



Widening the Reach of Evidence-Based Medicine

By

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There's no question that everyone wins—patients, providers, health insurers and employers—when caregivers practice evidence-based medicine (EBM). Yet, consider these statistics:

- ▼ A June 2003 *New England Journal of Medicine* study of more than 400 indicators of quality care for 30 conditions determined that, on average, patients received recommended care only about half the time.
- ▼ A January 2003 study in the *Journal of the American Medical Association* found that only 11 percent of physician organizations had adopted clinical guidelines, trained physicians in their use and presented the information in patient charts, reminder systems or order-entry systems for each of four chronic conditions they treat: diabetes, asthma, congestive heart failure and depression.
- ▼ Quality gaps—many attributable to the failure to adopt best practices—lead to more than 57,000 deaths a year, according to a September 2003 study by the National Committee for Quality Assurance (NCQA).

Quality results when everyone involved in a patient's care has: 1) knowledge of accepted, evidence-based standards of medical care; 2) a supportive environment for the application of that knowledge; and 3) awareness, through established

metrics and outcomes measures, of when deviations from these standards exist. The NCQA study cited above also found that, when health plans publicly reported performance data, clinical care improved in most areas.

EBM must be shared with and used by everyone involved in a patient's care. Getting everyone on the same page, when it comes to medical information, represents an opportunity to improve the sometimes adversarial relationships among providers, payers and consumers.

Information Overload

Keeping abreast of the advances in medical research is a Herculean task, as hundreds of thousands of research studies are published each year in about 20,000 medical journals.

Information technology can go a long way toward easing the dissemination and use of EBM, but clinical decision support tools are still far from the norm in day-to-day practice. In a 2002 poll conducted by McKesson and Harris Interactive, only 12 percent of nurses and physicians had ever used advanced clinical decision support tools such as those that monitor and compare patient information and issue rules-based alerts.

These tools are often viewed as impediments or unnecessary burdens, interfering with the art of

medicine. As physicians are increasingly measured by, and their incentives designed around, quality of care as opposed to quantity of care (i.e., measures of utilization), seamless deployment of EBM will be imperative.

Healthcare consumers, in turn, face an increasing challenge in navigating the healthcare system and complex decision-making processes. As consumers are asked to share an increasing portion of the healthcare cost burden, they look with greater urgency for appropriate, balanced information to help them make smart decisions based on EBM and their personal values.

What they're finding—especially from the Internet—are thousands of disparate sources of information that can be difficult to reconcile. The Internet can contain outdated and contradictory information, often leaving consumers more frustrated and confused than when they started. Direct-to-consumer marketing only adds to the array of data available.

Factor in, too, the complex or incomplete information consumers receive from their caregivers, then multiply by the number of caregivers involved. It's easy to see that "consumer-directed care" has the potential both *not* to deliver the anticipated savings to the healthcare system *and* to further erode the quality of care.

Enter the Health Plan

Of all healthcare constituents, health plans are best positioned to influence the quality of care by supporting informed decision-making. The key is to provide consistent, evidence-based care information to both providers and consumers—information that complements the information the health plan itself uses to evaluate caregivers' provision of services.

What would it take to get everyone on the same EBM page? Here are some of the basic principles underlying such an undertaking:

Know your audience. Provide consistent, evidence-based information to everyone involved in the healthcare decision-making process, and customize the approach for each audience. Information provided to consumers must be simplified, but not dumbed down. Tools used to deliver this “science” to physicians must be current and credible, and must accommodate the “art” of medicine.

Present the full story. Share benefit and coverage information as part of the discussions around healthcare decisions. To allay patients' fears that a plan's primary motivation is to keep costs down, the plan should identify which treatment options are covered and which are not, as well as provide the evidence-based rationale behind these decisions.

Respect communication preferences. Determine how each person likes to receive information—then deliver it in that format. Mobile physicians and nurses want tools delivered on handhelds. Some patients prefer e-mail, while others opt for printed material. The power of direct, physician-to-patient communication cannot be underestimated, particularly when both parties have access to the same set of EBM information.

Keep information current. Nothing will lose the confidence of patients and physicians more quickly than outdated information.

Provide incentives for EBM's use. Give physicians CME credit—perhaps even risk-management recognition—for engaging with EBM tools, and develop pay-for-performance incentives that reward EBM's application. Educate consumers about the most credible information sources, and create reward programs for consumer participation in disease and health management programs.

Everyone Wins

In their role as information purveyors, health plans can be more effective at achieving the goal of medically appropriate, cost-effective care. Grounding rules for payers, health information for consumers and clinical decision-making tools for providers in the same em-

pirical evidence—and committing to information transparency—will help the entire system gain greater alignment.

Physicians, nurses and other caregivers will have the information they need to provide more consistent and cost-effective care. They'll also be fairly informed of the yardstick against which their actions will be judged *before* they act. Physicians approaching care from different vantage points will more fully understand the appropriate treatments for a condition and cause less conflict for consumers.

Consumers will ask more informed questions and be more receptive to physicians' recommendations if they understand the rationale behind them. As everyone knows, informed, engaged patients are the most likely to follow their treatment plans and judiciously use healthcare resources.

In an age when health plans look increasingly alike, the ability to unite all healthcare constituents in the common pursuit of better quality care really sets a health plan apart from its competition.

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