About MED
The Medicaid Evidence-based Decisions Project

The Medicaid Evidence-based Decisions Project (MED) is a collaboration of 17 state agencies, housed at the Center for Evidence-based Policy at Oregon Health & Science University.

MED produces reports, and other tools, to help state policymakers make the best, evidence-based decisions for improving health outcomes. The reports provide valuable evidence about effective treatments as well as information about harmful or unnecessary services. MED participants have access to policy and evidence resources that support sound decision-making with unbiased analyses of complex issues.

Results
The return on investment is high

The MED project is designed to meet the needs of policymakers by providing participants with information that is timely, accurate, unbiased, and actionable. MED participants have used the collaboration’s research to improve their programs in a variety of ways, including:

**ALABAMA**
Alabama utilized a MED analysis of DME expenses that led to policy changes related to home IV services resulting in cost avoidance of $1 million annually.

**MINNESOTA**
Minnesota has created a process to control the growth of high tech imaging (HTI) use — stabilizing at 41 procedures per 1,000 enrollees, well below the trend rate previously experienced (47/1,000).

**MISSOURI**
Missouri now requires prior authorization of CT and MRI imaging of the chest, lower back, head, and neck, resulting in savings of over $9.3 million during a two year period.

**OKLAHOMA**
Oklahoma covers negative pressure wound therapy only in circumstances identified by MED research where benefits outweigh risks, resulting in a significant drop in inefficient utilization of these devices.

**WASHINGTON**
Washington no longer covers arthroscopic debridement and lavage of the knee for osteoarthritis, resulting in an estimated savings of $400,000 within the first year of the policy.
Benefits
Participation in MED includes many benefits

EVIDENCE & POLICY REPORTS
The MED project produces evidence-based answers to well-defined questions, providing MED participants with access to proprietary reports on a variety of policy and evidence issues. These reports utilize robust research strategies to appropriately cover clinical, policy, and financial issues.

COLLABORATION & DISSEMINATION OF BEST PRACTICES
The MED Project is bolstered by the collective knowledge and expertise of its participants. In addition to bimonthly conference calls, participants meet in-person biannually. These unique forums allow MED participants and other key staff to share ideas, and collaboratively address common issues.

In addition to its regular meetings, workgroups addressing current challenges on priority issues for states convene regularly. The workgroups review evidence and policies as well as share current state practices. There are currently five workgroups meeting to address:

- Behavioral Health
- Durable Medical Equipment
- Genetic Testing
- Health Technology Assessment (HTA) Collaboration
- MED/DERP
- Oral Health

RAPID RESPONSE TO STATE-SPECIFIC NEEDS
MED participants have access to MED’s Participant Request Service, which allows participants to request brief reviews of the evidence on emerging state issues, at any time. The MED team will quickly search for evidence and produce a report on the specified topic. Participant Requests can take a variety of forms, including expert librarian search, brief evidence summary, policy brief, or review of information provided by a vendor.

INFORMATION RESOURCES
In addition to MED reports and products, participants have access to several proprietary information sources, including:

- MED Clearinghouse
  A web-based compilation of MED reports, federal, state and private payer policies, news, and discussion forum available to participants through a secure website

- Hayes Knowledge Center
  Direct access through the MED Clearinghouse to Hayes, a nationally recognized vendor specializing in off-the-shelf evidence reports

- Weekly Newsletter
  MED staff scan a wide breadth of journals and publications and provide concise analyses of relevant and timely information in a weekly electronic newsletter
Reports
Topics in progress or completed since October 2014

- Accountability in Community-based Long-Term Services & Supports (LTSS) Managed Care Programs (In Progress)
- Adaptive Behavior Assessment & Treatment for Autism (In Progress)
- Bariatric Surgery for Adults & Adolescents: Selection Criteria and Post-Surgical Care—Guidelines, Evidence and Policies (May 2015)
- Best Practices in Naloxone Treatment Programs for Opioid Overdose (July 2015)
- Best Practices for Patient Engagement of Medicaid Populations (In Progress)
- Characteristics of the Expansion Population (In Progress)
- Choosing, Collecting, and Using Patient-Reported Outcomes for New Payment Models (In Progress)
- Clinical Models & Effectiveness of Overweight & Obesity Interventions in Children & Family-based Settings (In Progress)
- Cologuard® for Colorectal Cancer Screening: Diagnostic Accuracy, Harms, Cost-Effectiveness, and Policies (June 2015)
- Deep Sedation and General Anesthesia for Dental Procedures (December 2014)
- Depression in Pregnancy & Postpartum Period: Screening & Linking Patients to Care (In Progress)
- Effectiveness of Group Clinical Visits for Chronic Illness Management (May 2015)
- Enhanced Services for High-risk Obstetric Patients (April 2015)
- Fetal Surgical Procedures (In Progress)
- Harvoni™ and Viekira Pak™ Treatment for Chronic Hepatitis C Infection (February 2015)
- Health Wellness Programs (March 2015)
- Insulin Pens as Insulin Delivery Devices (June 2015)
- Measuring Health-related Quality of Life for People with Disabilities (February 2015)
- Medicaid Coverage of Community Health Workers (January 2015)
- New Oncology Drugs: Value-based Oncology (In Progress)
- Non-Invasive Bone Growth Stimulators: Effectiveness, Guidelines, and Policy (February 2015)
- Non-Invasive Tests for Staging Liver Fibrosis in Chronic Hepatitis C Virus Infection (October 2014)
- Non-Pharmacological Treatment for ADHD (January 2015)
- Oncotype DX® for Colon Cancer (March 2015)
- Physical, Occupational, and Speech Therapy: Policies, Limits and Medical Necessity Criteria (July 2015)
- Programs to Reduce Emergency Department Utilization for Non-Emergency Care (In Progress)
- Proton Beam Therapy (In Progress)
- Strategies for Increasing Use of Evidence-based Practices by Behavioral Health Providers (In Progress)
- Transcatheter Aortic Valve Implantation for Severe Symptomatic Aortic Stenosis (January 2015)
- Treatments for Opioid Dependence during Pregnancy: Evidence and Policy Summary (November 2014)
- USPSTF Obesity Counseling Recommendations: Cost-effectiveness, Codes, and Policies (March 2015)

FOR MORE INFORMATION CONTACT

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