


Measurement Evolution
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MN Community Measurement

- Accelerating Improvement of Health Through Public Reporting
- The trusted source of information across the spectrum of care and the triple aim
- Used by providers to improve care and by patients to make better decisions
- Catalyzing communities to work together on measurement
- (a 501 (c) 3 nonprofit)

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MNCM Objectives

- Develop higher value measures across the triple aim of the health care system
- Decrease burden and increase utility
- Get the information used locally and nationally to increase health

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Why Minnesota Leads in Measurement

- Focus on outcome measures
- Wide use of measures for improvement
- Alignment across the community
- National recognition of measures
 - ▣ National Quality Forum endorsement
 - ▣ Use in Medicare programs
 - ▣ RWJF Grant to support other communities
 - ▣ National Total Cost of Care Adoption
- Increasing consumer use – patient engagement tools

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Measure Development Process

Measure Criteria

- Meaningful • Opportunity for Improvement • Actionable • Credible • Feasible



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Public Reporting/ Transparency



- Reports on clinical quality measures, Health Information Technology, patient experience, cost of care, and hospital measures
- Reports on over 400 medical groups and 700 site of care
- Data from health plans, hospitals and medical groups



www.mnccr

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Oct. 2012 Consumer Reports

- 32 page insert in Minnesota Edition
- Results of diabetes and vascular care measures at 552 physician offices
- Articles on how patients can improve their care
- Spring 2013 issue on prevention



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Public Reporting

- **Aggregate Payers Health Plan Claims**
 - ▣ **HEDIS Measures**
 - cancer screening, immunization, appropriate antibiotic use, etc.
 - ▣ **Cost Measures**
 - Total cost of care, average procedure price
- **Direct Data Submission**
 - ▣ **EMR/ Clinical Data**
 - diabetes, ischemic vascular, asthma, depression, knee replacement, spine surgery, etc.
- **Survey Results**
 - ▣ **Patient Experience/ CG CAHPS & HCAHPS**
 - ▣ **Health Information Technology**
- **Hospital Measures**
 - ▣ **AHRQ Quality Indicators (mortality, complications)**
 - ▣ **CMS Measures of Appropriate Care (AMI, Surg)**

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Find and compare clinics:

Search by Name, City or County:
OR
Zip Code: within: 5 miles

Condition / Category:

[Advanced Search](#)

What is Minnesota HealthScores™?

MN HealthScores is a Web site that can help you make sure you are getting the best care - high quality health care. Our reports provide information about the care provided in clinics, medical groups and hospitals throughout Minnesota. MN HealthScores was developed by MN Community Measurement, an independent non-profit community organization. [Read more >](#)

We Listened to You Introducing Our New and Improved Website!

In 2009, we conducted focus groups to learn what users thought of the HealthScores website. We listened to what focus group participants had to say and have made improvements to make it easier for you to use our site to learn more about the quality of health care in your community. [Read more >](#)

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How can I make sure I get quality health care?


It may surprise you to learn that not all health care is high quality care. [Read more >](#)



What's New

JULY 21, 2011
View our 2011 Reports

- [> Depression](#)
- [> Diabetes](#)
- [> Vascular Disease](#)



[List all Clinics](#)

Diabetes

[Skip to the Data ▶](#)

Ratings by Condition

- [Depression](#)
- Diabetes**
- [Blood Pressure](#)
- [Bad Cholesterol \(LDL-C\)](#)
- [Blood Sugar \(A1c\)](#)
- [Tobacco-free](#)
- [Aspirin Taken Daily](#)

