



CONCIERGE CARE FOR LOW-INCOME SENIORS:

# How High-Touch Care Improves Outcomes and Reduces Costs

SEPTEMBER 2017



# Introduction

No matter how the debate over health reform in Washington ends up, the transition to value-based care is well underway. Since the turn of this century, there has been a bipartisan consensus that it makes little fiscal or health sense to pay physicians and other providers just for doing more tests, more procedures, and more services. Rather, Americans should pay for value, and pay health care providers for delivering better health outcomes at a better cost. As seen in the overwhelming bipartisan support for the Medicare Access and CHIP Reauthorization Act (MACRA) — passing the U.S. Senate 92 to 8 and the U.S. House 392 to 37 — which took significant steps to move more physicians to value-based payment arrangements, there is overwhelming bipartisan support for this change in health care.

Two questions remain: what is the best way to deliver value-based care? And can we deliver this type of care to the patients who drive the most costs, particularly, low-income seniors with multiple chronic conditions?

Since 2010, ChenMed has provided this care – first with low-income seniors in Miami and now in practices across six states – by operating as a full-risk Medicare Advantage (MA) provider. In this arrangement, MA plans provide a set amount per patient for overall health care costs.

Thus, ChenMed is rewarded for keeping patients as healthy as possible to avoid costly emergency room (ER) visits, hospital admissions, and complications in their chronic conditions. ChenMed does this by providing its patients with more face time with a physician, more access to care, more convenience in accessing it, and more preventive services. For example, the patient panel size of ChenMed doctors is less than one-fifth the size of the national average (450 patients vs. 2,300). And, ChenMed centers offer additional services, including free exercise classes, on-site specialists, and courtesy transportation, which help them deliver better care and better outcomes.

In this paper, we draw on claims data, and the vast amount of data collected by the ChenMed electronic health record (EHR). We quantify how ChenMed's level of care differs from the average national primary care experience and what the effect of such care is on health outcomes. We explore this across 37 ChenMed centers in six states and compare the data with 2015 CMS data on Medicare beneficiaries in corresponding counties. The ChenMed family of companies includes 25 JenCare Senior Medical Centers in five states and 12 Chen Senior Medical Centers in Florida. (Note that CMS averages are not risk adjusted by disease burden, socioeconomic status, ethnicity, or age, and ChenMed's patient population overwhelmingly draws from people who are older, with more chronic conditions, of lower socioeconomic status, and diverse minority groups.)

## SOME OF THIS REPORT'S HIGHLIGHTS INCLUDE:

- ChenMed rates of ER visits were **33.6 percent lower** than the average among Medicare beneficiaries in the counties where it serves seniors.
- ChenMed patients averaged **28 percent fewer hospital admissions** than the average for county-relevant Medicare beneficiaries.
- ChenMed patients averaged 431 fewer in-patient days per thousand patients in 2015 than other Medicare beneficiaries – a **reduction of 25.7 percent** (1,246 as compared to 1,677).
- One primary reason for lower ER visits and hospital admissions: ChenMed doctors averaged 189 minutes of face time with each patient each year – that's nine times the national average. In contrast, U.S. patients averaged just 20.9 minutes each year with a family practice physician.<sup>1</sup>

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In this paper, we draw on claims data, and the vast amount of data collected by the ChenMed electronic health record (EHR).

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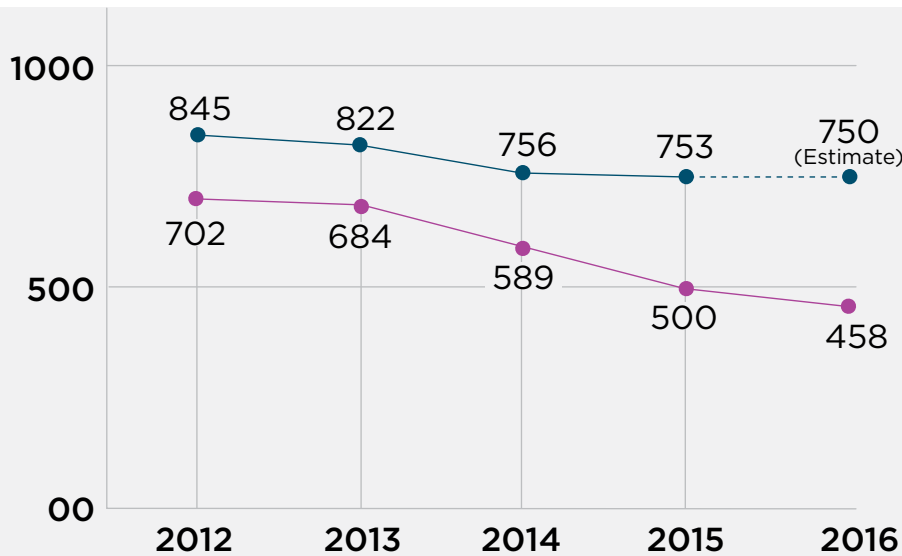
- In a hypothetical ChenMed practice of five doctors, each with 450 patients per panel, the annual savings just from reduced ER visits and fewer hospital days would be \$2.8 million.
- This report also notes the regional success of ChenMed practices operating in six states. For example:
  - ChenMed's 12 Miami centers averaged **59.4 percent fewer ER visits** than the Miami-Dade and Broward County average.
  - The company's five Chicago centers had **42.8 percent fewer hospital in-patient admissions** than the Cook County average. Five JenCare centers in Atlanta averaged **51.5 percent fewer ER visits** than the average for Clayton, Decatur, and Fulton Counties.
  - JenCare seniors in Louisville had **36.6 percent fewer ER visits** than the Jefferson County average.
  - In New Orleans, JenCare patients had **44.9 percent fewer in-patient hospital days** than the average for greater New Orleans.
  - Four JenCare centers in the Tidewater region of Virginia had **14.1 percent fewer ER visits** than the average among other Tidewater patients, and four centers in Richmond had **30.8 percent fewer in-patient hospital admissions** than the Richmond average.

<sup>1</sup> [2014 National Ambulatory Medical Care Survey](#); 2014 State and National Summary Tables; Table 30

# Emergency Room Visits

Emergency room (ER) visits are a significant expense for patients and the entire health care system. Patients who feel there is no other choice often resort to the ER, even when other health care options may be more appropriate. In 1995, there were 97 million visits to the ER, but by 2010, there were 130 million visits to the ER, even as the number of ERs available declined by 11 percent.<sup>2</sup> The emergency care system is overburdened, and high-quality primary care is one way to reduce the overutilization of ER services. In this section, the ChenMed rate of ER utilization is compared with data from the 2015 CMS national averages and relevant county data.

The annual report on the health of the nation delivered by the National Center for Health Statistics (NCHS), part of the Centers for Disease Control, in 2012 included a special section on emergency care. The report found that an ER visit for people 65 and older that did not ultimately lead to a hospital admission resulted in an average expenditure, including facility and physician charges, of \$1,062 per visit in 2010 – nearly a 50 percent increase from the average ER expense for seniors in 2000.<sup>3</sup>



In 2016, the ChenMed average decreased even further, with **just 458 ER visits per thousand patients.**

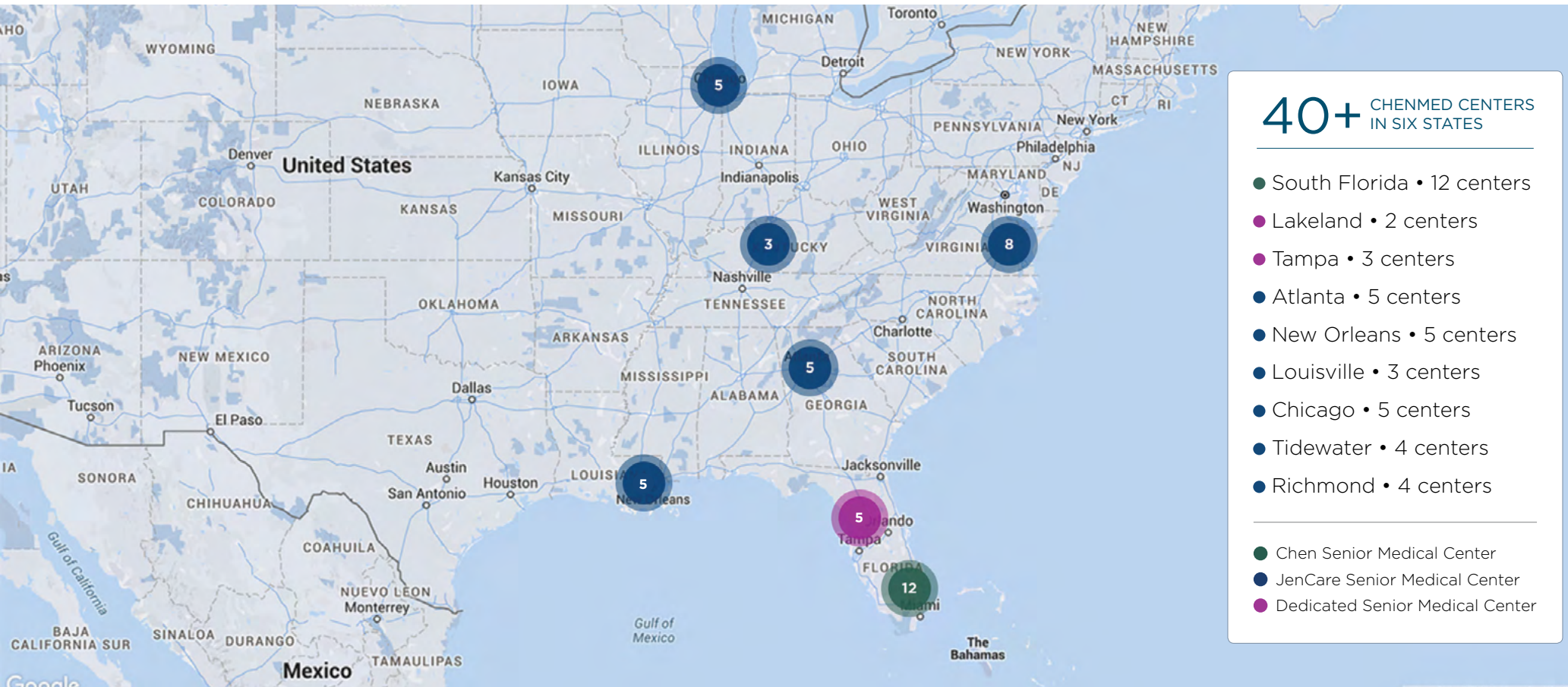
● 14-County Average  
● ChenMed Average

<sup>2</sup> [Health, United States, 2012](#), page 20

<sup>3</sup> [Health, United States, 2012](#), page 31

For the 14 U.S. counties where ChenMed serves its patients, CMS data from 2015 indicate an average of 753 ER visits per thousand Medicare beneficiaries.<sup>4</sup> The ChenMed average was significantly lower – one-third lower than the CMS rate – with just 500 ER visits per thousand patients. In 2016, the ChenMed average decreased even further, with just 458 ER visits per thousand patients.

