



# Evidence Based Care & Resource Stewardship

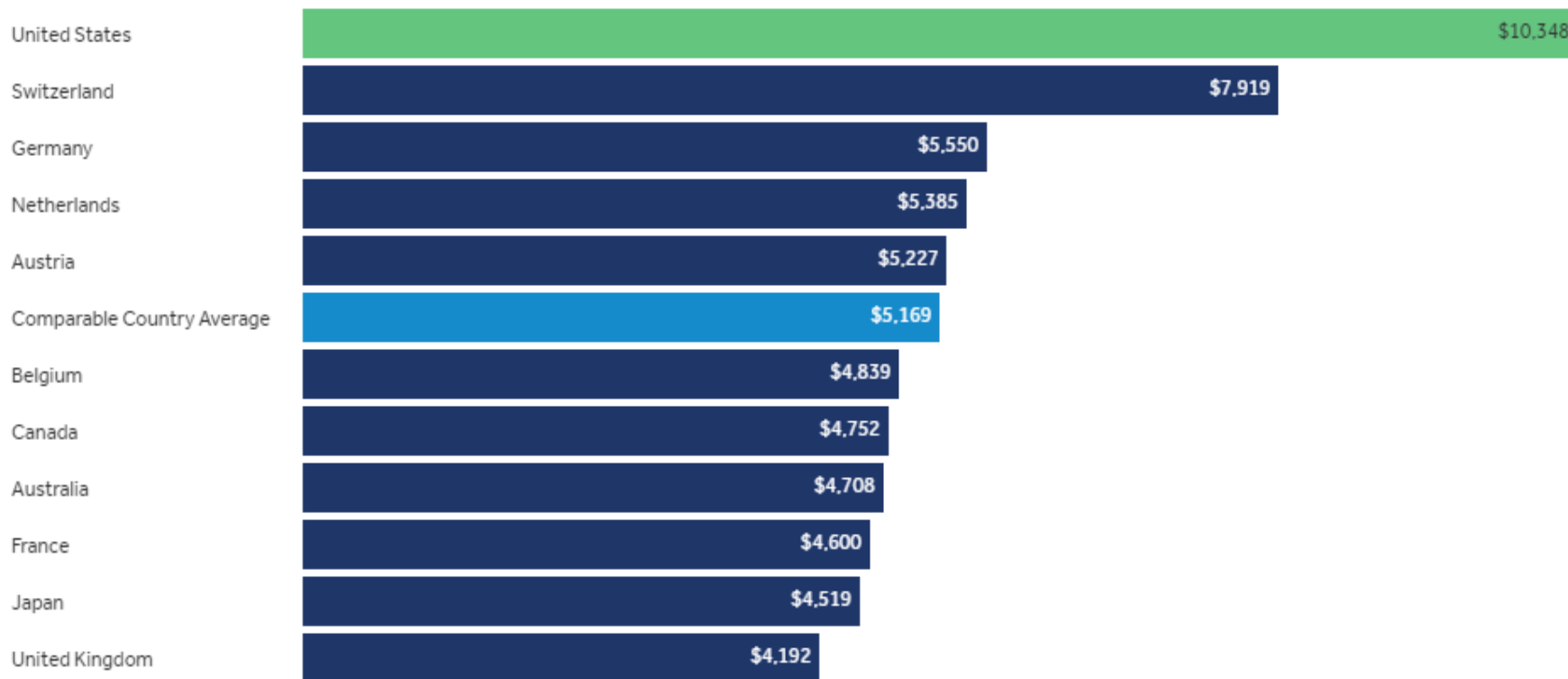
Kaiser Permanente Resident Elective In Health Policy  
October 8, 2018

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# On average, other wealthy countries spend about half as much per person on health than the U.S. spends

