Reducing the Financial Burden of Oral Nutrition Supplements

Creating a Pathway for Coverage

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Introduction

Patients who are malnourished, underweight, have poor oral intake, difficulty swallowing, or wounds may require oral nutrition supplements (ONS).

ONS are ready-to-drink liquids or other products that are typically used along with food/meals to provide additional calories, protein and other nutrients.

Dietitians may recommend ONS for people who are struggling to meet their nutritional needs through their usual dietary intake because they have been shown to have a beneficial effect on caloric intake and body weight (1-2).

However, the cost of ONS can be a financial burden for some patients that causes them to avoid purchasing or limiting the amount of ONS they consume.

Prior to this project if outpatients and providers requested assistance paying for ONS, dietitians did not have guidelines on how to assist because insurance coverage can be limited because some insurance carriers will cover it and others will not, and complicated because the varied requirements and steps to get coverage. Therefore pursuing coverage with the outpatient dietitian department was rare.

Barriers to getting insurance coverage for ONS included: A general misconception that ONS was not covered by any insurance companies; No relationships with Durable Medical Equipment (DME) Providers that supply ONS; a lack of understanding of how to request coverage from the DME Provider; unknown best practices on how to have the teams write the prescription for ONS.

References:

- 1) Li M, Zhao S, Shuang W, Yang X, Feng H. Effectiveness of oral nutritional supplements on older people with anorexia: a systematic review and meta-analysis of randomized controlled trials. Nutrients. 2021;13(3):835.
- 2) Philipson TJ, Snider JT, Lakdawalla DN, Stryckman B, Goldman DP. Impact of oral nutritional supplementation on hospital outcomes. Am J Manag Care. 2013 Feb;19(2):121-8.

Objectives

- Determine the requirements for ONS coverage including standardized criteria
- Create a step-by-step pathway for ONS coverage for the dietitians to use.
- To engage 50% of the outpatient dietitians in the process of referring patients for ONS coverage in 2023
- To obtain ONS insurance coverage for at least 25% of those referred for the year 2023

Addressing the Problem

- ➤ Identified two DME Providers that would be able to work with the dietitians and supply ONS to patients in the MSK network area and determined the exact steps required to obtain coverage.
- > Based on insurance policies that cover ONS, guidelines were created detailing the requirements.
- > The dietitians created workflow and step-by-step instructions.
- > All the outpatient dietitians were given an in-service on the steps required to get coverage for their patients.
- From 1/1/2023-12/2023 the number of outpatient dietitians who tried to get ONS coverage for their patients was determined. In addition, the total number of patients who were referred to DME Providers for eligibility determination, and those who received insurance coverage were determined.

ONS Pathway for Coverage

Patient with one of more of the following criterion:

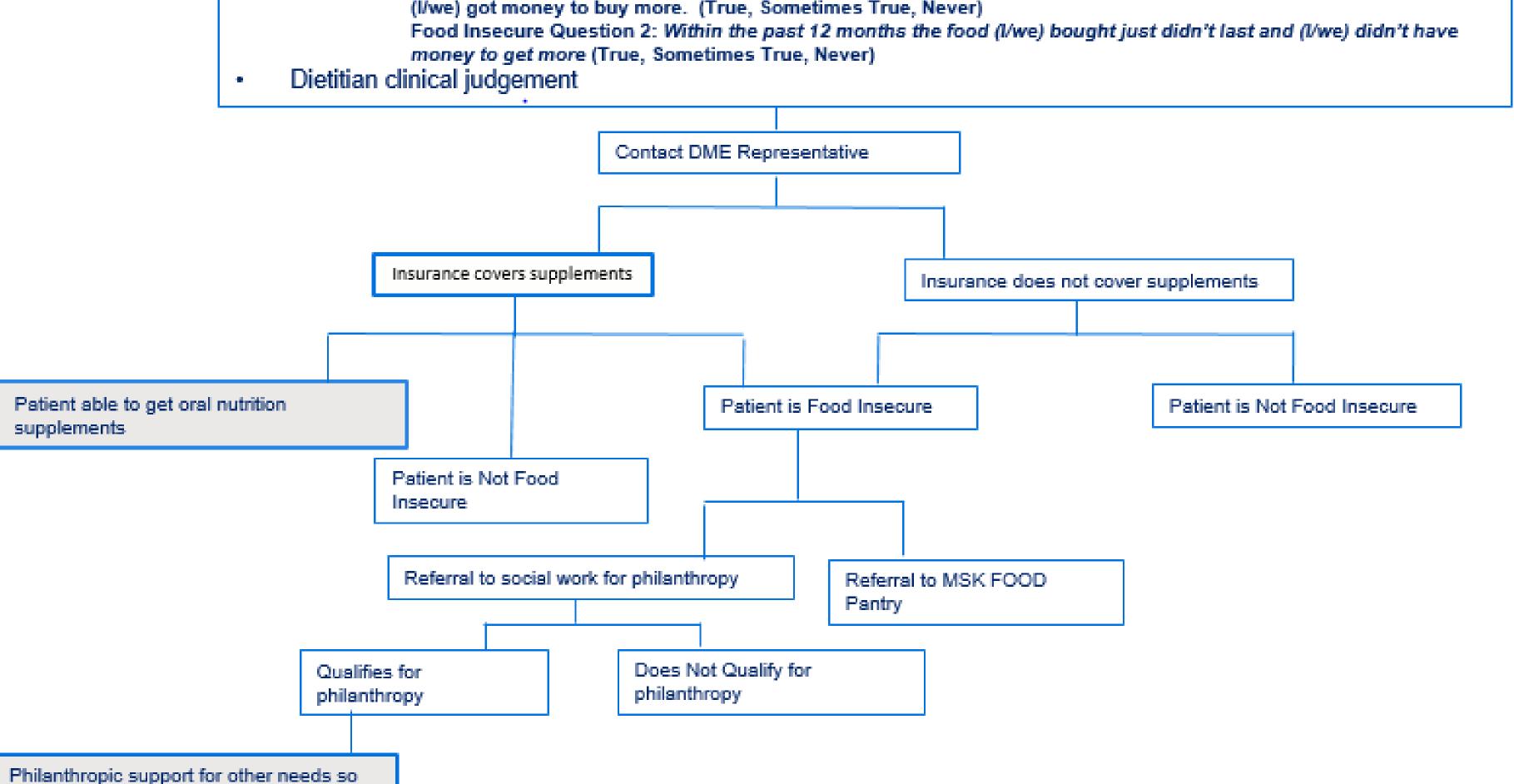
- Weight loss (malnutrition numbers)
- Unable to consume ≥ 75% of Caloric needs with usual diet
- Swallowing difficulty
- Pressure Ülcer
- Food Insecure

