Reducing the use of Low-Value Care

The United States spends more on healthcare per capita than any other country...

...but does not have better health outcomes


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Excess Administration, Fraud, Hospitals, Clinical Services, Insurance, Equipment, Drugs

$2.6 trillion

$765 billion

$340 billion

Low-Value Care

Unnecessary, inefficient services

Given the immediate savings that result from the elimination of low-value care, why has reducing its use been so difficult?

Because...

- The clinical benefit of a service is never always.
- What benefits one person may harm another.

What determines whether a specific service is high or low value?

Who benefits from a ‘clinically nuanced’ approach to measure, identify, and reduce low-value care?

Example: Colorectal Cancer Screening

High-Value

- age 50 - 75
- board-certified
- outpatient center

Low-Value

- under 50, over 85
- inexperienced
- Hospital

Who benefits from a ‘clinically nuanced’ approach to measure, identify, and reduce low-value care?

Consumers

- reduces harm

Payers

- reduces wasted spending

Providers

- improves quality of care
- promotes efficient expenditures
- enhances performance measurement

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