

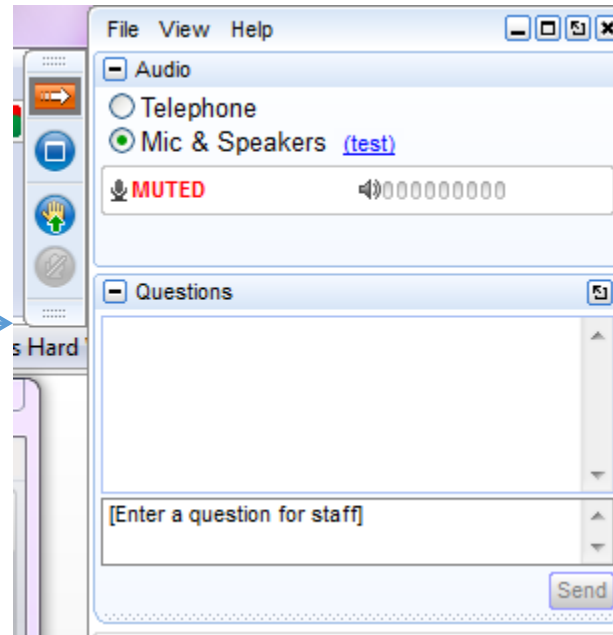


# **Statewide Report: Overview of Key Themes**

**October 29, 2015**

# We Want To Hear From You!

Type questions into the Questions Pane at any time during this presentation



# Panelists



**Mylia Christensen**  
**Executive Director**



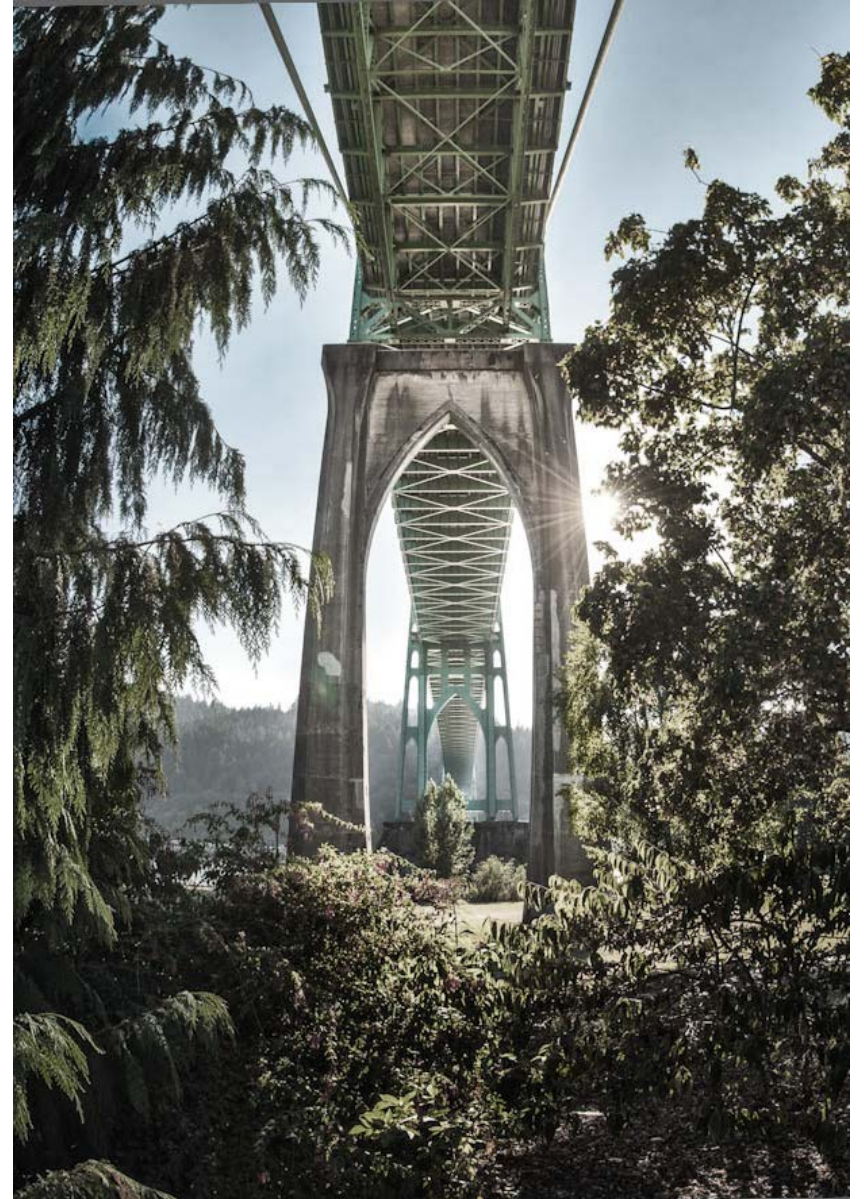
**Doug Rupp**  
**Senior Health Care**  
**Analyst**



**Cindi McElhaney**  
**Senior Health Care**  
**Analyst**

# About Us

- Independent, nonprofit organization
- Dedicated to improving the quality and affordability of health care in Oregon
- Celebrating our 15<sup>th</sup> anniversary





