



Unnecessary Tests and Procedures In the Health Care System

What Physicians Say About The Problem, the Causes, and the Solutions Results from a National Survey of Physicians

May 1, 2014

Conducted for The ABIM Foundation

Ву

PerryUndem Research/Communication

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Physicians Say Unnecessary Tests and Procedures Are a Serious Problem, and Feel a Responsibility to Address the Issue

Introduction

May 1, 2014. Funded by the Robert Wood Johnson Foundation, the ABIM Foundation commissioned PerryUndem
Research/Communication to conduct a national survey of physicians. The purpose of the survey was to gauge physicians' attitudes toward the problem of unnecessary tests and procedures in the health care system, views on the causes of the problem, and their perspectives on various solutions. The survey also measured exposure to the Choosing Wisely® campaign and compared self-reported behaviors between those with and without exposure to the campaign.

The survey was conducted by telephone from February 12 through March 21, 2014 among n = 600 physicians (primary care and specialists) nationwide. The margin of sampling error is \pm 4.0 percentage points. The margin of error is larger for smaller subsamples. More information about the methodology can be found at the end of this report.

Following are detailed findings.

Nearly 3 in 4 physicians say unnecessary tests and procedures represent a serious problem in the health care system.

A majority of physicians feels a strong responsibility to help their patients avoid unnecessary care.



Views on The Problem Of Unnecessary Tests and Procedures

Physicians say unnecessary tests and procedures in the health care system are a serious problem.

Nearly three-quarters (73 percent) of physicians say the frequency of unnecessary tests and procedures in the health care system is a very (29 percent) or somewhat (44 percent) serious problem. About one in four (26 percent) feels it is not a serious problem. (See Figure 1.)

A similar proportion (72 percent) says the average physician prescribes an unnecessary test or procedure at least once a week.

In their own practice, almost half (47 percent) say patients request an unnecessary test or procedure at least once a week. (See Figure 2.) Three in ten (30 percent) physicians say this happens at least several times a week.

Primary care physicians are more likely than specialists to say that patients request unnecessary tests or procedures at least several times per week (40 percent vs. 24 percent).

Figure 1: Do you think the frequency of unnecessary tests and procedures in the health care system is a...

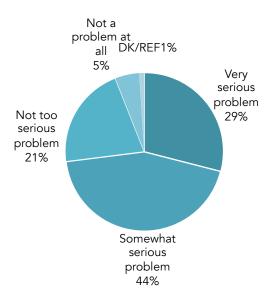
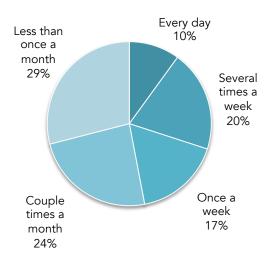


Figure 2: In your own practice, how often do patients ask for a test or procedure that you think is unnecessary?





Physicians are talking with patients about this issue when it arises. A large majority (87 percent) says they always or almost always talk to patients about reasons to avoid a test or procedure when a patient requests one.

Seventy percent of physicians say their patients always or often follow their advice and avoid the test or procedure. About one in four (27 percent) says their patients follow their advice about half of the time or less often. (See Figure 3.)

Despite conversations, many physicians are likely to order an unnecessary test or procedure when presented with an insistent patient. Given a hypothetical situation in which a patient is insistent about getting an unnecessary test, 53 percent of physicians say they would ultimately order the test. Four in ten (40 percent) say they would refuse to order the test. (See Figure 4.)

Physicians who see fewer than 100 patients per week are more likely to refuse a test than those who see 100 or more (44 percent vs. 32 percent). Additionally, physicians who have seen Choosing Wisely materials are more likely to refuse to order a test (44 percent vs. 37 percent who have not seen materials).

Figure 3: How often do patients follow your advice and avoid the test or procedure?

