

Health Care Growth Strategies

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PVD Undiagnosed and Untreated in Millions of Americans

Peripheral vascular disease (PVD) is a condition that restricts blood flow to extremities, and when left untreated, can lead to amputation. The most frequent cause of PVD is atherosclerosis, generally known as hardening of the arteries. PVD is also a marker for more serious vascular and cardiac conditions, such as aneurysms and coronary disease.

Various sources estimate that there are eight to 10 million Americans with PVD, with this number expected to increase to 12 million by 2020. However, PVD is significantly underdiagnosed and undertreated. Only 40 percent of PVD cases are symptomatic. Furthermore, 75 percent of symptomatic cases go undiagnosed, meaning that only 10 percent of the population with PVD receive treatment.

Growth and Revenue Opportunities: PVD Screening Programs

Screening programs for health conditions such as high blood pressure and high cholesterol have been popular approaches for educating the public on health issues and increasing awareness of a health care organization's services. A PVD screening program has the potential for broad appeal among men and women, baby boomers, and seniors, particularly in communities that have responded favorably to other screening and prevention programs. PVD risk factors include being over the age of 50, smoking, having diabetes, being overweight, not exercising, and having high blood pressure and high cholesterol.

Legs for Life, a national PVD screening program, reports that 30 to 50 percent of those screened are referred for additional tests and procedures, which translates into hundreds of patient referrals for additional diagnostic and treatment services. Follow-up services for PVD include potentially high-margin services such as bypass surgery, angioplasty, contrast and magnetic resonance angiography, stents, and thrombolytic therapy, which generate volume for interventional radiologists, vascular surgeons, and cardiologists.

The potential direct, indirect, and downstream revenue resulting from PVD screening make it a financially attractive program that will benefit patients suffering from a previously untreated illness.

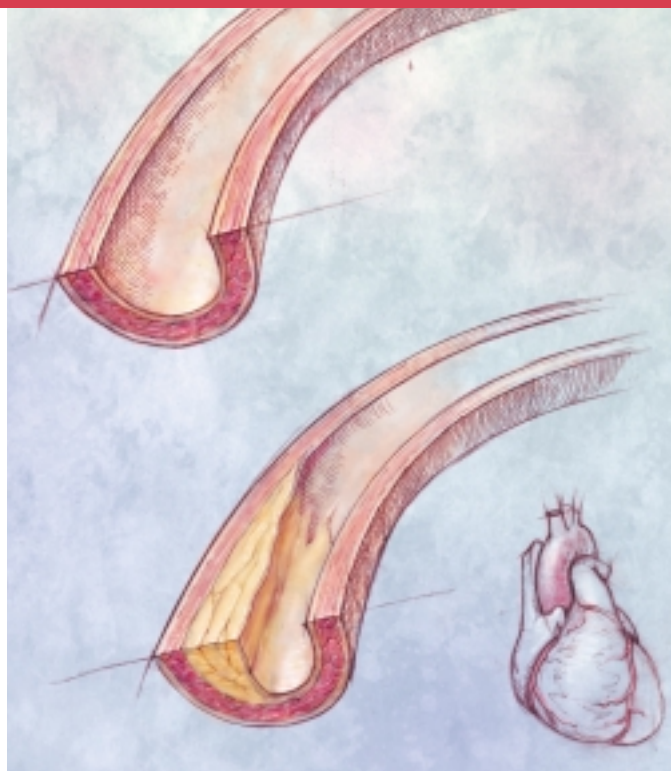
As reported in the July/August issue of *Spectrum*, the average Medicare contribution margin for vascular DRGs is more than 30 percent, which is comparable to

[continued on next page](#)

Peripheral Vascular Disease Symptoms

- Leg or hip pain during walking that stops when you rest
- Numbness, tingling, or weakness in the legs
- Burning or aching pain in feet or toes when resting
- Sore on leg or foot that will not heal
- Cold legs or feet
- Color change in skin on legs or feet
- Loss of hair on legs

Source: Society for
Interventional Radiology



the margins for cardiac services. One community hospital in the Midwest saw a first-year return on investment of approximately 3:1 on their PVD screening program.

A PVD screening program can be marketed as a component of a product line or center of excellence, such as vascular surgery or cardiovascular services. The program can also be marketed as part of a disease-specific program (e.g., a stroke center) or broader services aimed at a specific population group (e.g., senior services). Before starting a PVD screening program it is important to develop a clinical program plan or business plan for the PVD product line to ensure that the necessary resources and services are in place to support the additional volumes.

PVD is a notably underdiagnosed and undertreated health condition. Offering a screening program is an excellent approach for identifying potential PVD patients, providing necessary services for patients at risk for developing serious health problems, and enhancing revenue through referrals for additional services.



Above l to r: Craig Holm, Alan Zuckerman, and Hugo Finarelli

For more information on PVD screening programs, please contact one of our directors:

Craig E. Holm, CHE, CHC
cholm@hss-inc.com

Hugo J. Finarelli, Ph.D., CHC
hfinarelli@hss-inc.com

Alan M. Zuckerman, FACHE, FAAHC
azuckerman@hss-inc.com

HEALTH STRATEGIES & SOLUTIONS, INC.

1429 Walnut Street, Suite 200
Philadelphia, Pennsylvania 19102
(215) 636-3500
hss-inc.com

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HEALTH STRATEGIES & SOLUTIONS, INC.

1429 Walnut Street, Suite 200
Philadelphia, Pennsylvania 19102



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