

Advancing the *Choosing Wisely* Campaign in Clinical Practices and Communities







Overview

Waste and overuse are widespread in American medicine, with severe effects on both the quality of care (up to 30,000 deaths annually result from overuse)¹ and costs to the health care system.² To highlight and address this problem, the ABIM Foundation, in partnership with over 70 medical specialty societies and Consumer Reports, operates the *Choosing Wisely*® campaign. As part of *Choosing Wisely*, each participating specialty society created lists of tests or treatments that they say are overused in their field, with the ultimate aim of promoting physician-patient conversations about avoiding unnecessary care.

Through a \$2.5 million grant from the Robert Wood Johnson Foundation (RWJF), in 2013 the ABIM Foundation provided grants to support 21 projects designed to increase physician and community awareness of the societies' recommendations and support conversations between physicians and patients about what tests and procedures are necessary. The grantees include specialty societies, state medical societies and regional health collaboratives. (A list of grantees can be found on page 9.) Over the last two years, these grantees, with help from the ABIM Foundation and Consumer Reports, have worked at the national, state and local levels with the goals of educating practicing physicians and consumers about *Choosing Wisely*, fostering attitudinal change designed to ultimately produce behavioral change, and identifying and addressing barriers to change.

Their projects – operating from Maine to Texas to Washington – have helped clinicians learn how to use resources more efficiently and inspired collaborations among hospitals, employers, providers and health care advocacy organizations to deliver better care. Grantees have developed educational programs for practicing physicians and trainees, hosted town halls, aired public service announcements, created an app to help physicians apply *Choosing Wisely* in the exam room, and worked with physician practices in their states to test methods for implementing the campaign's recommendations. These stories and many others are shared here, and we hope they will provide ideas and inspiration for others who working to reduce unnecessary care in their communities.

Goals and Highlights of Grantee Work

Our grantees focused on five strategic goals:

- 1. Increasing physician and public awareness of *Choosing Wisely* and the society recommendations
- 2. Building physician knowledge and skills in the area of stewardship, the responsible management of resources
- 3. Creating community collaborations
- 4. Fostering attitudinal and cultural change
- Changing practice and moving toward implementation of interventions aimed at reducing unnecessary care

This paper will highlight grantee progress in each of these five areas, and then take a more detailed look at the partnership building and other work that contributed to the grantees' successes.

SOURCES

- 1 Swensen SJ, Kaplan GS, Meyer GS, Nelson EC, Hunt GC, Pryor DB, Weissberg JI, Daley J, Yates GR, Chassin MR. Controlling healthcare costs by removing waste: What American doctors can do now. BMJ Qual Saf [Internet]. 2011 Jun; 20(6):534-7.
- 2 Delaune J, Everett W. Waste and inefficiency in the U.S. health care system: clinical care: a comprehensive analysis in support of system-wide improvements. Cambridge; 2008. 118 p.

Increasing physician and public awareness

Research conducted in 2014 shows that about one in five physicians is aware of *Choosing Wisely*. In addition, a survey done in 2014 as part of program evaluation by independent polling company GfK found that about 5 percent of the general population is familiar with *Choosing Wisely*. Increasing patient awareness and understanding of the campaign, and of the concept that more care does not always equate to better care, is a critical step in helping patients engage with their physicians in informed conversations about avoiding unnecessary tests and treatments.

Showcasing Physicians Implementing Choosing Wisely

The grants supported efforts by both state medical societies and national specialty societies to work to raise the level of their physician members' awareness—as well as consumer awareness—of *Choosing Wisely* through a variety of channels including: media, newsletters, social media, peer-reviewed journal articles, convenings, physician-focused blogs, public service announcements and videos. Some highlights include:

- Many grantees showcased physicians who were adopting *Choosing Wisely* in their practices. For example, the Texas Medical Association published a monthly series in its <u>newsletter</u> highlighting Texas physicians and their *Choosing Wisely* efforts. The articles reached more than 37,000 physicians in Texas, illustrating how they could put *Choosing Wisely* into action.
- Another example comes from the American Society for Clinical Pathology (ASCP). It created a photo voice white paper featuring pathologists discussing how they implemented *Choosing Wisely* recommendations from ASCP. (Photo voice combines photography or video to create a narrative that represents a community's point of view.) The videos also describe challenges and barriers to implementation, as well as innovations in resolving the challenges.



