

End-of-Life Care: Providing Cost Saving Solutions while Improving Quality of Care

Researchers report, giving very ill and dying patients palliative care shortens hospital stays and lowers costs (Health Day News, April 30, 2018). Palliative care is a care system that provides symptom relief and support for quality of life for patients and their families.

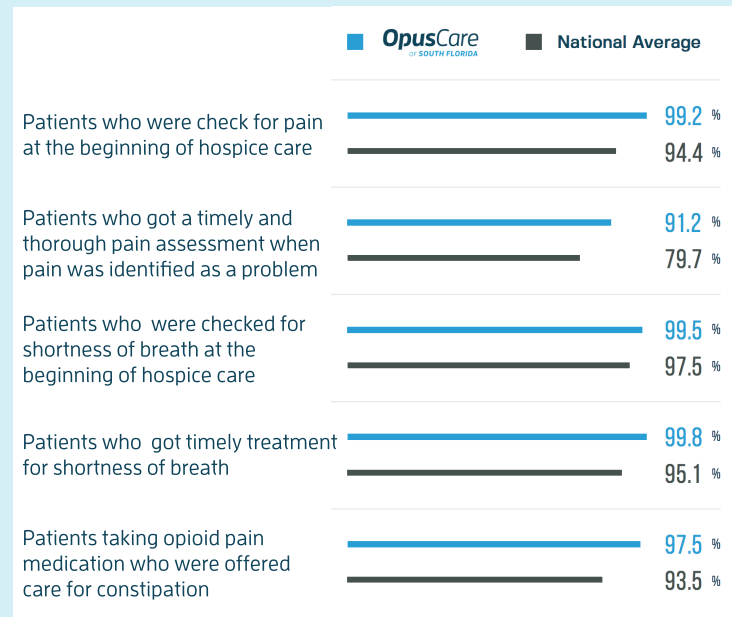
In 2008, a study was conducted with the objective of analyzing claims for inpatient surgical procedures in the year before death for patients 65 years or older. Findings showed: of 1,802,029 elderly beneficiaries of fee-for-service Medicare who died in 2008, 31.9% underwent an inpatient surgical procedure during the year before death, 18.3% underwent a procedure in their last month of life, and 8% underwent a procedure during their last week of life (The Lancet, October 6, 2011).

The outcomes of the aforementioned study coupled with the findings of Dr. Peter May, a research fellow in health economics at Trinity College's Center for Health Policy and Management, in Dublin, Ireland, prove quality care outcomes can significantly reduce unnecessary spending toward the end-of-life. "People with serious and complex medical illness account heavily for health care spending, yet often experience poor outcomes," said May. May concluded, "The news that palliative care can significantly improve patient experience by reducing unnecessary, unwanted and burdensome procedures, while ensuring that patients are cared for in the setting of their choice, is highly encouraging."

The elderly, ages 65 and older, will make up 20% of the US population by 2029, up 14% since 2012. With a growing aging population, OpusCare has positioned itself to be the quality alternative to the astronomical costs associated with terminal illnesses toward the end stage of life. OpusCare analysts have used tools such as the CMS Quality Indicator Report and PEPPER Report (Program for Evaluating Payment Patterns Electronic Report), to analyze healthcare trends with the support of quality care outcomes. This analysis shows that palliative care was associated with per hospital stay cost savings of \$4,251 per patient with cancer, and \$2,105 for each patient without cancer. According to the PEPPER Report, cancer makes up the majority of terminal clinical diagnosis. These findings show the potential to reduce suffering for the aging terminally ill population is enormous, while increasing their quality of life.

Key Trends in Palliative Care

- Increase in the number of palliative care consultations, with programs reaching more patients in need
- Growth in interdisciplinary team size; more programs meet national standards in staffing
- Increase in the diversity of the patient population served in terms of primary diagnosis
- More palliative care patients are discharged from the hospital



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