



Pay For Performance Summit

Jeff Thompson, M.D.

Wisconsin Collaborative for Healthcare Quality



Members of the Wisconsin Collaborative for Healthcare Quality

Advanced Health

Affinity Health

Agnesian Health Care

Aspirus Wausau

Aurora Health Care

Bellin Health

Columbia St. Mary's

Dean Health System

Franciscan Skemp

Froedert & Community Health

Gundersen Lutheran

Luther Midelfort Mayo Health System

Marshfield Clinic

Medical Associates Health Centers

Medical College of WI

Meriter Hospital

Prevea Health

ProHealth Care

Hospital Sisters Health System

St. Joseph's Hospital

St. Mary's Hospital

ThedaCare

University of WI Hospitals and Clinics

University of WI Medical Foundation

Wheaton Franciscan Healthcare

Business/Labor Partners

At the Table/On the Board

The Alliance

Appleton Papers

Badger Meter

Daimler Chrysler

GE Healthcare

Schneider National

Sentry Insurance

Serigraph, Inc.

The Trane Company

United Auto Workers

Wisconsin Manufacturers
& Commerce (WMC)

WCHQ covers the entire state of Wisconsin



From the Beginning.....

- First Meeting in October 2002
- First WCHQ Publication in 2003

Why do this?

Take control, or be controlled

- Payer Pressure – Pay for Performance
- Employer Efforts – How to determine employees receiving quality care?
- Government Effort – CMS voluntary reporting, IOM, AQA, etc.

Wisconsin Collaborative for Healthcare Quality 2006-2007 Strategic Priorities

We are...

...a voluntary consortium of organizations learning and working together to improve the quality and cost-effectiveness of health care for the people of Wisconsin.

What we do...

We will develop and publicly report measures of healthcare performance to drive improvement in care; design and promote quality improvement initiatives; and advocate for enlightened policy which supports our work.

What we aspire to be...

We will be a recognized and respected national leader in public reporting; an organization of integrity and trust; transparent and inclusive in its governance and core processes; and willing to innovate, adopt, and continuously improve.

Purchasers

Providers

Payers

VS

Payers

Purchasers

Providers

Transparency

- Internal pressure versus market to improve
- Shared Effort
 - Collaborative members build measures
 - Improvement thru sharing of best practices
 - Competitors become allies (for quality)
 - “How did you improve your A1c values?”

Building a Better Measure

Our Mission:

- To build a set of ambulatory measures to enable medical groups and/or health systems to collect and report quality of care data using medical group data on **all** patients (regardless of EMR)
- To build inpatient measures that are different, but complimentary, to the WHA project such as value quadrant graphs.

The Essential Blueprint

- “Three Questions”
 - 1) Does the Patient have the condition?
 - 2) Is this a Patient we manage?
 - 3) Is this Patient current in our system?
- Coordinate with existing & established measures
- Alignment with national scene

Issues/Challenges

- Nomenclature (What is the “cost”?)
- Use of Composite Measures (Do they reflect quality?)
- Methodological Considerations (risk-adjustment, construction of composites)
- Display (How do we know when one hospital is better than another?)

[About WCHQ](#)

[2005 Forum](#)

[WCHQ Members](#)

[Our Measures](#)

[Auditing & Validation](#)

[Using Our Reports](#)

 [View Our Reports](#)

Focused on Quality. Creating Value.



Find out how WCHQ can help you (select one): [Consumers](#) [Businesses/Purchasers](#) [Providers](#)



View Our Reports

View our latest Performance and Progress Report **ONLINE.**



The WCHQ website is made possible with the generous support of **WEA Trust**



What's New

WCHQ 2nd Annual Fall Forum
November 11, 2005

Collaborative Continues to Grow
Statewide

Healthcare Quality Group announces
new performance measures

View the new Efficiency Measures

HealthClick Wisconsin - Healthcare
Performance Reporting Online

Working Together to Improve Quality:

Measures Updates

Send me e-alerts when measures are updated.

Email:

SEND

WCHQ, a Member of:





View Our Reports

[Home](#) > [Reports](#)

There are 2 ways to get started:

1

OR

2

Welcome to our 2005 Performance & Progress Report

Our growing portfolio of healthcare quality measures provides valuable information to anyone wanting to learn more about the quality of health care in Wisconsin.

Here you will find independently audited results of a year's worth of measurement and data collection undertaken by some of Wisconsin's most quality-conscious healthcare provider organizations.

View Reports by **Provider Type and Region(s)**

TYPE OF PROVIDER

- Physician Group
- Hospital
- Health Plan

All Regions

- Central
- Fox Valley
- North Eastern
- North Western
- South Eastern
- Southern
- Western

