

# Costs Associated with Escalating Need for Hospital-petitioned Public Guardianship

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## Background

- Obtaining public guardianship is a complex process for hospitals, and it is associated with direct and indirect costs that have not been well described.<sup>1</sup>
- Public guardianship is initiated when patients are unable to demonstrate decisional capacity, do not have an advance directive, and lack a health care proxy or surrogate decision-maker.
- After identifying and reviewing 156 public guardianship cases at a large, tertiary care, urban, academic medical center, simple statistical summaries were created for the data.
- Using national average costs for inpatient hospital stays<sup>2</sup>, we estimate the institutional costs for unnecessary hospital days associated with guardianship.

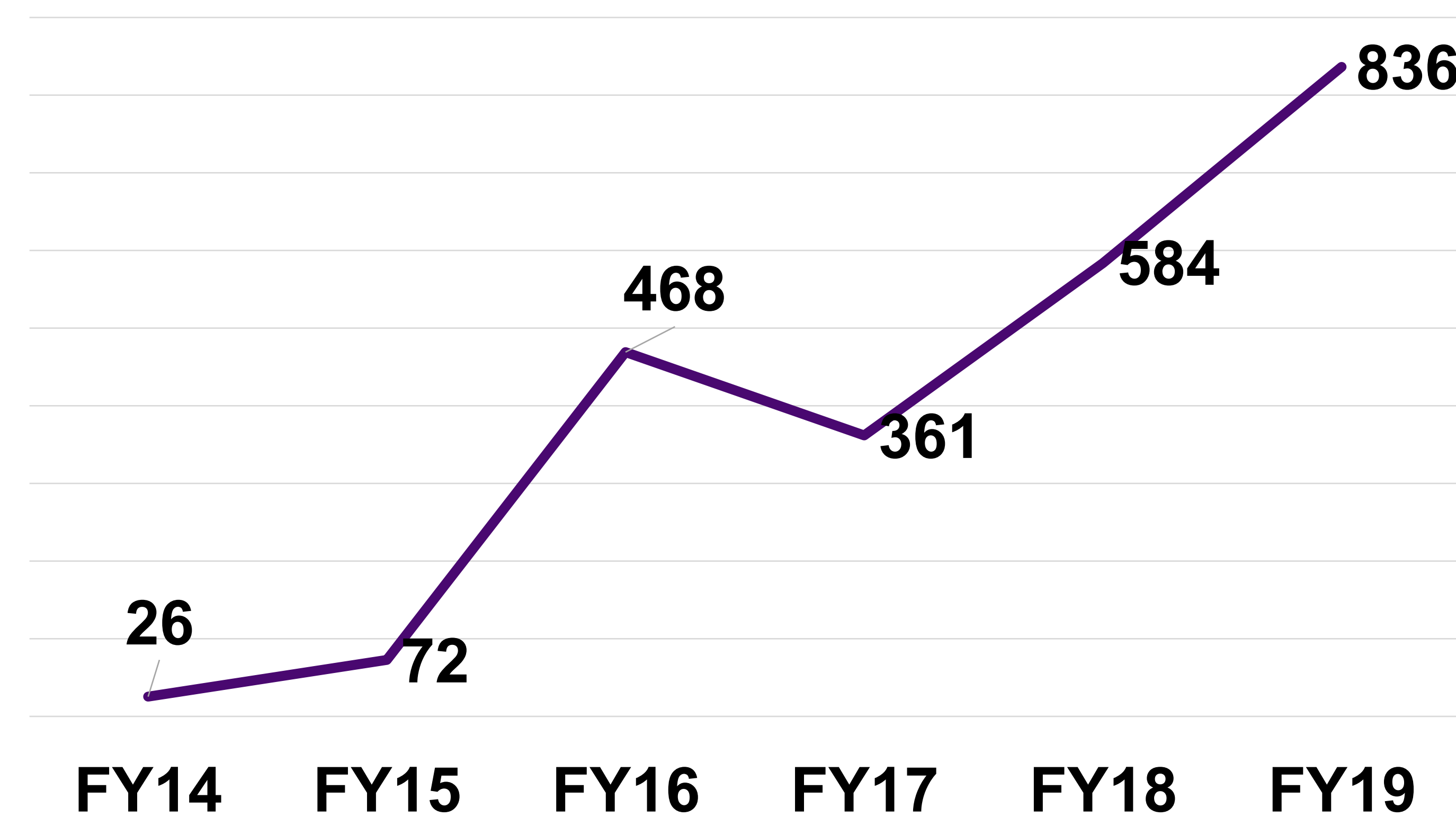
## Methods and Results

A retrospective chart review of patients admitted to Northwestern Memorial Hospital's medical or surgical floors for whom the hospital petitioned for public guardianship in fiscal years 2014-2019 was performed. The Quality and Patient Safety committee approved chart review and data collection. Data were de-identified and coded for statistical analysis.

Demographic factors, hospitalization details, and delays in processes of care were examined. Specifically, progress notes were analyzed to find process-level data, such as when guardianship was first considered, when guardianship was petitioned, when guardianship was awarded, when patients were deemed "medically cleared," etc. Excel was employed for summary statistical analysis.

