

OUTLOOK

WELL-BEING

# Why are we wasting our health-care dollars?

By Elena M. Marks

One of the most significant health-care challenges the United States faces is the discrepancy between the amount of money we spend on health care and the benefits we receive for that money. We rank first among nations in health-care expenditures, but we rank No. 37 in health status. Other countries are spending significantly less money and getting better results.

There are opportunities to reduce the cost of health care and improve the quality at the same time. In May, the U.S. Preventive Services Task Force, in a report authored by Dr. Virginia Moyer of Baylor College of Medicine, advised against using the PSA test to screen for prostate cancer, contrary to current practice.

The recommendation was based on research showing that at most 1 in 1,000 lives could be saved by widespread administration of the test, while 100 to 120 men would be harmed as a result of false positives and unnecessary biopsies and treatments.

And last month, the American Board of Internal Medicine Foundation published "Choosing Wisely," a report compiling lists from nine medical specialty societies that provide specific, evidence-based recommendations to reduce tests and treatments that are unnecessary, ineffective or harmful — and costly. Among the recommendations:

- ▶ Wait a week before prescribing antibiotics for mild-to-moderate sinusitis because most sinusitis is viral and resolves on its own. Currently, sinusitis accounts for 16 million office visits and \$5.8 billion in annual health care costs.
- ▶ Limit stress cardiac imaging or advanced non-

invasive imaging in the initial evaluation of patients. Currently, asymptomatic, low-risk patients account for up to 45 percent of unnecessary screening.

▶ Avoid X-rays, CT scans or MRIs of patients presenting with nonspecific lower back pain, because the imaging does not improve patient outcomes. The scans carry radiation risks, are costly, and are associated with a higher rate of surgery without superior pain reduction outcomes.

These evidence-based recommendations are intended to serve as guidelines, not mandates, for treatment. The authors are very clear about the need for physicians to consider the particular circumstances of each patient prior to making treatment decisions. Family history and other individual risk factors may warrant tests and treatments for certain patients. If we incorporate these recommendations into health care delivery, we will reduce costs and improve the quality of care by eliminating the routine use of ineffective and/or harmful tests and treatments.

But precedent does not bode well for these new guidelines. In 2009, the same task force recommended that routine mammography begin at age 50, instead of age 40, citing research that showed that the benefits of mammography between ages 40 and 50 were outweighed by the harm resulting from false positives.

The public outcry was swift. Breast cancer survivors, many with poignant stories of early detection, denounced the guidelines. Advocacy and treatment organizations including Susan G. Komen for the Cure, MD Anderson Cancer Center and the American Cancer Society also announced their opposition.

The medical issue was turned into a political issue. U.S. Health and Human Services Secretary Kathleen Sebelius distanced her agency from the task force and thereafter issued a statement recommending that women consider starting routine mammograms at age 40. The U.S. Senate, in a bipartisan move, voted to amend the Affordable Care Act, which generally follows task

force recommendations on preventive care, to reject the mammography recommendation.

I am not a physician or a scientist, and I am in no position to evaluate the validity of the task force's recommendations on mammography, PSA tests or anything else. And I am well aware of the fact that recommendations change over time as new evidence is adduced. But I am alarmed at how we as a nation reject research from well-regarded institutions when it conflicts with our own beliefs. If we want to take advantage of opportunities to reduce costs and improve quality at the same time, we will have to get past the belief that more care is necessarily better for our bodies and our wallets. And we will have to listen to scientists even if we don't want to hear what they're saying.

*Marks is the Baker Institute Scholar in Health Policy and the chair of the board of directors of Community Health Choice, a nonprofit organization serving more than 200,000 members. She is an attorney with a master's degree in public health and currently works as a consultant to the health care industry. From 2004 through 2009, Marks served as the director of health and environmental policy for the City of Houston.*

## HISD is ready to Race to the Top

Education from page B10

progress over the past four years than their peers in urban school districts across America. Winning the Broad Prize isn't about vanity. We take the competition seriously because \$550,000 in scholarships for next year's HISD seniors is at stake. By being named a Broad Prize finalist from among 75 qualifying districts, HISD has already guaranteed our students \$150,000 in scholarships in 2013.

