40 MILLION OLDER ADULTS IN AMERICA

- 8 MILLION have multiple chronic conditions and receive help with activities of daily living
- 20% of these twenty percent make up forty percent of healthcare spend

Per capita healthcare spending for seniors with MCC and ADL is about double than for those without the need for help in ADL.

People with multiple chronic conditions and functional limitations spend 3x as much as people with only chronic conditions.

Average annual health spending for those with multiple chronic conditions and functional limitations is 28% higher among the elderly than the non-elderly.

MCC ADL

MEDICARE HOSPITALIZATION COLLECTIVE COST TO THE HEALTHCARE SYSTEM

MORE THAN $140 BILLION

GRACE

A new model of care for effectively managing the health and well-being of high-risk Medicare populations, with a special emphasis on the frail and most vulnerable.

KEY ELEMENTS OF THE GRACE MODEL OF CARE:
- Nurse practitioner and social worker team
- In-home geriatric assessment
- Individualized care plan
- Support of primary care physician
- Mental health and pharmacy
- Better care coordination
- Address common geriatric conditions
- Smooth care transitions
- Caregiver support

GRACE HAS BEEN PROVEN TO:
- provide person-centered care
- enhance quality of life
- optimize health and functional status
- decrease excess healthcare use

THROUGH THE GRACE PROGRAM:
- 30% reduction in hospital admission rates
- 50% reduction in hospital readmission rates
- 25% reduction in emergency room visits

COST SAVINGS THROUGH GRACE:
- nearly $4,300 in annual savings per person
- ROI per year of 95 percent

All Together Better Care

Geriatric Resources for Assessment and Care of Elders
from Indiana University School of Medicine

317.880.6577
graceteamcare.indiana.edu

*Independent study by Avalere Health, September 2014