Washington Health Alliance Overview of Key Activities and Plans for the Future



Leading health system improvement

Our Agenda Today

- Introductory Remarks
- Overview of the Washington Health Alliance
- Introduction of the Alliance's Community Checkup and Results from our 2013 Report
- The Future of the Community Checkup and Statewide Expansion
- PAUSE FOR Q&A, DISCUSSION, READINESS SURVEY
- Price Variation The Alliance's Work To Date
- Plans for the Washington State Data Center
- Very Quick Overview Other Projects Currently Underway

We have two hours together and will need every minute!



Who We Are

- **Multi-stakeholder**. More than 175 member organizations representing purchasers, plans, providers and patients.
- **Purchaser-led.** The majority of our board members represent employers and labor union trusts.
- Non-profit. We are a designated 501(c)3.
- Non-partisan. We do not engage in lobbying efforts.
- **Data-driven.** We have claims data on approximately 3 million lives in Washington (commercially insured and Medicaid).
- **A convenvor.** A place where those who give care, get care and pay for care come together to lead health system change.



Alliance's Broad Membership





History of the Washington Health Alliance

- King County establishes Health Advisory Task Force to address rising health care costs
- Task Force recommendations lead to creation of the Puget Sound Health Alliance in 2004
- Robert Wood Johnson Foundation names Alliance an Aligning Forces for Quality community in 2006
- U.S. Agency for Healthcare Research and Quality (HHS) recognizes Alliance as the very first Charter Value Exchange in 2007
- First Community Checkup report issued in 2008
- Decision to expand statewide in 2013
- Rebranded WASHINGTON HEALTH ALLIANCE in 2014

Aligning ForcesImproving Health & Health Carefor Qualityin Communities Across America



Agency for Healthcare Research and Quality Advancing Excellence in Health Care



Our Mission and Vision

Mission

The Alliance's mission is to build and maintain a strong alliance among purchasers, providers, health plans, consumers and others to promote health and improve the quality and affordability of the health care system by reducing overuse, underuse and misuse of health care services.

5-Year Vision

By 2017, our vision is that physicians, other providers and hospitals in Washington will have achieved top 10% performance in the nation in the delivery of equitable, high quality, evidence-based care and in the reduction of unwarranted variation, resulting in significant reduction in the rate of medical cost trend.



Three Overarching Goals

- 1. Reduce the price of health care services
- 2. Reduce the overuse of health care services
- 3. Reduce underuse of effective health care services

The Alliance's principal strategy is to use performance measurement and reporting to support achievement of these goals.



Areas of Focus – Reducing Price



- Gain access to priced claims to enable measurement/ reporting
 - Couple with thoughtful protocols for access to and use of the data to foster improvement (lower prices) while minimizing anti-competitive behavior
- Target stakeholder actions to address areas of high price and unwarranted variation in pricing

.... more on this later.



Areas of Focus – Overuse



- Avoidable use of emergency room services, whether hospital-based or free-standing
- Avoidable 30-day all-cause hospital readmissions
- High volume elective, preference-sensitive procedures
- Non-evidence based testing and services, with emphasis on select clinical topics profiled in the Choosing Wisely ® campaign
- Unwarranted variation in resource use (intensity of care) during hospitalization episodes



Areas of Focus – Underuse of Effective Care



- Management of chronic disease for adults in the primary care setting, including addressing disparities in care as they are identified
 - Diabetes, Heart Disease, Depression, Asthma
- Prevention screening
 - Cervical, Colorectal and Breast cancer
- Patient experience



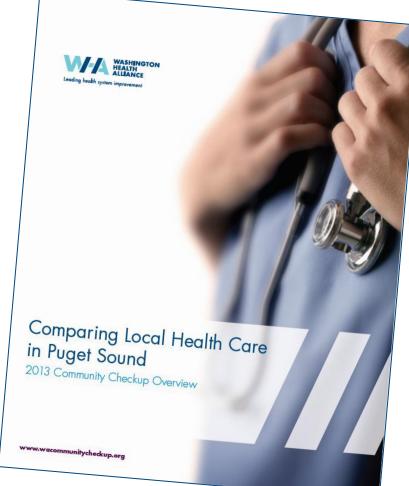
Alliance Main Activities

- 1. Improving transparency of the health care system through performance measurement and reporting on quality, utilization and price
 - Infrastructure to receive/process data from multiple data suppliers for aggregated performance measurement and reporting
 - Rules and protocols for data sharing and data use
 - Convene stakeholders to agree upon performance measures
 - Measurement for baseline and ongoing performance
 - Report results in a manner that enables stakeholders to act
- 2. Strengthening purchaser and consumer engagement to leverage buying power and shape demand
 - Learning opportunities/sharing best practices (value-based benefit design, purchasing strategies, payment reform)
 - Results with contextual information
 - Informational campaigns
 - Convene direct discussion between purchasers and providers



