

Managing for Success

Optimizing Efficiency in GI-Focused ASCs through Anesthesia Management Best Practices



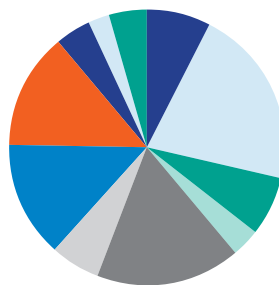
Efficiency lies at the heart of the ambulatory surgery center (ASC) model.

The first ASC opened more than 40 years ago in response to the red tape and high costs of inpatient procedures, offering a surgical alternative that drew advocates—and patients—quickly. Outpatient facilities now perform two-thirds of all U.S. surgeries¹, with 5,480 Medicare-certified ASCs in the U.S. as of 2016².

A 2014 Health Affairs study³ confirmed the success of ASCs in streamlining procedure costs and times without sacrificing quality care. Examining 52,000 surgical visits at 437 facilities over a four-year period, researchers from the University of Louisville and University of Minnesota found that procedures take 31.8 fewer minutes in ASCs than in hospitals, a 25 percent reduction in mean procedure time. Patient costs were also lower in this setting, an important consideration as America seeks to reduce its ballooning healthcare tab.



VMG HEALTH 2016 INTELLIMARKER, SHOWS GI AS 25% OF ALL CASES



Specialty	All Facilities
Otolaryngology	9%
Gastroenterology	25%
General Surgery	8%
Obstetrics & Gynecology	4%
Ophthalmology	20%
Oral Surgery	7%
Orthopedics	16%
Pain Management	16%
Plastic Surgery	5%
Podiatry	3%
Urology	5%

1 "Percentage Share of Inpatient vs. Outpatient Surgeries," American Hospital Association

2 "Multi-Specialty ASC Intellimarker 2016," VMG Health

3 "Procedures Take Less Time at Ambulatory Surgery Centers, Keeping Costs Down and Ability to Meet Demand Up," Health Affairs, 2014

With the Affordable Care Act's focus on less costly preventive care, demand for colonoscopies and other GI services is growing at a particularly high rate, underscoring the need for ASCs to provide critical bandwidth. According to the Centers for Disease Control and Prevention, 15 million colonoscopies were performed in 2012 in the U.S.⁴, a figure that continues to climb. Five of the top 10 procedures performed in ASCs today are GI-related⁵, based on Medicare data, while one in every four ASC cases is a GI procedure—the most of any specialty⁶. With an aging population requiring increased access to these potentially life-saving procedures, ASCs that specialize in GI services have an opportunity to gain additional patients and market share.



MEDPAC DATA ON TOP 10 SERVICES PERFORMED IN ASCS

The 20 most frequently provided ASC services in 2015 were similar to those provided in 2010

Surgical service	2010		2015	
	Percent of volume	Rank	Percent of volume	Rank
Cataract Surgery w/ IOL insert, 1 stage	19.2%	1	18.6%	1
Upper GI endoscopy, biopsy	8.9	2	8.2	2
Colonoscopy and biopsy	6.2	3	6.8	3
Lesion removal colonoscopy (snare technique)	4.7	4	5.6	4
Diagnostic colonoscopy	4.7	5	2.3	9
After cataract laser surgery	4.4	6	4.4	6
Inject foramen epidural: lumbar sacral	4.2	7	4.8	5
Injection spine: lumbar, sacral (caudal)	3.9	8	3.3	7
Inject paravertebral: lumbar, sacral	2.3	9	3.1	8
Colorectal screen, high-risk individual	1.8	10	2.0	10
Cataract surgery, complex	1.4	11	1.6	12
Colorectal screen, not high-risk individual	1.4	12	1.9	11
Upper GI endoscopy, diagnosis	1.4	13	1.0	17
Lesion removal colonoscopy (hot biopsy forceps)	1.2	14	0.8	21
Cystoscopy	1.2	15	1.2	15
Revision of upper eyelid	1.0	16	0.9	19
Inject spine, cervical or thoracic	0.9	17	1.0	16
Upper GI endoscopy, insertion of guide wire	0.8	18	0.8	20
Injection procedure for sacroiliac joint, anesthetic	0.8	19	1.3	14
Carpal tunnel surgery	0.7	20	0.7	22
Total	71.3		70.4	

Note: ASC (ambulatory surgical center), IOL (intraocular lens), GI (gastrointestinal). The numbers listed in the "Percent of volume" columns do not sum to stated totals because of rounding.

Source: MedPAC analysis of physician/supplier standard analytic files, 2010 and 2015.

4 "U.S. healthcare facilities have the capacity to meet colorectal cancer screening goals," Centers for Disease Control & Prevention, 2016

5 "Report to the Congress: Medicare Payment Policy," March 2017

6 "Multi-Specialty ASC Intellimarker 2016," VMG Health

Optimizing anesthesia delivery

To capture their share of this growing market, however, physician owners need to position their ASCs for long-term success. Providing excellent clinical care isn't enough—everything from intake procedures to billing operations should be designed for maximum efficiency. By streamlining workflows, centers can treat more patients in the same amount of time, improve patient satisfaction, boost staff morale and strengthen financial viability.