**Policymakers**

**Content  
Experts & QI  
Professionals**

**Hospitals**

**Health Plans**

**Consumers**

OREGON HEALTH CARE  
**QUALITY**  
CORPORATION

**Employers**

**Delivery  
System  
Executives &  
Managers**

**Providers**

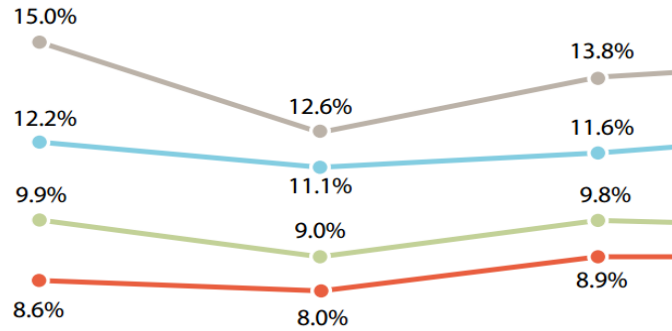
# National Network of Collaboratives

*“Regional Healthcare Improvement Collaboratives [RHICs] represent the best avenue to scale important improvements in health care. As a neutral party, they can bring multiple stakeholders to the table and develop solutions that reflect and value a multitude of interests.”*

-Mylia Christensen, Executive Director

- Access to National policy updates & priorities
- Connection to other state & regional leaders
- 35 members and counting





# Produce Neutral Information

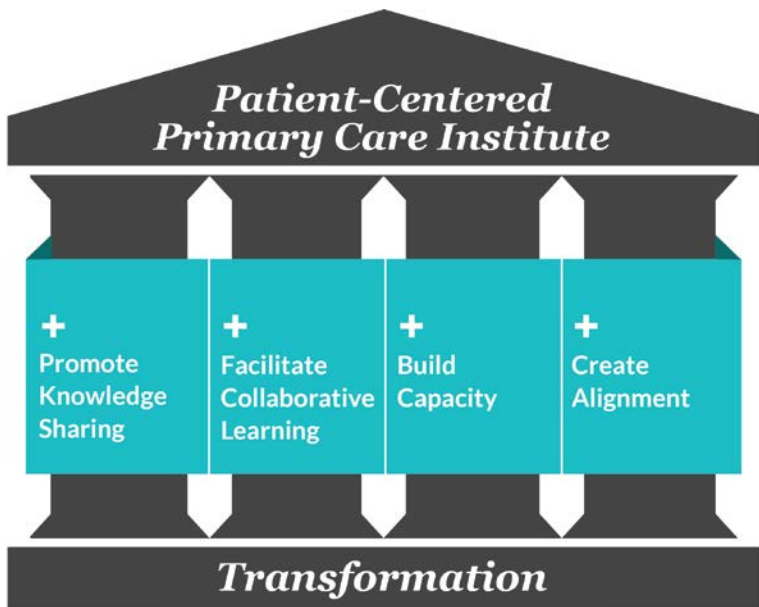
Created and operate the most validated and utilized claims database in the state

Report quality, utilization and cost metrics to providers, health plans and the public

Pioneering analytics and reporting to help providers and health systems improve cost of care

Custom reporting to stakeholders working on alternative payment models and quality improvement

# Lead Collaboration



To measure and improve maternity care, Q Corp and other sponsors launched the

## Oregon Maternal Data Center (OMDC)

which currently houses data from

**14**



of Oregon's 52 hospitals and includes

**41.7%**

**(19,167)**

of the births in the state



Data Collaborative Participants	
Bridgespan Health Company	Moda Health
CareOregon	OHA Division of Medical Assistance Programs
Centers for Medicare & Medicaid Services (CMS), Qualified Entity Program	Oregon's Health CO-OP
FamilyCare	PacificSource Health Plans
Health Net of Oregon	Providence Health Plans
Health Republic	Regence BlueCross BlueShield of Oregon
Kaiser Permanente	Trillium Community Health Plan
LifeWise Health Plan of Oregon	Tuality Health Alliance