View Map
of Regions



NEXT

View Reports by **Topic or Category**

CLINICAL TOPIC

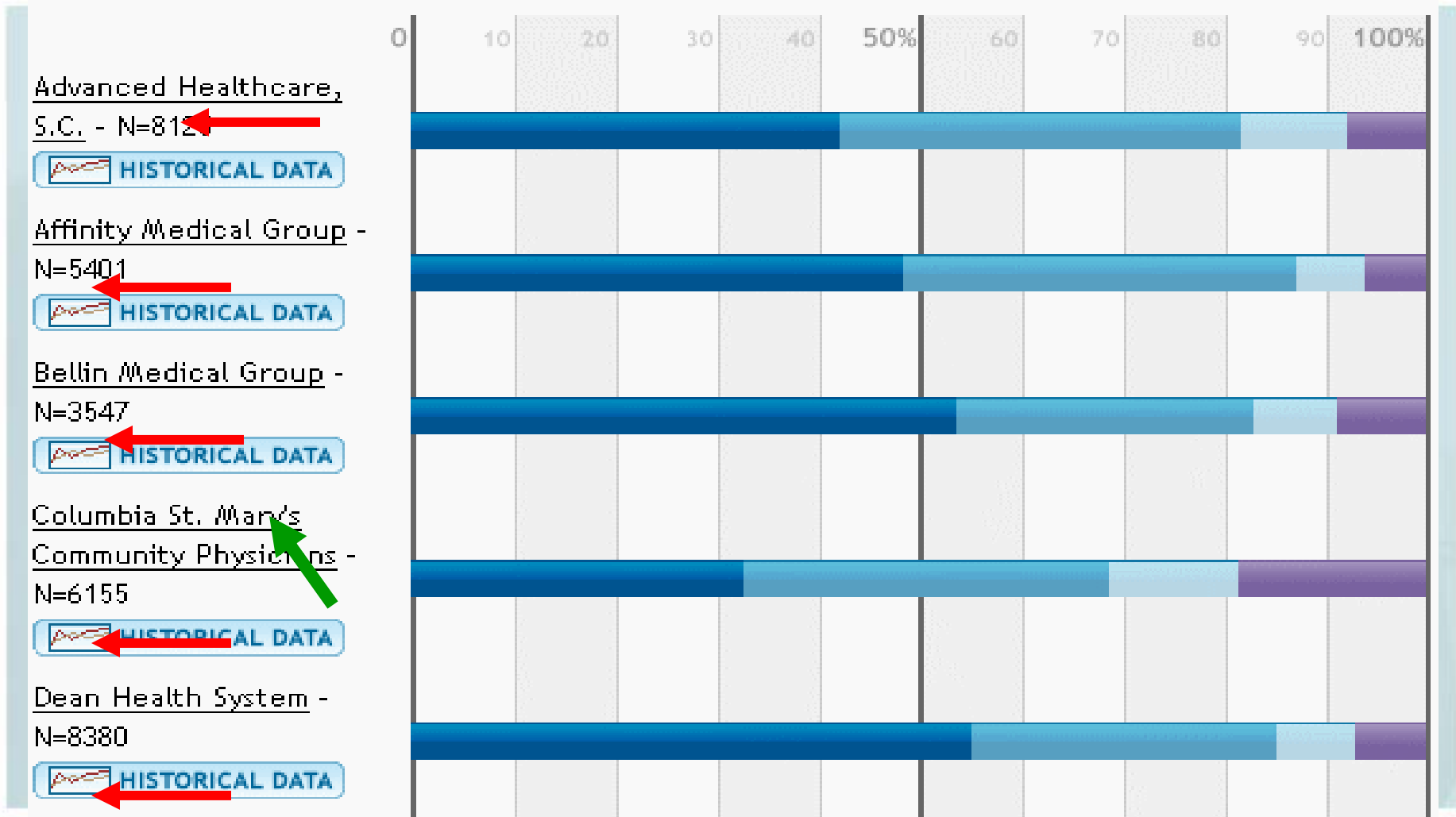
- [Access](#)
- [Critical Care](#)
- [Diabetes](#) **NEW**
- [Health Information Technology](#)
- [Heart Care](#)
- [Hypertension](#) **NEW**
- [Patient Satisfaction](#)
- [Pneumonia](#)
- [Surgery](#)
- [Women's Health](#)

INSTITUTE OF MEDICINE CATEGORY*

- [Safety](#)
- [Timeliness](#)

Blood Sugar (A1C) Control

Denominator = All Patients/All Payers

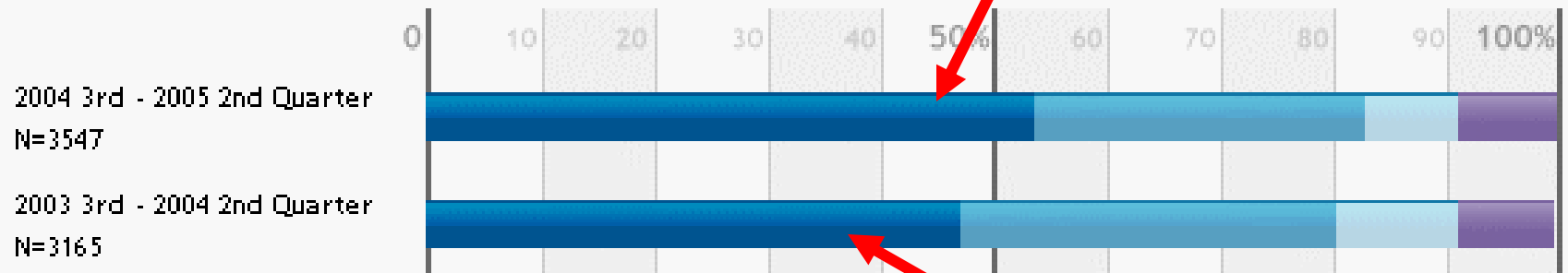


408 Diabetics Newly Under Control Bellin Patients w/ A1c<7 (6.41% Increase)

Blood Sugar (A1c) Control

Bellin Medical Group

A1c<7 Year One



n: Sample size of patient population measured

N: Total patient population measured (not a sample)

Use caution when drawing conclusions for providers/organizations that have a small sample size (generally considered 25 cases or less).

