

Study shows significant cost savings with a home-based palliative care program

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A home-based palliative care (HBPC) program for individuals with advanced illnesses was associated with a \$12,000 reduction in the mean total cost of care per person, fewer hospital admissions and emergency room visits, and greater use of hospice during the final three months of life, as reported in a study published in *Journal of Palliative Medicine*.

In the article entitled "The Impact of a Home-Based Palliative Care Program in an Accountable Care Organization," Dana Lustbader, MD and coauthors from ProHEALTH Care—An Optum Company and ProHEALTH Medical Management (Lake Success, NY), Optum Center for Palliative and Supportive Care (Eden Prairie, MN), and OptumCare (Phoenix, AZ), describe a HBPC program that was implemented within an Accountable Care Organization of a Medicare Shared Savings Program. The retrospective study compared individuals enrolled in the HBPC program to those receiving usual care.

An HBPC team included registered nurses, social workers, doctors, and administrative staff, each with strong clinical skills in palliative care. Care included home visits, telephone calls, and access to telepalliative care, in which patients and caregivers could interact virtually with any member of the team using a smart phone or computer.

"This is strong evidence that home-based palliative care delivers on the value equation—improved quality at lower cost," says Charles F. von Gunten, MD, PhD, Editor-in-Chief of *Journal of Palliative Medicine* and Vice President, Medical Affairs, Hospice and Palliative Medicine for

the OhioHealth system.

More information: Dana Lustbader et al, The Impact of a Home-Based Palliative Care Program in an Accountable Care Organization, *Journal of Palliative Medicine* (2016). [DOI: 10.1089/jpm.2016.0265](https://doi.org/10.1089/jpm.2016.0265)

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