# Waste in U.S. Healthcare

It's no secret that we have the most expensive healthcare in the world. One of the reasons is waste.

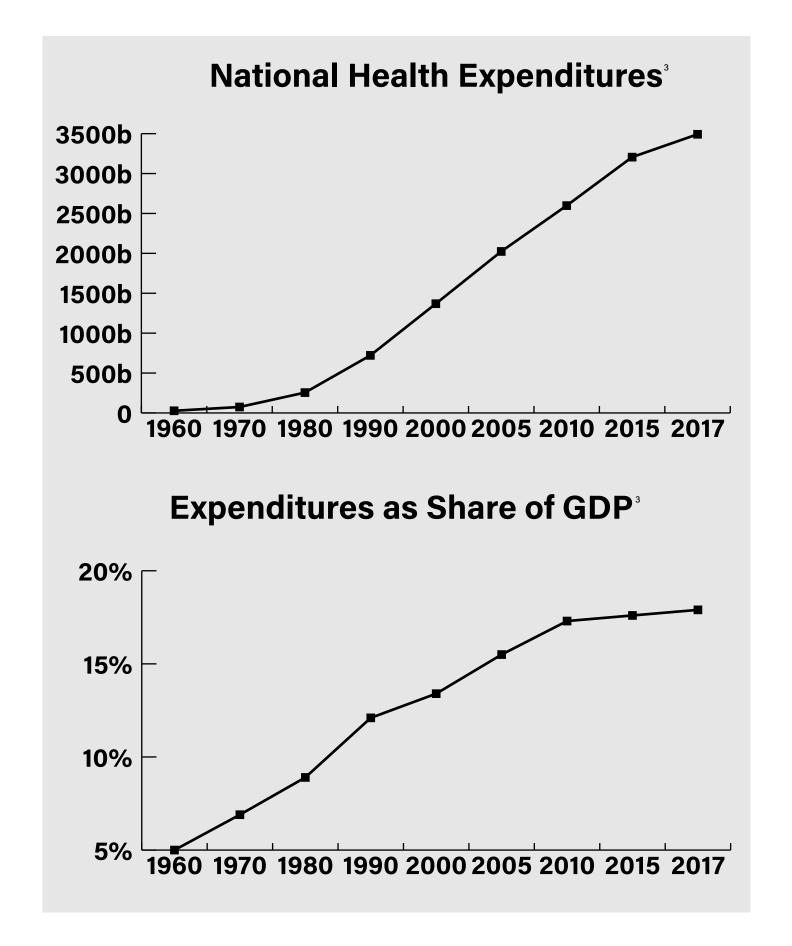
# 18% of the U. S. GDP is Healthcare Costs' 30% of Healthcare Spending May Be Considered Waste'

this equals:

# \$760 billion to \$935 billion in total healthcare waste

or:

# \$10,000 Per Person Per Year



### "The Trillion Dollar Checkbook"

Healthcare Waste and Cost Savings Breakdown<sup>2</sup>

The Institute for Healthcare Improvement conducted a study that breaks down improvements to eliminate waste and their resulting cost savings. Read more at: http://www.ihi.org/Engage/collaboratives/LeadershipAlliance/Documents/IHILeadershipAlliance\_TrillionDollarCheckbook\_ReduceWaste.pdf

### **Reduce Harm and Safety Events**

Infections	\$6.2b
Sepsis	\$5.7b
Medication Safety	\$20.7b
Opioid Use	\$2.3b
Overdiagnosis	\$33.7b
Staff Injuries	\$1.4b
Hospital-Acquired Conditions	\$9.1b
Maternal and Child Health	\$1.3b
Delirium	\$59.1b

### Reduce non value added operational workplace Waste

Drug Expiration Dating	790.1m
Billing Systems	48.1b
Team-Based Care	8.5b
Price Variation	12.1b
Burden of Measurement	4.2b
Electronic Health Record Redesign	1.5b
Supply Chain Standardization	25.3b

### Reduce non value added clinical workplace waste

Antimicrobial Stewardship	1.1b
Blood Use	5.9b
Diagnostic Error	100b
Overuse of Medical Tests, Treatments, and Procedures	45.9b
Generic Drug Substitution	37.6b
Direct-to-Consumer Drug Advertising	7.2b

### **Actively Solicit Staff and Clinician Ideas**

Operational Waste	<b>20.9b</b>
Workforce Burnout and Turnover	32.4b

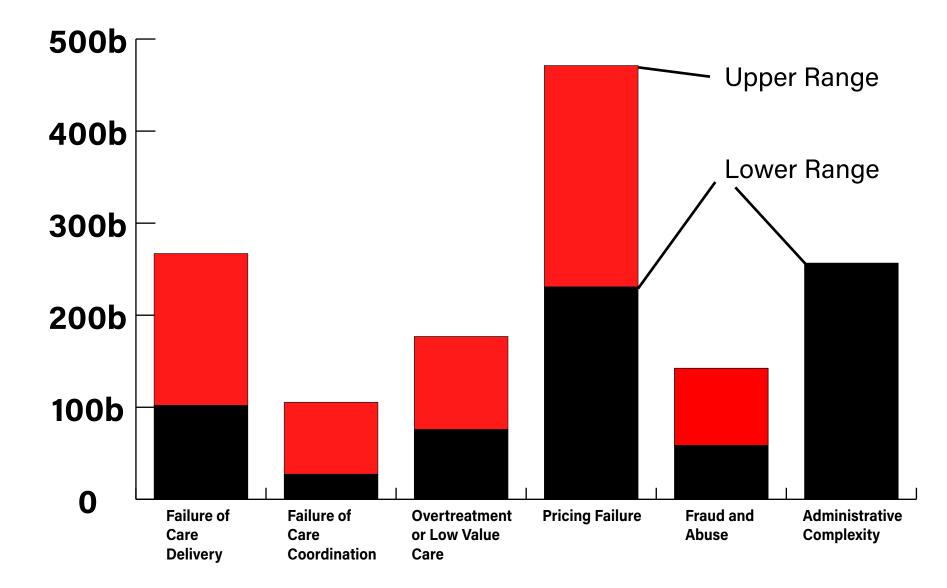
### **Involve Patients in Identifying What Matters Most to Them**

Palliative Care (Direct Medical Costs)	7.3b
Palliative Care (Ambulatory Costs)	7.4b
Telehealth	1.8b
Emergency Department Visits	3b

Redesign Care to Achieve "Triple Aim": (improving the patient experience of care (including quality and satisfaction); improving the health of populations; and reducing the per capita cost of health care.)

Skilled Nursing Facility Utilization	28.9b
Skilled Nursing Facility 3-Day Rule	3.4b
Behavioral Health	38.1b
Alternative Payment Models	49.7b to 82.9b
Health Equity	88b
Use of Dialysis Days	1.5b
Optimizing Inpatient Psychiatric Days	70.7b
Ambulatory Care-Sensitive Hospital Admissi	ons <b>4.9b</b>
Site-Neutral Payment	61.4 b
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## **Estimated Ranges of Total Annual Cost of Waste**<sup>1</sup>





U.S. Department of Commerce, Bureau of Economic Analysis; and U.S. Bureau of the Census.