

# Making sure patients have the ostomy supplies they need

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**N**o matter where you work or who your distributors are, ensuring the patient has sufficient ostomy supplies can be a challenge. Whether you're the nurse, the physician, the patient, or the family, not having supplies for treatments can heighten frustration with an already challenging situation, such as a new ostomy. Here's how to reduce the chance of experiencing frustrations related to ostomy supplies.

## Start early

Start teaching patients about ostomy supplies preoperatively, if possible. Although the ostomy size and whether convex products are needed can't be determined until the postop visit, you can explain what is available from different companies and the best options for obtaining supplies, depending on whether or not the patient has insurance. Postop teaching is difficult enough with a major life-changing situation and postop pain, so taking initial steps before surgery helps the patient feel better prepared. Keep in mind, however, that preop teaching in an emergency situation isn't always an option.

## Acute and subacute care

For patients in an acute-care setting, all supplies are provided as part of the daily rate of service. The hospital's group-

purchasing contract determines which company provides ostomy supplies. Frequently patients and families are provided with several supplies be-

fore discharge to help get home care started. It's also important to help patients and families to set up an ordering process.

In some cases, patients may need sizes not provided through the designated supplier, so you'll have to obtain supplies from another company. Some patients may also need personal molding; the only company that supplies a molding kit and personalized appliances for patients is **Nu-Hope Ostomy**.

The average cost is \$10 for a box of 10 barriers as well as \$10 for a box of 10 pouches, which are billed to the hospital as part of the day rate. Personalized pouches are more expensive, and cost depends on several factors: size, convexity, or whether one or two pieces are needed. Patients frequently incur out-of-pocket expense for these special needs when they aren't in a hospital or rehabilitation facility or they are under home care services. Out-of-pocket expense begins when patients are discharged from service. Medicare provides minimal reimbursement for specialty-made appliances.

Subacute-care facilities pay a higher rate for supplies: an average of \$120 for a box of 10 barriers and \$120 for a box of 10 pouches. When a patient is in subacute care, the cost of supplies is covered by the day rate, although the facility is charged more for the same product by the distributor than what an acute-care setting pays.



## Long-term care

Long-term care supplies are normally provided by families, or the facility where the patient resides can help with purchasing appropriate supplies through local distributors and/or durable medical equipment (DME) companies. Patients who are insured usually still have a copay. Supply costs are similar to those of subacute-care facilities—an average of \$120 per box of both barriers and pouches.

Medicare has specific guidelines that most insurance companies follow when it comes to supply coverage—20 barriers and 20 pouches monthly. This may seem like an overabundance of supplies because patients experience an average wear time of about 3 to 5 days. On the other hand, if patients have a few bad days, (for instance, due to an inability to apply the stoma barrier correctly, using multiple wafers because skin moisture or effluent leaking while changing the appliance), they can easily use up their month's allotment before the month is out. If there is a significant change in the stoma and a new barrier or pouch is needed, this becomes an additional patient expense.

## Home care

Home care situations are slightly different. While being treated through a home care agency, Medicare patients have their supplies provided and paid for by the agency. Private insurance and self-pay patients are expected to provide their own supplies through local distributors, with the assistance of the home care agency. The cost of supplies from distributor to home care agency and the cost of supplies for patients to purchase from a local DME or home medical supplier remains un-

changed at an average of \$120 per box of barriers or pouches.

## Advice for patients

Let patients know that planning ahead is important. For most distributors, the time from order to delivery is 24 hours to 3 days. If personalized pouching is necessary, shipping can take anywhere from 7 to 10 days. Here are some other key education points:

- Have an ostomy clinician as a resource.
- Know where you can obtain your supplies, and have a back-up distributor in case supplies from your current distributor are temporarily disrupted.
- If you are a self-pay patient or are unable to afford supplies, your local ostomy clinician may be able to guide you to obtaining supplies free of charge or at a minimal fee. One possible source is the company that makes the product; some companies offer older-model or discontinued supplies at reduced costs (or for free) to those in need.
- Contact the United Ostomy Association of America (UOAA) with questions. UOAA is an excellent source for ostomy-care information. And if you are fortunate enough to have your ostomy reversed, the UOAA can help you identify where you can donate unused supplies.

## Helping patients help themselves

Working to maintain patients' dignity can be difficult during major life-changing events, such as an ostomy. Although we clinicians can't have all the answers, providing education and resources related to supplies can help ease the stress of patients and their families. ■

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