

pond smiles

one 'crawler

one cast

one bass

two smiles

for jim  
march 12, 2018



# From Consultant to Consumer:

## An Inside Perspective on Healthcare Delivery

*Jim Miller*  
*June 18, 2019*

# Session Goals & Objectives

- Chronology of events
- Accounting of charge
- Examination of care coordination
- Critique of case management activities
- Lessons learned

# Career as Consultant

34 years in healthcare

Medicare and Medicaid tours

- Provider relations

Safety-net hospital provider

- Government programs, Compliance manager

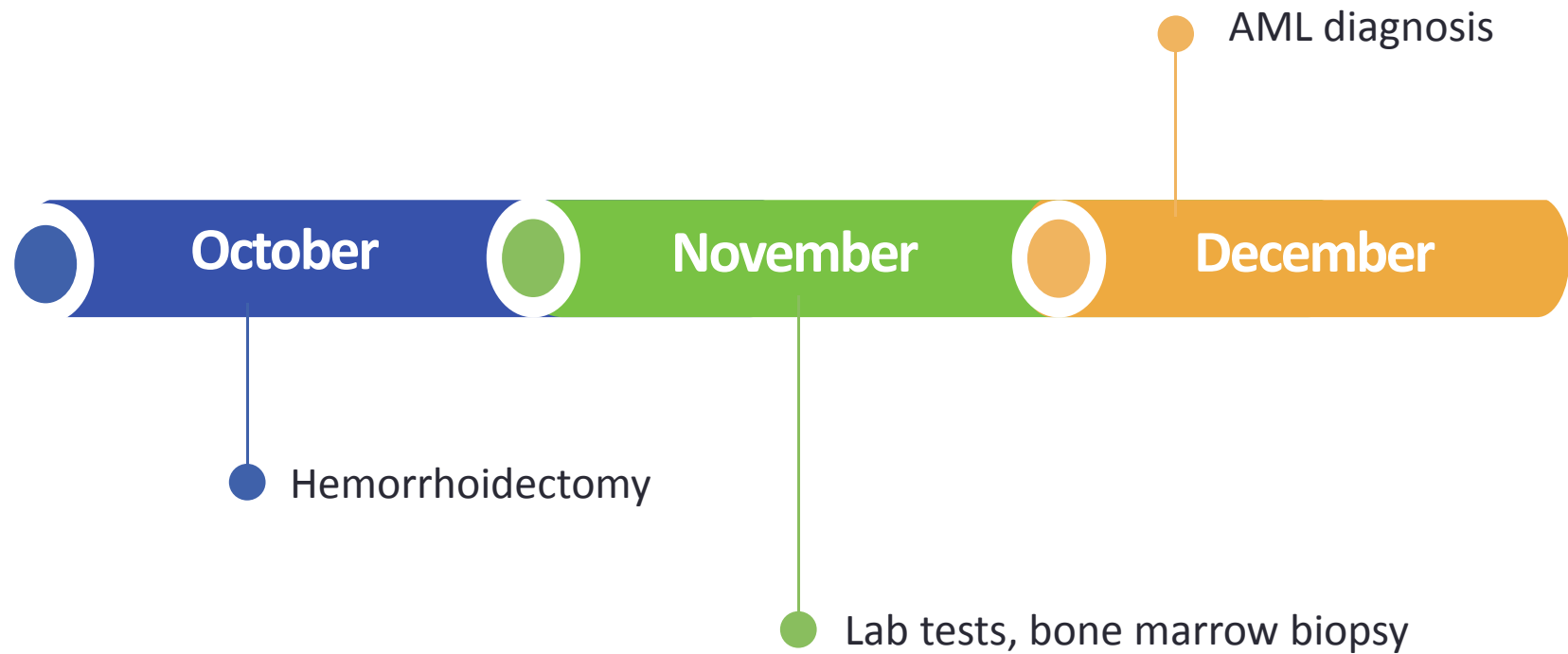
Agency, firm consulting

- Revenue cycle
- Collections, Early Out
- Bad Debt reconciliations

Indiana Rural Health Association

- Public policy development
- Revenue cycle consulting

# Case Timeline



# December 7, 2017

Diagnosed with Acute Myeloid Leukemia (AML)

- 23% of white blood cells are “blasts”
- Admitted Dec. 8 to begin treatment
- Chemotherapy to begin immediately
- 1 in 2 chance of survival

# Acute Myeloid Leukemia – AML

- *“ . . . is a fast-growing blood cancer. It’s all called acute myelogenous leukemia. In AML, the body makes unhealthy blood-forming cells (stem cells) that don’t develop properly. These cells grow quickly in the bone marrow (the soft, spongy tissue inside the bones). They prevent the marrow from making normal red blood cells, white blood cells and platelets. With fewer healthy blood cells, the body can’t fight infections or stop bleeding.”*
- DNA in developing stem cell in bone marrow is damaged – “acquired mutation.”



