



The right health care in the right way

Global case studies in reducing low-value care

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What's the story?

Low-value health care—services of low, no, or even negative impact on patients, as well as services delivered in an unsafe or inefficient manner—is pervasive across the globe. Some widely used services are clinically inappropriate for most patients under most circumstances. Reducing low-value care has proved to be a hard and slow task. Nevertheless, doing so is essential if we are to lower costs while also pursuing innovation and improving health quality and outcomes.

The Deloitte Center for Health Solutions conducted extensive research and interviewed experts to see what is working globally to reduce low-value care. In this article, we present ten case studies that highlight how effective use of existing technologies, emerging technology applications, and even simple process redesigns, can significantly reduce costs or improve outcomes. Taken together, these examples show how health care organizations can reduce low-value care in favor of the right care, in the right setting, safely, in the right way.

Who at my client is impacted?

- **Sector:** Health care
- **Roles:** C-Suite and executives at health care organizations responsible for strategy, operations, technology, and quality control.

What issues does this address?

There is no one-size-fits-all solution to reduce low-value care. However, these broad lessons can be distilled from the successful programs and initiatives highlighted in this research report:

- **Technology can make a difference.** Although technology isn't a solution in and of itself, the case studies highlighted in this report illustrate that it can enable the implementation, effectiveness, and monitoring of successful strategies to reduce low-value care in a variety of settings.
- **Cultural changes must accompany technological changes.** Cultural changes for physicians and other health care providers represent a shift from a culture of thoroughness to a culture of appropriate-ness. Building on physicians' professionalism and in-nate competitiveness (through education, monitor-ing, and feedback, for example) has proven its value. Developing replicable models of physician training may prove to be an important path forward in bring-ing innovative solutions to scale.



- **Patients need to be front and center in initiatives.** For patients, the shift from a more-is-better mindset to an understanding that too much can be not only costly, but even harmful can be accomplished through education. Informed and engaged patients are more satisfied and have better care out-comes. Physicians need to understand that patient questions about services don't normally constitute demands or expectations.

What do I do now?



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Who can tell me more?

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