

# Successes in Regional Collaboration to Achieve the Triple Aim- Oregon

Pay for Performance Summit

San Francisco

March 24, 2014

### Agenda

- Oregon Health Care Quality Corporation (Q Corp) Background
- Priority Projects TCOC and Payment Reform
- Lessons Learned
- Questions?



# Q Corp Mission



To improve the quality and

affordability of health care in Oregon by leading community collaborations and producing unbiased information.



### Q Corp Vision

- Q Corp is a leader of results-oriented collaboratives where
   Oregon stakeholders come together to improve the quality and
   reduce the costs of health care in our state.
- Q Corp collaborates with Oregon stakeholders to produce transparent data and analytics that are highly valued and actionable to improve the health outcomes of Oregonians.
- 3. Q Corp is a **trusted source of information that is routinely used** in health care planning, programming, delivery and evaluation.



# Q Corp Partnership



- Started in 2000
- Nonprofit
- Multi-stakeholder
- Stewardship of collaboration
- NRHI, RWJF AF4Q, AHRQ CVE, CMS QE



### 2012-2013 Funding Organizations

- Atrio Health Plans
- Bridgespan
- CareOregon
- FamilyCare Health Plans
- Health Net of Oregon
- Health Republic
- Kaiser Permanente
- LifeWise Health Plan of Oregon
- Moda Health
- Oregon's Health Co-op
- Oregon Health Authority

- PacificSource Health Plans
- Providence Health Plans
- Regence BlueCross BlueShield of Oregon
- Tuality Health Alliance
- Trillium
- Robert Wood Johnson Foundation
- Northwest Health Foundation
- Custom reports and consulting



## Claims Data Summary – 2013

 3. 7 million unique patients captured in claims demonstrating the value of aggregating data

500+ million medical and pharmacy claims records



## Claims Data Summary – 2013

- 83% Commercial population
- 98% Medicaid population
- 95 % Medicare
  - CMS "Qualified Entity" received Medicare FFS
     Data for first time in 2014



### **Benefits of Collaboration**

- Nearly 90% of the primary care clinics in Q Corp's provider directory contract with 8-11 participating payers.
- Payers and providers participating in Q Corp's measurement initiative are able to benchmark provider, clinic and medical group performance against Oregon and national benchmarks.

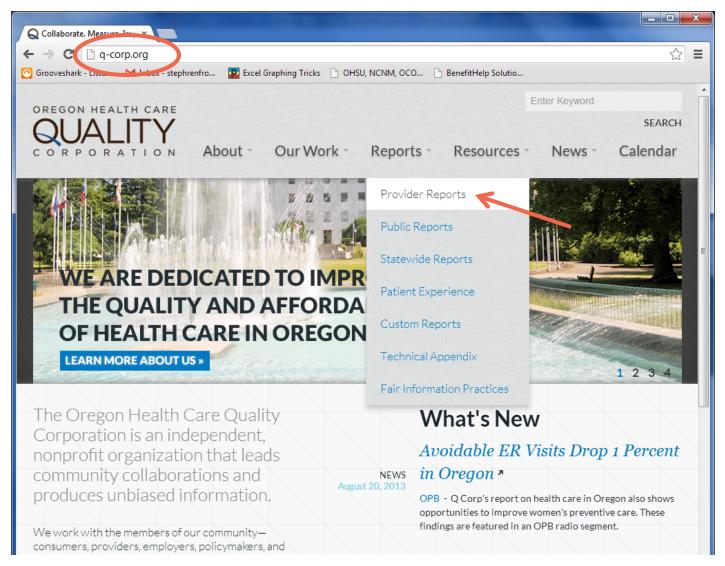


## Q Corp Provider Directory

- Q Corp developed and maintains the most comprehensive directory of primary care providers in Oregon.
- The provider directory contains information on 3,394 primary care providers currently practicing in Oregon at 741 adult primary care and pediatric clinics.
- 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.