# Inpatient Treatment

## NCCN Guidelines Version 3.2017

### December 2017

Induction – 28-day hospital stay

- Initiate chemotherapy for remission
- Kill as many AML cells as possible
- Get healthy blood cell counts to normal
- *Cytarabine*: I-V for 24 hours, Days 1-7
- *Daunorubicin* I-V for 15 minutes, Days 1-3

### February 2018

Consolidation therapy – 7-day hospital stay

- Continue chemotherapy to maintain remission
- Destroy any stray AML cells
- Stem cell donor match

### March 2018

Stem Cell Graft – 22-day hospital stay

- HIDAC 2 gm on Days 1,3, 5
- Oral *midostaurin* 50 mg Days 8-21
- Transplantation on March 12, 2018

MONTHLY PLAN						
				X	X	X
X	X	X	X	X	X	X
X	X	X	X	X	X	X
X	X	X	X	X	X	X

# Course of Inpatient Treatment

- Vascular access port implantation
- 7/3 chemotherapy
- Maintenance chemotherapy
- Drugs to ward off infection
- Participation in drug study
- Lab work
- Monitoring of vitals
- Physician supervision
- Case management
- Patient education
- Physical therapy
- Music therapy
- Monitoring for Graft vs. Host Disease

# Effects of Chemotherapy

- Low blood cell counts
- Increased risk of infection
- Appetite loss
- Weight loss
- Mouth sores
- Throat irritation
- Edema in legs and feet
- Nausea and diarrhea
- Acid reflux
- Blood clots from damaged bladder
- Hair loss
- Splintered finger and toe nails
- General weakness
- Difficulty with daily living skills

# Post-Stem Cell Transplant Care

- Frequent cancer clinic visits
- Lab work for blood, chemistry monitoring
- ENT care for loss of voice
- Endoscopy for dysphasia
- Bone density study
- Pulmonary studies
- Investigational drug study
- Drug regimen to ward off GvH
- Drug regimen to ward off infection
- Periodic bone marrow biopsies

# Acute Graft vs. Host Disease

- Admitted July 30-August 8, 2018
- Donor's immune cells attack normal cells
- Illness scaled 3 out of 5
- General weakness
- Outbreak of rash throughout
- Discolored extremities
- Blurred vision
- Increased loss of appetite
- Throat discomfort
- Nausea and diarrhea
- Extensive edema in legs

# Itemization of Charges

## **Inpatient admissions**

- \$998,739.42 (4)

## **Inpatient physician**

- \$24,206.50 (62)

## **Outpatient clinic**

- \$158,598.73 (67)

## **Outpatient physician**

- \$25,418.00 (69)

## **Other medical services**

- \$3,756.36 (6)

## **Pharmacy copayments**

- \$11,042.84 (166)

**Total – \$1,221,761.85**

# Insurance Coordination

- Verification of eligibility
- Case Management
- In-home visit
- Enrollment in Health Insurance Marketplace
- Prior authorization of services
- Copayments

# Current, Past Medications

- *Sirolimus* 0.5 mg daily
- *Tacrolimus* 1.0 mg daily
- *Omeprazole* 80 mg daily
- *Prednisone* 7.5 mg daily
- *Acyclovir* 800 mg daily
- *Dexamethasone* liquid – PRN
- *Escitalopram* 10 mg daily
- *Fluconazole* 100 mg daily
- 1 multi-vitamin daily
- *Sulfamethoxazole-Trimethoprim* 160 mg 3X weekly
- *Terbinafine* 250 mg daily
- Investigational study drugs 200 mg daily



