



Oregon Health Care Quality Corporation Presentation to Oregon Health Policy Board

May 10, 2011

Agenda

- Overview of Quality Corp –Who are we ?
- How do we get our information ?
- Key Findings: 2011 Statewide Report
- Key Findings: DMAP FFS
- Future Directions and Opportunities

Quality Corp Mission



To measure and improve the quality of health care in Oregon through community-wide collaboration.

Quality Corp Organization

- Local, neutral, independent, not for profit
- 27 Member Board – Health Policy, Purchasers, Consumers, Providers, Health Plans
- 6 working subcommittees with over 100 volunteers
- Leadership in Quality Improvement through collaboration and relevant information

Funding Organizations

- CareOregon
- Medicaid Fee-For-Service (DMAP)
- Health Net of Oregon
- FamilyCare Inc.
- Kaiser Permanente
- LifeWise Health Plan of Oregon
- ODS Health Plans
- PacificSource Health Plans
- Providence Health Plans
- Regence BlueCross BlueShield
- UnitedHealthcare

- Robert Wood Johnson Foundation

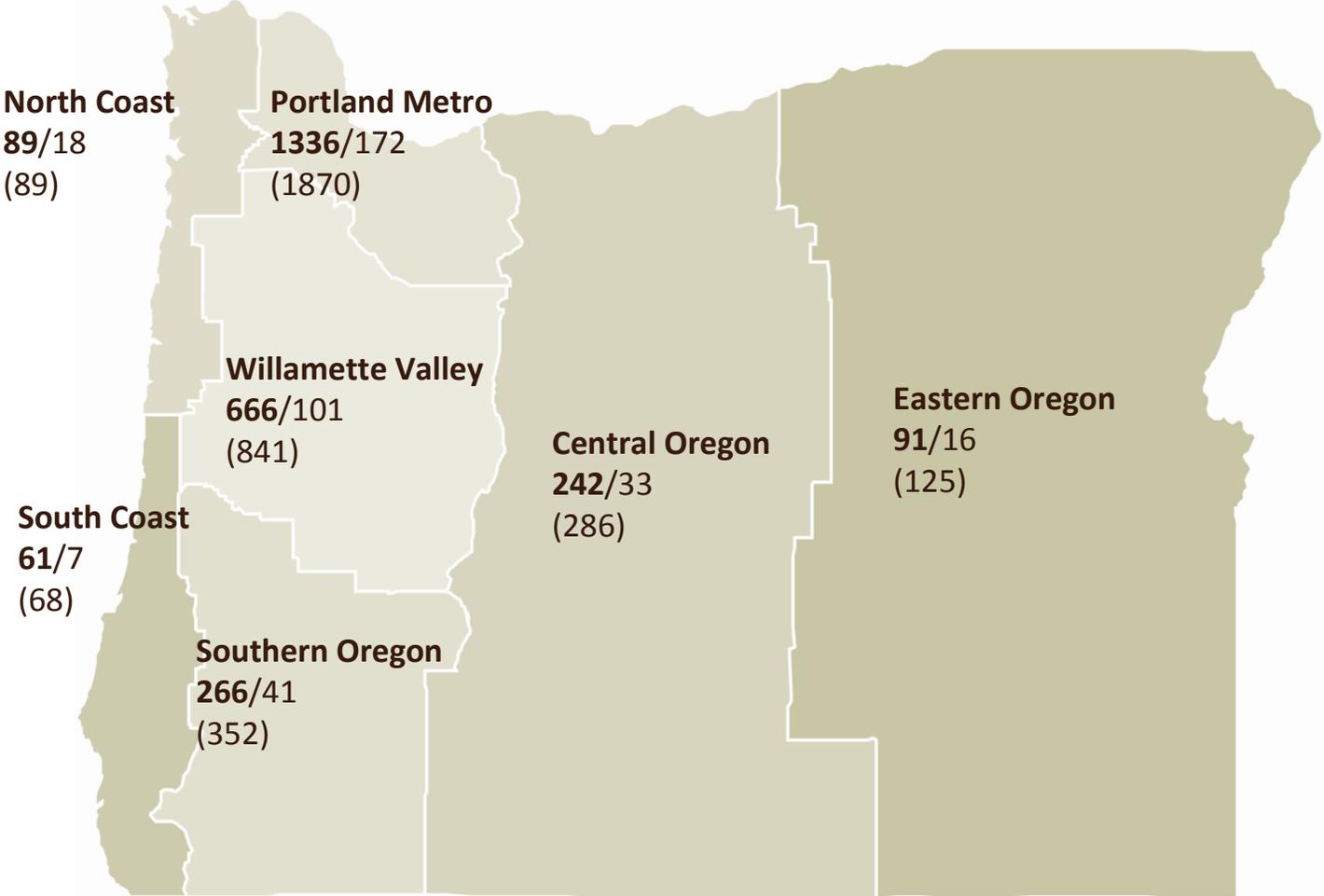


Information for a Healthy Oregon

Quality Corp Provider Directory- Data source

- Quality Corp developed and maintains the most comprehensive directory of primary care providers in the state.
- The provider directory contains information on 2,751 primary care providers currently practicing in Oregon at 388 adult primary care and pediatric clinics.
- Quality Corp's provider directory represents approximately 75% of all primary care practitioners actively practicing in Oregon
- Each provider is mapped to a clinic, which is defined as a physical doorway where patients receive care. The clinics are then mapped to medical groups.