But where to start? Using propofol for sedation during GI procedures can help your facility increase patient throughput, comfort and

satisfaction significantly. Not only is propofol clinically proven to reduce GI procedure and recovery times, but it also comes with fewer side effects than previous anesthetics, helping patients feel better hours and days after surgery. Offering propofol-based sedation can make your ASC more attractive to patients, an important consideration in a consumer-driven healthcare market.

Using the latest forms of anesthesia is just one piece of the puzzle, however. ASCs must also consider who's delivering this critical service to patients. Does your anesthesia

provider work with physicians and staff to minimize clinical disruptions and preventable cancellations? Do you have a contingency plan if your provider can't work unexpectedly? Can your provider help you improve patient turnover without compromising quality? Working with a reputable anesthesia management company can help you reduce procedure cancellations, drive more revenue from increased throughput, and improve satisfaction scores. As your facility works to optimize efficiency, here are three key areas where the right anesthesia provider makes a difference.

- + **Using propofol for sedation during GI procedures can help your facility increase patient throughput, comfort and satisfaction significantly.**



Staffing

Last-minute cancellations are a costly hassle for physicians, hurting operational efficiency as well as your reputation. In a recent review of more than 4,000 elective surgical cases in the Hospital of the University of Pennsylvania's general OR and ambulatory settings⁷, 7 percent of all cases were canceled—equating to more than one case daily for the average ASC⁸. Most of these cancellations occurred for preventable reasons, like staffing issues.

If your anesthesia provider calls in sick on a day packed with procedures, how do you handle those cases? ASC staffing issues can have many negative implications, including:

Financial

The net revenue per GI case at an ASC is \$963, and the average ASC performs 19.2 cases per day⁹. Miss a day's worth, and you're facing a loss of nearly \$20,000.

Patient satisfaction

After undergoing days of colonoscopy preparation, the last thing a patient wants to hear is that the procedure has been cancelled. In a study published in the *Annals of Gastroenterology*, waiting time until an appointment was the



main cause of dissatisfaction among endoscopy patients¹⁰. As the healthcare market becomes more consumer-driven, those unhappy patients are likely to take their business elsewhere—and tell others to do the same.

Staff morale

Frequent cancellations can take a toll on physicians and staff, leading to increased turnover and additional recruitment and training costs.

An anesthesia management company can provide much-needed continuity and improve facility efficiency by ensuring a competent clinician is always available. This arrangement

also lets ASCs bypass other staffing challenges, such as having to choose between less-than-optimal provider performance or going through a time-consuming, expensive hiring process.

When selecting a management company, look for one whose clinicians will partner with you throughout the process. Anesthesia providers who participate in patient pre-op calls, handle record requests, push gurneys and start IVs can help maximize efficiency by minimizing unforeseen issues and allowing your staff to focus on their own work.

⁷ Journal of Anesthesia and Clinical Research, "Dynamics of Elective Case Cancellation for Inpatient and Outpatient in an Academic Center," 2013

⁸ "Multi-Specialty ASC Intellimarker 2016," VMG Health

⁹ Ibid.

¹⁰ "Long-term patient satisfaction of gastrointestinal endoscopic procedures," *Annals of Gastroenterology*, 2016

Propofol



Early forms of anesthesia, like ether, often left patients feeling groggy and came with potential side effects ranging from nausea to kidney distress. As mentioned earlier, propofol is the anesthetic of choice for many ASCs today, thanks to its ability to speed procedure and recovery times while providing patient comfort and safety.

Propofol entered the market in 1977, promising fewer side effects, faster onset and relative safety compared with other anesthesia options. A growing number of patients are opting to go this route during GI

procedures, with 30 percent of people receiving anesthesia for GI endoscopies in 2009, compared with 14 percent in 2003, according to a 2012 Journal of the American Medical Association study¹¹. And patients are singing its praises: In a 2012 survey of 646,000 patients, 97 percent rated their propofol experience as excellent or good, and 99 percent said they would be willing to repeat it¹².

Other options for endoscopy procedures include conscious sedation, where a physician or nurse administers medication to the patient, or no sedation, which just a handful of patients opt for because of significant discomfort. Propofol is a clinically proven way to maximize efficiency during GI cases, however, with benefits that include:

Streamlining procedures

With conscious sedation, physicians or nurses are forced to toggle between monitoring the sedation and performing the procedure. When an anesthesia provider administers propofol, other clinical staff are free to focus on the patient. This leads to more efficient procedures, reducing average times from 24 minutes to 17 minutes, according to one study¹³.

Shortening recovery times

Because it wears off more quickly, propofol cuts patient time in the recovery room by an average of 21 minutes¹⁴ and leaves patients feeling more alert. The sedation agent also helps patients bounce back more quickly once they leave your facility, with many reporting fewer side effects in the hours and days post-surgery than with other sedation methods¹⁵.