A1c<7 Baseline

From 72% to 82% (one year) Advanced Healthcare - 10% Increase

Historical Data for LDL Cholesterol Testing within the last 12 months

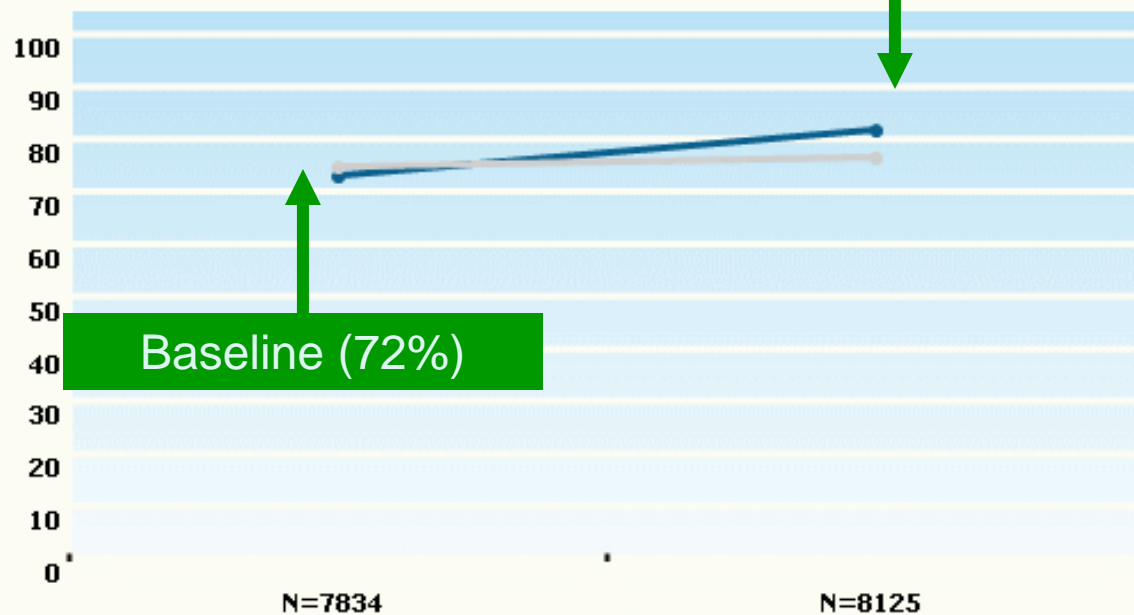
Advanced Healthcare, S. C.

● Advanced Healthcare, S. C.

