LeadingAge Wisconsin
Better Services for Better Aging

WHCA / WiCAL
Wisconsin Health Care Association Wisconsin Center for Assisted Living

Creating a Complex Patient Pilot Program

Position: Provide $15 million GPR in 2023-24 to create a Complex Patient Care Pilot Program aimed at identifying innovative approaches to transition patients from hospitals to long-term care settings.

In 2022, Wisconsin nursing homes admitted nearly **36,000 patients** from hospital settings. Department of Health Services data further indicate that nearly 92% of all nursing home admissions are directly from hospitals, demonstrating how vital nursing homes are to our State's health and long-term care system. [1]

Despite this, a much smaller hard-to-place patient cohort estimated at **350 to 400 patients** are waiting to be discharged from a hospital to a post-hospital setting on any given day in Wisconsin.[2] Absent a proven, sustainable strategy to address the care and services needs of patients remaining in hospitals far beyond their optimal discharge date, securing appropriate placement options for these patients will remain extremely challenging. The Complex Patient Pilot Program advanced jointly by LeadingAge Wisconsin and the Wisconsin Health Care Association would accelerate creation of collaborative, sustainable solutions to this issue.

Why Support a Complex Patient Pilot Program?

- **Nursing Home Bed Capacity is not the Issue:** Wisconsin's nursing homes have an average occupancy rate of 70%, meaning there are more than enough beds available (approximately 7,500 unoccupied beds) to serve an additional 350 to 400 patients from hospitals. Current workforce challenges clearly impact the ability of nursing homes to staff those vacant beds and achieve higher occupancy, however, the fact that facilities have admitted nearly 36,000 other patients from hospitals indicates other barriers exist to securing appropriate care settings for these 350 to 400 patients.

- **Identify the Characteristics and Needs of Hard-to-Care-For Patients:** Despite the growing awareness of the challenges associated with hard-to-place hospital patients, data about the specific needs of this population is scarce. While some problems, such as a shortage of bariatric beds, appear to persist statewide, local and regional markets also experience these barriers to a different degree. Identifying who these 350-400 patients are by **performing a root-cause analysis of the barriers to delivering the appropriate care and services** to these patients is an essential step under the Complex Patient Pilot Program. For example, if many of these patients are middle-aged with complex behavioral needs, they may not be appropriately or safely served in a "typical" nursing home setting around frail elders. Identifying who these patients are, their precise care needs, where they live, their payor source (if any), and available natural/family supports, will determine the best placement for those individuals, and how additional staffing, medical/behavioral infrastructure and/or funding gaps can best be filled.

[1] WI Department of Health Services, Division of Quality Assurance data
[2] Wisconsin Hospital Association Summary on Workforce and Post-Acute Challenges

- **Collaborative Partnerships are Essential:** The Complex Patient Pilot Program would require a true partnership between participating hospitals and post-acute (long-term care) facilities. Working collaboratively within their local communities, these partners are well-positioned to operate a successful pilot and ensure patients are best served in the most appropriate setting. Hospitals and post-acute facilities would be selected for the pilot based on their quality records, experience in working together, clinical expertise, staffing plans, the proposed types of complex patients to be served, among other factors. The pilot offers the opportunity for collaborative efforts to identify real-world community-based options that could lead to permanent and positive systemic changes.

- **Help is Needed to Create Sustainable Solutions:** The Complex Patient Pilot Program would be able to draw from the experiences of hospitals and post-acute facilities that have initiated collaborative efforts designed to better serve hard-to-care-for patients. For example, Froedtert Hospital and Luther Manor in Southeastern Wisconsin have a collaborative history of working to address the needs of complex patients, and a hospital system and group of long-term care providers in the La Crosse area have more recently initiated similar efforts. In each case, the participants have expressed challenges related to the types of patients they are able to admit, regulatory hurdles, securing a sustainable funding source, and ensuring ongoing access to specialty care providers (e.g., physicians, behavioral health practitioners, and wound care certified staff). The Complex Patient Pilot Program would better identify these barriers and create solutions that could be replicated in other areas of the State.

Health care providers face many challenges, but our mutual goal is to help Wisconsinites receive the best care possible. **LeadingAge Wisconsin and WHCA/WiCAL urge Legislators to support the Complex Patient Pilot Program** so our State can be better positioned to meet the care and services needs of hard-to-care-for patients in the most appropriate setting.

For more information, please contact:

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