# Spiritual, Psychological Impacts

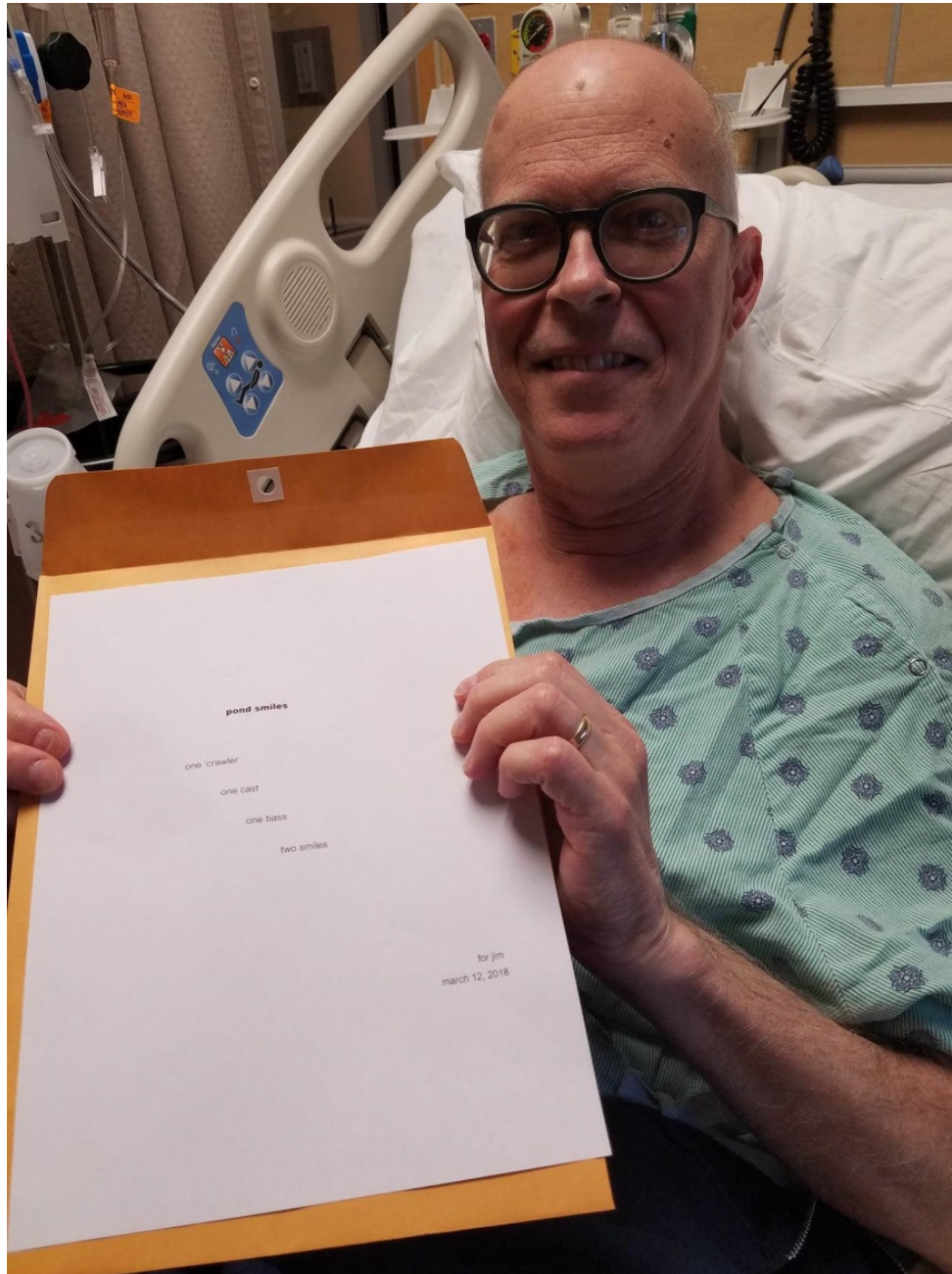
- Family, friends support
- “Prayer Blanket”
- Transformative disease
- “So what?”
- Take one day at a time
- Compassion for fellow cancer patients
- Visit from Holy Spirit?

# Prospects for Future

- Chronic Graft vs. Host Disease
- Continued physician monitoring
- Ongoing infection control
- “Baby shots”
- 5 years to be deemed cancer free

# Lessons Learned

- Macro numbers based on micro events
- Dashboards bury individual stories
- Think more with your heart
- It's all about patient care . . . .
- From start to finish



*Thank You & God Bless!*

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