● WCHQ Average

Units: %

PREFERRED ↑

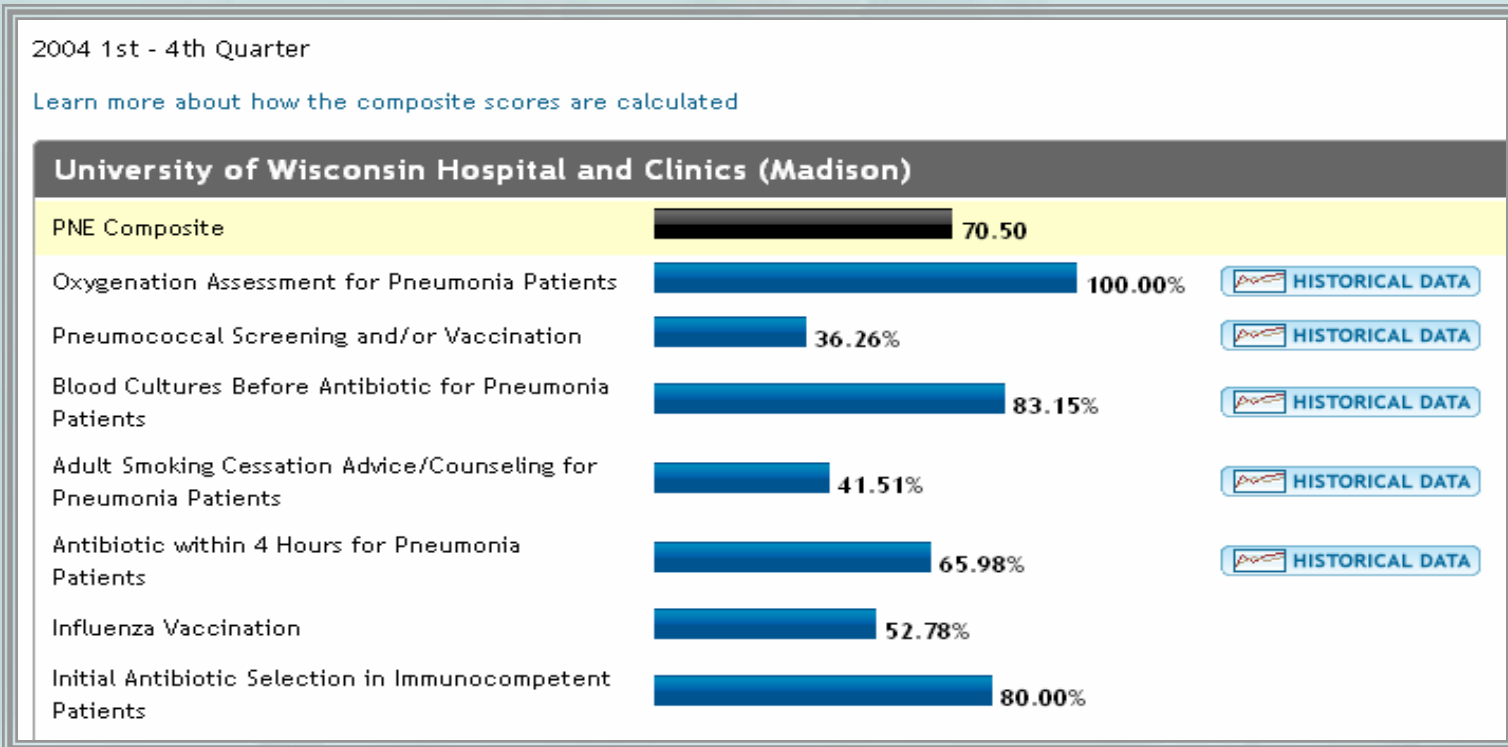


n: Sample size of patient population measured

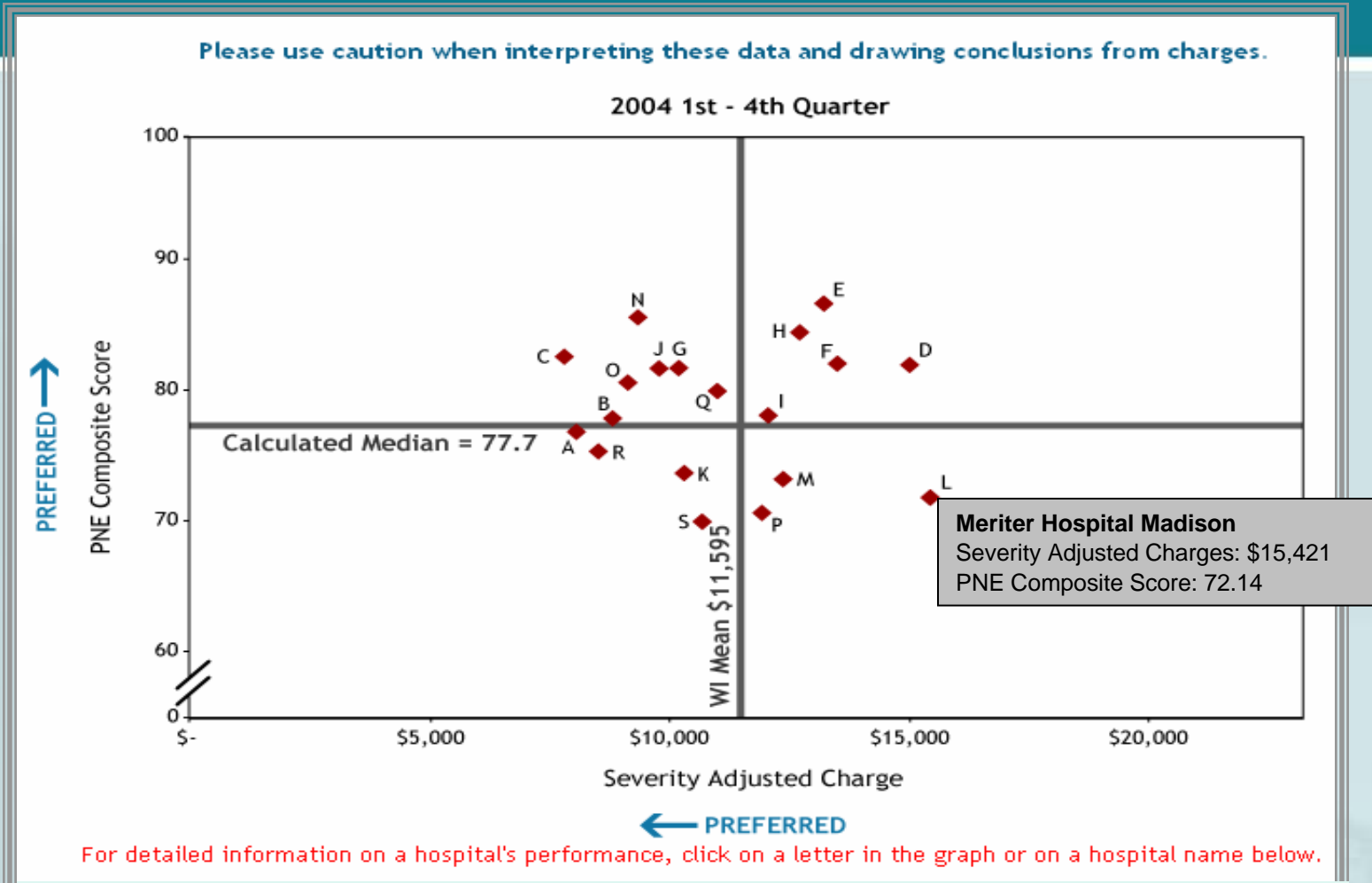
N: Total patient population measured (not a sample)

Pneumonia Composite Score Summary

The measures below represent the individual components of best-practice care for a patient with pneumonia. The composite score represents the reliability of the hospital's processes for making sure these components are delivered to the patient.

