



The Future of Performance Measurement

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Overview

- What have we learned?
- What have we accomplished?
- The measurement toolkit
- Where do we go from here?

What we know



- Organization matters
- Information flow is critical (IT systems)
- Payment system trumps measurement
- Patients need to be engaged

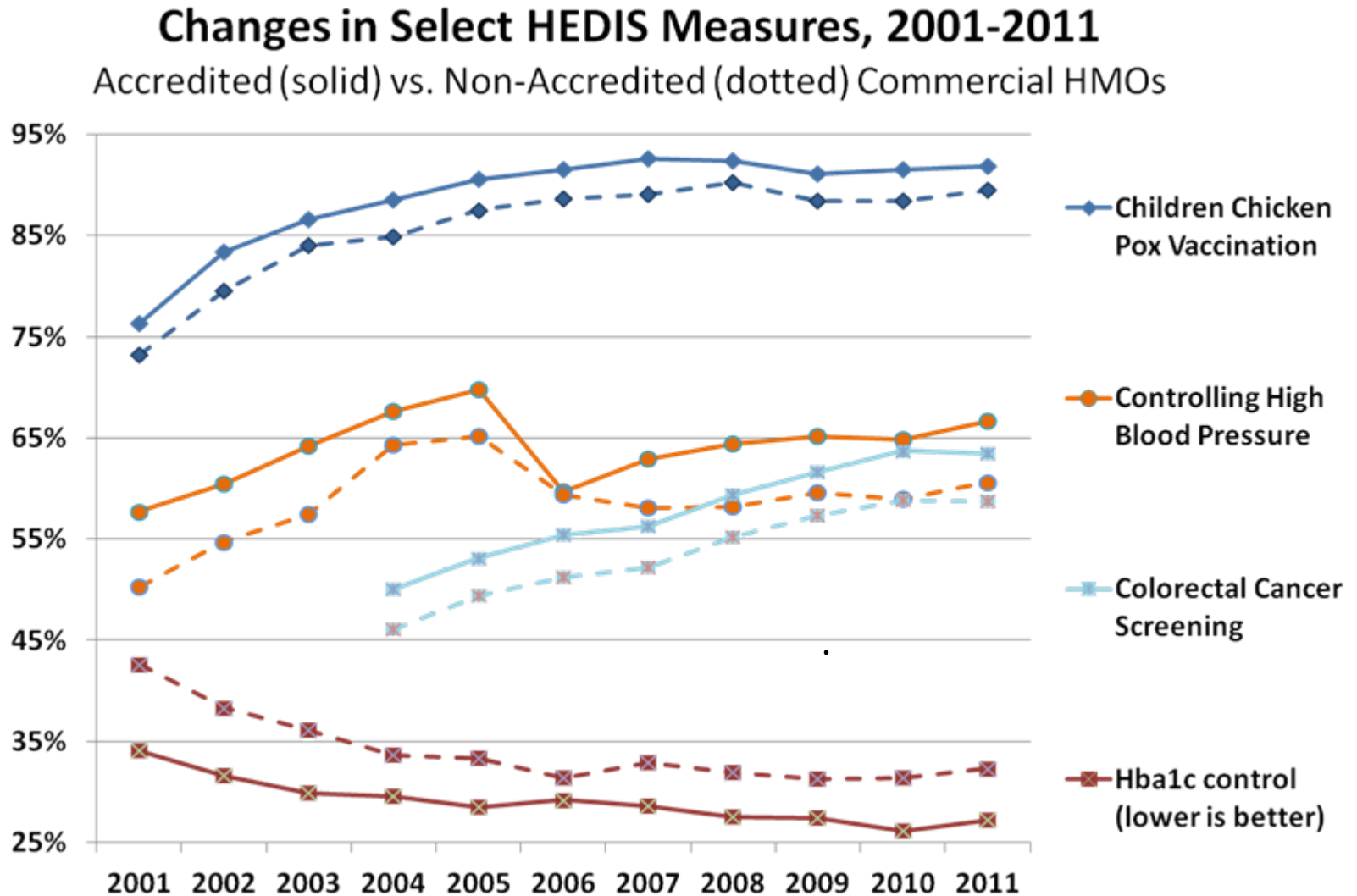
Accountability requires clarity about who is responsible for what



