Business case template

Top Five Service: Low back pain

Executive Summary

Imaging for nonspecific acute low back pain can result in direct harm and avoidable expenditures. The following document details the potential business case for adopting new policies to restrict or change benefits for these services among our employees. The case will address:

- Why low back pain?
- What is the current burden and how would we benefit?
- What are the available tools
- What are the costs associated with reducing these services?
- What are the risks?

Introduction

Some estimates put the value of low-value clinical care at 30% of health care spending in the United States. Purchasers bear a significant weight of that burden, through either higher premiums or the costs to employees related to unnecessary or harmful procedures. The <u>Task Force on Low-Value Care</u> established a list of the "Top Five" low-value services for purchaser action. This effort complements and draws from international work of other information campaigns, such as <u>Choosing Wisely</u>.

One of the Top Five services is "imaging the first 6 weeks of low back pain," which involves the use of computed topography (CT), magnetic resonance imaging (MRI), and x-rays in the first 6 weeks of acute, but uncomplicated low back pain. The Task Force estimates that spending on unnecessary low back imaging is around <u>\$500 million</u>. Specific, actionable tools exist to reduce expenditures on this service that offers no clinical benefit, and could even lead to further harm. We propose taking steps to work with [insert Third Party Administrator information] to limit these expenditures.

Why address acute low back pain in the first 6 weeks? What are the benefits

The Task Force intentionally chose low-hanging fruit with solid evidence bases and clear levers for which purchasers could advocate. To learn more about how the Top Five were chosen, see the Top Five press release from October 2017.

For acute low back pain specifically, the condition affects our employees and the tools to address it could reduce harm and expenditures. In the absence of clinical <u>"red flags,"</u> imaging can be a waste of time and money. Low back pain is a common condition that significantly affects working-age men and women. Research shows that low back pain is a pervasive problem that affects three quarters of adults at some point in their lives, and ranks among the <u>most common and expensive reasons</u> for work disability in the US.

Unfortunately, however, paying for unnecessary imaging or x-ray services in the first 6 weeks:

- Does not provide additional clinical information or change treatment management;
- Will only delay treatment with proven efficacy, such as physical therapy, movement, over-the-counter analgesics, and lifestyle changes);
- Exposes Americans to unnecessary radiation (CT and x-ray) and incidental findings, which can lead to unnecessary surgery or other harm, and;
- Consumes precious health care dollars that can be used to purchase other, highvalue services that will have measurable, positive effects on the employee's wellbeing.

What is the current burden of low back pain at our company or organization?

Actually calculating the amount that the company spends on low-value care can be challenging, and has direct implications for the benefits and risks. <u>The MedInsight Health</u> <u>Waste Calculator can help.</u> The project to reduce spending on low back pain should start with assessing the burden in order to determine the benefits.

What are the tools available and can we deliver on this change?

- Prior authorization/claims edits
- PT bundles
- General V-BID
- <u>See the Task Force on Low-Value Care's toolkit</u> to explore levers, review model RFI language, and talking points for your TPA

What are the costs?

- Calculating burden itself would require claims-based analyses, using tools such as the MedInsight Health Waste Calculator above
- Negotiating with health plan will require staff time
- Developing communication materials

What are the risks?

- Depends on the levers used
- Member experience risk prior authorization can cause employees to believe they are not getting the care they need