

Behavior and Beyond: The Impact of Provider Behavior on Workers' Comp Costs

Reports from an ongoing collaboration

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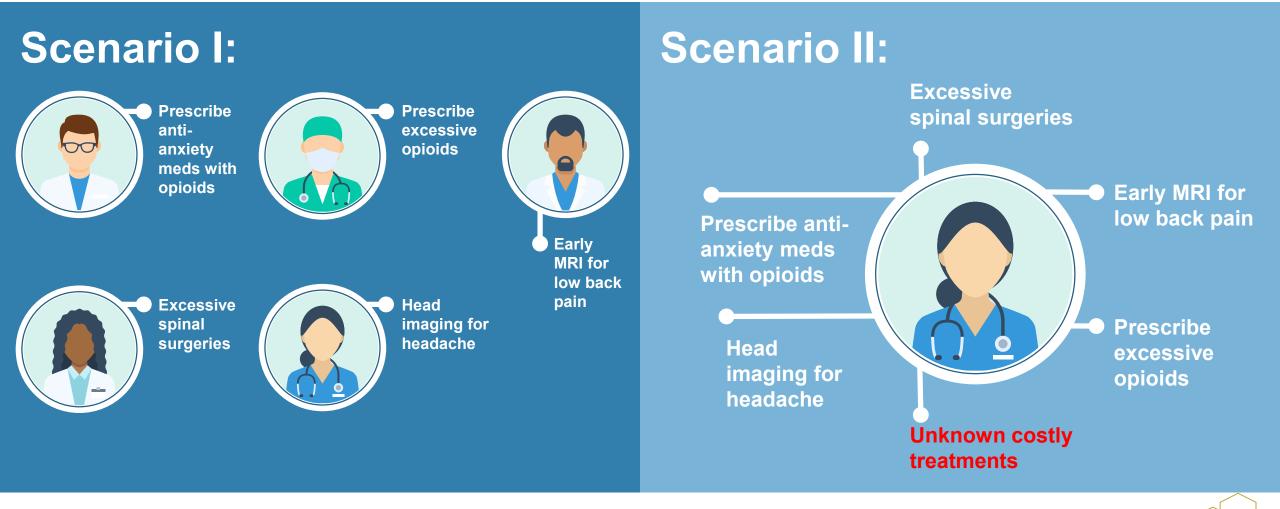
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"The most expensive piece of medical equipment is a doctor's pen."

> Atul Gawande MD, MPH Surgeon, Professor and Author







Do some workers' comp doctors favor multiple forms of costly low-value care? What are the unknown costly behaviors?

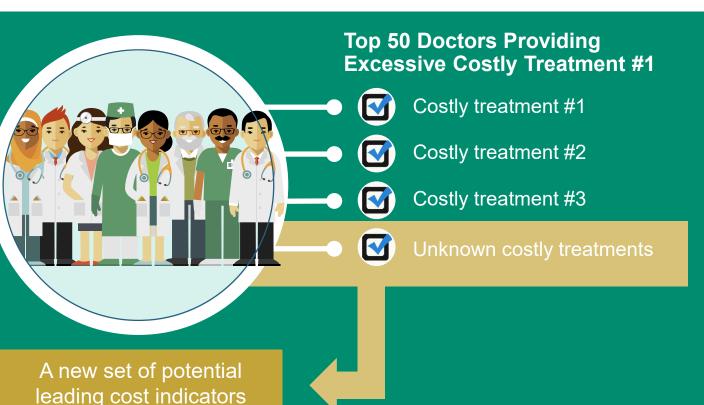


OUR APPROACH FOR EXAMINING PROVIDERS' BEHAVIOR

Case study: Costly Treatment #1

Case study: Costly Treatment #2

Case study: Costly Treatment #3







- A weak opioid analgesic to treat moderate to severe pain
 - Its effectiveness in relieving pain is unclear
- Abuse potential

 The most costly opioids frequently prescribed in California's workers' comp system (2012-2018):

 24%
 39%

 of all opioid
 of all opioid

 prescriptions
 payments

Source: World Health Organization. Critical Review Report: Tramadol. November 2018; WCIRB Medical Transaction Data





