

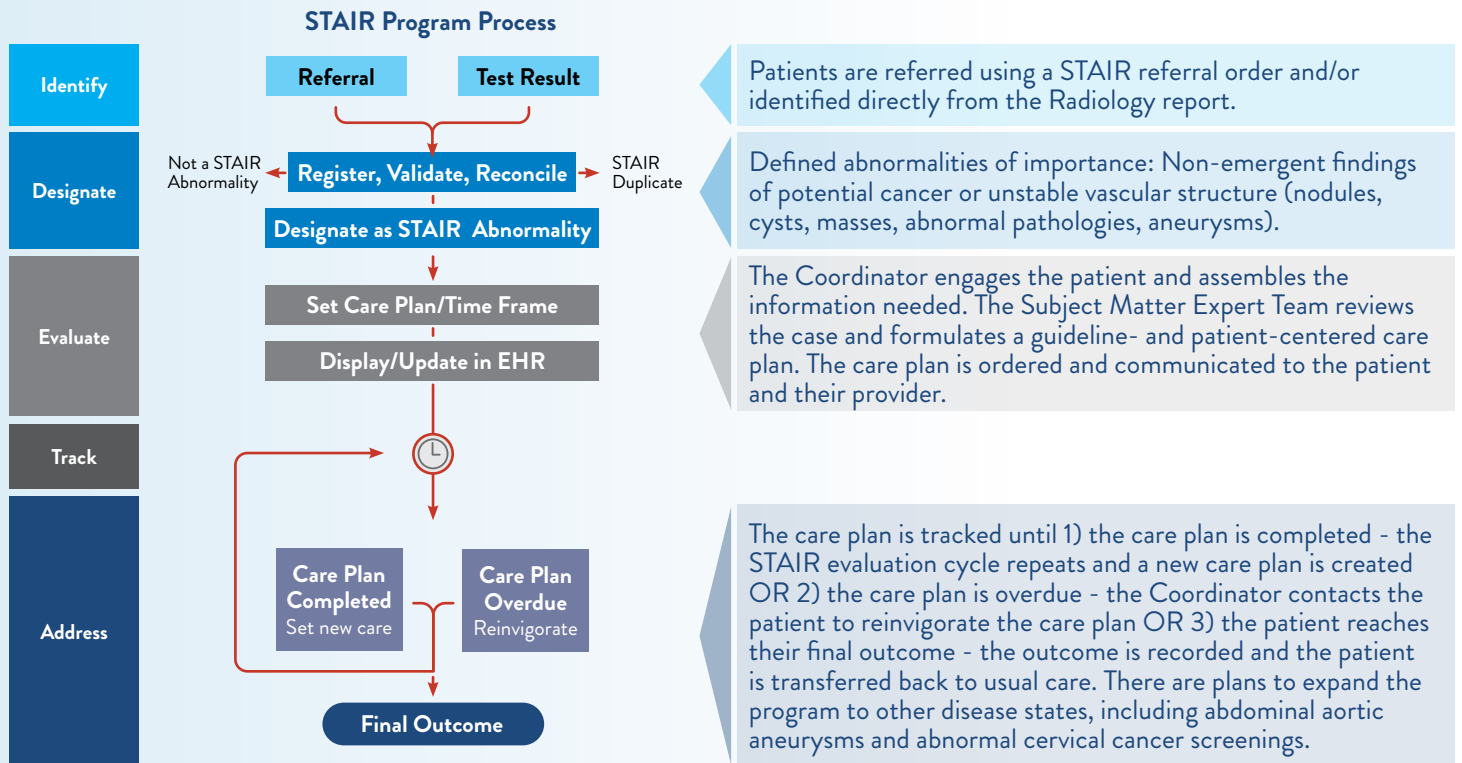
Geisinger System for Tracking Abnormalities of Importance Reliably (STAIR) Program

Background

Prior to the STAIR program, there was a failure to reliably follow up on abnormalities with patients experiencing pulmonary nodules, with a follow-through failure rate of about 20%. The STAIR program started as a pilot and demonstrated improved clinical outcomes and streamlined referral processes. Geisinger has expanded this to a formal program for pulmonology disease with plans to scale the program to other disease states and to integrate automation into its abnormalities identification process.

STAIR Program Objectives

- Reliably track abnormalities related to potential cancer or unstable vascular structures
- Improve access, efficiency, and quality of care and ensure the proper care plan is followed by patients
- Standardize the process of recognizing and tracking pulmonary nodules across the patient population



STAIR Program Results to Date

- 2,942 patients have completed the initial STAIR evaluation and only 11.9% needed a pulmonary visit
- Improved access by creating an additional 2,592 new patient slots
- Time to care plan reduced from 112 days to 8 days
- 1,719 patients, or 58%, have reached a final outcome
- 167 patients, or 10%, were diagnosed with malignancy
- Time to malignancy diagnosis ranged from 5 days to 635 days

Key Learnings

Traditional health care is complex and unreliable

STAIR is a novel, effective, and sustainable solution

STAIR is efficient, effective, reliable and provider/patient centered centered

Model can be adopted by any health care system