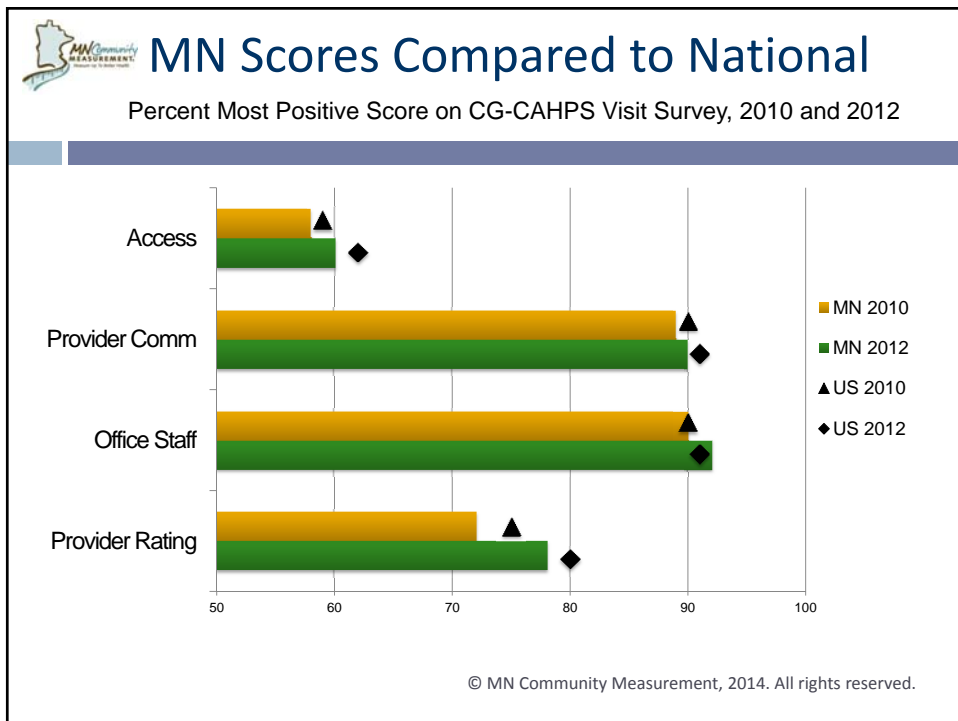
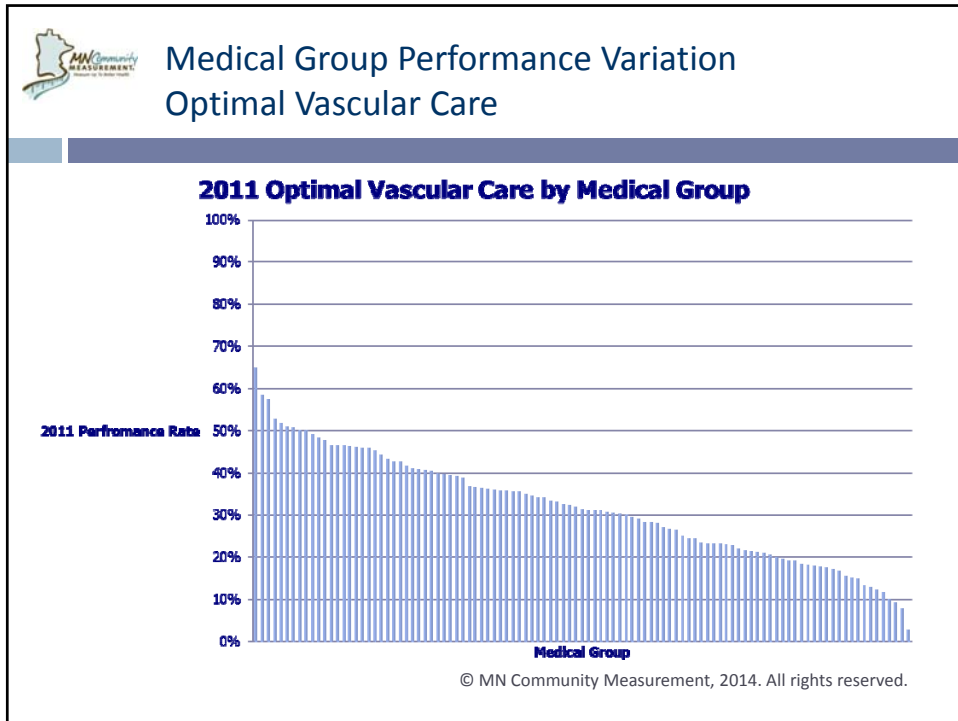
Diabetes occurs when there is too much glucose (sugar) in the blood and not enough in the cells of your body. This can interfere with your body's ability to convert sugar, starches and other food into energy needed for daily life.

Care You Should Expect to Receive - High quality care for diabetes includes tests to see if patients are meeting certain treatment goals that doctors agree are important:

- Test to see if your blood pressure is appropriate (less than 140/90 mmHg)
- Test to see if your level of bad cholesterol (LDL) is appropriate (less than 100mg/dl)
- Test to see if your blood sugar (A1c) is appropriate (less than 8 percent)
- Tools to remain tobacco free
- Recommendation to take aspirin daily as appropriate

