

VA Health Services Research & Development Service



SGIM 2021 ANNUAL MEETING

The SGIM 2021 Annual Meeting will be virtual and includes a full slate of scheduled activities including invited plenary speakers, oral abstracts, clinical vignettes, and award recipients. Below are sessions with a VA HSR&D-affiliation. (*Note: Not all VA-connected sessions or presenters may be included.*) For a complete list of sessions, please visit the [SGIM 2021 meeting website](#).

VA Special Series Workshops

Tuesday, April 20

2:00PM–3:30PM

Addressing Inequity Through Mentee-Focused Mentorship

Systemic racism in the sciences and cultural biases embedded within institutional practices have resulted in, among other things, lower rates of retention, fewer promotions, and lower salaries among scientists of color than their white counterparts. To re-focus attention on the importance of the mentee in mentorship, this workshop will teach about a specific blend of mentorship and sponsorship called “mentee-focused mentorship.”

Session Leader: Christine Hartmann, PhD

Wednesday, April 21

2:00PM–3:30PM

Developing and Evaluating Communication Strategies to Increase Firearm Safety Practices Among Veterans

This session presents multifaceted communication strategies that can shift individual behaviors and help build social environments that reduce access to firearms during periods of distress among Veterans.

Session Leader: Steve Dobscha, MD

Friday, April 23

2:00PM–3:30PM

VA's Transformation to a Whole Health System of Care: Implementation and Evaluation of a Whole Person, Patient-Centered Approach to Care

The VA, like other healthcare systems, values patient-centered care—care aligned with what matters most to the individual. This session discusses how VA's implementation of the Whole Health System of Care transforms this value into practice.

Session Leader: Barbara Bokhour, PhD

Oral Abstracts

Tuesday, April 20

12:20PM–1:20PM

Lipkin Finalist: Disparities in Virtual Cardiology Visits Among Veterans Health Administration Patients During the COVID-19 Pandemic

VA has rapidly expanded virtual care (defined as care delivered by video and phone) in response to the COVID-19 pandemic, raising concerns about technology access disparities (i.e. the digital divide). Although virtual care was well-established in primary care and mental health care prior to the pandemic, it was rarer in most subspecialties. We describe changes in VA's use of virtual cardiology care during the COVID-19 pandemic and associated patient-level characteristics, including those that could be used to target patients in need of support to overcome barriers to accessing virtual care.

VA Presenter: Rebecca Lauren Tisdale, MD, MPA

2:00PM–2:15PM

Top Oral Abstracts in Geriatrics: A Randomized Controlled Trial of a Behavioral Economic Intervention to Reduce Use of Low-Value Services Among Older Adults

The Choosing Wisely® campaign recommends avoidance of tests and treatments that do not improve outcomes and can lead to harms. For example, Choosing Wisely recommends that older patients avoid use of hypoglycemic medications to achieve a hemoglobin A1c < 7.5%, sedative-hypnotic medications to treat insomnia or anxiety, and prostate-specific antigen tests to screen for prostate cancer. Yet, use of such low-value care remains common among older patients, and it is unclear how to best engage them and their providers to decrease use of low-value services.

VA Presenter: Jeff Kullgren, MD, MPH

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U.S. Department of Veterans Affairs

Veterans Health Administration
Health Services Research & Development Service

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Tuesday, April 20

3:30PM–4:30PM

Vitamin D Levels and Corresponding Risk for COVID-19-Related Hospitalization and Mortality: Results From a National Cohort of Department of Veterans Affairs Patients

Small studies have recently reported that vitamin D deficiency is associated with worse clinical outcomes among patients infected with coronavirus disease 2019 (COVID-19). However, the precise relationship between vitamin D level and patient outcomes remains controversial. This study sought to evaluate the association between vitamin D levels and risk for COVID-19-related clinical outcomes in a large national cohort of patients using VA care.

VA Presenter: Karen Seal, MD, MPH

Wednesday, April 21

2:00PM–2:15PM

The Association Between Physician Group Participation in Bundled Payments and Changes in Episode Outcomes

Bundled payments have garnered widespread participation from physician group practices (PGPs) and hospitals. However, while hospital participation has been well-studied and shown to achieve savings with stable quality, there are no peer-reviewed studies assessing PGP participation. This knowledge gap is notable given that PGP participation in other payment models, such as accountable care organizations, has been associated with stronger effects than hospital participation. Therefore, we compared PGP and hospital BPCI participation and their relationship with episode outcomes.

VA Presenter: Amol Navathe, MD, PhD

Leveraging Behavioral Science Insights to Improve Patient Engagement in Diabetes Prevention: A Screening Factorial Design Experiment

Prevention of type 2 diabetes mellitus is a major public health priority. Little is known about how to best leverage health communications to increase uptake of evidence-based preventive strategies such as participation in a Diabetes Prevention Program, metformin use, or individually-directed weight loss and physical activity. Insights from behavioral economics and health psychology hold particular promise to guide effective messaging strategies.

