

How medical schools are putting high-value care in the spotlight

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Every health system aims to achieve positive outcomes for patients that, because of when or how they take place, will reduce the cost of care. It's easier said than done.

The effort to create a generation of physicians who understand high-value care and its place in treating patients should start in medical school. A recent AMA webinar highlights the hurdles and potential areas for growth in aligning medical education with the concept of high-value care.

The webinar features faculty from three of the 37 medical schools working together to create the medical schools of the future and transform physician training as part of the AMA Accelerating Change in Medical Education Consortium.

They offered these tips for those looking to strengthen their curriculum in this area. A recording of the webinar is available in the resources area of the Accelerating Change in Medical Education Community (registration required).

Empowering students to lead the way

Dell Medical School at the University of Texas at Austin (UT) begins teaching principles of value-based care early on in preclinical training. The idea is to empower students to understand value and then ways to use it in their health care systems.

The school has also started the Choosing Wisely STARS program. The effort involves first-year students and faculty from 40 U.S. medical schools traveling to Austin for a summit on choosing wisely (which involves tests and treatments that can be forgone without compromising patient care), health care value leadership and advocacy. Those students and faculty then go back to their home institutions and implement some sort of value-centric curricular change.

“If we want to make a real difference, I think we need to start upstream,” said Christopher Moriates, MD, UT’s assistant dean for health care value. “We need to understand that we have to change those training environments really from the very beginning in order to create true effect.”

Connecting concepts with passions

The Mayo Clinic Alix School of Medicine teaches students to understand the risks, benefits and cost of interventions, to decrease interventions that provide no benefit or may be harmful, and to customize care plans with patients that incorporate their preferences and values. Students also learn to identify systems-level opportunities to improve value.

“Sometimes when students hear about value-based care or they hear about health systems science, it’s hard for them to see that linked to the patient in front of them,” said Stephanie Starr, MD, director for Science of Health Care Delivery Education at Mayo Clinic Alix School of Medicine, also a consortium member.

“One of the things that’s important—as we’re thinking about high-value care—is how does that fit the things that students have a passion around, whether it be advocacy or health equity, or the understanding of social determinants of health?” she said. “Keeping those things in mind and helping them see synthetically how these concepts fit together is very important.”

Considering students’ viewpoints

Unlike the projects at Texas and Mayo, the portion of the presentation focusing on the work done at University of Utah School of Medicine examines what value means in the educational setting. To do this, officials there started by measuring the cost of education. After adding in spending on the medical schools’ behalf in addition to tuition, that totaled nearly \$80,000 per year per student, according to Sara M. Lamb, MD, associate professor of internal medicine and associate dean of curriculum at the University of Utah School of Medicine.

That was only the first step in the process of understanding what value means in medical education. After that, the key was to understand what value meant to current and former students. Most of those who responded to surveys about the topic highlighted the importance of culture and support.

“We really need to think about medical education from the perspective of how the learner experiences it,” Dr. Lamb said. “We can think it’s great as faculty or as administrators, but if the students really have a horrendous experience in their education, then it’s really not great. So experience is really a

very important factor in how we think about value and quality in medical education.”