- The provider directory contains the mailing address, phone, email address and contact at each medical group.

Geographic Distribution of Clinics and Primary Care Practitioners Included in *Partner for Quality Care*



Primary Care Practitioners/Clinics Included in Practitioner Directory
(Estimated Total Primary Care Practitioners)

Claims Data Summary

- 3.2 million unique patients captured in claims — demonstrating the value of aggregating data
- Almost half a million unique providers rendering services
- 188 million medical claims and 121 million pharmacy claims
- All providers in the directory receive quality reports with patient-level information for follow-up

Information for a Healthy Oregon

STATEWIDE REPORT ON HEALTH CARE QUALITY

FEBRUARY 2011



Partner for
Quality Care



Information for a Healthy Oregon

A project of the Oregon Health Care Quality Corporation

2011 Statewide Report

- Medical Groups
- State agencies
- Consumer groups
- Employer groups
- Public Policy Makers
- Participating health plans
- Other funders

Also available at:

www.PartnerForQualityCare.org

2011: 10 Data Suppliers & 20 Primary Care Measures

Women's Preventive Care

- Breast Cancer Screening
- Cervical Cancer Screening
- Chlamydia Screening

Diabetes Care

- HbA1c Test
- LDL-C Test
- Kidney Screening
- Eye Exam

Other Chronic Care

- Heart Disease Cholesterol
- Asthma Medication Mgmt
- Antidepressant Medication Mgmt (2)

NEW:

Utilization

- Low Back Pain Imaging
- Appropriate Strep Tests
- Generic Drug Fills (4)

Pediatric

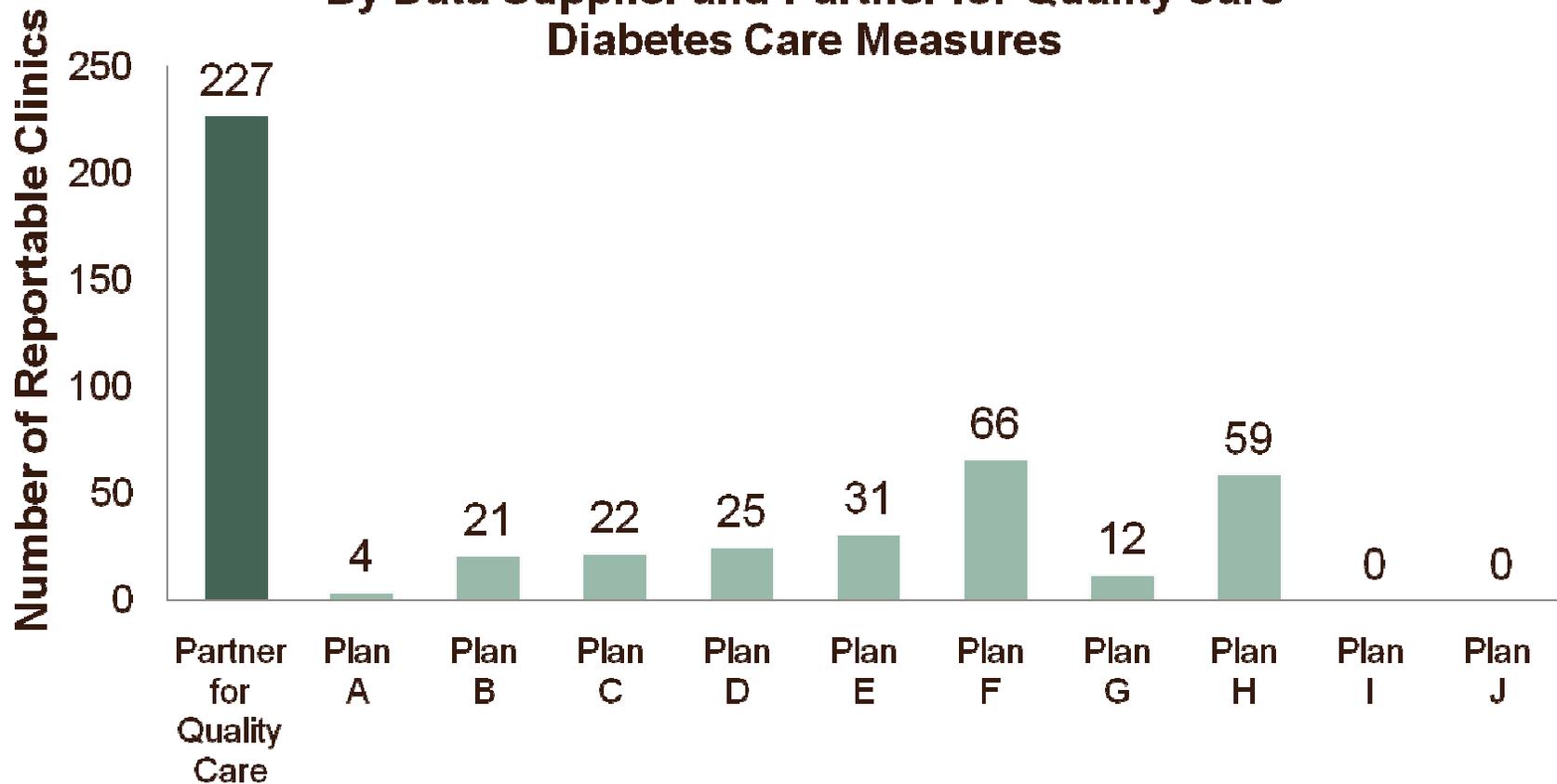
- Well-Child Visits 0-15 mths (2)
- Well-Child Visits 3-6 yrs