The Community Checkup: Our Signature Product

- Seven reports issued since 2008
- 31 Measures generally fall into five areas:
 - Care of chronic diseases
 - Preventive screenings
 - Appropriate use of services
 - Access to care
 - Use of Generic prescribing
- Results for 85 medical groups and 305 clinics (four or more providers) for 5-county Puget Sound region
- New this year: county-level results for entire state
- Not just a report about how well we perform as a region . . .
- ALSO a report about how well we want to perform







- 20 data suppliers: health plans, public and private self-insured purchasers, Medicaid
- Results are based on the care approximately 3 million people throughout the state received from their medical groups
- 12-month measurement year now with 9-year look-back period
- Results: Commercial, Medicaid, All-payer
- We use results for the commercially insured population when comparing to the national 90th percentile

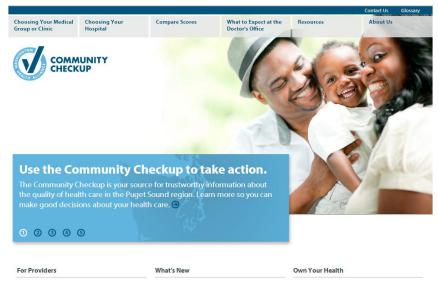




Results Available on Community Checkup Website

- Available to anyone
- Designed to be consumer-friendly
- Searchable
- Includes detailed results, including numerators, denominators and confidence intervals
- ALSO: Hospital results (compiled from Hospital Compare, DOH and Leapfrog)

www.wacommunitycheckup.org







Get active in your health and health care \ominus

Read the 2012 eValue8 Health Plans Report

view the September 2012 Community

Find out what you should expect at the

Checkup Report

doctor's office



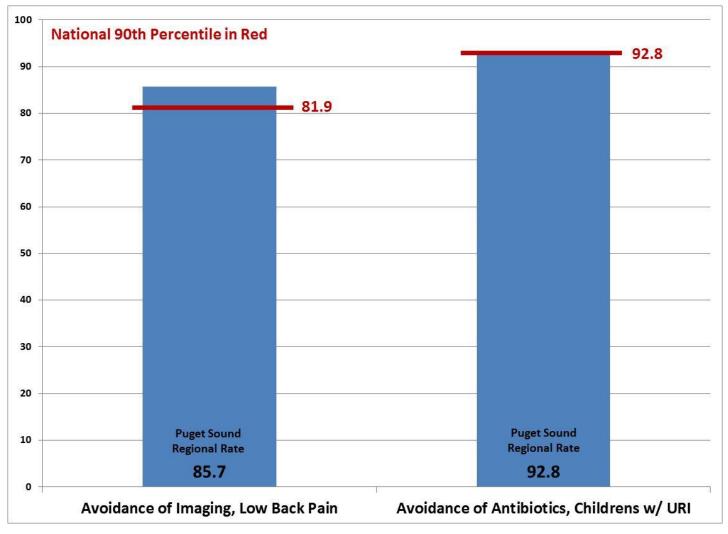


Common Themes

 Providers in the Puget Sound region are among the best in the country in a few select areas, proving that our goal of top 10% performance is achievable.