Total health expenditures per capita, U.S. dollars, PPP adjusted, 2016



The US value was obtained from the 2016 National Health Expenditure data

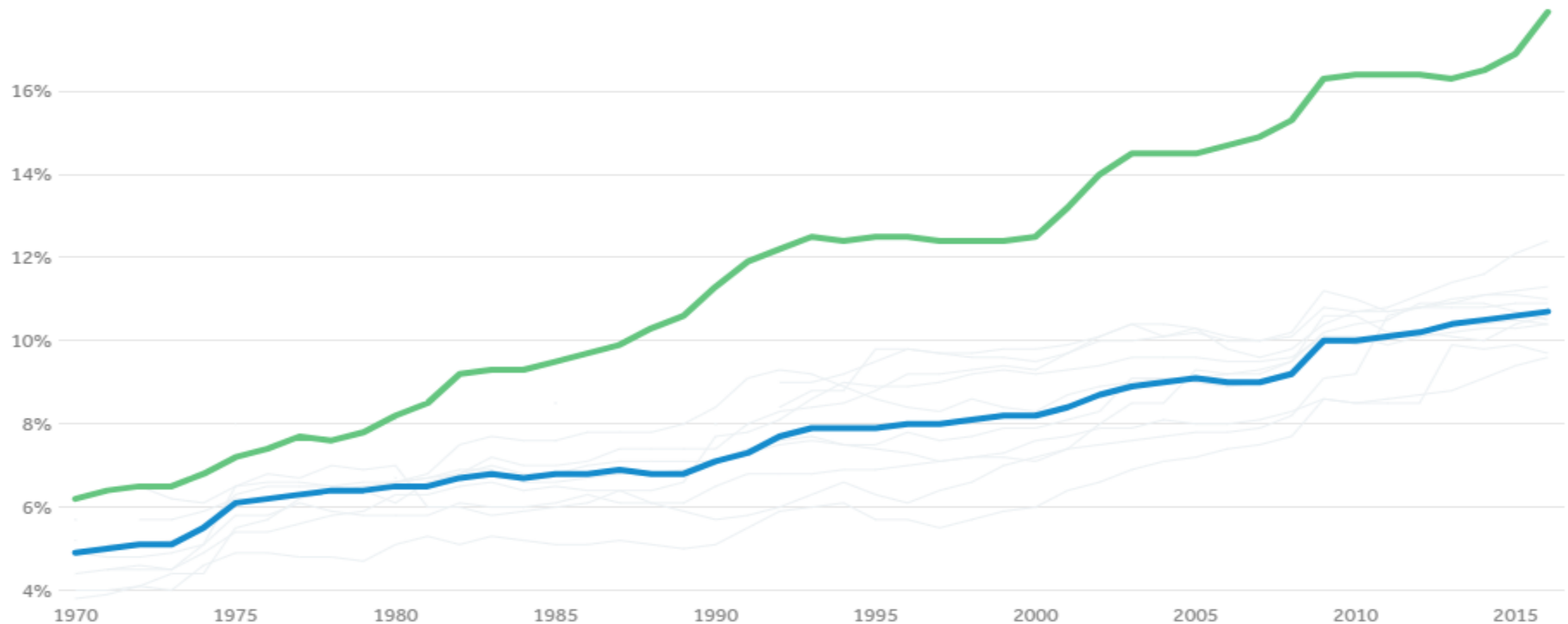
Source: Kaiser Family Foundation analysis of data from OECD (2017), "OECD Health Data: Health expenditure and financing: Health expenditure indicators", OECD Health Statistics (database) (Accessed on March 19, 2017). • Get the data • PNG

