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July 2017

CLSI GP49™

Developing and Managing a Medical Laboratory (Test) Utilization Management Program

The report provides guidance for initiating, developing, and maintaining an effective test utilization program.

A CLSI report for US application.

Clinical and Laboratory Standards Institute

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Foreword

Health care is dynamic. It has changed, is currently in the process of significant change, and will change again in the future. One of the current changes is a shift from a transaction- or volume-based system to a capitated, value-based system. Outpatient laboratory testing will become in many ways similar to laboratory-based testing in the inpatient setting. Although cost reductions will be associated with these changes, there are opportunities for pathologists and laboratory professionals to redefine themselves in this new era, as essential members of the health care delivery team.

New health care delivery models (eg, bundled payment, pay for performance, population health management) necessitate not only reducing cost through eliminating unnecessary testing but including the appropriate tests to drive value and improve quality and outcomes. Although eliminating unnecessary testing is an important compelling factor, there are also numerous medical reasons—beyond financial—supporting the need to eliminate unnecessary tests. Preventive measures, such as screening to detect early disease and providing appropriate care to individuals with chronic diseases to prevent progression, will become of paramount importance in these new health care delivery models and may necessitate adding tests. The overarching goal of population health initiatives is to keep individuals healthy. Therefore, appropriate test utilization, which focuses on underutilization as well as overutilization, is the charge of individuals and groups engaged in test utilization management.

This report provides information on building and managing a test utilization committee. One model does not fit all situations. Whether one individual at an institution is engaged in appropriate test utilization management or there is a formal committee established by the organization's leadership, this report is essential for growing and maintaining a test utilization program. Those managing the program should remain flexible and open-minded to new and different ways of engaging colleagues to work on improving facility test utilization.

This report lays the foundation for the rationale for test utilization management, exploring the benefits and risks. The optional structures and functions of a utilization management program are discussed, followed by an assessment of the types of investments needed for success, the foremost of which is commitment from dedicated individuals.

Readers will discover reasons for misutilization, as well as solutions that may be readily employed in a variety of health care settings. This report also discusses strategies for managing test utilization.

Although individuals involved in laboratory medicine implement important patient care initiatives, they often do not measure or report the outcomes of these initiatives. This practice will be unacceptable in the new health care delivery models. Health care providers should quantitatively demonstrate to leadership contributions to the system through appropriate use of resources and optimization of health care delivery. Reporting on initiatives helps establish the

laboratory's worth and builds trust among coworkers and leadership, which serves as collateral when new initiatives are proposed. This report thoroughly investigates what to measure, how to measure selected metrics, and how to construct meaningful reports.

Finally, challenges and barriers are discussed, along with recommendations and lessons learned from authors who have made significant contributions to test utilization management.

CLSI consensus documents are developed through an open process that ensures wide review and broad application. This unique approach leads to consensus documents for medical testing and health care services that include identified needs of both global and national constituents. Most CLSI consensus documents are intended for global application. Under certain circumstances, however, a CLSI document may be intended for primary use in a specific country or region.

GP49 is one such consensus document. Although GP49 is a useful resource for a wider audience, it is intended primarily to help the user navigate the US environment with respect to test utilization. Because relevant practices are widely country specific, it was determined it would not be feasible to develop a document intended for global application at this time. CLSI hopes the development of such a document may be possible in the future, as part of a long-term effort to harmonize practices.

The imprint of the US flag (below the abstract and throughout the document footer) and the unique tagline on the cover call attention to its national focus and differentiate GP49 from our global consensus documents.

NOTE: The content of this report is supported by the CLSI consensus process and does not necessarily reflect the views of any single individual or organization.

KEY WORDS

Evidence-based medicine

Test management

Utilization management

Laboratory utilization

Test utilization

Chapter 1

Introduction

This chapter includes:

- ▶ Report's scope and applicable exclusions
- ▶ Background information pertinent to the report's content
- ▶ Terms and definitions used in the report
- ▶ Abbreviations and acronyms used in the report

