

# Home and SNF-based alternatives to hospitalization

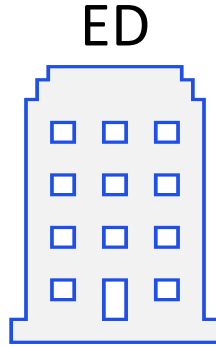
Patient burdens and benefits in current and future  
pathways

# Terms and references

- [Ambulance coverage](#)- part B
- [Emergency Department coverage](#)- part B
- [Outpatient basics](#)- Part B annual deductible in 2018 \$183
- [Observation services](#)
- [Skilled Nursing facilities](#)
- [Home Health](#)
- [Medicare Part B drugs](#) administered in outpatient settings (ED, Observation, clinic)

# Current State A = (911) + ED

Patient cost for Medications is complicated. If administered during a hospitalization, part A pays. If administered as outpatient, a lot depends on the rules of parts B and D, supplemental coverage, formularies, and in or out of network



Out-of-Pocket:  
20% Co-payment

Advantages:  
Best for "rapid"  
evaluation for life-  
threatening conditions

Disadvantages:  
Expensive

Out-of-Pocket:  
Deductible and 20%  
Co-payment for visit  
(physician, labs,  
diagnostics)

Advantages:  
Best for "rapid"  
evaluation for life-  
threatening conditions

Disadvantages:  
Long waits, noise,  
crowding, chaotic, risk  
for delirium

Out-of-Pocket:  
20% Co-payment for  
visit (including labs &  
diagnostics)

Advantages:  
Trust and familiarity,  
low risk of health-  
related complications

Disadvantages:  
Difficulty getting  
appointment, short  
time with physician,  
traffic/ parking/  
transportation

# Current State B = (911) + ED + Observation

911

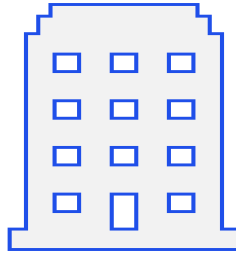


Out-of-Pocket:  
20% Co-payment

Advantages:  
Best for "rapid"  
evaluation for life-  
threatening conditions

Disadvantages:  
Expensive

ED



Out-of-Pocket:  
Deductible and 20%  
Co-payment for visit  
(physician, labs,  
diagnostics)

Advantages:  
Best for "rapid"  
evaluation for life-  
threatening conditions

Disadvantages:  
Long waits, noise,  
crowding, chaotic, risk  
for delirium

Observation



Out-of-Pocket:  
20% Co-payment for  
visit (time-based costs  
for physician services,  
labs, diagnostics)

Advantages:  
Provides additional  
time for evaluating  
admit or discharge  
disposition

Disadvantages:  
May get bed in hospital  
room or special section  
of the ED

Clinic



Out-of-Pocket:  
Co-payment, 20% Lab,  
Diagnostics

Advantages:  
Trust and familiarity,  
low risk of health-  
related complications

Disadvantages:  
Difficulty getting  
appointment, short  
time with physician,  
traffic /parking/  
transportation

