

## Harmonized decision-making can help rein in costs, deliver more effective care

If a loved one needed surgery, would you feel comfortable having them check in to their nearest hospital?

It would likely be the most convenient option. But the hospital 20 miles away might have a reputation for considering less invasive options. And the hospital 60 miles away might have more satisfied patients and better outcomes.



The healthcare industry has been trying for decades to address the vexing problem of unwanted variation in care. After all, shouldn't all practices and hospitals perform to the same standards of care no matter where they are located? Unfortunately, zip code can still determine the quality of healthcare patients receive.

Globally, most countries have anywhere from a **two- to twenty-fold variation in quality of care** for the same condition.

Studies like the Dartmouth Atlas of Health Care<sup>1</sup> and the National Health Service Atlas<sup>2</sup> describe life-and-death variations in care that cannot be attributed to the level of healthcare spending or utilization. The town or city where you receive care can determine your chance of being diagnosed with cancer early, getting stroke treatment quickly, or even having unnecessary procedures.

Choosing the best provider can be akin to rolling the dice when it comes to getting the right care. In fact, a landmark study looking at 30 different conditions in the U.S. concluded

that **only 55 percent of patients receive an evidence-based recommended course of treatment.**<sup>3</sup> Globally, most countries have anywhere from a two- to twenty-fold variation in quality of care for the same condition.

In addition to poor quality outcomes, clinical variation is expensive. For a typical healthcare organization, unwarranted variation in care can cost \$20 to \$30 million per \$1 billion in revenue.<sup>4</sup> Another source estimated that **38 percent of the total U.S. healthcare spend is on clinically ineffective care.**<sup>5</sup>

The combination of rising healthcare costs and slowing or declining revenue has created a daunting sustainability gap for healthcare organizations. Many have attempted to tighten their revenue cycle management and contain costs by streamlining operations, shifting payment models, reducing staff and adding technology. But reducing costs alone will not close the sustainability gap. Health systems must begin to address the clinical side of the business — and that means reducing unwanted variability in care.

There are two critical factors organizations can address: the decisions care teams are making every day, and the engagement and preferences of their patients. Most hospital

systems have tried to address these factors in some way. But their programs aren't effective enough. They aren't driving consistent care. This can lead to inefficiencies, adverse events, increased lengths of stay, and higher mortality rates.

Ultimately, the key to addressing variability in care is for health systems to drive behavioral

change across their organization. This is a huge challenge because clinical care is rooted in a series of behaviors that are incredibly difficult to change — even when care teams are trying their best to do the right thing. But it's not impossible. The key is to provide resources that harmonize clinical decisions across care teams and their patients.

### The Key to Driving Behavioral Change: Harmonized Decision-Making

A key strategy for driving behavioral change is harmonized decision-making. Harmonization happens when the entire care team has access to the information needed to make evidence-based decisions for their patients. Providing a common care playbook, or coordinated suite of solutions in the workflow, supports optimal decision-making. By sharing and applying evidence-based clinical standards across the continuum of care, organizations can reduce unwanted care variation, manage costs, and improve outcomes.

Here are three key components of harmonized decision-making:

## 1 Driving evidence-based decisions

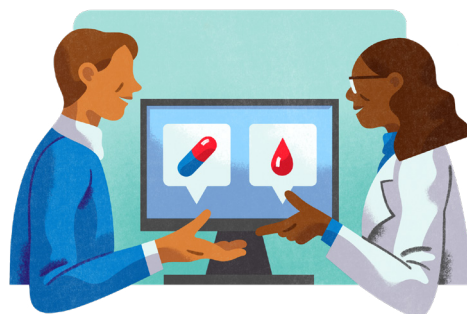
One academic medical center in California saw a 300 percent increase in usage when they moved their decision support resource into their EHR.

In an era of seeing more patients in less time, the tools clinicians use must be user-friendly and intuitive. To help clinicians get on board with harmonized decision-making, the clinical content available to them must be trusted. It should also appear as a seamless part of their workflow, without requiring extra clicks.

Solutions based on interoperability standards can help the entire health system streamline the technology burden imposed on clinicians. By appearing in the EHR workflow at the point of care, it is easy for clinicians to use them, thereby strengthening adoption. For example, one academic medical center in California saw

a 300 percent increase in usage when they moved their decision support resource into their EHR.<sup>6</sup>

In addition to reinforcing consistent behavior at the point of care, driving evidence-based decisions can strengthen clinicians' knowledge base so they can satisfy CME/CE/CPD requirements. By practicing contemporary standards and methods of care on a consistent basis, clinicians can help reduce care variability, and keep current on rapidly evolving medical knowledge, leading to more effective care.



## 2 Aligning care teams and patients

To improve quality and reduce costs, organizations must engage patients and empower the larger care teams who treat them.



The foundation of a common care playbook is trusted content that supports evidence-based decision-making. But it isn't just patients and physicians who are making decisions. Pharmacists, nurses, and care managers play a crucial role as well. To improve quality and reduce costs, organizations must engage patients and empower the larger care teams who treat them. This means having solutions that span the entire care journey and foster collaborative decision-making between care teams and patients.