Peterson-Kaiser  
**Health System Tracker**



# Since 1980, the gap has widened between U.S. health spending and that of other countries

Total health expenditures as percent of GDP, 1970 - 2016



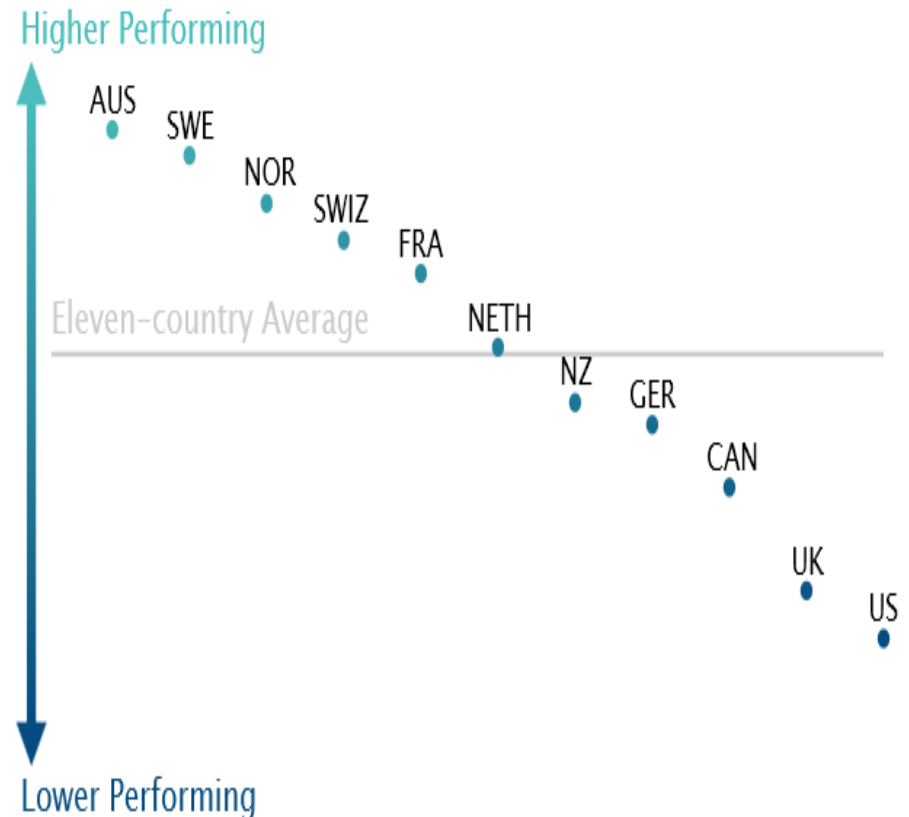
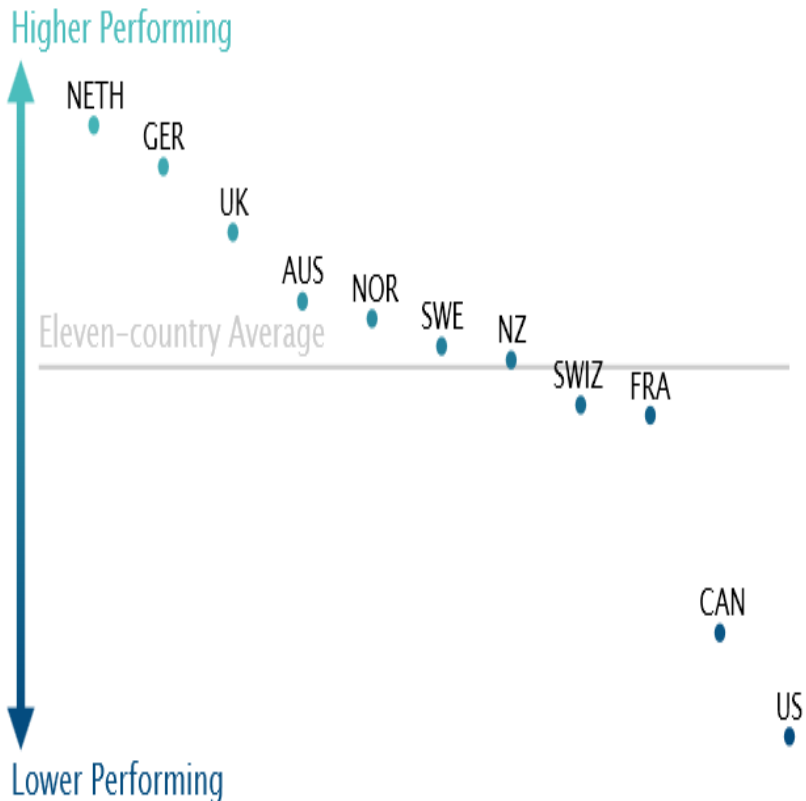
Excludes spending on structures, equipment, and noncommercial medical research. Data unavailable for: the Netherlands in 1970 and 1971; Australia in 1970; Germany in 1991; and France from 1971 through 1974, 1976 through 1979; 1981 through 1984, and 1986 through 1989. These countries are not included in calculated averages for those years. Break in series in 2003 for Belgium and France and in 2005 for the Netherlands. Data for 2016 are estimated values. The 2016 US value was obtained from National Health Expenditure data.

