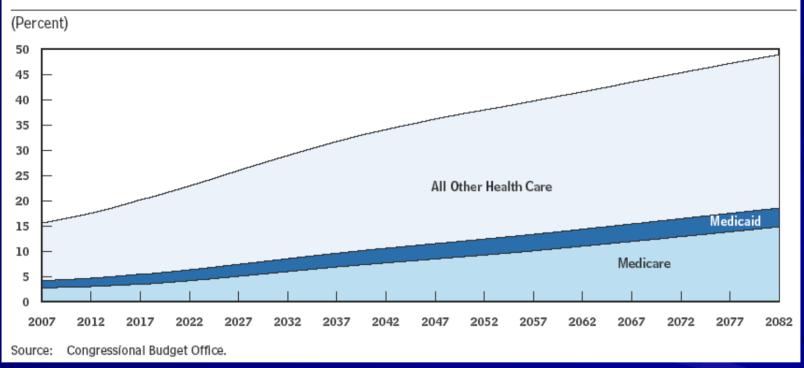
Seeking Value in the Prevention and Treatment of Disease

Congressional Briefing SCORING PREVENTION-CENTERED LEGISLATION September 29, 2008

Steven H. Woolf, MD, MPH
Department of Family Medicine
Virginia Commonwealth University
representing
American College of Preventive Medicine
Partnership for Prevention

swoolf@vcu.edu

Projected Spending on Health Care as a Percentage of Gross Domestic Product



Source: Congressional Budget Office, *The Long-Term Outlook for Health Care Spending*, 2007

The Logic of Prevention

- 38% of all U.S. deaths attributable to 4 behaviors*:
 - Tobacco use
 - Diet
 - Physical inactivity
 - Alcohol misuse
- Obesity expected to increase Medicare spending by 35%**

"In 2001, for example, spending for health care per person of normal weight was \$2,783, compared with \$3,737 per obese person and \$4,725 per morbidly obese person (in 2001 dollars; see the table below). A rise in the prevalence of obesity is therefore a likely contributor to the growth of health care spending."

Statement of Peter R. Orszag, Director, CBO, Growth in Health Care Costs, before the Committee on the Budget, United States Senate, January 31, 2008

The Economics of Prevention

- Will it save money?
- Will it reduce spending?
- Will it cost too much?

TALKING POINTS To Control Health Care Spending

- Look at value
 - Consider the return on investment (ROI), not just the delivery costs
- Look ahead
 - Examine the correct time horizon
- Look at everything
 - Put all expenditures on the table, not just prevention

The Importance of Value

- Health is a good
- Goods are not purchased to save money; there is no free lunch
- The priority is optimizing value: making the dollar go farther
- Money is saved relative to competing options
- Return on investment

Return on Investment

- Cost-benefit
- Cost-effectiveness
- Cost-utility

Cost-effectiveness ratio:

Cost (\$) Health Benefit

Return on Investment

- Cost-benefit
- Cost-effectiveness
- Cost-utility

Cost-effectiveness ratio:

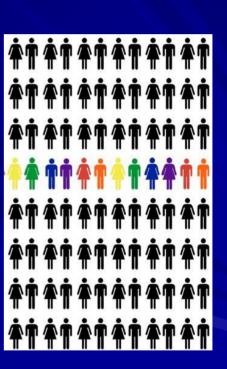
Net cost (\$spent - \$saved)

Health Benefit

1. Look at Value

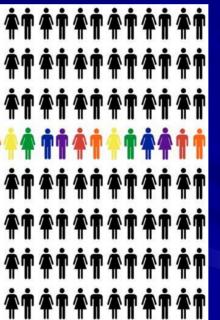
Return on Investment

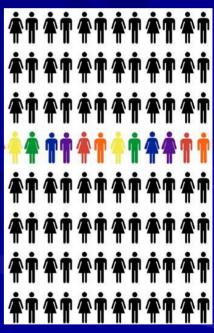




Return on Investment







Cost Saving (CE ratio ≤ 0)

High value care (< \$50,000/LY)

Low value care (\$50,000-\$1,000,000/LY)