2013 Puget Sound Regional Performance At or Above National 90th Percentile in Select Areas







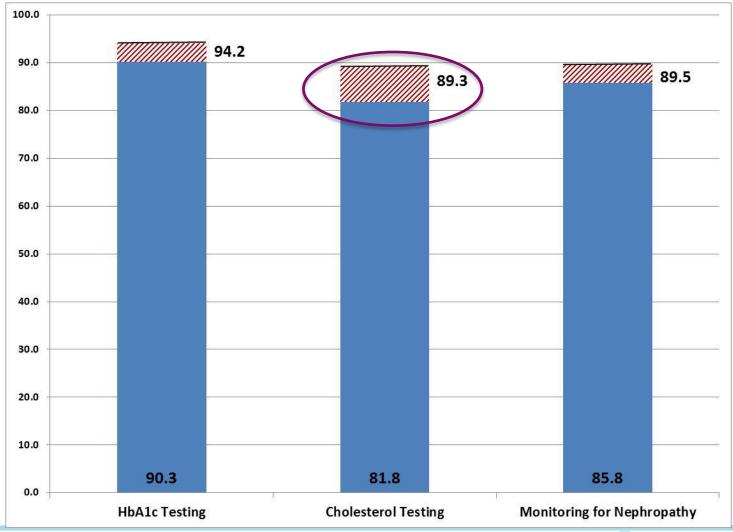


Common Themes

- Providers in the Puget Sound region are among the best in the country in a few select areas, proving that our goal of top 10% performance is achievable.
- But even in areas where the standard of care is well established, such as diabetes, performance continues to lag behind national top 10% performance.



Diabetes Care: There's Room for Improvement to Achieve National Top 10% Performance for the Region (2013)









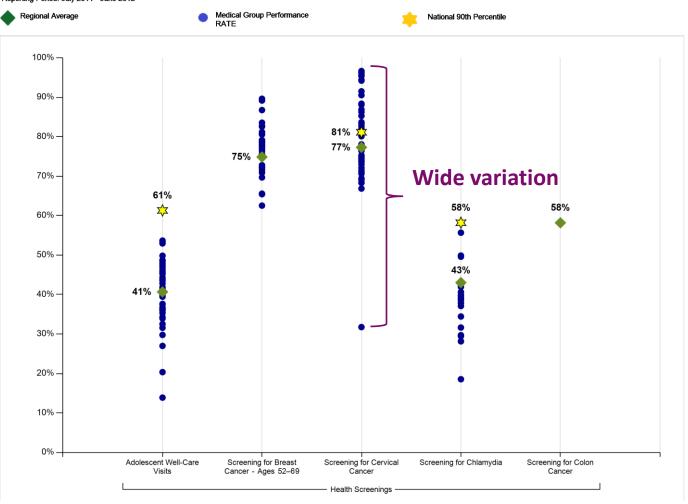
Common Themes

- Providers in the Puget Sound region are among the best in the country in a few select areas, proving that our goal of top 10% performance is achievable.
- But even in areas where the standard of care is well established, such as diabetes, performance continues to lag behind national top 10% performance.
- And the range in performance among medical groups, and even within medical groups, on numerous measures remains disappointingly wide.



Variation in medical group performance remains a stubborn problem and is a significant area of opportunity for improvement

2013 Community Checkup Results - Medical Group Performance - Commercial Results Reporting Period: July 2011 - June 2012







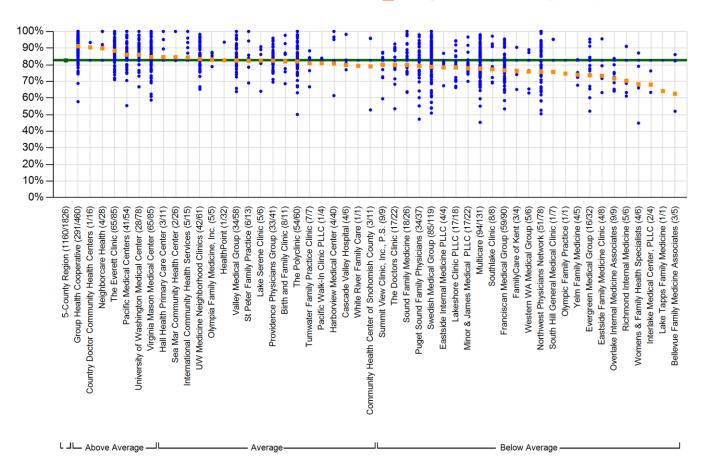
We also continue to see significant variation within medical groups!