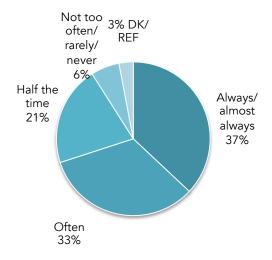


Figure 4: Let's say a patient came to you convinced he or she needed a specific test. You knew the test was unnecessary, but the patient was quite insistent.

Would you:

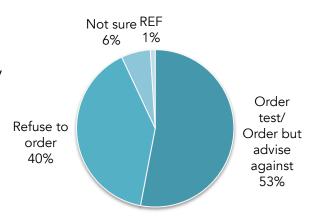




Table 1: Response to Insistent Patient by Demographics

	Order test/	
	Order but advise	Refuse to order
	against	test
All MDs	53%	40%
Sees < 100 patients per week	48%	44%
Sees 100+ patients per week	61%	32%
Has seen Choosing Wisely® materials	47%	44%
Has not seen Choosing Wisely® materials	56%	37%

Views on The Cause

Unnecessary tests and procedures may be mostly about physicians' own reassurances.

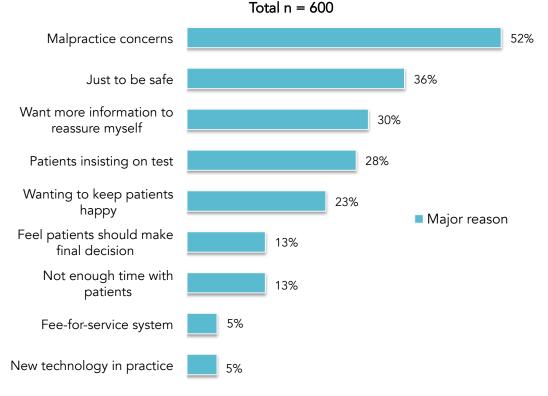
The top reasons physicians say they order unnecessary tests and procedures are concern about malpractice issues (52 percent say a major reason), just to be safe (36 percent), and wanting more information for reassurance (30 percent). (See Figure 5.)

The second-tier influences are patients' insistence (28 percent) and wanting to keep patients happy (23 percent).

Third-tier reasons include other factors such as not having enough time with patients (13 percent), the fee-for-service system (5 percent), and new technology in their practice (5 percent).



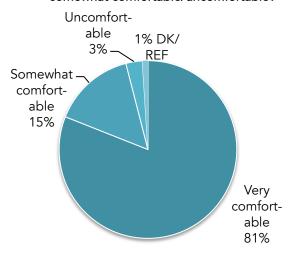
Figure 5: In your own practice, is this a reason you sometimes end up ordering an unnecessary test or procedure? IF YES: Is this a major reason or minor reason?



The survey explored the extent to which physicians' comfort level with talking to patients about avoiding unnecessary tests and procedures contributes to the problem.

Comfort talking to patients about this issue does not appear to be a major problem. A large majority (81 percent) feels very comfortable talking to their patients about why they should avoid an unnecessary test or procedure. (See Figure 6.)

Figure 6: Do you feel comfortable or uncomfortable talking to patients about why they should avoid an unnecessary test or procedure? Do you feel very or somewhat comfortable/uncomfortable?





Additionally, 87 percent of physicians say they always or almost always talk to their patients about avoiding an unnecessary test or procedure when their patients ask for one. (See Figure 7.)

Interestingly, this discussion may not always include information about the costs of tests and procedures. Only one in five physicians (20 percent) says they always or almost always talk with their patients about the costs of tests and procedures. More than half (57 percent) say they do so about half the time or less often, including 19 percent who say they rarely or never discuss costs. (See Figure 8.)

Figure 7: When patients ask for a test or procedure you feel is unnecessary, how often do you talk to them about why they should not have the test or procedure?

