Community Leadership in Creating Value-Driven Health Care: The Wisconsin Collaborative for Healthcare Quality



Bud Chumbley, MD Vice Chair WCHQ Board of Directors FTC Roundtable

WISCONSIN COLLABORATIVE FOR HEALTHCARE QUALITY

WE ARE...

... A voluntary Consortium of organizations learning and working together to improve the quality and cost-effectiveness of healthcare 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.

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 process; and, willing to innovate, adopt, and continuously improve.

MEMBER ORGANIZATIONS

40% of all WI physicians; 50% of WI primary care physicians

- Aurora Advanced Healthcare
- Affinity Health System
- Aspirus Wausau Hospital
- Aurora Healthcare
- Aurora UW Medical Group
- Bellin Health
- Columbia St. Mary's
- Dean Health System
- Franciscan-Skemp Healthcare Mayo Health System
- Froedtert & Community Health
- Gundersen Lutheran
- Hospital Sisters Health System
- Lakeshore Medical Clinic
- Luther Midelfort-Mayo Health System
 - Wisconsin Collaborative *for* Healthcare Quality

- Marshfield Clinic
- Medical Associates Health Center
- Medical College of Wisconsin
- Mercy Health System
 - Meriter Hospital
- Monroe Clinic
- Prevea Health Services
- ProHealth Care Medical Associates
- St. Joseph's Hospital
- St. Mary's Hospital Madison
- West Bend Clinic
- ThedaCare
- UW Hospital & Clinics
- UW Medical Foundation
- Wheaton Franciscan Services

Business And Purchaser Partners

The Alliance

Appleton Papers

Badger Meter

Chrysler

GE Healthcare

Schneider National

Business Healthcare Group of Southeast WI

Serigraph, Inc.

WebCrafters

Wisconsin Manufacturers & Commerce (WMC)

Greater Milwaukee Business Foundation on Health

Wisconsin Department of Employee
Trust Funds

Wisconsin Department of Health and Family Services



A BRIEF HISTORY OF WCHQ

10/2002: CEOs gather to discuss working together for quality

02/2003: First meeting of WCHQ

10/2003: WCHQ releases *Performance & Progress Report* [paper]

04/2004: Launch of WCHQ Ambulatory Measure Workgroup

08/2004: Diabetes ambulatory measure created

11/2004: Diabetes ambulatory data collected

11/2004: First WCHQ "Fall Forum"

04/2005: Launch of WCHQ.org; diabetes data published

06/2005: Hospital Quadrant Analysis Published

11/2005: Second WCHQ "Fall Forum"; HTN data published

12/2005: Postpartum data published

01/2006: WCHQ selected as initial pilot by AQA

07/2006: Colorectal, Pap, Mammo measures published

11/2006: Third WCHQ "Fall Forum"

02/2007: WCHQ selected as "AF4Q" Community

05/2008: CAD, Pneumococcal Measure Published

Updated 5/2008

The WCHQ Model of Direct Data Submission

- Key Characteristics
 - Voluntary data collection by provider organizations
 - Administrative data (denominator) combined with Clinical information (numerator)
 - Performance Measurement at the group level, <u>all</u> patients regardless of payer



What's The Value?

- System view of performance with ability to drill down to provider level
- All patients within a system are included in the population
- All payers are represented
- Delivers roadmap for improvement
- Foundation for pay-for-performance



www.wchq.org



MEMBER TOOLS | NEWS | GLOSSARY | FEEDBACK | CAREERS | CONTACT

About WCHQ Events

WCHO Members

Our Measures **Using Our** Reports





View Our Reports

Home > Reports

Welcome to our Performance & Progress Report

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 Reports by Topic or Category

AMBULATORY CARE MEASURES

WCHO Exclusive

Chronic Care [Updated]

Episodic Care NEW

Preventive Care NEW

POPULATION **FOCUS**

NEW!

WCHQ population results **NEW**

CLINICAL TOPIC

Access

Critical Care

Diabetes

Health Information

Technology

Heart Care

Patient Satisfaction

Pneumonia:

Surgery

Women's Health

INSTITUTE OF MEDICINE CATEGORY*

Safety

Timeliness

Effectiveness

Efficiency NEW

Patient-Centeredness

*Aims for Improvement

Ambulatory Care Measures Process and Outcome

Chronic Care

- Diabetes Care
 - A1c screening
 - A1c control
 - LDL-C screening
 - LDL-C control
 - Nephropathy monitoring
 - Blood pressure control
- Control of Uncomplicated Essential Hypertension
 - Blood Pressure Control
- Cholesterol Management of Patients With Cardiovascular Conditions
 - LDL-C Screening
 - LDL-C Control

Wisconsin Collaborative *for* Healthcare Quality

Ambulatory Care Measures Process and Outcome

- Preventive Care
 - Breast Cancer Screening
 - Cervical Cancer Screening
 - Colorectal Cancer Screening
 - Pneumococcal Vaccinations
- Episodic Care
 - Postpartum Follow-up

New Measures Coming

- Adult Screening for Tobacco Use Fall 2008
- Screening for Osteoporosis Spring 2009



WCHQ Consumer Engagement Strategy Key Tenets, 2004-Present

- Primarily designed to support provider benchmarking and improvement
- Report unadulterated information and allow the reader to draw his/her own conclusions
- Design web site for maximum flexibility in organizing and displaying information (trends, ranking)
- Encourage business partners to incorporate WCHQ measures in open enrollment and decision support materials



WCHQ Consumer Engagement Strategy Experience and Emerging Themes

- Website utilization statistics reveal primary users are providers, researchers, public agencies (federal and state)
- "Aligning Forces" / RWJ sponsored research
 - Low level of awareness of WCHQ and other Wisconsin transparency sites
 - Patient activation ("Ask Me 3", teach back) models as a complementary strategy



Near-Term Evolution of the WCHQ Measures Portfolio

- Resource Use / Cost-of-Care Measures
- Ambulatory Quadrants
- Specialty Measures
- Practice-Site Granularity



Thoughts on Physician-Level Reporting

- Numerous unresolved policy and methodological issues
 - Care process and systems emphasize teamwork not individuals
 - Significant issues with reliability of performance measures across specialties
 - Basic questions of "fairness" to those being measured
 - Usefulness of data that offers questionable reliability to consumers
- "Patient Charter" represents significant mechanism to align stakeholder interests



LESSONS LEARNED

- Multiple stakeholder involvement
- Shared Vision
- Importance of "sweat equity"
- Physician leadership helps foster physician engagement
- Credible, reliable data

