

Avoidable health care costs exceed 200 billion in 2012

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Murray Aitken, M.B.A., from the IMS Institute for Healthcare Informatics in Parsippany, N.J., and colleagues focused on use of medications in the health care system to quantify avoidable costs in 2012. Avoidable costs were examined in six areas relating to different disease and care situations: non-adherence to medications; delayed evidence-based treatment; misuse of antibiotics; [medication errors](#); suboptimal use of generic drugs; and mismanagement of polypharmacy.

According to the report, in 2012, [health care costs](#) due to improper and unnecessary use of medicines surpassed \$200 billion, representing 8 percent of the nation's [health care spending](#). Progress was made in some areas of avoidable costs. Since 2009, adherence to medications for hypertension, hyperlipidemia, and diabetes increased about 3 percent. Since 2007, the rate of [antibiotic prescriptions](#) for patients diagnosed with colds and flu dropped from 20 to 6 percent. In addition, use of generic medication increased to 95 percent for diseases where lower-cost generics were available.

"This report identifies actions that all health care stakeholders can take to address the avoidable costs currently incurred by the U.S. [health care system](#) due to medications not being used according to the best evidence-based clinical practice," the authors write. "These priorities represent the best thinking in the six areas of opportunity identified, and in many cases are consistent with the direction and intention of elements of the Patient Protection and Affordable Care Act."

More information: [More Information](#)

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