The latest data we have on the average cost of an ER visit is from 2012 (\$1,062).<sup>5</sup> If we assume that this amount did not decrease at all and multiply these average savings across 1,000 patients, then this reduction in ER visits saved \$268,686. When extrapolating this across a larger patient population, one can see how the savings accrue. In a hypothetical ChenMed practice of five doctors, each with 450 patients per panel, the savings from reduced ER visits alone would be more than \$600,000.



4 [Centers for Medicare and Medicaid Services: Public Use File](#); State Table – Beneficiaries 65 and older. (Using data from relevant 14-county area where ChenMed has centers)

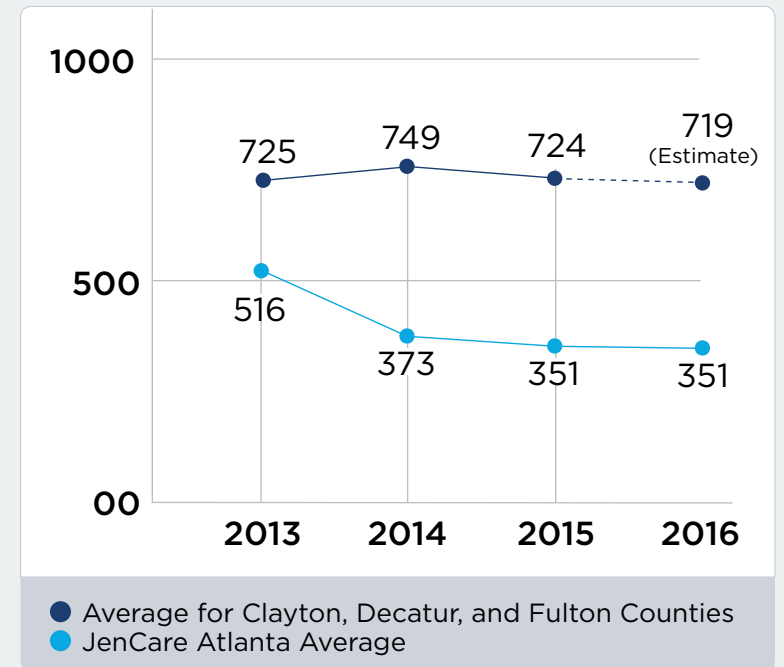
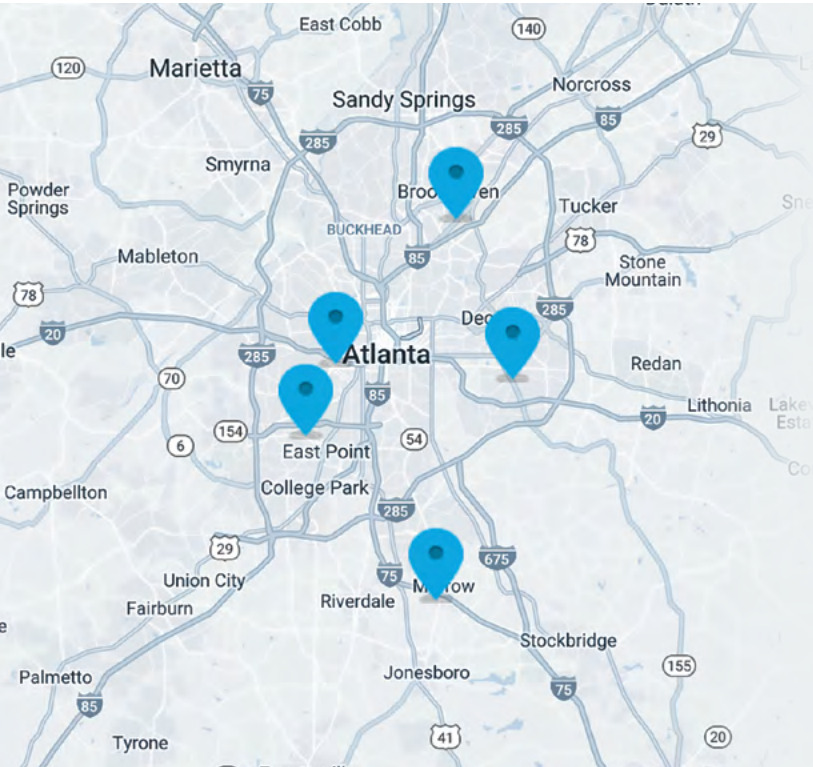
5 [Health, United States, 2012](#), page 31

# Atlanta- Emergency Room Visits

Five JenCare Senior Medical Centers in greater Atlanta, averaged 351 ER visits per thousand patients in 2015.

The average for Clayton, Decatur, and Fulton Counties<sup>6</sup> in 2015 was 724 ER visits per thousand patients.

JenCare rates of **ER visits** were **52% lower** than the regional average.



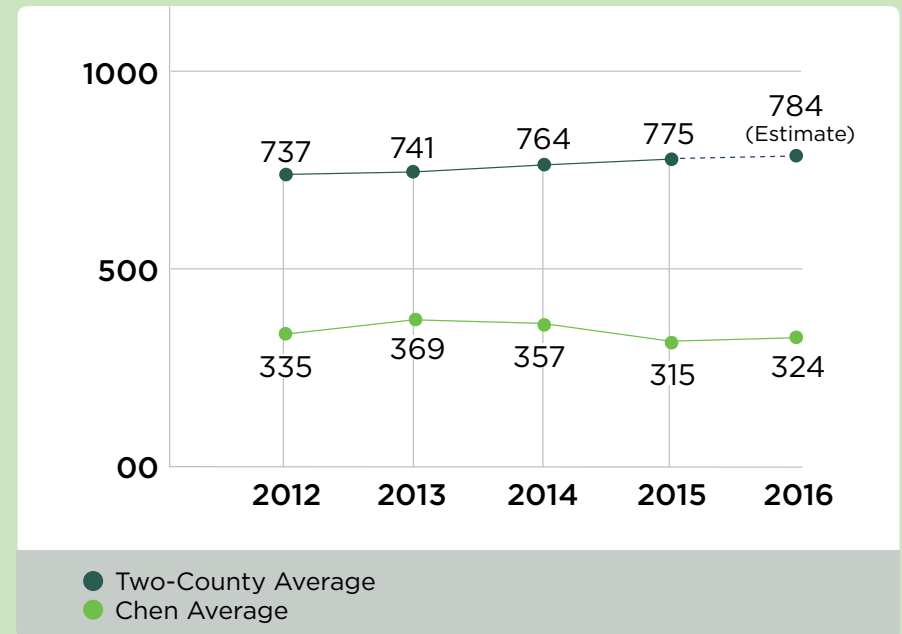
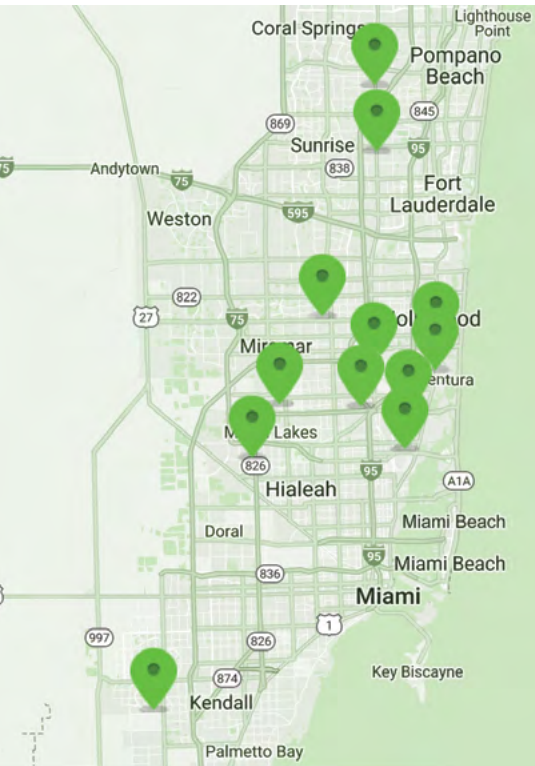
<sup>6</sup> [Centers for Medicare and Medicaid Services: Public Use File](#); State Table - Beneficiaries 65 and older (Using data from Clayton, Decatur, and Fulton Counties)

# Miami – Emergency Room Visits

Twelve Chen Senior Medical Centers in the Miami region averaged 315 ER visits per thousand patients in 2015.

The average for Miami-Dade and Broward Counties<sup>7</sup> in 2015 was 775 ER visits per thousand patients.

Chen rates of **ER visits** were **59% lower** than the regional average.



