

OES Approach to Antibiotic Stewardship

Presidential Advisory Council on Combating Antibiotic-Resistant Bacteria

Elana Safran

Office of Evaluation Sciences (OES)
General Services Administration (GSA)

September 13, 2017





**We believe government works
best when it's built for people**

Office of Evaluation Sciences

What is it?

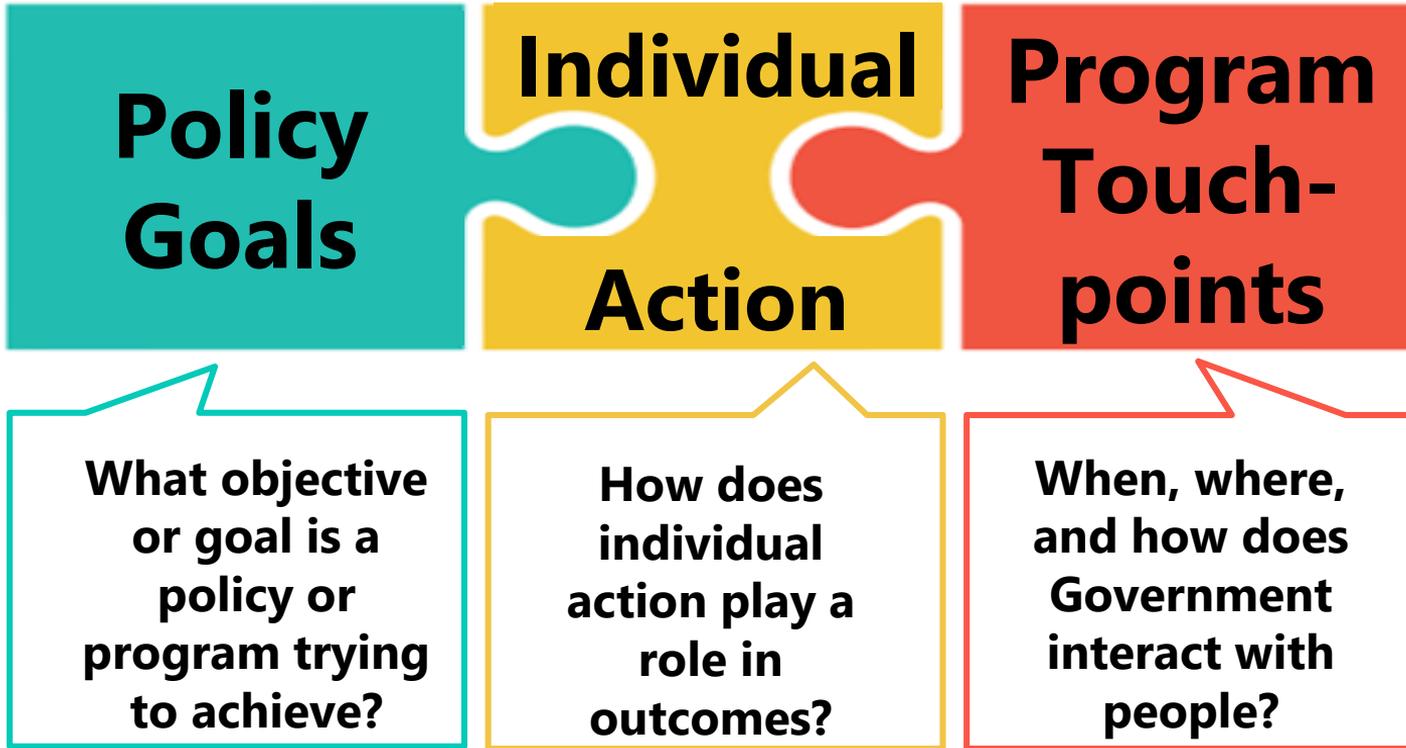
The Office of Evaluation Sciences (OES) is a team of applied experts based at the General Services Administration that **combines academic expertise with experience implementing and evaluating** evidence-based program changes to quickly learn what works, what works best, and what does not work.

Who is it?

