# High-Value Surgeon Scorecard: Implementation & Outcomes

JB Eyring, BS<sup>1</sup>; Brandon Hemeyer, BS<sup>1</sup>; Wesley Allen, BS<sup>1</sup>; Bill Millet, RN<sup>2</sup>; Alexander Ramirez, MD<sup>2</sup>; Jeremy Meier, MD<sup>1,2</sup> <sup>1</sup>University of Utah School of Medicine, <sup>2</sup>Intermountain Health, Division of Head and Neck

#### Introduction

Delivering value in health systems is paramount as payer contracts move away from fee-for-service payment models; accurately measuring value (i.e., quality over cost) is key to this transition. This study describes the Otolaryngology High-Value Surgeon Scorecard, surgeon adherence, and barriers to implementation in a multi-facility health system.

# Methods & Sample

- The "scorecard" is a health system-wide feedback and auditing mechanism for otolaryngologists to see their performance across quality metrics, with a point system based on benchmark values.
- Scorecard categories (see Fig. 1) weighted by four distinct pathways: tonsillectomy, thyroidectomy, otology, and nasal surgery.
- Surgeons are given a quarterly report and offered mentoring and CME resources to improve.

Finding: A quality "scorecard" decreased inappropriate antibiotic and opioid use by 53% and 32%, respectively, over two years.

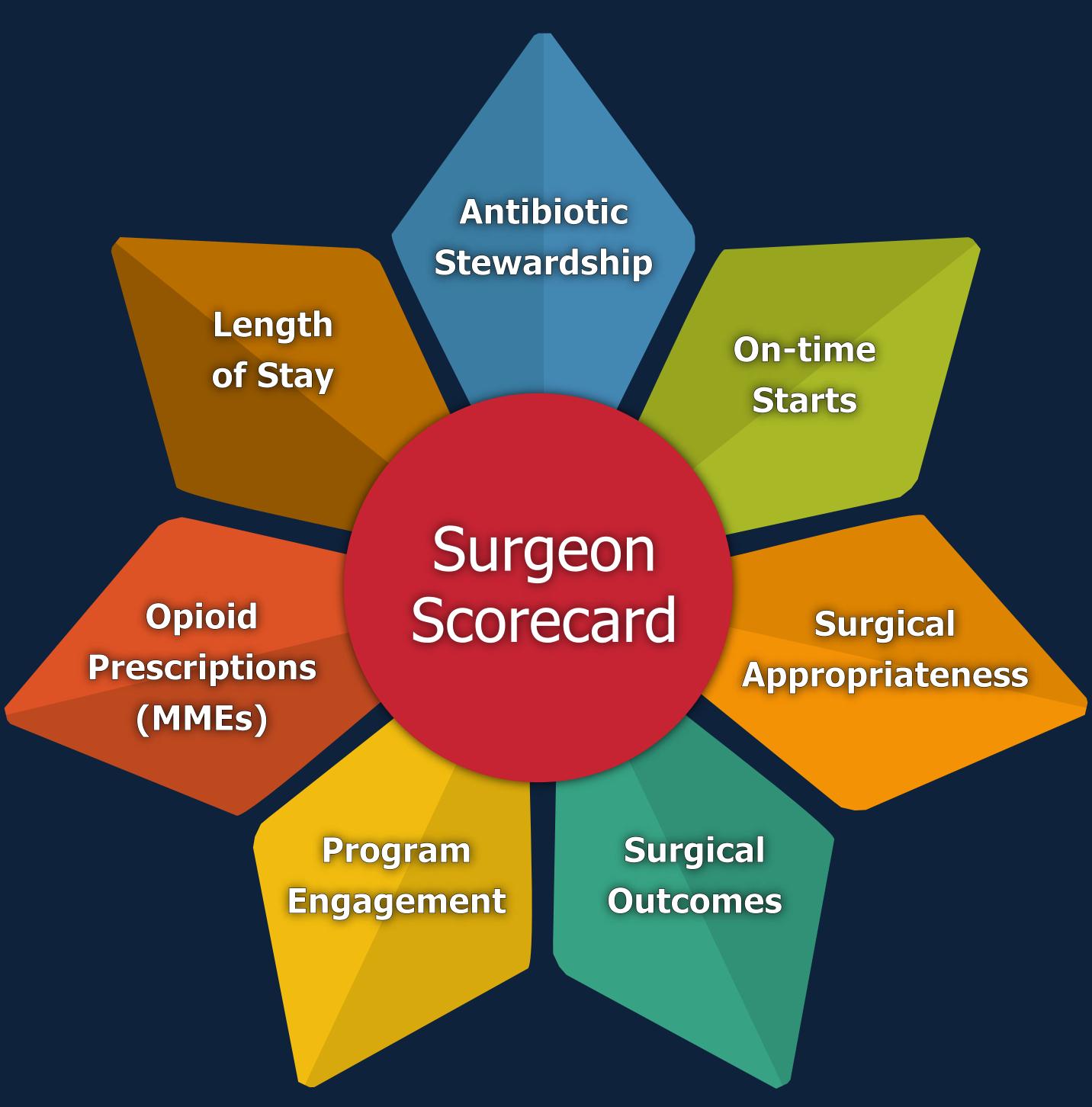


Fig. 1: The seven categories on which surgeons receive a quarterly report. Surgical outcomes include: tonsillectomy bleeds, post-op ED returns, and PRO measures.

## Key Findings

- At implementation (Q1 2021), 23/105 surgeons (21.9%) met High-Value criteria
  - Increased to **63.5%** by Q2 2023
- Since implementation, antibiotic and opioid prescription rates have decreased by 52.8% and 32.2%
- Barriers persist in getting reliable, accurate, and timely data, particularly when measuring meaningful quality outcomes.

### Conclusions

Since implementing the High-Value Surgeon Scorecard, surgeons meeting the criteria for high value has significantly increased. This has been associated with a significant decrease in inappropriate peri-operative antibiotic administration and opioid prescribing patterns. Future research is needed to determine the most meaningful metrics for ascertaining value in care delivered by otolaryngologists.