Source: Kaiser Family Foundation analysis of data from OECD (2017), "OECD Health Data: Health expenditure and financing: Health expenditure indicators". OECD Health Statistics (database) (Accessed on March 19, 2017). • [Get the data](#) • [PNG](#)

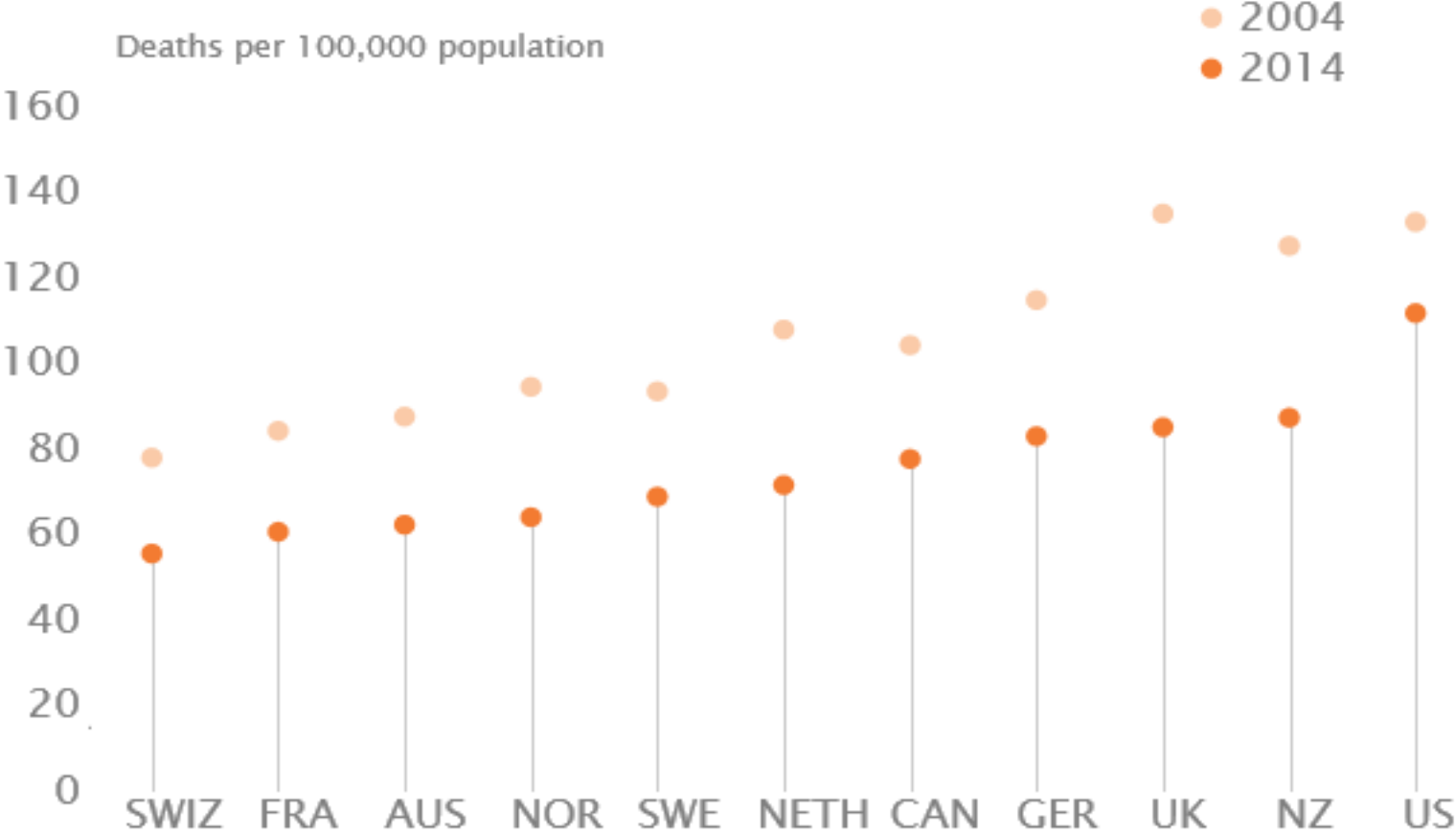
Peterson-Kaiser  
**Health System Tracker**