The Benefits of Q Corp Collaboration

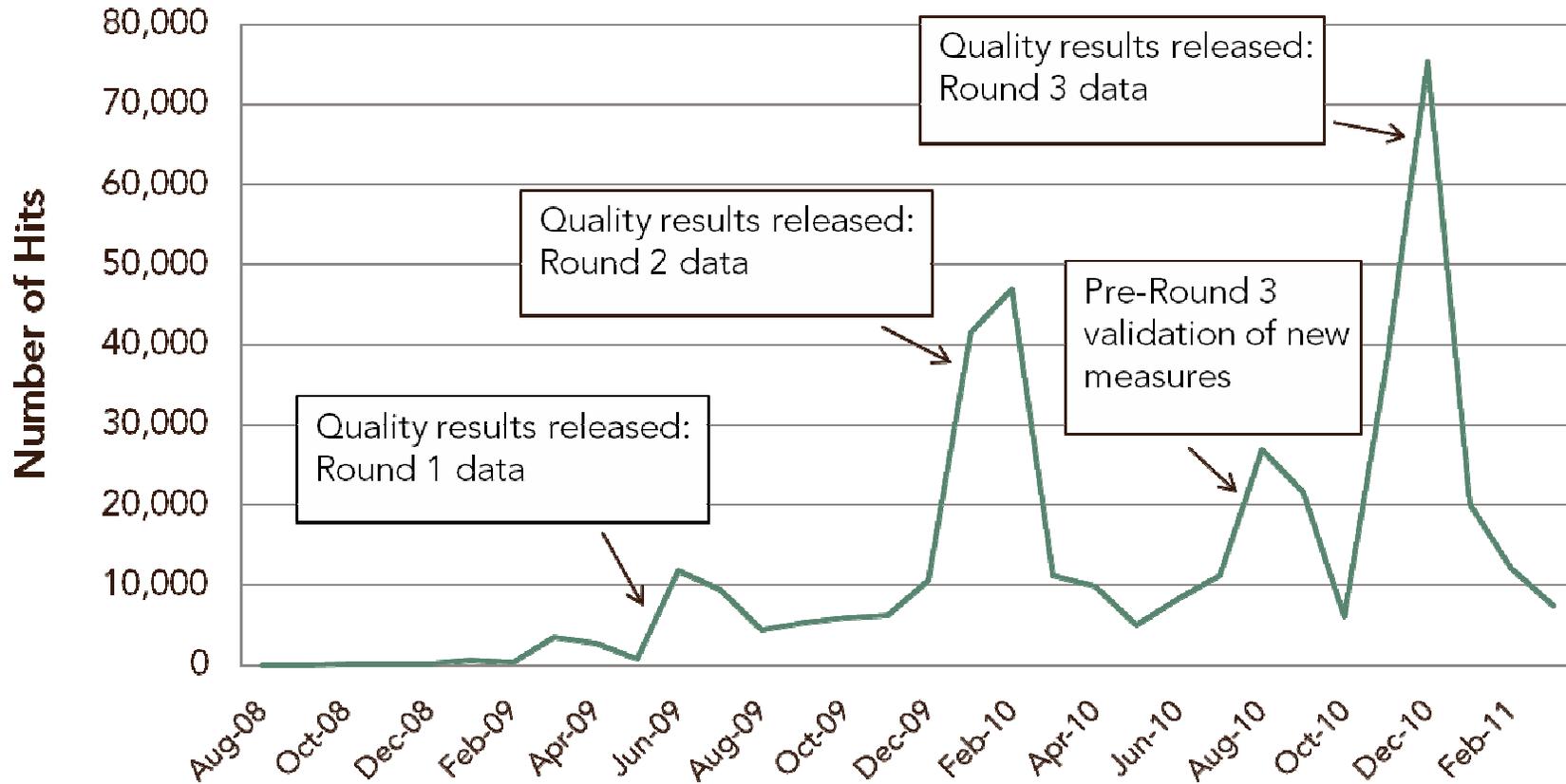
- The majority of primary care clinics (80 percent) included in *Partner for Quality Care* reports have contracts with 8-10 payers.
- Payers participating in *Partner for Quality Care* are also able to benchmark clinic and medical group performance against Oregon and national benchmarks.

