



URAC Health Tip Sheets for Consumers



This document is part of a series of information resources to help you get good quality health care. For additional Tip Sheets, visit the Consumer section of the URAC website

<http://www.urac.org/consumers/>.

What is care that “works best”?

Health care that “works best” is care that gets the best results for your health, is safe, and uses health care resources in the most efficient ways. It’s the type of care you want for yourself and your family.

Getting the “right amount” of care is also very important. That means you are getting *as much care as you need*, but *no unnecessary care*. Unnecessary care is care that you don’t really need.



“It can be a big worry for us when our little girl gets sick. We want to make sure she gets the right kind of care – the kind that helps her feel better as soon as possible.”

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Here are some examples of receiving the right amount of care:

- Having lab tests done when you need them is the “right amount” of care. Repeating the same lab tests when you see a different doctor –instead of just using the test results you already have – would be unnecessary care.
- Getting antibiotics for an infection that is helped by antibiotics is the “right amount” of care. Getting antibiotics for an infection that is not helped by antibiotics --such as the common cold – would be unnecessary care.
- Staying on schedule with the preventive care and screening tests that are recommended for your age and health condition is the “right amount” of care. Having preventive care and screening tests more often than recommended would be unnecessary care.

Medical scientists do research to find out which care works best

To find out what types of care work best, doctors and others do **scientific studies of patient care**. The results from this medical research are called “**medical evidence**.”

Each patient is different, but medical research can show whether some types of health care tend to get better results than others for patients with certain conditions. When there is medical evidence from research that shows which care works best, then using that evidence is part of “good quality” care.

What kinds of questions can medical evidence answer?

Medical evidence from research answers questions such as these:

- **What works best for keeping people healthy?** This includes finding out what works best to prevent health problems and what works best to keep diseases from returning.
- **What works best for catching problems at an early stage when treatment can be more effective?**
- **What tests are best for finding out what’s wrong?**
- **Which treatments help the most and have the fewest side effects?** Some studies collect evidence on experimental treatments, new drugs, or new approaches to surgery, physical therapy, or radiation therapy. Other studies collect medical evidence on the best ways to improve comfort and the quality of life for people with long-term medical conditions.

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“Times have changed since I was in medical school. There are so many new tests and treatments now and we’ve learned so much from research about which types of care work best.

To learn about the latest research, I read the main medical journals. I also get updates on research studies when I go to medical meetings.

When something comes up with a patient, I sometimes check to see if there is any new evidence from research studies that might be helpful.”

Some cautions about medical evidence

Medical evidence tells what we know *right now* about what types of care work best for certain types of patients with certain conditions. There are limitations to the evidence that is currently available and there is always more to learn. For example:

- **Some types of conditions and care have been studied, but others have not.** This means that medical research does not always have an answer about which kind of care works best.
- **Depending on how the research was done, the medical evidence might apply to some patients but not others.** For example, evidence that was collected by studying male patients may not apply to female patients. Evidence that comes from studies of adults may not apply to children’s care.
- **Medical evidence is always being updated.** Every year, medical research studies are done throughout the world. These studies produce an enormous amount of medical evidence. As researchers do more studies, they learn new things that can cause them to change their conclusions about what works best. This means that medical evidence is always changing and improving.

Using medical evidence to set standards for quality of patient care

When there is enough medical evidence to know what types of care work best, this evidence can be used to set “quality standards” or “guidelines” for good patient care. Care that follows these standards or guidelines is sometimes called “evidence-based care” because it is *based* on the *evidence* that comes from medical research.

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- **Quality standards for patient care are created by groups of doctors who are national experts in their field.** To create quality standards, doctors do a careful review of the results from many scientific studies of patient care.
- **Quality standards are created only when doctors feel that there is *enough good evidence*** from enough carefully designed research studies to say that a particular type of care works best. An example is shown below.

