

## ***Palliative Care Reduces Hospital Costs at End of Life***

### Allina Health Inpatient Palliative Care Teams

Abbott Northwestern Hospital, Minneapolis, MN  
 United Hospital, St. Paul, MN  
 Mercy Hospital, Coon Rapids, MN  
 Unity Hospital, Fridley, MN

Joe Amberg, MD  
 Medical Director, Palliative Care  
 Lori Motschenbacher  
 Manager, System Financial Analysis

joseph.amberg@allina.com  
 (612) 262-7693

Project description: Net hospital costs in 2011 were tabulated for patients who died in the hospital, with a length of stay of 4 days or greater, and who received palliative care consultation at least 2 days prior to death. Variable costs were measured for the final 3 hospital days, with data specific to hospital, patient diagnosis, and allocation of costs. A comparison group are patients with the same inclusion criteria, but who did not receive palliative care consultation.

Topic:

**Palliative Care Teams:**  
 Demonstrating clinical and financial outcomes for team consultation in the inpatient setting.  
 Focusing on cost avoidance data for patients who die in the hospital.

<u>Hospital</u>	<u>Savings per consult</u>	<u>Net savings</u>	<u>Expense</u>	<u>Team size</u>
Abbott	\$ 3,702	\$ 685,000	\$ 317,000	7.3
United	\$ 1,721	\$ 215,000	\$ 210,000	2.6
Mercy	\$ 1,935	\$ 122,000	\$ 104,000	3.0
Unity	\$ 1,734	\$ 110,000	\$ 124,000	1.6
<b>TOTAL</b>		<b>\$ 1,132,000</b>	<b>\$ 775,000</b>	<b>14.5</b>

Study results: The table provides a summary for the 4 hospitals. The average cost for the final 3 hospital days was always greater for patients with no palliative care, regardless of diagnosis or hospital. There were a total of 475 palliative care consults provided meeting study inclusion criteria, compared to 239 patients (control group) who were not seen by palliative care. This study group represents only 13% of total consults seen by the teams, and demonstrates cost avoidance that exceeds total program costs.