

POLICY & PRACTICE

Coronary Artery Stent DRGs

The Centers for Medicare and Medicaid Services is proposing to change the way it pays for the insertion of coronary stents by offering higher reimbursement for cases with secondary diagnoses. The proposed rule, published last month, would replace diagnostic related groups (DRGs) 516 and 526 with four new DRGs, defined based on the presence or absence of a secondary diagnosis from a list of comorbidities and complications. CMS will accept comments on the proposal until June 24; the final rule is expected to be published by Aug. 1.

Fighting Childhood Obesity

Former President Bill Clinton, Arkansas Governor Mike Huckabee, and the American Heart Association are teaming up to prevent childhood obesity. The newly formed alliance plans to work with the food and restaurant industry to improve the quality of food offered and to develop marketing strategies to support change within the industry. They will also focus on increasing physical activity and improving nutrition in schools. More than twice as many children and nearly three times as many teenagers are overweight today as in 1980.

And overweight children and adolescents have a 70% chance of becoming overweight adults, increasing their risk of heart disease, according to the American Heart Association. "With this initiative, we can help turn young people's lives around give them hope for a healthier future," President Clinton said in a statement.

Dual-Chamber Pacemakers

Dual-chamber pacemakers are more clinically beneficial and cost effective than are single-chamber models, according to an analysis from the health services research organization ECRI. The analysis is based on evidence from 32 trials in more than

5,500 patients. ECRI found that dual-chamber pacing reduces symptoms of the pacemaker syndrome, which causes dizziness and fatigue when the pacemaker attempts to pump against a closed valve. ECRI also found that dual-chamber pacing isn't necessarily better than single-chamber pacing when it comes to improvement in cardiovascular functional status. Some evidence indicated that dual-chamber pacemakers have more mechanical problems than single-chamber devices, but ECRI said these were generally minor.

Ads Influence Prescribing

Direct-to-consumer advertisements appear to have an impact on physician prescribing practices, a study by Richard L. Kravitz, M.D., of the University of California, Davis, found (JAMA 2005;293:1995-2002). A total of 152 family physicians and general internists were recruited from solo and group practices and health maintenance organizations for the study of advertising for prescription antidepressants. Patients were randomly assigned to make 298 unannounced visits, presenting either with major depression or adjustment disorder with depressed mood. When the patients with depression made a general request for an antidepressant, only 3% of the physicians prescribed paroxetine (Paxil). However, when they asked for the prescription by name, 27% were given a prescription for Paxil. In addition, patients with adjustment disorder symptoms were more likely to receive a prescription for an antidepressant if they made a brand-specific request (55%) versus a general request (39%).

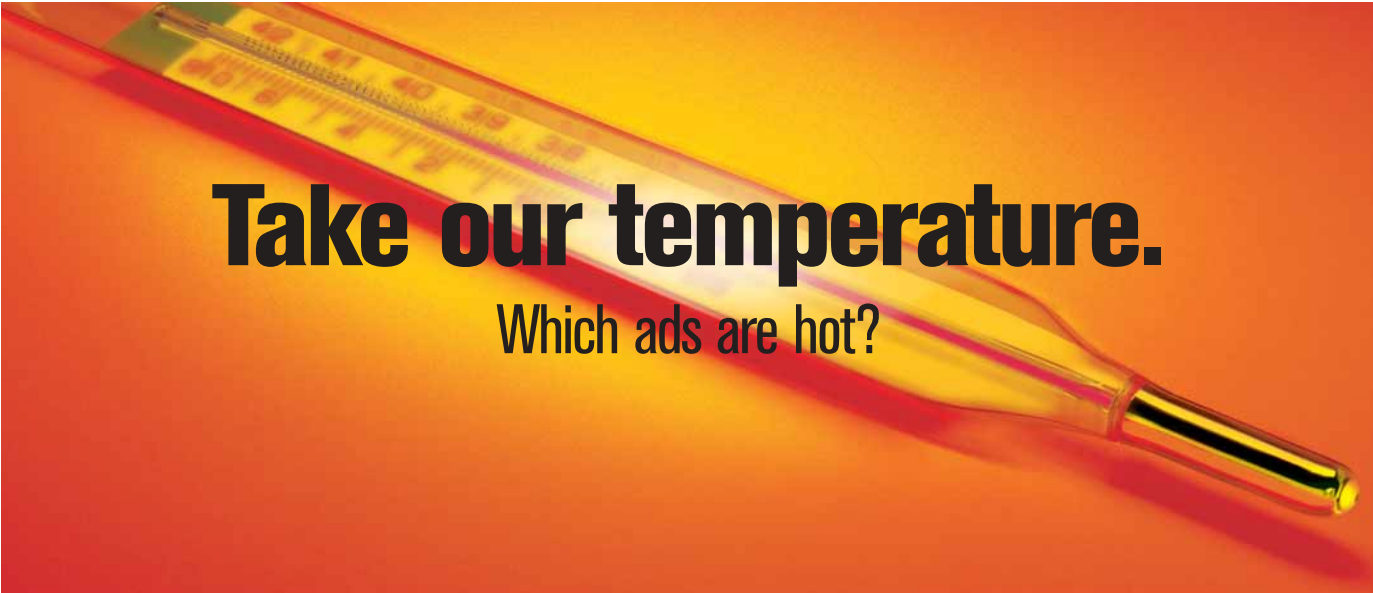
E-Prescribing Standards

Medicare should adopt a program-wide system of uniform national electronic prescribing standards for its new prescription drug benefit, according to the Pharmaceutical Care Management Association (PCMA). Such a standard is key to maximizing the participation of private plans in the Part D benefit and in reducing regional variations in health care delivery and outcomes, PCMA said in comments to CMS on its proposed rule for Medicare e-prescribing standards. "PCMA believes that Medicare e-prescribing holds the potential to transform the health care delivery system," PCMA President Mark Merritt said in a statement. "Regrettably, a 50-state patchwork approach would increase costs, decrease efficiency, and severely undermine the promise of e-prescribing."

CMS: Pay for Performance Works

Preliminary data indicate that pay for performance is improving quality of care in hospitals. A 3-year demonstration project sponsored by the CMS is tracking hospital performance on a set of 34 measures and outcomes of care for five common clinical conditions. Reports from more than 270 participating hospitals on their experiences in the project's first year show that median quality scores improved in all of the clinical areas. For example, scores increased from 90% to 93% for MI patients and from 64% to 76% for heart failure patients. These early returns show that using financial incentives works to deliver better patient care and to avoid costly complications for patients, said CMS Administrator Mark B. McClellan, M.D.

—Mary Ellen Schneider



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