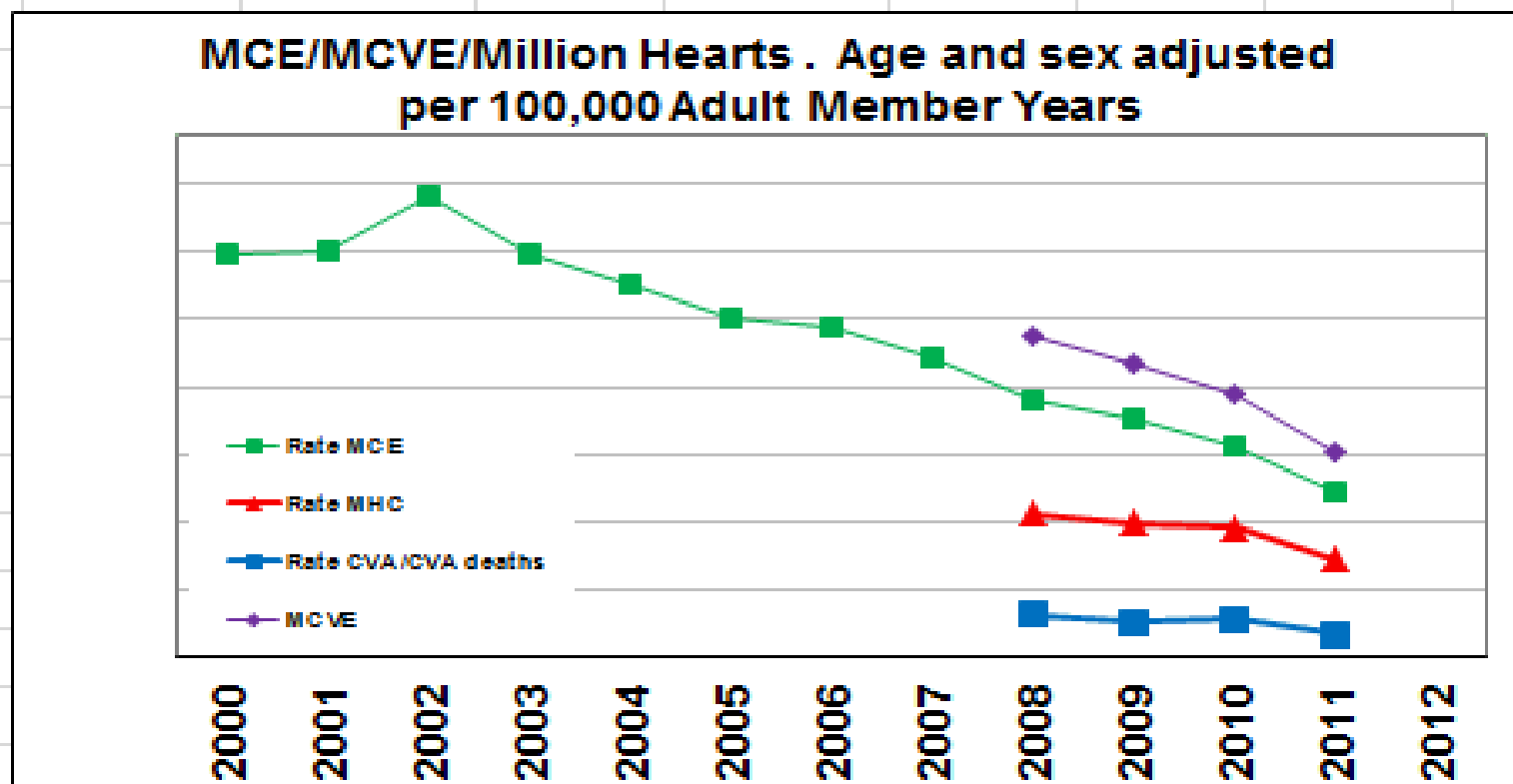


What have we accomplished?

