## Overview: Washington Health Alliance Washington State Common Measure Set on Health Care Quality and Cost

Thursday, February 11, 2016





# The Alliance: Who We Are

- **Multi-stakeholder**. 185 member organizations statewide representing purchasers, plans, providers and patients.
- **Purchaser-led.** The majority of our governing members represent employers and labor union trusts.
- **A convener.** A place where those who give, get and pay for care come together to align their efforts to lead health system change.
- **Data-driven.** We have over 20 data suppliers with claims data on approximately 4 million lives in Washington (commercially insured and Medicaid) dating back to 2004. The Alliance's database includes well over 1.4B claim lines, comparing favorably to some of the larger health databases in the country. Currently recognized as state's "voluntary APCD."
- Non-profit. We are a designated 501(c)3.
- Non-partisan. We engage in lobbying efforts on a very limited basis and only on topics that are directly related to our mission and core work.



#### **Examples of the Alliance's Broad Membership**



### **Our Mission and Vision**

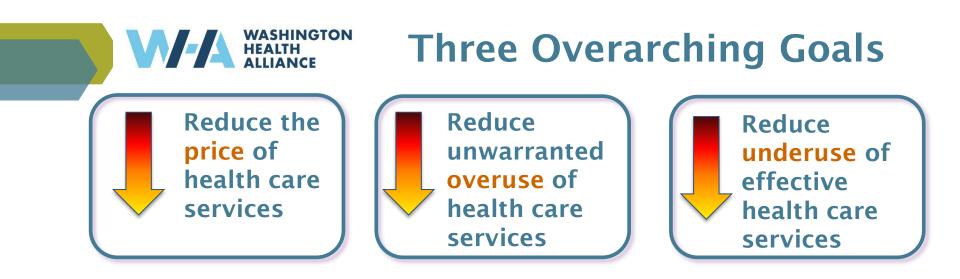
#### Mission

WASHINGTON HEALTH

The mission of the Washington Health Alliance 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.

#### Vision

Physicians, other providers and hospitals in Washington will achieve 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 a significant reduction in the rate of medical cost trend.



The Alliance's principal strategies:

#### **CONVENING AND ALIGNING**

• We bring together a diverse group of organizations and individuals who share our cause to drive collective action to improve the value of health care in Washington state.

#### **MEASUREMENT AND REPORTING**

• We share information and insights that describe how health care gets delivered, used and paid for in Washington state

## Common Measure Set on Health Care Quality and Cost



### **Common Measure Set on Health Care Quality and Cost**

#### 2014:

- Legislation ESHB 2572
- Performance Measures Coordinating Committee established
- Three technical workgroups (Prevention, Acute Care, Chronic Illness)
- Common Measure Set approved, 52 measure "starter set"





### **Common Measure Set on Health Care Quality and Cost**

2015:

- Performance Measures Coordinating Committee continues
- One technical workgroup (Behavioral Health)
- First Report on Common Measure Set

2016:

- Modification of Common Measure Set for 2016
- 55 measures
- Addition of Behavioral Health measures





### Purpose of the Common Measure Set? (ESHB 2572 Language)

- Inform public and private health care purchasers
  - State agencies shall use to inform and set benchmarks for purchasing decisions
- Use for:
  - health improvement
  - care improvement
  - provider payment systems
  - benefit design
  - administrative simplification for providers
- Propose benchmarks to track costs and improvements in health and health care





## **Purpose of the Common Measure Set**

- Highlight topics that matter
- Standardize the way we measure performance as a state
- Publicly share results to develop a common understanding of what needs to improve and where it needs to improve



Converge around Common signals

Reduce variation in care!



