

Perioperative Service Line: A Proven Strategy to Maximize Financial Performance

Hospitals and health systems across the country are seeking ways to improve clinical quality, reduce clinical variation, and optimize financial outcomes in surgical services, where operational inefficiencies and fragmented care transitions often create bottlenecks. Many hospitals and their surgical physician partners need to create strong alignment, integration, and transparency in order to truly realize clinical and financial performance.

The solution? **Advance surgical services into a fully integrated perioperative service line.**

This comprehensive model connects ambulatory visits and consults with efficient operating room (OR) or ambulatory surgery center (ASC) surgical scheduling and through post-discharge recovery, creating a seamless and cost-efficient care experience for the hospital, surgeon and patient.

An integrated perioperative strategy aligns **surgical scheduling, preoperative evaluation, surgical operations, and postoperative transitions** into one unified framework. It improves patient outcomes, reduces avoidable costs, and maximizes hospital performance across the surgical episode.

Efficient Scheduling of Surgical Consults in Ambulatory Clinics

The patient's journey begins in the ambulatory clinic. Integrating surgical consult scheduling with perioperative planning ensures that the pathway to surgery is streamlined from the first encounter. With coordinated scheduling, clinics can prioritize surgical readiness, capture relevant documentation early, and align surgeon availability with the OR schedule. This minimizes delays and reduces administrative waste caused by misaligned schedules, incomplete pre-authorizations, or unclear surgical planning.

Robust Preoperative Evaluation for Risk Management and Readiness

Beyond the traditional pre-operative (pre-op) clearance, advanced perioperative evaluations must identify patient-specific risks and proactively plan for them. A robust pre-op program prepares the patient and surgical team and anticipates potential complications that could impact recovery.

In order to identify and understand a patient's inherent risk level, providers must capture HCC (Hierarchical Condition Category) codes and comorbidities that flag risk for extended length of stay or complications, and design tailored post-operative plans. This process begins in the surgeon's clinic and extends through pre-anesthesia testing (PAT), with the surgical care coordinator also assessing post-operative care alternatives.

This involves either discharging the patient to their home with remote monitoring and dedicated caregiver support or coordinating care with a skilled nursing or rehabilitation facility based on the patient's needs and risk level. Surgeons, anesthesiologists, and care coordinators must collaborate to ensure surgical readiness and post-operative recovery are coordinated and aligned from both a clinical and operational perspective.

3. Optimizing Surgical Schedules and OR Block Utilization

The operating room is among the most expensive and resource-intensive environments in a hospital and also has the most impact on health system revenue. Maximizing efficiency here starts with coordinated

scheduling between the clinic and OR ensuring cases are booked timely incorporating a patient's risk level, surgical complexity, and post-operative recovery resource needs.

The success of the OR or ASC depends on pre-authorization workflows, tight alignment of block time management, on-time case starts, OR turnover times, and dedicated rooms for specific specialties or procedures. Technology that flags surgical delays or inefficiencies can guide real-time adjustments and long-term improvements. Institutions that manage OR capacity as a strategic asset often see increased case volume, improved surgeon satisfaction, and higher margins.

4. Seamless Post-Surgical Transitions and Recovery Planning

Surgical excellence doesn't end when the patient leaves the OR. Transitioning patients to the appropriate recovery setting whether it is the home, a SNF, or rehab facility requires coordinated planning between surgeons, hospitalists, primary care providers, and care managers. Discharge instructions, caregiver responsibilities, medication reconciliation, and follow-up appointments must be executed seamlessly.

Embedding post-acute coordination into the perioperative process ensures that recovery is efficient, complications are minimized, and readmissions are reduced. Digital tools or incorporating AI technology that proactively manage care and monitor recovery progress can further enhance post-discharge outcomes.

Keys to Success

Implementing an integrated perioperative service line strategy requires strong governance, dedicated leadership, and actionable data monitoring. Five key enablers include:

1. **Perioperative Surgical Governance:** A defined structure with surgeons, anesthesia, OR team and administrative leaders overseeing surgical performance and accountability
2. **Risk Stratification Tools:** Use of HCCs, pre-op assessments, and predictive analytics to personalize care
3. **Technology and Communication Platforms:** Real-time dashboards, EHR alerts, and AI-driven care coordination tools streamline handoffs and optimize results
4. **KPIs and Outcome Tracking:** Metrics such as surgical episode costs, length of stay rates (LOS), 30-day readmissions rates, OR utilization, and patient satisfaction scores support accountability and drive efficiency
5. **Care Management and Coordination:** Dedicated perioperative navigators ensure continuity as patients are identified as a surgical candidate from the pre-op process and through recovery

A high-performing perioperative service line is more than an operational model; it is a strategic imperative.

A focused perioperative service line strategy will build strong alignment between the hospital and surgeons, especially with independent surgical specialty groups. By unifying the full spectrum of surgical care under an integrated strategy, both hospitals and surgeons can achieve superior clinical outcomes, better patient experiences, and strong financial performance across all surgical episodes.