2021 Progress Report

Preoperative Testing



Value Coalition Campaign

About the Campaign

Preoperative testing, especially in low-risk surgical procedures, often provides no clinical benefits to patients. Despite this, these services continue to be ordered regularly at hospitals across Michigan. Eliminating this unnecessary and, in some cases, potentially harmful preoperative testing represents a clear opportunity to improve value in surgery. The Michigan Value Collaborative (MVC) Coordinating Center uses administrative claims data and engagement with MVC members to try and reduce the use of unnecessary preoperative testing for surgical procedures to improve quality, reduce cost, and improve the equity of care delivery in Michigan. The MVC Coordinating Center is supported by a stakeholder working group to advise ongoing activity. The expertise of this workgroup is used to provide insight on the best approaches to improve member awareness of preoperative testing practices and increase access to existing guidelines and best practices.

> Blue Cores Share Shared Blue Care Netwoo



Routine preoperative testing before low-risk surgical procedures is a practice that often does not reclassify estimated risk from patient history or physical exams, may delay surgeries unnecessarily, can lead to additional testing downstream and a resulting treatment cascade, and can impose avoidable costs on the patient and provider.

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Preoperative Push Reports

The MVC Coordinating Center first distributed preoperative testing push reports to members and other partner Collaborative Quality Initiatives (CQIs) in February of 2021 to 65 MVC members in the hopes of helping them identify areas of opportunity. A refreshed version of the report was developed using only BCBSM data to provide more up-to-date and granular preop testing information. These reports were distributed in December of 2021.

In general, the reports demonstrated a wide range of testing rates between facilities, with preoperative testing rates ranging from 20% to over 90%. The average overall testing rate was around 62% when looking at all payers and 55% when looking at only the BCBSM payers. Due to the amount of variation, MVC suspects preoperative testing is overused at the state level such that even hospitals that are average or below average may still have significant opportunities to safely reduce preoperative testing.

Preop Testing VCC: 2021 Progress & 2022 Goals

Preoperative Testing Value Coalition Campaign





LABS AND TESTS DON'T IMPROVE OUTCOMES FOR LOW-RISK SURGERIES IN HEALTHY PATIENTS

Yet 48% of these patients still undergo pre-operative testing.

Labs and tests that aren't indicated may cause harm through:



Unindicated labs and tests may yield slightly abnormal but clinically insignificant results, leading to yet more unnecessary tests or procedures.

Delayed Medical Treatment

False alarms can delay surgical procedures.



Lab tests may add to the financial burden on the patient.

Stand with the majority of clinicians and #l



The MVC Coordinating Center developed an informational flyer to explain the case for reducing unnecessary preoperative testing and make clinicians aware of its prevalence. It is accompanied by a QR code that leads to an MVC webpage populated with a variety of preoperative testing resources.

Stakeholder Meetings Held

The MVC Coordinating Center held two preoperative testing stakeholder meetings with representatives from member hospitals and physician organizations. These meetings helped MVC to facilitate collaboration and best practice sharing. Stakeholder meetings will continue to occur on a biannual basis in 2022.

Custom Analytics for Members

The MVC Coordinating Center assisted a number of its members with requests for custom analytics using MVC claims data. These custom reports provided members with information tailored to their specific questions and needs. MVC analysts are eager to prepare similar reports for other members interested in improving their preoperative testing rates.

Published Manuscript

The MVC Coordinating Center contributed to the development of a manuscript that was published in *JAMA Internal Medicine*, a monthly peer-reviewed medical journal. The manuscript's objectives were to "(1) examine use of preoperative testing before 3 common low-risk, ambulatory surgical procedures across diverse practice settings in Michigan, (2) to assess interhospital and intrahospital variations in testing, and (3) to identify determinants of testing to inform targets for future deimplementation strategies. Read the full published manuscript here.

Collaboration with Fellow CQIs

The MVC Coordinating Center is intentional about reaching out to fellow CQIs for partnership opportunities related to its Value Coalition Campaigns. In the case of its preoperative testing campaign, MVC initiated collaborations with the Michigan Program on Value Enhancement (MPrOVE) and the Michigan Surgical Quality Collaborative (MSQC). The Coordinating Center plans to further develop and build on these partnerships in the year ahead with new projects.





VALUE ENHANCEMENT

2022 VCC Campaign Goals

- Develop provider-level reporting
- Conduct an analysis on the cascade effect from unnecessary preoperative testing
 - Draft a manuscript with MVC's findings
- · Host bi-annual stakeholder meetings
- Relationship building with key stakeholders:
 - MSQC site champions
 - Hospital sites for intervention pilot test
 - Physician organizations
- Host a symposium, workgroup, or breakout group focused on preoperative testing
- Use MVC communications to implement a Preoperative Testing Awareness Week
- Refine MVC's preoperative testing sample methodology