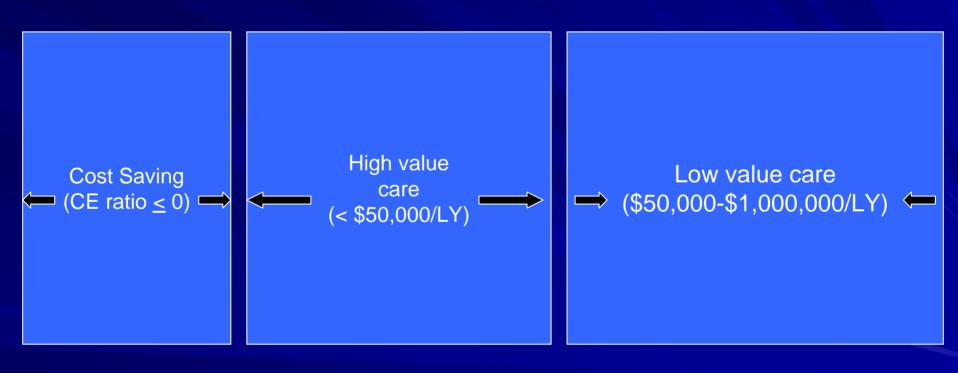
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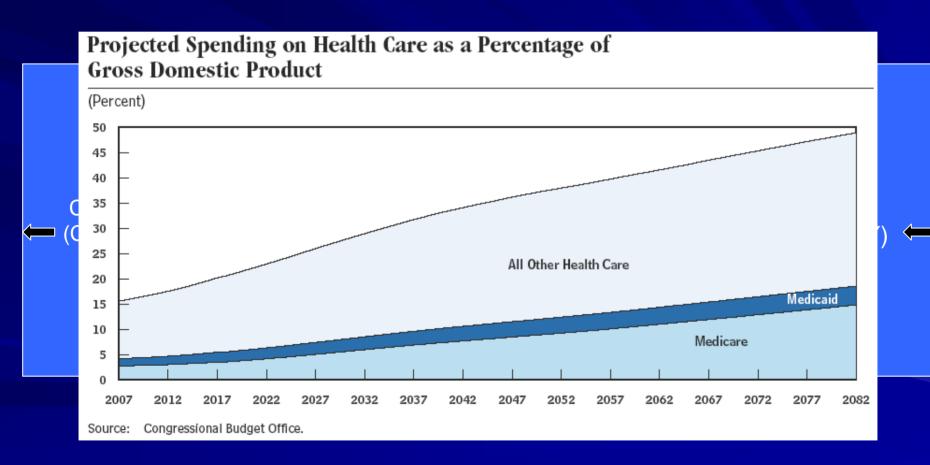
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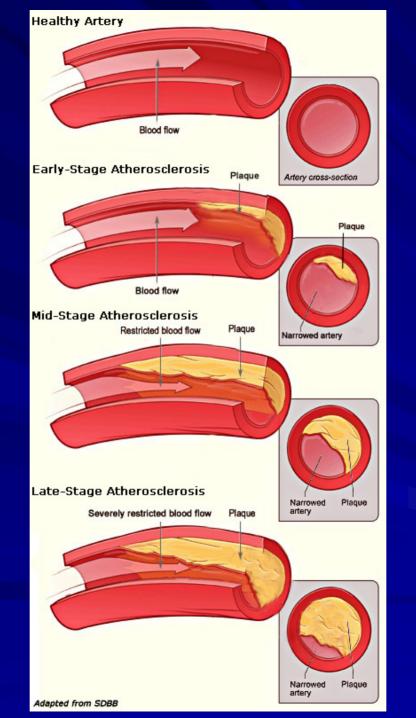




