Outpatient Interventions: Are Controls Needed?
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Office Based Lab
Outpatient Interventions
- Procedure room
- Added Nurse, RT
- C-Arm
- IVUS Tower
- Floating Table

Rationale Outpatient Interventions
Hospital Procedures
- Hospital
  - Limited procedure / recovery (Home)
  - “Facility Fee”
- Insurance
  - Decrease cost, less hospital resources used
- MD
  - No Inpatient responsibilities
  - “MD Fee”

Rationale Outpatient Interventions
Office Based Lab
- MD
  - No Inpatient care responsibilities
  - More efficient, less down time!
  - Improved Patient Satisfaction!
  - Improved Revenue (Office > MD Fee)

No Disclosures
Outpatient Interventions
Office Based Lab

Assumption (Physicians and Public):
- Pt. Safety and Outcomes on par with
  - Hospital
  - Ambulatory Surgery Center
- Patient Satisfaction on par with
  - Hospital
  - Ambulatory Surgery Center

Outpatient Interventions:
Safe and Satisfying

- “…the chance of dying in an outpatient surgery center …one in a million
- It approaches the safety of flying with a major airline
- “Surgery centers “a …more convenient, safe place to get quality health care,”

Outpatient Interventions:
Safe?

- Joan Rivers Dies in Ambulatory Surgery Center
- Press: Non-Hospital Surgery Safe?

Overutilization
Medicare Payments Surge for Stents to Unblock Blood Vessels in Limbs

- Justice Department …two whistle-blower lawsuits filed … doctor…unnecessary operations*
- 2005 – 2013*
  - Procedures to open heart vessels fell 30 %
  - Procedures outside the heart soared by 70 %
- Anecdote: “7 Months / 200 venous stent cases”

*NY Times January 29, 2015

Outpatient Interventions:
Are Controls Needed?

YES!

Outpatient Interventions:
Controls Needed!

- Pt. Safety protocols (@ Hospital)
- Staff Safety (@ Hospital)
  - Radiation safety
  - Infection safety
- Indications (@ Hospital)
- Outcome Quality > Hospital
Outpatient Interventions: Are Controls Needed?

Quality

• What is quality treatment / outcome?
  • “e.g. Atherectomy, PTA, Stent, 1-3 vessels?”
  • Stent or DCB?
  • When is a vein ablation appropriate?
• “Know it when you see it?!”
• Data driven decisions / reimbursement

Data driven decisions / reimbursement

• Better care /outcomes
• Decrease unnecessary treatments
• Decrease wasted health dollars
• Trials expensive / time consuming
• Expert consensus statements

Outpatient Interventions Credentialing Candidates!

• JACHO
• SVS, AHA, ACC, SIVR
• Government (Medicare, Dept of Health)
• American Hospital Association
• American Association for Accreditation of Ambulatory Surgery Facilities

Control The Bad
Don’t Kill The Good

Munch’s “The Scream”

Don’t throw out the Baby with the Bath Water!

Outpatient Interventions: Are Controls Needed?

• Outpatient Endovascular and Interventional Society (OEIS)
• Vascular Surgeons, Cardiologists, IR
• Mission: Establish Outpatient standards
  • Safety
  • Appropriateness
  • Procedure Quality
  • Patient Satisfaction

Conclusion
Remember the Benefits!

With Safety and Quality

• Protect Efficiency
• Protect Patient Friendly Environment
• Protect Competition
• Protect Decreased Health Care Costs
• Protect MD Reimbursement
Conclusion

Majority of Outpatient Interventions
- By Ethical & Caring MDs
- Appropriate and Safe
- Regulate / Control the "Bad Apples"

Thank You!

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