HEDIS results have improved



CO KP cardiovascular event reduction



Notes: 2011 data based on claims and mortality as of July 2012

MCVE-Major Coronary Events and CVAs

MCE- Major Coronary Events

MHC- Million Hearts Campaign (MI and CVAs)

CVA/CVA deaths

Patient-centered medical homes (PCMH) have improved primary care

- Improved patient experience
- Reduced clinician burnout
- Reduced hospitalization rates
- Reduced ER visits
- Increased savings per patient
- Higher quality of care
- Reduced cost of care

See journal citations in
NCQA White Paper:

**The Future of
Patient-Centered
Medical Homes**

<http://bit.ly/1dQQ9kn>

Destination: accountable medical "neighborhoods"



We're more clear about what needs to be done



- Organize systems for effectiveness and affordability
- Know who's responsible for what
- Make sure there's good IT connectivity across the system
- Improve performance



The measurement toolkit

Gap analysis

What we have	What we want
Many structure and process measures, some intermediate outcomes	Outcome measures and performance reporting across systems
Uneven knowledge about specialty care	Measurement that comes naturally from workflow, rather than being imposed on workflow

How can we create momentum?



Can the whole health care system be turned at once?



Build on primary care as the foundation



Structure, process & outcome measures
all have their place



Let's have a bold measurement agenda

**A U D E N T I S
F O R T U N A
I U V A T**

Fortune favors the bold. (Virgil)

Use outcome measurement for procedures



- Hips
- Knees
- Backs
- Cataracts
- Heart surgery, stents

Make sure to get patient-reported outcomes
Make sure procedures are appropriate

Use patient safety measures in hospitals



- Infection rates
- Sepsis
- Medication errors
- Iatrogenic preterm deliveries
- HCAHPS
- Etc.

Then there's the really hard stuff



- Cancer
- Multiple chronic conditions (e.g., frail elderly)
- Intractable illness



Where do we go from here?

Emulate successful examples



- Cystic fibrosis benchmarking
- Unützer et al. IMPACT
- Global cardiovascular risk (GCVR) pilot