### How to Access Secure Portal





### 2013: 14 Data Suppliers and 25 Primary Care Measures

#### **Existing Public Measures**

- **>Updated July 2014**
- ➤ Previously reported 2013
- Breast Cancer Screening (age 50-74)
- Cervical Cancer Screening
- Chlamydia Screening
- Diabetes HbA1c Test
- Diabetes LDL-C Test
- Heart Disease Cholesterol Test
- •Well-Child Visits for Children 0-15 Mths, 6+ Visits
- •Well-Child Visits for Children 3-6 Yrs
- Appropriate Use of Antibiotics for Sore Throats
- Appropriate Low Back Pain Imaging
- •Generic Prescription Fills: SSRIs, SNRIs, DNRIs
- Generic Prescription Fills: Statins

#### **New Public Measures**

- ➤ Added to public reports July 2014
- Asthma Medications Child

#### **Private Measures**

- Breast Cancer Screening (age 40-49)
- Breast Cancer Screening (age 40-69)
- Breast Cancer Screening (age 85+)
- Diabetes Kidney Screening
- Diabetes Eye Exam
- •Well-Child Visits for Children 0-15 Mths, 5+ Visits
- Potentially Avoidable Hospital Admissions (3)
  - Overall, Acute, Chronic
- Potentially Avoidable ED Visits (2)
  - Child, Adult
- •Plan 30 day All-Cause Readmissions

#### NFW:

- Alcohol Misuse, Screening, Brief Intervention, Referral for Treatment (SBIRT)
- Ambulatory Care: Outpatient and ED visits (2)
- Child, Adult
- Generic Prescription Fills: Anti-hypertensives
- Developmental Screenings in the first 36 Months of Life
- Adolescent Well-Care Visits
- Follow-up Care for Children Prescribed ADHD Medications
  - Initiation
  - Continuation and Maintenance



### Priority Projects for 2014 -2015

- Strong track record of public reporting, provider reporting on quality and utilization measures
- Build on strength as convener and trusted neutral source of date to expand to cost and payment reform activities
- Unanimous Board support
- Robert Wood Johnson AF4Q and RWJF NRHI TCOC project funding



## Priority Projects for 2014 -2015 TCOC

- RWJF AF4Q 4.0 build a portfolio of products that will address the needs of multiple stakeholders including total cost of care measures, analytics and payment reform building blocks.
- Payment Reform Pilot Projects began in 2013 with identification of three key areas of focus: Behavioral health integration, maternity and orthopedics focused on knee
- Q Corp provides community convening, project management, Technical Assistance, data and pilot support.



# Priority Projects for 2014 -2015 TCOC

 HHS Cycle III grant to Oregon Department of Business and Consumer Services – Q Corp contract for cost transparency and translation using Oregon APAC

 All deliverables due in 2014 and 2015 with goal to develop prototypes for future development



# RWJF NRHI Healthcare Regional Cost Measurement & Transparency (HRCMT)

To develop and produce information to enable communities to reduce the total cost of care in multiple regions with replicable, multistakeholder driven strategies.



## RWJF NRHI HRCMT Project to date

- Selection & approach for use of a single risk adjuster
- Developed approach for creating meaningful benchmarks
- Agreement on acceptable levels of variations to produce valid comparisons
- Completed ACG risk adjuster training and contracting
- Physician Leadership Training planning underway
- Report scheduled for April 2015 with plan for scale



### **Lessons Learned**

- Very challenging work
- Power of collaboration is key multi stakeholder engagement is most difficult but has greatest potential
- Results from engaging community level stakeholders versus top down solutions
- No one has a magic bullet and lots of people trying different approaches
- Change fatigue get behind the wind if possible
- Transparent, trusted and actionable data must be available for all parties to make progress
- Stay tuned to the next chapter ......



# Questions?

### **Mylia Christensen**

**Executive Director** 

mylia.christensen@q-corp.org