# 2017 Commonwealth Fund Health System Performance Scores



# Mortality Amenable to Health Care, 2004 and 2014

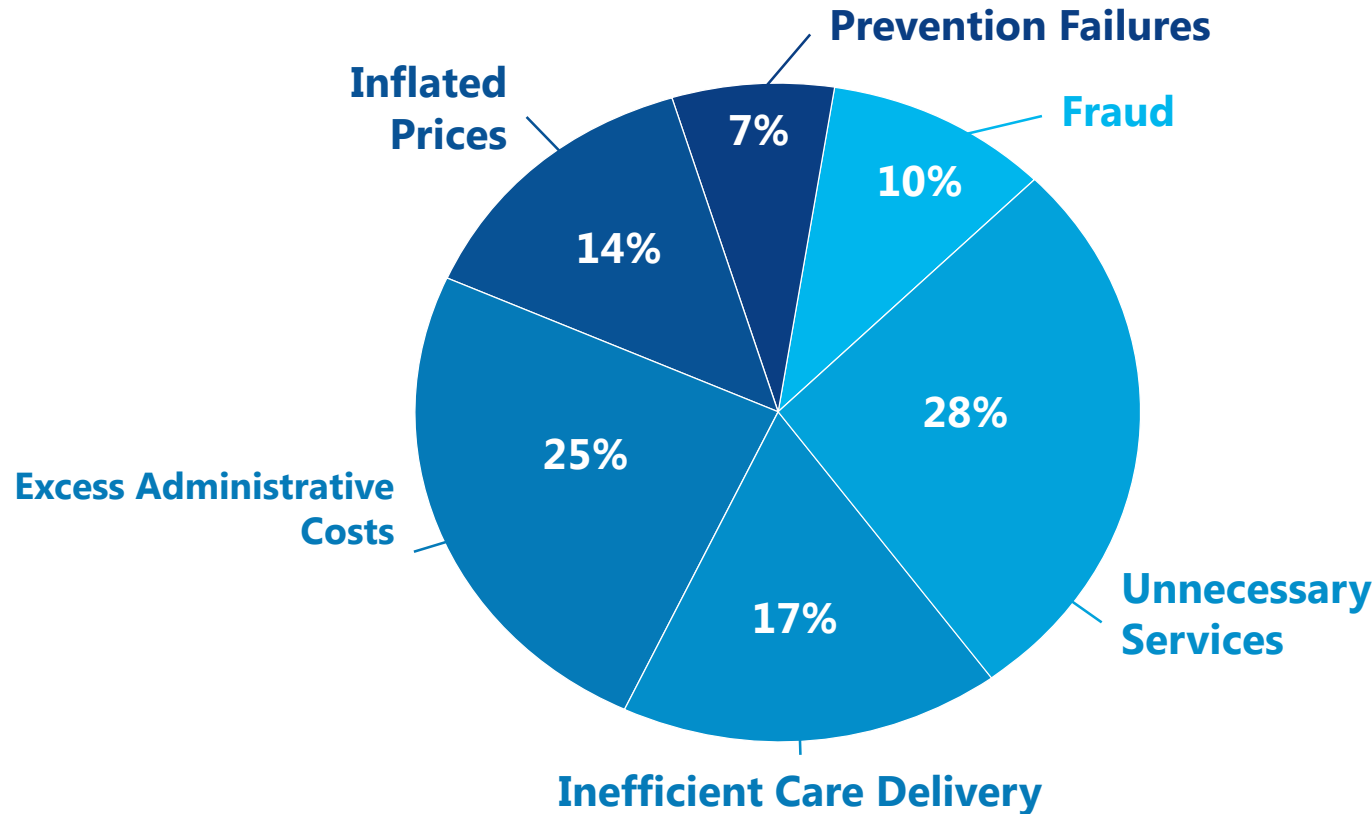


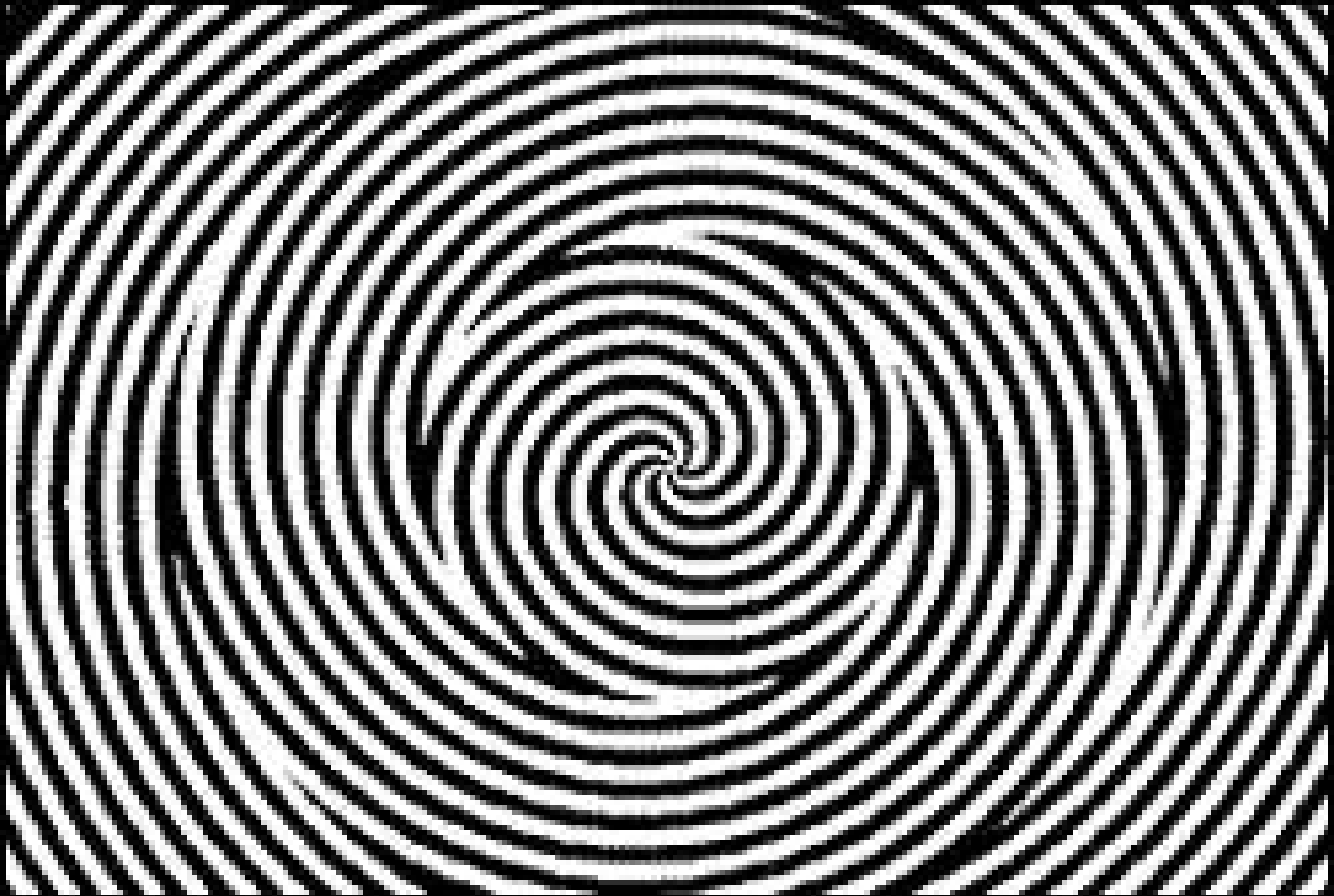
# \$750 Billion in unnecessary care per year

2012 Institute of Medicine Report

# 30%

**Excess Medicare spending**  
According to the Dartmouth Institute for Health Policy and Clinical Practice, 30 percent of all Medicare clinical care spending is unnecessary or harmful and could be avoided without worsening health outcomes.







# Underuse, overuse & misuse



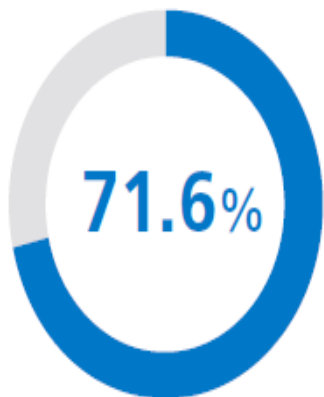
# What is underuse?

Underuse is when people are not given evidence based, medically necessary care.

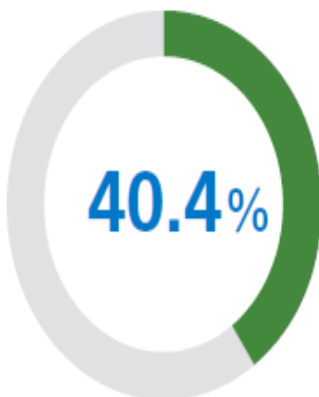
Examples include immunizations, cancer screenings, control of chronic conditions, etc.