Better Together

Comparison of Number of Reportable Clinics*
By Data Supplier and Partner for Quality Care
Diabetes Care Measures

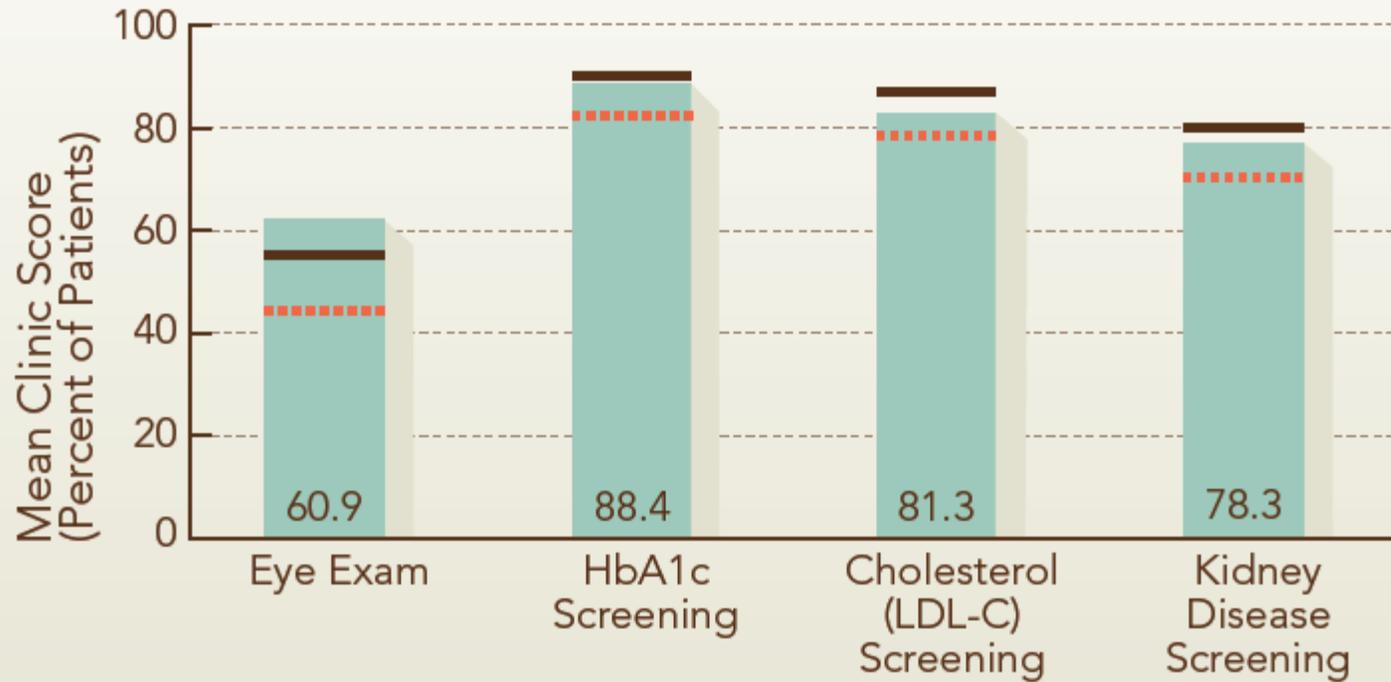


Partner for Quality Care Provider Secure Portal Page Hits*



*Page hits count the number of requests for a resource from the *Partner for Quality Care* secure practitioner web portal. Each report generated (for example, reports for each practitioner at a clinic site) contributes toward the total number of page hits.