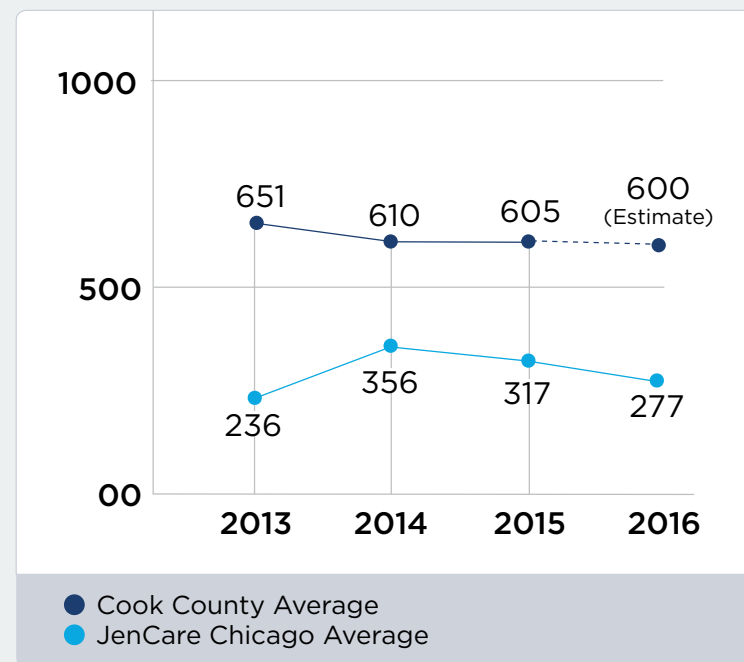
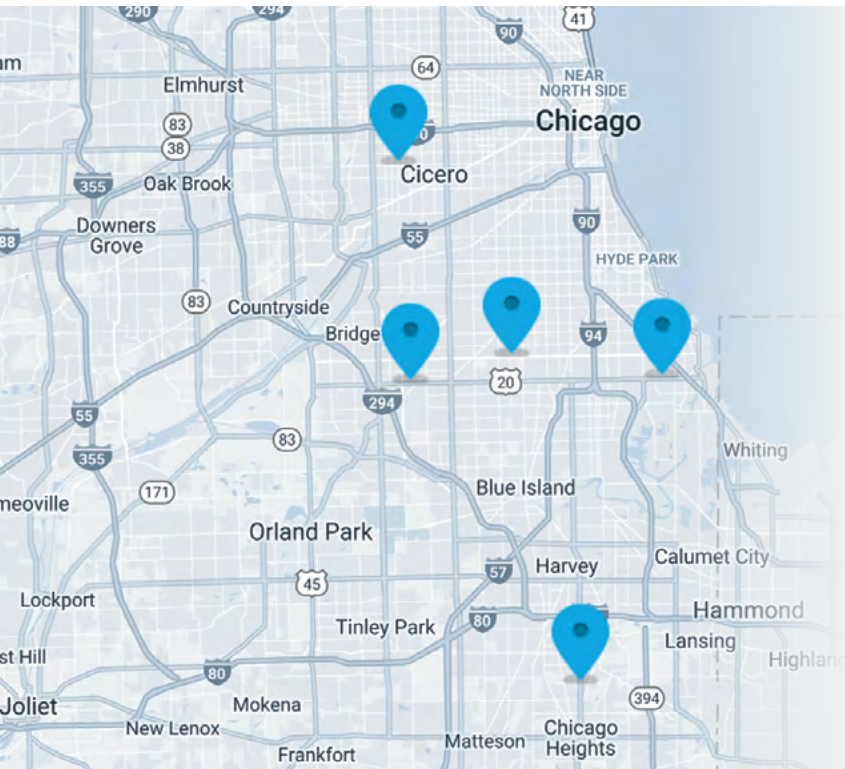
<sup>7</sup> [Centers for Medicare and Medicaid Services: Public Use File](#); State Table – Beneficiaries 65 and older (Using data from Miami-Dade and Broward Counties)

# Chicago – Emergency Room Visits

Five JenCare Senior Medical Centers in the Chicago region averaged 317 ER visits per thousand patients in 2015.

The Cook County average<sup>8</sup> in 2015 was 605 ER visits per thousand patients.

JenCare rates of **ER visits** were **48% lower** than the Cook County average.



<sup>8</sup> [Centers for Medicare and Medicaid Services: Public Use File](#); State Table - Beneficiaries 65 and older (Using data from Cook County)

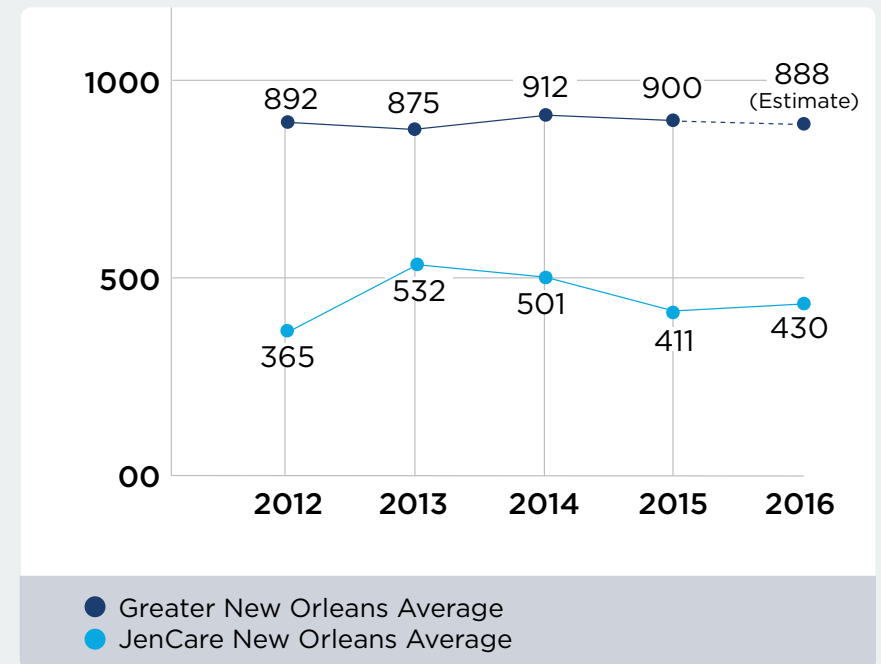
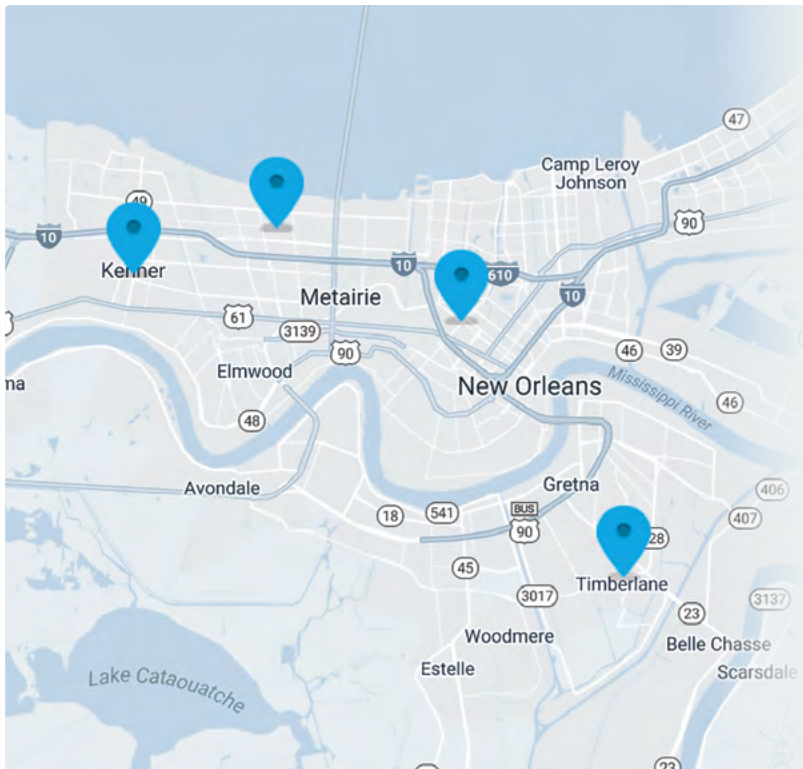


# New Orleans – Emergency Room Visits

Four JenCare Senior Medical Centers in the New Orleans region averaged 411 ER visits per thousand patients in 2015.

The New Orleans average<sup>9</sup> in 2015 was 900 ER visits per thousand patients.

JenCare rates of **ER visits** were **54% lower** than the New Orleans average.



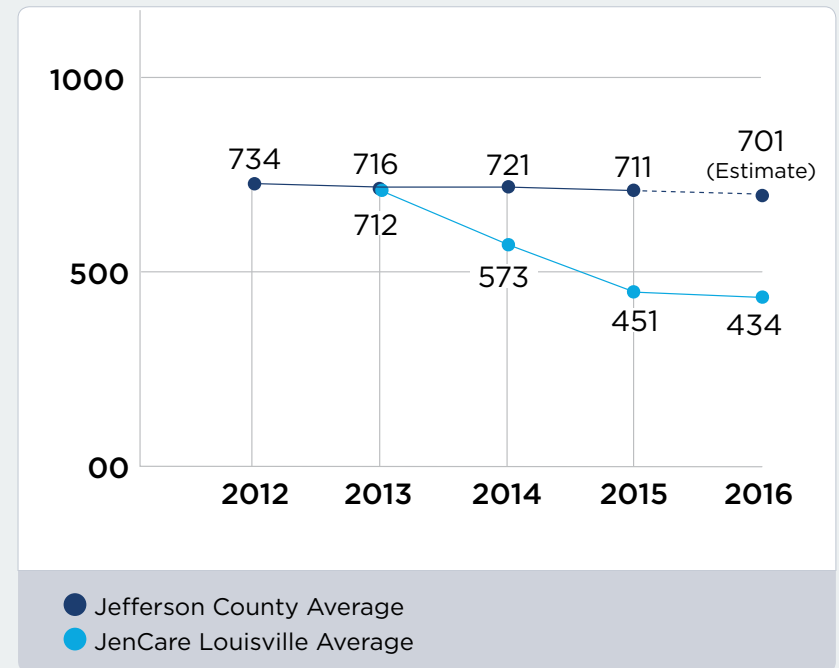
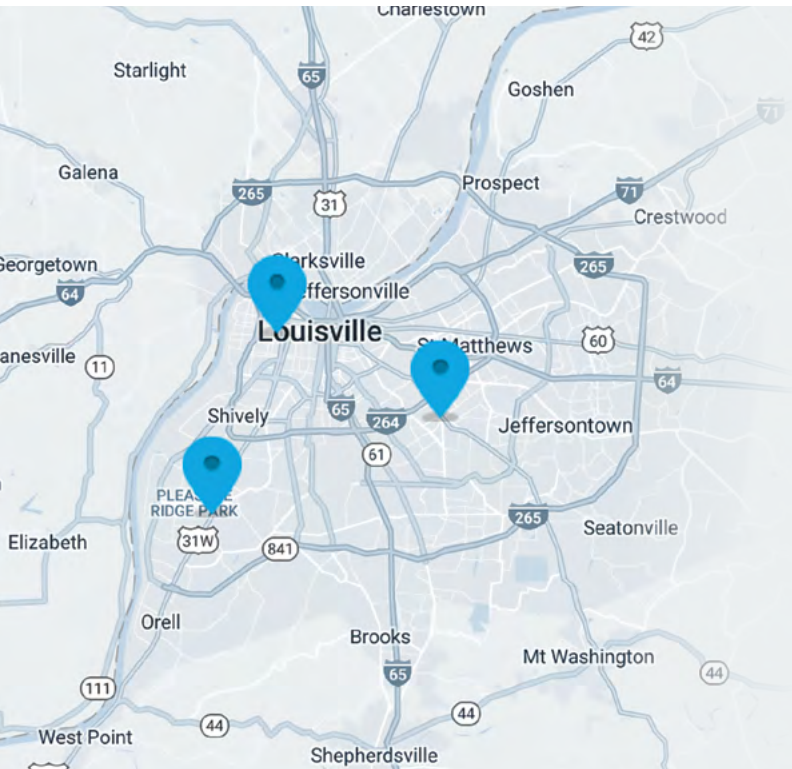
<sup>9</sup> [Centers for Medicare and Medicaid Services: Public Use File](#); State Table - Beneficiaries 65 and older (Using data from the greater New Orleans area)