# Information for a Healthy Oregon




This report reflects

Data for the current measurement year

**July 2013 to June 2014**

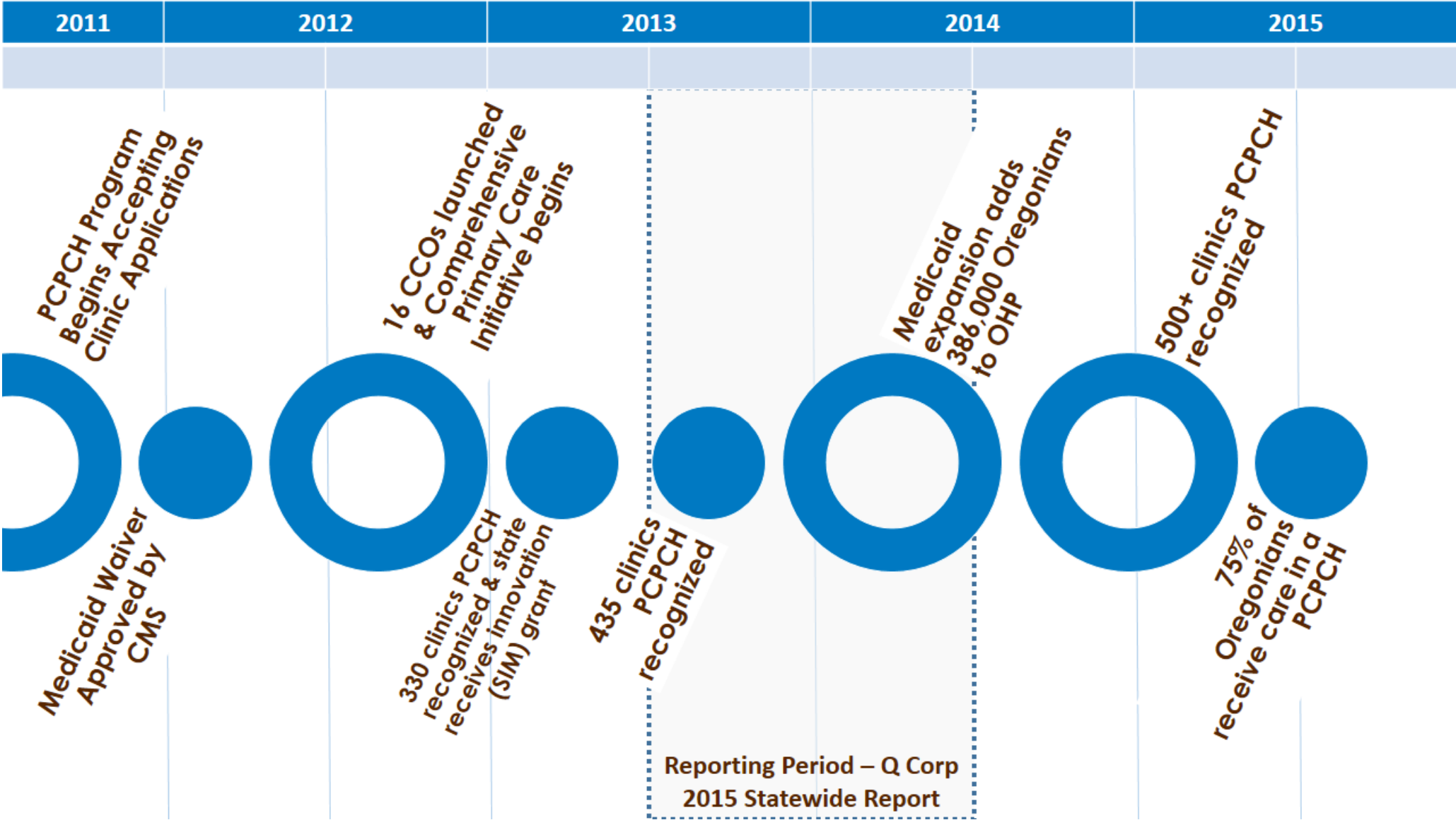
**2.7 million**  
**Oregonians**

 **3,395**  
**practicing primary**  
**care providers**



of all claims for fully insured  
**Commercial,**  
**Medicare and**  
**Medicaid plans**  
from

**16 data**  
**suppliers**



# Cost Reporting

- Our pioneering work with Total Cost of Care measures is bringing an important tool to understanding where we spend our money in healthcare.
- Reports released earlier this year to 150+ primary care clinics, commercially-insured population; next round later this year

## About the Measures

- Total per capita costs (or resources used) for a panel of patients attributed to a primary care clinic
- Based on the patented algorithm of HealthPartners, Inc.
- NQF endorsed (2012)
- In use for 10+ years, adopted nationally with over 90 licensees in 29 states
- Risk-adjusted to account for illness burden

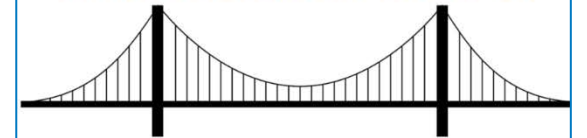
# 2%

decrease in Oregon's  
**Total Cost Index**

would result in  
savings of

**\$283 million**

which could be used to



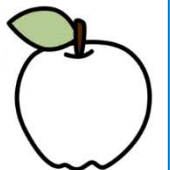
replace 43 structurally deficient  
bridges (\$188M)



purchase 200 new  
school buses (\$15M)

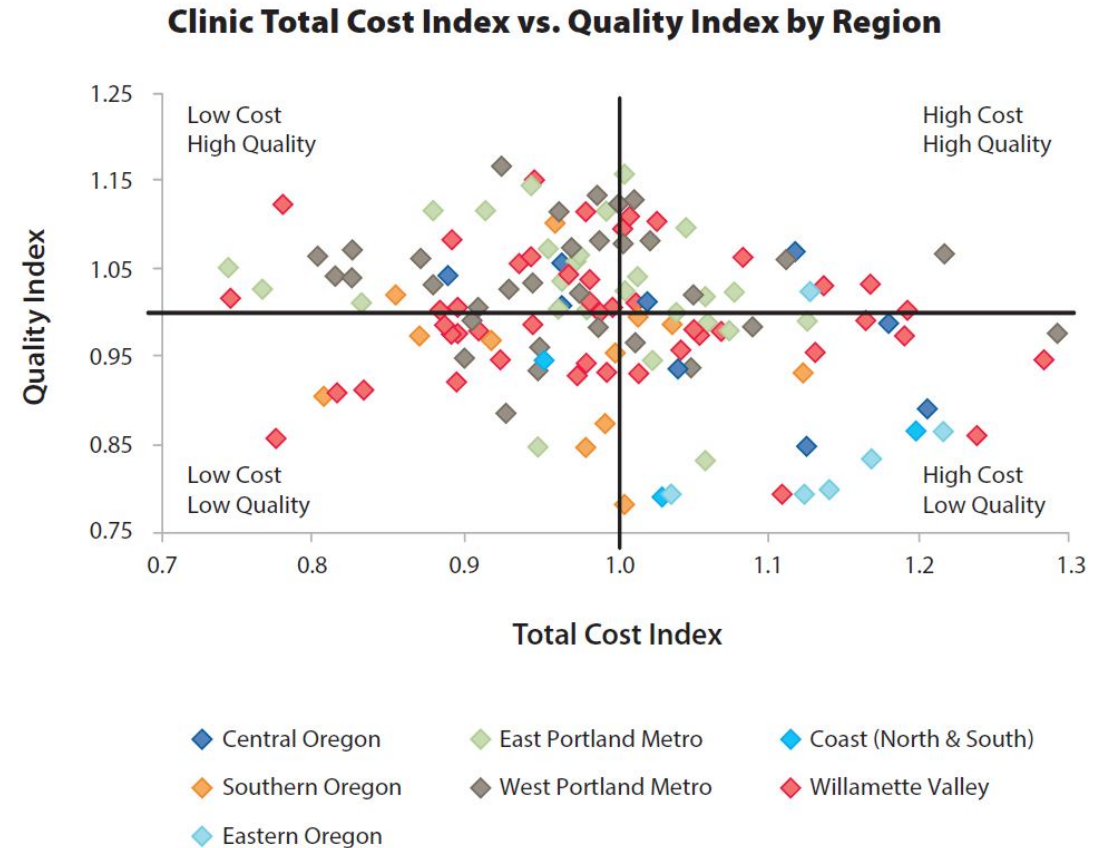


pay the salary of 2,330  
first-year teachers  
(\$80M)



