitable support, he said.

Many of his patients — such as one 97-year-old woman with heart failure and arthritis — used to wait to get medical care until they were so sick, they needed to call an ambulance.

"She used to get her care through the emergency room on a frequent basis," Kikano said. "Now, instead of going to the emergency room, she calls me. We're doing the coordination."

Some private firms also are entering the house-call market.

Michigan-based Visiting Physicians Association opened an office late last year in Green to serve Akron-area patients.

The Akron-area office has about 450 patients.

The company employs doctors to visits patients' homes, usually about once a month, said Melina Brown, a registered nurse and regional director for northern Ohio and western Pennsylvania.

Blood work, digital X-rays, echocardiograms, vascular studies and ultrasounds also can be performed in the home, she said.

"In doing so," Brown said, "we're able to take a proactive approach to medicine."

The house-call concept has been slowly catching on.

In 2007, Medicare paid for nearly 3 million house calls, compared to about 1.5 million a decade earlier.

As long as patients have health problems or disabilities that make it difficult for them to go places, physician house calls typically are covered by Medicare, the federal health insurance program for people 65 and older and some younger disabled Americans.

As with most outpatient services, Medicare pays 80 percent of the bill and the patient must pay the remaining 20 percent, unless he or she has a secondary insurance or Medicare managed-care program.

The doctor's charges for house calls typically average \$100 to \$125, according to the American Academy of Home Care Physicians.

SummaCare doesn't charge a copay for its Medicare managed-care patients enrolled in the House Calls program.

A growing need

The need to provide easier access to medical care for disabled, elderly patients is expected to grow as the nation's population ages.

The American Academy of Home Care Physicians estimates at least 1 million elderly are homebound and another 2 million to 3 million have disabilities that make it difficult for them to get to the doctor's office.

Margaret Brouse, 86, of Mogadore, relies on the SummaCare program for her routine health care.

Brouse is mostly bedridden because of advanced Parkinson's disease.

Bob Brouse, her husband of 63 years, said the program helps him care for his wife.

"It's a big relief, I'll tell you," he said. "It's a relief for me to not have to get her in the car. I'm 86 myself. I can't do that anymore. This helps by having somebody come over."