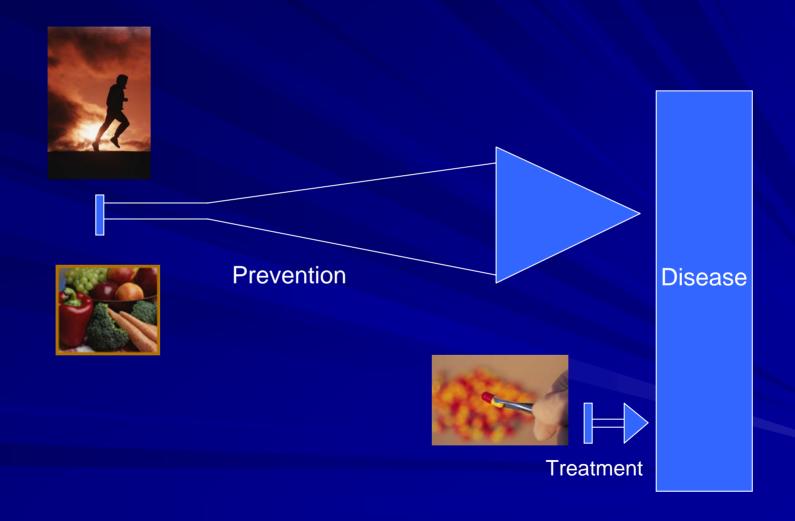




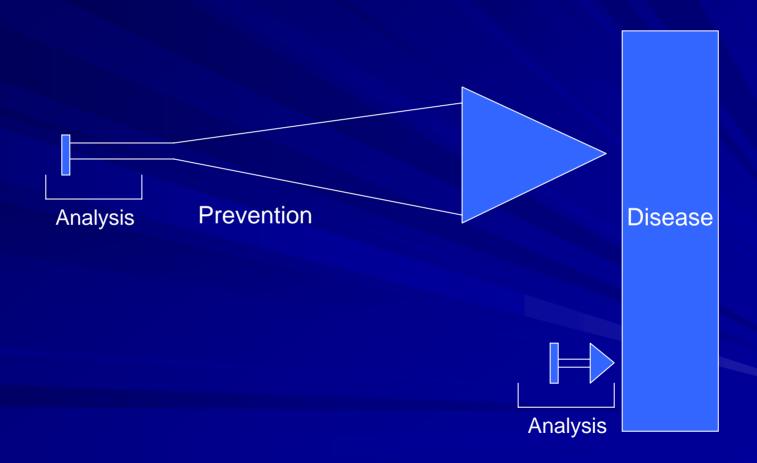
2. Look Ahead



The Need for the Long View



The Need for the Long View





Highest Ranking Preventive Services for U.S. Population	H.I.	C.E.	Total
Discuss daily aspirin use—men 40+, women 50+	5	5	10
Childhood immunizations	5	5	
Smoking cessation advice and help to quit—adults	5	5	
Alcohol screening and brief counseling—adults	4	5	9
Colorectal cancer screening—adults 50+	4	4	8
Hypertension screening and treatment—adults 18+	5	3	
Influenza immunization—adults 50+	4	4	
Vision screening—adults 65+	3	5	
Cervical cancer screening—women	4	3	7
Cholesterol screening and treatment—men 35+, women 45+	5	2	
Pneumococcal immunization—adults 65+	3	4	
Breast cancer screening—women 40+	4	2	6
Chlamydia screening—sexually active women under 25	2	4	



Most Cost Effective Preventive Services

Cost Saving

Advising at-risk adults to consider taking aspirin daily

Childhood immunizations

Smoking cessation advice and help to quit

Screening adults for alcohol misuse and brief counseling

Vision screening (adults 65+)



Most Cost Effective Preventive Services

\$0 to \$13,999/QALY

Chlamydia screening (sexually active adolescents and young women)

Colorectal cancer screening (adults 50+)

Influenza immunization (adults 50+)

Pneumococcal immunization (adults 65+)

Vision screening in preschool age children



Most Cost Effective Preventive Services

\$14,000 to \$34,999/QALY

Cervical cancer screening (all women)

Counseling women of childbearing age to take folic acid supplements

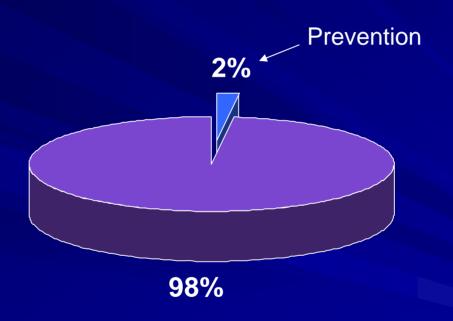
Counseling women to use calcium supplements

Injury prevention counseling for parents of young children

Hypertension screening (all adults)

3. Look at Everything

Seeing the Big Picture



\$2 Trillion Health Care Budget, United States

The Double Standard

- Are the upfront costs too great?
- Is health status improved and how fast?
- How strong is the evidence?
- Is the cost-effectiveness ratio too high?
- Can we afford it?



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Spiral Computerized Tomography



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Contact details Steven H. Woolf, MD, MPH Department of Family Medicine Virginia Commonwealth University 1200 East Broad Street P.O. Box 980251 Richmond, VA 23298-0251 804-828-9625

swoolf@vcu.edu