



# How to Successfully Navigate Cardiovascular Trends

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CE Credit Deadline: 09/30/24



# How to Successfully Navigate Cardiovascular Trends





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## **Learning Objectives**

At the end of this session, participants should be able to:

- 1. Recall new technologies and trends within the cardiovascular space
- 2. Identify best practices and barriers to adopting new technologies within the cardiovascular space
- 3. Recognize strategies for partnering with multiple stakeholders, including physicians and hospital executives to drive change



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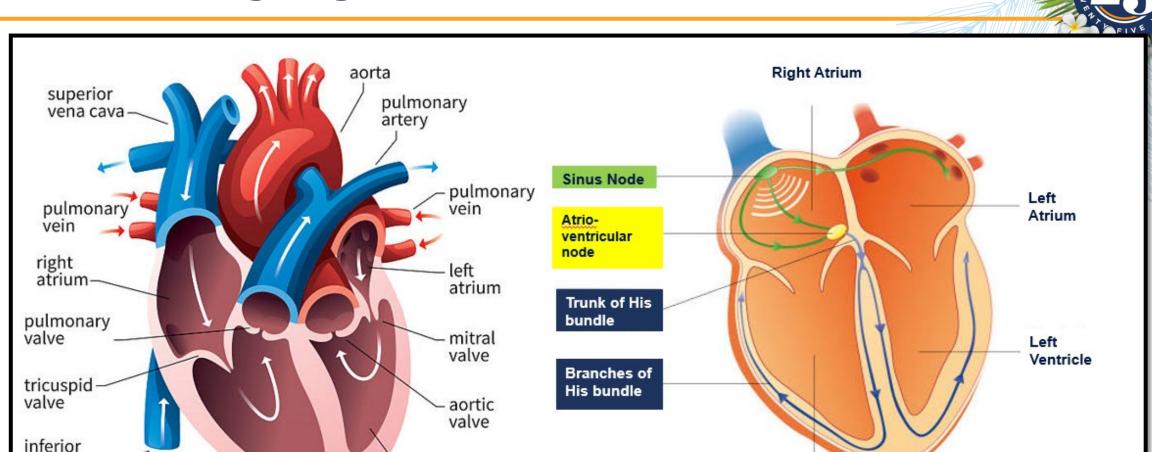
# **OVERVIEW**

Clinical Highlights
Cardiovascular Trends



# Clinical Highlights: Cardiac Structure

left ventricle



Sources: (2024) Image licensed to HCA Healthcare by Getty Images (#598167278, 151047531)



right ventricle

**Right Ventricle** 

vena cava

### **Cardiovascular Trends**

- Healthcare financials are recovering...for the most part<sup>1</sup>
- Outpatient and short-stay procedures are leading the margin recovery<sup>1</sup>
- 40% of hospitals still lose money<sup>1</sup>
- Industry/Service-Line trends
  - Since 2015, 192 Cardiovascular devices have received "Breakthrough" designations, next highest is Neurology (161)<sup>2</sup>



Sources: 1) The Numbers Behind the National Hospital Flash Report | Kaufman Hall. (2024, February 21), https://www.kaufmanhall.com/insights/thoughts-ken-kaufman/numbers-behindnational-hospital-flash-report Accessed 6/24/2024; 2) Breakthrough Devices Program. (2024, March 21). FDA. https://www.fda.gov/medical-devices/how-study-and-market-yourdevice/breakthrough-devices-program#metrics Accessed 6/24/2024; 3) Costs of caring | AHA. (2024, August 5). American Hospital Association. https://www.aha.org/costsofcaring#:~: text=Hospital%20Supply%20Costs&text=Comprising%20approximately%2010.5%25%20of%20the,data%20from%20Strata%20Decision%20Technology. Accessed 8/8/2024



# INFLUENCING TECHNIQUES



# **Poll Question: Shifting Practice**

Poll Question: When implementing a practice change, the resource I leverage the most is:

- A. Chief Medical Officer | Physician Stakeholder
- B. Service Line Medical Director
- C. Evidence-based clinical data
- D. Vendor education | clinical specialist
- E. Financial pro forma