Cholesterol-Lowering Drugs (Statins) - Primary Care Providers

Regional average for provider category

Medical group performance rate

Individual provider performance rate





21



Common Themes

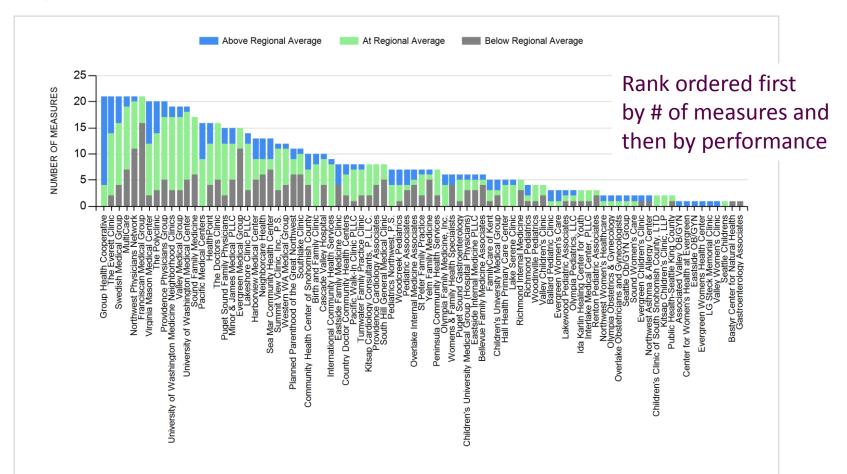
- Providers in the Puget Sound region are among the best in the country in a few select areas, proving that our goal of top 10% performance is achievable.
- But even in areas where the standard of care is well established, such as diabetes, performance continues to lag behind national top 10% performance.
- And the range in performance among medical groups, and even within medical groups, on numerous measures of quality is disappointingly wide.
- Everyone has the opportunity to do better. No medical group or clinic excels at everything. Achieving significant improvement in overall regional results doesn't depend on just a few ... it is incumbent upon everyone to improve to make a difference.



2013 Community Checkup shows room for improvement across all medical groups

Medical Group Results - Overview

All Payers







Your Voice Matters: A Comprehensive Patient Experience Survey

- Better patient experience results correlate to better health outcomes
- CG-CAHPS survey of patients' experience with primary care providers
- First such comprehensive regional survey (5-county Puget Sound region)
- First report released in May 2012 with results for 40 primary care medical groups in 156 clinic locations
- Next report to be issued in first quarter 2014 with results for 186 clinic locations



Your Voice Matters: Patient Experience with Primary Care Providers in the Puget Sound Region

2012 Community Checkup Overview



2013 Community Checkup

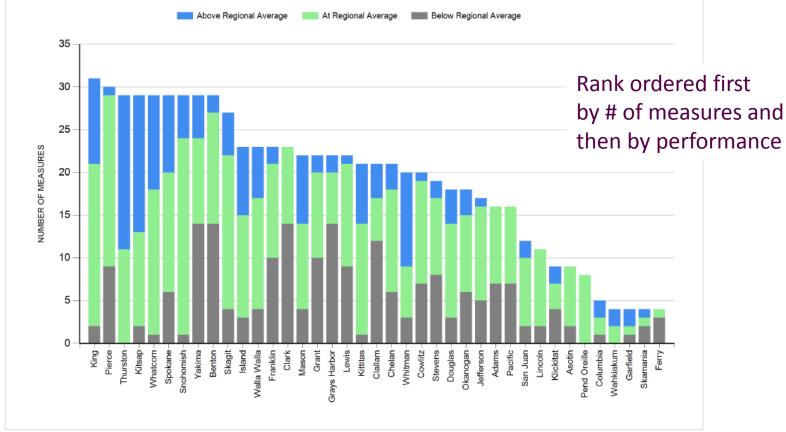
- This year, for the first time, the Community Checkup includes <u>county-level</u> results for the entire state.
- Across the state, we see variation in performance by county on different measures.





2013 Community Checkup shows room for improvement across all Washington counties

2013 Community Checkup Statewide Results By County-Commercial Results



County measures are attributed using the patient's zip code - not by provider location.