# Early Results

- Considerable variation among clinics and between regions across Oregon
- Rural clinics show higher cost and lower quality, on average
- Q Corp is working to better understand cost drivers and what providers can do to influence them

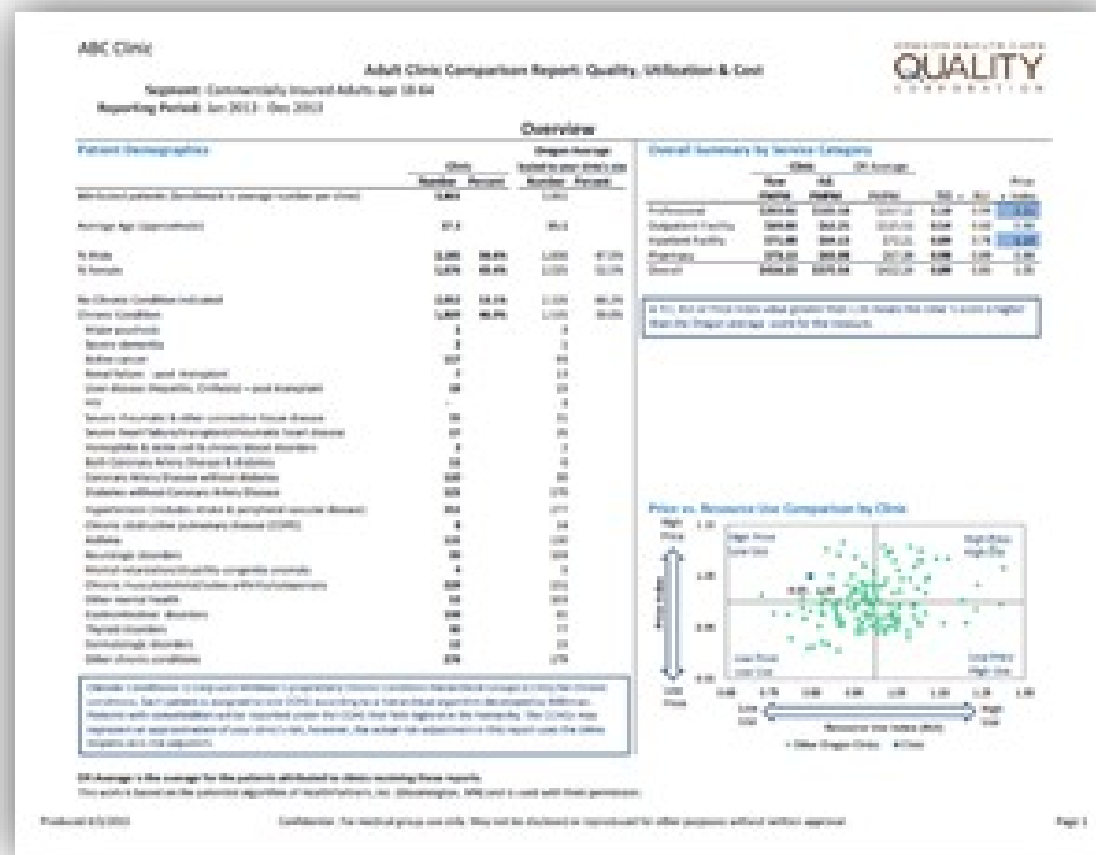


Measurement Period: January 1, 2013 - December 31, 2013

Oregon Health Care Quality Corporation (2015) *Information for a Healthy Oregon*, access the report at [www.q-corp.org](http://www.q-corp.org)

# What's Next for Cost of Care

- Additional rounds of reporting
- Explore potential Medicare/Medicaid measures
- Mentor other communities
- Capture year-over-year trend variations
- Technical Assistance



