Emmi®

Case Study

University of Alabama Birmingham (UAB) Medicine
Scalability & Efficiency

Academic Medical Center
Located in a Top 50 U.S. MSA
1,157 beds
Staffing Challenges

Overview

Discharge from the hospital is a critical handoff in care

• Accountability for patient status continues far beyond acute stay
• Patient volume exceeds discharge planning and follow-up resources

1. LIMITED RESOURCES

2. TIME NEEDED TO CONNECT

UAB
Goals

1. Scalability
   Extend UAB’s ability to reach recently discharged patients

2. Efficiency
   Reduce staff time spent connecting with low risk patients

3. Patient empowerment
   Help discharged patients self-manage chronic conditions
EmmiTransition

IVR CALL SERIES | AUTOMATED AND BI-DIRECTIONAL

- Calls patients after discharge to track recovery and educate patients on self-managed care
- Interactive calls ask questions and log patient responses
- Identifies barriers to care and reports patient status back to care management team
- Flags higher risk patients that may require staff intervention

“Do you already have a follow-up appointment set up? Just say yes, no, or don’t need one.”

“No, I don’t.”
Emmi significantly scaled UAB’s patient outreach, resulting in 21% more engaged patients.

**Scalability**
Extend UAB’s ability to reach recently discharged patients.

**Efficiency**
Reduce staff time spent connecting with low risk patients.

**Patient empowerment**
Help discharged patients self-manage chronic conditions.

- **NURSES ALONE**
  - 66% engaged
  - 1.5 average calls per patient

- **NURSES WITH EMMI**
  - 80% engaged
  - 5.9 average calls per patient
UAB Medicine

The Results | Efficiency

**Scalability**
Extend UAB’s ability to reach recently discharged patients

**Efficiency**
Reduce staff time spent connecting with low risk patients

**Patient empowerment**
Help discharged patients self-manage chronic conditions

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Emmi eliminated staff time spent identifying patients with issues

**WITHOUT EMMI TRANSITION**

- 1,932 total calls
- 5.2% of all nurses’ calls were made to patients with issues

**WITH EMMI TRANSITION**

- 1,076 total calls
- 100% of all nurses’ calls were made to patients with issues

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By allowing staff to focus on follow-up calls only, Emmi saved the equivalent of 1.5 FTEs per year

- Emmi calls without flags: 407,675
- Emmi calls with flags: 48,076 calls (12%) triggered a red flag that may have required nurse follow-up
Patients who engaged with EmmiTransition were associated with lower readmission rates across different groups vs. those who did not engage.

- **Scalability**: Extend UAB’s ability to reach recently discharged patients.
- **Efficiency**: Reduce staff time spent connecting with low risk patients.
- **Patient empowerment**: Help discharged patients self-manage chronic conditions.

99% confidence level

- **ALL PATIENTS**
  - Did not engage: 13%
  - Engaged: 10.7%
- **MEDICARE PATIENTS**
  - Did not engage: 19.4%
  - Engaged: 15.1%
- **HEART FAILURE PATIENTS**
  - Did not engage: 24.8%
  - Engaged: 18.2%
Emmi significantly scaled UAB’s patient outreach, resulting in 21% more engaged patients.

**Scalability goal**
Extend UAB’s ability to reach recently discharged patients.

**Series highlights**
- Interactive calls ask questions and log patient responses
- Identifies barriers to self-managed care and flags high risk patients
- Reports status back to care team for follow up

**Comparison**
- **Nurses alone**
  - 66% engaged
  - 1.5 average calls per patient
- **Nurses with Emmi**
  - 80% engaged
  - 5.9 average calls per patient
Emmi eliminated staff time spent identifying patients with issues

**Efficiency goal**
Reduce staff time spent connecting with low risk patients

**Series highlights**
- Interactive calls ask questions and log patient responses
- Identifies barriers to self-managed care and flags high risk patients
- Reports status back to care team for follow up

**Without Emmi Transition**
- 1,932 total calls
- 5.2% of all nurses’ calls were made to patients with issues

**With Emmi Transition**
- 1,076 total calls
- 100% of all nurses’ calls were made to patients with issues

By allowing staff to focus on follow-up calls only, Emmi saved the equivalent of 1.5 FTEs per year

Emmi calls without flags

Emmi calls with flags

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