Diabetes Care



■ Measurement year Apr 2009–Mar 2010; Source data Apr 2008–Mar 2010

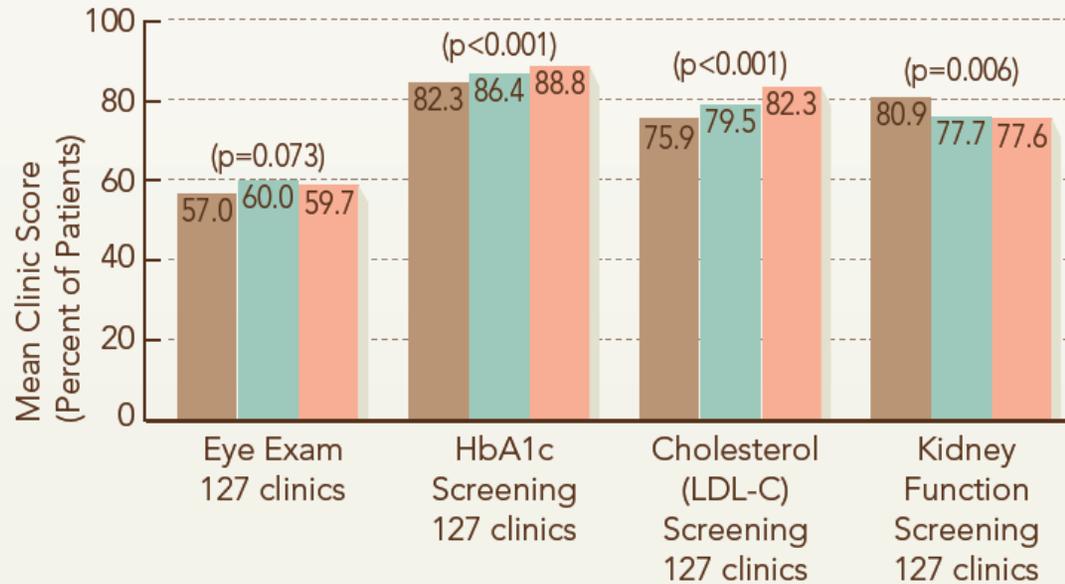
▬ 2009 HEDIS national mean

▬ 2009 HEDIS national 90th percentile

Results for publicly-reported clinics with at least 25 patients in the measure

Three-year trends across eight common health plans

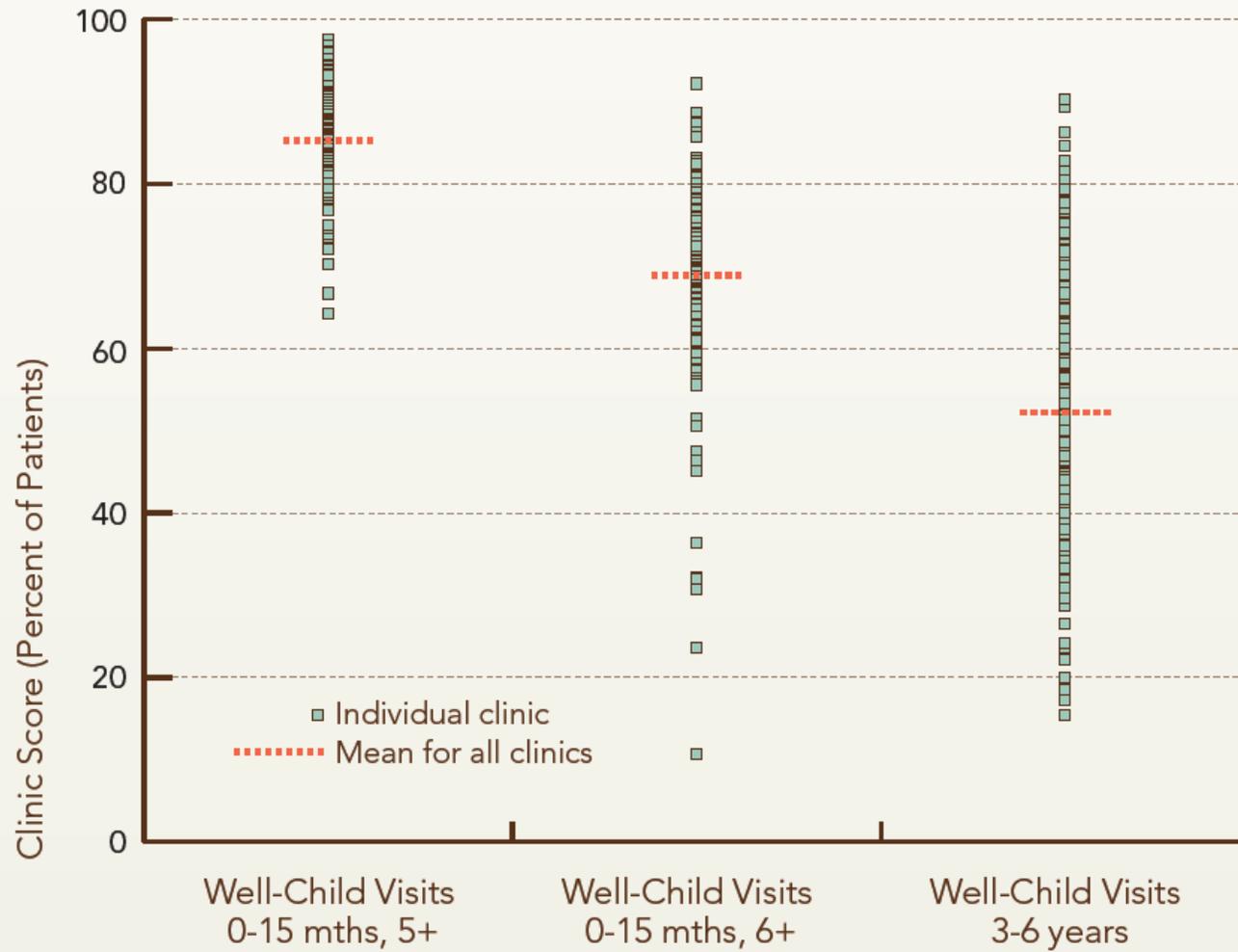
Diabetes Care