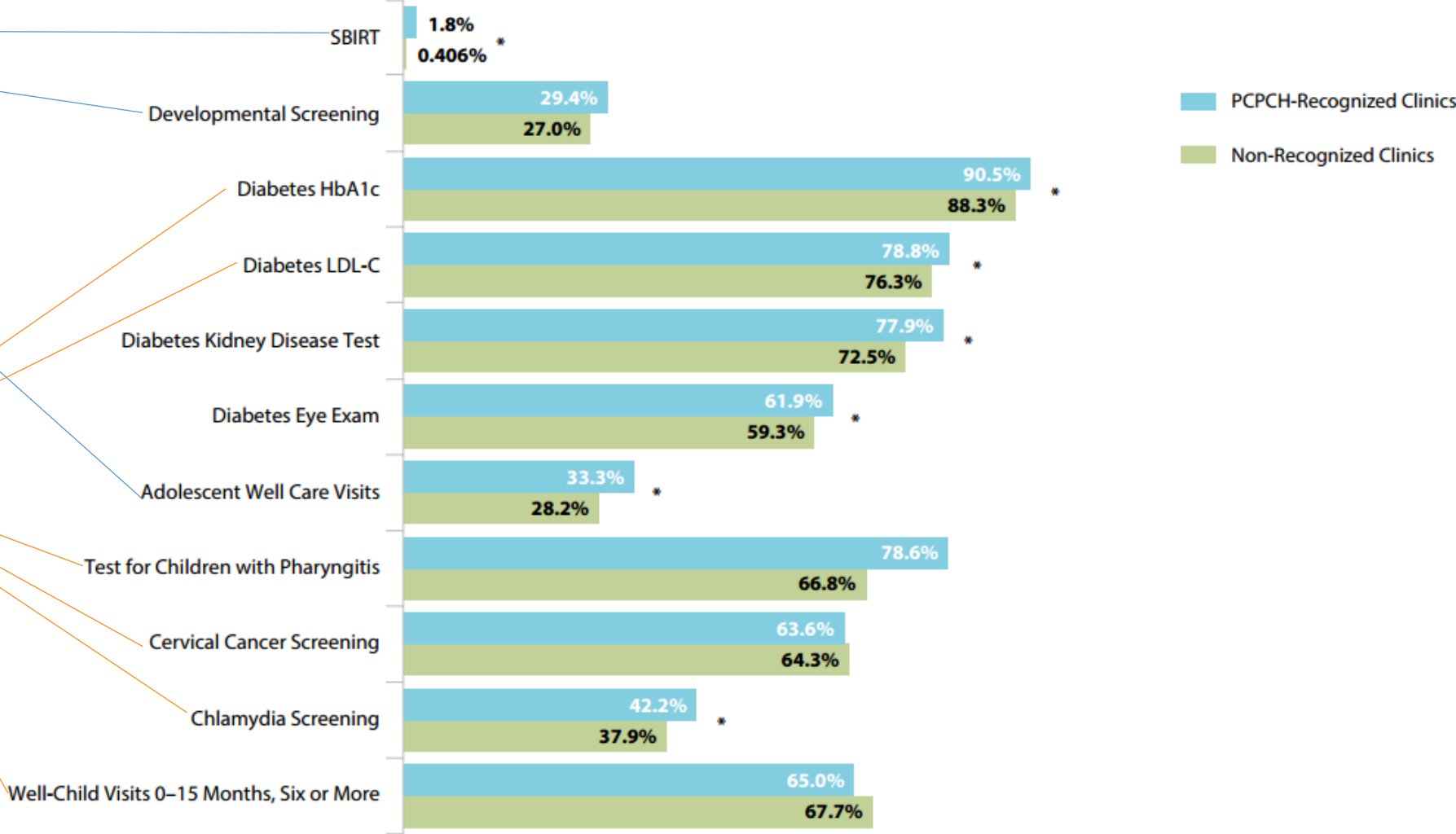


## CCO Incentive Measures



## CCO Performance Measures

### Measure Performance PCPCH-Recognized vs. Non-Recognized Clinics



\* Starred measures are statistically significant at the 95 percentile (P<0.05)

Note: The diabetes HbA1c, LDL-C, Kidney Disease Test, and Eye Exam all include Medicare Fee-For-Service data.

To make the 2010 data comparable to the 2013/2014 population, Q Corp applied weighting to clinic scores to account for payer mix changes in the Q Corp dataset between 2010 and June 30, 2014.

# Statewide Snapshot

- Quality continues to improve on 11 key measures
- Clinic average: scores for each clinic we report on, and average them together; compares clinics, not populations.

KEY: ■ Higher than HEDIS national mean ■ Lower than HEDIS national mean ■ No national benchmarks

Primary Care Measure	Oregon Mean Clinic Score	N / Clinics	Oregon Clinic Low – High Score	Standard Deviation	2014 Combined HEDIS National Mean*	2014 Combined HEDIS National 90th Percentile*	Oregon's Best Benchmark
Antidepressant Medication Management (Long Term)	52.8%	13,406 / 176	25.5 – 80.9	10.2	44.3%	56.8%	77.9%
Antidepressant Medication Management (Short Term)	67.0%	13,406 / 176	37.2 – 88	8.8	59.4%	69.9%	84.6%
Appropriate Low Back Pain Imaging	85.5%	9,156 / 129	60 – 100	8.0	74.7%	82.5%	99.7%
Appropriate Testing for Children with Pharyngitis	78.2%	7,203 / 94	23.3 – 97.1	16.8	71.3%	85.9%	95.3%
Breast Cancer Screening <sup>†</sup>	71.2%	178,063 / 355	44 – 93.2	10.6	68.3%	77.8%	90.2%
Diabetes Blood Sugar (HbA1c) Screening <sup>†</sup>	90.2%	78,995 / 339	57.9 – 100	6.2	88.7%	93.9%	97.5%
Diabetes Eye Exam <sup>†</sup>	62.2%	78,995 / 339	31.6 – 81.9	9.9	58.3%	71.9%	79.3%
Emergency Department Visits per 1,000 <sup>††</sup>	357.6	1,226,253 / 739	75.6 – 1454.8	186.4	463.3	n/a	156.6
Well-Child Visits in the First 15 Months of Life, Six or More	67.9%	22,344 / 149	28.6 – 99.4	12.3	65.8%	79.7%	86.8%
Adolescent Well-Care Visits	31.7%	148,474 / 366	4 – 64.2	12.1	45.8%	63.3%	58.1%
Chlamydia Screening	42.0%	28,782 / 283	6.5 – 71.4	10.6	48.9%	61.7%	64.1%
Cholesterol (LDL-C) Screening for People with Heart Disease <sup>†</sup>	82.2%	18,541 / 206	52.8 – 98.3	9.1	86.8%	92.6%	96.5%
Diabetes Cholesterol (LDL-C) Screening <sup>†</sup>	79.6%	78,995 / 339	7.9 – 97.8	11.8	83.3%	89.5%	95.0%
Well-Child Visits in the 3rd, 4th, 5th and 6th Years of Life	60.2%	98,458 / 262	9.5 – 88	13.3	71.1%	83.4%	83.0%
Diabetes Kidney Disease Monitoring <sup>†</sup>	77.8%	78,995 / 339	26.6 – 97.3	12.0	84.4%	90.3%	95.7%
30-Day All-Cause Readmissions, Unadjusted <sup>††</sup>	13.7%	39,927 / 266	2 – 28.6	4.5	n/a	n/a	7.7%
Alcohol and Drug Misuse (SBIRT), Adult <sup>†</sup>	1.6%	704,020 / 408	0 – 38.9	4.2	n/a	n/a	14.9%
Appropriate Asthma Medications, Child	91.7%	1,700 / 29	75.9 – 100	5.3	n/a	n/a	98.5%
Cervical Cancer Screening	65.5%	183,097 / 355	14.7 – 94.7	11.0	n/a	n/a	90.0%
Developmental Screening	29.9%	70,545 / 218	0 – 82.1	25.2	n/a	n/a	76.1%
Generic Prescriptions Fills, Antihypertensives	95.6%	753,318 / 363	81.3 – 100	3.3	n/a	n/a	99.9%
Generic Prescriptions Fills, SSRIs	93.6%	794,677 / 404	69.7 – 100	4.2	n/a	n/a	97.9%
Generic Prescriptions Fills, Statins	91.5%	474,553 / 361	49.2 – 100	6.8	n/a	n/a	98.9%
Admissions for Ambulatory Sensitive Conditions - Overall per 1,000 <sup>††</sup>	10.4	964,426 / 709	0.0 – 87.0	9.1	n/a	n/a	1.0
Admissions for Ambulatory Sensitive Conditions - Acute per 1,000 <sup>††</sup>	3.7	964,426 / 709	0.0 – 58.0	4.1	n/a	n/a	0.1
Admissions for Ambulatory Sensitive Conditions - Chronic per 1,000 <sup>††</sup>	6.6	964,426 / 709	0.0 – 53.3	6.7	n/a	n/a	0.3
Outpatient Visits per 1,000 <sup>†</sup>	5,324	1,226,253 / 739	1,644 – 13,206	1,607	n/a	n/a	n/a