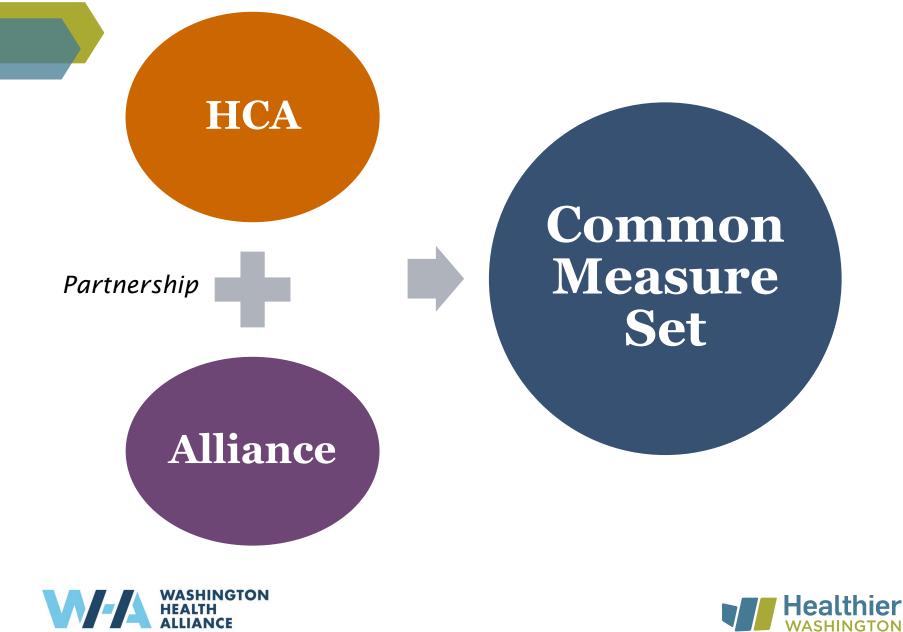


### **Areas of Focus - Common Measure Set**

PREVENTION	ACUTE CARE	CHRONIC ILLNESS
Adult Screening(s)	Avoidance of Overuse/ Potentially Avoidable Care	Appropriate Use of Medications
Childhood: early and adolescents	Cardiac	Asthma
Immunizations	Readmissions	Depression
Nutrition/ Physical Activity/ Obesity	Obstetrics	Diabetes
Oral Health	Patient Safety	Hypertension and Cardiovascular Disease
Tobacco Cessation	Stroke	
Unintended Pregnancy	Behavioral Health	
Patient Experience		

