# U.S. Grade Goes Lower on Health Care Report Card

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BY JANE ANDERSON Contributing Writer

ccess to care has declined significantly since 2003, with 42% of all working-age adults either uninsured or underinsured in 2007, according to a national health system scorecard from The Commonwealth Fund, which found that health care system performance in the United States has worsened slightly overall since 2006.

According to the scorecard report, the United States on average continues to fall far short on key indicators of health outcomes and quality. U.S. scores are particu-

larly low on efficiency, compared with top performers inside the country—states, regions, hospitals, health plans, or other providers and internationally.

These findings were very disturbing, considering the resources the U.S. spends on health care," Dr. Karen Davis, president of The Commonwealth Fund, said in a briefing on the report, adding that the nation spends more on health care than any other in the industrialized world.

In the report, "Why Not the Best? Results From the National Scorecard on U.S. Health System Performance, 2008," the United States scored an average of 65 out of a possible 100—slightly below the 67 scored in 2006 in the first scorecard released—across 37 key indicators of health outcomes, quality, access, efficiency, and equity.

"We need to change direction," Dr. Davis said. "This latest scorecard demonstrates that we are in fact losing ground."

The report found that the number of uninsured and underinsured Americans continues to rise: As of 2007, 42% of all working-age adults were either uninsured or underinsured—up from 35% in 2003.

In addition, the report said that the United States failed to keep up with improvements made in other countries, and fell from 15th place to dead last among 19 industrialized nations in premature deaths that could have been prevented by timely access to effective health care.

Rates for basic preventive care, such as

cancer screening, failed to improve from 2005 to 2007, the report said.

In addition, "scores on efficiency are particularly low, pulled down by fragmented, poorly coordinated care," along with lack of access to care and high administrative costs, said Cathy Schoen, senior vice president of The Commonwealth Fund.

In 2007, for example, as in 2005, patients in the United States were three to four times more likely than patients in other countries to report having had duplicate tests or to report that medical records or test results were not available at the time of their appointment. And, al-

though primary care physicians in the United States used electronic medical records (EMRs) increasingly from 2001 to 2006—17% to 28%—the United States lags far behind leading countries, where EMRs now are used by nearly all physicians (98%) to improve care, the scorecard reported.

Still, "there are some bright spots," Ms. Schoen said. The report found evidence that focusing on specific areas through targeted initiatives

can yield substantial improvement.

For example, the report found that hospital standardized mortality ratios, a key indicator of patient safety, improved by 19% over 5 years, following broad public and private efforts to assess and improve hospital safety. Also, chronic care and acute hospital care quality metrics that have been the focus of public reporting, pay for performance, and improvement efforts also showed significant progress.

We find that what gets attention gets improved," Ms. Schoen said. "But to date we have focused too narrowly. Current initiatives often fail to encourage more effective or more efficient care.

Dr. Davis pointed out that, with a new president and administration next year, the United States has a real opportunity to refocus and rebuild its health care system.

The most important thing is extending health insurance to all," she said. "There were 75 million American adults uninsured at some point in the year, and obviously that affects performance throughout the scorecard."

### DATA WATCH Total Health Care Spending for a Family of Four Is Increasing \$15,609 \$14,500 \$13.382 \$12,214 \$11.192 2004 2005 2006 2007 2008 Note: Based on the Milliman Medical Index, for estimated average costs including employer and employee health insurance premiums, using claims from millions of members. Source: Milliman

#### —POLICY PRACTICE-

#### **APA Examining Industry Funding**

The American Psychiatric Association is considering phasing out all pharmaceutical industry funding. But the move is not a reaction to a recent request from Sen. Chuck Grassley (R-Iowa) for an accounting of how much drug industry money the APA receives, according to Rhondalee Dean-Royce, a spokeswoman for the association. The APA set up an Ad Hoc Workgroup on Adapting to Changes in Pharmaceutical Revenue in March; the work group's goal is to consider the impact if the APA decides to eliminate its industry support. In 2006, the latest year statistics are available, the APA received \$18.3 million of its \$62.5 million budget from drug companies, Ms. Dean-Royce said. She added that expenses related to those revenues totaled \$14.6 million, leaving a "net gain of \$3.7 million." The work group will report to the APA board of trustees in the fall or early next year.