\* Benchmarks use a weighted formula based on the proportion of Q Corp Commercial, Medicaid and Medicare members in each measure

† Lower scores indicate higher quality

‡ Measure Includes Medicare Fee-For-Service data

# Above National Benchmark

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# Below National Benchmark

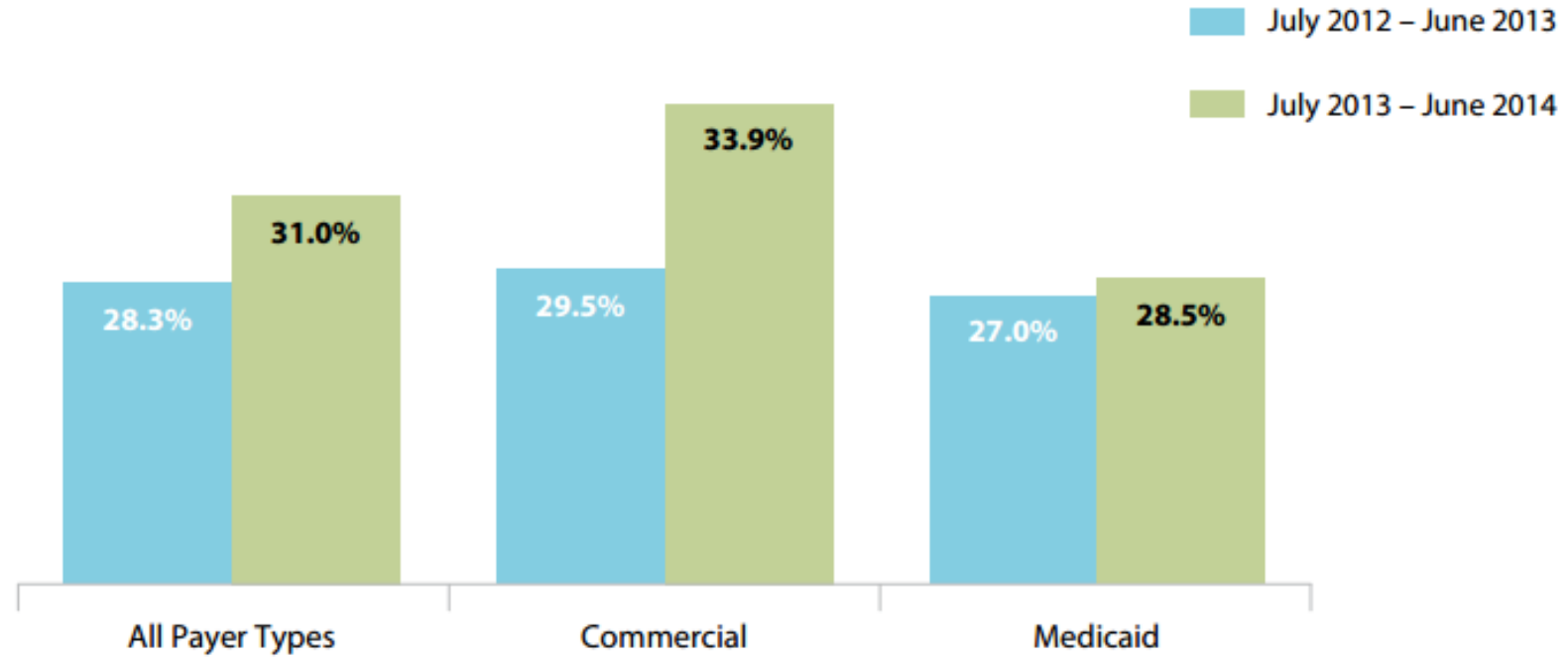
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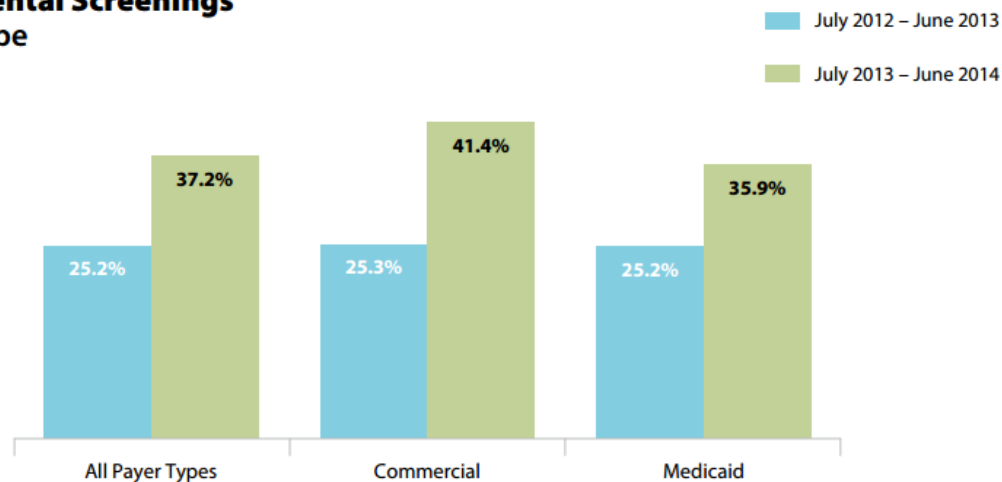
## Adolescent Well Care Visits by Payer Type