Example of Statewide/ County Reporting:

Screening for Chlamydia

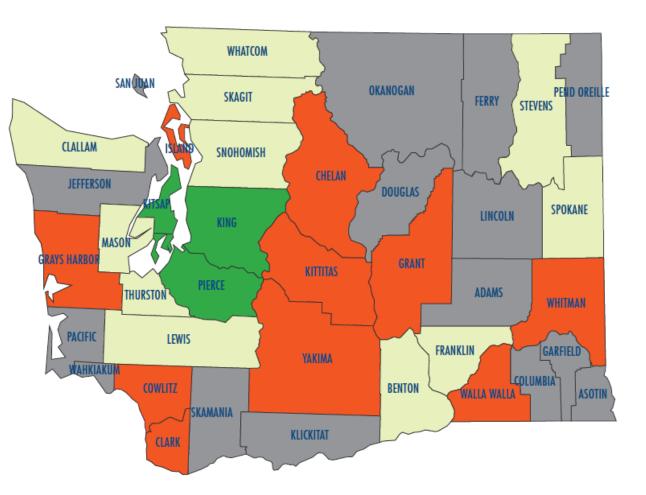


COMPARISON TO STATE AVERAGE

- ABOVE STATE AVERAGE (3)
- MEETS STATE AVERAGE (11)

BELOW STATE AVERAGE (10)

T00 FEW CASES (<160) (15)

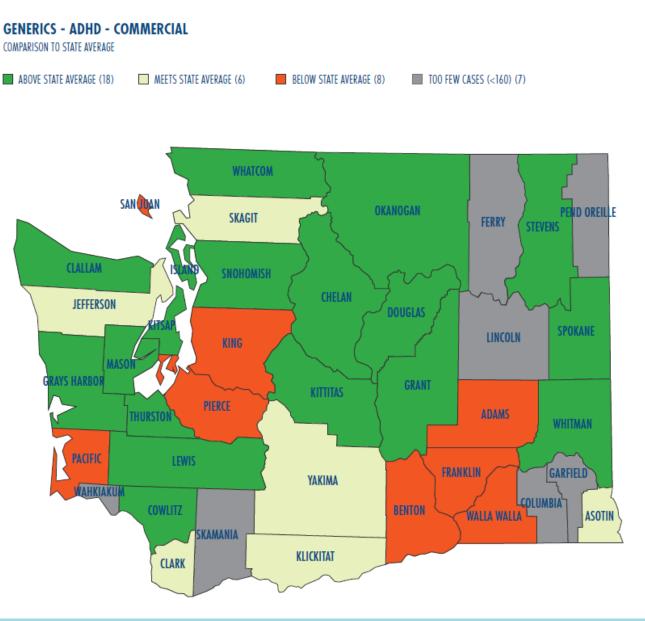






Example of Statewide/ County Reporting:

Generic Prescribing (ADHD)



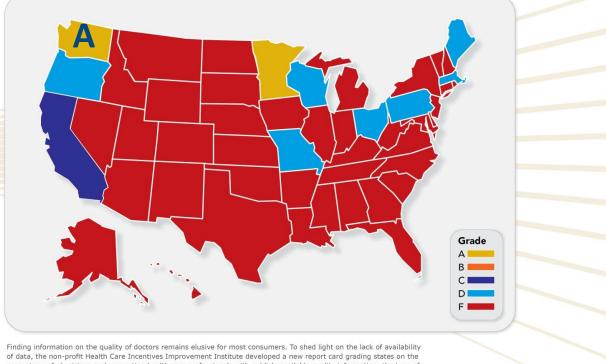




Transparency is a key <u>tool</u> to support and drive health care performance improvement

The Washington **Health Alliance** gets high marks for its work and is one of only two states in the country to get an 'A' in **Physician** Quality **Transparency!**





of data, the non-profit Health Care Incentives Improvement Institute developed a new report card grading states on the percentage of physicians and supporting health care professionals with publicly available quality information; the type of measurement provided (i.e. outcomes, process, patient experience); and the accessibility of information. By highlighting states making a conscious effort to provide data to consumers, HCI³ hopes to encourage others to embark on similar efforts

Source: Health Care Incentives Improvement Institute (HCI-



13 SUGAR STREET, NEWTOWN, CT 06470 / EMAIL: INFO@HCI3.ORG / WWW.HCI3.ORG



The Future of the Community Checkup

- We will continue to do medical group and clinic level reporting in the 5-county Puget Sound region.
- We plan to add two new areas for medical group and clinic level reporting in 2014:
 - Whatcom/Skagit counties
 - Spokane county
- In 2014, we will continue to produce county-level results for all 39 counties.
- In 2015, we will add one or more new areas for medical group and clinic level reporting (locations TBD).
- We already have statewide data.
- Our two biggest challenges are:
 - building out the clinic provider rosters to ensure accurate reporting
 - building a culture that supports and embraces transparency
- We need the help of your community to do these things successfully.