# Louisville – Emergency Room Visits

Three JenCare Senior Medical Centers in the Louisville region averaged 451 ER visits per thousand patients in 2015.

The Jefferson County average<sup>10</sup> in 2015 was 711 ER visits per thousand patients.

JenCare rates of **ER visits** were **37% lower** than the Jefferson County average.



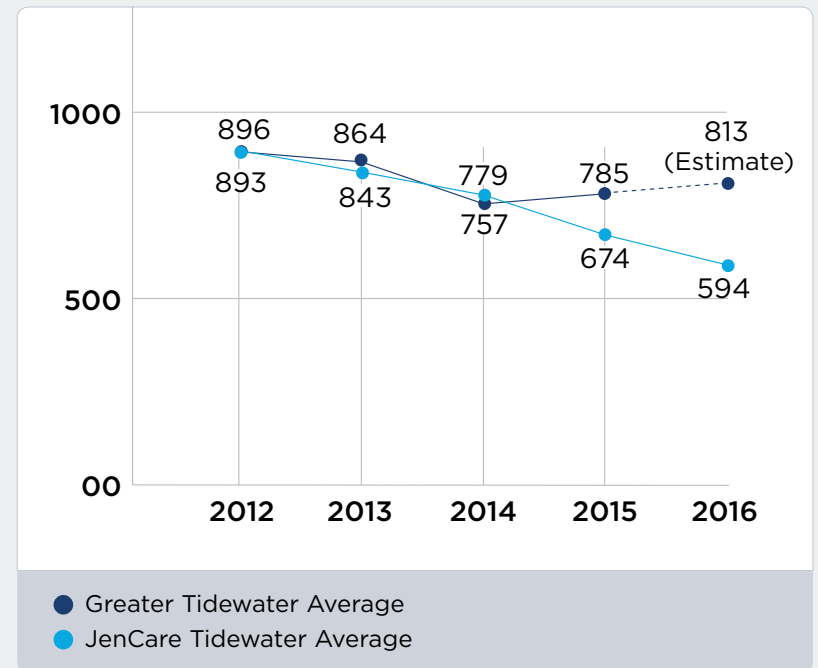
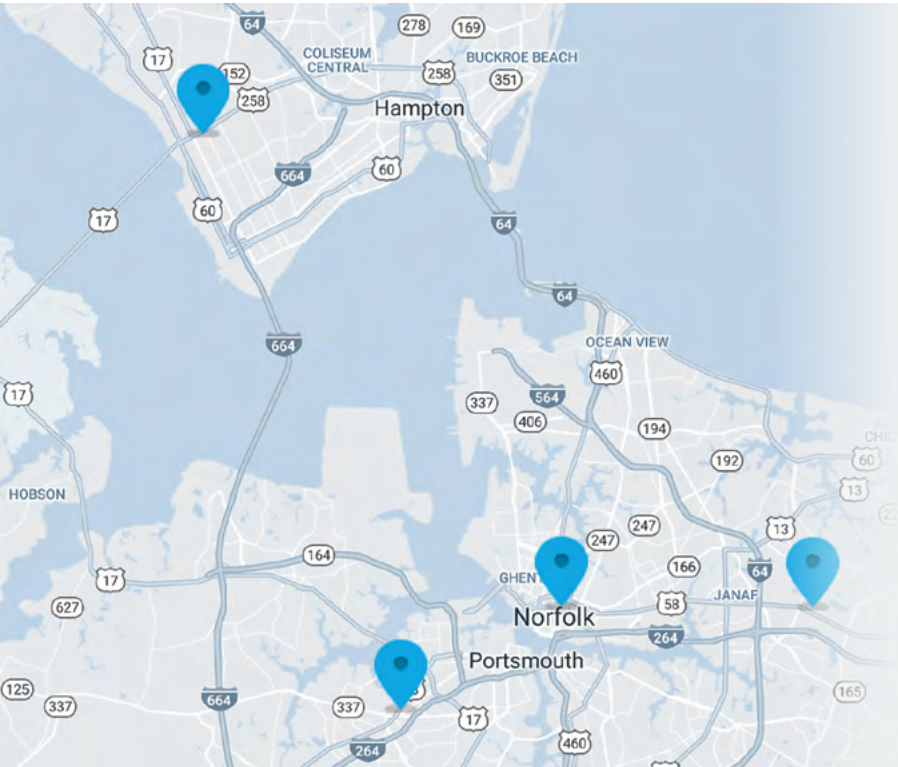
<sup>10</sup> [Centers for Medicare and Medicaid Services: Public Use File](#); State Table – Beneficiaries 65 and older (Using data from Jefferson County)

# Tidewater – Emergency Room Visits

Four JenCare Senior Medical Centers in the Tidewater region of Virginia averaged 674 ER visits per thousand patients in 2015.

The Tidewater region average<sup>11</sup> in 2015 was 785 ER visits per thousand patients.

JenCare rates of **ER visits** were **14% lower** than the regional average.



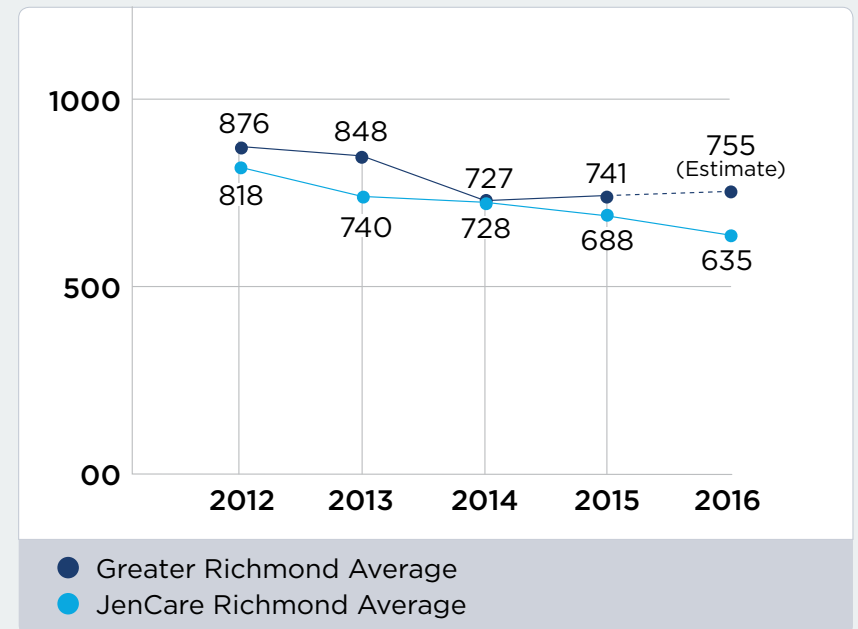
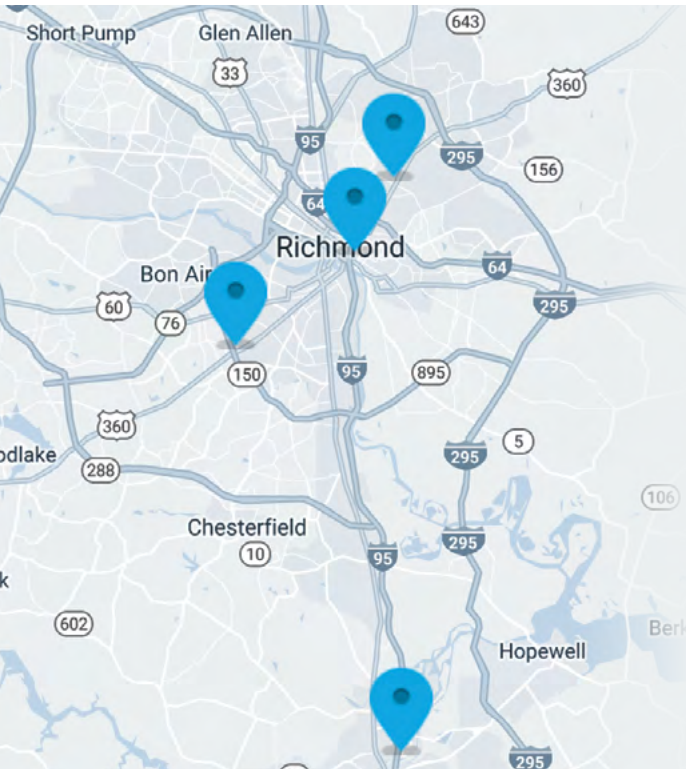
<sup>11</sup> [Centers for Medicare and Medicaid Services: Public Use File](#); State Table – Beneficiaries 65 and older (Using data from the greater Tidewater region)

# Richmond – Emergency Room Visits

Four JenCare Senior Medical Centers in the Richmond region averaged 688 ER visits per thousand patients in 2015.

The Richmond average<sup>12</sup> in 2015 was 741 ER visits per thousand patients.