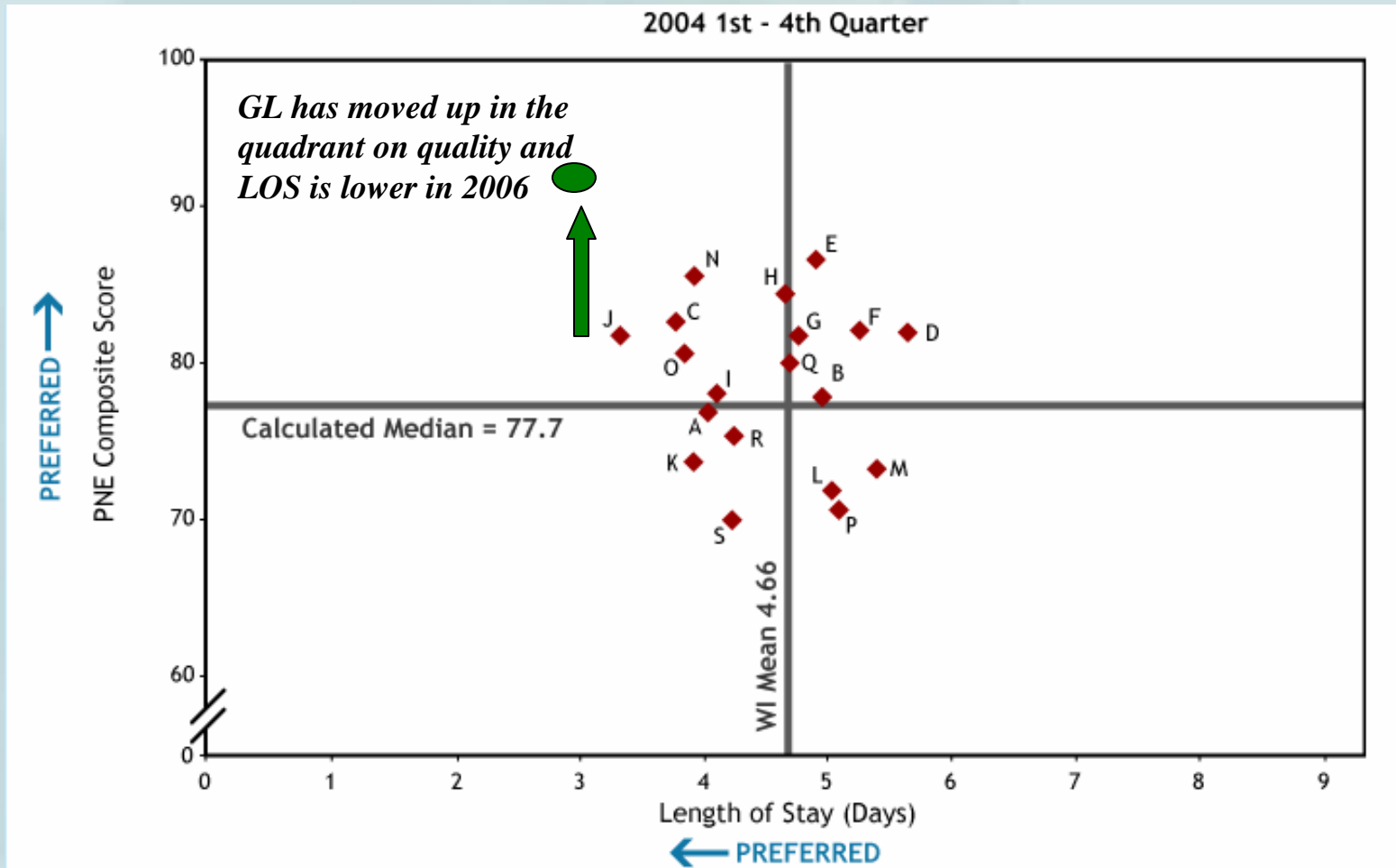


Pneumonia Care Hospital Charges and Quality Comparison



(A)	Appleton Medical Center (Appleton)	\$8,031	77.4
(L)	Meriter Hospital (Madison)	\$15,421	72.4
(O)	St. Mary's Hospital Medical Center	\$9,108	81.02
(S)	University of Wisconsin Hospital & Clinics (Madison)	\$10,670	70.5

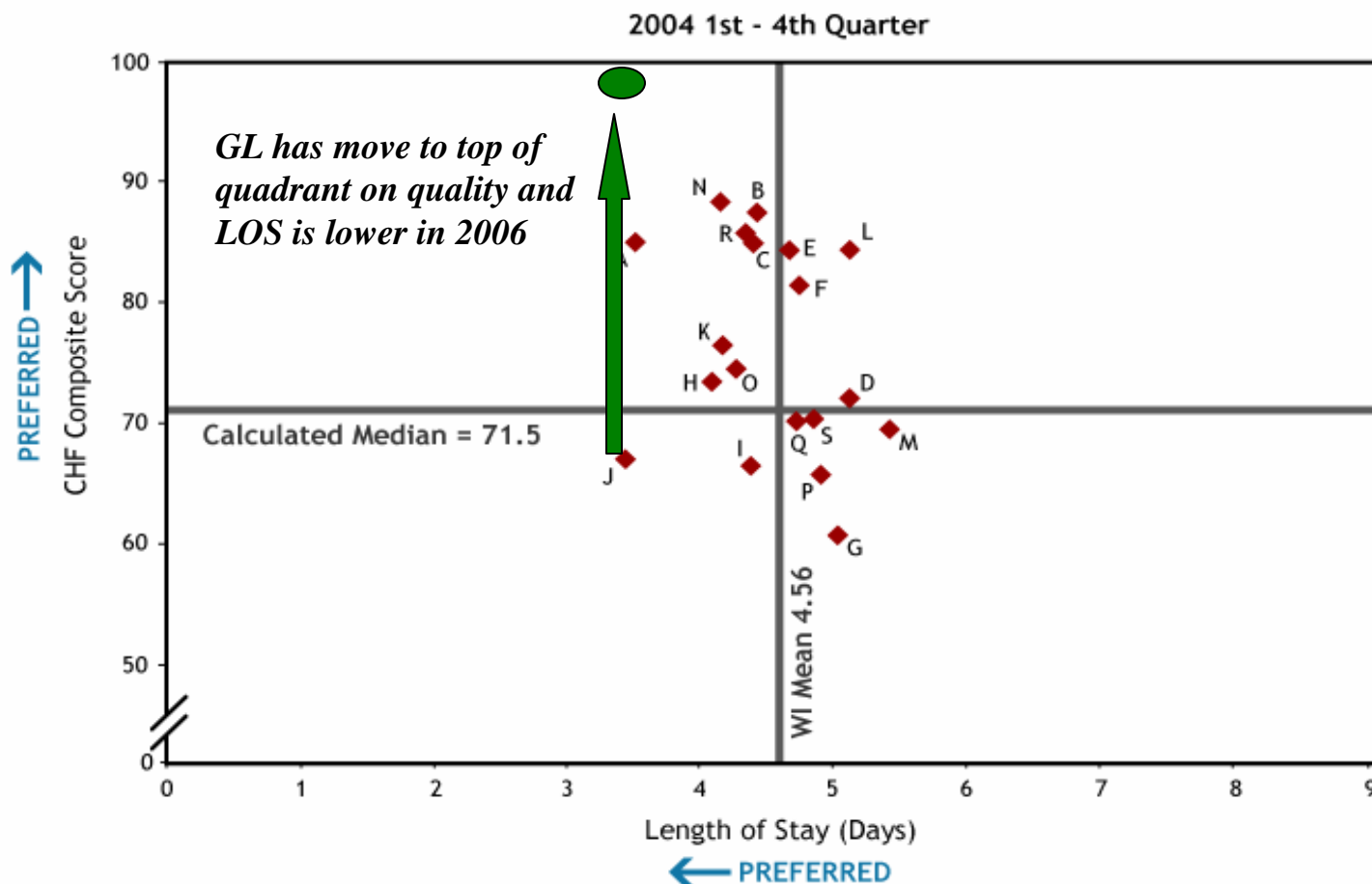
From WCHQ web site 2004 data - Pneumonia (NOTE: do not have an updated 2005 quadrant for all hospitals)



