



# Sinai Hospital of Baltimore – Ambio Health – Connected Heart Health Heart Failure Pilot Project

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# Introduction

Patient engagement and the use of remote monitoring systems are currently a focus of interventions for chronic disease management.

The feasibility and value of combining interventions aimed toward promoting patient engagement with remote monitoring systems has not been fully evaluated.

# Objective

The objective of our study was to evaluate the combined value of the Ambio Health telemonitoring system, the American Heart Association Connected Heart Health Care Plans and a hospital based heart failure chronic disease management program on preventing 30-days readmission and promoting patient engagement in an inner-city heart failure patient population.



- Translate AHA guidelines and statements that impact Heart and Stroke patients into **evidence-based CarePlans**
- Provide a directory of proven AHA guidelines and content designed to **significantly increase compliance and patient engagement**
- Empower health care providers, patients and caregivers with trusted CarePlan solutions that are **scalable in addressing the needs of complex care patient populations**

## Meters

Wireless Scale



Wireless BP Meter



Wireless Glucose Meter



Other non- wireless meters



## Gateways

Ethernet Gateway (now)  
Cellular Gateway (1Q17)



Cellular-Ethernet Router (now)



## Care Management / Clinician Portal

- Any number of locations, clinicians, patients
- AHA CarePlans with patient education, assessments, decision support and messaging
- Patient specific alert and target thresholds
- Alerts for biometrics, symptoms, non compliance
- Biometric logs and graphs with analytics
- Reading and medication reminders if missed
- Encounter records / history
- Report print or email
- Patient incentives program
- Glucose test strip replenishment
- Population analytics
- EHR integration
- Co-branding available

## Patient / Caregiver Portal

- Any number of family caregivers
- CarePlan delivery to computer, tablet or smartphone
- Reading and medication reminders
- Reminders by IVR, text, and/or email
- Shared appointment calendar
- Reading history report print or email
- Exercise and diet planning and tracking
- Patient incentives