JenCare rates of **ER visits** were **7% lower** than the Richmond average.

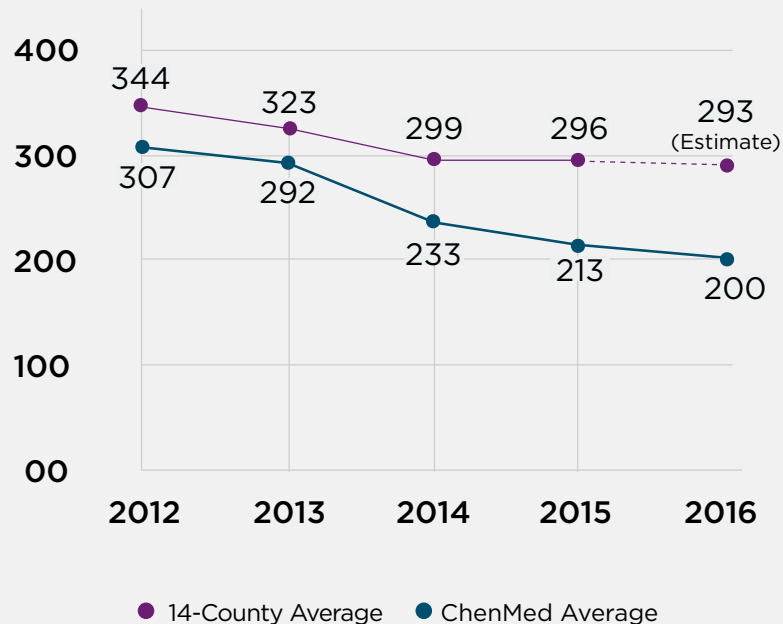


<sup>12</sup> [Centers for Medicare and Medicaid Services: Public Use File](#); State Table – Beneficiaries 65 and older (Using data from the greater Richmond area)

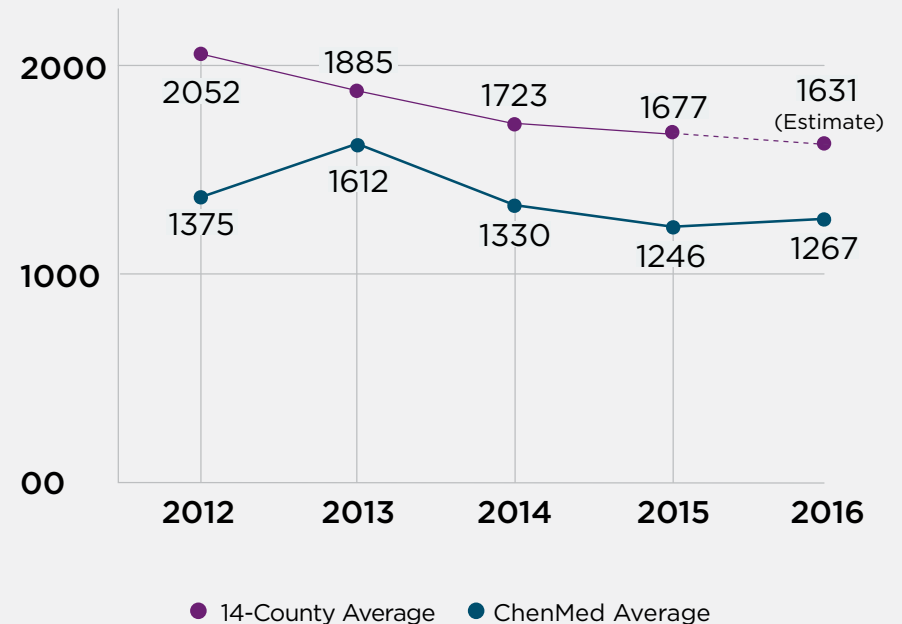
# Hospitalizations

Along with emergency room (ER) visits, hospitalizations also put significant strain on the U.S. health care system and on individuals. Fewer hospitalizations lead to lower costs for patients and their providers. Keeping patients healthier and out of the hospital – and reducing readmissions through coordinated care when patients do visit the hospital – is one way effective primary care lowers cost. This section explores ChenMed’s successful reduction in hospitalizations across 37 centers.

### IN-PATIENT HOSPITAL ADMISSIONS



### IN-PATIENT HOSPITAL DAYS



28% fewer in-patient hospital admissions than the average among Medicare beneficiaries in the relevant 14 counties.

431 fewer hospital in-patient days per thousand patients and an overall reduction of 25.7%.

A reduction of 431 in-patient days saved \$978,801 per thousand patients.

ChenMed averaged 213 in-patient hospital admissions per thousand patients in 2015, while the average among Medicare beneficiaries in the 14 counties where ChenMed has centers was 296 in-patient admissions per thousand patients.<sup>13</sup> ChenMed had 28 percent fewer in-patient hospital admissions than the average among Medicare beneficiaries in the relevant 14 counties.

For in-patient bed days, the average among Medicare beneficiaries was 1,677 days per thousand, according to 2015 CMS data,<sup>14</sup> while ChenMed patients averaged 1,246 in-patient days per thousand patients in 2015 – 431 fewer hospital in-patient days per thousand patients and an overall reduction of 25.7 percent.

The American Hospital Association Annual Survey<sup>15</sup> states that the average in-patient hospital day cost \$2,271 in 2015. Multiplying these average savings across a larger population, a reduction of 431 in-patient days saved \$978,801 per thousand patients.

Similar to the savings yielded from fewer ER visits, if a hypothetical ChenMed practice has five doctors, each with 450 patients per panel, the savings from reduced hospital in-patient days alone would be \$2.2 million.

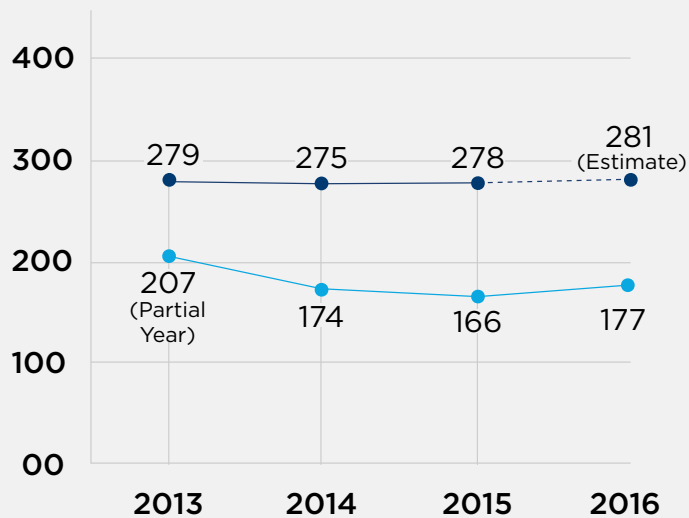
<sup>13</sup> [Centers for Medicare and Medicaid Services: Public Use File](#); State Table – Beneficiaries 65 and older (Using data from relevant 14-county area where ChenMed has centers)

<sup>14</sup> [Centers for Medicare and Medicaid Services: Public Use File](#); State Table – Beneficiaries 65 and older (Using data from relevant 14-county area where ChenMed has centers)

<sup>15</sup> [Hospital Adjusted Expenses per Inpatient Day](#). American Hospital Association Annual Survey data published by the Kaiser Family Foundation

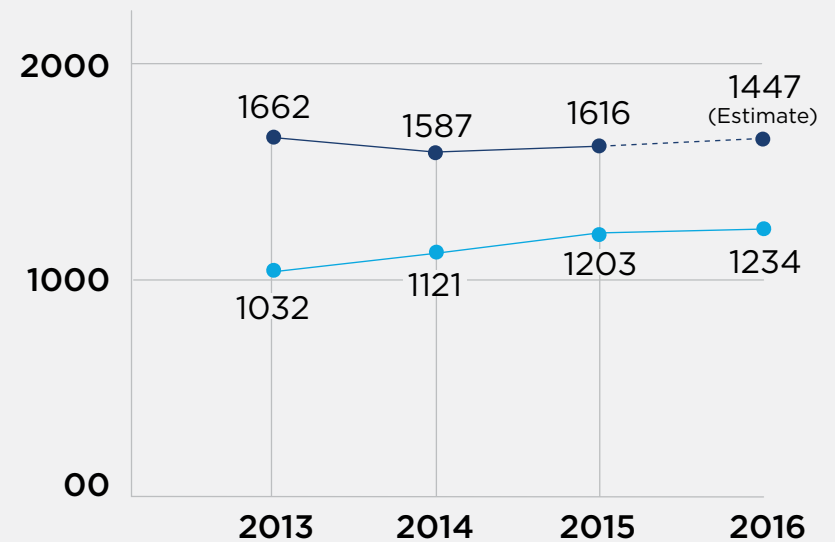
# Atlanta – Hospitalizations

## IN-PATIENT HOSPITAL ADMISSIONS



● Tri-County Average ● JenCare Atlanta Average

## IN-PATIENT HOSPITAL DAYS



● Tri-County Average ● JenCare Atlanta Average

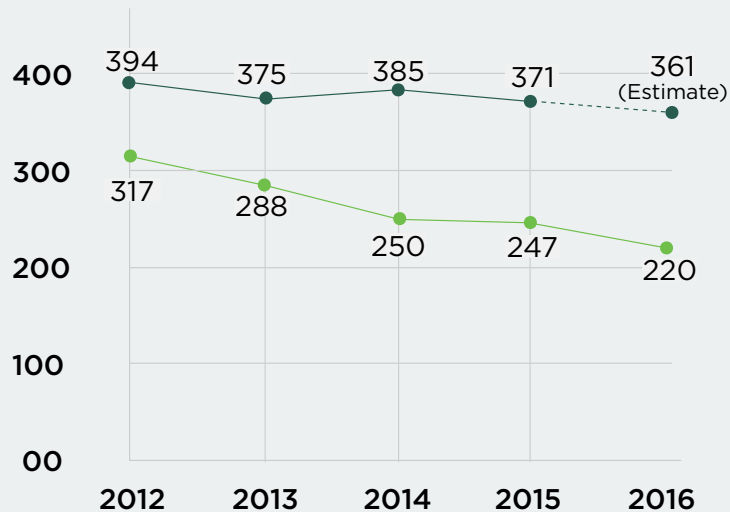
Five JenCare Senior Medical Centers in the Atlanta region averaged 166 in-patient hospital admissions per thousand patients in 2015. The average for Clayton, Decatur, and Fulton Counties<sup>16</sup> in 2015 was 278 in-patient hospital admissions per thousand patients. JenCare rates of in-patient hospital admissions were **40.1 percent lower** than the regional average.