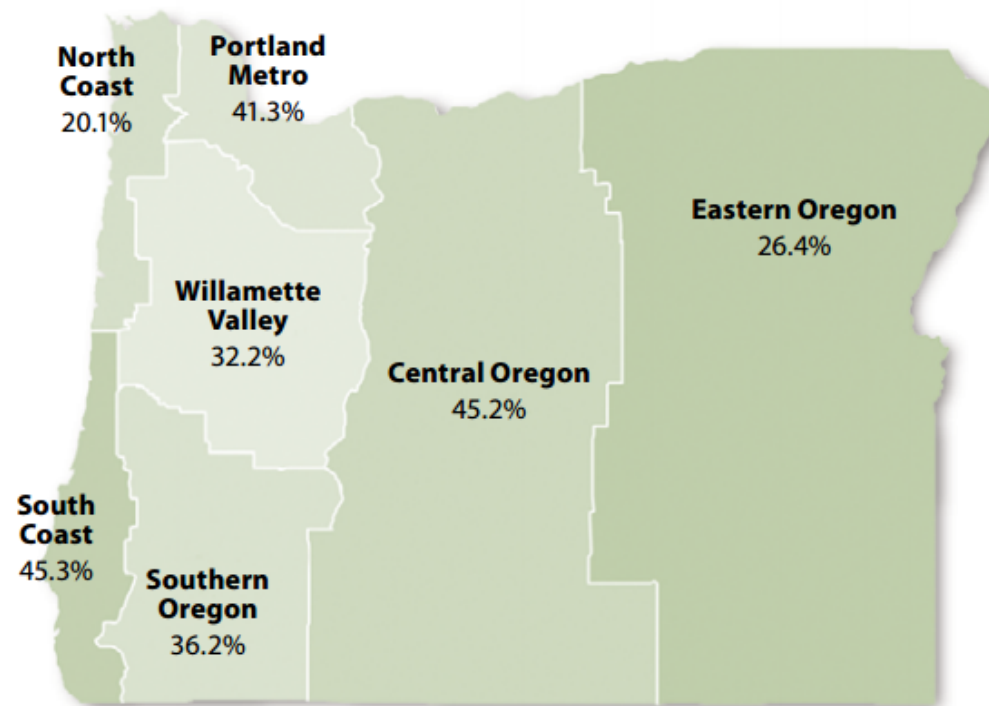
Note: Q Corp data includes Medicaid fee for service as well as CCO members which accounts for the variation from the Medicaid rates reported by OHA