High Level Overview of the Process

Step in the Process	Participant
Data extracts sent to data aggregator	Data suppliers
Process data and generate summary results	Milliman
Validate data in summary results	Data suppliers
Provide provider/clinic roster information	Medical groups/community organizations
Prepare provider/clinic rosters	Washington Health Alliance
Review/modification of clinic roster information through secure website	Medical groups/community organizations
Run provider attribution and measure results	Milliman
Prepare Community Checkup DRAFT results	Washington Health Alliance
Review and provide feedback on draft measure results through secure website	Medical groups
Incorporate medical group feedback and prepare FINAL results	Milliman/Washington Health Alliance
Final private review of results	Medical groups
Publish results and share publicly	Washington Health Alliance



Pause for Questions on the Community Checkup

G

Readiness Survey



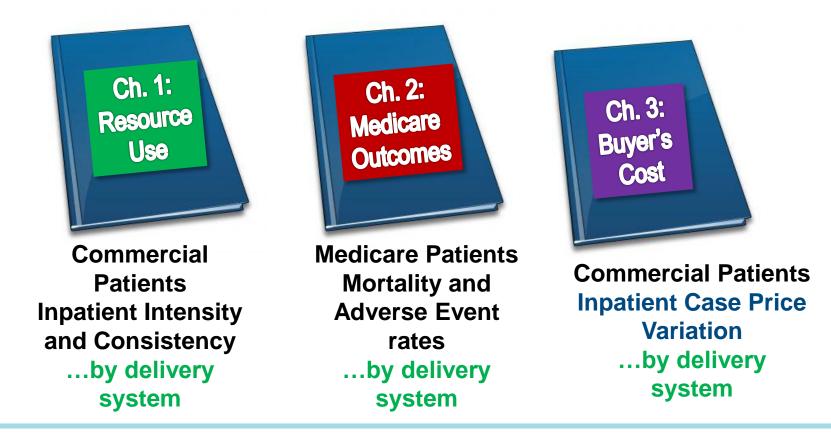
Price Variation

- In 2013, first-time report on variation in pricing delivered privately to Alliance Purchasers, Health Plans and (some) Providers
 - Report looks at common types of high volume hospitalizations and includes both facility and professional components
 - Price variation among delivery systems is significant; it's common to see a 40% difference in the average case price between the lowest and highest priced delivery system
 - Some delivery systems are consistently and significantly well below the average case price index; and, some are consistently well above the average case price index
 - The magnitude of price variation is astonishingly high even with outliers excluded, the variation ranges from 240% to 780% for severity-adjusted cases
- Price transparency remains a top goal of the Washington Health Alliance and is a key focus of the newly forming WA State Data Center



VALUE PORTFOLIO – Chapters Released Individually Then Brought Together to Identify Patterns

Released as "Chapters" First <u>Resource Use</u>, then <u>Outcomes</u>, and finally <u>Buyer's Cost</u>





Value Portfolio

Organized around APR DRGs

- Adjusts for severity
- Minor, moderate
- Groupings of Procedures
 - Cardiovascular (AMI, Chest Pain)
 - Orthopaedic (joint replacement, lumbar/cervical spinal fusion, disc decompression)
 - OB/Gyn (vaginal delivery, C-section, uterine removal)
 - Other Surgical (prostate, lap chole, appendectomy)
 - Pneumonia