Happier patients

In the same Annals of Gastroenterology study, procedure-related discomfort was the second biggest issue affecting patient satisfaction, after waiting on appointments¹⁶. Propofol-based sedation is a proven way to minimize discomfort and deliver a better overall experience.

If your facility uses propofol during GI procedures, make sure your anesthesia provider has the appropriate clinical experience in the types of cases you perform. A management company can match you with the right clinicians to ensure patient comfort and safety.

11 "Utilization of anesthesia services during outpatient endoscopies and colonoscopies and associated spending in 2003-2009," The Journal of the American Medical Association, 2012

12 "Safety and effectiveness of propofol sedation during and after outpatient colonoscopy," World Journal of Gastroenterology, 2012

13 "Decreasing Cost in the GI Sedation Suite by Utilizing Best Sedation Practices," University of Southern Mississippi, 2017

14 "Propofol for Screening Colonoscopy in Low-Risk Patients," The JAMA Network, 2013

15 "A systematic review and meta-analysis of randomized, controlled trials of moderate sedation for routine endoscopic procedures," Gastrointestinal Endoscopy, May 2008

16 "Long-term patient satisfaction of gastrointestinal endoscopic procedures," Annals of Gastroenterology, 2016

Clinical Excellence

Clinical excellence should be a given for anyone working in your ASC, with patient safety paramount for all providers. Beyond that baseline, how can you build a team that delivers the greatest value to your patients and your facility? Creating a smooth experience, from initial consult to final follow-up, is key. An anesthesia management company can help in the following ways:

Ensuring patient safety

A reputable staffing provider goes beyond the CV to examine each clinician's qualifications and find the ones best suited for your clinical setting and specialty. With propofol offering a safer alternative to traditional sedation methods, your provider should also be skilled in administering the drug during GI cases, including appropriate dosing throughout the procedure. That focus on safety is particularly critical for ASCs, since they perform procedures outside of the hospital setting.

Center efficiency

Failing to obtain the appropriate cardiac clearance for anesthesia; an unfulfilled medical record request; or unaddressed co-morbidities, like the use of blood thinners, can derail a scheduled endoscopy. When facilities don't have the right clearances in place, it's often because physicians haven't established effective collection

procedures. A proactive anesthesia provider can help by participating in pre-op patient calls to ensure all paperwork is in order. Staffing management can increase efficiency further by facilitating communication between your facility and the individual providers you work with.

Good bedside manner

Your anesthesia provider is the last person the patient sees before they go to sleep and the first person they see when they wake up. A caring provider can help patients feel more comfortable, resulting in a smoother procedure and higher patient satisfaction scores. According to a 2015 study¹⁷, patients ranked the personal manner of support staff and nurses among the most important factors for a positive colonoscopy experience. That helpful attitude should also apply to staff interactions, with anesthesia providers pitching in to start IV lines, push gurneys and do whatever else is necessary to work efficiently.

Eliminating compliance risk

Clinical competency is important not only for staying compliant, but also staying competitive in a crowded healthcare market. Your provider should participate in quality assurance activities that support facility accreditation and maintain your reputation, helping to improve patient loyalty and retention.



Advising on best practices

Working with an anesthesia management company enables your practice to benefit from lessons learned at other centers. If a provider notices redundancies in your pre-op prep, for example, they can advise you on potential areas for improvement.

Transparent billing

Unexpected anesthesia bills can compromise your relationship with your patients—and potentially slow down payment on all invoices. In addition to having patients sign a billing consent form on the day of service, a reputable anesthesia provider should follow up after the procedure to let patients know what to expect in terms of billing. Talk to your provider about their collection practices, as well, to ensure they take a compassionate approach to patients who may be unable to pay.

17 "What do patients want from their endoscopy experience?," Frontline Gastroenterology, 2015



The anesthesia management advantage

While the current healthcare landscape offers ample growth opportunities for GI-focused ASCs, facilities committed to efficient operation will have a clear advantage. An experienced anesthesia management company can deliver a tailor-made solution to help you achieve your goals, including improving efficiency and throughput, minimizing compliance risk, and delivering patient comfort and satisfaction.

In your search for the right management company, ask yourself:

Do they have the appropriate clinical experience?

When it comes to efficiency and patient safety, experience matters. Look for a provider skilled in outpatient GI cases and propofol-based sedation to maximize patient throughput, comfort and safety.

Can they guarantee coverage? Knowing an experienced provider is always available gives you peace of mind while avoiding costly procedure cancellations.

Will they provide a full range of services? A provider that goes above and beyond can help shave time off procedures and improve overall center efficiency. That includes participating in pre-op calls and record requests to avoid last-minute cancellations, as well as pushing gurneys, starting IVs and managing inventory to help procedures run smoothly.

The ideal management company is also respectful of your facility, offering professional guidance that comes from deep experience in the field. Making the move to an anesthesia management model can put your ASC ahead of the curve, enabling you to perform more procedures daily, improve patient satisfaction and stay competitive in a changing healthcare market.



706.381.6001
INFO@CAREPLUSMP.COM
CAREPLUSMP.COM