In the U.S., consider one of the most devastating impacts of low back pain: the chronic prescription of opioids. Although the use of opioids has been discouraged in clinical guidelines, between 1997 and 2005 there was a 423 percent increase in opioid prescriptions among patients with back problems.<sup>7</sup> And in a second study of 26,000 patients with back pain, within 6 months after the event, 61 percent of patients received a course of opioid therapy, and 19 percent became long-term users.<sup>8</sup>

The opioid epidemic is a topic worthy of separate discussion. In the context of low back pain, however, it highlights the role of the entire care team, including pharmacists and nurses, in helping to keep patients healthy and safe. When a care team has access to information about a patient's health history, each professional has an opportunity to intervene appropriately. Too often, a lack of care coordination

around a patient's healthcare can have detrimental consequences.

Aligning clinical and drug information across care teams must extend to patients as well. When patients have access to content that is developed from the same source their providers use, they are better positioned to participate in care decisions — leading to better outcomes and higher satisfaction with care. However, many patients are not fully informed about treatment options or empowered to question their providers.

Aligning provider and patient decisions can be relatively straightforward. Patients with hip fracture, for example, almost always need surgery. For nearly every one of those patients, surgical repair offers better pain control, improved functional status, and lower mortality when compared to treatment with conservative measures.

For many other illnesses, the choice of treatment is less clear and more dependent on patient circumstances and preferences. For these procedures, treatment results are less certain, less readily available, and patient and physician preferences do not always sync up. Aligning treatment decisions in complex cases relies on medical content that is relevant, coordinated and accessible to both providers and patients, and uses a behavioral approach that motivates patients to participate in their own care.

### 3 Activating patients, wherever they are

In one study, 65 percent of patients who watched a patient engagement program kept their blood pressure under control compared to 53 percent who did not — a 22 percent improvement.



A major factor in clinical variability comes from the decisions patients make about their own care. Therefore, truly involving patients in their healthcare is the third element of reducing unwanted care variations. Multiple studies have confirmed the benefits of patient engagement programs in a variety of clinical settings. Most are found to improve patient knowledge, to result in fewer invasive procedures, and to increase patient decision-making autonomy. They can also result in better clinical outcomes.

In one study, 65 percent of patients who watched a patient engagement program kept their blood pressure under control compared to 53 percent who did not — a 22 percent improvement.<sup>9</sup> In another study, shared decision-making reduced preventable hospital readmissions among cardiac patients by at least 19 percent.<sup>10</sup> In the U.S. alone, hospital readmissions are estimated to cost \$17.4 billion each year in Medicare spending each year.<sup>11</sup>

Despite the clear advantages of patient engagement, the industry has a difficult time making the most of the interaction between clinicians and patients, and going beyond the one-way model of “patient education”. Many organizations still lack a dedicated leader, and point to many department heads, from chief medical and nursing to quality, when talking about patient experience. Yet, as we’ve seen above, this oversight hinders the delivery of quality care and is costly.

The idea for *patient engagement* — which has become a buzzword — comes from renewed thinking around the social determinants of health. Unless we truly understand what drives people, we cannot motivate them to be active participants in their care. Successfully engaging patients means getting them to do something about their health beyond the hospital bed.

One long-standing challenge that can benefit from patient engagement is helping people adhere to treatment plans. Only about half of patients stick to long-term medication therapy, and even fewer — between 20 and 30 percent — maintain recommended lifestyle changes.<sup>12</sup> Non-compliance is a major contributor to hospital admissions in the U.S. and around the world.

Technology offers a fresh — and modular — approach to engaging with patients around long-term treatment plans and many other health issues. With thoughtfully constructed patient engagement tools, patients can participate in personalized, intuitive, low-effort experiences that foster emotional connections, improve comprehension and retention, as well as inspire positive, confident attitudes toward managing their health.

This kind of tailored patient engagement can have a significant impact on clinical outcomes. But it must be delivered at scale. How does an organization reach 100 percent of patients in need with individualized interactions? In a typical organization trying to prevent hospital readmissions after treatment for heart failure, for example, nurses will personally make hundreds of phone calls per month. Only a small percentage of those calls get through to a patient, and even fewer reach patients who need help.

With a technology-based patient engagement solution, hospitals can deliver automated, interactive messaging to give people the information they need to stay healthy at home, while identifying those most at risk. This allows clinicians to focus attention on those who need extra help. The result is stronger patient engagement that does not require additional staffing, and can be successfully deployed across an entire patient population.

## The Journey to Clinical Effectiveness

Addressing care variability is critically important for improving patient care and hospital performance. By aligning care teams, reinforcing evidence-based decisions, and empowering patients to participate in their care, healthcare systems can provide clinically effective care that is consistent, coordinated, and cost-efficient.

Technologies exist today to make this vision of harmonized care a reality. It is important to ensure that technology solutions:

- ✓ Deliver rigorously vetted, continuously updated clinical content;
- ✓ Give clinicians and patients the information they need to turn best evidence and practice into actionable knowledge;
- ✓ Are available in the clinical workflow.

Harmonized decision-making across care teams and patients is possible when healthcare organizations work with one

trusted partner. In this setting, organizations can achieve high quality, cost-effective care, so when your loved one needs surgery, you won't think twice about calling the hospital down the road.

*Clinical Effectiveness solutions from Wolters Kluwer help healthcare organizations and professionals harmonize care and reduce unwanted variability by aligning decisions. Care teams and businesses in over 180 countries make evidence-based decisions with Lexicomp®, Medi-Span® and UpToDate® in their workflow, and empower patients to participate in their care with Emmi® programs.*

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