Getting the right amount of care is part of *good quality* health care and *wise use of resources*

Getting the right amount of care – not too little and not too much – is **best for your health**. It also makes **wise use of time and money** spent on health care.

- **Getting as much care as you need is crucial for good health.** If you *can't* or *don't* get as much care as you need, it can lead to more serious health conditions that are harder to treat successfully and may also cost more to treat. If you develop health problems because you didn't get the care you needed, it's not good for your health and it's not wise use of money spent on health care.
- **Getting more care than you really need is not good for your health.**
 - Getting care you don't need can take time away from other things you could be doing. It can be hard on you and your family, adding unnecessary stress to your life.
 - Getting care you don't need can even be harmful to your health. For example, studies show that some surgery that is done is not really necessary. Evidence from research on patient care shows that, for some conditions, treatments that are simpler and less risky than surgery actually work better. If you don't need a certain type of treatment, why expose yourself to risks that might be part of that treatment?
- **Getting care you don't need also adds to the cost.** Whether the money comes out of your own pocket or is paid for by your health benefits, it is not a wise use of resources to spend money on care that isn't needed. When employees are given care they don't need, the cost can add up quickly for the company as a whole. This can lead to higher premiums, reductions in coverage, or higher out-of-pocket costs in the future.

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A graphic of a spiral-bound notebook with a red cover and a white page. The page contains text about quality standards for surgery. The spiral binding is at the top.

EXAMPLE OF A **QUALITY STANDARD:**

Getting an antibiotic at the *right time* before surgery

Antibiotics are drugs that help prevent and treat infections.

- Research shows that surgery patients who get antibiotics within one hour before their operation are less likely to get an infection of their surgical wound.
- The timing for when patients are given the antibiotic is important. Research shows that the antibiotic does not work as well if patients get it too far in advance or if they get it after their surgery begins.

▶ Therefore, a quality standard for surgery is to make sure surgery patients get an antibiotic at the *right time*, which means getting the antibiotic within one hour before surgery begins.

Here are some things to know about quality standards:

- **Quality standards have been set for some types of care but not for others.** Sometimes standards are not set because there has not been enough research yet or the results from research have been weak or inconsistent. Sometimes standards are not set because experts disagree about what medical evidence means and how to use it for making decisions about health care.
- **Quality standards can change.** Since quality standards are based on the latest medical research, they can change. When new evidence is available, the standards are updated.

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Health professionals can use quality standards as *guidelines* for giving good quality care

Doctors and other health professionals can use quality standards as guidelines to help give you good quality care. When doctors use the quality standards as guidelines, it is sometimes called using “**best practices**” for patient care.



“To give my patients with asthma the best possible care, I follow the national quality guidelines for patients with asthma.

These guidelines are based on medical research that was reviewed by leading asthma specialists.

I have a chart that lists all of the guidelines. It’s a handy reminder about all the things that need to happen for good asthma care.”

To give patients the best care, doctors use their training, experience, and personal medical judgment. **Each patient is different, and doctors take this into account when they use guidelines for quality care.**

- Guidelines are helpful to doctors because they tell what care has been found to work the best for most patients.
- Guidelines are based on good scientific research, but they cannot cover every situation for every patient. In the end, it is up to you and your doctor to decide what care is best for you.

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What can **you** do to help make sure you are getting good quality care?

It's important to know that getting good quality care does not happen automatically. While you might tend to assume that all patient care is good quality care, research studies have shown that some care does not measure up to quality standards.

To help make sure that you and your family are getting the care that works best for your condition, you will need to be informed and involved. Below are two examples of what you can do to help make sure you are getting good quality care:

1 You can check to see if the care you are getting is the care that is known to work best

Some information about quality guidelines has been written specifically for patients. You can use this information to check on the care you have been getting.

- For example, a brochure might tell what screening tests and other care you should be getting if you have an ongoing condition such as diabetes, asthma, or heart disease.
- There is also information that compares different treatments and tells which ones work best for certain conditions. This information often includes references to the research studies that were done.