Town hall meeting at the University of Utah.

Town Hall Meetings

"Town hall"-style meetings proved to be a successful technique for grantees HealthInsight Utah and Maine Quality Counts (MQC). The meetings offered patients a chance to ask questions of experts, and helped raise public awareness through local media coverage. MQC's events featured several prominent panelists, including author Shannon Brownlee and Dr. John Santa from Consumer Reports, and were broadcast to six sites across the state, reaching audiences as large as 750 people. HealthInsight Utah's two town hall meetings were featured in eight major articles or broadcasts, including <u>The Salt</u> <u>Lake Tribune</u> and local Fox and Univision affiliates. Altogether, these outlets reached nearly a quarter of a million people with information about *Choosing Wisely*.

Leveraging Already Existing Community Organizations

The Michigan Health Information Alliance provided customized information for groups such as local chapters of the United Way and the American Cancer Society and local chambers of commerce. The Oregon Medical Association (OMA) partnered with Oregon State University's sports marketing division to promote the campaign via social media. And the Iowa Healthcare Collaborative and the Michigan Health Information Alliance both partnered with local health plans to include articles about *Choosing Wisely* recommendations in their member magazines, reaching thousands of consumers.

Public Service Announcements and Audio News Releases

Several grantees worked with local radio and television stations to run public service announcements about the campaign. This included the OMA, which arranged for Spanish-language public service announcements (PSAs) to be shown locally on Univision. PSA messages urged patients to have conversations with their clinicians and offered a set of standard questions to ask. The PSAs were funded by RWJF and created by Consumer Reports. ASCP created an audio news release featuring Dr. Lee Hilborne, Medical Director for Quest Diagnostics, speaking about appropriate test utilization and *Choosing Wisely*. ASCP distributed the release to radio stations and networks throughout California, resulting in more than 35 million audience impressions across the state.

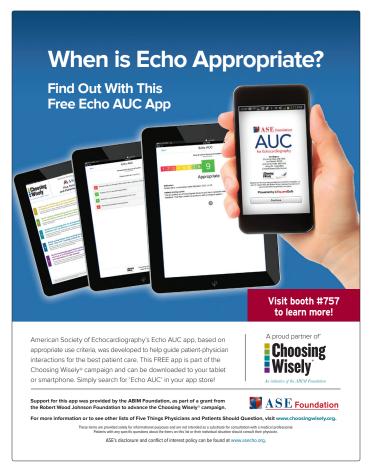
Resources for Doctor's Offices

In addition to the live events, MQC supported efforts in clinics to promote patient awareness about *Choosing Wisely* and overuse. Among other things, the clinics hung <u>posters designed by Consumer</u> <u>Reports</u> that featured five questions patients should ask their physicians, such as "Do I really need this test or procedure?" and "What are the risks?"

Communication Skills and Medical Education

Grantees focused both on educating physicians about the *Choosing Wisely* specialty society recommendations and helping them improve their communication skills so that they could more comfortably discuss overuse with their patients. They accomplished this by producing webinars, online educational products and written materials about *Choosing Wisely* for physicians and, offering live presentations, workshops and courses at physician meetings. For example:

The American Society of Echocardiography (ASE) created a smartphone app that provides decision support for physicians based on ASE's *Choosing Wisely* recommendations. As of April 2015 the app has been downloaded close to 8,500 times.



- The American College of Physicians launched <u>online cases</u> that focus on high value care and incorporate *Choosing Wisely* recommendations. The interactive cases present clinical scenarios that help clinicians consider the benefits, harms and costs of tests and treatment options for common conditions. More than 3,000 physicians have completed at least one case.
- ASCP conducted a half-day live symposium at its California chapter's annual meeting and created an <u>online tool kit</u> about *Choosing Wisely* for its members. Seven state chapters re-created the event in their own states.
- The Texas Medical Association (TMA) held a Choosing Wisely CME track in conjunction with its 2014 annual meeting, and created a series of one-hour <u>CME videos</u>. The in-person event was attended by 133 physicians, and TMA plans to educate 1,000 physicians with an online CME-accredited version of the track.