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### **Clinical Overview: TAVR**

- Criteria: Transcatheter aortic valves are stented, biologic valves used to replace diseased, damaged or malfunctioning native or prosthetic aortic heart valves through a catheter<sup>1</sup>
- Evidence: Transcatheter or Surgical Treatment of Aortic-Valve Stenosis – Among patients with severe aortic stenosis at low or intermediate surgical risk, TAVR was non-inferior to SAVR with respect to death from any cause or stroke at 1 year<sup>2</sup>
- Trend: Level I study sponsored by vendor advocating for technology



Sources: (2024) Image licensed to HCA Healthcare by Getty Images (#2152060057); (2024) Randomized Controlled Trial, N Engl J Med. 2024 May 2;390(17):1572-1583. doi: 10.1056/NEJMoa 2400685. Epub 2024 Apr 8.

### **Scenario: TAVR**

#### Partnering with vendor to provide continuous education opportunities

- Scenario: Shifting from higher cost impact legacy device to lower cost newer device with supporting clinical evidence
- Technique: Partnering with vendor to provide continuous education opportunities
  - Champion awareness of vendor clinical trial results
  - Establish lower cost option as primary valve for all new programs based on clinical evidence
  - Require an exception form be completed to identify clinical indications for non-preferred option
- Results: Historical shift from legacy vendor 75–85% to 35–40% current state



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### Clinically Driven

Physician Collaboration

Develop Tracking Mechanism

### Scenario: TAVR Exception Form

**Establishing Clinical Guidelines for Selection** 

 Understanding the Indications for Use between valve options

 Risk factors associated with re-access or needs for re-intervention

CONFIDENTIAL - Contains proprietary information.

Not intended for external distribution.

Anatomical differences

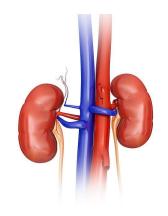


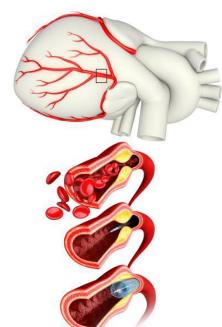
## **Poll Question: New Technology**

Poll Question: The primary way I balance the cost of new technology with the clinical demand is (e.g., AI, proprietary system requirements):



- B. Pressure based on physician interest
- C. Implement off-set cost savings initiative
- D. Reduction through standardization



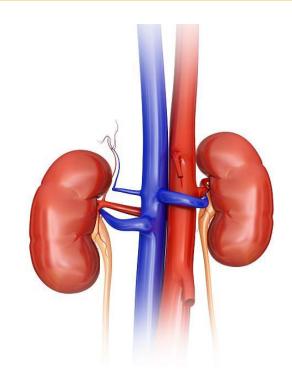






### **Clinical Overview: Renal Denervation**

- Criteria: Renal Denervation Systems are used to ablate sympathetic nerve endings attached to the renal artery to reduce blood pressure in hypertensive patients.
- Evidence: Cost effectiveness of Endovascular Ultrasound Renal Denervation in patients with Resistant Hypertension Endovascular ultrasound RDN with the Paradise system offers patients with rHTN, clinicians, and healthcare systems a cost-effective treatment option alongside antihypertensive medication<sup>2</sup>
- Trend: Level III study sponsored by vendor advocating for technology



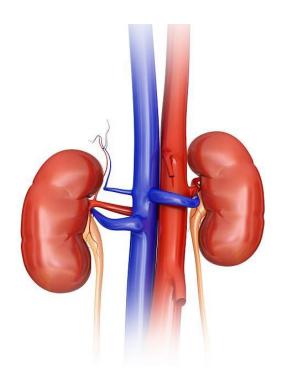
Sources: (2024) Image licensed to HCA Healthcare by Getty Images (#590279157); Vendor Sponsored: Pharmacoecon Open. 2024 Jan 30. doi: 10.1007/s41669-024-00472-z. Online ahead of print.