Benchmarking works

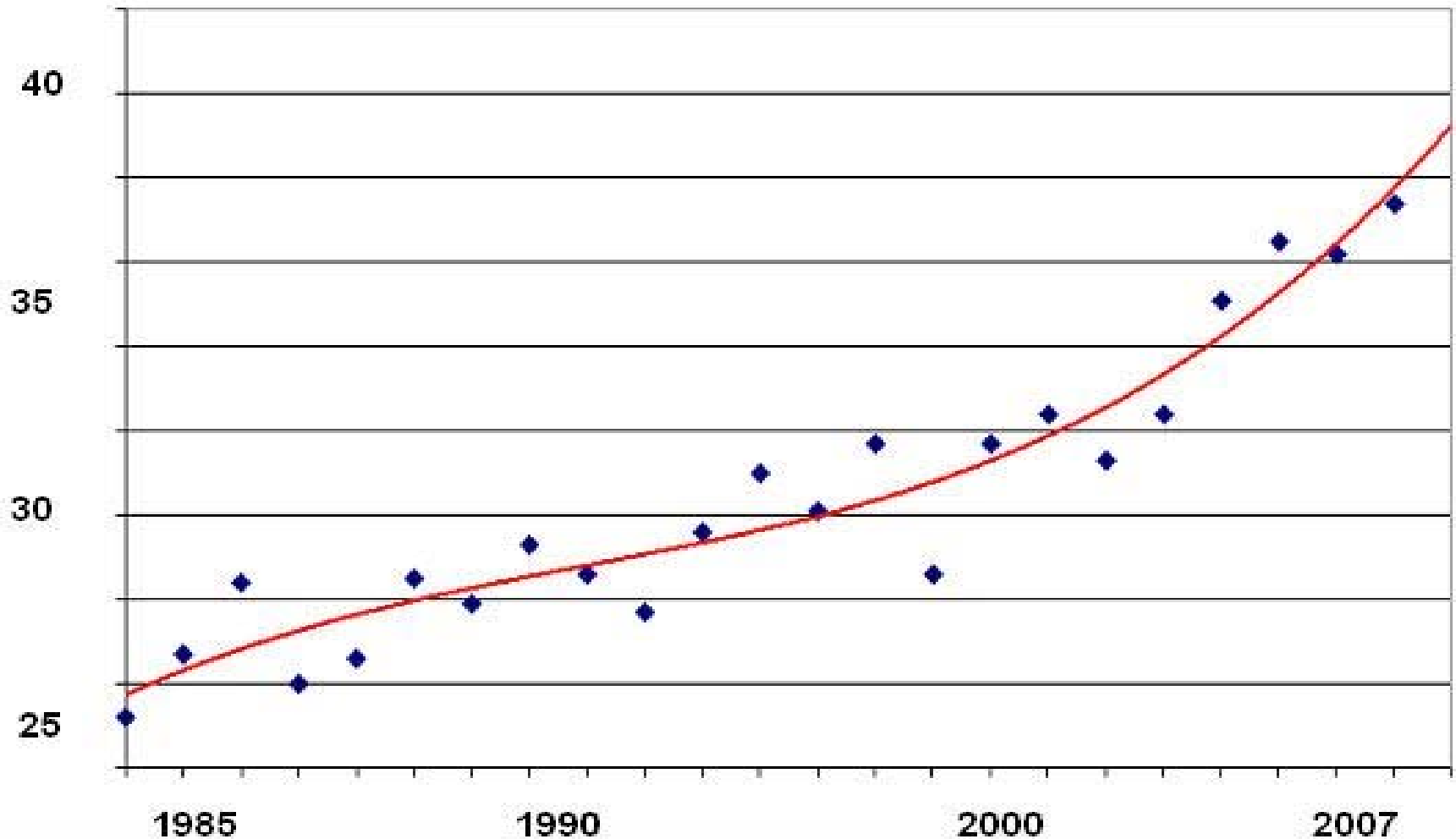


- Benchmark outcomes
- Study what works
- Spread best practices
- Engage parents



Kids are living longer with cystic fibrosis

Median Predicted Survival Age – Cystic Fibrosis



Source: Medscape

IMPACT is a system of care



Primary Care Practice with Mental Health Care Manager



Outcome Measures



Treatment Protocols



Population Registry



Psychiatric Consultation

