

Data Collection and Reporting Results

Dolores Yanagihara

Data Collection Methodology

- Administrative data ONLY
- Health plan information may be augmented by physician group self-reporting
- All information must be audited
- Independent entity to aggregate data

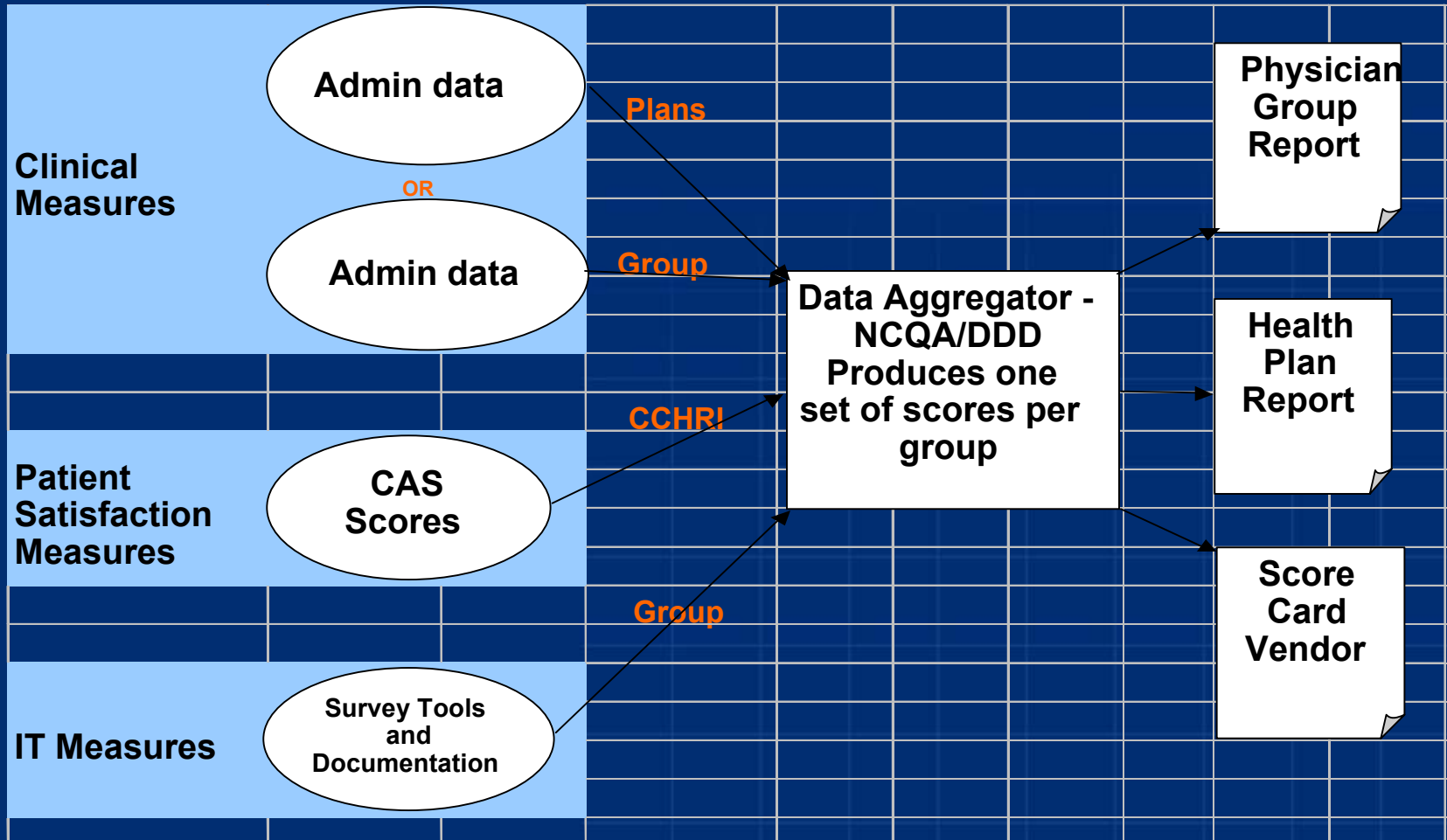
Data Flow Issues

| LDL<130 Rates - Diabetes Population | N | Admin-Only Mean | All-Data Mean |
|---|----------|------------------------|----------------------|
| National HEDIS Rates, MY 2003 | 313 | 25 | 59.8 |
| P4P Plan HEDIS Rates, MY 2003 | 7 | 8.4 | 60 |
| P4P Plan-Specific Rates, MY 2004 | | | |
| Plan 1 (not used in aggregation) | | 0.0 | |
| Plan 2 (not used in aggregation) | | 0.5 | |
| Plan 3 (not used in aggregation) | | 1.0 | |
| Plan 4 (not used in aggregation) | | 6.3 | |
| Plan 5 | | 21.4 | |
| Plan 6 | | 25.9 | |
| Plan 7 | | 26.3 | |
| Self-Report Average | | 51.0 | |

Data Collection Sources

- Clinical measures are collected from health plans and self-reporting physician groups
 - All results must be audited by an NCQA-certified auditor
- Patient Experience measures are collected via Consumer Assessment Survey (CAS; similar to CAHPS)
- IT Adoption measures are self-reported by physician groups via online tool
 - Additional documentation reviewed by NCQA
 - Random audits conducted

Data Collection & Aggregation



Note: 6 of 7 Plans using aggregated dataset for payment calculations

The Power of Data Aggregation

Aggregating data across plans creates a larger denominator and allows valid reporting and payment for more groups

| Health Plan Size | # of Health Plans | % physician groups with sufficient sample size to report all clinical measures using <u>Plan Data Only</u> | % physician groups with sufficient sample size to report all clinical measures using the <u>Aggregated Dataset</u> |
|------------------|-------------------|--|--|
| < 500K members | 3 | 16% | 70% |
| >1M members | 4 | 30% | 65% |

Data Validation Process

- Preliminary results are released to each physician group for validation (via web download)
 - Clinical: by measure, by plan
 - Patient Experience
 - IT
- Identified issues are explored and resolved prior to final results being released

Reports to Health Plans

Include the following information by physician group, by measure:

- Reported denominator and rate
- Source of reported rate
- Percentile range for reported rate
- Denominator and rate from aggregated plan data
- Which plans' data included in aggregated rate
- Denominator and rate for self-reporting groups

Reports to Health Plans

Include the following threshold data for each measure:

- Number of groups with valid result (=denominator of 30+)
- Mean rate
- Standard Deviation
- Minimum result
- Maximum result
- Percentile values for 10th to 90th percentile

Reports to Physician Groups

Include the following information for each measure:

- Rate to be reported
- Denominator
- Data Source
(Self-reported or Plan aggregated)
- Number of groups with valid result
- Mean
- Standard Deviation
- Maximum result
- Minimum result
- Percentile values for 10th to 90th percentile