### **Scenario: Renal Denervation**

Using clinical evidence with financial pro forma to determine adoption strategy

- Scenario: New technology (FDA) offering for renal denervation that has physician interest
- Technique: Using clinical evidence with financial pro forma to determine adoption strategy
  - Two primary vendors relaunching or offering new products
  - Current reimbursement guidelines suggest more caution is needed before launching
- Results: Partnered with interested physicians on "pausing" request to develop program infrastructure (e.g., hypertension clinics) while waiting for the reimbursement landscape to mature

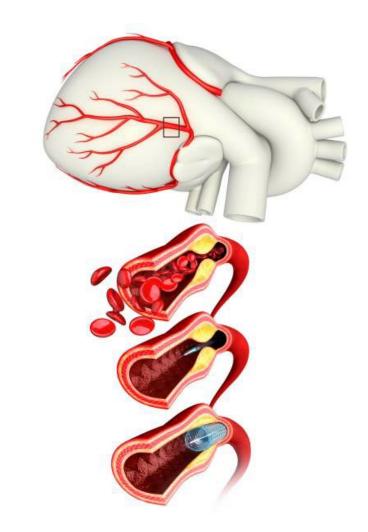


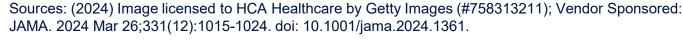
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### Clinical Overview: Drug-coated Balloon (Coronary)

- Criteria: Drug-coated balloon percutaneous transluminal coronary angioplasty (PTCA) catheters are used for treating in-stent restenosis (ISR) and small vessel diseases.
- Evidence: Paclitaxel-Coated Balloon vs. Uncoated Balloon for Coronary In-Stent Restenosis: Randomized Clinical Trial
  - Among patients undergoing coronary angioplasty for in-stent restenosis, a paclitaxel-coated balloon was superior to an uncoated balloon with respect to the composite end point of target lesion failure.
  - Paclitaxel-coated balloons are an effective treatment option for patients with coronary in-stent restenosis.<sup>2</sup>
- Trend: Level I study sponsored by vendor advocating for technology



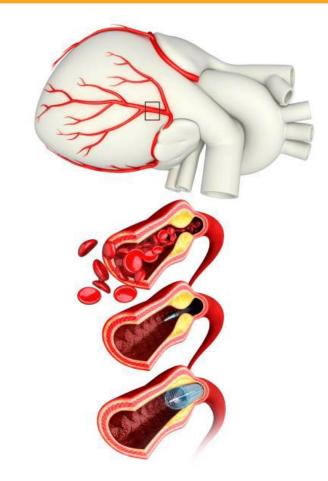




# Scenario: Drug-coated Balloon (Coronary)

Using physician-led committees to establish protocols for use

- Scenario: New technology (FDA) offering for percutaneous coronary intervention utilizing Paclitaxel-Coated Balloon Catheter
- Technique: Using physician-led committees to establish protocols for use
  - Establish and engage with Clinical Value Analysis Committees
- Results: Committee agreed to endorse the following considerations for use:
  - Treatment site selection.
  - Focused patient population
  - Governance/Oversight



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# Organizational Chart: Cardiovascular



#### **Cardiovascular Executive Governance Committee**

#### **Clinical Value Analysis Team**

- Cadence: Every other month
- Scope: New technology; cost containment opportunities

#### Interventional Cardiology

- Cadence: Quarterly
- Scope: Quality; growth: operational workflow; clinical pathways; outreach opportunities

#### Surgery

- Frequency **TBD**
- Scope: Quality; **OBPA** metrics: growth; operational workflow; clinical pathways; outreach opportunities

#### EP

- Quarterly
- Scope: Quality: growth; operational workflow improvement; clinical pathways; PSG/hospital integration; outreach opportunities

#### **Heart Failure**

- Quarterly
- Scope: Operational KPIs; workflow improvement; growth; quality; staffing; outreach locations

#### **Imaging**

- Quarterly
- Scope: Operational KPIs: workflow improvement; growth; quality; staffing: outreach locations



