



June 2011

Study Shows MRI Referral Increase Among Physicians With Financial Interest In Imaging Equipment

A recent study published in the April issue of the *Health Services Research Journal* found a significant increase in MRI referrals for patients with lower back pain by physicians who own their own imaging equipment. The study examined the effect on Medicare patients after imaging equipment was either purchased or leased by 1,033 primary care physicians and 1,271 orthopedists.

According to a report on the study by HealthDay News, MRI referrals increased 13 percent among orthopedists and 32 percent among primary care doctors who acquired the imaging equipment. The study also found a 34 percent increase in back surgery within six months of a patient’s first visit to an orthopedist after the imaging equipment had been acquired.

Jacqueline Baras Shreibati, MD, of Stanford University School of Medicine and lead author of the study told the Health Behavior News Service that financial incentives, inherent in self-referral, “seem to have an influence on physician behavior that we can’t ignore and an impact on patient care in the long run.”

Jean M. Mitchell, PhD, professor of public policy at Georgetown University, told the Health Behavior News Service, “the main contribution of this research is what it shows about ‘cascade effects’” of self-referral — its impact “not just on the procedure itself, but things that happen as a result. If the patient hadn’t had the MRI, they never would have had the back surgery.”

Mitchell added, “Medicare spending alone would go down 25 percent if self-referral were really policed or eliminated.”

Sources for this article: HealthDay News (www.healthday.com) and Health Behavior News Service, part of the Center for Advancing Health (www.cfah.org)

Health Plans Join National Partnership To Promote Patient Safety

Evidence continues to mount that far too many patients are harmed as the result of preventable events that occur during the course of receiving medical care. A recent report published in *Health Affairs* found that errors and adverse events occur in one in three hospital admissions. A landmark report released by the Institute of Medicine in 1999 concluded that up to 98,000 patients die per year as a result of such events.

In light of these alarming findings, health plans have joined in the U.S. Department of Health and Human Services’ “Partnership for Patients” initiative aimed at preventing patients from getting injured, helping patients to heal without complications, and helping patients to avoid preventable readmissions.

Health plans bring to the partnership a strong track record of promoting patient safety and high-quality care with programs that are aimed at protecting patients, especially those who are most vulnerable. Health plan programs focus on important priority areas such as reducing health care-acquired infections, so-called “never events,” preventable hospital readmissions and dangerous drug interactions.

Individual plans are achieving results, and American Health Insurance Plans’ industry studies on hospital readmissions have found that compared to fee-for-service, Medicare Advantage plans reduced emergency room visits by 24 percent, hospital readmissions by 30 percent, certain potentially avoidable hospital admissions by 10 percent and inpatient hospital days by 20 percent.

Birthdays

June

- 3 – Rep. Will Hartnett
- 4 – Rep. Naomi Gonzalez
- 5 – Rep. Trey Martinez Fischer
- 8 – Rep. Aaron Pena
- 16 – Sen. Kel Seliger
- 19 – Rep. Veronica Gonzales
- 20 – Rep. Lanham Lyne
- 21 – Rep. Dan Huberty
- 25 – Rep. Larry Taylor
- 27 – Rep. David Simpson
- 29 – Rep. Doc Anderson

Study Finds Students' Health Improves When Offered Healthier Choices

Middle school students who were offered healthier cafeteria food, more physical education and lessons about health choices improved their cholesterol levels and resting heart rates, according to research presented at the American Heart Association's Quality of Care and Outcomes Research 2011 Scientific Sessions.

The intervention was conducted through Project Healthy Schools, a coalition of the University of Michigan and local community and business organizations working to improve the health and behavior choices of middle school students. It was considered so successful that it's now being expanded to about 20 middle schools in Michigan.

Specifically, the program goals for the students included eating more fruits and vegetables; eating less fatty foods; making better beverage choices; getting at least 150 minutes of physical activity each week; and spending less time in front of the TV and computer.

To help determine whether the initiative could decrease future cardiovascular disease and diabetes risks, researchers collected data for four consecutive years from 593 students on body mass index, cholesterol levels, blood pressure, heart rate and student self-evaluations of diet, exercise and other behaviors.

The researchers report:

- Average cholesterol, which was 167.39 milligrams per deciliter of blood (mg/dL) at the start of the study, was an average of 149.04 mg/dL at the end of four years.
- Low-density lipoprotein (LDL) was an average 92.02 mg/dL at the study's start, versus 85.88 after four years.
- Resting heart rate (beats per minute) was an average of 81.3, compared to 78.3 after four years.

According to researchers, after four years, students continued to make health-conscious decisions.

Program Aimed at Reducing Toll and Costs of Chronic Conditions in Medicaid Program Is Announced

As part of the nation's efforts to reduce the toll and costs of chronic health conditions, the Department of Health and Human Services (HHS) has announced a new \$100 million program allowing states to offer incentives to Medicaid enrollees who adopt healthy behaviors such as quitting smoking or losing weight.

Through the program, states are encouraged to adopt such strategies as rewarding Medicaid enrollees who meet goals established for them such as weight loss, smoking cessation, or diabetes prevention or control. Rewards could range from direct cash incentives, gift cards to grocery stores or other retailers, reduced Medicaid program fees (if any apply) or offering services not normally available through Medicaid.

The program focuses on those behaviors that can cause some of the most critical chronic conditions that together affect millions of Americans. For example:

- Tobacco use is responsible for more than 430,000 deaths each year, and is the largest cause of preventable morbidity and mortality in the US. It is estimated that approximately \$100 billion of the nation's total health care costs each year are related to smoking.
- An estimated 26.7 percent of adults in the US reported being obese in 2009. In 2008, the annual health care cost of obesity in the US was estimated to be as high as \$147 billion a year.
- More than one-third of adults have two or more of the major risk factors for heart disease, a leading cause of morbidity, mortality, and health care utilization and spending.
- Diabetes is the seventh leading cause of death in the US, and accounted for \$116 billion in total US health care system costs in 2007.

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