■ Round 1 based on the measurement year Jan 1, 2007-Dec 31, 2007
■ Round 2 based on the measurement year Apr 1, 2008-Mar 31, 2009
■ Round 3 based on the measurement year Apr 1, 2009-Mar 31, 2010

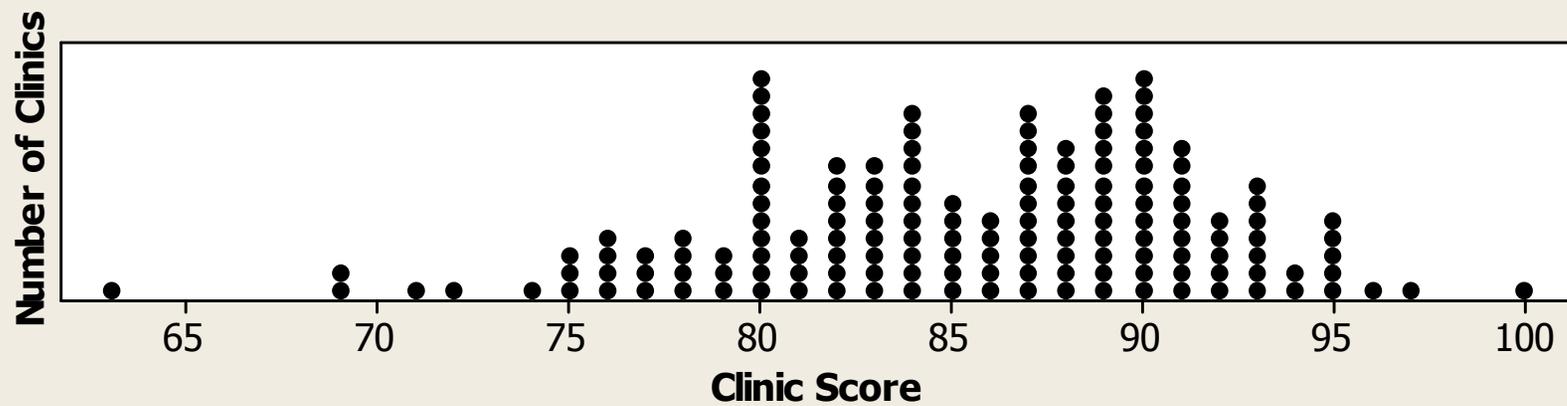
Means and linear trend analysis based on clinics with at least 25 patients in the measure denominator during Rounds 1-3, and publicly-reported in Round 3.