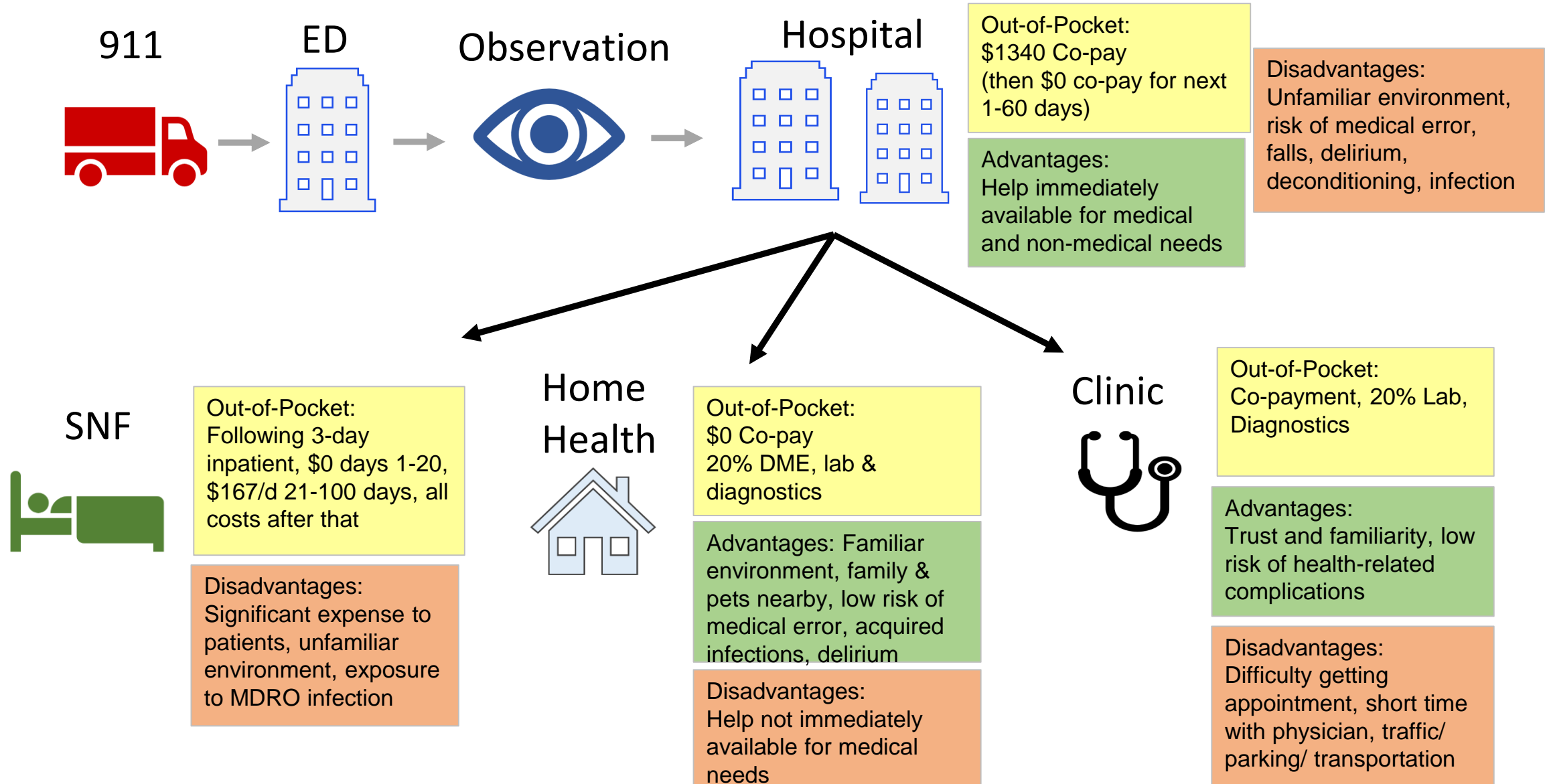
SNF



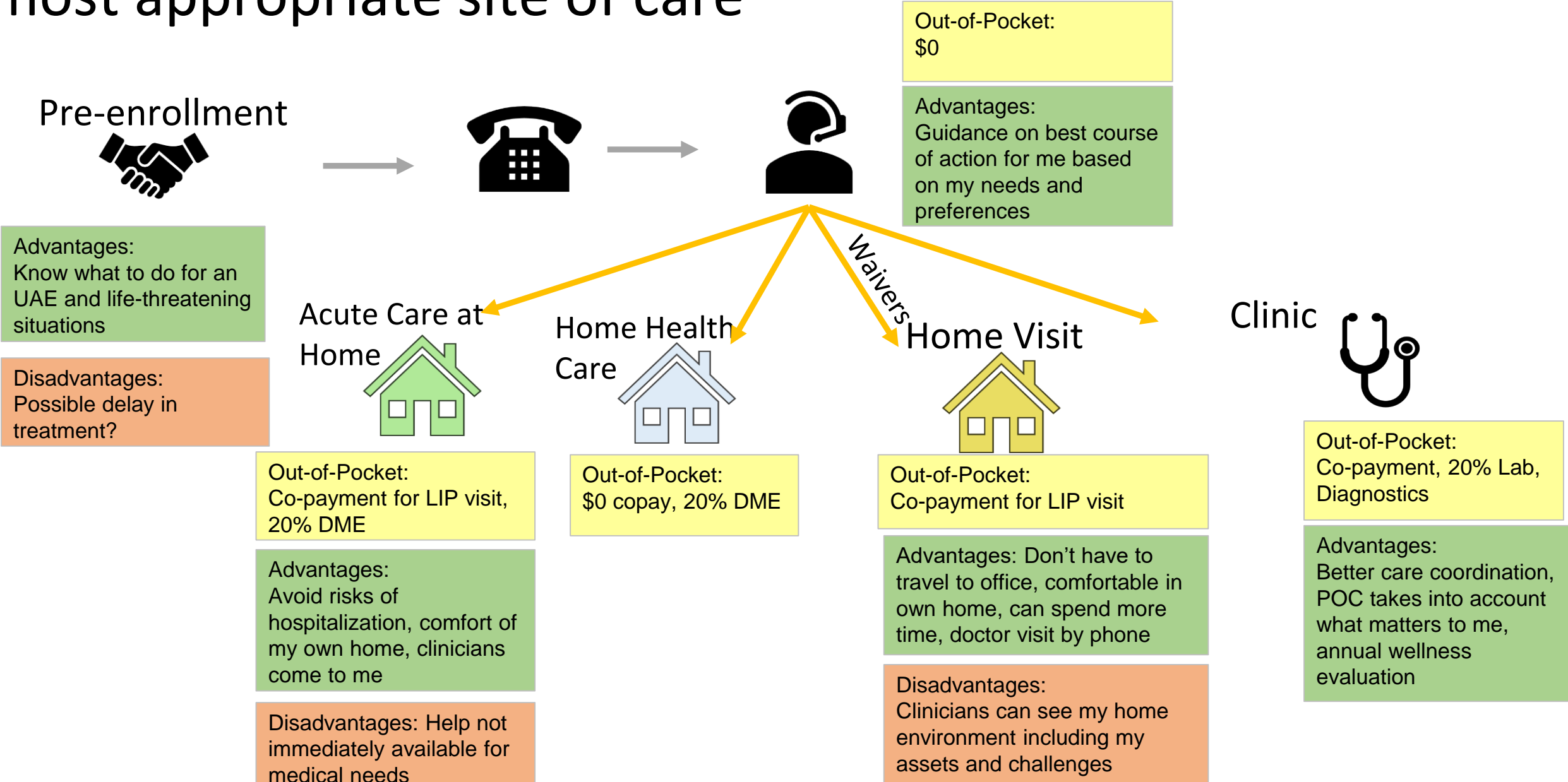
Out-of-Pocket:  
Responsible for all  
charges d/t no 3 day  
hospital stay