From WCHQ web site 2004 data - CHF

(NOTE: do not have an updated 2005 quadrant for all hospitals)

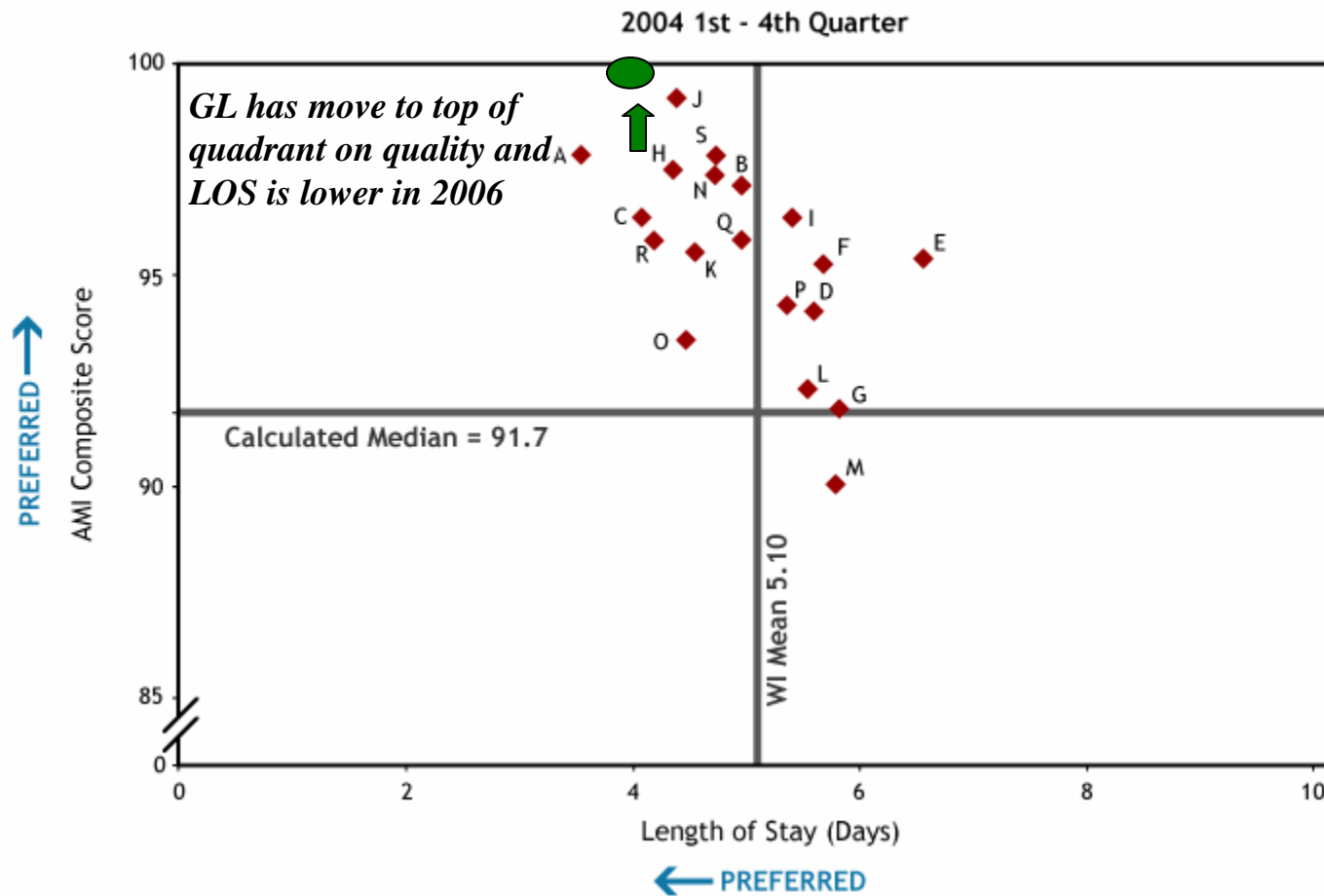
Please use caution when interpreting these data and drawing conclusions from charges.



From WCHQ web site 2004 data – AMI

(NOTE: do not have an updated 2005 quadrant for all hospitals)

Please use caution when interpreting these data and drawing conclusions from charges.



The Merger of Data Flow

- WCHQ – Inpatient and outpatient quality data
- WHA- Inpatient data
- WHIO- Broad financial data
- Will allow us to track and report “value” (Quality/Cost) for all patients, all payors, all segments of time, all preventative, intensive, or chronic healthcare issues.