Variation in Pediatric Care Performance By Clinics



Distribution of Clinic* Scores

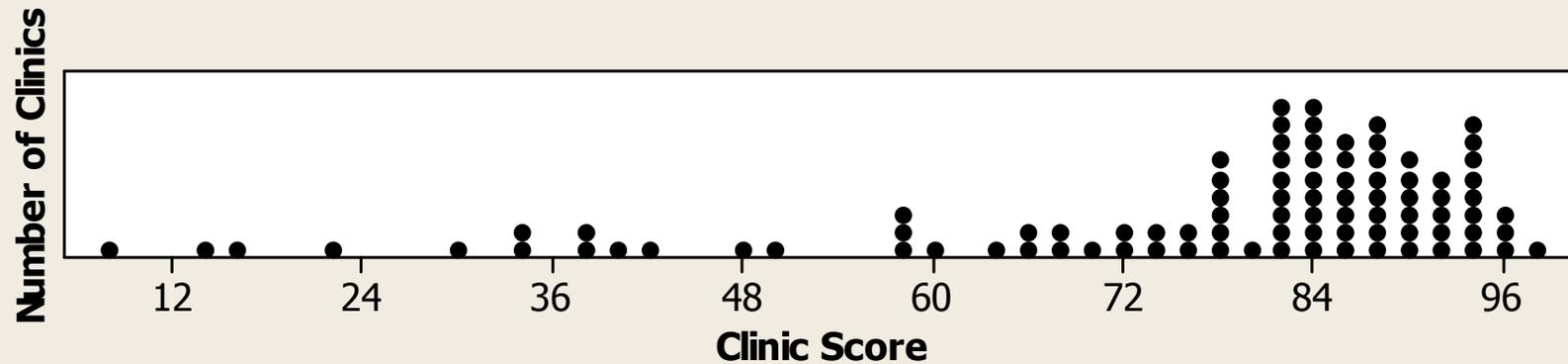
Appropriate Low Back Pain Imaging



*Clinics with four or more primary care providers and at least 25 patients in the measure

Distribution of Clinic* Scores

Appropriate Strep Tests for Children with Pharyngitis



*Clinics with four or more primary care providers and at least 25 patients in the measure

Data Conclusions from Statewide Report

- High-quality health care is happening in Oregon
- Important opportunities for improvement
- Care varies within Oregon's delivery system
- Data is more robust when stakeholders work together

Caveats:

- Claims data has limitations

Oregon Data Supplier Specific Conclusions

- Performance varies by supplier, especially for the women's preventive care and pediatric care measures.
- Performance is especially high across suppliers for diabetic eye exams compared to national benchmarks.
- Performance is especially low across measures for well-child visits for children ages 3-6 years.

DMAP FFS –Draft Observations

- Quality Corp is able to review statewide data and look at different data elements
- Data runs for all data suppliers including participating Medicaid Managed Care Plans and FFS
- Overall database includes approximately 60 % of Medicaid Population
- DMAP FFS population is 5.7 % of total patients included in reports