		\land		\wedge	Delivery System						
				в	С	D	E	F	G	н	
	2008-2011 Severity-Adjusted Commercial Case Price Comparisons			1 \							
	Uterus Surgery (not for cancer or fibroid tumors), minor severity [APR-DRG 513.1]										
	Literus Surgeny (not for cancer or fibroid tumors), moderate severity [APR-DRG 513.2]										
Ch. 3: Suyer's Cost	Uterus Surgery (nor toracter of motor transfer indicated indicated in the sectority (APR-DRG 519.1) Uterus Surgery for Fibroid Tumors (excl cancer), minor severity (APR-DRG 519.1) Uterus Surgery for Fibroid Tumors (excl cancer), moderate severity (APR-DRG 519.2) Cesarean Delivery, minor severity (APR-DRG 540.1) Cesarean Delivery, moderate severity (APR-DRG 540.2) Cesarean Delivery, minor severity (APR-DRG 540.3) Vaginal Delivery, moderate severity (APR-DRG 560.2) Vaginal Delivery, severe severity (APR-DRG 560.3) 2011 Paris (Indicated Severe) (CHARS) Wedicaid Other Government Charity/Self-Pay Commercial										
CN. 5:	Uterus Surgery for Fibroid Tumors (excl cancer), moderate severity [APR-DRG 519.2]										
	Cesarean Delivery, minor severity [APR-DRG 540.1]						İ				
INGLE V	Cesarean Delivery, moderate severity [APR-DRG 540.2]										
	Cesarean Delivery severe severity [APR-DRG 540 3]										
COSL	Vaginal Delivery minor severity [APR-DRG 79										
	Vaginal Delivery, moderate seven APPR 560.21					******					
	Vaginal Delivery select devents PR-DRG 560 3						1				
	2011 Patien Tito Trees by Insurance Category (CHARS)										
		XX%	-11	XX%	XX%	XX%	XX%	XX%	XX%	ХХ	
1111	Medicaid	XX%		XX%	XX%	XX%	XX%	XX%	XX%	XX	
r or III	Other Government	XX%		XX%	XX%	XX%	XX%	XX%	XX%	XX	
FUI	Charity/Self-Pay	XX%		XX%	XX%	XX%	XX%	XX%	XX%	XX	
	Commercial	XX%		XX%	XX%	XX%	XX%	XX%	XX%	XX	
	non-commercial	XX%		XX%	XX%	XX%	XX%	XX%	XX%	XX	
		70(70		/01/0	70070	70(70	70070	7000	70070	70	
	2008-2011 Severity-Adjusted Commercial Service Intensity Comparisons										
	Uterus Surgery (not for cancer or fibroid tumors), minor severity [APR-DRG 513.1]										
	Uterus Surgery (not for cancer or fibroid tumors), molerate severity [APR-DRG 513.2]										
	Uterus Surgery for Fibroid Tumors (excl cancer), minor severity [APR-DRG 519.1]						1				
	Uterus Surgery for Fibroid Tumors (excl cancer), minor sevency (Ar A Bros 519.1)							-			
ch. 1: esource Use	Cesarean Delivery, minor severity [APR-DRG 540.1]										
	Cesarean Delivery, moderate severity [APR-DRG 540.2]										
	Cesarean Delivery, severe severity [APR-DRG 540.3]						1				
	Vaginal Delivery, minor severity [APR-DRG 560.1]						1				
	Vaginal Delivery, moderate severity [APR-DRG 560.2]										
	Vaginal Delivery, severe severity [APR-DRG 560.3]										
	vaginar benvery, severe severity (vint bite soois)				-1					l	
	2011 Rate of Early Elective Deliveries: births induced electively prior to 39th week without				-						
	Portion of All Deliveries that are Early Elective Deliveries	D/NA			D/NA					D/	
		2/101			2,		•				
	2009-2011 Risk-Adjusted Medicare Adverse Event Rates (AHRQ Patient Safety Indicators)										
	Deep bed sore [PSI 3]									_	
	Punctured lung as a result of care [PSI 6]										
ch. 2:	Infection from tube inserted into vein or artery [PSI7]										
Heath	Hip bone broken in-hospital after surgery [PSI 8]						.				
edicare	Bleeding after surgery [PSI 9]										
utcomes	Abnormal bodily functions after surgery [PSI 10]						-				
	Loss of lung function after surgery [PSI 11]										
	Blood clot after surgery [PSI 12]										
	Blood poisoning after surgery [PSI 13]										
	Wound opens after it was surgically closed [PSI 14]										
	Death among surgical inpatients with serious treatable complications [PSI 4]										
	July 2011 - June 2012 Patient Experience of Care										
	Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10										
	Patients who reported YES, they would definitely recommend the hospital										



How Purchasers Will Use Reports

- Meet with delivery systems to discuss results
- Educate workforce about variation in quality and price
- Use with benefits committee as neutral third-party reference for in-network and benefit design
- Use Alliance metrics in evaluating Accountable Care Organization (ACO) capabilities



Transparency is a key <u>tool</u> for reducing unwarranted <u>variation in pricing</u>

Unlike Quality, Washington gets very low marks for not yet putting a law in place that enables purchasers and consumers to find consistent, reliable and meaningful price information on providers, • and hospitals.