Meanwhile, several grantees sought to shape the next generation of clinicians by focusing on medical education.

Better Health Greater Cleveland (BHGC) created a <u>digital module</u> on low back pain, cervical cancer, cardiac imaging, sinusitis and headache for medical students and residents at 11 programs in the state.



A Healthcare Provider Educational Manual Based on the Choosing Wisely Campaign.

"We created five learner tool kits and we had some exciting participation, discussion and dialogue from the residents," said Aleece Caron, co-director of *Choosing Wisely* at BHGC. "Many of them have asked for more materials and want to implement on their own. The modules also helped change the mindset of the academic leaders. They were knocking down our door and trying to do more."

- The Michigan Health Information Alliance partnered with the Saginaw Valley State University (SVSU) nursing school to incorporate *Choosing Wisely* into its curriculum. SVSU uses discussion boards to help nurses navigate interdisciplinary discussions about overuse and employs *Choosing Wisely* recommendations as examples.
- The OMA also worked with the physician assistant program at Oregon Health and Science University. After a lecture on the campaign, physician assistants worked through overuse scenarios based on *Choosing Wisely* recommendations.

"There was a real enthusiasm for the campaign and a desire to become part of it, which encouraged us that our efforts were making an impact."

Creating community collaborations

Many grantees reported that the grant provided an opportunity to develop new partnerships and deepen existing ones. "As the campaign progressed, more and more organizations started contacting us to get involved," said Korey Capozza, the *Choosing Wisely* project director from HealthInsight Utah. "There was a real enthusiasm for the campaign and a desire to become part of it, which encouraged us that our efforts were making an impact." These new partners included early childhood education organizations, with whom HealthInsight Utah engaged to educate parents about when antibiotics are – and are not – appropriate for their children.

Most grantees sought to foster collaboration by integrating their *Choosing Wisely* efforts into complementary existing campaigns. "We worked hard to integrate *Choosing Wisely* into a variety of statewide initiatives, such as ones on palliative care, obstetrics, healthcare associated infections and health literacy," said Kady Hodges, the project director from Iowa Healthcare Collaborative (IHC). For example, IHC integrated *Choosing Wisely* into its Hospital Engagement Network, sharing campaign content with physicians and staff at 127 hospitals.

Grantees also integrated *Choosing Wisely* into existing quality programs, such as public reporting websites, performance measurement and improvement plans, triple aim work and quality improvement for patient-centered medical homes. It was also incorporated into complementary consumer-facing campaigns that addressed health literacy, shared decision-making, palliative care and patient activation. Grantees even integrated the work into federally funded projects such as State Innovation Models and Centers for Disease Control and Prevention transformation grant work.

By integrating *Choosing Wisely* with other programs, grantees were able to leverage additional resources and solicit buy-in from collaborators working in similar spheres. In turn, *Choosing Wisely* provided a new perspective for existing campaigns. For example, according to Lisa Letourneau from Maine Quality Counts, *Choosing Wisely* helped make existing shared decision-making efforts more tangible by offering evidence-based recommendations for clinicians and accompanying decision aids for patients.

In some states, including Washington and Minnesota, collaboration was aided by the presence of multiple *Choosing Wisely* grant recipients that worked collaboratively to engage stakeholders. The Washington Health Alliance used its data to develop a <u>snapshot</u> of overuse in the state while the Washington State Medical Association engaged physician leaders in the conversation and provided a <u>practical guide</u> to clinical implementation.

Choosing Wisely "has helped to make conversations about 'appropiate' care more open and comfortable for both consumers and providers."

In Minnesota, the Minnesota Medical Association (MMA) focused on individual physician engagement; the Minnesota Health Action Group (MHAG) focused on employer engagement; and the Institute for Clinical Systems Improvement (ICSI) focused on engaging health systems. Grantees who worked together said they felt they were more likely to work together in other health initiatives in their communities after their *Choosing Wisely* collaboration.

