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Category: Cost reduction (Processes to reduce health care expenditures)

Title: Implementation of an Atrial Fibrillation Clinic Leads to Substantial Cost Savings Through Reduction in Use of Emergency Department Services: A Single Center Experience

ABSTRACT BODY

Background:
Atrial fibrillation is the most commonly encountered arrhythmia. Treatment of AF places a significant burden on the healthcare system. An estimated $6 billion is spent in the US annually on AF treatment, 50% of which is allocated to emergency department (ED) and inpatient care. Access to timely outpatient care in a dedicated AF pathway may have a substantial impact on healthcare resource utilization.

Methods:
The Atrial Fibrillation Clinic at XXXX was initiated in September 2019. The primary goal of this clinic is to reduce utilization of ED and inpatient services by providing an outlet for AF patients to seek acute evaluation and treatment in an outpatient setting. The clinic is staffed 5 days per week by an electrophysiology advanced practice provider (APP).

We created evidence-based pathways for both ED and outpatient providers intended to stabilize patients until they can be evaluated. Nurses triage and schedule patients to be seen within 24 to 48 hours from the time of the referral. Patients are evaluated by an APP who determines an appropriate treatment plan, including a consideration for same day intervention.

Results:
Over 12 months 492 patients were referred for management of acute symptomatic atrial fibrillation. 61 patients were referred from the ED using our low risk AF protocol and 431 were referred from outpatient providers using an outpatient provider protocol. We estimate $593,056 in variable cost savings from the reduction in use of emergency services. 255 same day interventions were performed, including TEE, cardioversion, and ablation.

Conclusions:
Acute evaluation and treatment of AF patients through a dedicated pathway has the potential to substantially reduce the cost of care to the healthcare system. This should be accomplished through a multidisciplinary approach including nursing, advanced practice providers, and physicians. The development of evidence-based pathways for use by emergency department and outpatient healthcare professionals can standardize therapy for this population. Educating and empowering patients with the knowledge of how and when to seek care is imperative to success.

Clinical Implications: realize cost savings in their patient population by implementation of an Atrial Fibrillation clinic.