DMAP FFS –Draft Observations

Area of Care / Measure	DMAP	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F	Plan G	Plan H	Plan I	Oregon Aggregate Rate	National HEDIS Mean
Women's Preventive Care												
Breast Cancer Screenings	49.7	57.4	71.6	68.1	69.5	73.3	81.6	71	68.3	68.2	74.1	67.1
Cervical Cancer Screenings	37.3	63.7	70.7	74.5	74.7	75.4	84.7	74.1	73.5	76.3	74.5	74.6
Chlamydia Screenings	39.3	53	30.9	32.4	35.4	38.9	69.9	35.5	34.3	38.5	39.5	39.5
Diabetes Care												
Eye Exams	53.3	45.5	56	45.1	55.6	72.8	55.8	54.2	56.3	45.3	60.9	42.6
HbA1c Screenings	65.1	78.8	84.2	85.7	89.4	90.9	93.5	86.8	87.2	85.3	88.4	83.3
LDL-C Screenings	56.8	67.9	77.5	78.8	82.9	85.9	89.1	78	80.3	81.3	81.3	78.6
Kidney Disease Screenings	56.4	74	76.6	74.3	77.7	80.6	92.4	77.2	70.6	65.7	78.3	69.9
Other Chronic Disease Care												
Asthma Medication Mgmt	84.4	85.8	90.9	90.7	89.2	89.5	96.3	91.7	84.6	76.7	90.1	92.8
Heart Disease Cholesterol Test	62.1	66.6	86.2	86	85.1	89.1	80.3	79.8	87.5	83.5	82.9	80.2
Antidepression Medication- 12 wks	56.7	62.6	68.5	62	61	64.3	75.7	62.2	63.4	65.5	65.9	63.2
Antidepression Medication- 6 mths	43.5	54.8	50.7	42.3	42.7	47.5	61.9	44.2	45.7	54	49	46.4
Utilization												
Appropriate Strep Tests	63.1	65.8	68.3	75.2	77	76.1	86.4	74.1	73.9	84.2	76.8	75.5
Appropriate Low Back Pain Imaging	81.9	84.4	91	85.6	84	85.5	83.4	85.6	89.4	83.6	85.2	72.7
Generic Drug Prescriptions-- NSAIDs	91.3	97.4	85.3	84.4	84.2	87.5	--	87.3	83.2	85.8	87.7	n/a
Generic Drug Prescriptions-- PPIs	80.7	94.2	73.7	52.4	62.8	83.1	--	79.5	61.8	50.1	78.2	n/a
Generic Drug Prescriptions-- SSRIs	63.5	73.3	60	52.9	63	71.9	--	70.7	64.1	66	66.7	n/a
Generic Drug Prescriptions-- Statins	65.1	82.4	61.5	58.3	68.2	72.1	--	70	59.8	68.5	70.4	n/a

DMAP FFS –Draft Observations

Area of Care / Measure	Commercial Aggregate Rate	Medicaid Aggregate Rate	Medicare Advantage Aggregate Rate
Women's Preventive Care			
Breast Cancer Screenings	73.4	52.6	81.0
Cervical Cancer Screenings	77.7	51.0	--
Chlamydia Screenings	45.5	48.6	--
Diabetes Care			
Eye Exams	54.3	51.7	65.1
HbA1c Screenings	88.9	72.2	91.1
LDL-C Screenings	82.4	62.8	87.0
Kidney Disease Screenings	81.2	64.9	86.6
Other Chronic Disease Care			
Asthma Medication Mgmt	92.0	85.1	--
Heart Disease Cholesterol Test	79.5	65.3	87.6
Antidepression Medication Mgmt- Acute Phase	67.7	60.3	75.4
Antidepression Medication Mgmt- Cont Phase	51.4	45.8	62.8
Utilization			
Appropriate Strep Tests for Children with Pharyngitis	76.9	64.6	--
Appropriate Low Back Pain Imaging	85.7	82.8	--
Generic Prescription Fills -- NSAIDs	86.9	95.3	82.1
Generic Prescription Fills -- PPIs	73.7	89.1	80.1
Generic Prescription Fills -- SSRIs	66.1	69.1	72.4
Generic Prescription Fills -- Statins	67.3	75.7	73.2

Not shown: Three additional pediatric measures

DMAP FFS –Draft Observations

- DMAP FFS rates for diabetes care, other chronic disease care and pediatric care are generally below rates for other data suppliers. Further analysis demonstrates that rates for these measures are lower for Oregon Medicaid beneficiaries in general when compared to commercial.
- DMAP FFS and contracted providers score higher than many of the other data suppliers when it comes to filled generic drug prescriptions.
- For Chlamydia screening rates, DMAP FFS and contracted providers score higher than many other data suppliers. Further analysis shows that Medicaid beneficiaries have higher Chlamydia screening rates than commercial health plan clients.
- DMAP FFS and contracted providers have far lower rates of cervical cancer screenings than other data suppliers; the DMAP rate is significantly lower than the Oregon aggregate rate by 37 percent.

DMAP FFS - Draft Observations

- Primary care providers have reported the importance and usefulness of including Medicaid data in quality reports.
- Variations in care by race and ethnicity can be identified at the medical group and practice levels.

Looking Ahead

- DMAP Draft report feedback and next steps
- What information in the report is new and useful?
- What additional Q Corp information would be most useful?
- Other suggestions?

Looking Ahead

- Continuing reports on established quality metrics
- Reducing avoidable hospital readmissions for CHF and COPD
- Acute Low Back Pain Project (State, OHLC, OCHCP, Quality Corp, etc.)
- Patient Experience
- Improving quality and reducing cost to increase value

Looking Ahead

- Expanded new metrics to include: cost of care information, utilization reports, state baseline reports, new information for CCOs
- APAC implementation / transition
- Pilot project merging claims data and EMR data
- Evaluation of Oregon pilot projects (OHLC medical homes, imaging PA, etc.)

Thank You

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