Lessons Learned from the Choosing Wisely® Pilot Communities

The Choosing Wisely® Campaign

Choosing Wisely is an initiative of the ABIM Foundation to help clinicians and patients engage in conversations about the overuse of tests and procedures and to support physician efforts to help patients make smart, effective choices.

Definition of Overuse
Low-value care or overuse: “care in the absence of a clear medical basis for use or when the benefit of therapy does not outweigh risks.”

Stimulating Innovation and Implementation
The Robert Wood Johnson Foundation has provided two rounds of funding to advance Choosing Wisely, including the referenced grant of $4.2 million to support seven initiatives focused on reducing utilization of unnecessary tests and treatments—including a 20% reduction of inappropriate prescribing of antibiotics for upper respiratory infections or bronchitis.

Principal Findings
- 12 of the 14 health systems reached goal for at least one recommendation
- 8 of 14 reached goal for at least two recommendations
- 3 health systems reached all three goals
- Systems made significant (>5%) reductions for 15 additional recommendations

Reduction of prescriptions of antibiotics for Upper Respiratory Infections and Bronchitis

<table>
<thead>
<tr>
<th>Site</th>
<th>Baseline %</th>
<th>End %</th>
<th>% Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sharp Rees-Staaly</td>
<td>24.06%</td>
<td>18.97%</td>
<td>-23%</td>
</tr>
<tr>
<td>Sutter Health</td>
<td>53.68%</td>
<td>30.43%</td>
<td>-43%</td>
</tr>
<tr>
<td>LA Department of Health</td>
<td>58.7%</td>
<td>32.06%</td>
<td>-45%</td>
</tr>
<tr>
<td>Cleveland Medical Center PMH</td>
<td>70.06%</td>
<td>42.00%</td>
<td>-28%</td>
</tr>
<tr>
<td>Henry Ford Health System</td>
<td>77.12%</td>
<td>23.38%</td>
<td>-70%</td>
</tr>
<tr>
<td>St. Joseph Hospital</td>
<td>40.24%</td>
<td>30.89%</td>
<td>-23%</td>
</tr>
<tr>
<td>Cornerstone Health Care</td>
<td>30.56%</td>
<td>20.52%</td>
<td>-33%</td>
</tr>
<tr>
<td>Duke Health</td>
<td>79.36%</td>
<td>51.93%</td>
<td>-34%</td>
</tr>
<tr>
<td>Kaiser Permanente, Washington</td>
<td>38.8%</td>
<td>25.99%</td>
<td>-38%</td>
</tr>
<tr>
<td>Swedish</td>
<td>38.57%</td>
<td>30.40%</td>
<td>-21%</td>
</tr>
<tr>
<td>Froedtert &amp; the Medical College</td>
<td>74.06%</td>
<td>39.76%</td>
<td>-46%</td>
</tr>
<tr>
<td>Monroe Clinic</td>
<td>69.12%</td>
<td>26.53%</td>
<td>-62%</td>
</tr>
</tbody>
</table>

Providing clinical feedback and comparisons
Using patient materials
Convening a workgroup and identifying champion clinicians
Incorporating clinical decision support or best practice alerts

Other interventions included:
- Using behavioral economics with nudging posters
- Changing workflows
- Incorporating incentives

Successful Interventions

<table>
<thead>
<tr>
<th>Site</th>
<th>Recommendation</th>
<th>Baseline %</th>
<th>End %</th>
<th>% Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Henry Ford Health System</td>
<td>Reduction of Low Back Imaging</td>
<td>17.53%</td>
<td>13.11%</td>
<td>-27%</td>
</tr>
<tr>
<td>Cornerstone</td>
<td>Reduction of DEXA scans</td>
<td>0.62%</td>
<td>0.45%</td>
<td>-45%</td>
</tr>
<tr>
<td>S. MOY</td>
<td>Reduction of Low Back Imaging</td>
<td>13.49%</td>
<td>8.39%</td>
<td>-38%</td>
</tr>
<tr>
<td>Monroe</td>
<td>Reduction of Headache Imaging</td>
<td>23.84%</td>
<td>8.78%</td>
<td>-63%</td>
</tr>
</tbody>
</table>

Interventions
- Physician Champions
- Comparative provider feedback meetings and reports
- Best practice alerts
- Clinical decision support
- Patient materials
- Peer-to-peer training
- Workgroup
- Changes to order sets
- Provider feedback meeting
- Patient materials
- Academic detailing
- Created Smart Set and standardized workflow
- Decision support tool
- Developed evidence based pathways for standardized spine care
- Patient materials
- Provider education
- Patient education

Conclusions
- Grantees were successful in developing holistic communications strategies that focused on ground-level, face-to-face conversations with consumers and providers, as well as aggressive marketing campaigns to consumers.
- All of the successful reductions used a multimodal approach to interventions. The interventions that grantees had the highest agreement on included provider education, using transparent data, integration into the EMR and patient education. Grantees also cited the importance of leadership support.
- Provider education took many forms. Small group and individual peer-to-peer education, combined with data presentations, was found to be the most effective.
- Formal feedback, including reporting data at the provider and practice level, was considered by most grantees as an essential element to success and was thought to trigger peer conversations on best practice and tactics being used.
- According to clinicians, patient education is very helpful for measures that involved patient decision making, particularly in the outpatient setting. Patient education prior to the actual appointment was identified as optimal.
- Reductions in imaging appear to be more difficult to achieve. Of the 17 areas of imaging grantees attempted to make reductions, only five were successful. Those reductions were associated with multiple interventions.

Implications for Policy or Practice:
Integrated efforts between health systems and multi-stakeholder organizations to reduce overuse appear to be successful in some areas. Larger scale efforts with more rigorous evaluation are needed.

Health systems interested in addressing overused tests and treatments might benefit from creating relationships to set a collaborative goal of reduction with multi-stakeholder organizations, community organizations and other health systems in their communities.