The average for Clayton, Decatur, and Fulton Counties in 2015 was 1,616 hospital days per thousand patients. The JenCare average was 1,203 days per thousand patients. JenCare rates of in-patient hospital days were **25.6 percent lower** than the region average.

<sup>16</sup> [Centers for Medicare and Medicaid Services: Public Use File](#); State Table – Beneficiaries 65 and older (Using data from Clayton, Decatur, and Fulton Counties)

# Miami – Hospitalizations

## IN-PATIENT HOSPITAL ADMISSIONS



● Average for Miami-Dade and Broward Counties ● Chen Florida Average

## IN-PATIENT HOSPITAL DAYS



● Two-County Average ● Chen Average

Twelve Chen Senior Medical Centers in the Miami region averaged 247 in-patient hospital admissions per thousand patients in 2015. The average for Miami-Dade and Broward Counties<sup>17</sup> in 2015 was 371 in-patient hospital admissions per thousand patients. ChenMed rates of in-patient hospital admissions were **33.4 percent lower** than the regional average.

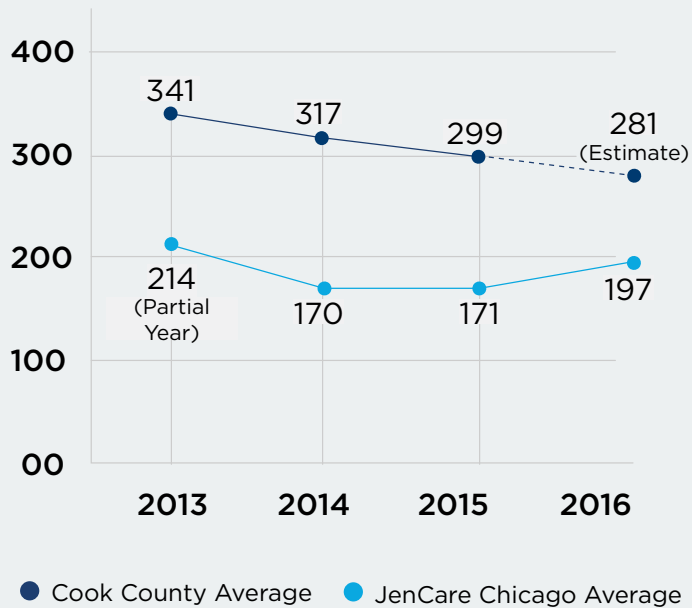
The average for Miami-Dade and Broward Counties in 2015 was 2,220 hospital days per thousand patients. The ChenMed average was 1,324 days per thousand patients. ChenMed rates of in-patient hospital days were **40.4 percent lower** than the region average.

<sup>17</sup> [Centers for Medicare and Medicaid Services: Public Use File](#); State Table – Beneficiaries 65 and older (Using data from Miami-Dade and Broward Counties)

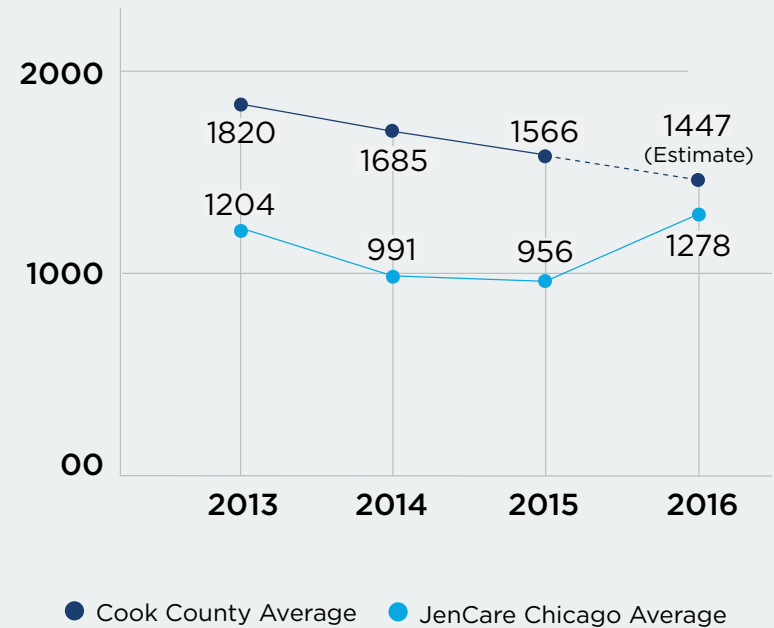


# Chicago – Hospitalizations

## IN-PATIENT HOSPITAL ADMISSIONS



## IN-PATIENT HOSPITAL DAYS



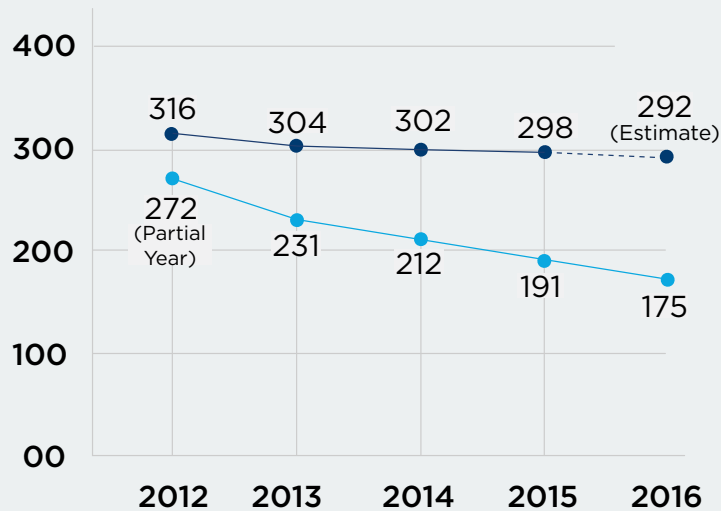
Five JenCare Senior Medical Centers in the Chicago region averaged 171 in-patient hospital admissions per thousand patients in 2015. The Cook County average<sup>18</sup> in 2015 was 299 in-patient hospital admissions per thousand patients. JenCare rates of in-patient hospital admissions were **42.8 percent lower** than the Cook County average.

The average for Cook County in 2015 was 1,566 hospital days per thousand patients. The JenCare average was 956 days per thousand patients. JenCare rates of in-patient hospital days were **39 percent lower** than the Cook County average.

<sup>18</sup> [Centers for Medicare and Medicaid Services: Public Use File](#); State Table – Beneficiaries 65 and older (Using data from Cook County)

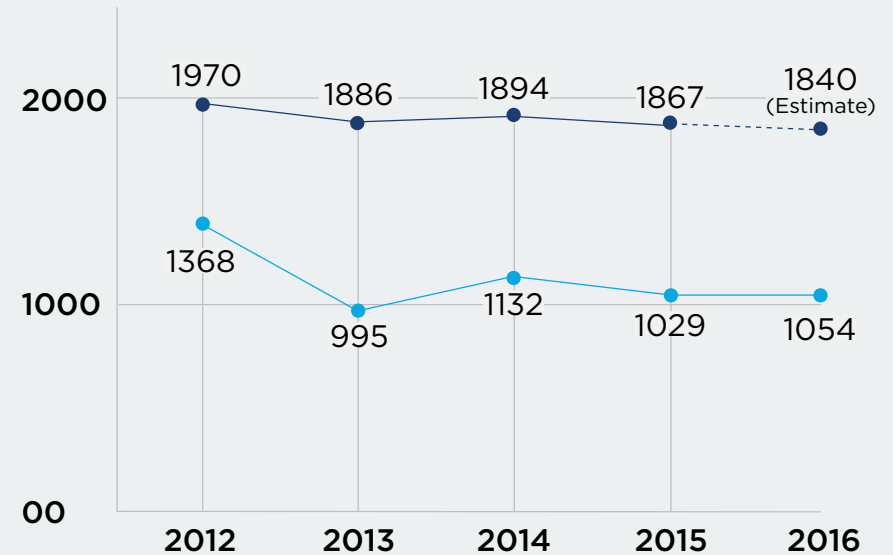
# New Orleans – Hospitalizations

## IN-PATIENT HOSPITAL ADMISSIONS



● Greater New Orleans Average ● JenCare New Orleans Average

## IN-PATIENT HOSPITAL DAYS



● Greater New Orleans Average ● JenCare New Orleans Average

Four JenCare Senior Medical Centers in the New Orleans region averaged 191 in-patient hospital admissions per thousand patients in 2015. The New Orleans average<sup>19</sup> in 2015 was 298 in-patient hospital admissions per thousand patients. JenCare rates of in-patient hospital admissions in its New Orleans-area centers were **35.9 percent lower** than the statewide average.

The average for New Orleans in 2015 was 1,867 hospital days per thousand patients. The JenCare average was 1,029 days per thousand patients. JenCare rates of in-patient hospital days were **44.9 percent lower** than the New Orleans average.

