

Dear Colleagues,

Happy (belated) Thanksgiving!

We are pleased to share upcoming events and news related to low-value care mitigation. Please feel free to reach out with any questions or suggested material for future updates.

Contact List

As part of the <u>survey after our last meeting</u> (thank you to those who responded!), I asked participants to indicate whether I could share their contact information with others who attended. <u>Please visit this simple Google Sheet</u>, if you'd like to find someone's contact information. I'm also happy to add anyone's information if they wish.

Upcoming Events

- HELP Committee hearing "Reducing Health Care Costs: Improving Affordability Through Innovation"
 - When: Wednesday, November 28 at 9:30AM
 - Where: <u>online</u> or 430 Dirksen
- Save the Date: the March 2019 Task Force on Low-Value Care meeting will be held on **March 13 and 14** at the Detroit Westin Airport Hotel. Official invites and more information to come.

Recent News and Noteworthy Reads on Low-Value Care

- <u>To Curb Wasteful Health Spending, Walmart to Send Employees Traveling</u> <u>for Spine Surgery</u> (WSJ)-- Recognizing the importance of site-of-care when it comes to value, "the retailer will require employees to undergo the surgeries at designated hospitals to lower health-care costs."
- Fish Oil and Vitamin D Pills No Guard Against Cancer or Serious Heart <u>Trouble</u> (KHN) -- a recent study published in the NEJM is "the strongest and most definitive examination yet" that vitamin D supplements and blood tests for vitamin D deficiency are unnecessary. According to the study, "even people who

began the study with clear vitamin D deficiency got no benefit" from supplements. The study did not examine the effect of vitamin D on bones.

- Physician Characteristics Associated With Ordering 4 Low-Value Screening <u>Tests in Primary Care</u> (JAMA Open) -- the study followed 4 low-value screening tests (DXA scans, ECGs, Pap tests, and chest radiographs) among low-risk outpatients. Older, male physicians in an enhanced fee-for-service payment models (vs capitated) were more likely to order these low-value tests.
- Some state employees can now shop for cheaper medical procedures -when will the rest of us be able to? (Virginia Mercury) -- State employees in Virginia can now participate in a shared savings program, similar to that in Kentucky, whereby employees can receive a cash incentive for choosing a cheaper option. Despite high price variation in some regions, highly consolidated markets or low price (and quality) transparency could hamper the value of this approach.
- Pricey Precision Medicine Often Financial Toxic for Cancer Patients (KHN)
 a personal story highlighting the growing need to create headroom for high-value, but high-cost, such as precision oncology medicine.
- U.S. Hospitals wasting about \$25.4B on supply chain every year (FierceHealthcare) -- hospitals will waste 10% more than last year on unnecessary supply chain spending, according to a <u>new report by Navigant</u>.