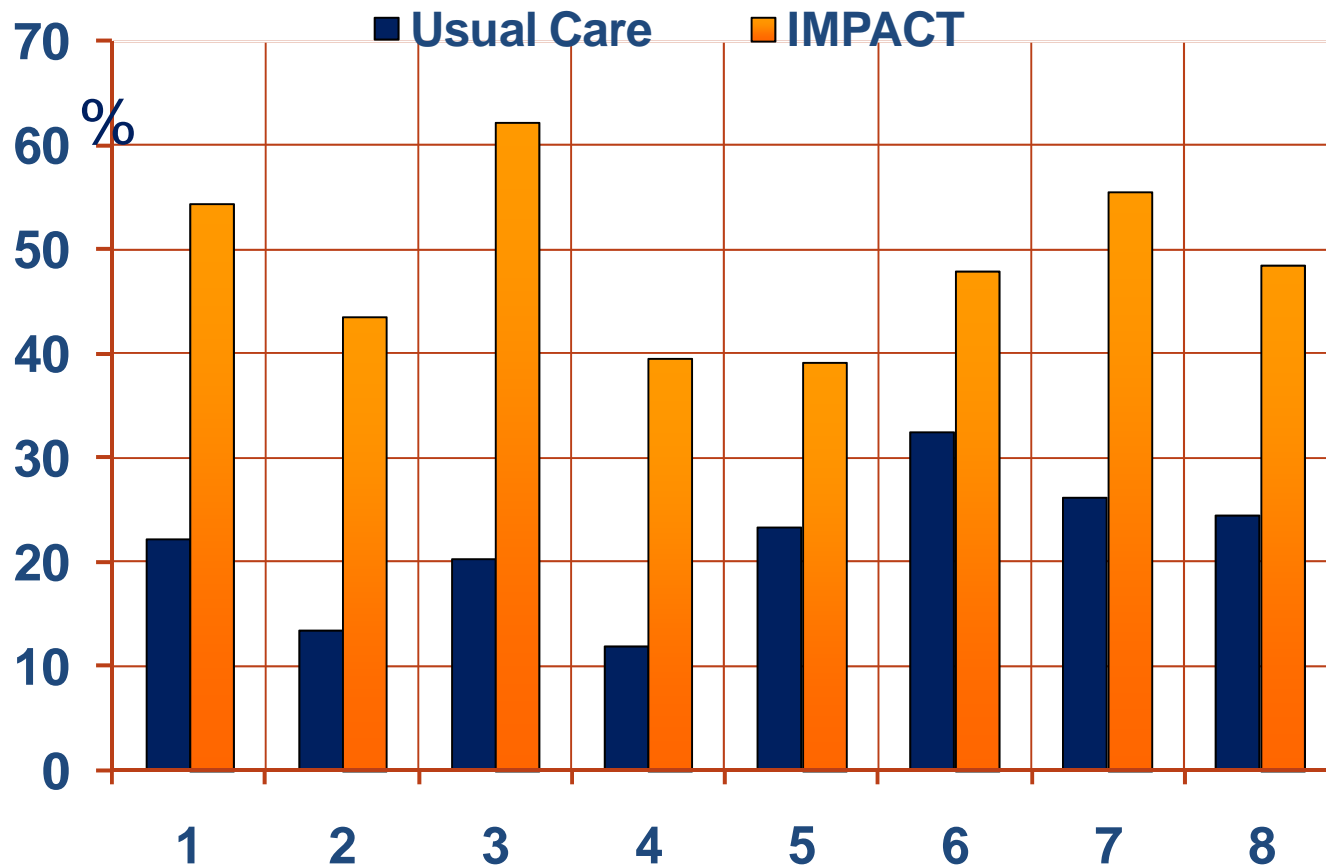
Building an accountability framework



1. Begin with structure measures
2. Then focus on process measures
3. Build up to outcome measures

IMPACT doubles effectiveness of care for depression

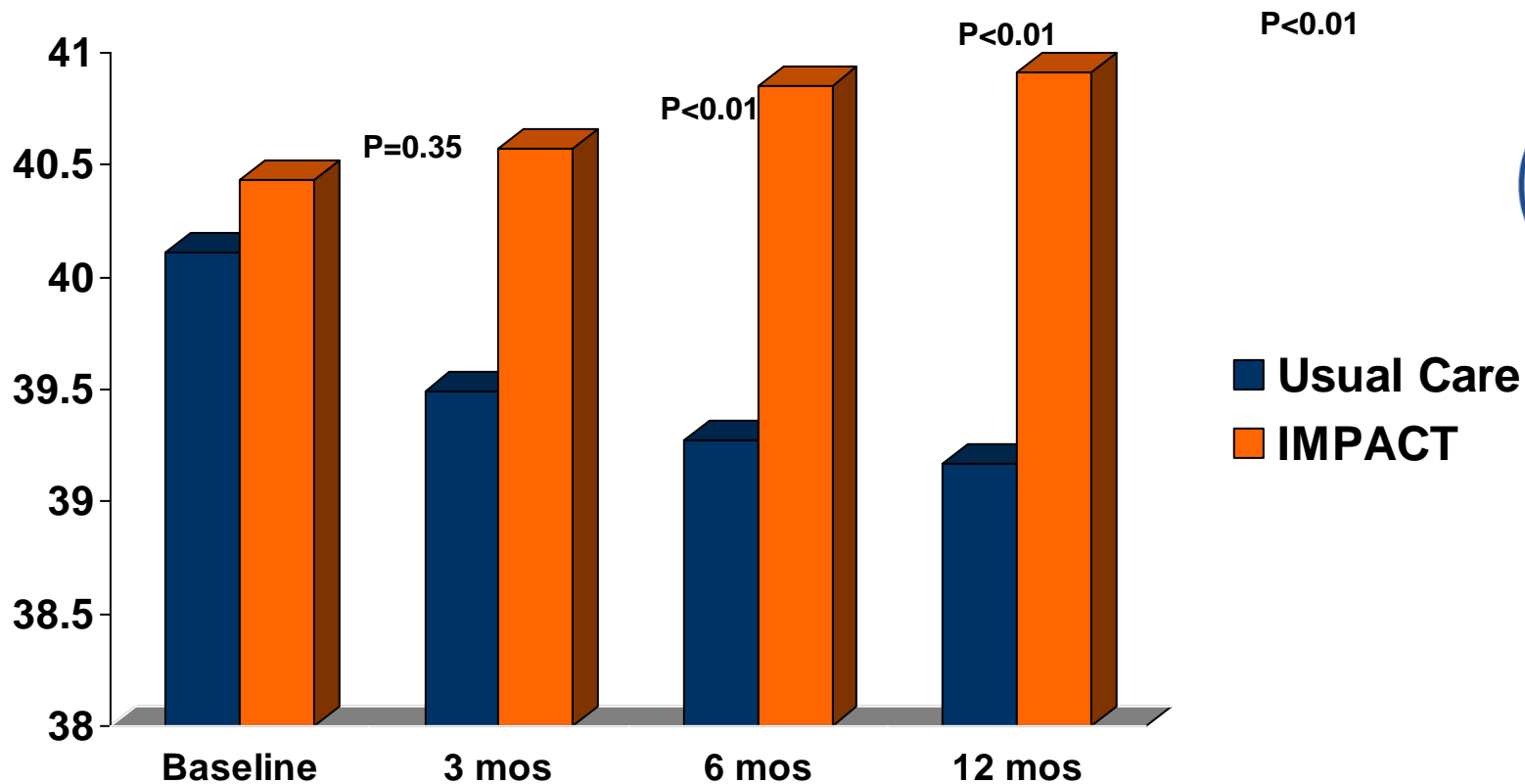
50 % or greater improvement in depression at 12 months



Participating Organizations

IMPACT improves physical function