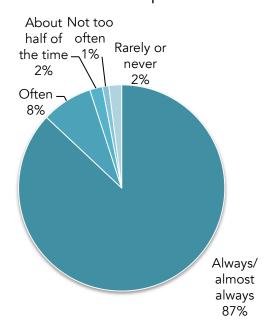
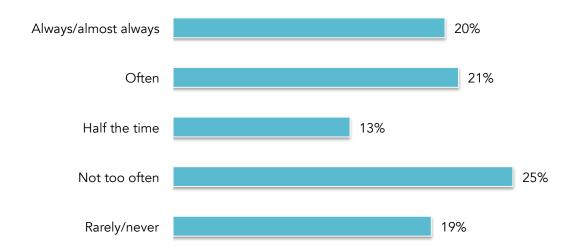


Figure 8: How often do you talk with your patients about the costs of tests and procedures?





Views on The Solution

Physicians feel a responsibility to make sure their patients avoid unnecessary care, and feel they are in the best position to address the problem.

A majority of physicians (66 percent) feels they have a great deal of responsibility to make sure their patients avoid unnecessary tests and procedures. (See Figure 9.)

Respondents also say physicians are in the best position to address the problem (58 percent), with the government following as a distant second (15 percent). (See Figure 10.)

Figure 9: How much responsibility do you feel you have for making sure your patients avoid unnecessary tests and procedures?

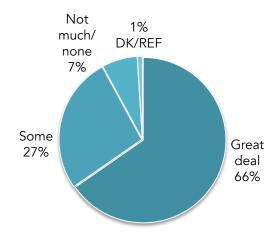
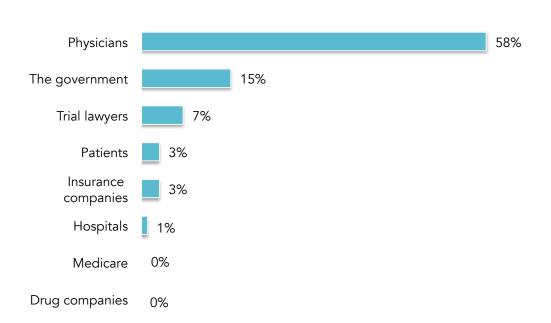


Figure 10: Who do you think is in the best position to help address the problem of unnecessary tests and procedures?*



^{*} This question was an open-ended question. If a respondent replied "don't know," the list was read to him or her.



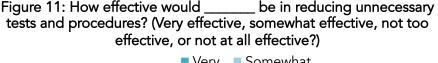
When asked about a range of potential solutions, most physicians (91 percent) say malpractice reform would be an effective way to reduce unnecessary tests and procedures. (See Table 11.)

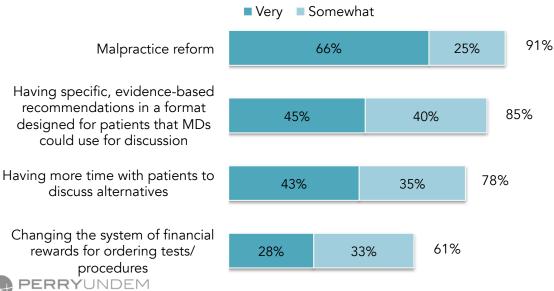
A majority (85 percent) also says having specific, evidence-based recommendations that physicians can use with patients would be effective.

Three in four (78 percent) say having more time with patients to discuss alternatives would be effective. Female physicians are more likely than male physicians to say having more time would be effective (87 percent vs. 74 percent).

Six in ten (61 percent) say changing the system of financial rewards some physicians receive for ordering tests and procedures would be an effective solution. Physicians who see fewer than 100 patients a week are more likely than others to say this would be effective (67 percent vs. 49 percent).

84 percent of physicians are interested in learning more about evidence-based recommendations that address when tests and procedures may be unnecessary.





Physicians who are aware of the Choosing Wisely campaign are more likely to have reduced the number of times they recommend a test or procedure in the past year.