# Underuse



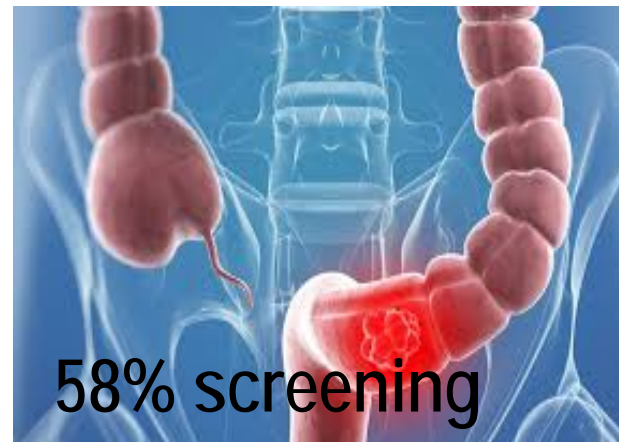
IMMUNIZATIONS—CHILDREN<sup>2</sup>



INFLUENZA VACCINATION—ADULTS<sup>4</sup>



53% commercial diabetics A1c < 7



# What is overuse

Overuse occurs when a drug or treatment is given without medical justification.

Examples include:

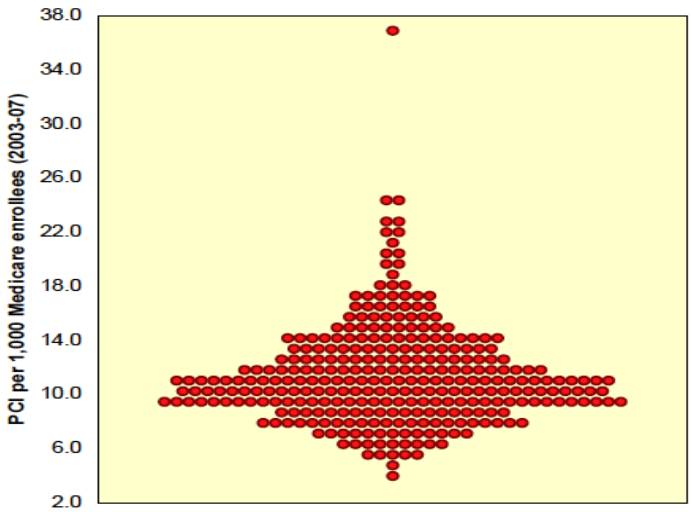
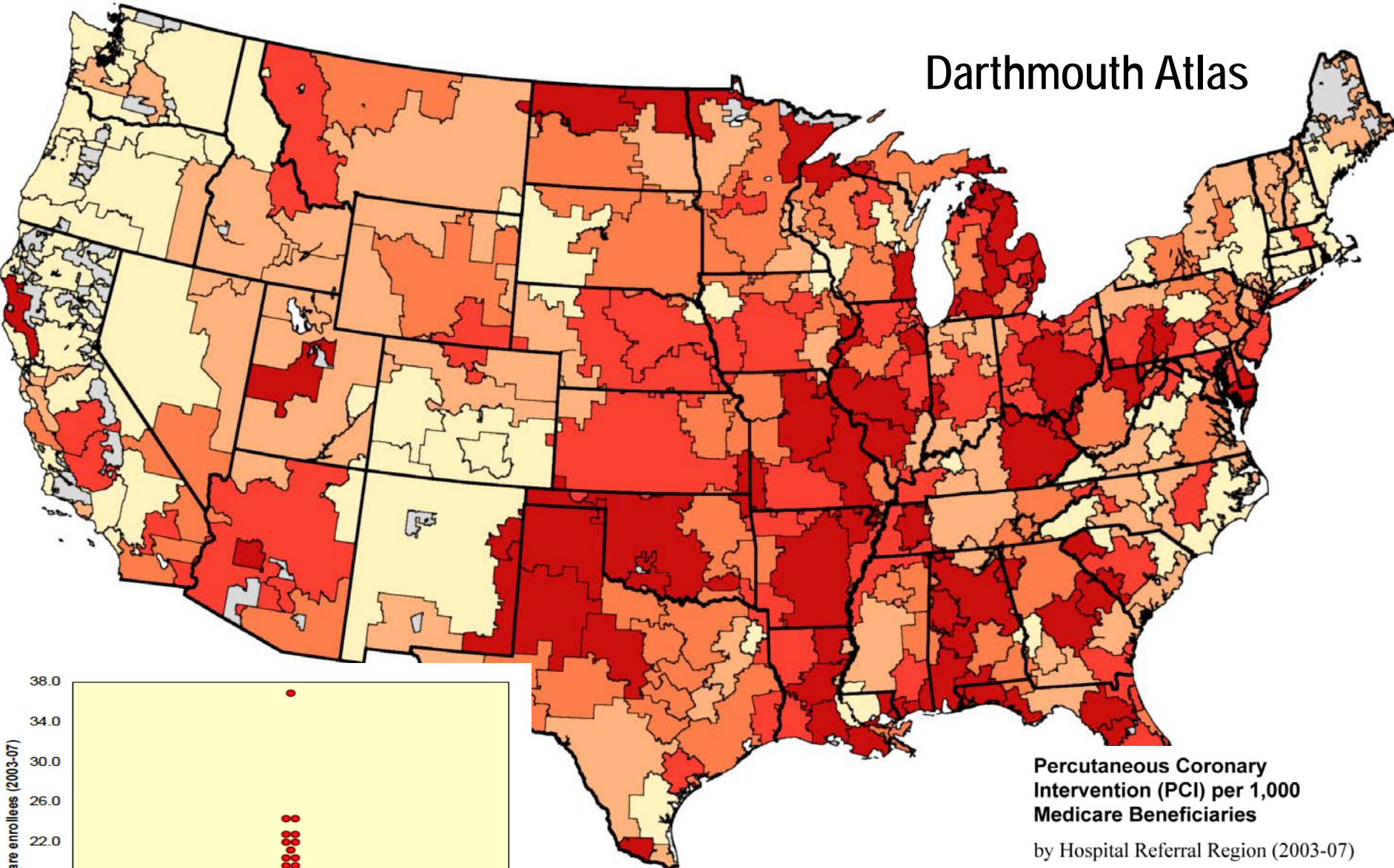
antibiotics for viral URIs or for OM in children, MRIs for acute LBP without red flags, CT for headache with normal neurologic exam, etc.