Medically unnecessary days were defined as the difference between date of discharge and date when the term "medically cleared" appeared in progress notes. This number was multiplied by national average cost data to estimate institutional costs for medically unnecessary hospital bed days in this population.

**Total Patient Days of Hospitalization After Medical Clearance**

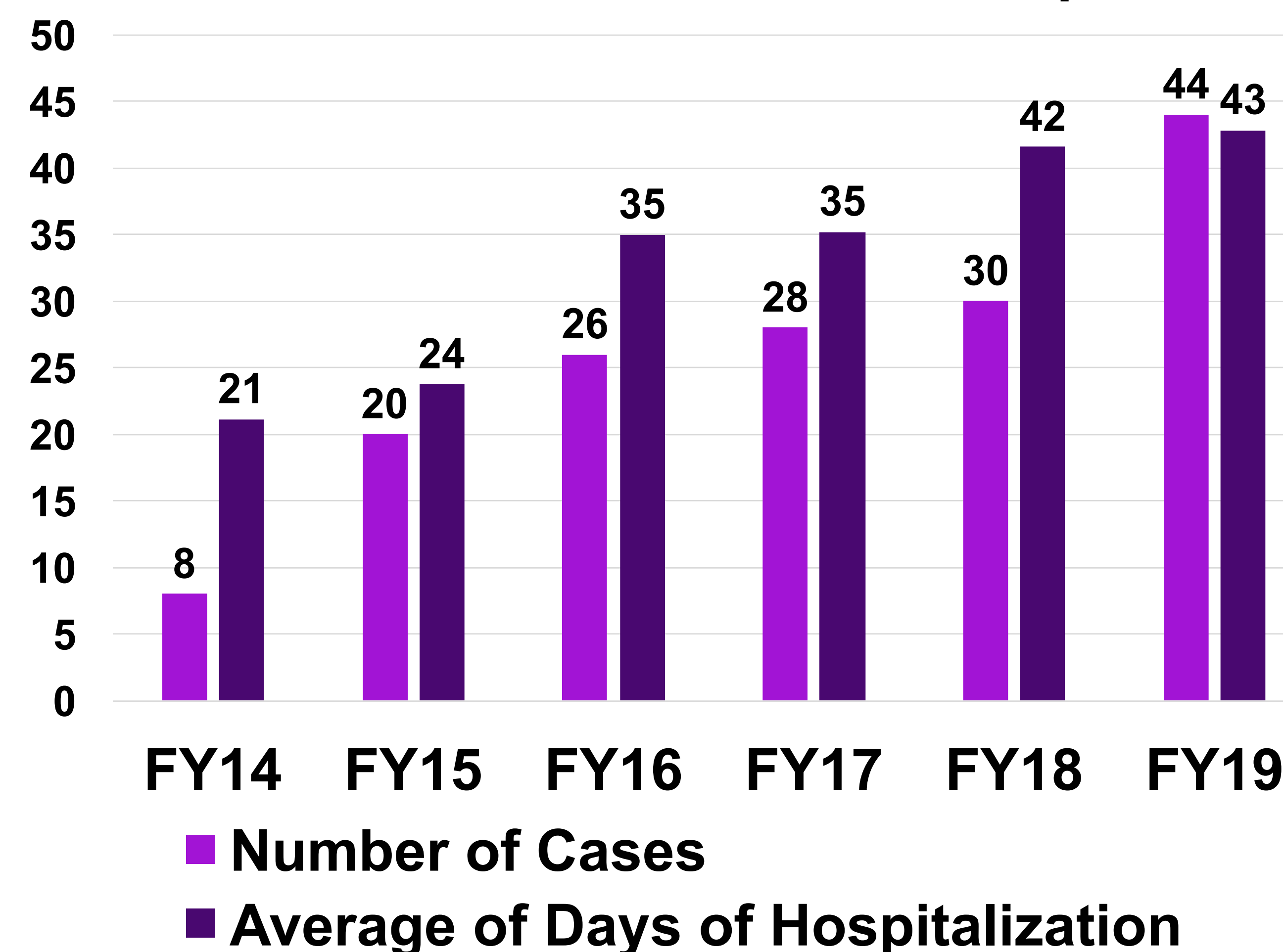


**\$2,488** US Average Nonprofit Hospital Expense Per Inpatient Day (an estimate of all operating and non-operating expenses)<sup>2</sup>