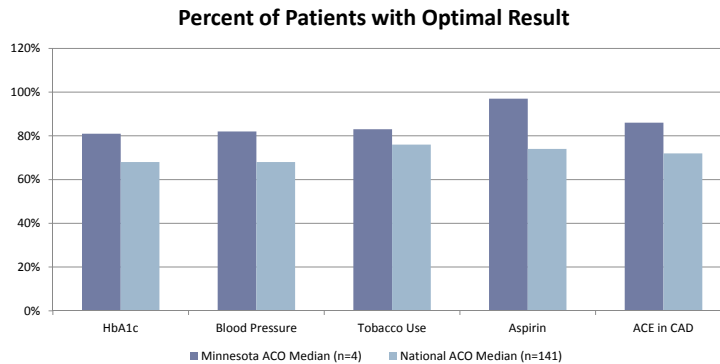
Clinic Name	City	Zip	Rating	View Profile
Family Health Services Minnesota - White Bear Office	White Bear Lake	55110	63%	view profile >
Park Nicollet Clinic - Prairie Center	Eden Prairie	55344	61%	view profile >
Park Nicollet Clinic - Golden Valley	Golden Valley	55427	60%	view profile >
Mayo Clinic - Baldwin Building, Family Medicine	Rochester	55905	60%	view profile >
Western Wisconsin Medical Associates - Spring Valley Medical Clinic	Spring Valley	54767	60%	view profile >
Fairview RidgeValley Clinic	Prior Lake	55372	60%	view profile >
Fairview Rosemount Clinic	Rosemount	55068	59%	view profile >
Allina Medical Clinic - Blaine	Blaine	55449	58%	view profile >
Sanford - Mahanomen	Mahanomen	56557	58%	view profile >
Park Nicollet Clinic - Carlson	Minnetonka	55305	58%	view profile >
Allina Medical Clinic - Cokato	Cokato	55321	58%	view profile >

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Minnesota ACO Results



<https://data.medicare.gov/Physician-Compare/Accountable-Care-Organization-ACO-Quality-Data/ytf2-4ept>

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What are Providers Doing to Improve Results?

- ☐ Regularly review results with care team
- ☐ Use electronic medical record to enable results
- ☐ Engage entire staff in improvement
- ☐ Test small scale improvements – patient population approach
- ☐ Share measures with patients

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"I saw the same doctor for 21 years and had diabetes during that time. We rarely discussed why my A1c was off. And then I went to this new doctor and I have to tell you I was like, "Whoa!" Not only does she care, she's holding me super-accountable for stuff. There is no screwing around with this woman. And my A1c went right where it was supposed to go."

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Quality Performance Measurement Evolution

- Internal Processes
 - Quality Improvement
 - Quality Care
 - Clinical Quality Outcomes
 - Functional Status
 - Patient Reported Outcomes

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Evolving Data Sources

- Claims
- Electronic Medical Records
- Hybrid
- Functional Status Tools
- Patient Reported Outcome Tools
- Integrated? Standardized? Available?

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Measurement Framework

- ☐ **Health Care**
 - Process
 - Outcome
 - Efficiency/Necessity
- ☐ **Cost**
 - Total Cost of Care
 - Unit Price/Episodes of Care
 - Use/Overuse
- ☐ **Health**
 - Prevention
 - Population Health
 - Social Determinants

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Vision for Triple Aim Reporting

Medical Group	Quality (Composite or Global Health Measure)	Patient Experience	Total Cost of Care Comparison	High Value (High Quality and Low Resource Use)
Evergreen	Better	Better	Average	
Lakestreet	Better	Better	Better	✓
Woodland	Better	Average	Average	
Parkdale	Average	Below	Average	
Vista	Better	Better	Better	✓

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Example Measures

- ▣ All or none patient level composites
 - Diabetes [A1c < 8.0, LDL < 100, BP < 140/90, tobacco free & daily aspirin]
- ▣ Depression
 - Remission at 6 and 12 months [PHQ-9 < 5]
- ▣ Pediatric Preventive Care
- ▣ Orthopedics Pre and Postop Functional Status
 - Total Knee Replacement and Spine Surgery
- ▣ Population Health

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Total Cost Measure

- Public awareness of cost variation and opportunity to increase value
- Alignment across payers – compete on results, not on information
- National alignment effort with 5 other communities
- Actionable information for medical groups
 - ▣ Transparent-nationally endorsed method
 - ▣ Timely data
 - ▣ Verifiable results

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NQF Endorsement and ACO

- NQF Endorsed Measures
 - ▣ 0076 Optimal Vascular Care
 - ▣ 0729 Optimal Diabetes Care
 - ▣ 0711 Depression Remission at Six Months
 - ▣ 0710 Depression Remission at Twelve Months
 - ▣ 0712 Utilization of the PHQ-9
- The three depression measures also exist in e-Measure format
 - ▣ Included in the 113 retooled NQF measures in the first set of e-Measures for HHS
- Accountable Care Organization
 - ▣ 5 MNMCM developed measures accepted in the 33

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Catalyzing Increasing Alignment

- ☐ Measures are used nationally
- ☐ Medicare deeming and qualified entity status
- ☐ Medicaid and the insurance exchange
- ☐ PQRS
- ☐ Meaningful use
- ☐ ACO
- ☐ Etc.

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Future of Measurement

- ☐ More use of measures in compensation
- ☐ More patient derived data for measures
- ☐ Use in tools, products, networks, contracting
- ☐ Measures that support "Accountable Care Contracts"
 - ☒ Care coordination
 - ☒ Primary Care/Specialty Care Balance
- ☐ Cost of Care presented with Quality of Care
- ☐ National Measures

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Information

- ❑ Consumer site: www.mnhealthscores.org
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