COSTLY TRAMADOL EXTENDED-RELEASE 150 MG

- Not on the regulated price list
- Brand name drug
- Limited medical advantage (though sometimes more convenient)
- Compare to other low-cost substitutions (e.g., immediate-release 50 mg):
 - Cost per morphine milligrams equivalent (MME): 2-8X more
- One 150 mg vs. three 50 mg:
 - \$2.4 million more between 2012-2018

10% of all tramadol prescriptions

57% of all tramadol payments



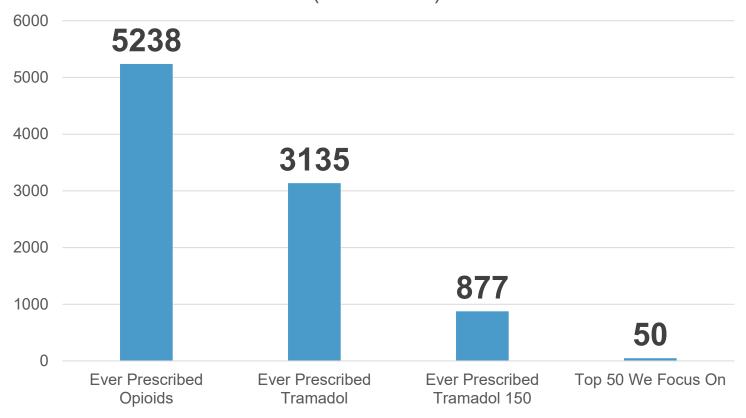


Source: WCIRB Medical Transaction Data

ONLY A FRACTION OF PROVIDERS PRESCRIBE TRAMADOL 150

- 1 in 3 providers who prescribed tramadol prescribed tramadol 150
- Top 50 prescribers of tramadol 150:
 - ~70% of all tramadol 150 prescriptions
 - 93% of all tramadol 150 payments

Providers in the California Workers' Comp System (2012-2018)



Source: WCIRB Medical Transaction Data





OTHER FORMS OF LOW-VALUE CARE

- Co-prescribe opioids and benzodiazepines (anti-anxiety and muscle relaxants)
- Early MRI for low back pain (first 6 weeks)
- Spinal injection for low back pain
- Costly generic NSAIDs
- Costly brand name drugs when generic substitutions are available

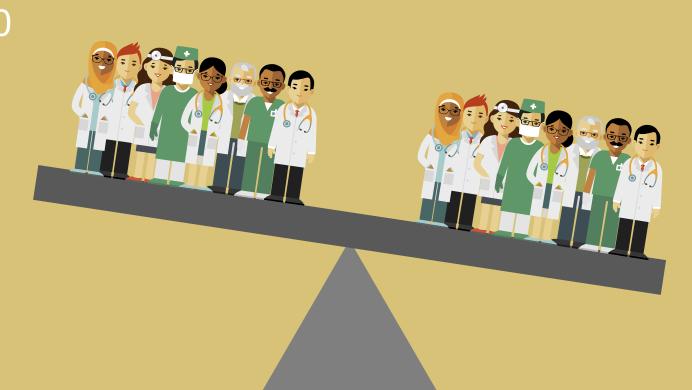






METHODOLOGICAL CONCERN

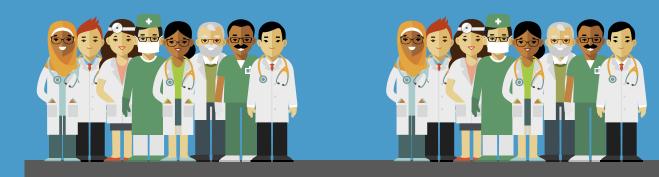
- We cannot compare the top 50 prescribers of tramadol 150 with the rest of the workers' comp system
- The top 50 prescribers may have patients with more severe injuries





METHODOLOGICAL SOLUTION

- Find comparison providers whose patients have similarly severe injuries as the top 50 prescribers
- We use the predicted opioid MME for each patient after 90 days (given the diagnosis and treatment during the first 90 days, etc.) to measure "severity"
- We compare each of the top 50 prescribers to 2 matched providers whose patients have similarly severe injuries







