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Innovative Solutions Help Patients Successfully Transition to Post-Acute Infusion

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Today's value-based reimbursement programs require hospitals and health systems to shorten the length of time patients are hospitalized, reduce readmissions and improve quality of care. When post-acute infusion therapy is required, these challenges can be

heightened, but are readily achievable for individuals who are relatively healthy, stable and financially secure. However, the risk of poor outcomes increases significantly for those who: are sicker and have comorbidities; have limited caregiver support; lack transportation options; or have Medicare without a Medigap plan, a high-deductible commercial plan or are uninsured or underinsured.

Ensuring all patients can be successfully transitioned to post-acute care as soon as possible requires a forward-thinking infusion provider that can offer comprehensive solutions for all patient types. Option Care's highly trained and experienced multi-disciplinary teams of Clinical Care Transition Specialists, infusion nurses, pharmacists, dietitians, patient registration and reimbursement professionals ensure any patient that is able to go home, can go home by offering the following support:

- Comprehensive clinical support. Option Care's clinical care, including 24/7 access to a pharma-

cist or nurse, is built around a personalized treatment plan developed with providers and patients, including:

- Extensive preparation. Prior to discharge, a Care Transition Specialist meets with the patient and/or caregiver to assess social, psychological and financial readiness for post-acute care. Once an assessment has been made, a nurse provides extensive education and instruction to the patient and/or caregiver to ensure they are prepared to implement care at home and understand the importance of taking medication as directed.
- Ongoing monitoring. Option Care clinical staff closely monitor patients to confirm timely interventions and reduce complications. An Option Care study of 116 people with short bowel syndrome discharged on parenteral nutrition (PN) found clinical interventions provided by a dietitian-led nutrition support team prevented hospital readmissions due to dehydration.¹ Researchers estimated 189 hospital days were prevented (based on an average three-day stay for the indication) saving \$378,000.^{2,3}
- Transportation services. Not all patients are well-suited for at-home care and need to receive post-acute care at an Option Care Ambulatory Infusion Suite. The staff can help facilitate transportation for patients lacking these resources to make sure they get the treatment they need. An Option Care team recently worked with a veteran who was not a good candidate for home infusion ther-

apy due to a history of drug abuse and was living in a shelter for men and women with addictions. The patient did not have access to transportation, but Option Care's partnership with a third-party transportation service made it possible for him to get to the Ambulatory Infusion Suite for all of his treatments.

- Financial assistance. Option Care has dedicated financial counselors to work with patients who are uninsured or underinsured to ensure financial vulnerability doesn't impact access to treatment. They offer payment options as well as work to identify and coordinate access to patient assistance programs which help minimize out-of-pocket expenses. Option Care also partners with hospitals to extend services to uninsured patients at home through their Charity Care programs.

For example, Option Care worked with the family of one patient who needed therapy for complex medical issues, but ran out of hospital days covered by his insurance plan and couldn't afford the copay for post-acute care. Rather than face thousands of dollars in out-of-pocket costs, Option Care helped arrange financial assistance allowing him to be discharged from the hospital and get his medicine at home.

Option Care also supports hospitals and health systems as a valued post-acute infusion partner with extensive payer coverage, demonstrated quality results and access to a wide range of limited distribution specialty infusion drugs that can be delivered in a more affordable setting.

Many patients require infusion treatment upon discharge from the hospital. Partnering with a quality infusion provider ensures effective care transitions for all individuals, mitigating the risk for hospitals and health systems and ensuring patients have access to the treatment they need.

1. Englert M, Stodola K. Proactive Interventions by Nutrition Support Clinicians in Patients with Short Bowel Syndrome (SBS) on Home Parenteral Nutrition (HPN) Results in Decreased Hospitalizations and Improved Financial Outcomes. Abstract presented at the American Society for Parenteral and Enteral Nutrition (ASPEN) 2019 Nutrition Science & Practice Conference; March 23-26, 2019, Phoenix.
2. Sundaram A, Koutkia P, Apoviam CM. Nutritional management of short bowel syndrome in adults. *J Clin Gastroenterol.* 2002;34(3):207-20.
3. Agency for Healthcare Research and Quality. <http://hcupnet.ahrq.gov/>