OES recruits **top talent in diverse scientific fields** such as economics, psychology, public health, and statistics from academic institutions and nonprofit organizations into government to complete a one-year, in-person Fellowship.

OES also accepts **subject matter experts from other Federal agencies** on detail to build capacity governmentwide in designing and implementing rapid, low-cost evaluations.

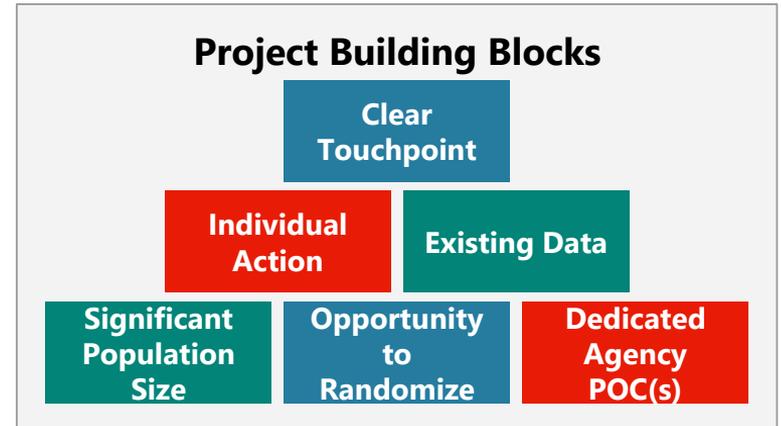
When is this approach most helpful?



Project Building Blocks

What makes a project a good fit for this approach?

- A **clear touchpoint** between the program and an individual
- An outcome of interest **depends in part on people's actions**
- An outcome of interest that is reflected in **data that is currently collected** (or could be easily collected)
- A program **population size** that is large enough to be statistically and policy relevant
- The ability to assign groups of people to **different versions of an intervention** in order to compare outcomes and learn what works best
- [An **agency collaborator** willing to work alongside OES and to share results across government]



TSP Sign-Up Rates Among Non-Enrolled, In-Processing Servicemembers

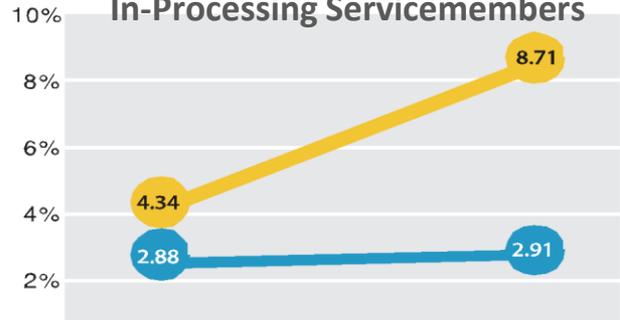


Figure 9: Enrollment Rates of the Eight Letter Variant Groups, Sorted by Effectiveness

Figure 6: College Enrollment Rates Among Low-Income Students

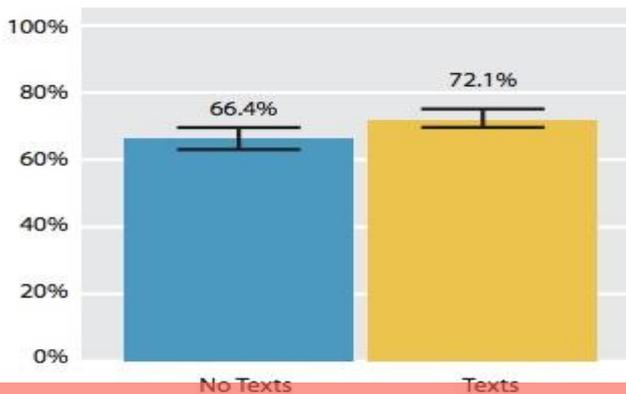


Figure 7: IDR Recertification Rates

Notes: Percentage of individuals recertifying their IDR plan in June 2015. n = 142,505.

In just two years, our more than 30 rigorous evaluations have generated impressive results - including in the health domain



the group receiving no letter. n = 744,510.