In health care, more is not always better. More spending and treatment does not translate into better patient outcomes and health.



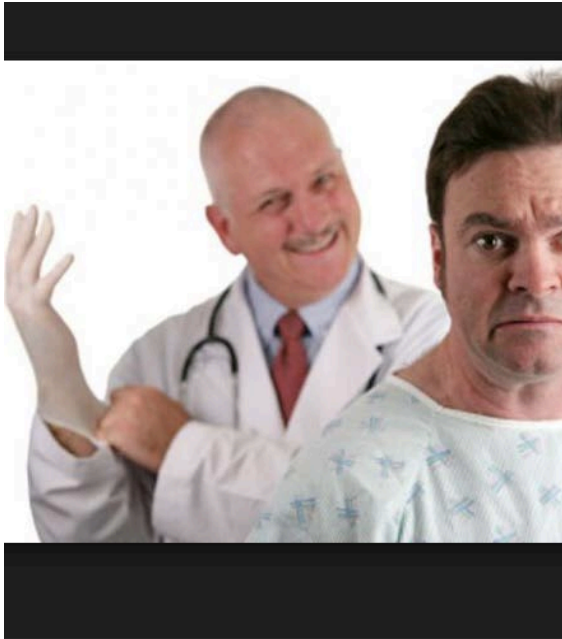
# Darthmouth Atlas



**Percutaneous Coronary Intervention (PCI) per 1,000 Medicare Beneficiaries**  
by Hospital Referral Region (2003-07)

- 14.0 to 37.3 (61)
- 11.6 to < 14.0 (62)
- 10.1 to < 11.6 (62)
- 8.8 to < 10.1 (60)
- 3.5 to < 8.8 (61)
- Not populated

# Overuse



30% arthroplasties  
Are inappropriate

23% of colonoscopies are inappropriate



>50% prostate  
Procedures are  
inappropriate

# What drives overuse?

- Poor knowledge of evidence
- Fear of uncertainty
- Devotion to technology
- Failure to inform patients (in ways they can grasp)
- Oversupply of resources (e.g. beds and clinicians)
- Indication creep
- Guideline writers with financial ties to Pharma
- Marketing by hospitals, Pharma and device makers



# What is misuse

Misuse occurs when a patient doesn't fully benefit from a treatment because of a preventable problem – or when a patient is harmed by a treatment. Misuse includes avoidable medical errors like prescribing a drug the patient is allergic, wrong site surgery, etc.

Almost a 100,000 people die annually from preventable errors—more than from car accidents, breast cancer or AIDS combined.





What suggestions do you have to deal with underuse, overuse & misuse?





# Potential Solutions

- Acknowledge that this is an issue
- Persuade: Clinician and patient education  
e.g. Choosing Wisely
- Inform: Transparent reporting on underuse, overuse and misuse in health care
- Pay: For quality, capitation, bundled payments, reduce administrative overhead
- Information Technology
- Regulate Pharma and device makers
- Publicly fund clinical research



# Thank you

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