

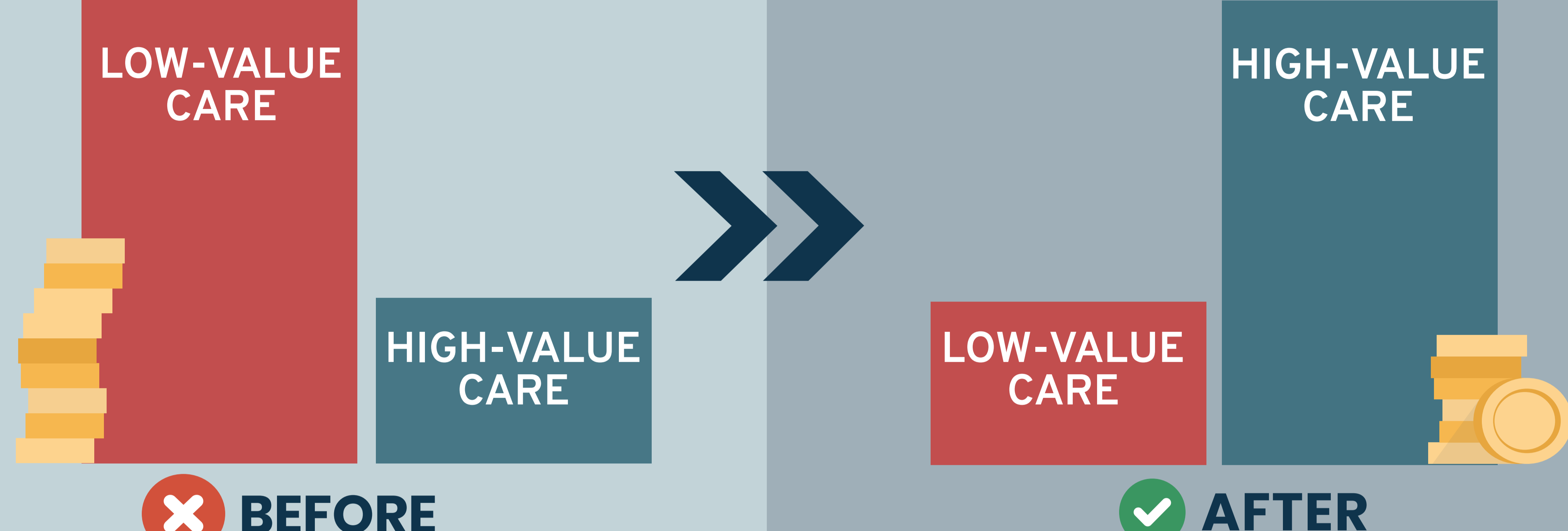
HELPING STATES REDUCE LOW-VALUE CARE

Low-value care (LVC) costs stakeholders more than **\$340 billion** annually while offering little to no patient benefit

Examples include:

- Vitamin D screening tests
- Diagnostic tests before low-risk surgery
- PSA screening for men 70 and older
- Branded drugs when identical generics are available
- Low-back pain imaging within 6 weeks of onset

Reduced spending on **low-value care** creates **headroom...**



...to reallocate spending to **high-value services**

States are uniquely positioned to address **LOW-VALUE CARE** using the following protocol:

