Managed Care Matters

Missed Diagnoses and Misdiagnoses? New Tests Help Managed Care Identify Disease and Achieve Better Outcomes

Advanced diagnostic testing and evidenced-based decision making are among the most effective tools for reducing the human and economic costs associated with medical errors and increasing the quality of preventive care and early diagnosis. Two tests, Cardio CRP and ImmunoCAP, are now available to help address the missed diagnosis of cardiovascular disease and misdiagnosis of allergies, respectively.

Cardio CRP: A Beat Ahead of the Rest
The American Heart Association (AHA) estimates that 1.1 million Americans will suffer from a coronary attack this year, while the Centers for Disease Control and Prevention (CDC) projects that cardiovascular disease will cost the U.S healthcare system approximately $351 billion in 2003.

Cardio CRP (high-sensitivity C-reactive protein) is an inflammatory risk marker that helps to identify patients at risk of cardiovascular disease, even when they have normal or slightly elevated cholesterol levels. This is important, because it is estimated that approximately half of the 1.1 million Americans who have a heart attack each year have normal or just slightly elevated cholesterol levels.

Numerous clinical studies have shown Cardio CRP to be an excellent independent predictor of cardiovascular risk. Cardio CRP, in combination with the Total Cholesterol:HDL Cholesterol ratio, has been shown to be the best predictor of risk over any other single risk marker or combination of risk markers.

The Cardio CRP test can detect CRP levels as low as 0.175 mg/L, while the standard CRP test can only detect CRP levels equivalent to 3.0 mg/L or higher, therefore missing all but the highest risk individuals. The Cardio CRP test effectively predicts not only first and recurrent cardiovascular disease episodes, but also the incidence of diabetes.

In January, the AHA/CDC published the first-ever guidelines for the use of Cardio CRP testing for cardiovascular risk assessment to help healthcare providers more accurately assess a patient’s risk of cardiovascular disease based on both lipid and inflammatory markers.

ImmunoCAP: The Right Data Reveals the Right Diagnosis!
In recent studies, only 31% of patients who thought they were allergic were truly atopic and 65% of patients using prescription antihistamines proved not to be allergic. The reason—Upper Respiratory Disease (URD)—allergic rhinitis,

continued on page 2

Insure™ Your Safety: A Better Way to Screen
Each year in the U.S., more than 148,000 cases of colorectal cancer are diagnosed in both men and women. Clinical trials have shown that mortality rates from colorectal cancer, for people over 50, can be reduced by up to one-third with annual screenings. But currently, only 25% of 80 million Americans who undergo annual cancer screenings are being tested for colorectal cancer, compared to prostate (70%), cervical (72%) and breast (75%) cancer screenings.

Compliance and stringent collection requirements are among the reasons most people avoid this type of screening. Traditional guaiac-based fecal occult blood testing requirements include:
1) dietary restrictions prior to and during testing,
2) medication restrictions, 3) direct handling of stool, and 4) three day specimen collection process.

Quest Diagnostics recently entered into an agreement with Enterix to begin offering InSure™, a new fecal immunochemical test for globin with improved patient handling requirements, sensitivity (87%) and specificity (97%).

InSure™ has many advantages compared to traditional fecal occult blood tests:
- The patient has no dietary restrictions
- The patient has no medication restrictions
- Collection is reduced to one or two days, in contrast to three days for traditional methods
- The patient does not directly handle stool specimens
- InSure™ detects blood from the lower GI tract. Guaiac-based fecal occult blood tests (FOBTs) are not lower GI specific
- Non-reactivity with non-human hemoglobin, vitamins, drugs or peroxidase from food sources

The InSure™ test has been recognized as a new HEDIS 2004 Indicator, in addition to offering a positive NPV of $3.7 million or $37 per patient in a 100,000 patient cohort sample.

To receive more information about the various compliance and ROI benefits that the InSure™ test offers, please contact your local Managed Care Account Executive.
Greg Richard started his career in managed care 15 years ago, selling managed care plans to large employers and building strong sales teams for Aetna. Greg’s early experiences in managed care, combined with an extensive track record in biotechnology and 6 years with Quest Diagnostics, give him a unique perspective and ability to help the organization better meet our customer’s needs. Some of his chief objectives include differentiating Quest Diagnostics from its competitors in the areas of quality, service and value.

“In order to accomplish this we need solid alignment and communication between business unit sales and operations teams. We also need to strengthen our relationships with plan medical directors and facilitate the managed care organizations’ review of new technologies to highlight the impact on patients, physicians and payors.”

“This position brings my early managed care experience full circle, at a very exciting time, to help Quest Diagnostics to work more closely with our managed care customers and together stay at the forefront of patient access, satisfaction, preventive care and effective treatment.”

4 Koenig W. C-reactive protein and cardiovascular risk: Has the time come for screening the general population? Clinical Chemistry 2001; 47(1) 9-10.
5 Pradhan AD, et al. C-reactive protein, interleukin 6, and risk of developing type 2 diabetes mellitus. JAMA 2001; Vol. 286, No. 3.