Reducing Inappropriate Prescribing of Schedule II Substances in Medicare Part D

A collaboration between OES and Health and Human Services (HHS)



Policy or Program	Research Insight	Program Change
Through its Center for Program Integrity (CPI), the Centers for Medicare and Medicaid Services (CMS) uses a variety of approaches to combat overprescribing .	Studies have shown that letters, especially those highlighting social comparisons , can motivate individuals to more carefully examine their own behavior. ¹	The letter depicted an individual's prescribing rates in comparison to his or her peers , and provided information about proper prescribing practices.

¹ For example, see: Catarina I. Kiefe, Jeroan J. Allison, O. Dale Williams, Sharina D. Person, Michael T. Weaver, and Norman W. Weissman, "Improving Quality Improvement Using Achievable Benchmarks for Physician Feedback: A Randomized Controlled Trial," JAMA 285 (2001): 2871–2879.

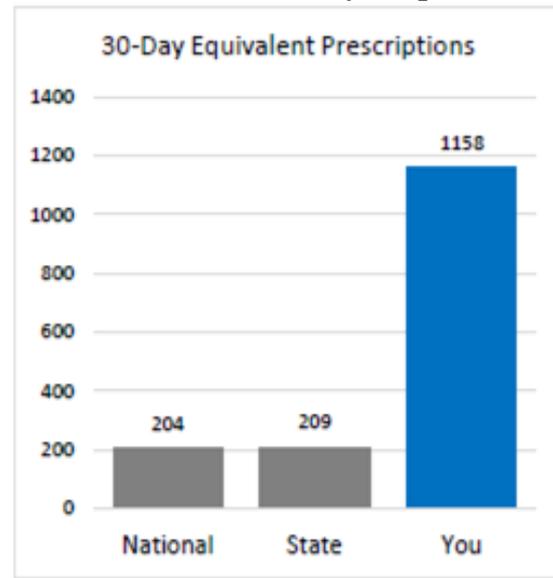
Reducing Inappropriate Prescribing of Schedule II Substances in Medicare Part D

A collaboration between OES and Health and Human Services (HHS)

How did the evaluation work?

CMS identified potential improper prescribers (those who prescribed far more than their peers in the same state and medical specialty.) **1,518 providers were randomly assigned to be sent a letter, or not.**

Re: You prescribed **XX% MORE** schedule II controlled substances than your peers.



OES 2015: <https://oes.gsa.gov/projects/reducing-inappropriate-prescribing>

Adam Sacarny, David Yokum, Amy Finkelstein, and Shantanu Agrawal, "Medicare Letters To Curb Overprescribing Of Controlled Substances Had No Detectable Effect On Providers," *Health Affairs* 35(2016): 3471-479.

Sample Prescriber Letter

Reducing Inappropriate Prescribing of Schedule II Substances in Medicare Part D

A collaboration between OES and Health and Human Services (HHS)

How did the evaluation work?

CMS identified potential improper prescribers (those who prescribed far more than their peers in the same state and medical specialty.) **1,518 providers were randomly assigned to be sent a letter, or not.**

What was the impact?

Using data collected over the 90 days after the letter was mailed, **comparisons failed to detect an effect of the letter on Schedule II prescribing.**

OES 2015: <https://oes.gsa.gov/projects/reducing-inappropriate-prescribing>

Adam Sacarny, David Yokum, Amy Finkelstein, and Shantanu Agrawal, "Medicare Letters To Curb Overprescribing Of Controlled Substances Had No Detectable Effect On Providers," *Health Affairs* 35(2016): 3471-479.

OES Portfolio

Who have we collaborated with?



**Department of
Agriculture**



**Department of
Defense**



**Department of
Education**



**Department of
Energy**



**Department of Health
& Human Services**



**Department of
Housing
& Urban Development**



**Department of
Justice**



**Department
of Labor**



**Department of
the Treasury**



**Department of
Veterans Affairs**



**General Services
Administration**



**Social Security
Administration**



**United States Agency for
International Development**

<https://oes.gsa.gov>