now patient able to use own funds to get

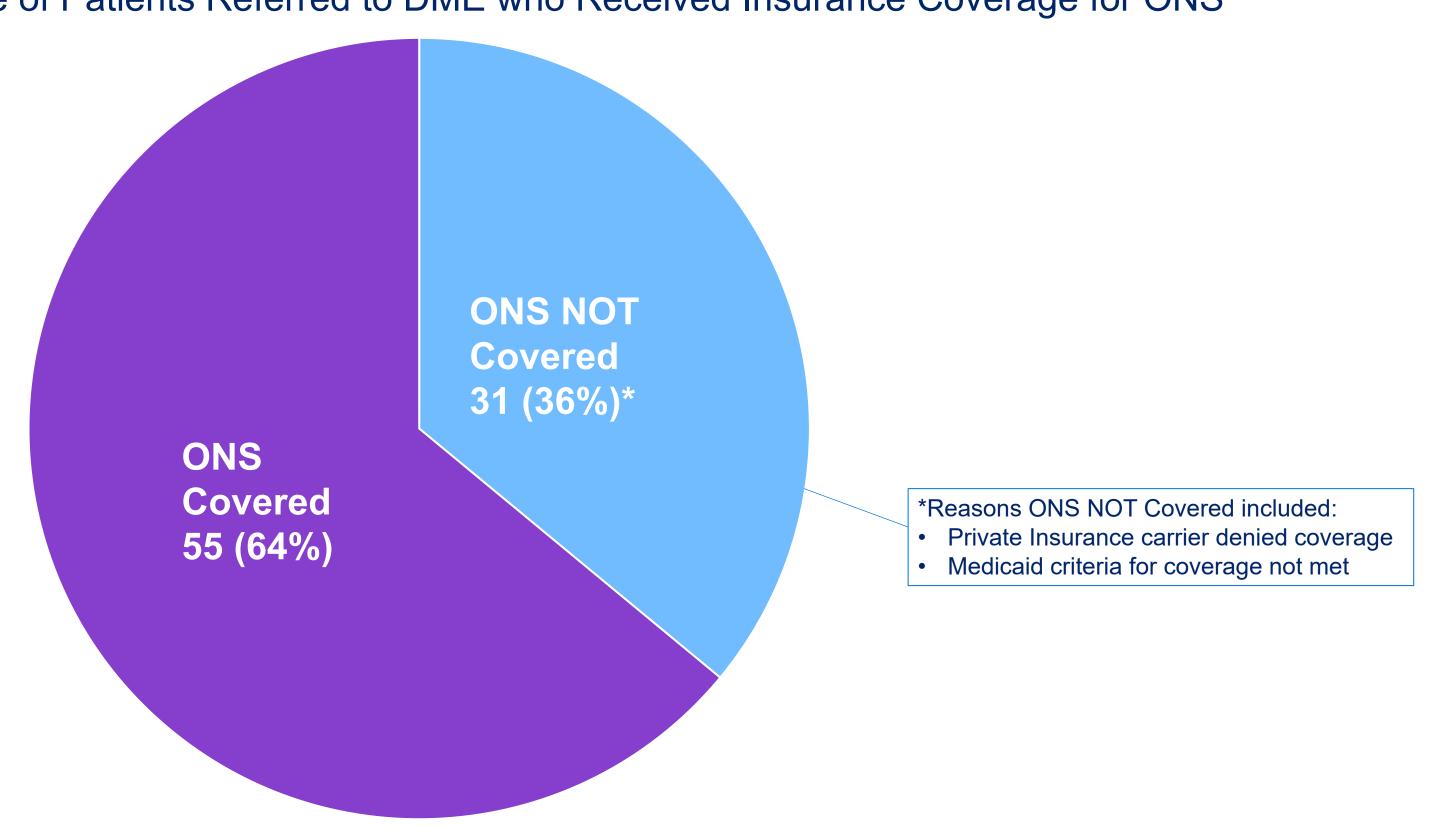
oral nutrition supplements

(Food Insecure Question: 1 Within the past 12 months (I/we) worried whether (my/our) food would run out before (I/we) got money to buy more. (True, Sometimes True, Never)

Food Insecure Question 2: Within the past 12 months the food (I/we) bought just didn't last and (I/we) didn't have



Percentage of Patients Referred to DME who Received Insurance Coverage for ONS



Outcomes

- ➤ Ninety-three percent (15/16) of outpatient dietitians referred at least one patient to determine eligibility for ONS coverage. The outpatient dietitians referred 86 patients to a DME Provider and 64%, 55/86 patients, received coverage for ONS.
- ➤ In addition to assisting with ONS coverage, food insecure patients were always referred to the MSK FOOD pantry for additional support.
- The food insecure patients who did not get covered for ONS, were also referred to social work for financial review to determine if their financial status qualified them for philanthropy. Although philanthropy does not cover ONS, patients could use philanthropic funding for other needs and therefore reducing the financial burden of paying for ONS.
- ➤ In this project, 21 patients who expressed food insecurity were referred by the dietitian to social work to determine philanthropy qualification.

Discussion

- The dietitians far exceeded the goals for obtaining insurance coverage for ONS in this project. The team now has a clear pathway to use to help patients reduce financial burden for ONS when possible.
- ➤ The team learned about the challenges of achieving insurance coverage for some patients. For example, Self-insured companies do not have to cover ONS; Medicare alone does not cover ONS, but if a patient has secondary insurance, it may be covered; Medicaid can cover ONS but only if specific clinical criteria are met.
- ➤ Next steps for this project will be to try to increase coverage of ONS for patients by staying informed about insurance coverage and requirements.
- Additionally, the team will consider how to help patients who are not covered for ONS and who do not qualify for philanthropy but still seek help with ONS. Possible solutions are to have patients pursue obtaining coupons or free samples directly from the ONS companies.

Sustainability Recognition



MSK Core Values Represented









