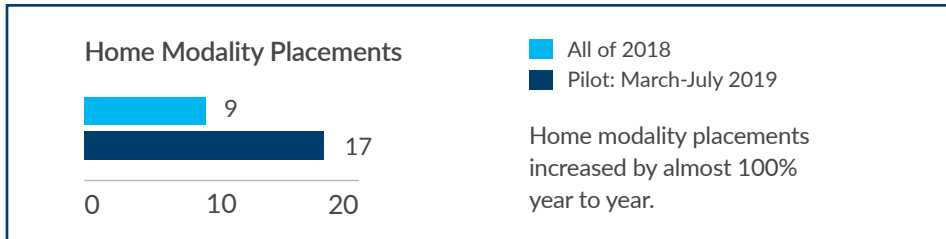


# Patient Pathways: Improving Patient Choice through Enhanced Modality Education



Of the 510,000 patients<sup>1</sup> on dialysis today, nearly 265,000 (or about 50%) started their treatment in the hospital<sup>2</sup>, resulting in an additional \$14 billion in higher costs attributable to unplanned dialysis starts.<sup>3</sup> Compared with in-center dialysis, the health and lifestyle benefits are greater for patients who dialyze at home post discharge and the total costs of home dialysis may be lower for the health care system, as well. Considering this, Patient Pathways, DaVita's provider-neutral renal discharge planning and placement service, started a pilot program in early 2019 that in four months nearly doubled the number of patients choosing to start on home dialysis than in all of 2018.



## Home Modality Education Pilot

The pilot program executed by Patient Pathways was designed to deliver enhanced modality education to patients new to dialysis. The goal was to provide more individualized, targeted, modality-neutral education, which in turn could increase the number of patients choosing to receive home dialysis, such as peritoneal dialysis (PD) or home hemodialysis (HHD), at discharge rather than in-center hemodialysis (ICHD). Home dialysis patients experience improved clinical outcomes and lifestyle benefits compared with ICHD.

## Choosing the Participants

Recognizing the success of the enhanced modality education would require a collaborative effort between hospital systems, nephrologists, surgeons, home dialysis providers, and discharge planner/educators, Patient Pathways carefully selected hospitals to pilot the program. They eventually identified five hospitals in Missouri, Kansas and Arkansas.

## About Patient Pathways

All of our customized programs include:

- Placement for dialysis patients
- Patient education
- Detailed analytics and reporting

## Why hospitals partner with Patient Pathways:

- Hospitals save an average of **6 hours** per discharge requiring a dialysis center placement<sup>4</sup>
- Any patient requiring a new dialysis placement in an outpatient setting is coordinated **2.5 days** prior to discharge<sup>5</sup>

4. DaVita Internal Data, 2017.

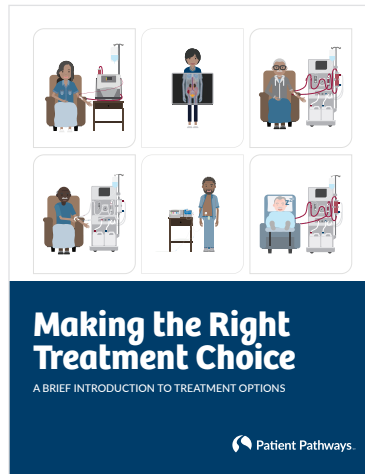
5. DaVita Internal Data, 2018.

1. Annual Data Report (2018), USRDS.

2, 3. 5% Claims Sample Data (2009-2012), CMS.

## Developing the Materials

With the pilot participants in place, the next step was to develop the enhanced educational materials themselves. We intentionally designed the materials to be easily understood by patients and caregivers and in a format suitable for hospital bedside education. This was important as the topic is complex and patients and families can feel overwhelmed with having to make treatment decisions in a hospital environment. The main piece, a handbook entitled **Making the Right Treatment Choice**, focused solely on modality choice to help patients make an informed decision. The piece briefly summarized treatment choices for end stage kidney disease (ESKD) patients: kidney transplant, peritoneal dialysis (PD, both continuous ambulatory PD and continuous cycling PD), ICHD, nocturnal ICHD, home hemodialysis, palliative and hospice care, and conservative therapy.



Patient Pathways dialysis coordinators were crucial to ensuring the new educational materials were successfully implemented. Realizing their 1:1 bedside interaction fostered an ideal environment to effectively use the materials, they were able to increase patient awareness of options for home treatment of ESKD, as well as patients' knowledge of considerations and benefits to each modality choice.

## Results

The data below shows the positive results demonstrated by the pilot in the four months since its inception in March 2019.

- Nine total home modality discharges occurred in all five pilot hospitals in all of 2018.
- Of the 162 patients who received the enhanced modality education from March 25, 2019 through July 31, 2019 (four months), 17 patients (10.49%) began dialysis at home on the modality of their choice.

## Next Steps

Given the effectiveness of the pilot, we rolled out the enhanced modality education program nationally to all 155+ Patient Pathways hospital partners, as part of our existing offerings. Our dialysis coordinators are already in a position where they easily provide patient education; now they have better tools to do so.

For more information regarding Patient Pathways, please email [inquiry@patientpathways.org](mailto:inquiry@patientpathways.org).

## Impact of the Pilot Program

1. Patients who are engaged in their modality choice are less likely to miss treatments, and less likely to have a hospital admission due to compliance.
2. When presented with enhanced modality education, patients can feel more empowered to discuss their modality of choice with their nephrologist.
3. Patients who are not able to start immediately on their home modality choice receive follow-up by the home departments post discharge for transitions of care.