VA Presenter: Jeff Kullgren, MD, MPH

3:30PM–4:30PM

Improving Racial Equity in the Veterans Health Administration Care Assessment Needs Risk Score

To predict risk for one-year mortality and improve resource allocation to high-risk Veterans, VA computes a weekly Care Assessment Needs (CAN) score for over 5 million Veterans. Motivated by evidence of unfair predictive algorithms in other settings, we examined the CAN score for racial unfairness.

VA Presenter: Amol Navathe, MD, PhD

Electronic Population-based Depression Detection and Management through Universal Screening in the Veterans Health Administration

In 2016, the United States Preventive Services Task Force newly recommended universal screening for depression, the leading cause of disability globally, with the expectation that screening would be linked to appropriate treatment. Few studies, however, assess the population-based trajectory from a positive depression screen to receipt of depression follow-up and treatment. This study examined adherence to guidelines for follow-up and treatment among VA primary care patients who had new, positive screens for depression.

VA Presenter: Lucinda Leung, MD, MPH, PhD

The Use and Cost of Low-Value Services Delivered to Veterans through Veterans Affairs Medical Centers and VA Community Care Programs

Low-value care is harmful to patients and a major driver of wasteful healthcare spending. Within VA, prior studies have focused on singular low-value services delivered at Veterans Affairs Medical Centers (VAMCs). Our objective was to characterize the use and cost of a diverse set of low-value services received by Veterans at VAMCs or paid for by VA through VA Community Care programs.

VA Presenter: Thomas Radomski, MD, MS

Low Value Pre-Operative Testing Delivered to Veterans through Veterans Affairs Medical Centers and VA Community Care Programs

Low-value preoperative testing accounts for a large proportion of unnecessary healthcare use among Medicare and private insurance beneficiaries. However, its use within VA is unknown. Our objective was to determine the overall use and costs of low-value preoperative tests conducted for VA beneficiaries, both at Veterans Affairs Medical Centers and in non-VA settings through VA Community Care programs.

VA Presenter: Dylan Yang, MD

Friday, April 23

12:20PM–1:20PM

A Clustered Randomized Trial of Individual Audit Feedback and Peer Comparison Feedback on Opioid Prescribing

Prescribing opioids, particularly the number of pills, is associated with greater likelihood of future patient opioid dependence. Nudges targeted to clinicians are a low-cost strategy that could reduce unnecessary opioid prescribing. In particular, clinician-focused peer comparison feedback has been effective in influencing prescribing for other medications. However, peer comparison feedback has not been well-tested for opioid prescribing, alone or compared against other feedback approaches such as individual audit feedback.

VA Presenter: Amol Navathe, MD, PhD

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3:30PM–4:30PM

Facilitators and Barriers to the Implementation of Team-Based, Quality Improvement Coaching: a Qualitative Evidence Synthesis

Health care teams benefit from guidance on how to achieve quality goals. Coaching from a trained expert in quality improvement (QI) enables the adoption of evidence-based interventions into clinical practice by building and catalyzing organizational capacity for sustained improvement processes. Yet, we know little about how to implement QI coaching. We examined the facilitators and barriers to implementing QI coaching in a large healthcare system.

VA Presenter: Karen Goldstein, MD, MSPH

Special Interest Groups

Tuesday, April 20

9:50AM–10:50AM

Obesity Treatment and Prevention in Primary Care

Since 2004, this interest group has created a setting for SGIM participants to network with colleagues who share an interest in obesity prevention and treatment; report existing projects and/or proposals related to obesity and overweight; and exchange ideas and resources for program development and evaluation.

Session Coordinator: Melanie Jay, MD, MS

Wednesday, April 21

9:50AM–10:50AM

VA Academic Patient Aligned Care Teams

VA Medical Centers have implemented Patient Aligned Care Teams (PACTs), within primary care nationwide. This model, similar to the patient centered medical home, includes assignment of providers and teamlet staff to provide continuous, longitudinal care to a panel of patients. Subsequent to this implementation, it was evident that it was essential to integrate health professional trainees fully into this model because VA is the largest training site for healthcare professionals nationwide. These PACTs that include trainees are called Academic PACTs. Those interested in Patient Centered Medical Homes as well as trainees in Primary Care at non-VA sites are encouraged to join and share their experiences.

Session Coordinator: Rebecca Lesto Shunk, MD

6:15PM–7:15PM

Community Based Participatory Research

Individuals interested in the spectrum of community engaged research. Format will begin with introductions and discussion of areas of interest. Attendees will have opportunities to get feedback on ideas for projects at various stages of development.

Session Coordinator: Jeff Whittle, MD, MPH

Thursday, April 22

9:50AM–10:50AM

Pain Management

The Pain Management Interest Group is a network of general internists who have educational, research, clinical and policy interests in pain management that meets annually at the SGIM national meeting.areas of interest.

Session Coordinator: William Becker, MD