

What States Can do About Health Care Overuse

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Purpose of this Presentation

- ❖ **Identify 3 action steps that state legislators and executive branch officials can do to curb overuse, improve quality and save state resources**

What is Overuse?

- ❖ **Overuse is when the potential for harm of a health care service exceeds the possible benefit**

Source: Institute of Medicine, 1998 National Roundtable on Quality

Overuse is Coming Out Of the Closet

- **Consumer Reports is now reporting on overuse: unnecessary cardiac screening tests**
- **American Board of Internal Medicine Foundation: launched Choosing Wisely campaign for doctors on December 14, '11**
- **National Priorities Partnership identified tests and procedures that are overused**

Action Step #1

- ❖ **The Joint Commission proposed a new National Patient Safety Goal on overuse in December 2011**
- ❖ **Beginning in 2013, accredited hospitals are required to select a treatment, procedure, or test where evidence of overuse exists nationally**
- ❖ **Suggested areas of overuse include:**
 - **early induction of labor**
 - **ear tube surgery in children**
 - **cardiac stents and CT scans**

What Accredited Hospitals In Your State Will Have to Do

- ❖ **Hospitals are required determine whether overuse is occurring in these or other areas**
- ❖ **Beginning in 2014, they have to reduce inappropriate use of at least one procedure or test**

What Can Your State Do?

- ❖ **States' Medicaid programs can encourage hospitals to work to reduce more than one area of overuse identified by The Joint Commission**

Example: Early Induction at Birth

- ❖ **"It's now really well-documented in national studies that the risk of the baby having to require intensive care in a neonatal intensive care unit — even the risk of infant death — is increased when the baby is born as little as two weeks before the due date." (Dr. E. Donovan, Cincinnati Children's Hospital)**

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- ❖ **“...A baby born three weeks early with mature lungs may not be ready to eat because the brain's not fully developed.”**

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- ❖ **January 2011: Leapfrog Group issued a press release with data from 773 hospitals on the % of births that are elective induction or C-section without a medical indication between the 37th completed week and the 39th completed week of gestation.**

Name of hospital	Location	% births that are elective induction or C-section w/out a medical indication between 37th and 39th completed week
Kaiser Foundation	Vallejo, CA	37.3%
Rumford Hospital	Rumford, ME	80.0%
Putnam Hospital	Carmel, NY	94.3%
Anmed Hospital	Anderson, SC	63.7%
Fauquier Hospital	Warrenton, VA	98.5%

Why Does This Happen?

- ❖ Physician or patient preference
- ❖ Intervention culture in hospitals
- ❖ False belief that it is safe to induce birth as early as 36 weeks

“My doctor tried to scare me into being induced prior to my due date because, as it turns out, he was going on vacation.”

Source:

<http://www.childbirthconnection.org/pdfs/LTMInductionData.pdf>

Can This Be Done In Your State?

In Ohio, doctors in the 20 largest hospitals were asked to document a medical reason every time a woman was scheduled to deliver before 39 weeks.

In less than 15 months the rates of those deliveries dropped from 15 percent to under 5 percent. And more important, the number of babies admitted to neonatal intensive care also decreased.

Action Step #2

Find out early induction rate in your state's Medicaid program by hospital

Identify the top hospitals with early induction

Put incentives in place to reduce early induction without medical necessity

Example: Why Overuse of Diagnostic Imaging Is Harmful

- ❖ **NCI researchers estimated that the 70 million CT scans performed in 2007 will cause 29,000 cancers in Americans and 14,500 deaths.**
- ❖ **Two thirds of the projected cancers occur in women.**

Source: A. Berrington deGonzales et al, 'Projected Cancer Risks from cT Scans Performed in the U.S. in 2007, Archives of Internal Medicine, December 14/28, 2009.
<http://archinte.ama-assn.org/cgi/content/full/169/22/2071>

National Quality Forum: Diagnostic Imaging Overuse

- ❖ **National Quality Forum-endorsed diagnostic imaging measures of overuse**



- ❖ **As one example, Medicare's Hospital Compare publishes hospital's use of double chest scans.**
- ❖ **With a double CT scan, patients have two imaging tests consecutively: one without contrast and the other with contrast, which yields double radiation dose**

Hospital Compare

Where do you want to find a hospital?

