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CUTTING-EDGE CARE: THE FUTURE OF CV SURGERY IN ASCS PROMISES HIGH VALUE AND PATIENT SAFETY



The ambulatory surgery market size in the US is projected to hit almost \$59 billion by 2028.[i] Many leading healthcare systems are moving cases to ambulatory service centers (ASCs) for complex cardiovascular (CV) surgeries such as percutaneous coronary intervention (PCI).[ii] ASCs can help reduce costs and improve patient access, but they also pose challenges to patient safety.

Forward-thinking ASCs need access to advanced quality improvement (QI) insights to ensure they are providing quality care that meets or exceeds that of inpatient facilities, earning the trust of patients, payers, and investors.

Healthcare leaders are at an important crossroads: Will the future of CV surgery in ASCs be defined by aggressive private equity, unchecked profit-seeking, and scant attention to patient safety? Alternatively, will innovative leaders rise to the challenge and implement rigorous systems that ensure responsible decision making, cost efficiency, and safe, high-value care?

A NEW ERA IN CV SURGERY

There are fewer barriers than ever for hospitals that want to move CV surgeries to ambulatory settings. Lawmakers are removing regulations that previously complicated the construction and operation of CV-specific ASCs.[i] In January 2020 CMS began reimbursing for PCIs performed in ASCs, signaling the healthcare system's movement In that direction.[ii]

During a time of unprecedented difficulties for healthcare systems, the move toward ASCs can — if done correctly — ease chronic financial pressures, expand patient access, help with clinician recruitment and retainnment issues, and provide a testing ground for new, more efficient workplace processes. CMS estimates that by shifting 5% of coronary interventions to ASCs, Medicare payments would be reduced by \$20 million.

AT A GLANCE

"As the future of cardiovascular surgery in ambulatory service centers (ASCs) unfolds, Biome Analytics aims to empower ASCs to become models of excellence, ensuring patient safety, costefficiency, and high-value care, while forging partnerships with leading CV programs to navigate this transition and make a lasting impact on institutions and patient communities"



For over 10 years, Biome has been partnering with ambitious cardiovascular centers who want to maximize clinical, financial, and operational performance across the service line.

Our mission is to provide health systems with leading solutions that enable robust performance improvement projects and optimize value of care.

Stuart Jacobson

Medications, medical devices, and supplies cost more than ever before, but ASCs are well positioned to make cost-saving deals with vendors and establish effective co-ownership agreements. The limited number of procedures conducted in any given ASC, and the relatively contained clinical teams, mean that QI strategies may prove particularly effective for increasing cost efficiency and patient safety.

But conducting difficult CV procedures in ASCs also carries tremendous risks. A 2020 study found that patients that had PCIs in ambulatory settings had higher odds of bleeding complications.[i] A 2018 article in USA Today about outpatient surgery facilities carried the damning headline: "How a push to cut costs and boost profits at surgery centers led to a trail of death."[ii] Many clinicians have posed ethical concerns about inappropriate care driven by money rather than patient benefit.[iii]-[iv]

CREATING SAFE, RELIABLE ASCS

In the past, healthcare systems have been shielded from recessions by long-term contracts and steady demand for services. But this is now changing, in large part because high-deductible insurance plans are moving the industry in a patient-oriented direction(ix). Learning from other industries could be beneficial for hospitals in adapting to the demands of this new era.

A comprehensive study by Harvard Business Review found that recession-proof companies set themselves apart by working to reduce costs through improvements to operational efficiency, while also investing in marketing, research and development, and new assets. Institutions that followed this balanced approach were significantly more likely to survive a serious economic downturn and thrive afterward (x). For example, the 2008 - 2009 "great recession" brought about the failure of many technology startups, but it also allowed companies like Apple and Samsung to prove themselves to customers by increasing the value of their products at a time when most competitors were simply slashing costs (xi).

Leslie Jurecko, Chief Safety Officer at Cleveland Clinic, recently responded to a report on the prevalence of preventable harm: "Today, the consistent and sustained successes achieved by high-reliability organizations [in other industries] have not yet been reached in health care," she wrote. "How can this be?"(xii) Healthcare is more complex and higher risk than most industries, and yet the same strategies for achieving reliability and financial success still apply.

Following the Harvard Business Reviews findings, hospitals that want to weather downturns, and flourish afterward, should work to reduce costs selectively, mostly through eliminating defects in work processes and decreasing variation, especially in the CV service line where increasing disease prevalence and a high degree of disease complexity mean the potential for high return on investment. Hospitals should invest comprehensively in novel strategies to provide patients with a higher-value "product"—better care at a lower cost.

Pinpointing Ideal Cases

CMS has emphasized that clinical outcomes show no differences in short- and long-term readmissions only when appropriately selected patients are selected for ASC CV procedures. In other words, clinicians need to be sure they are referring the correct patients to ambulatory settings. Biome's AI technology is already proven to bolster outcomes by using a wide array of metrics to draw subtle but crucial differences between patients, creating precise cohorts, and making evidence-based recommendations to help clinicians make difficult treatment decisions.

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Actionable Data Narratives

Biome uses data that hospitals and ASCs are already collecting and merges it with cost information to construct a highly nuanced data story about how the institution can reduce costs while improving outcomes. Data collection is a costly investment. Biome makes sure that hospitals and ASCs are getting the most from that investment as quickly as possible. Traditional data analytics takes months and months to deliver incomplete conclusions— we provide actionable data narratives within weeks.

Performance Care

Hospitals that want to remain competitive with private equity firms are well positioned to take advantage of insider information about how to drive performance care. Strategies that have been working for years in the nation's leading CV programs will — with slight modifications — be highly effective in ambulatory settings. Biome's client services team has extensive hands-on experience working with hospitals to drive rapid change on the most important measures. Biome tailors proven interventions to meet the specific needs and goals of any institution and makes it easy for leadership to represent improvement for stakeholders.

IN SUMMARY

In five years, healthcare leaders should be able to look back on the transition of complex CV procedures to ASCs and feel that they contributed something of value to the wellbeing of their institutions and their patient communities. Biome is the partner to make this happen.



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