Disadvantages:  
Significant expense to  
patients, unfamiliar  
environment, exposure  
to MDRO infection

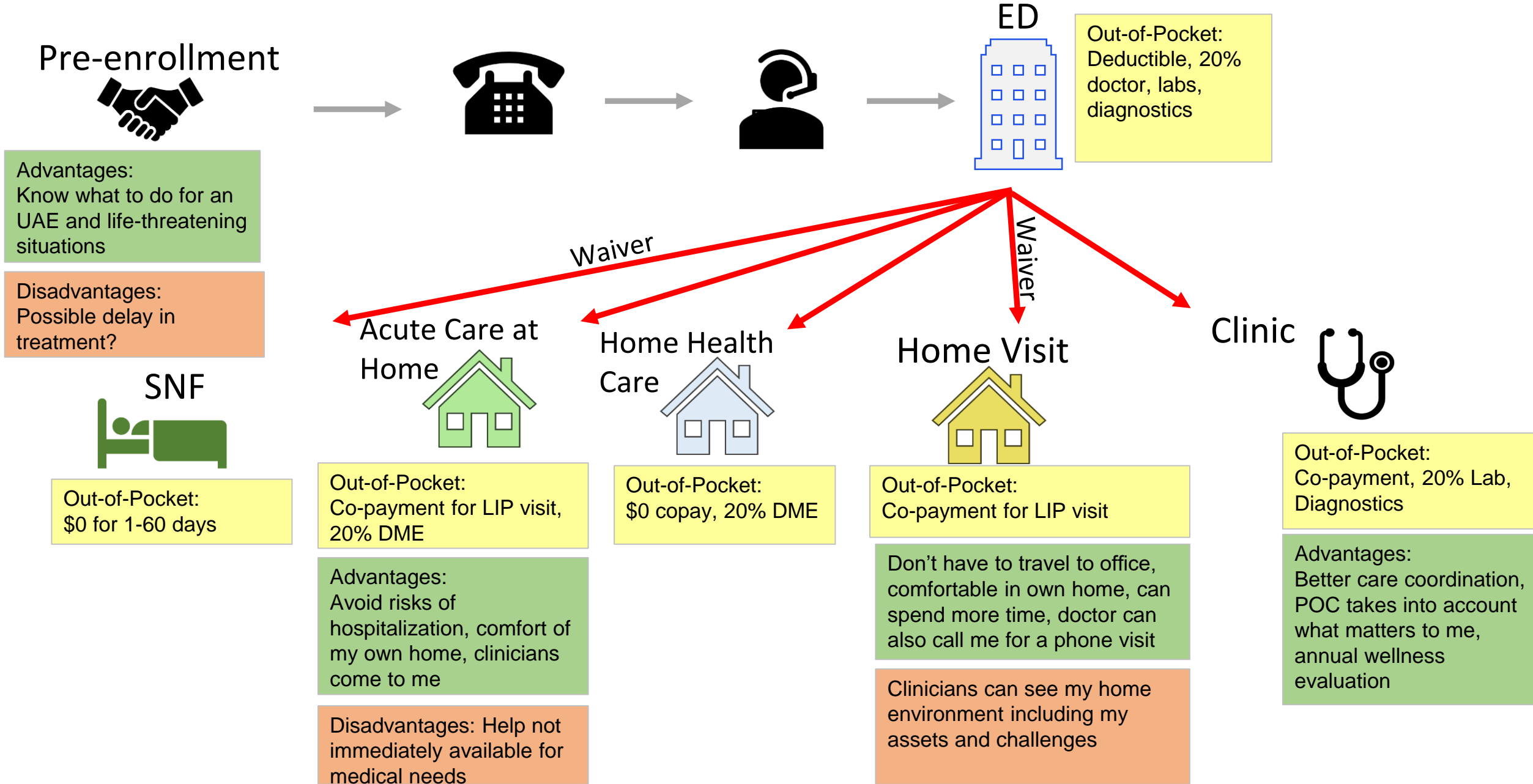
# Current State C = (911) + ED + Observation + Hospital



# Future State 1 = No 911, No ED, No Hospital, Triage to most appropriate site of care



# Future State 2 = No 911, +ED Only



# Future State 2 = No 911, +ED Only