## User Interface

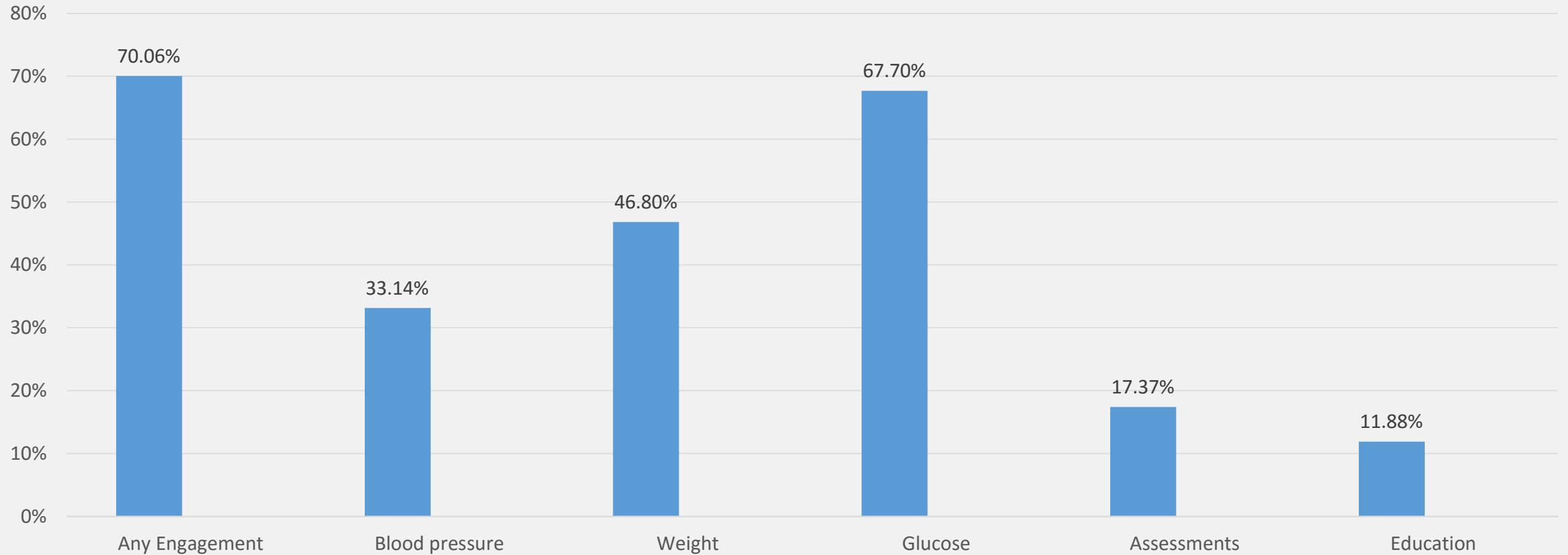


# Baseline Demographics and Clinical Characteristics (n=23)

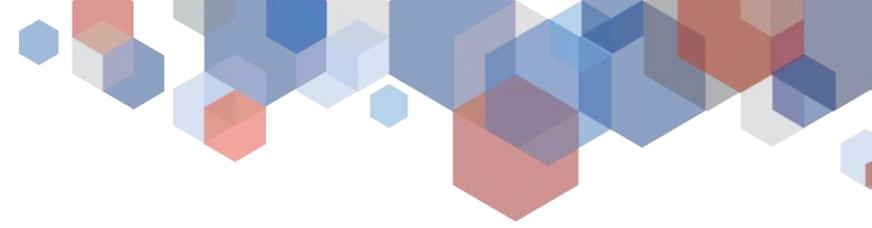
• Age	65.65 <sub>±</sub> 12.2	• HFrEF	12
• Sex		• HFpEF	11
• Female	13	• Diabetes Mellitus	14
• Male	10	• HTN	22
• Race		• Atrial Fibrillation	10
• Black	22	• Serum Creatinine (mg/dl)	1.38 <sub>±</sub> 0.6
• White	1		
• Insurance status			
• Medicare	15		
• Medicaid	1		
• Commercial	7		

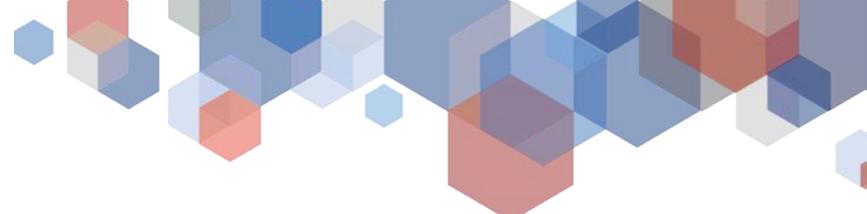
# Engagement with program

Percentage compliance



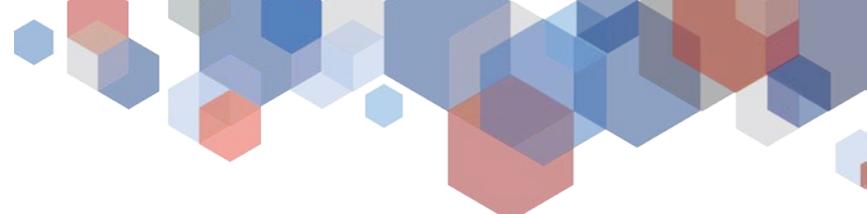
# Alerts and warnings





# Interventions

- Medication changes – 42
- Symptoms reported/managed – 30
- Calls and follow ups – 117
- Patients referred to diabetes resource center - 5
- AmbioHealth blood pressure trends and weight trends reviewed with patients at the time of the clinic visit and additional recommendations and medications changes made accordingly



# Readmissions

- For the 23 pts who have been in the program for at least 30 days, there were a total of 2,980 patients follow up days
- The initial 30 days HF readmission rate was 13% (1 patient at Day 1 , 1 patient at day 3 and 1 patient at day 16 from enrollment), and the all cause initial 30 days readmission rate was 17% (4/23).
- During a total of 2,980 patients follow up days, there were a total of 5 HF readmissions (2 in the same patient) and 11 all cause readmissions (4 in the same patient)
- Projections based on US average would have been 21 all cause readmissions for 2,980 patients follow up days

# Conclusions

- Good overall engagement with the program, especially biometric monitoring, in an inner city heart failure patient population
- Trends toward low long term HF and all cause readmission rates when compared to national averages
- High level of nurse involvement, monitoring and managing symptoms, and adjusting medications.
- Limitations including small sample size and no comparison group