Emily Mallen, ICSI's project manager for the *Choosing Wisely* grant, shared, "Our partnership with the Action Group and the Minnesota Medical Association has been really successful for all involved. ICSI and MMA target similar bodies (physicians for MMA; medical organizations for ICSI). With our collaboration, doctors are getting aligned messages frequently from two different places. Creating partnerships early on was very advantageous."

Finally, employers were also a key collaborator for many grantees. MHAG's activities included outreach to large employers, monthly member meetings and an annual summit. The group created an <u>employer tool kit</u> that other grantees modified and used, and partnered with the state government, one of Minnesota's largest employers, to help spread the word about the campaign. In neighboring Wisconsin, the Wisconsin Collaborative for Healthcare Quality (WCHQ) worked with Madisonbased Research Products to train its employees on wellness and awareness about health care costs, using the *Choosing Wisely* materials and recommendations as the source of much of that training.

Fostering attitudinal and cultural change

Grantees frequently shared that *Choosing Wisely* had helped change the culture of health care in their communities. According to Mary Riordan, Director of Member Engagement at WCHQ, *Choosing Wisely* "has helped to make conversations about 'appropriate' care more open and comfortable for both consumers and providers."

Kellie Slate-Vitcavage, director of communications at MQC during most of the grant, shared similar thoughts. "It's allowed MQC to expand *Choosing Wisely* and its *Choosing Wisely* goals. It's changed MQC in focusing on how to engage patients in their care in the visit, and how to work with the practices on developing patient advisory councils. This has changed MQC's thought process that it's not just clinical – it is a new culture." Several grantees have been working specifically to change their state's health care culture:

- The Washington State Choosing Wisely Task Force, which includes the state medical association, regional health collaborative and state hospital association, launched an initiative called "Change One Thing." The task force focused on a single overused service – imaging for uncomplicated headaches. Its goal is to reduce both the high statewide utilization rate (25 percent) and the high variation among counties (currently a 28 percentage point disparity). To support this effort, the task force developed an action manual on leading a "Choosing Wisely change" in an organization. The <u>Action Manual</u> uses Kotter's 8-Step Process for Leading Change to guide organizations through creating a framework for Choosing Wisely implementation.
- The MMA partnered with the Guthrie Theater in Minneapolis to create an innovative approach to understanding and changing how physicians interact with their patients. Four free workshops were offered for physicians, who learned how to improve non-verbal cues (including body language and breathing) to make their patients feel more comfortable, engaged in role-playing exercises with feedback from instructors, and practiced eye contact and positive speech patterns to help build trust and improve communications.



Changing practice and moving toward implementation

While the grantees have focused primarily on dissemination and education, several grantees launched interventions designed to directly influence practice. From integrating *Choosing Wisely* into electronic medical records and decision support tools to using conversation tools to improve shared decision-making, the following projects demonstrate how grantees have begun putting *Choosing Wisely* into action:

MQC has enlisted eight clinical sites to implement *Choosing Wisely*, four with funding from the ABIM Foundation and four with federal funding through the State Innovation Models program. Four of the sites have sought to test different methods of implementing *Choosing Wisely*, including patient outreach and education, provider education, changes in order sets, training and using health coaches, and integrating *Choosing Wisely* into all steps of patient engagement in the office from reception to physician. The other four sites have used *Choosing Wisely* to promote more productive patient-provider conversations and engage patients in shared decision-making. At the conclusion of the pilots, a team from MQC will meet with the sites to capture lessons learned and barriers to implementation.