### Clinical Overview: Pulse Field Ablation (PFA)

- Criteria: Pulsed Field Ablation (PFA) generators use non-thermal, selective ablation through irreversible electroporation to treat cardiac arrhythmias
- Evidence: FDA indications are for PVI (pulmonary vein isolation) and Paroxysmal AFib (intermittent, not chronic)
- Trend: Level II evidence reinforcing early excitement on PFA adoption vs. current ablation technologies



# Scenario: Pulse Field Ablation (PFA)

Using excitement of new technology to leverage off-setting initiatives

- Scenario: New technology (FDA) for cardiac ablations. Overwhelming EP physician interest (and previous participation in studies prior to FDA approval)
- Technique: Using excitement of new technology to leverage off-setting initiatives
  - Partner with facility leadership and physicians to re-focus cost reduction strategies
  - Partner with physicians on increasing volume and through additional off-setting cost initiatives to overcome margin erosion

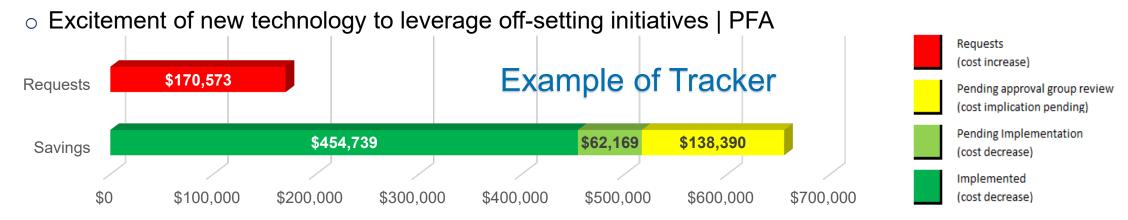
#### Results.

- Clinical governance and executive stakeholders accountable to the roll-out plan
- Aligned with FDA clinical indications
- o (Aggressively) working through off-setting cost initiatives to be implemented



# **Summary**

- CV technology trends over the last six to nine months
- Identify and utilize techniques
  - Vendor relationships | TAVR
  - Clinical evidence with financial pro forma | renal denervation
- Message financial impact through leveraging physicians, vendors and existing governance structures
  - Physician-led committees to establish protocols for use | drug coated balloon (coronary)



Source: (2024) Example Made in Excel



### Resources

#### CV Trends:

https://www.kaufmanhall.com/insights/thoughts-ken-kaufman/numbers-behind-national-hospital-flash-report https://www.fda.gov/medical-devices/how-study-and-market-your-device/breakthrough-devices-program#metrics https://www.kaufmanhall.com/insights/thoughts-ken-kaufman/numbers-behind-national-hospital-flash-report

#### TAVR:

https://hcahealthcare.ovidds.com/logging/outgoing?url=https%3A%2F%2Fpubmed.ncbi.nlm.nih.gov%2F38588025&key=08420800-4bae-4239-b3ae-1d7a1e94c5af

#### **Renal Denervation:**

https://hcahealthcare.ovidds.com/logging/outgoing?url=https%3A%2F%2Fpubmed.ncbi.nlm.nih.gov%2F38289517&key=87f586fa-8b3b-4865-92f0-ffb73be9f084

#### **Drug-Coated Balloon (Coronary):**

https://hcahealthcare.ovidds.com/logging/outgoing?url=https%3A%2F%2Fpubmed.ncbi.nlm.nih.gov%2F38460161&key=e79cc1d9-8280-4476-b520-8bcce57b4311

#### **Pulse Field Ablation (PFA):**

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https://hcahealthcare.ovidds.com/logging/outgoing?url=https%3A%2F%2Fpubmed.ncbi.nlm.nih.gov%2F38525525&key=a83c2abad036-45f0-9bed-5489ab146100

#### **Pictures:**

https://www.gettyimages.com/search/2/image?alloweduse=availableforalluses&agreements=pa%3A183898&family=creative&phrase=h eart%20valve&sort=best&mediatvpe=illustration&assetfiletvpe=







# Thank You