Search Information

Location - ZIP Code or City, State

e.g. 10009 or New York, NY

Search type [What is this?]

- General
- Medical Conditions
- Surgical Procedures

Find Hospitals



Action Step #3

- ❖ Go to www.hospitalcompare.gov to see hospital's overuse of double chest CT scans in your state.
- ❖ Most hospitals use the double chest CT scans sparingly.
- ❖ **But: for 618 hospitals at least 10 percent of Medicare patients had a double chest CT scan = too high!**
- ❖ **In 94 hospitals, nearly half the patients with chest CT scans had double scans = red flag and much too high!**

Check Your Hospital: Interactive Map

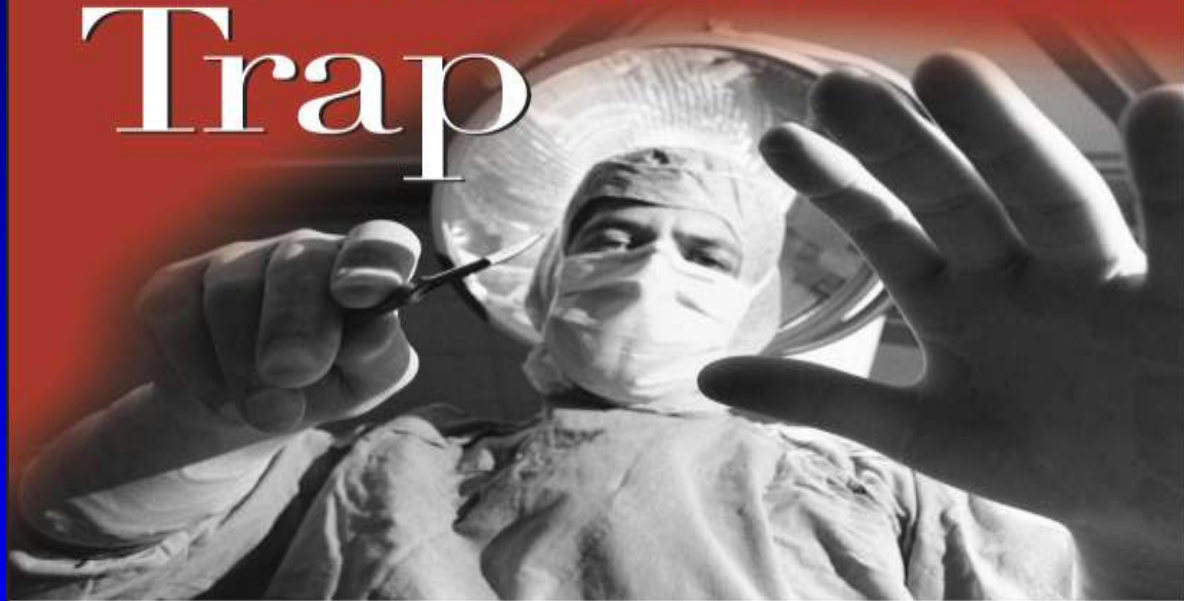
**Google:
Double Chest CT Scans
NY Times June 17, 2011**



The Treatment Trap

“A wake-up call
for Americans.”

— Dr. Christine Cassel,
President, American Board
of Internal Medicine



**HOW THE OVERUSE OF MEDICAL CARE
IS WRECKING YOUR HEALTH AND
WHAT YOU CAN DO TO PREVENT IT**

Rosemary Gibson and Janardan Prasad Singh

With a Foreword by Jim Guest, President, Consumers Union

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Example: Overuse of Diagnostic Imaging

- ❖ **The National Priorities Partnership, which is convened by the National Quality Forum, has identified tests, surgeries and drugs that are overused**



- ❖ **To identify areas of overuse, medical specialty societies were consulted; Diagnostic imaging including CT scans were identified as overused.**

Source: National Priorities Partnership,
<http://www.nationalprioritiespartnership.org/PriorityDetails.aspx?id=598>