PAYER ROI ONE-PAGER

Earlier palliative & ACP engagement: cited figures for the payer conversation

A printable one-pager for the value-based-care conversation: four cited figures ICU-day reduction, per-admission cost avoidance, less aggressive end-of-life care, and family caregiver-burden detection followed by the why-now context and a path to a 30-minute partnership call.

FIGURE 01

25-30%

Reduction in ICU days in the last 6 months of life

Palliative care consultation in the ICU is consistently associated with shorter ICU length-of-stay and fewer terminal ICU admissions.

Source: Khandelwal et al., Health Affairs 2016.

FIGURE 02

~$2,500

Net per-admission cost reduction when palliative care is consulted

Across eight U.S. hospitals with mature palliative programs, mean net savings of $2,500-$3,000 per admission for patients who died in the hospital.

Source: Morrison et al., J Palliat Med 2011.

FIGURE 03

~50%

Less aggressive end-of-life care for early-palliative patients

In the landmark RCT of early outpatient palliative care for metastatic NSCLC, significantly lower rates of aggressive end-of-life treatment.

Source: Temel et al., NEJM 2010.

FIGURE 04

ZBI-12

Validated family caregiver-burden screening

Family caregiver burnout drives avoidable inpatient utilization; routine ZBI-12 screening surfaces high-burden families before crisis.

Source: IOM, Dying in America 2014.

CMS GUIDE and related value-based models are paying for what advance care planning has always promised: fewer unwanted ICU stays, fewer readmissions, earlier hospice enrollment. GentleHorizon delivers that surface privately via localStorage no PHI leaves the device, no BAA required, and adoption friction drops from enterprise pilot to send the URL.

PARTNERSHIP READY?

Send the case for a 30-minute payer call.

Bring the cited figures to your value-based-care or hospice strategy lead. We will walk through every number on the call.

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ON THE WEB

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