GRADE	FROM	то	None and
A	60%	100%	
В	50%	59%	
C	40%	49%	
D	30%	39%	
F	0%	29%	

Catalyst for Payment Reform 2013 Report Card on State Price Transparency Laws



Establishing a WA State Data Center

- 2-Year planning/implementation grant to the WA State Office of Financial Management from the Centers for Medicare & Medicaid Services to improve price transparency and augment insurance rate review
- Alliance contract with OFM to establish framework for All Payer Claims Database (APCD)
- OFM expected to contract with Alliance as APCD Administrator
- Enabling legislation for APCD part of State Health Innovation Plan legislation
- Planned for the Alliance to become a CMS "Qualified Entity" to access Medicare data for measurement and reporting
- State project directed by Sue Meldazy (OFM)

Note: The Washington Health Alliance is partnering with the Washington State Office of Financial Management (OFM) to establish the framework for implementing an All Payer Claims Database that builds upon the Alliance's existing measurement and reporting capabilities. The effort is made possible by a two-year grant from the Center for Medicare and Medicaid Services to improve health care pricing transparency and augment rate review.



Intent of the Data Center

- Establish an APCD as a community asset a common source of data for statewide measurement and reporting
- Expand public reporting with access to health care pricing and quality data for:
 - Personal health care decision-making
 - Designing benefit plans and provider networks to drive higher value
- Improve our collective ability to analyze, understand and address cost, quality and utilization drivers contributing to lower healthcare value and unwarranted variation
- Provide improved and additional data to the Office of the Insurance Commissioner for rate review



WA State Health Care Innovation Planning

- The Alliance worked with State to develop State Health Care Innovation Plan (Alliance led multi-stakeholder process focused on health care delivery system transformation)
- State Health Care Innovation Plan has three key strategies and seven building blocks:

STRATEGIES

- 1. Improve chronic illness care through better integration of care and social supports
- 2. Improve health overall by building healthy communities and people through prevention and early mitigation of disease
- 3. Drive value-based purchasing across the community, starting with the State as "first mover"

BUILDING BLOCKS

- 1. Quality and price transparency
- 2. Person and family engagement
- 3. Regionalize transformation
- 4. Create Accountable Communities of Health (ACHs)
- 5. Leverage and align state data
- 6. Practice transformation support
- 7. Workforce capacity and flexibility
- Positioned to work with the state on a CMS State Innovation Modeling grant in 2014



The Washington Health Alliance Has Many Other Projects Underway

- **eValue8™.** NBCH tool to measure the performance of health plans
- **Choosing Wisely** [™]. Partnering with WSMA on ABIM Foundation campaign to reduce unnecessary tests and treatments
- Avoidable ED use and Hospital Readmissions. Analysis by medical group and delivery system
- Elective Procedures Rates. Analysis of geographic variation in procedure frequency among the commercially insured
- **Disparities in care.** Stratifying Community Checkup Medicaid data by race, ethnicity and language
- **Own Your Health.** Alliance campaign to help consumers manage their own health and health care better
- **Multi-payer medical home pilot.** Recently completed pilot cosponsored with State.



Questions:

1. Do you think your community is ready for increased transparency around health care quality and price?

2. What questions do you have?

3. What are your biggest concerns?







Thank You!

Contacts:

Mary McWilliams, Executive Director, Washington Health Alliance mary@wahealthalliance.org

Susie Dade, Deputy Director, Washington Health Alliance sdade@wahealthalliance.org

Natasha Rosenblatt, Health Information Consultant, Washington Health Alliance nrosenblatt@wahealthalliance.org

Susan Meldazy, Project Director, WA State Office of Financial Management susan.meldazy@ofm.wa.gov