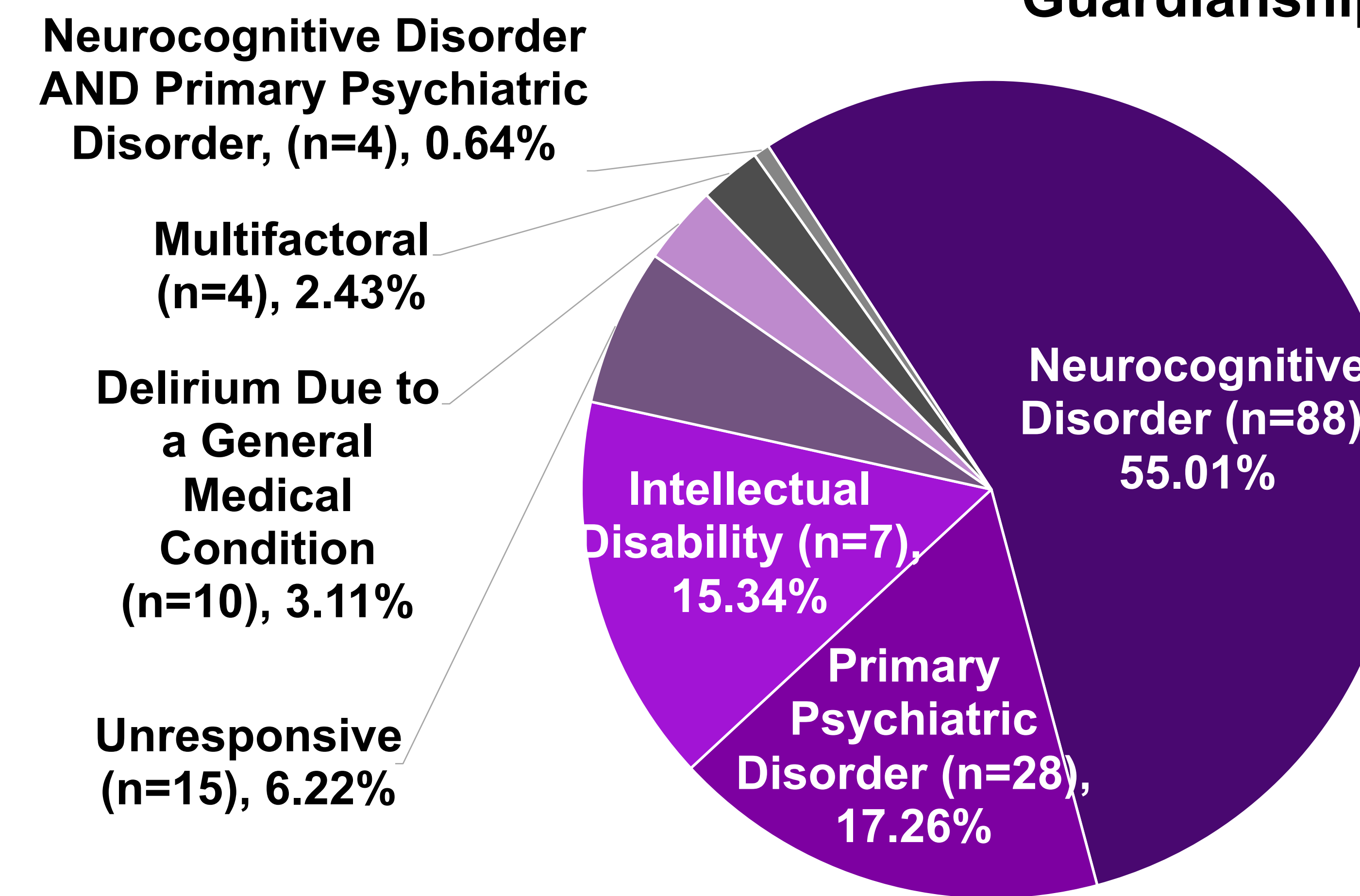
**\$5,839,336**  
*Estimated Costs of Medically-Unnecessary Hospitalization Days at Northwestern (FY14-19)*

**\$2,079,968**  
*Estimated Costs of Medically-Unnecessary Hospitalization Days at Northwestern (FY19)*

**Number and Length of Admissions Associated with Guardianship**



**Total Medically-Unnecessary Days of Hospitalization, by Reason for Guardianship**



## Discussion

- Guardianship is an arduous process for hospital systems and patients associated with increased costs, particularly due to medically unnecessary hospital bed-days.
- The number of total medically unnecessary days at our institution has increased by a factor of 30 over the past 6 years. This rise burdens health systems and impacts the community through reduced hospital availability.
- Within our institution, neurocognitive disorders, psychiatric disorders, and intellectual disability generated the highest volume of medically unnecessary days of hospitalization. These days led to a total estimated cost of more than \$5.8 million over the past 6 years and over \$2 million in the last year alone. Average daily hospital expense for the US was used both because national (rather than state-level) data is more externally valid and because actual institutional cost data is proprietary. This analysis did not account for several additional costs, such as legal fees, etc., that would likely increase these estimates.

## Implications

Consultation-liaison psychiatrists play an important role in in-hospital public guardianship cases. Accordingly, they are uniquely poised to affect positive change in this process. More institution-specific work could help identify unique challenges and cost drivers associated with this phenomenon.

## References

1. Chen, J. J., et al. (2016). "Discharge delays for patients requiring in-hospital guardianship: A cohort analysis." *Journal for Healthcare Quality* 38(4): 235-242.
2. Ellison, A. (2019). "Average hospital expenses per inpatient day across 50 states." *Becker's Hospital CFO Report*. Accessed on Aug 24, 2020 from <https://www.beckershospitalreview.com/finance/average-hospital-expenses-per-inpatient-day-across-50-states.html>.