Reducing Risky Alcohol Use: What Health Care Systems Can Do

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Our Society Faces Many Problems
Doctors Face Similar Challenges with Their Patients
Where do we focus our efforts, time and resources?
Must Answer Two Key Questions

Is there evidence of a:

- Problem

- Solution

Risky drinking has both
What is risky drinking and how much of a problem is it?
Risky Drinking

• Any level of alcohol use that increases risk of harm to a person’s health or well-being or that of others

• Most risky drinkers are NOT dependent

Grant BF, et al., 2004; Dawson DA, et al., 2004
1 out of 4 Adults Engage in Risky Drinking

<table>
<thead>
<tr>
<th>US Adults</th>
<th>MA Adults</th>
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| - 79.7 million risky drinkers  
- 17.4% past month binge drinking  
- 5.9% past month heavy alcohol use | - 1.3 million risky drinkers  
- 17.4% past month binge drinking  
- 7.0% past month heavy alcohol use |
Risky Alcohol Use has Serious Consequences

240 alcohol related deaths per day

Can lead to health problems such as cirrhosis and cancer

Can complicate illnesses such as diabetes, hypertension, and depression

Increased risk of injuries, violence and birth defects
Risky Drinking is Expensive

| $249 billion in the US in 2010 |
| $5.6 billion in MA |
| $861 per capita in MA |

Binge drinking leads to $\frac{3}{4}$ costs

Reducing risky drinking can save billions and improve lives
How can we reduce risky drinking?
Alcohol Screening and Brief Intervention is Effective

Alcohol SBI is effective for adults in primary care outpatient settings (Saitz, 2010, Kaner et al., 2009, Bertholet et al., 2005)

Alcohol SBI reduces:
- Alcohol use
- Hospitalizations
- Injuries
- Driving under the influence
- Mortality
Alcohol SBI: a Prevention and Early Intervention Approach

Screening

Asking a valid set of screening questions to identify patients’ drinking patterns

AUDIT 1-3 (US)

1. How often do you have a drink containing alcohol?
2. How many drinks containing alcohol do you have on a typical day when you are drinking?
3. How often do you have X or more drinks on one occasion?

Brief Intervention

A short conversation about the harmful effects of risky drinking with patients who are drinking too much

The Heller School
FOR SOCIAL POLICY AND MANAGEMENT

Institute for Behavioral Health
SCHNEIDER INSTITUTES FOR HEALTH POLICY
Alcohol SBI is Cost Effective

- Ranks 4th out of 25 preventive services
- Saves average of $218 per patient per year
- Could save $1.17 billion annually in MA if all adults received alcohol SBI
Despite evidence, screening and brief intervention are limited.

Why?
Physician Challenges

- Limited time with patient
- Lack of training
- Discomfort with subject
- Limited of billing options
Health System Reforms Offer Opportunities

- Patient-centered medical homes
- Accountable Care Organizations
- Integrated care
Health plan policies encouraging the use of SBI for alcohol problems in primary care, 2010

- Provision of guidelines: 99.0%
- Financial incentives: 51.4%
- Feedback to providers: 40.7%
- Training: 5.8%
- Recognition programs: 3.4%

Horgan et al., 2014
Health Plans Can Implement Specific Supportive Strategies

<table>
<thead>
<tr>
<th>Implementing performance measures</th>
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<tr>
<td>Reimbursing or using alternative payment models, including pay for performance</td>
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<td>Providing incentives for clinical practice</td>
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<td>Implementing SBI directly in the health plan</td>
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<td>Supporting EHRs and decision-support software</td>
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<td>Providing training and coaching</td>
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Local and National Providers Offer Key Lessons

SSTAR, CHA, MGH, VHA, Kaiser, HealthPartners

- **Universal approach**
  - Screen
  - Further assessment if needed
  - Physician and/or other staff complete BI's if needed

- **EHR and decision support**
  - Smart phrases
  - Clinical reminders
  - Tracking performance

- **Performance and accountability measures**
  - Guide behaviors
  - Need to monitor quality

- **Leadership**
  - Creating a new culture
  - Support for new ways of doing business

- **Training and technical assistance**
  - Skills training
  - Coaching on workflow and staffing
Resources are Available

SAMHSA-HRSA Center for Integrated Health Solutions

National Screening, Brief Intervention & Referral to Treatment

Addiction Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration
Our Goal: Screen 50% of MA adults annually for risky alcohol use by 2020 and 75% by 2025
Benefits to reaching this goal

- Health improvements for Massachusetts residents
- Cost savings of nearly $1 billion
To achieve these goals we need to:

- Identify promising approaches to implement alcohol SBI
- Attend our follow-up strategy meeting with health plans, delivery systems, CDC and NACDD
- Ensure payment supports reduction of risky drinking
- Use performance measures to drive change