#### Teens' Easy Access to Rx Drugs

Nineteen percent of teens in a recent survey said it was easy to buy prescription drugs, while only 15% said it was easy to buy beer, according to the National Center on Addiction and Substance Abuse (CASA) at Columbia University. This year's survey was CASA's 13th. Twenty-four percent said they had friends or classmates who abused prescription drugs; that number has held steady since 2003. A third of the teens said they got the prescriptions from friends or classmates and a third from home, parents, or the medicine cabinet. Half said that painkillers were the most commonly abused prescription drugs. Twenty-three percent said it was easier to buy marijuana than beer, with 42% of 12- to 17-year-olds reporting that they could buy pot in a day or less, and 23% in an hour or less. Drugs are the top concern for teens; 28% said it was the biggest problem they face. There was also a strong correlation between drug and alcohol use and staying out past 10 p.m.

## **SAMHSA Offers Methadone Help**

The Substance Abuse and Mental Health Services Administration (SAMH-SA) is developing a national network to provide clinical updates, evidence-based outcomes, and education to opioid addiction treatment centers, physicians, and other providers in the appropriate use of methadone. The agency is granting \$1.5 million to the American Society of Addiction Medicine for training under a 3-year cooperative agreement. In a statement, SAMHSA Administrator Terry Cline, Ph.D., said the most recent statistics indicate that methadone poisoning deaths have increased nearly fourfold from 786 deaths in 1999 to 3,849 deaths in 2004, and that they were on track to increase in 2005.

## **Home Drug Errors Rise**

A shift in the number of medications being taken outside of the hospital has correlated with a sharp increase in the number of fatal medication errors in

the home, researchers reported in the Archives of Internal Medicine. Sociologists at the University of California, San Diego, found a 3,196% increase in fatal domestic medication errors involving alcohol and/or street drugs, and a 564% increase in domestic medication fatalities not involving alcohol and/or street drugs. The study examined nearly 50 million U.S. death certificates from 1983 to 2004, and focused on the 200,000 deaths involving medication errors. "The decades-long shift in the location of medication consumption from clinical to domestic settings is linked to a dramatic increase in fatal medication errors," the authors said. They noted that it may be possible to reduce fatal medication errors by focusing education efforts on domestic settings in addition to clinical settings.

#### **Health Searches Level Off**

The number of adults going online for health information has plateaued or declined, according to a Harris Interactive poll. A total of 150 million people-66% of all adults and 81% of those who have online access—said they obtained health information from the Internet in 2008. That represents a slight drop from 2007, when the poll found that 160 million people reported obtaining health information online. The researchers noted that the slight differences from 2007 to 2008 are within the possible sampling error. But they pointed out that, as opposed to other years, it appears that there has been no increase in the total number of people with Internet access or in the number of people searching for health information—those the poll calls "cybercondriacs"—indicating that a plateau or even a slight decline was underway. Just under half of cybercondriacs said that they had discussed the information they obtained online with their doctors, and 49% had gone online to look for information as a result of discussions with their doctors, the survey found.

#### **Genomics Collaboration**

Pharmacy benefit manager Medco Health Solutions and the Food and Drug Administration have partnered to study genetic testing and the impact of genetics prescription drug efficacy, according to Medco. The agreement extends to Aug. 31, 2010. Over the next 2 vears. Medco will deliver a series of reports to the FDA that will address the safety of prescription drugs, physician participation in pharmacogenomics testing, the usefulness of the tests in prescribing, and quantifying prescription information that contains genetic information. Medco said its reports will be derived from clinical settings, including one that will examine whether physicians are willing to change the dose of a prescription based on a genetic test result. "Studying this field can advance pharmacy care to remove some of the trial and error in how medications are prescribed," Medco chief medical officer Dr. Robert Epstein, said in a statement.

-Alicia Ault