# *New Dimensions in Women's Health 9th edition Alexander Solutions Manual*

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## Chapter 2

Dr. Janice Beekley is the Medical Director of one of the largest health insurance companies in the United States. It is her job to review new medical technologies and determine which ones will be covered by the health plan, and which will not. To decide this, she and the committee of experts she works with review new products to see if they have significant clinical value and what the cost of covering them would be. When products are not as effective as the current standard of care, they are usually not covered. When they are as effective but more expensive, they also may not be covered. When products are more effective, but very costly, the insurance plan usually reimburses for their use—but may create access barriers to them so that physicians and patients have to demonstrate they absolutely need something prior to having access to the service.

Examples of this include CT scans for assessing back injuries. Dr. Beekley and her colleagues recently reviewed all the published evidence about CT scans to assess back injuries and came to the conclusion that they were being overused. Additionally, CT scans are very expensive and were costing the health insurer millions of dollars every year. Dr. Beekley created a specific policy that outlined when CT scans can and cannot be used. If a patient gets a CT scan for one of the unapproved reasons, they will have to pay for that imaging test out of their own pocket. This could cost them close to $1000. As a result, another initiative Dr. Beekley is working on is helping people to understand what is covered and what is not, and how to look up that information as part of the routine healthcare process.

Dr. Beekley's task for today is to evaluate whether the health insurance company should cover and pay for a new test for cervical cancer screening. It is a more expensive test, but because it is more effective than the current standard, it might save money in the long term.

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## Questions

1. What type of information should Dr. Beekley and her colleagues collect about the new test when assessing whether to cover it?

   **Answer:** They should look at the safety and effectiveness of the new test compared to the current standard. They should also look at what the cost-impact of adoption will be and whether it is reasonable, as well as the patient population for which the test is most appropriate.

2. Who might she consult when reviewing whether the test has value?

   **Answer:** She could:

   - Speak to clinicians who specialize in gynecologic oncology.
   - Review published literature about the test or disease area.
   - Discuss the product with the manufacturer to learn more about the test.

3. What is more important, the efficacy or the cost of the test? Why?

   **Answer:** Both are important, but efficacy is the most important. Whether or not a new medical technology has a clinical impact is the primary concern. If it works, we then have to figure out if it is affordable.

4. Should health insurance plans be able to decide what products and services are covered or not?

   **Answer:** Probably. They have specialists (usually doctors) on staff who are experts at reviewing the literature to determine what technologies have the most value. They also have experience treating patients and can apply that real-world point of view while assessing new products.

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