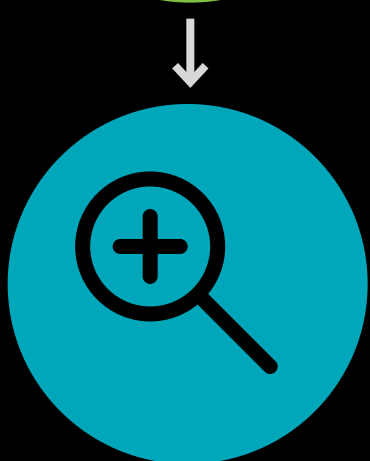


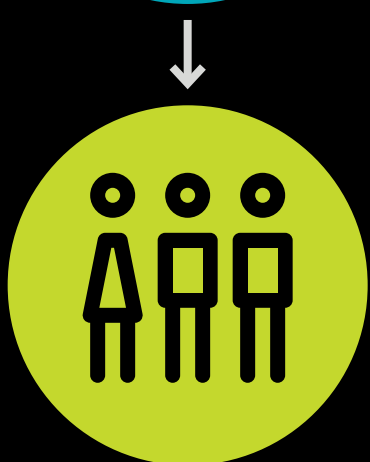
Checklist for developing a post-acute care strategy



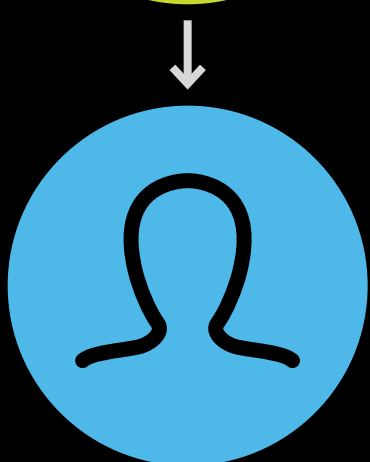
1. Decide whether to own or to partner. Unless a health system already owns significant post-acute care assets, partnering may be a preferred option.



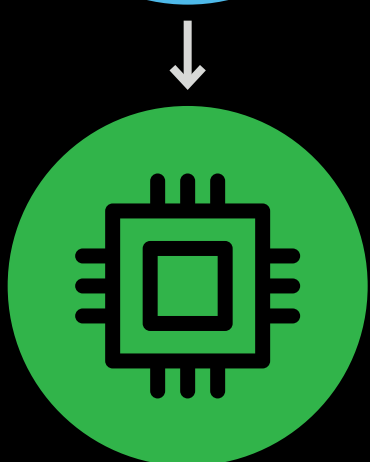
2. Identify post-acute care partners that share a vision and commitment to quality.



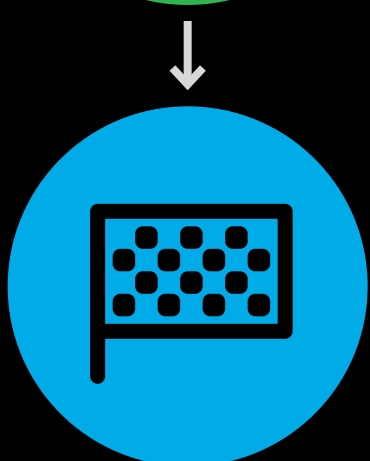
3. Get to know post-acute care partners' operational and clinical leaders.



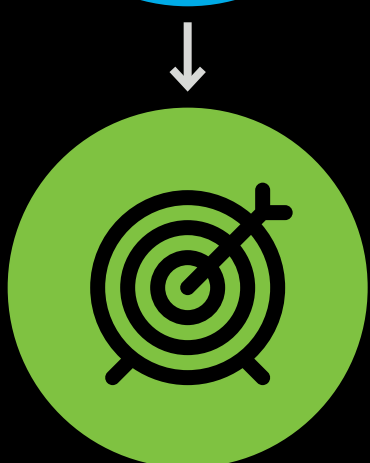
4. Designate a champion for the initiatives. Executives in quality, nursing, case management, and clinical affairs may be appropriate choices to lead initiatives.



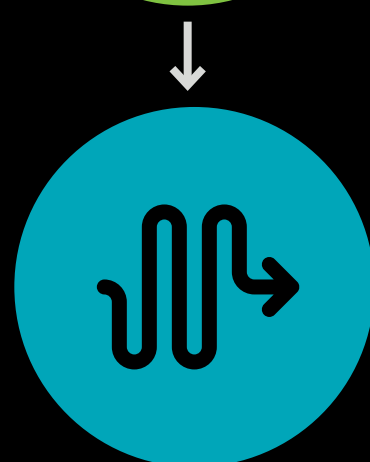
5. Leverage technology, including analytics, for identifying attractive partners and implementing improvement opportunities.



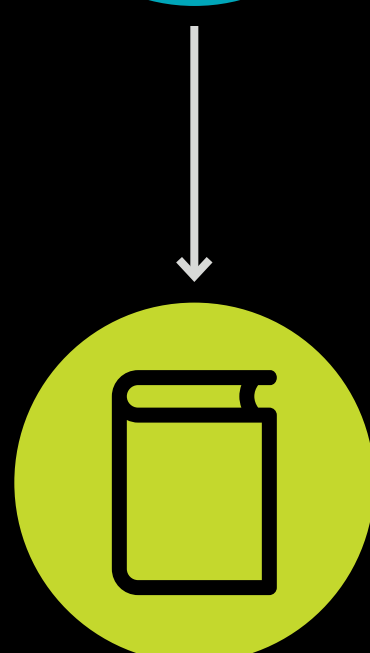
6. Decide where to begin improving performance. Typical targets include care coordination, clinical enhancements, and patient-centered care models.



7. Develop readily achievable goals. Many agreed that focusing on SNF LOS and readmissions is a good place to start.



8. Implement evidence-based care pathways. Some experienced post-acute care providers have developed care pathways or clinical frameworks that can serve as a foundation for this effort (e.g., VNAA Blueprint for Best Practices in Home Health, Hospice and Palliative Care). Conveners, health plans, and large post-acute care chains are developing solutions.



9. Borrow from the health plan playbook: Consider alternative post-acute care uses that prevent hospital utilization (e.g., ER diversion programs, primary care enhancements, "hospital at home" or "hospital at SNF" concepts).