# Developmental Screening

**Developmental Screenings  
by Payer Type**

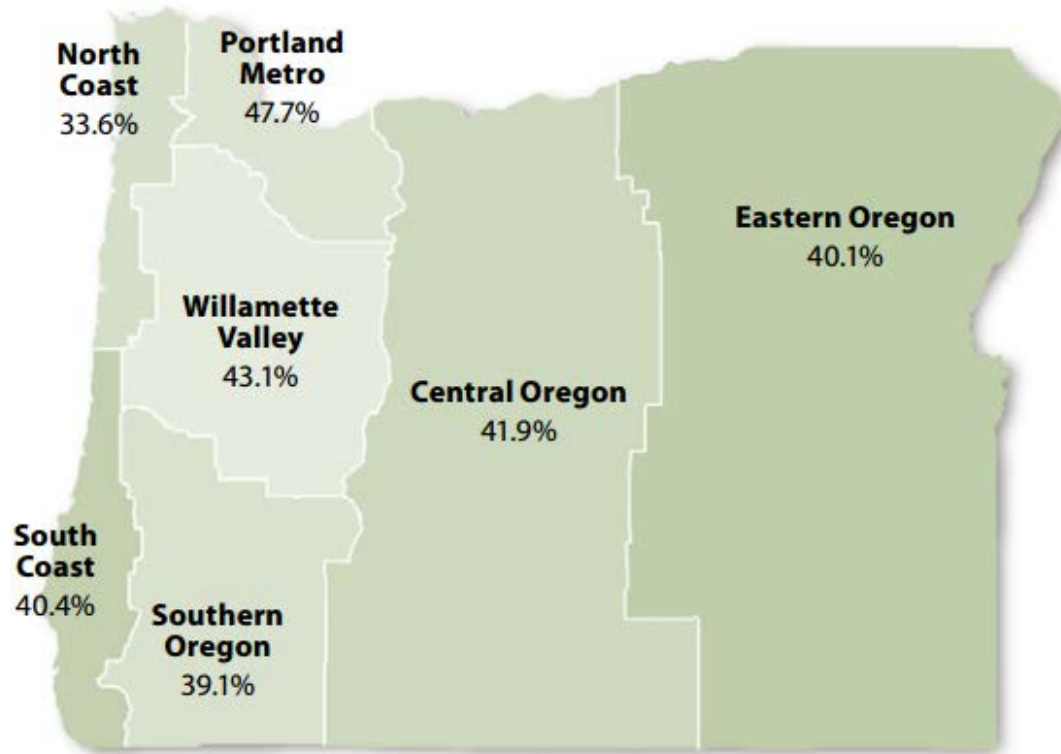


**Geographic Distribution of  
Developmental Screening Measure Rates  
All Payer Types**

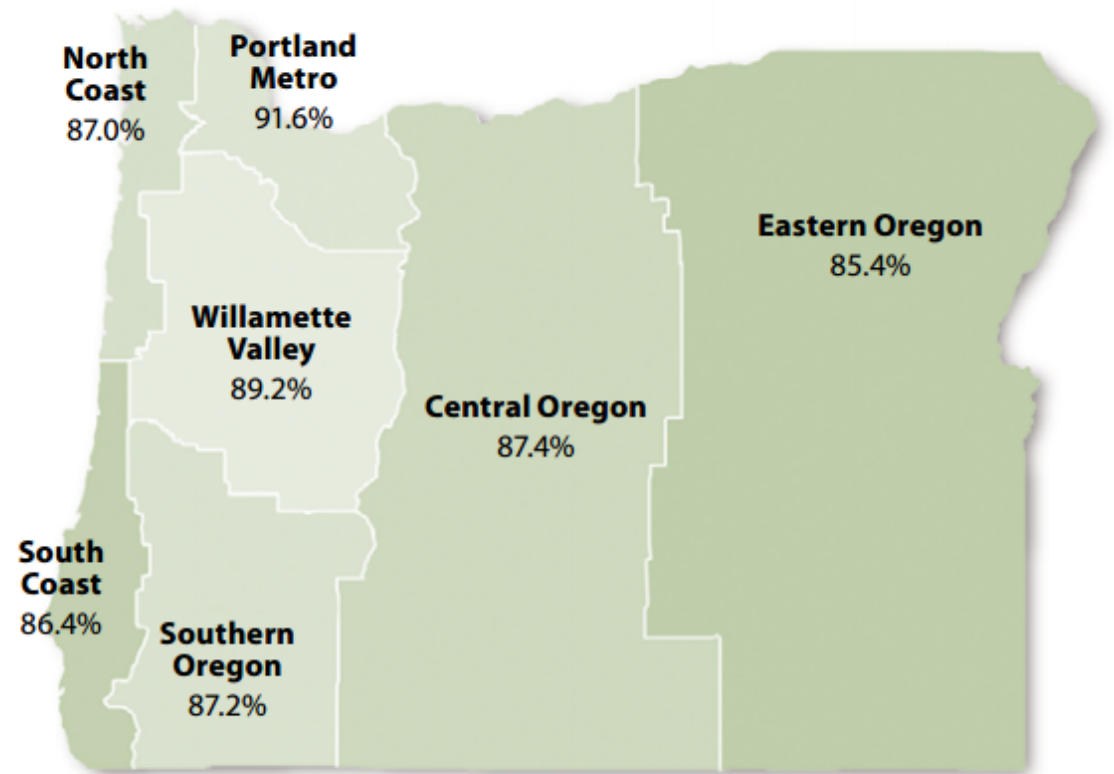


# Geographic Variation

**Geographic Distribution of  
Chlamydia Screening Measure Rate  
All Payer Types**

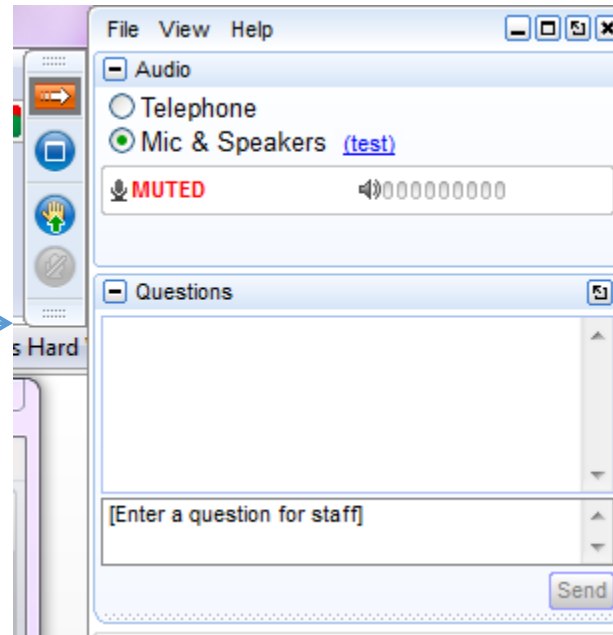


**Geographic Distribution of  
Diabetes Blood Sugar (HbA1c) Test Measure  
All Payer Types**



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# Resources

## Our Work

- [Cost of Care](#)
- [Oregon Maternal Data Center](#)
- [Patient-Centered Primary Care Institute](#)

## Reports

- [Provider Portal](#)
- [Public Reporting](#)

[Register Now >>>](#)

Please join us for a Healthcare Metric and Measure Alignment Virtual Listening & Discussion Session  
Wednesday, November 11, 2015

## Measures

### Adolescent Well Visits

- [Enhancing Adolescent Well-Visits](#)
- [Depression Screening & SBIRT for Adolescents](#)

### Developmental Screening

- [START: Implementing Standardized Developmental Screening in the Patient and Family-Centered Medical Home](#)