- The Washington Health Alliance and Washington State Medical Association issued a statewide *Choosing Wisely* report, *Less Waste, Less Harm: Choosing Wisely*[®] *in Washington State*. The report details county-by-county utilization for nine *Choosing Wisely* recommendations based upon claims data representing 3.3 million lives. The report provides a baseline to measure future change as *Choosing Wisely* recommendations continue to inform providers and patients. This effort offered an example of coordination with a health plan, as insurer Premera provided the code sets that the task force used for its study. The group hopes to repeat the measurement annually.
- ICSI incorporated Choosing Wisely recommendations into four sets of its clinical guidelines, each of which receive more than 1,000 hits per month on its <u>clinical guidelines website</u> <u>clearinghouse</u>. ICSI leaders also highlighted Choosing Wisely in their member relations site visits, detailing for senior physicians and quality improvement staff across the state how Choosing Wisely could improve the care they provide, and sharing patient engagement materials with them.
- The Society of Hospital Medicine (SHM) sponsored a Choosing Wisely Case Study Competition to provide an opportunity for hospitalists to share examples of how they implemented Choosing Wisely recommendations. SHM plans to develop resources such as a case study compendium, and potentially create an accompanying implementation guide.

Roadmap to Creating Choosing Wisely Communities

Choosing Wisely's success rests on collaboration among multiple stakeholders in the health arena. While these actors may share some common goals, each is motivated by different concerns and incentives. This section will include lessons learned about working across stakeholders, and will describe barriers and challenges to creating *Choosing Wisely* communities; these lessons were developed from the experiences of the 21 RWJF grantees and other *Choosing Wisely* collaborators.

Engaging physicians

One of the campaign's central objectives has been to both raise physicians' awareness of overuse and influence their attitudes. Reaching that objective requires understanding physician motivation and beliefs. Prior to launching the *Choosing Wisely* campaign, the ABIM Foundation conducted exploratory research that showed physicians were primarily motivated by their desire to enhance patient well-being, improve the quality of care they deliver, and achieve personal and professional security and fulfillment. Physicians indicated they were less motivated by messaging that uses population health and a sustainable health system as carrots.

In spring 2014, the ABIM Foundation released results of a national survey that measured physicians' attitudes about unnecessary tests and procedures in the health care system, their views on the causes of the problem, and their perspectives on various solutions.

The <u>study</u> found that:

- Nearly three in four physicians think unnecessary tests and procedures in the health care system are a serious problem.
- Almost all physicians (93 percent) feel a responsibility to make sure their patients avoid unnecessary care, and feel they are in the best position to address the problem.
- About half of physicians (47 percent) say their patients ask for unnecessary tests and procedures at least once a week, and 53 percent of physicians will still perform an unnecessary test or treatment when a patient is insistent.
- Physicians who report ordering tests and treatments that may be unnecessary most often cite reassuring themselves as their major motivation.

The *Choosing Wisely* grantees engaged physicians in multiple ways, including communication from their state medical societies, educational sessions, decision support and online tools. One of the more successful methods of engagement was the use of physician champions. Physicians, in particular, place a high degree of trust in their peers. Physician champions are individuals who believe strongly in the campaign and contribute to its success through education, advocacy, or developing and testing changes.

The Tennessee Medical Association's project was led by physician champion Ed Dismuke, MD. Dr. Dismuke enlisted the state's American College of Physicians (ACP) president, a past national ACP president (from Tennessee) and the University of Tennessee internal medicine residency program as partners, helping to ensure that internists and other physicians in the state would receive *Choosing Wisely* messages in multiple settings.

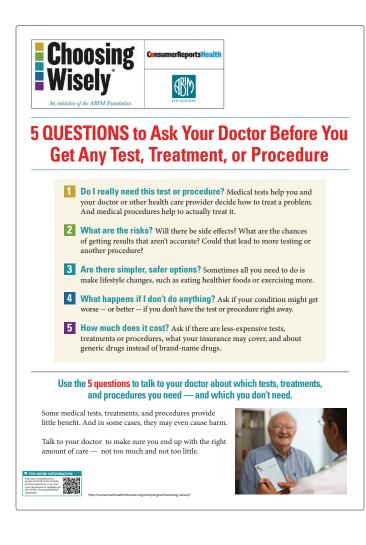


James Whitaker, 91, (right) listens to Dr. Jeffery S. Warren (middle) talk about prescriptions during a routine checkup Wednesday afternoon. A new campaign, Choosing Wisely, urges patients to ask their doctor five questions about what procedures are right for them.