MATCHING THE TOP PRESCRIBERS OF COSTLY TRAMADOL TO A COMPARABLE CONTROL GROUP

Top 50 Prescribers of the Costly Tramadol



- Concentrated in a few specialties
- Tended to practice in LA basin
- Average 2400 predicted MME per patient





- Concentrated in similar specialties
- Tended to practice in similar regions
- Similar amount of predicted MME per patient





% OF PATIENTS RECEIVING LOW-VALUE CARE FOR

Top 50 Prescribers of Costly Tramadol vs. 100 Matched Prescribers





Next Steps

50





MORE FORMS OF LOW-VALUE CARE

Brand name vs. generics:

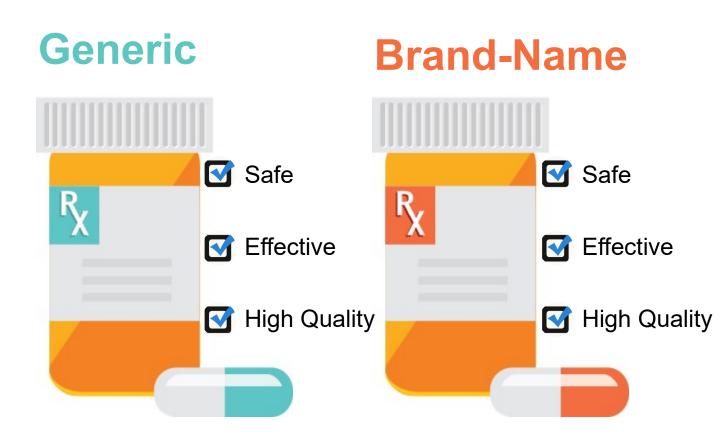
 Use branded drugs of other types when generics are available

High-risk use of opioids:

- High doses or long duration of opioids
- Prescribe opioids before trying NSAIDs
- Co-prescribe stimulants or depressants with opioids

Others:

- Head imaging for uncomplicated headaches
- Back surgery







ENGAGE PARTNERS WHO DO A LOT OF LOW-VALUE CARE?

Pharmacies that:

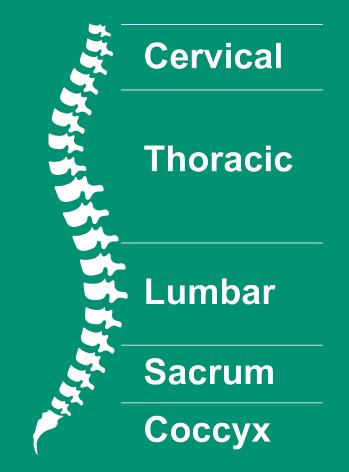
- Dispensed a high % of branded drugs when there are generics
- A high % of patients receive high-dose opioids

Imaging centers with:

- Many early back MRI
- Many scans for uncomplicated headache

Chiropractors who:

- Often treat 5 regions of the spine
- Often bill workers' comp for > 10 visits / year







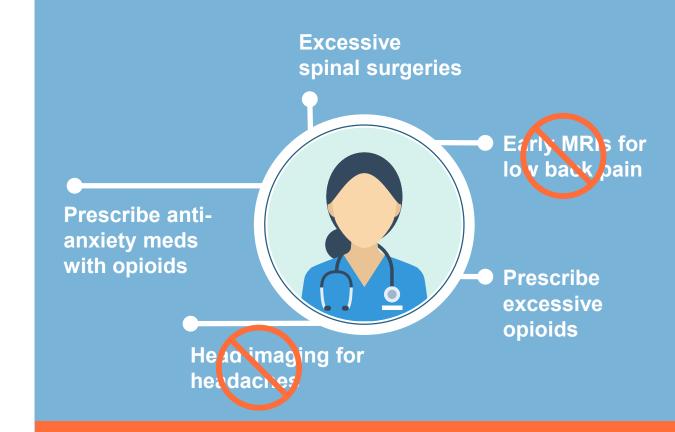


MORE CASE STUDIES

- Identify high users of each form of care (early MRI, etc.) and see which predict high back injections, etc.
- Unify the results to identify clusters of providers who are consistently high on a set of low-value care



Potential cluster we might find (illustrative)



Perhaps a 2nd cluster of providers does a lot of scans for both early low back pain & for headaches