<sup>19</sup> [Centers for Medicare and Medicaid Services: Public Use File](#); State Table – Beneficiaries 65 and older (Using data from the greater New Orleans area)

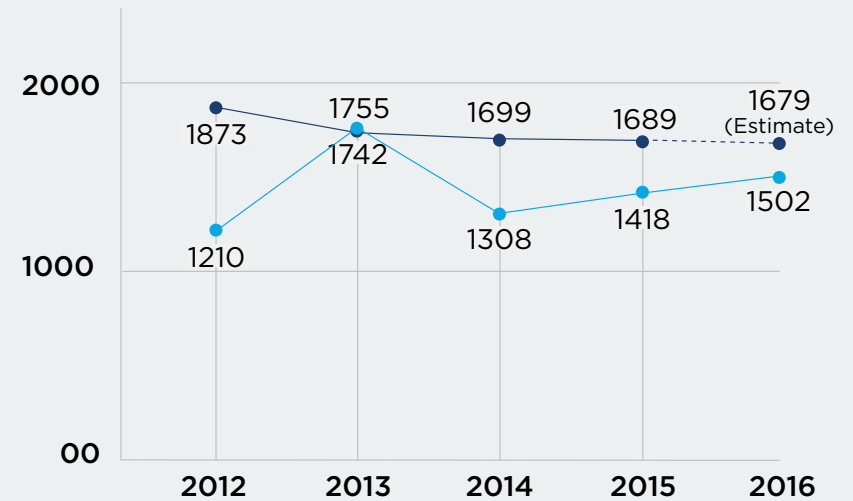
# Louisville – Hospitalizations

## IN-PATIENT HOSPITAL ADMISSIONS



● Jefferson County Average ● JenCare Louisville Average

## IN-PATIENT HOSPITAL DAYS



● Jefferson County Average ● JenCare Louisville Average

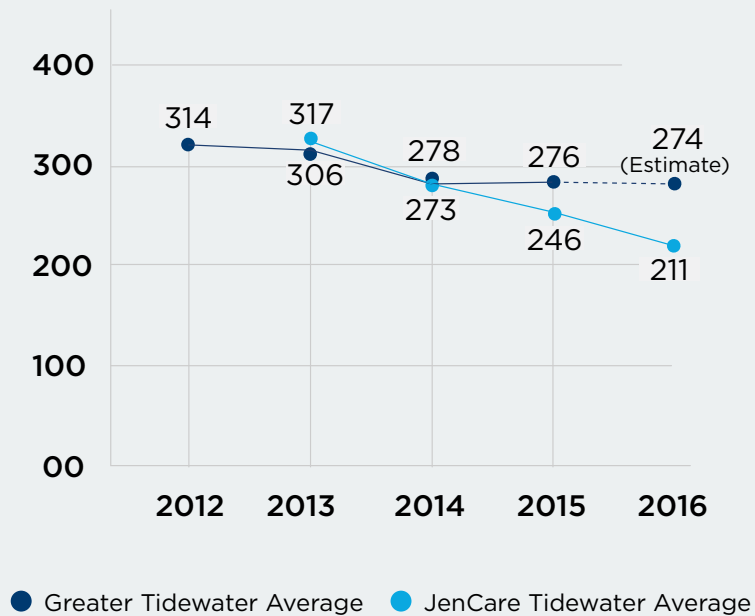
Three JenCare Senior Medical Centers in the Louisville region averaged 245 in-patient hospital admissions per thousand patients in 2015. The Jefferson County average<sup>20</sup> in 2015 was 305 in-patient hospital admissions per thousand patients. JenCare rates of in-patient hospital admissions were **19.7 percent lower** than the Jefferson County average.

The average for Jefferson County in 2015 was 1,689 hospital days per thousand patients. The JenCare average was 1,418 days per thousand patients. JenCare rates of in-patient hospital days were **16 percent lower** than the New Orleans average.

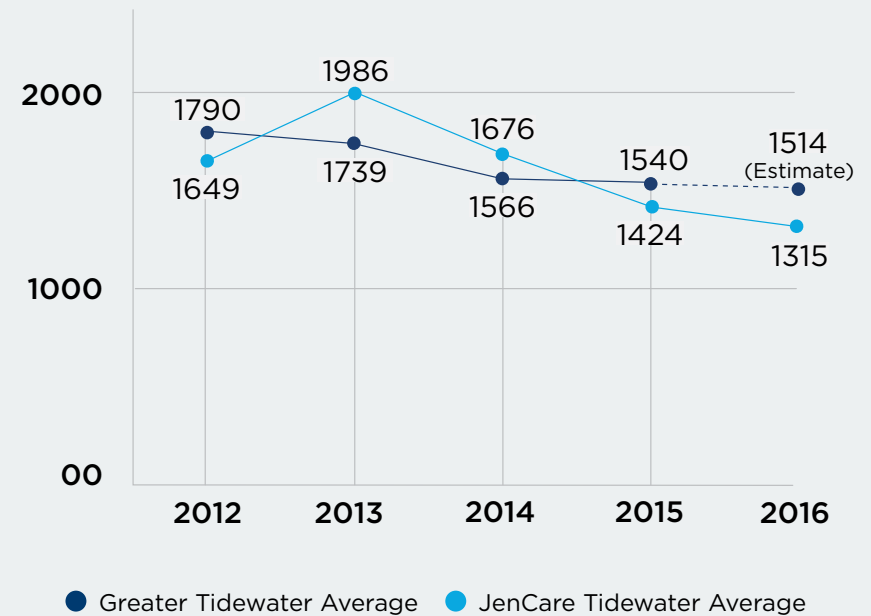
<sup>20</sup> [Centers for Medicare and Medicaid Services: Public Use File](#); State Table – Beneficiaries 65 and older (Using data from Jefferson County)

# Tidewater – Hospitalizations

## IN-PATIENT HOSPITAL ADMISSIONS



## IN-PATIENT HOSPITAL DAYS



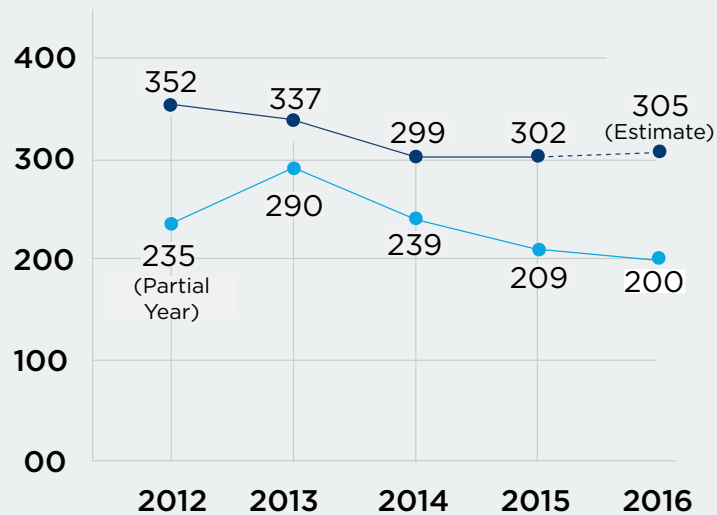
Four JenCare Senior Medical Centers in the Tidewater region of Virginia averaged 246 in-patient hospital admissions per thousand patients in 2015. The Tidewater average<sup>21</sup> in 2015 was 276 in-patient hospital admissions per thousand patients. JenCare rates of in-patient hospital admissions were **10.9 percent lower** than the Tidewater average.

The Tidewater average in 2015 was 1,540 hospital days per thousand patients. The JenCare average was 1,424 days per thousand patients. JenCare rates of in-patient hospital days were **7.5 percent lower** than the Tidewater average.

<sup>21</sup> [Centers for Medicare and Medicaid Services: Public Use File](#); State Table - Beneficiaries 65 and older (Using data from the greater Tidewater region)

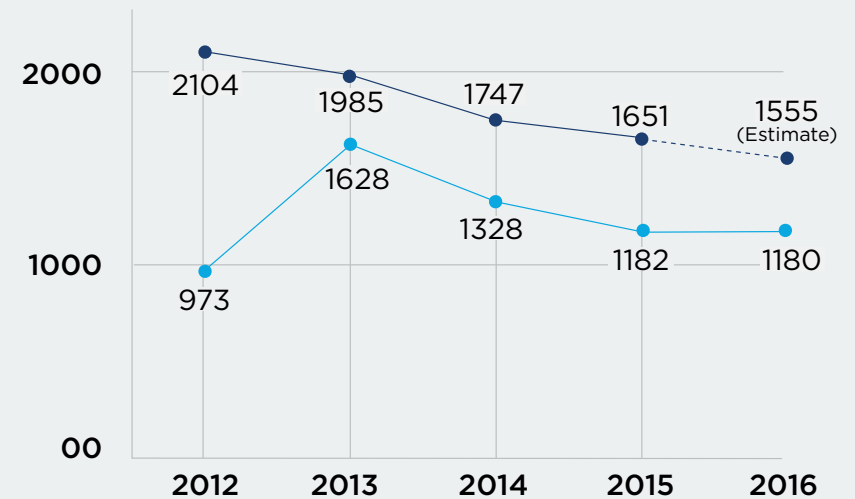
# Richmond – Hospitalizations

## IN-PATIENT HOSPITAL ADMISSIONS



● Greater Richmond Average ● JenCare Richmond Average

## IN-PATIENT HOSPITAL DAYS



● Greater Richmond Average ● JenCare Richmond Average

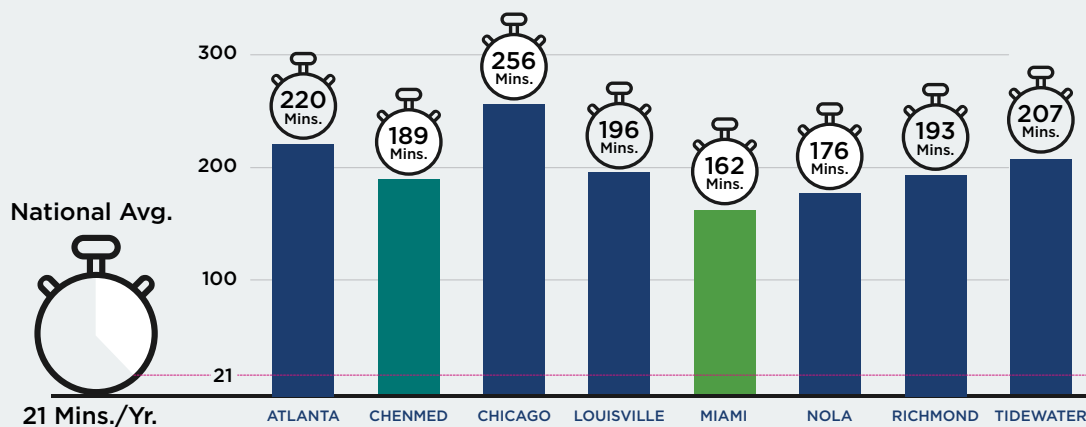
Four JenCare Senior Medical Centers in the Richmond region averaged 209 in-patient hospital admissions per thousand patients in 2015. The Richmond average<sup>22</sup> in 2015 was 302 in-patient hospital admissions per thousand patients. JenCare rates of in-patient hospital admissions were **30.8 percent lower** than the Richmond average.