The survey measured unaided and aided recall of the Choosing Wisely® campaign.

Prior to a description, respondents were asked: "Have you heard of the Choosing Wisely® campaign or not?" (unaided recall). One in five physicians (21 percent) reports hearing about the campaign; 78 percent reports not hearing about it.

Physicians who report (unaided) exposure to the campaign are more likely to have reduced the number of times they recommended a test or procedure in the last year because they learned it was unnecessary (62 percent vs. 45 percent). (See Figure 12.)

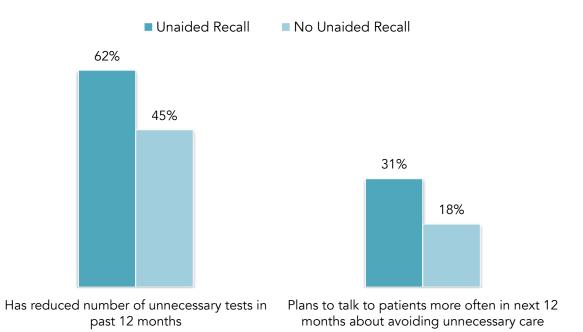
Additionally, those with exposure are more likely to say they will be talking to patients more often in the next 12 months about avoiding unnecessary tests or procedures.



Physicians with exposure to the Choosing Wisely campaign are 17 points more likely to have reduced the number of tests or procedures they have done in the last 12 months.



Figure 12: Unaided Recall to Choosing Wisely and Behaviors





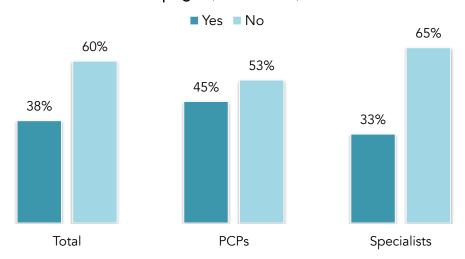
Respondents were then presented with the following description of the Choosing Wisely® campaign:

As you may know, the Choosing Wisely campaign is an initiative of the ABIM Foundation to help physicians and patients talk about unnecessary tests and procedures, and make smart and effective choices. The Choosing Wisely campaign has worked with medical specialty societies to create lists of evidence-based recommendations addressing when certain "routine" tests and procedures should be subject to further discussion. For example, the American Academy of Family Physicians recommended against prescribing antibiotics for acute mild-to-moderate sinusitis unless symptoms last for seven or more days.

45 percent of primary care physicians say they have seen or heard about the Choosing Wisely campaign after a description.

After the description, 38 percent of physicians say they have heard about the campaign. (See Figure 13.)

Figure 13: Have you seen or heard about the Choosing Wisely campaign? (Aided Recall)





Conclusion

Physicians clearly recognize the problem of unnecessary tests and procedures in the health care system, and feel they are in the best position to address the problem.

The survey also suggests physicians are not placing the problem or blame on patients for unnecessary care. In fact, the causes of the problem tend to center on malpractice concerns and the physician's own desire to reassure themselves.

Respondents say one effective way to address the problem is having specific, evidence-based recommendations around unnecessary care that they can use to discuss with patients. The survey analysis suggests real promise for this approach. Physicians who reported having exposure to the Choosing Wisely campaign are significantly more likely to have reduced the amount of unnecessary care they have provided in the past year compared to those who have not seen or heard of the campaign.

For more information about the study, including the survey instrument, topline results, and methodology report go to: www.choosingwisely.org

Methodology

The survey was conducted by telephone February 12 through March 21, 2014 among a nationally-representative sample of n=600 practicing physicians in the US. A random sample was drawn from the American Medical Association's Physician Masterfile. Respondents were screened for actively practicing medicine with patients. The data were weighted slightly to reflect demographics based on the Association of American Medical Colleges' 2013 State Physician Workforce Data Book. The margin of sampling error is \pm 4.0 percentage points.