"I would recommend organizations find the local champions that are already driving the campaign," Dismuke said. "There is a need for both organizational and individual champions. When trying to make a culture change, it often feels like you are working upstream and you can encounter a lot of resistance. But if you can get champions or a health system or another significant entity in the community to take on your cause, you can get change rolling. I have found working with highly motivated people and entities helps build buy-in. Then the culture change can build." HealthInsight Utah and the Washington State *Choosing Wisely* Task Force were two of a number of organizations that included physician champions on the boards responsible for their *Choosing Wisely* work. These doctors both set the course for the statewide *Choosing Wisely* projects and led change efforts in their own organizations. The OMA also recruited physician champions as a primary strategy, identifying potential champions based on contacts at educational conferences and other events, and following up with them to offer materials and assistance with implementation.

Engaging consumers

With consumers increasingly activated and involved in decisions about their health, it was essential for grantees to communicate directly with them about overuse. One critical component was messaging explaining that *Choosing Wisely* is about avoiding unneeded and potentially harmful tests and treatments, that they would not benefit from. This dovetailed with <u>research</u> conducted by Consumer Reports that showed patients are most attuned to messages about overuse that emphasize themes of safety and risk. The Consumer Reports research also supported the use of decision aids that include information about alternatives patients can embrace instead of an unnecessary test or treatment (e.g., exercise instead of an MRI for uncomplicated low back pain).



"...if you can get champions or a health system or another significant entity in the community to take on your cause, you can get change rolling."

Findings from a May 2014 Consumer Reports survey of over 3,000 consumers could also be helpful in future efforts to communicate with patients about overuse. The survey supported the perception of increased patient activation and found broad agreement among consumers that:

- Improved communication between patients and physicians leads to better clinical outcomes.
- Patients who actively participate in their health care including asking their physicians questions and discussing options with them – make better health decisions and receive better care.

The survey also showed that certain *Choosing Wisely* recommendations are more likely to prompt consumers to talk with their health care providers, including:

- Overuse of antibiotics in both adults and children leads to drug-resistant bacteria, which are more difficult to treat and put you at risk.
- Unnecessary tests, procedures and treatments can be dangerous to you.
- Babies born earlier than 39 weeks are more likely to suffer from multiple medical issues and to require intensive care.

Engaging employers

As major purchasers, and frequent communicators with their employees, employers can be a key ally in transforming care. Grantees used a number of techniques to work with employers, which future efforts could replicate. For example:

- Include an employer representative(s) on the committee guiding the *Choosing Wisely* effort;
- Survey major employers on how to effectively use *Choosing Wisely* recommendations;
- Meet with area business groups and other employer forums to spread messages;
- Recruit employer champions to help promote *Choosing Wisely* within their peer groups;
- Create standard messages and articles for use in employer communications.

Lessons Learned

When asked to offer advice for organizations seeking to advance *Choosing Wisely*, our grantees identified a number of strategies that contributed to their success. Four major themes emerged:

- Develop a task force with high level leadership from key stakeholder organizations. Task forces served many important functions for the grantees. These included providing information about their environment, disseminating information in their communities, building buy-in and commitment from key members and organizations, facilitating good decision-making, advancing culture change and implementing system changes that support *Choosing Wisely* recommendations.
- 2. Engage diverse stakeholders. Physicians, consumers, employers, health plans and many other stakeholders are deeply invested in health care and can all contribute to advancing *Choosing Wisely*. Many grantees found engaging diverse stakeholders important if not essential. Engaging individuals with significant power or influence within those organizations proved particularly productive. Many grantees emphasized the importance of face-to-face meetings in building trusting relationships. Effective listening, transparency, information sharing and following through on commitments were also identified as important to building trusting relationships.
- 3. Address barriers early and directly. Grantees stressed the importance of identifying and addressing barriers early in the process. This provided an effective means to start conversations, share information, build trust and facilitate change. Providers, consumers and other stakeholders are often resistant to accepting new information and to changing their actions. Identifying, understanding and addressing barriers can effectively reduce resistance and facilitate change.
- 4. Identify mutually beneficial outcomes. Effective partnerships bring value to all partners. Grantees benefited from learning about potential partners' needs and identifying ways that participation in *Choosing Wisely* would benefit them. Most individuals and organizations in health care struggle with competing priorities. Individuals and organizations that embraced *Choosing Wisely* most enthusiastically and with sustained effort derived clear benefit from their participation.

