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DM measurement ROI: Call for transparency

In his article "We are shocked to find mismeasurement is going on here" (EBN, May), Al Lewis highlights several situations that occur in pre-intervention/post-intervention studies of disease management (DM) value of which employer buyers of DM should be aware. The decline in cost over time in certain defined populations that occur naturally, but often are wrongly attributed to DM interventions, is certainly one of the most important issues facing DM today. Mr. Lewis discusses some of these issues, cites one cause for this decline, and suggests a remedy. We have a few comments and suggestions.

Mr. Lewis is correct in stating that potential buyers of DM should become more aware of the problems in measuring DM value and the many solutions available that are used by scientific and other experts of measurements. A highly recommended alternative solution for dealing with some of the issues that Mr. Lewis introduces is the use of a reference population that has similar selection criteria to the DM intervention population [1, 2, 3, 4]. Such comparison populations can be selected from benchmark data sets, scientific literature, or through the use of standard evaluation design types whether observational, quasi-experimental or experimental.

We also agree with Mr. Lewis that study methods used to assess DM programs need closer scrutiny, especially the commonly used pre-intervention/post-intervention study design that does not employ a comparison group.

We believe the best way to achieve this scrutiny is to follow the well-worn path of clinical medicine: peer-review. In that regard, we encourage everyone with promising methods to improve the credibility of DM measurement to submit their ideas and findings on correcting for biases to that vetting process. In that venue, other measurement experts can judge the effectiveness and validity of different methodological solutions. This will better enable the employer market to have the information necessary to make informed choices between different methodologies available.

It is a truism that this market place, like all others, works best with "transparency," when both buyers and sellers are well informed [5]. Publication of methods and results in peer-reviewed journals is, in our opinion, the best way to achieve transparency regarding ROI and the many other important issues related to the value of DM and other defined population health management services.

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The Population Health Impact Institute has created guidelines for evaluating disease management programs – see story on page 44. Ed. See:
<http://www.benefitnews.com/detail.cfm?id=7628&terms=|wilson|>

Lewis column:
<http://www.benefitnews.com/detail.cfm?id=7441&terms=|drilldown|dm|>