Reducing Overuse in California

Statewide Workgroup on Reducing Overuse
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Statewide Workgroup on Reducing Overuse

- **Co-Chairs**: Covered California, CalPERS, and California Department of Health Care Services

- **Purpose**: To develop, initiate, monitor, and evaluate approaches to reducing the overuse of selected unnecessary and wasteful medical services in California
Statewide Workgroup Members

Co-Chairs
- Covered California
- CA Department of Health Care Services
- CalPERS

Provider Representatives
- California Association of Physician Groups
- California Hospital Association
- California Medical Association
- American College of Physicians, CA Chapter
- Cedars-Sinai Health System
- Hospital Quality Institute
- Los Angeles County Department of Health Services
- Sharp Rees-Stealy Medical Group
- Sutter Health
- UC Davis School of Medicine
- UCLA Department of Medicine

Consumer Representatives
- Center for Healthcare Decisions
- Consumers Union
- Western Center on Law & Poverty

Plan/Purchaser Representatives
- Anthem Blue Cross
- Blue Shield of California
- Inland Empire Health Plan
- Partnership Health Plan
- San Francisco Health Service System

Policy/Collaborators
- California Health and Human Services Agency
- California HealthCare Foundation
- Integrated Healthcare Association
Reducing overuse in CA of selected medical interventions across public and private delivery systems.

Initial work will target specific tests and procedures identified in the Choosing Wisely® Campaign (CWC).

Focus on services that particularly impact the needs of CA consumers (e.g., disproportionately frequent, jeopardize quality of care, high cost).

The WG may expand its focus to non-CWC and/or particular preference-sensitive interventions, tests and procedures.
Workgroup Charter -- Deliverables

- Identification of one or more specific overused interventions for a state-wide or targeted campaign.
- Realistic goals for reducing targeted interventions over a specific time frame.
- Specific plans for disseminating Choosing Wisely materials oriented to consumers, providers, health plans and the media, on targeted areas of overuse.
- Highlighting of “success stories” and the types of strategies used that are most effective in reducing overuse among particular providers or consumers.
- Visible evidence of a culture of “responsible stewardship of resources” across multiple stakeholder groups.
Workgroup Charter – Outcomes (3 year)

- **Choosing Wisely® materials** used widely across the state by providers and consumers
  - Participation by a significant number of local and state organizations
  - Partners include health plans, medical groups, hospitals, purchasers and consumer organizations
- A meaningful number of participating health plans and medical groups will have instituted *changes targeting overused interventions*
- There will be **measurable evidence of reduction in the overuse of targeted interventions**
Progress to Date

- Inaugural meeting in June
  - Learn about Cedar-Sinai’s clinical decision support tool to generate alerts when clinicians orders conflict with Choosing Wisely recommendations
  - Learn about Sutter Health’s variation reduction program focused on comparative performance feedback to change clinician behavior
  - Learn about Blue Shield of CA’s approach, including prior authorization, shared decision-making, and patient engagement
- Develop criteria for prioritizing among tests/treatments to target
- Identify 7 candidate test/treatments
- Webinars in early September: select 3 to target
- Plan sessions on each of the 3 for the in-person meeting
Survey on Intervention Pathways

Workgroup asked which would be most effective in reducing overuse of C-section, low back imaging and opioids:

- Clinical decision support, e.g. EMR alerts
- Clinician feedback on performance
- Provider-facing education, e.g. clinical guidelines
- Provider-facing incentives, e.g. P4P
- Provider restrictions, e.g. prior authorization
- Consumer-facing incentives, e.g. VBID or gift cards for SDM
- Consumer information, e.g. education or report cards
Survey Results – Top 3 Pathways

- **C-section**
  1. Clinician feedback on performance
  2. Provider-facing education, e.g. clinical guidelines (tie)
  3. Consumer information, e.g. education or report cards (tie)

- **Low-Back Imaging**
  1. Clinical decision support, e.g. EMR alerts
  2. Clinician feedback on performance
  3. Consumer information, e.g. education or report cards

- **Opioids**
  1. Provider restrictions, e.g. prior authorization
  2. Clinician feedback on performance
  3. 3-way tie: clinical decision support, provider-facing education, consumer information

**Sessions today will explore the intervention pathways for each of the three areas of focus in more detail.**
What can the Workgroup do?

- Vision – set expectations, lead the way
- Partner with Choosing Wisely, other national efforts
- Partner with medical societies to influence clinical guidelines, participation in Choosing Wisely, CME offerings
- Communication – signal the importance of reducing overuse
  - Stories of success – highlight what’s working
  - Disseminate resources for providers, consumers
  - Convene (e.g. Seattle Summit – WHA, medical assoc, hosp assoc)
- Produce “Action Guides” or other tools to support engagement at multiple levels (e.g. ICER/CEPAC materials on opioids)
  - Policy/purchaser
  - Provider/clinician
  - Consumer/patient/family
What can Workgroup members do?

- **Purchasers**
  - influence plans through contract requirements
  - educate consumers through member channels
  - influence consumers through benefit design

- **Plans**
  - influence providers through contracts (requirements or reimbursement)
  - share data with providers to support clinical decision-making
  - educate consumers through member channels

- **Providers**
  - influence clinician behavior through information, incentives
  - educate patients (and families) seeking inappropriate care

- **Consumers**
  - ask questions! Do I really need this? What are the risks? What if I do nothing?
Today’s Agenda

• Three test/treatments to cover, 75 minutes each topic
  • Topic 1: C-section for low-risk, first-time births
  • Topic 2: Imaging for low back pain
  • Topic 3: Opioid dependence

• Format for each topic area:
  • Introduction/presentation from Co-Chair
  • Presentation from content expert(s)
  • Q&A, discussion
  • Key questions: what are most promising intervention pathways for this test/treatment? What role can the WG play?

• Cross-topic discussion: revisit Charter, decide next steps