SF-12 Physical Function Component Summary Score (PCS-12)



P4P built on process indicators



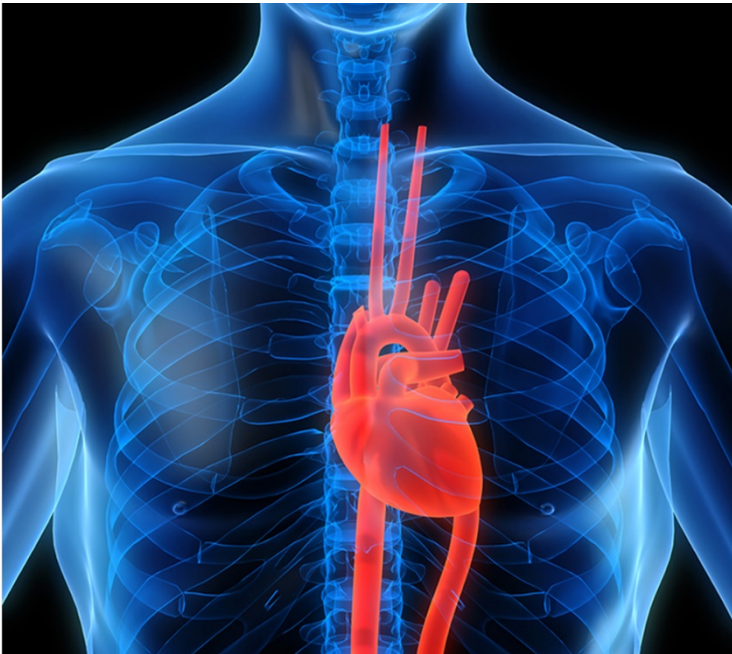
Quality Improvement With Pay-for-Performance Incentives in Integrated Behavioral Health Care

Unützer et al., Am J Public Health. 2012;102: e41-e45

- Timely follow-up for patients
- Psych follow-up for patients with no significant improvement
- Regular tracking of psychotropic meds

Accountability for process or outcomes?