1. IDENTIFY
2. MEASURE
3. REPORT
4. REDUCE

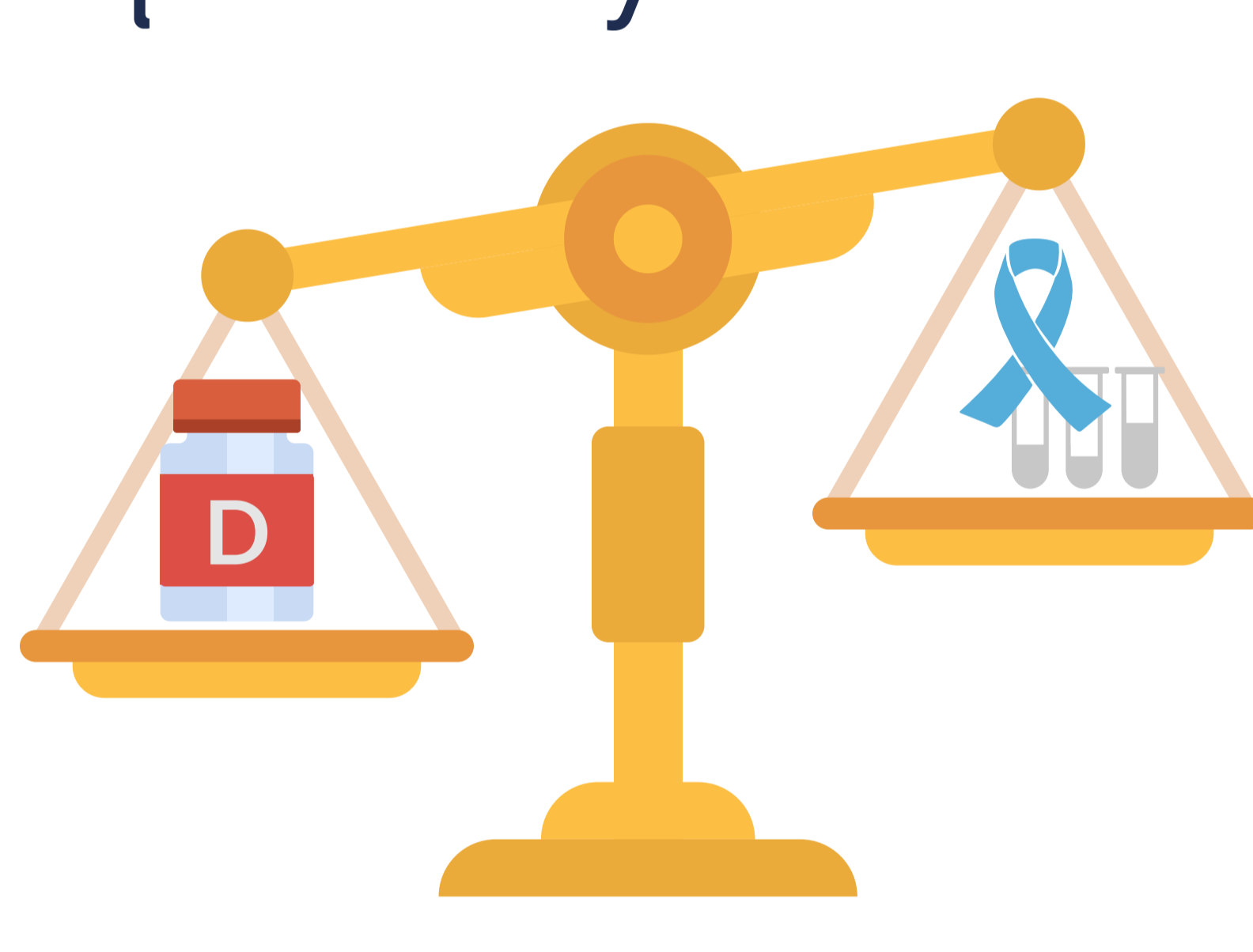
IDENTIFY

Various initiatives determine services to be **low-value**, including:



MEASURE

Once **LVC** is identified, analytical **tools** can use sources such as **All Payer Claims Databases** to quantify their use



REPORT

The identified and measured **LVC** can be incorporated into a standardized **scorecard...**

IDENTIFY	MEASURE
Vitamin D screening tests	# of tests ✓
PSA screening for men 70 and older	# of screenings ✓
Diagnostic tests before low-risk surgery	# of tests ✓

...to effectively communicate findings

REDUCE

States can reduce **LVC** through a number of **levers:**

PROVIDER-FACING

PATIENT-FACING

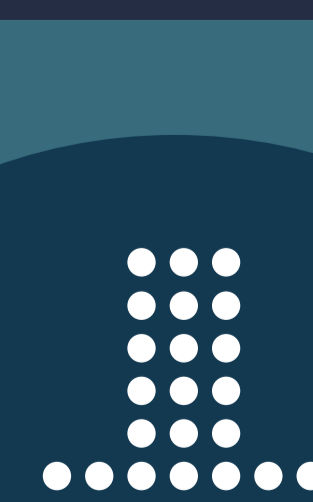
Incorporate alternative payment models

V-BID **Align out-of-pocket costs with value**

Do not reimburse inappropriate services

Steer to providers that minimize LVC

The money saved from implementing a multi-step approach to reduce **low-value care...**



IDENTIFY. MEASURE. REPORT. REDUCE.

...will allow states to reallocate spending to pay for services that improve population health