

Challenge

When Good Samaritan hired Lillybeth Cassel as Director of Acute Care, she brought along her mantra, "I don't negotiate exceptional care." Within a month, she observed the outsourced dialysis program had inconsistent coverage and regularly transferred patients offsite. The expectation was 24/7-on-site coverage. Only by escalating concerns to the outsourced vendor VP, did Lilly learn:

- » Their contract that was coming to an end and not in the process of being renewed. The provider was eliminating outpatient dialysis.
- » A 70% fee increase and Good Samaritan paying for travel nurses was the stipulation for a contract renewal.
- » Good Samaritan had fewer than 60 days to find and implement services with a new dialysis provider.

Solution Good Samaritan chose Rendevor Dialysis as their dialysis provider for its:

Values

"Our success has to do with our partner having the same ideology for taking care of the patients and exceptional service."

Professionalism

"Rendevor was phenomenal. Any information requested was quick and thorough. They offered to have their CFO meet with ours and has set a precedent for being transparent."

Program

- » Within 85 days from initial discovery call, Rendevor Dialysis executed a seamless transition and successful launch to administer insourced dialysis using Good Samaritan's clinical teams.
- Rendevor curated a Collaborative Care dialysis program scaled to the treatment volume, equipment status and budgetary cycle of Good Samaritan.
- Consultancy of on-site and ongoing risk mitigation means the clinical teams can focus on patient care while Rendevor in tandem furnishes policies and procedures, clinical staff training, dialysis supply chain support, quality management and biomedical support.

Results

The Collaborative Care model puts Good Samaritan in control of its program. With the cost-to-treatment ratio of HD and PD optimized, the hospital is poised to launch other modalities like CRT.

Within the first three months of the Rendevor Collaborative Care model implementation:

- >> 90-days from introductions to program launch. (60-day implementation).
- 70% savings by mitigating incumbent markup.
- 3 110% increase of monthly average treatment volume, increasing from 40, to 90 treatments, compared to their former outsourced provider.

Ongoing operational efficiencies and empowerment:

- » Clinical teams are supported, working alongside a knowledgeable, accessible resource.
- » Responsiveness. If maintenance is needed, we have transparency, an action plan and timely communication.

"You know you have the right partnership when things aren't going right but they go smoothly."





Because of the hybrid model, we now operate as a well-orchestrated team with open and two-way communication which leads to greater efficiency and patient outcomes and have staff to grow the program as needed."



Mike Martin

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A partner in any dialysis endeavor.

Many Hospitals are frustrated by the broken model of outsourced dialysis, overwhelmed by their in-house program, or daunted by the capital and compliance required to start and maintain a program.

Rendevor Dialysis meets you where you are. We offer scalable solutions for hospitals navigating the costs and complexities of an on-site program. Your hospital can maintain an on-site dialysis program at the price point and level of independence that serves it best.