The Richmond average in 2015 was 1,651 hospital days per thousand patients. The JenCare average was 1,182 days per thousand patients. JenCare rates of in-patient hospital days were **28.4 percent lower** than the Richmond average.

<sup>22</sup> [Centers for Medicare and Medicaid Services: Public Use File](#); State Table – Beneficiaries 65 and older (Using data from the greater Richmond area)

# Physician Face-to-Face Time

By spending more face-to-face time with patients, ChenMed physicians are able to provide the kind of attention that leads to better health care outcomes, including reduced visits to the emergency room (ER) and fewer days in the hospital. Instead of viewing the ER as their go-to option, ChenMed patients know they can call their clinic for advice or drop by a center for a same-day visit with courtesy transportation available. This section details the difference between the time a ChenMed patient and the average U.S. patient spends with a physician.



As a result, across 37 centers, ChenMed physicians spent an average of **189 minutes in face-to-face** appointment time with each patient in 2016.

- ChenMed
- Chen Senior Medical Center
- JenCare Senior Medical Center

The 2014 National Ambulatory Medical Care Survey (NAMCS), published by the Centers for Disease Control, notes that U.S. patients are seen by general and family practice physicians for an average of just 20.9 minutes each year.<sup>23</sup>

The ChenMed model allows for increased face-to-face time between physicians and patients. ChenMed physicians have patient panel sizes that are less than one-fifth the size of the national average (450 patients vs. 2,300).

As a result, across 37 centers, ChenMed physicians spent an average of 189 minutes in face-to-face appointment time with each patient in 2016.

ChenMed patients have an average of 8.3 yearly appointments with their primary care doctor, while, among all U.S. patients, the average number of primary care visits is just 1.2 per year.<sup>24</sup>

<sup>23</sup> [2014 National Ambulatory Medical Care Survey](#); 2014 State and National Summary Tables; Table 30

<sup>24</sup> [2014 National Ambulatory Medical Care Survey](#); 2014 State and National Summary Tables; Tables 2 and 8

## Atlanta – Physician Face-to-Face Time

Five JenCare Senior Medical Centers in the Atlanta region averaged **220 total minutes** of face-to-face time in 2016. JenCare patients in Atlanta had **10.5 times as much** face-to-face time with their primary care physician as the average U.S. patient in 2016.<sup>25</sup>

## Miami – Physician Face-to-Face Time

Twelve Chen Senior Medical Centers in the Miami region averaged **162 total minutes** of face-to-face time in 2016. ChenMed patients in Miami had **7.8 times as much** face-to-face time with their primary care physician as the average U.S. patient in 2016.<sup>26</sup>

## Chicago – Physician Face-to-Face Time

Five JenCare Senior Medical Centers in the Chicago region averaged **256 total minutes** of face-to-face time in 2016. JenCare patients in Chicago had **12.2 times as much** face-to-face time with their primary care physician as the average U.S. patient in 2016.<sup>27</sup>

## New Orleans – Physician Face-to-Face Time

Four JenCare Senior Medical Centers in the New Orleans region averaged **176 total minutes** of face-to-face time in 2016. JenCare patients in New Orleans had **8.4 times as much** face-to-face time with their primary care physician as the average U.S. patient in 2016.<sup>28</sup>

## Louisville – Physician Face-to-Face Time

Three JenCare Senior Medical Centers the Louisville region averaged **196 total minutes** of face-to-face time in 2016. JenCare patients in Louisville had **9.4 times as much** face-to-face time with their primary care physician as the average U.S. patient in 2016.<sup>29</sup>

## Tidewater – Physician Face-to-Face Time

Four JenCare Senior Medical Centers in the Tidewater region of Virginia averaged **207 total minutes** of face-to-face time in 2016. JenCare patients in Tidewater had **9.9 times as much** face-to-face time with their primary care physician as the average U.S. patient in 2016.<sup>30</sup>

## Richmond – Physician Face-to-Face Time

Four JenCare Senior Medical Centers in the Richmond region averaged **193 total minutes** of face-to-face time in 2016. JenCare patients in Richmond had **9.2 times as much** face-to-face time with their primary care physician as the average U.S. patient in 2016.<sup>31</sup>

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25 [2014 National Ambulatory Medical Care Survey](#); 2014 State and National Summary Tables; Table 30

26 [2014 National Ambulatory Medical Care Survey](#); 2014 State and National Summary Tables; Table 30

27 [2014 National Ambulatory Medical Care Survey](#); 2014 State and National Summary Tables; Table 30

28 [2014 National Ambulatory Medical Care Survey](#); 2014 State and National Summary Tables; Table 30

29 [2014 National Ambulatory Medical Care Survey](#); 2014 State and National Summary Tables; Table 30

30 [2014 National Ambulatory Medical Care Survey](#); 2014 State and National Summary Tables; Table 30

31 [2014 National Ambulatory Medical Care Survey](#); 2014 State and National Summary Tables; Table 30

## CONCLUSION

For seniors most in need of care, high-quality health care is too often beyond reach. By providing increased face time with primary care physicians, the ChenMed model of care leads to healthier patients, lower health care costs, and a significant reduction in hospital admissions and emergency room visits.

Investments up front – such as courtesy services, drop-in visits, and smaller patient panels – lead to increased patient access, and ChenMed has developed a scalable, value-based care model that has proven successful in multiple markets for thousands of low-income seniors with multiple chronic conditions.

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## ABOUT CHENMED

ChenMed was founded to bring concierge-style medicine – and better health outcomes – to the neediest populations. ChenMed serves seniors with low-to-moderate incomes, most managing multiple chronic conditions, in 10 U.S. markets through more than 40 senior medical centers.

ChenMed's goal is to improve health outcomes and create value for patients, physicians, and the health care system. To do that, ChenMed relies on innovative technology and a talented and resourceful team of providers.

Founded by Dr. James Chen, a Taiwanese immigrant and cancer survivor, the company sees thousands of patients enrolled in Medicare Advantage in Florida, Georgia, Illinois, Louisiana, Kentucky, and Virginia – and is rapidly growing.

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## METHODOLOGY

This report uses claims data and data collected through the ChenMed electronic health record (EHR) system and compares ChenMed data with 2015 data from the Centers for Medicare and Medicaid Services (CMS) on emergency room visits, hospital in-patient admissions, and hospital in-patient days among Medicare beneficiaries in the corresponding counties where ChenMed operates.

The ChenMed EHR system was also used to determine the average face-to-face time between ChenMed physicians and patients across seven different regions. These face-time statistics are compared with U.S. face-time data from the 2014 National Ambulatory Medical Care Survey (NAMCS), published by the Centers for Disease Control.

The report focuses on 37 Chen Senior Medical Centers and JenCare Senior Medical Centers across six states. This report does not include data for ChenMed's new Dedicated Senior Medical Centers in Tampa Bay and Lakeland, Fla.



# APPENDIX

## In-Patient Hospital Admissions/Thousand

	ChenMed					Local Average					Difference				
	2012	2013	2014	2015	2016	2012	2013	2014	2015	2016	2012	2013	2014	2015	2016
GA		207	174	166	177		279	275	278			26%	37%	40%	
IL		214	170	171	197		341	317	299			37%	46%	43%	
KY	311	312	246	245	230	337	319	308	305		8%	2%	20%	20%	
LA	272	231	212	191	175	316	304	302	298		14%	24%	30%	36%	
RVA	235	290	239	209	200	352	337	299	302		33%	14%	20%	31%	
TWVA	340	317	273	246	211	314	306	278	276		-8%	-4%	2%	11%	
FL	317	288	250	247	220	394	375	385	371		20%	23%	35%	33%	
<b>Enterprise</b>	<b>307</b>	<b>292</b>	<b>233</b>	<b>213</b>	<b>200</b>	<b>344</b>	<b>323</b>	<b>299</b>	<b>296</b>		<b>11%</b>	<b>10%</b>	<b>22%</b>	<b>28%</b>	

# APPENDIX

## In-Patient Hospital Days/Thousand

	ChenMed					Local Average					Difference				
	2012	2013	2014	2015	2016	2012	2013	2014	2015	2016	2012	2013	2014	2015	2016
GA		516	373	351	351		725	749	724			29%	50%	52%	
IL		236	356	317	277		651	610	605			64%	42%	48%	
KY	911	712	573	451	434	734	716	721	711		-24%	1%	21%	37%	
LA	365	532	501	411	430	892	875	912	900		59%	39%	45%	54%	
RVA	818	740	728	688	635	876	848	727	741		7%	13%	0%	7%	
TWVA	893	843	779	674	594	896	864	757	785		0%	2%	-3%	14%	
FL	335	369	357	315	324	737	741	764	775		55%	50%	53%	59%	
<b>Enterprise</b>	<b>702</b>	<b>684</b>	<b>589</b>	<b>500</b>	<b>458</b>	<b>845</b>	<b>822</b>	<b>756</b>	<b>753</b>		<b>17%</b>	<b>17%</b>	<b>22%</b>	<b>34%</b>	

# APPENDIX

## Emergency Room Visits/Thousand

	ChenMed					Local Average					Difference				
	2012	2013	2014	2015	2016	2012	2013	2014	2015	2016	2012	2013	2014	2015	2016
GA		1032	1121	1203	1234		1662	1587	1616			38%	29%	26%	
IL		1204	991	956	1278		1820	1685	1566			34%	41%	39%	
KY	1210	1755	1308	1418	1502	1873	1742	1699	1689		35%	-1%	23%	16%	
LA	1368	995	1132	1029	1054	1970	1886	1894	1867		31%	47%	40%	45%	
RVA	973	1628	1328	1182	1180	2104	1985	1747	1651		54%	18%	24%	28%	
TWVA	1649	1986	1676	1424	1315	1790	1739	1566	1540		8%	-14%	-7%	8%	
FL	1269	1230	1108	1324	1276	2473	2303	2304	2220		49%	47%	52%	40%	
<b>Enterprise</b>	<b>1375</b>	<b>1612</b>	<b>1330</b>	<b>1246</b>	<b>1267</b>	<b>2052</b>	<b>1885</b>	<b>1723</b>	<b>1677</b>		<b>33%</b>	<b>15%</b>	<b>23%</b>	<b>26%</b>	



# ChenMed

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