

# Community Medical Centers (CMC) Minimally Invasive Procedures

Industry: Hospital (Employer/TPA Collaboration)

Covered Lives: 6,000

**OBJECTIVE** A community hospital group envisioned improving services in women's surgical care by driving adoption of Minimally Invasive Procedures (MIP) for both the patients and the organization's 6,000 employees.

*The slow adoption rate of minimally invasive surgery techniques is counter-intuitive to the medical centers' findings that these surgeries demonstrate lower costs, shorter length of stay and a more efficient utilization of resources.*

## MINIMALLY INVASIVE PROCEDURES BENEFITS

- High quality of care at a lower cost (vs. open procedures)
- Easy implementation from employer perspective
- Limited resource investment yields significant gains
- Immediate cost impact
- Direct claims costs reduced
- Employees return to work faster

## IMPLEMENTATION DETAILS

CMC's implementation for their **employees** in 2010:

- Created benefit plan **eliminating the co-pay and employee deductible when MIP was chosen** over open procedures for the following surgeries: Hysterectomy, Appendectomy, Cholecystectomy and Colectomy

CMC's implementation for their **patients** in 2010:

- Established the Gynecologic Minimally Invasive Surgery Center of Excellence (G-MIS COE) at Clovis Community Medical Center to focus directly on minimally invasive options in GYN surgery
- Conducted patient education sessions on benefits of MIP
- Developed internal benchmarks for MIP vs. Open GYN procedures in volume comparison, complications and readmissions

## BENEFIT PLAN DESIGN RESULTS

Even though CMC is in the early stages of implementation, they are positive that:

- Based on claims data, MIP adoption could rise as much as 10 to 15%
- Based on baseline clinical data gathered for **hysterectomy** (MIP vs. open), an opportunity exists to further expand the following results:
  - **Decrease hospital length of stay up to one full day**
  - **Decrease complications by 200%**
  - **Decrease readmissions by 100%**
  - **Increase the 50% shift in site of care from Inpatient to Outpatient**

## POTENTIAL INDIRECT SAVINGS

- Reduced replacement worker costs
- Reduced number of days in the hospital can lead to decreased risk of hospital-acquired infections
- Reduced prescription drug costs
- Reduced absenteeism
- Improved productivity

Some patients may not be candidates for MIP. Underlying health conditions may indicate an open surgery is necessary.