Look for the following Tip Sheets at the URAC website (<http://www.urac.org/consumers/>):

- [“How can you use information about health care quality to get better care: Seven Examples”](#)
- [“Health Information on the Internet: A checklist to help you judge which websites to trust”](#)

The federal Agency for Health Care Research and Quality has produced summaries for patients that tell about effective health treatments for selected conditions (effectivehealthcare.ahrq.gov). These summaries are based on expert reviews of medical research.

Cochrane Collaboration is an international not-for-profit and independent organization that reviews medical research studies about health care treatments. The website www.cochrane.org has easy-to-understand summaries of the findings of its reviews in the *Cochrane Library*.

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A government website (www.guideline.gov) with technical medical information for health professionals includes some links to resources that are written for patients. Click on *Resources* and then click on *Patient Resources Links*.

2 You can use public reports to compare the quality of health plans, hospitals, and other health care providers

If you need to choose a health plan, hospital, nursing home, medical group, or other health care provider organization, there might be a report with information that lets you make quality comparisons. Often, these reports include information that lets you compare health care provider organizations to see how well they are doing at giving patients the types of health care that has been shown to work best.

- One purpose of these public reports with quality comparisons is to give you information to help you decide where to get your care.
- Another purpose is to encourage health care providers to improve the quality of care they provide.

Most public reports with quality comparisons are produced by state or federal government agencies or by large business groups or health care coalitions. They are typically on websites and some are available as printed reports. They are sometimes called *quality report cards*, *quality score cards*, or *performance reports*.

“Hospital Compare” is an example of a report with quality comparisons

The government website called *Hospital Compare* (www.hospitalcompare.hhs.gov) has quality information on hospitals throughout the United States.

- You can use this website to compare the quality of hospitals within a state, county, city, or zip code.
- Using information from patients’ hospital records, *Hospital Compare* **shows how well each hospital is doing at providing the care that is known to work best for patients** with certain medical conditions. An example is shown below.

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EXAMPLE: USING A QUALITY STANDARD TO MAKE COMPARISONS

The federal government's *Hospital Compare* website shows how well hospitals are doing at making sure surgery patients get an antibiotic at the *right time* (within an hour before surgery begins).

▶ This website shows that on average, for hospitals throughout the country, **only 77% of surgery patients were being given antibiotics at the right time.**

- Some of the hospitals have much *better* quality scores (scores that are much higher than 77%).
- Some of the hospitals have much *lower* quality scores (scores that are much lower than 77%).

To find out how well a particular hospital did on this quality standard and other quality standards for hospital care, visit the website at

www.hospitalcompare.hhs.gov



Besides *Hospital Compare*, here are other government websites with quality comparisons:

- For nursing home care: www.medicare.gov/NHCompare
- For home health care www.medicare.gov/HHCompare
- For kidney dialysis facilities: www.Medicare.gov/dialysis

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What is URAC doing?

URAC understands how important it is to have reliable information about your health when making a decision of care for you and your family. Quality health care doesn't just happen. It requires commitment to achieving that goal and implementing systems that make it possible every day.

Accreditation is a critical seal of approval that gives increased certainty and consumer confidence in a product, a service, and an organization. It promotes industry best practices. It encourages industry-wide quality improvement. And it protects and empowers consumers. For more information about URAC's health care and pharmacy accreditation programs, please go to www.urac.org.

Each year, URAC hosts the Best Practices in Health Care Consumer Empowerment and Protection awards conference that honors the achievements of health care management companies that are leading the industry in engaging consumers as partners. URAC promotes best practices in its ongoing efforts to recognize those health information/ decision support companies, health management companies, health plans and health networks, pharmacy quality management companies, and workers' compensation companies, which are actively pursuing practices to advance consumer empowerment and protection in an exceptional, measurable and reproducible way.

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