ChronicCareIQ

Case Study | Louisiana Cardiovascular & Thoracic Institute

Rural cardiology practice improves chronic disease management and financial sustainability with CCM and RPM

The Breakdown

Location:

Alexandria, Louisiana

The Details

- **1 Doctor**
- **4 Nurse** Practitioners
- **Codes** CCM and RPM

By the Numbers

371
Patients Enrolled

98%
Billing Percentage

$132/hour
Reimbursable Revenue Generated

Provider Background

Louisiana Cardiovascular & Thoracic Institute (LACVT) is a **rural cardiology practice in Alexandria, Louisiana**, serving a population with high rates of chronic disease, including heart disease and diabetes. The practice consists of **one physician and four nurse practitioners** and operates in a region where heart disease mortality is significantly higher than the national average.

Led clinically by **Lori Francis**, Clinical Director of the diabetes relief and cardiovascular program, the practice focuses on proactive, continuous care rather than episodic visits—particularly for patients with complex, long-term conditions and limited health literacy.

The Objective

→ **LACVT was already performing significant chronic care work but faced limitations due to episodic in-person visits and lack of infrastructure to track, document, and bill for that work.**

Specific challenges included:

- Managing medication changes for patients experiencing rapid weight loss
- Limited visibility into patient health between six-month appointments
- Difficulty adjusting medications quickly enough to prevent adverse events
- Performing chronic care work without compensation or scalability

The practice sought to formalize and scale chronic care management, improve patient monitoring between visits, and ensure the work being done could be sustainably supported and reimbursed.

"We're able to capture the work we were doing before, but just didn't have the tools to capture. **The integration with our EHR, athenahealth, works beautifully,** and makes our billing easier so there's less work for our in-house billers. **Plus, patients just love it."**

-Lori Francis, Clinical Director

The Results

- **371 patients enrolled in RPM**
- **98% billing percentage** reported for CCM/RPM services
- Improved ability to identify abnormal vital signs early, including transient ischemic attacks before strokes
- Increased staff capacity by justifying team growth through captured revenue
- Continued care delivery and revenue continuity during COVID-19-related shifts to remote care

The practice reports improved sustainability, stronger patient engagement, and greater confidence in its ability to care for high-risk populations at scale.

> **"The CCIQ platform is really user-friendly for patients and for clinical staff. I think patients and their families are more comfortable reaching out through the messaging system and prefer it over calling the office and potentially having to wait to speak with someone."**
>
> **-Lori Francis, Clinical Director**

"Bottom line is, no money — no mission. If you're not profitable, then you can't take care of patients and you can't take care of your staff."

Lori Francis, Clinical Director

ChronicCareIQ

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