Wisconsin Health Information Organization



Mission



Creating and maintaining a centralized data repository for:

- Measurement of the performance of health care providers
- Creation of public reports on health care, affordability and efficiency

WHIO Structure

Health care payers, purchasers, and providers:

- Wisconsin Collaborative for Healthcare Quality
- Blue Cross Blue Shield of Wisconsin
- Greater Milwaukee Business Foundation on Health
- Humana
- The Alliance
- United Healthcare of Wisconsin
- WEA Trust
- WPS Health Insurance
- Wisconsin Medical Society
- Wisconsin Employee Trust Funds
- Wisconsin Dept of Health & Family Services
- WHA

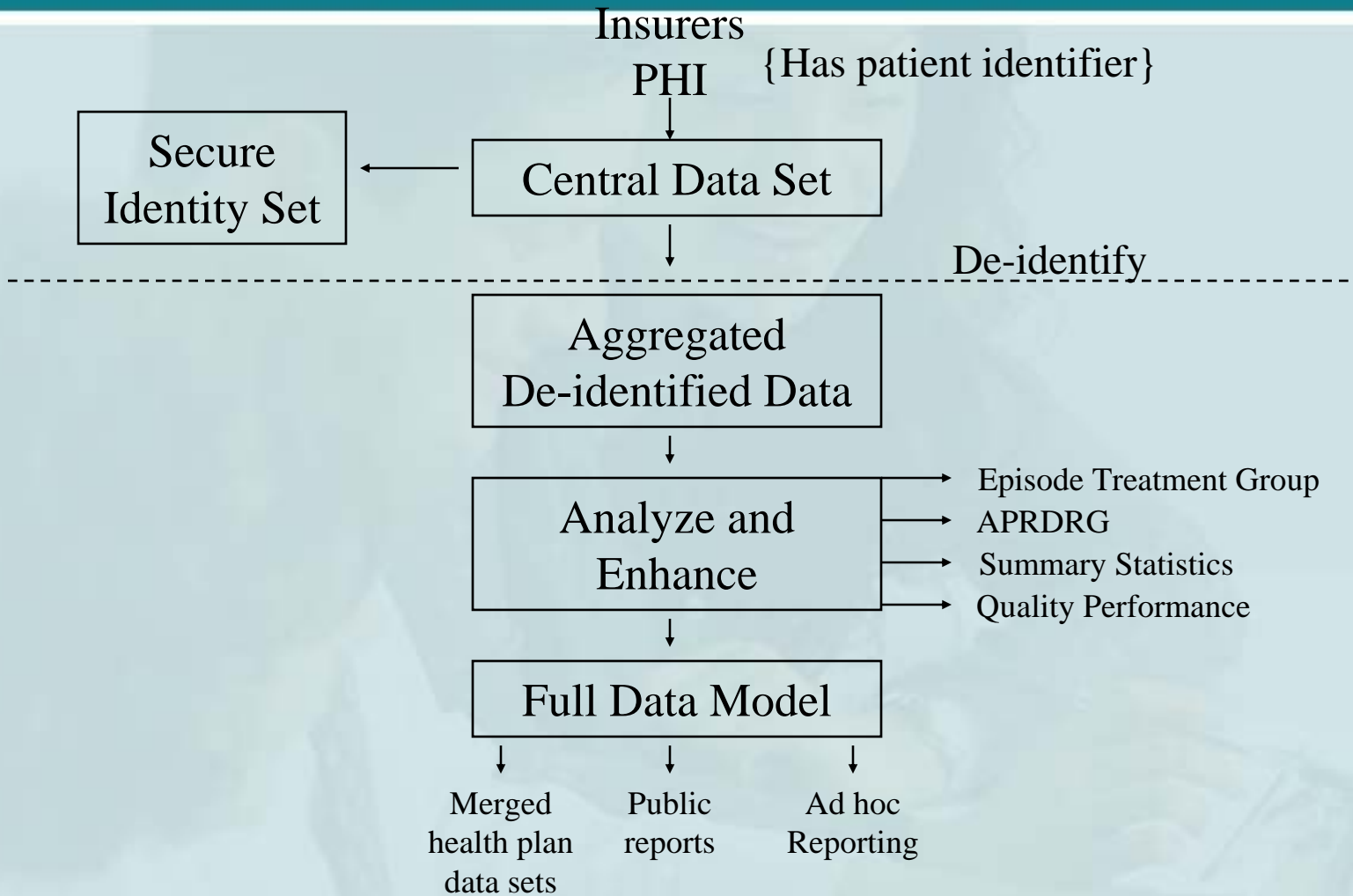
WHY ?

- No one insurer or payor has enough data to do accurate performance reporting on provider groups
- We need to improve the cost of delivering care
- We can improve much faster if we have comparative performance data

Funding

- This is a public private partnership with funding coming from the State government and the private organizations equally

HOW ?

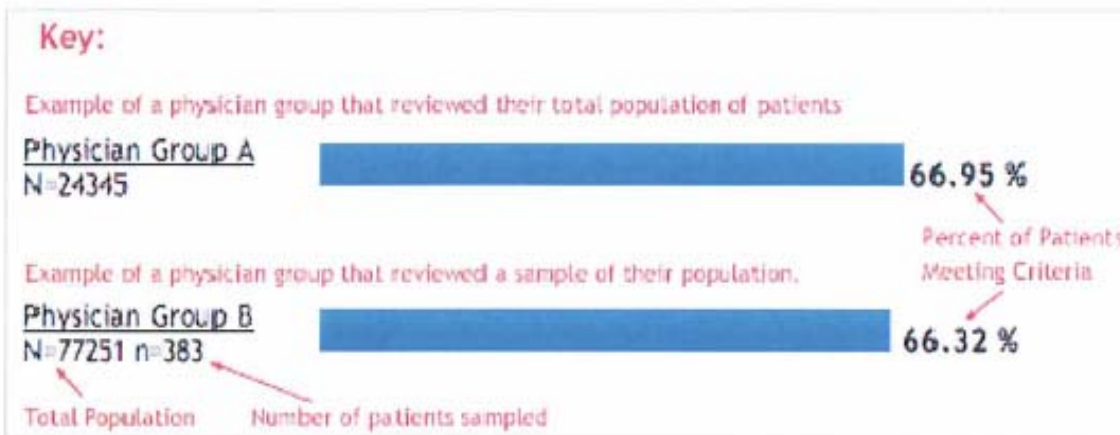


Next Steps

- WCHQ**
 - Expand measures (ex. Prevention)
 - Expand to small practice groups
- WHA**
 - Expand measures
- WHIO**
 - Data Integration/Testing/Use-including Public Reporting and Proprietary (Nov 07)

