

## Choosing Wisely: Next Steps in Improving Healthcare Value

### Manuscript Submission Structure (contact us at [CWNS@hospitalmedicine.org](mailto:CWNS@hospitalmedicine.org))

#### *Choosing Wisely: Next Steps in Improving Healthcare Value*

- Choosing Wisely®: Next Steps in Improving Healthcare Value articles are focused pieces describing initiatives relating to healthcare value.
- The article should include “Improving Healthcare Value” as part of the title (ie, Improving Healthcare Value: Hospitalist Value in an ACO World)
- General Guidance: 1500 or fewer words; up to 1 table or figure; 15 or fewer references
- Priority areas for the series include commentaries on value of care with emphasis on novel or redesigned healthcare delivery or payment models as well as programs focused on improving population health. In general, manuscripts pertaining to more focused value initiatives (eg, single site quality improvement projects) are better suited for other *Journal of Hospital Medicine* article formats.

#### *Choosing Wisely: Next Steps in Improving Healthcare Value, Policy in Clinical Practice*

Submissions should follow this format:

- Policy in Clinical Practice articles will use common clinical scenarios to illuminate health policies most germane to hospital medicine practitioners and present applications of the policies as they relate to value at the level of patient-provider interactions.
- The article should include “Policy in Clinical Practice” as part of the title (ie, Policy in Clinical Practice: Medicare Advantage and Observation Stays)
- General Guidance: 1500 or fewer words; up to 1 table or figure; 15 or fewer references; and include the specified subheadings (clinical scenario, terminology, background and history, policy in clinical practice, commentary and recommendations, what should I tell my patient, conclusions)
- Clinical Scenario: Authors should start by providing a frequently encountered scenario demonstrating a policy, regulation, or piece of legislation in action (preference will be given to scenarios with a directly correlating to healthcare value).
- Terminology and Acronyms: Policy terminology and acronyms can be daunting. Authors are encouraged to provide a list of key policy terms used in the manuscript accompanied by simple, straightforward definitions. Terms should be placed in a table.
- Background and History: Submissions should include information on context, historical background and rationale for why a particular policy was established, including what issue the regulation or legislation was designed to solve or improve in healthcare value.
- Policy in Clinical Practice: Authors should describe ‘Pros and Cons’ of how the policy impacts patients and clinicians, and may consider including effects on cost, reimbursement, healthcare systems, quality and value (all may not be applicable).
- Commentary and Recommendations: Focused suggestions on areas the policy could be modified, with an emphasis on potential changes that would enhance value and efficiency or reduce provider burden and burnout should be included.
- What Should I Tell My Patient? Submissions should include clear recommendations for patient communication when applicable.
- Conclusions: A brief summary linking policy recommendations to the opening clinical scenario should conclude the submission.