We told the Broad Prize panel about HISD's Effective Teacher Initiative, which aims to place an effective teacher in every child's classroom. Funded in part by a \$6 million grant from the Laura and John Arnold Foundation, this initiative led to last year's adoption of a new teacher appraisal and development system that gives teachers the valuable, data-driven feedback they need. It also holds educators accountable for their students' academic growth. HISD embarked on this teacher appraisal work long before such measures became cornerstone principals of the Race to the Top program. The reality is, Race to the Top is a federal program that is inspired by school district-level innovation, not the sort of top-down power grab its detractors have described.

We also told the Broad Prize panel about the most ambitious school turnaround initiative happening at any school district in America — HISD's Apollo 20 program. Smart philanthropists from Houston and across the country have contributed more than \$14 million toward this effort to turn around persistently failing schools because they believe in its promise. Students in HISD's Apollo 20 schools are quickly making up lost ground thanks to teachers and tutors who have learned to tailor lessons to each child's unique needs.

In HISD, we do not back down from a challenge, and that mindset is rubbing off on our students. This year's graduating seniors won a record \$172 million in scholarship offers, compared to \$75 million in 2009. I expect cash-strapped school districts across America to make this a fierce Race to the Top contest, and there is no guarantee that we would win. Our local school boards are capable of deciding whether it's in our students' best interest for us to try.

*Grier has been superintendent of the Houston Independent School District since 2009. With 200,000-plus students and 279 schools, HISD is the largest school district in Texas.*

SUCCESS

# Want to do well on the job? Then finish school first

Houston, we need to finish what we started. The future of our city and our state depends on it.

Of the Houston-area population age 25 and older, more than a quarter of a million people — 22.6 percent of our population — enrolled in college but never finished with a credential that counts. We rank No. 4 in the U.S. for cities with the most people with some college and no degree.

As students drop out of college, their future prospects dim, along with their earning power. While the earnings for those with postsecondary credentials has increased over the last 20 years, it has actually declined for those with a high school diploma or less.

Finishing matters. Creating a stronger culture of finishing in education can take our city to new heights. Houston employers have good jobs that they can't fill because they can't find qualified employees. Workers want better career opportunities, but lack the education and skills necessary to get the job. Our economic health depends on having a well-educated and

highly skilled workforce.

Our future relies on making sure more students make a strong finish in high school, and then have the option to affordably enter college, with a clear path to finish with a credential that counts. Postsecondary credentials with labor market value — certifications, diplomas or degrees — are the single most effective disruptor of the poverty cycle.

Locally, the Houston Endowment recently released a study, in partnership with the National Center for Higher Education Management Systems (NCHEMS), reporting that only one in five Texas eighth-graders earns any type of degree within six years after they finish high school.

Lone Star College System, Houston Community College, and San Jacinto College are collectively committed to increasing our number of graduates and improving our quality of life. With those goals in mind, we have partnered on two very important initiatives. The first

is a partnership with WGU Texas, a nonprofit online university, in an innovative, accessible transfer program called Finish to Go Further.

The program starts by encouraging the 265,000 Houston area adults who started college but did not finish, as well as the tens of thousands of students currently enrolled in community college, to finish at their community college and earn an associate's degree.

In the Finish to Go Further partnership, WGU Texas provides incentives for community college graduates to transfer into affordable, accredited and aligned bachelor's degree programs in information

technology, business, health care and education. In addition, WGU Texas has agreed to waive application fees, provide tuition discounts and offer competitive scholarships of up to \$2,000 each to help students earn a degree online while still engaged in their jobs and active in the workforce.

In the second initiative, we are teaming with The Center for Houston's Future for My Degree Counts, which aims to increase the region's college graduation rate 1 percent by the year 2013, translating to a \$4.2 billion lift for the Houston regional economy. My Degree Counts kicked off in April and includes businesses and employers, nonprofits and government agencies, and area colleges and universities.

