VALUE GARNERED FROM OUR POPULATION HEALTH RESEARCH PARTNER



Transformation Center

Hearts Beat Back: The Heart of New Ulm Project: The value to a rural health care system

From 2009 to 2018, the Minneapolis Heart Institute Foundation® (MHIF) conducted real-world population health research with Hearts Beat Back: The Heart of New Ulm Project (HONU) in rural New Ulm, Minn. HONU is an award-winning population health initiative that MHIF originally designed in partnership with key community partners, including New Ulm Medical Center, as a 10-year demonstration project to identify and deliver the best interventions to reduce cardiovascular disease at a population level. The project continues today as a community-owned health initiative focused on three significant and widespread health issues: 1) Healthy lifestyles across the lifespan, 2) Mental health and 3) Addiction and risky use of substances.



Toby Freier

Here we share some insights from Toby Freier, president of New Ulm Medical Center (NUMC), about the impact of HONU over the years and its value to other rural health care systems.

Q: What is the challenge for health care systems, particularly rural systems, as it relates to population health?

Freier: It's a challenging time to be in health care, because every ounce of our inner being wants to pursue better health and improved health for

our communities. But we also know that we're tied into a reimbursement system that pays for people to be in a hospital. We have an income statement that reflects revenue generated on sick people in a hospital, yet our mission is about how can we prevent illness across a community.

Rural Americans are more likely to die from heart disease, cancer and the three other leading causes of death than their urban counterparts. For those who care about the future of rural America, the challenge that lies ahead for rural health care systems is clear. To successfully transform from simply surviving to thriving, we must start with the Triple Aim, and examine how we define success, not only in our health care system, but also in the overall health status of our communities. Health systems must become more engaged in improving population-level health outcomes and affordability, which are two of the aims.

Q: How does NUMC, in a rural community, view population health?

Freier: New Ulm may be representative of rural communities across the country. According to NUMC data, only 5 percent of our community residents will spend a night in a tertiary care hospital or trauma center. This necessitates looking at the remaining 95 percent of the community that the care system takes care of and asking what they need. The answer is clear — they need a highly integrated, comprehensive, local health care delivery system.

For us, population health is looking at how we can collaborate across the health care system and a community to bring greater value and realize the health potential of an entire population. We'll know we are realizing success when we see health as a priority for *every organization* in the community, not just the health care system.

Minneapolis Heart Institute Foundation's Population Health Vision

To simplify and accelerate rural community health improvement efforts for sustainability and impact.

Heart of New Ulm Project Health Care Awards

2018 Heart Healthy Stroke Free Award from the
National Forum for Heart
Disease & Stroke Prevention

2014 American Hospital Association NOVA award

2014 Community Benefit Award (small hospital category) from the Minnesota Hospital Association

More Information on This Topic

Read the white paper, "Rural Health Care Transformation: Achieving Access, Value and Health Improvements with a Datadriven Model," available at mplsheart.org/ rural-health-customizedconsulting-services/



Q: What role does data play in the success of rural health and population health?

Freier: Success in both requires a significant commitment to capturing outcomes data. It's extremely important for caregivers and front-line leaders to have access to data analytics and health information at their fingertips. Data helps empower every leader and clinician in our organization to have access to information that can help guide the right care, at the right time, in the right place for every patient, as well as for an aggregate population. Using data in Google Earth and GIS tells a powerful story to the community, too. As a data-driven research project, The Heart of New Ulm Project with MHIF was a natural fit for us to expand our data focus to help improve population health.

Q: How has New Ulm used data to measure population-level health outcomes?

Freier: In New Ulm, more than 90 percent of our residents get care at New Ulm Medical Center. This allows us to use the electronic health record (EHR) as our primary surveillance tool for population health to evaluate the health status of our community. Most importantly, we can then share data with our community partners about where health is improving and where it's not, and also share some of the interventions that we're casting across the community and their impact. In New Ulm, we've used EHR data to determine where high utilization is occurring, as well as identify "hot spots" for conditions such as heart disease, diabetes and obesity. This allows us to see where disparities exist in the community and consider more proactive population-level interventions for those areas.

Q: What interventions have been the most impactful in New Ulm?

Freier: HONU has achieved success by expertly integrating and connecting programs, strategies, services and evidence-based interventions across all sectors of the community — health care, community, worksites. By tailoring policies, systems and changes to the food and built environments based on our community's unique needs and culture, HONU has become woven into the fabric of our community and functions as a natural extension of our work at the medical center.

Q: How has HONU evaluated whether the financial investment is paying off?

Freier: The project began in 2009 with a very significant financial research investment from Allina Health and has continued with significant commitments from MHIF and numerous other organizations. Our outcomes strongly support that investment. MHIF research shows that we have improved the level of hypertension in New Ulm by 7 percent, stabilized obesity, cut smoking rates, cut heart attack rates, improved physical activity and improved nutrition. When we see our patients in the clinic, they're more engaged in their health care.

Q: How do New Ulm's outcomes compare with other communities?

Freier: MHIF researchers have taken our outcomes and compared them to another rural Minnesota community without any sort of population health program like HONU. Not surprisingly, they found that New Ulm residents are doing better in controlling their blood pressure, LDL cholesterol, total cholesterol and triglycerides than those in the other community. On a national level, researchers have also compared HONU's six-year results with data from the National Health and Nutrition Examination Survey (NHANES), and New Ulm's improvements in total cholesterol, blood pressure and blood glucose are better than the rest of the country.

Q: What is the potential impact of the lessons New Ulm has learned?

Freier: As I think about the future, I believe that HONU is a national model for population health and where health care is going in this country. In New Ulm, health outcomes have improved across almost every health indicator across our community. Health care quality within the health care system has also improved. We've lowered admission rates into the hospital by nearly 20 percent and have significantly lower admission rates compared to other comparable communities. Overall, we have a \$1,000 per Medicare patient lower cost of health care in our community; our cost of care is now 14% below the system benchmark. The bottom line is that we're seeing early signs that The Triple Aim is achievable, particularly the two aims of better health and lower cost for a community.

Thanks to the success of our partnership with MHIF, we were able to garner the continued support of the New Ulm community to keep investing in this work after MHIF's 10-year research phase ended in 2018. Through our work with MHIF's experts, we've learned how to work with our community to align health as a shared priority, tailor and deploy evidence-based interventions, build community capacity and inspire community change.

Connect With Us at the MHIF Rural Health Transformation Center!

For more information on how our community rural health consulting services can help you, please contact us:

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