

#### National Pay for Performance Summit A Health Plan Perspective

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## AHIP

### Outline

- Scope of Activities
- Environmental Factors Guiding Our Work
- Principles Guiding Our Work
- Objectives
- What We've Done
- Short and Long Term Impacts
- What the Public Thinks
- What's Next



#### **Scope of Activities**

 Developing a Uniform Approach for Quality Measures

- Aggregating Data
- Disclosing Data
- Recognizing and Rewarding Quality Based on Consensus Standards
- Informing Consumers

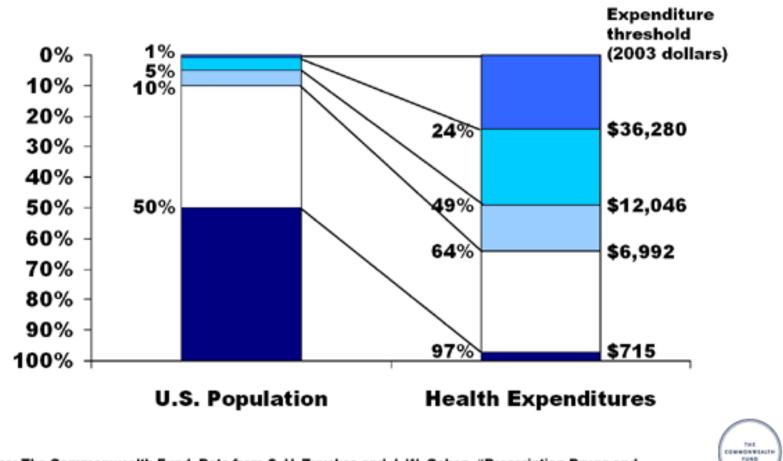


#### Environmental Factors Guiding Our Work

- Quality Challenges Identified by IOM, RAND, and Others
- Different/Multiple Standards in Market
- Unnecessary Burdens on Physicians
- Consumer Confusion but Interest in Knowing More
- Purchasers Seeking Value
- Opportunity to Promote "Best Practices"



#### **Opportunities to Promote "Best Practices"**



Source: The Commonwealth Fund. Data from S. H. Zuvekas and J. W. Cohen, "Prescription Drugs and the Changing Concentration of Health Care Expenditures," *Health Affairs*, Jan./Feb. 2007 26(1):249–57.



#### **Principles Guiding Our Work**

- Collaborate on Performance Measures That Drive Improvement and Improve Outcomes
- Transparent Methodologies
- Clinician and Consumer Engagement
- Process for Reviewing Results Before Release
- Linking Quality and Value Information
- External Validation by Independent Entities
- Uniform Process for Aggregating Public and Private Sector Data

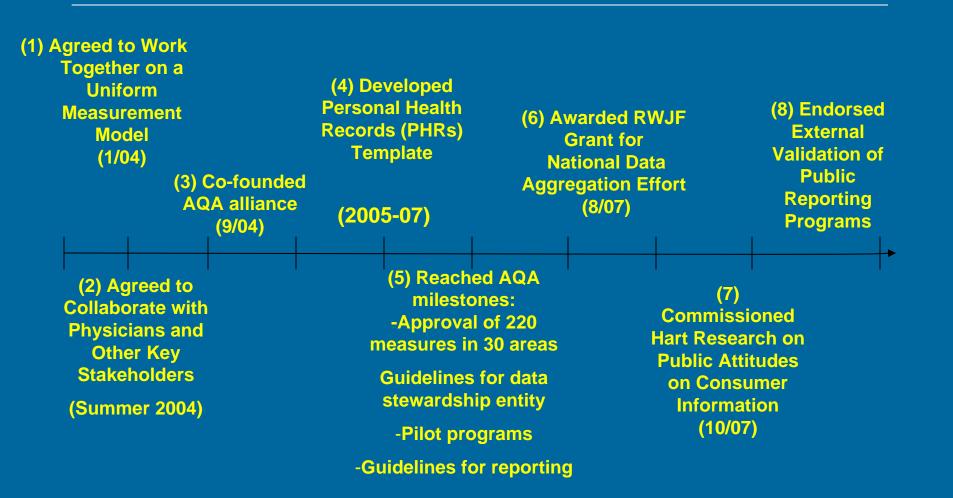


#### Objectives

- Work Collaboratively To Construct Transparent, Fair and Effective Quality Measures
- Align Performance Measurement with Research
- Reduce Practice Variation
- Improve Patient Safety
- Focus Efforts on Key Priorities
- Provide Public and Clinicians with Useful Information