Global Cardiovascular Risk (GCVR)



- RWJF grant to NCQA to develop measures to manage CV risk
- Predictive risk calculators identify, manage patient risks to improve outcomes

GCVR project aims



- Check feasibility of collecting data from EHRs to calculate provider results
- Learn from providers how meaningful, useful GCVR score is as risk predictor

GCVR field test



- 5 orgs provide patient data files derived from EHRs
- Interviews assess usability, feasibility and acceptability of new approach

GCVR improvement and payment arrangements



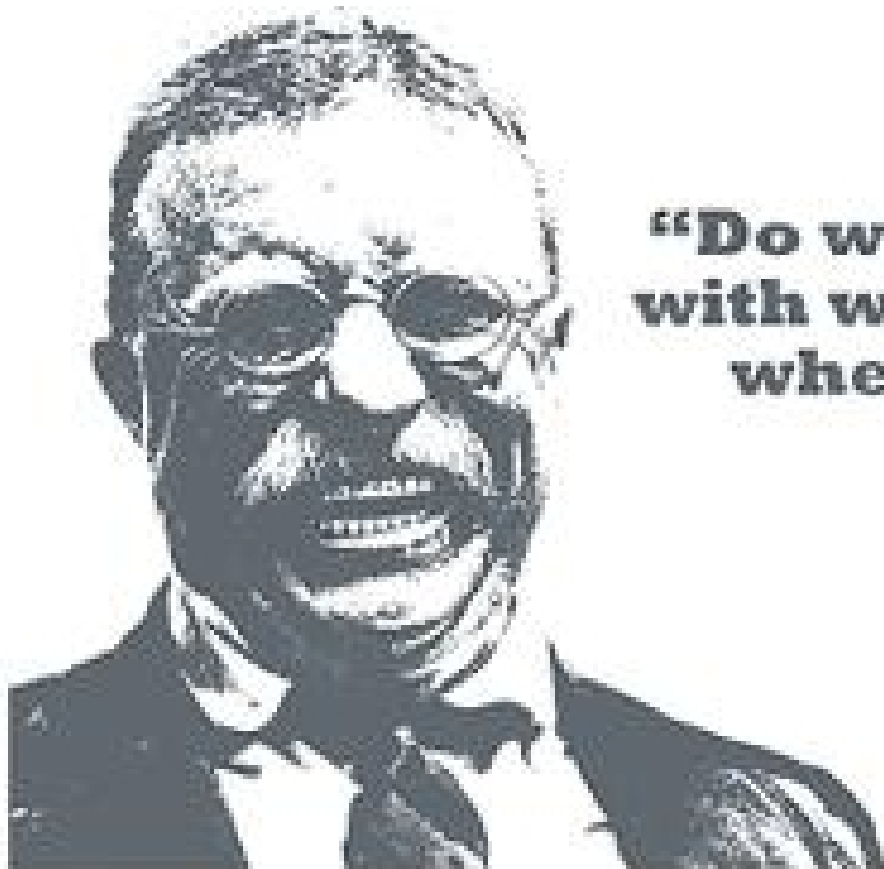
- Stratify and engage patients
- Measure risk reduction
- Reward risk reduction
- Focus on outcome measures to lower population health risk

What is the model?



1. Organize for success
2. Manage against process benchmarks and patient-reported outcomes
3. Use accountability for quality improvement where benchmarking outcomes is unfair

A lesson from history



**“Do what you can,
with what you have,
where you are.”**

**Theodore
Roosevelt**

Experiment with a few advanced entities.
Then scale what works to everyone else.



In conclusion

I acknowledge what I'm suggesting is hard.

I'm daunted by all that needs to be done.

We just need to get to work.

work
hard

stay
humble



**The voyage of discovery is not
in seeking new landscapes
but in having new eyes.**

Marcel Proust



Thank you