When grantees were asked what proved less effective in their work, their responses fell mainly into two categories: budget and resource allocation and strategy.

The items that grantees felt were less valuable uses of budget and resources included conducting awareness surveys – such as those assessing awareness of *Choosing Wisely* among providers, as they yielded low response rates – and creating patient education pieces instead of relying on those from Consumer Reports.



A stuffed up nose and headache are no fun.

But, antibiotics *rarely* work for a cold.

Find out more at: HealthInsight.org/choose

Choosing Wisely

An initiative of the ABIM Foundation

The strategy items that were not as effective as grantees had hoped related to how they chose which *Choosing Wisely* recommendations to focus on. The grantees felt they should have engaged advisory members and campaign champions earlier in helping to set recommendation priorities, and used Consumer Reports research about the *Choosing Wisely* recommendations that resonated most strongly with consumers.

Barriers and Challenges

Grantees stressed three barriers to progress:

- Competition of time and energy for providers (leading to survey, app and message-change fatigue) and for consumers (when they have a limited attention span upon hearing about health);
- Cultural issues, such as consumers' reluctance to question providers, providers' habit of ordering too many tests, and their shared preconception that more care, and more expensive care, is better; and,
- The constantly changing health care environment, which created real challenges in reaching consumers with messages about *Choosing Wisely*.

Additional barriers were:

- Lack of an "example repository" or case studies of ways offices and systems have incorporated *Choosing Wisely* into clinical practice (a number of such case studies have been produced since the grantees began their work and more are in development);
- Providers who reject the idea that they overuse tests and treatments;
- Financial concerns by hospitals and others that make them reluctant to embrace a campaign against overuse; and,
- Absence of all-claims payer databases.

Next Steps

To date, *Choosing Wisely* has focused explicitly on clinician-patient conversations and attitudinal change. This work is far from finished and will remain a focus for ABIM Foundation and Consumer Reports. However, in partnership with RWJF, the ABIM Foundation will pursue an additional objective: persuading providers of care (health systems, hospitals, medical groups) to implement *Choosing Wisely* recommendations and reduce the utilization of tests and treatments whose overuse is highlighted in the campaign.

Starting in May 2015, a new grant program will fund seven statewide and regional efforts over a three-year period to reduce the utilization of tests and treatments that have been shown to be ineffective, and even harmful. In addition to systems, hospitals and medical groups, the ABIM Foundation will continue to partner with regional health collaboratives, state medical associations and specialty societies.

The ABIM Foundation will continue to work with specialty societies to release new recommendations and support a learning collaborative to help interested entities implement and advance *Choosing Wisely*.

Society Program Grantees

American Academy of Hospice and Palliative Medicine American Academy of Ophthalmology American College of Physicians American Society of Clinical Pathology American Society of Echocardiography American Society of Nuclear Cardiology/ Massachusetts Medical Society Minnesota Medical Association Oregon Medical Association Society of Hospital Medicine Tennessee Medical Association Texas Medical Association Washington State Medical Association

Regional Collaborative Grantees

Better Health *Greater* Cleveland HealthInsight Utah Institute for Clinical Systems Improvement (ICSI)/ Minnesota Health Action Group Iowa Healthcare Collaborative Maine Quality Counts Massachusetts Health Quality Partners Michigan Health Information Alliance Washington Health Alliance Wisconsin Collaborative for Healthcare Quality

To support grantees in their work and allow them to learn from one another and other project partners, the ABIM Foundation created a *Choosing Wisely* learning network. Participants receive weekly resource emails, engage in an online discussion forum, and benefit from small-group coaching sessions, affinity groups, bi-monthly calls and webinars, and mentoring connections. Any organization that has a strategic plan and board support for their *Choosing Wisely* activities are invited to join the *Choosing Wisely* learning network. For more information, contact Kelly Rand at krand@abim.org.