#### What We've Done





#### AQA Accomplishments

- 220 Quality Measures in 30 Areas Including Primary Care and Various Clinical and Surgical Specialties
- Principles for Efficiency Measures
- Guidelines for a National Health Data Stewardship Entity
- Principles for Reporting
- Launched 6 Pilot Programs



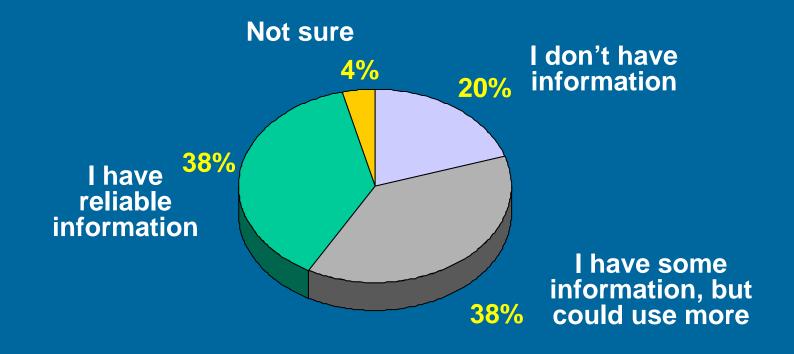
#### Short and Long-Term Impacts

- Infrastructure in Place to Build Consumer Health Information Systems
- Consensus on Measures that Underpin Quality Improvement and Payment Systems
- Uniformity of PHRs
- Responsive to Physician Concerns, Re: Multiple Measures, Small Sample Size, Skewed Data Presentation
- Clear Roadmap to Meet IOM Challenges



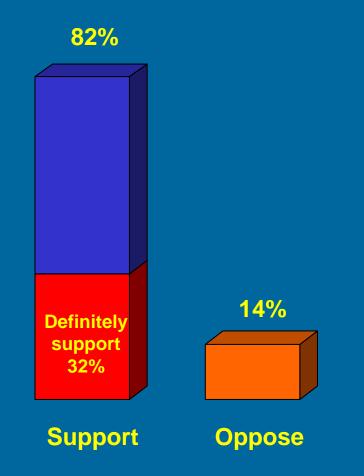
#### What the Public Thinks

Do you have reliable information about how often your doctor provides the right treatment/right amount of care?



Peter D. Hart Research Associates Survey, October 2007

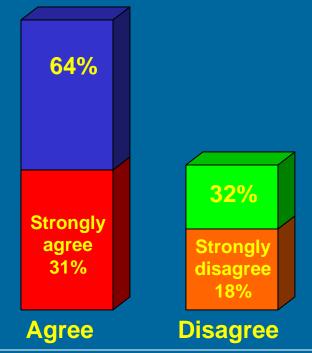
# Public Supports Consumer Information AHIP System About Doctors



Peter D. Hart Research Associates Survey, October 2007

#### Distinguishing Doctors Who Provide AHIP Care Based On Best Practices

"Currently all doctors get paid the same regardless of whether they provide high-quality care. We should change the system so doctors who provide quality care based on recommended medical best practices get paid more than doctors who do not."



Peter D. Hart Research Associates Survey, October 2007



#### What Is Next

- Developing Path to Meet IOM challenges
- Opportunity to Realign Incentives
- Medical Malpractice System is a Sleeper Issue
- Public Reporting Efforts Need to Support the Realignment of Incentives and Payment Programs That Can Improve Quality
- Public Reporting Will Drive Improvement, Accountability, and Informed Decision-Making