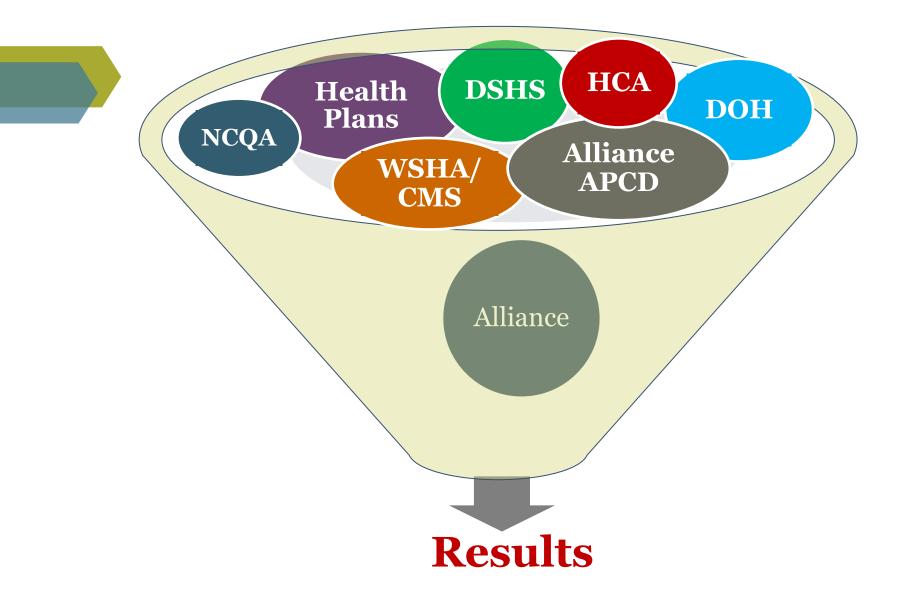






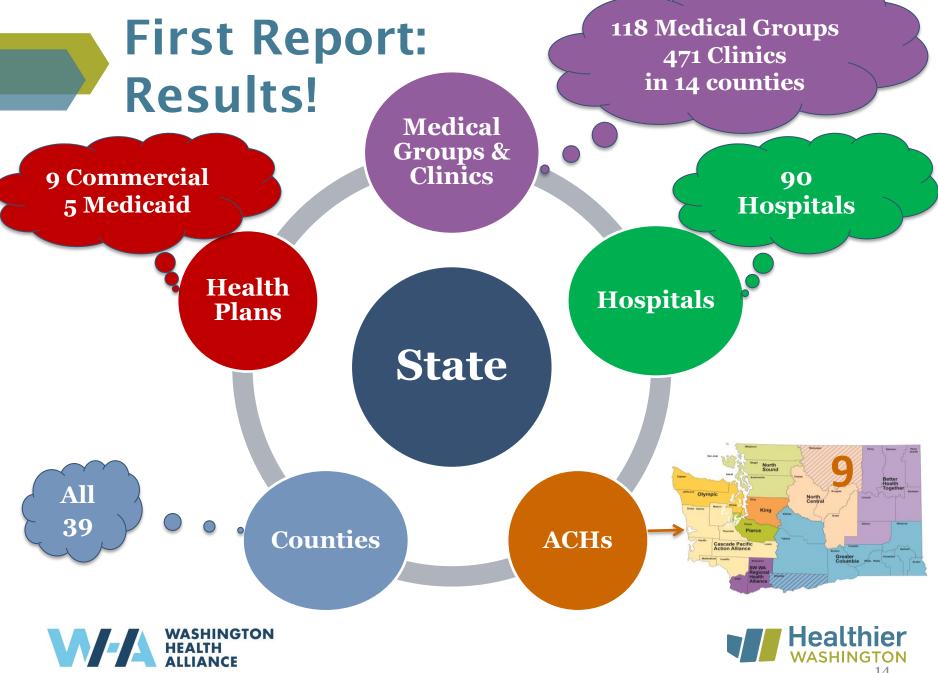






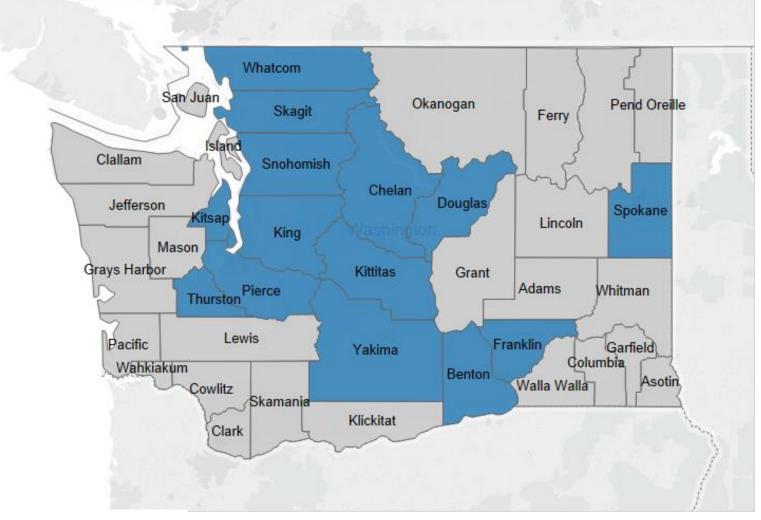






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#### Medical Group and Clinic Reporting 14 Counties in 2015, 39 Counties in 2016







# **Overview of Findings - 2015**

- Washington State has a long way to go to consistently be in the top 10% of national performance in the delivery of high quality care.
- Variation in performance results by county, medical group, clinic and hospital is a big and persistent problem in the delivery of health care.
- For many quality measures, there has been little improvement over time.
- Too many patients in Washington are <u>not</u> receiving the evidencebased care they need to remain healthy or manage their health conditions.
- Improvement is elusive but worthy of the chase.
- Local successes prove that delivering top quality health care is an achievable goal here in Washington.





# **Where to Find Results:**







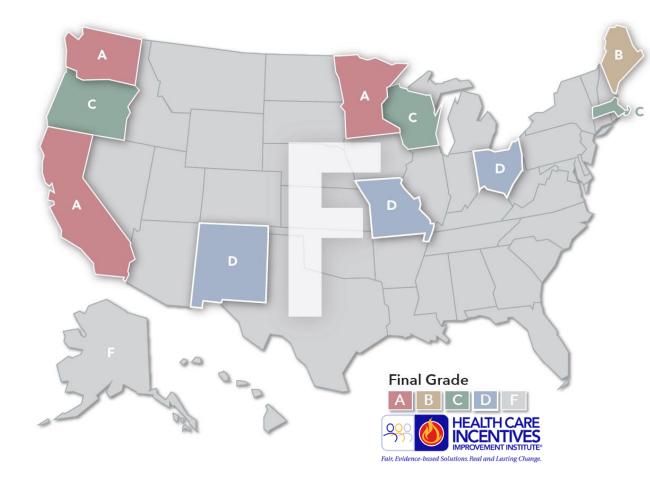


#### www.wacommunitycheckup.org





### Washington Gets an A for Transparency!



HCI3 State Report Card on Transparency of Physician Quality





## Challenges

- Measure selection limited by:
  - Availability of nationally vetted measures in all areas of interest
  - Currently available data sources in Washington
    - Future: WA-APCD (for price/cost of care)
    - Future: Clinical Data Repository
- Attribution of Care



- Pairing patients and providers in a predominantly PPO market is difficult
- Accurately connecting data on social determinants to claims and clinical data
- Privacy restrictions





# Closing

Washington is a leader for agreeing upon a Common Measure Set and publishing results for the state, medical groups and clinics,



hospitals, health plans, ACHs and counties.

- Our hard work on transparency is being recognized nationally.
- BUT, we will not achieve our overarching goal of being in the top 10% nationally until we own the problem of variation and fix it.









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