Colorectal Cancer Screening NEW WCHQ

This measure assesses **618,170** men and women who should have had a colorectal cancer screening.
[More](#)



Reporting Period: Q1 2004 - Q4 2005

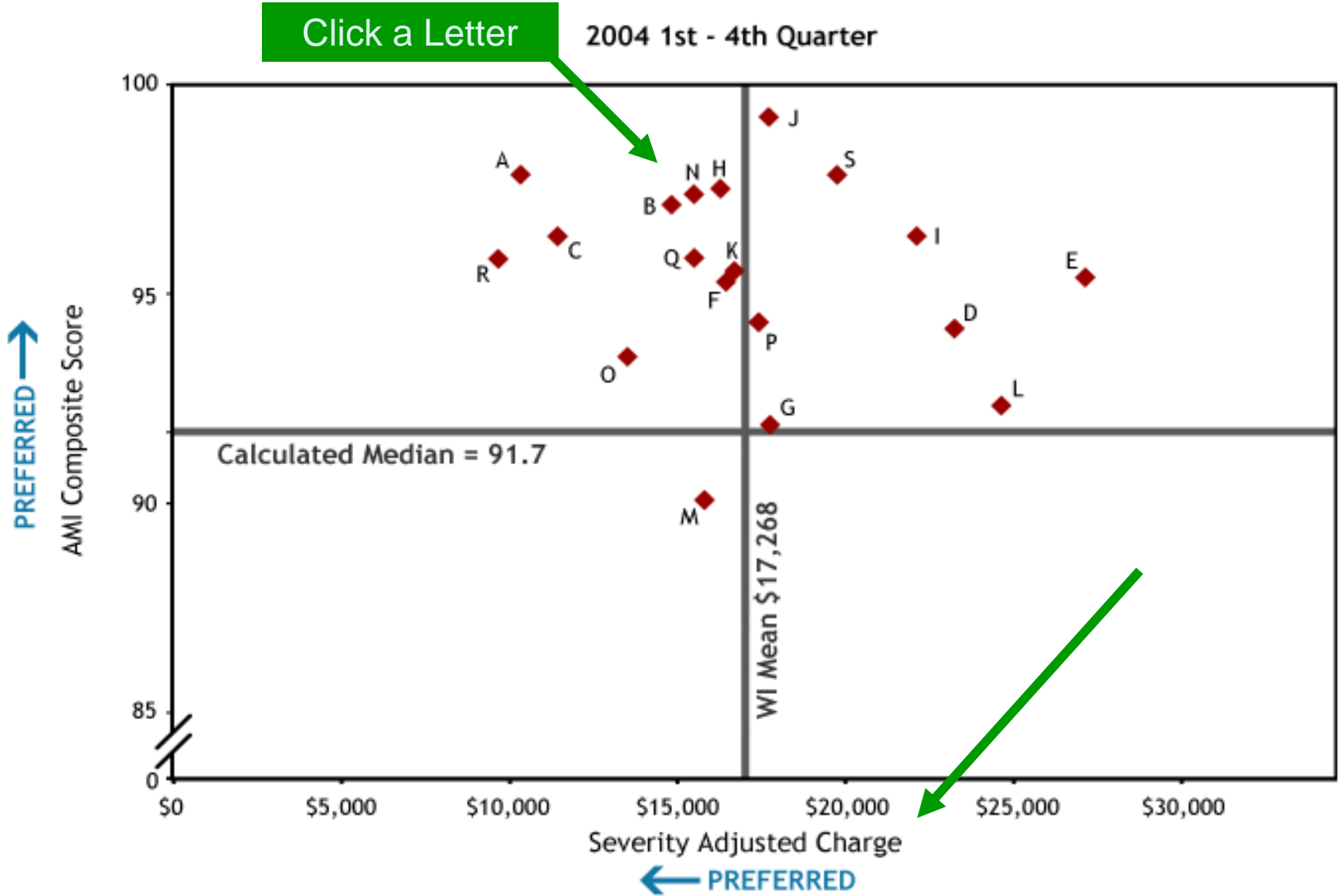


Next Steps

- WCHQ**
 - Expand measures (ex. Prevention)
 - Expand to small practice groups
- WHA**
 - Expand measures
- WHIO**
 - Data Integration/Testing/Use-including Public Reporting and Proprietary (Nov 07)

Displaying Efficiency

Please use caution when interpreting these data and drawing conclusions from charges.



For detailed information on a hospital's performance, click on a letter in the graph or on a hospital name below.

Next Steps

- WCHQ**
 - Expand measures (ex. Prevention)
 - Expand to small practice groups
- WHA**
 - Expand measures
- WHIO**
 - Data Integration/Testing/Use-including Public Reporting and Proprietary (Nov 07)

Summary

- Provider-led
- Employer engagement
- Collaboration, not competition

Jeff Thompson, M.D., CEO
Gundersen Lutheran Health System
1900 South Avenue
La Crosse, WI 54601
(608) 782-7300
jethomps@gundluth.org