Our community colleges

are focused on reaching students who have earned significant credits toward a degree, but haven't finished, helping them get back on track to finish their associate's degree or credential.

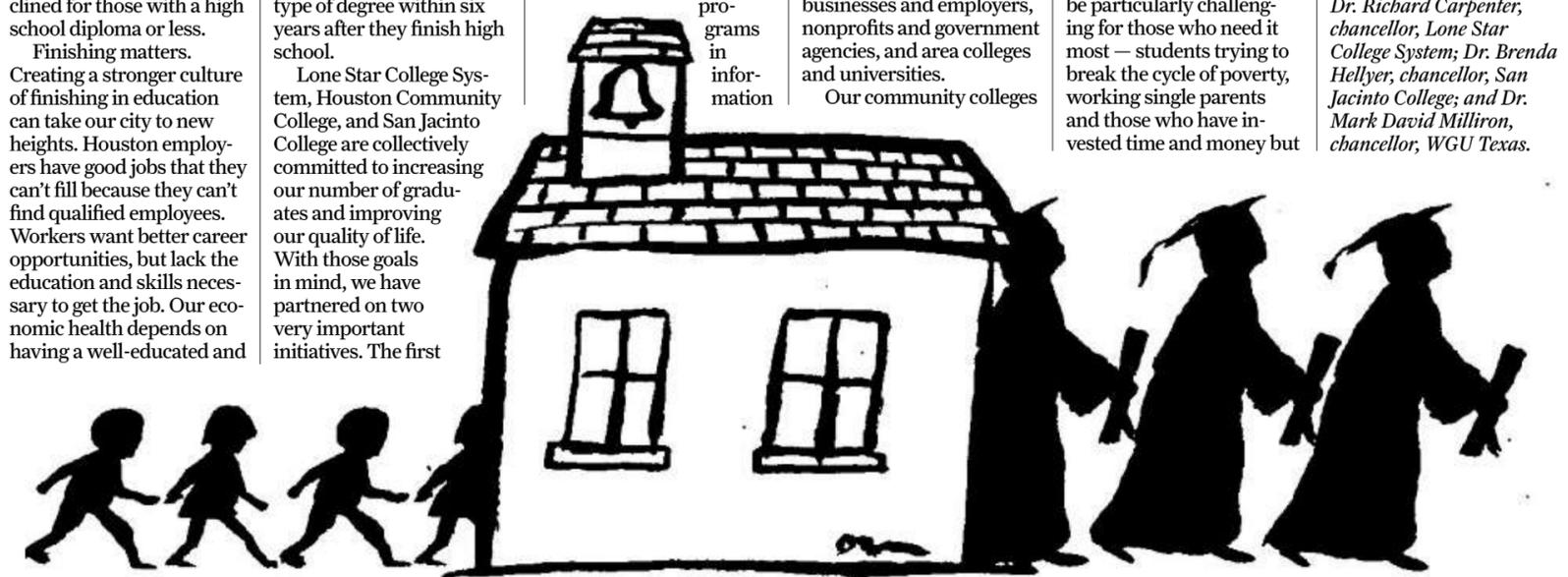
We know that an associate's degree ensures a better living wage, more stable employment and better quality of life than the high school degree can afford. Moreover, it's a credential that opens career paths. And once students finish an associate's degree, Finish to Go Further is a clear path to go further and finish a bachelor's or master's degree.

None of us is suggesting finishing is easy. It can be particularly challenging for those who need it most — students trying to break the cycle of poverty, working single parents and those who have invested time and money but

couldn't complete because "life happened."

If we work together, however, with finishing as our goal, we are well positioned to meet the needs of our dynamic business community, provide an energized and educated workforce, and create a better future for all of us in Houston and beyond. Houston, let's challenge and enable more adults to finish what they start in higher education so that they — and our entire regional economy — can go further.

*This article was submitted by Dr. Mary Spangler, chancellor, Houston Community College; Dr. Richard Carpenter, chancellor, Lone Star College System; Dr. Brenda Hellyer, chancellor, San Jacinto College; and Dr. Mark David Milliron, chancellor, WGU Texas.*



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