CHIA PHASE 1 CONSUMER HEALTHCARE TRANSPARENCY WEBSITE SQAC

JUNE 26, 2017



Agenda

Project Overview

Cost

Quality

Q&A



APPROACH



Phase 1 Objectives and Tactics

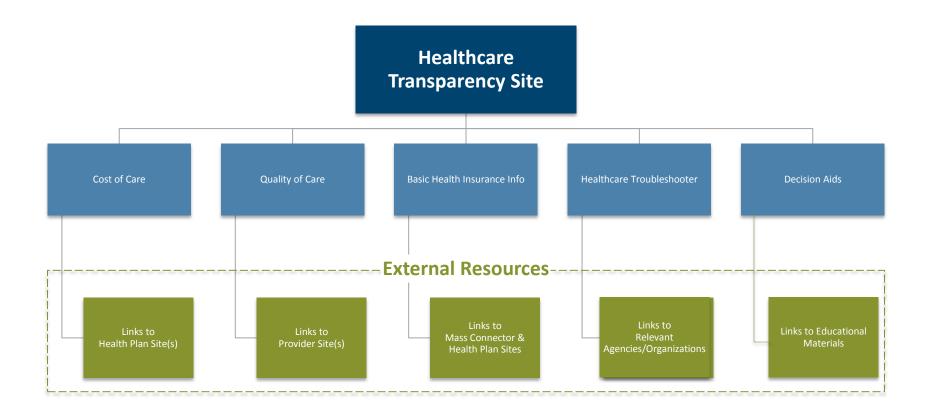
Goal: Empower consumers to be an active partner in their health care decisions.

Objective	Tactic
Consumers understand that cost varies between provider organizations	Cost look-up tool for a defined set of shoppable services
Consumers Understand that quality varies between and within provider organizations	Quality dashboards with facility- level metrics
Support informed conversations between patient and provider	Decision Aids
Locate the appropriate agency or organization for help in resolving a problem	Troubleshooter

Phase 1 Timeline

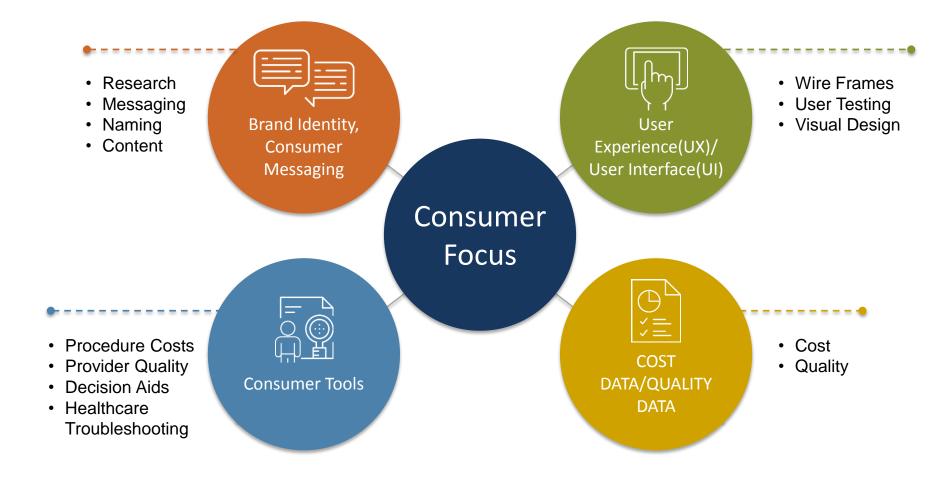
Task Name	Q1			Q2			Q3		
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
Project Kickoff			ı						
Wireframe Development									
Stakeholder Engagement									
Copy Development									
Web Development									

Site Overview





Our Approach



English V

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Website

A TRUSTED SERVICE OF THE COMMONWEALTH OF MASSACHUSETTS

Helping you become an active partner in managing your health care





Save Money

Compare prices on the care you need.



Find Quality Care

Find great doctors and providers.



Make Informed Choices

Get guidance on managing your medical procedure from start to finish.

COST

CHIA.

Cost – Phase 1 Site Services

Outpatient Services Cost Data sourced from the APCD

- Provider office visits (by specialty)
- Behavioral health services
- Radiology: Mammography, MRI, CT, PET
- Diagnostic: Colonoscopy, endoscopy
- Physical and occupational therapy
- Emergency Department Visits
- Lab Tests
- Maternity (professional only, excludes facility)
 - Phase one includes:
 - Only payments for bundles provided by same physician
 - Bundles with no procedure modifiers



Cost – Analytic Approach

Data Source:

- FY15 sourced from APCD
- Commercial fee-for-service claims

Services represented at CPT/HCPCS level

- Consistent provider-payer contracting
- Accounting for discounts applied to bundles, eg colonoscopy, MRI/PET/CT

Service cost estimates reported by provider

- Payer-specific (BCBS, HPHC, Tufts, NHP, Fallon, HNE)
- Payer-agnostic (based on included payers)

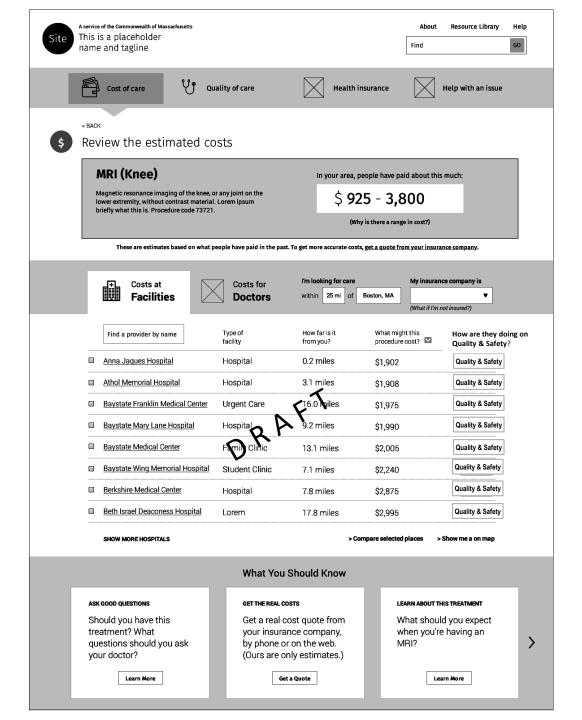
Cost estimates:

- Reflect payer paid plus member cost sharing amounts (i.e., allowed amounts)
- · Median cost for services rendered by each reported provider
- Anchored to facility / primary service provider, as applicable
 - Professional fees bundled into cost estimates for primary service provider
 - E.g., colonoscopies, mammography

Minimum service encounter threshold for provider inclusion



Cost Draft 2



QUALITY



Quality/Safety—What's Included in Phase 1

- The Phase 1 site will include quality and patient safety dashboards for hospitals and ASCs
- Dashboards will contain select quality/safety measures, mainly at the facility level (not at the procedure level)
- Quality/safety dashboards will be linked from the cost estimator results, and accessible from other points throughout the website



Key Considerations

- Challenge: Available quality/safety metrics don't answer many of the questions an engaged consumer might have
 - Most rate a provider's overall quality—not quality at the procedure level—so are not good predictors of individual outcomes
 - Most measures are not consumer friendly
- Approach: Include high-quality guidance and decision aids
 - To explain what can and can't be learned from the data
 - To prompt constructive conversations with providers about health care choices



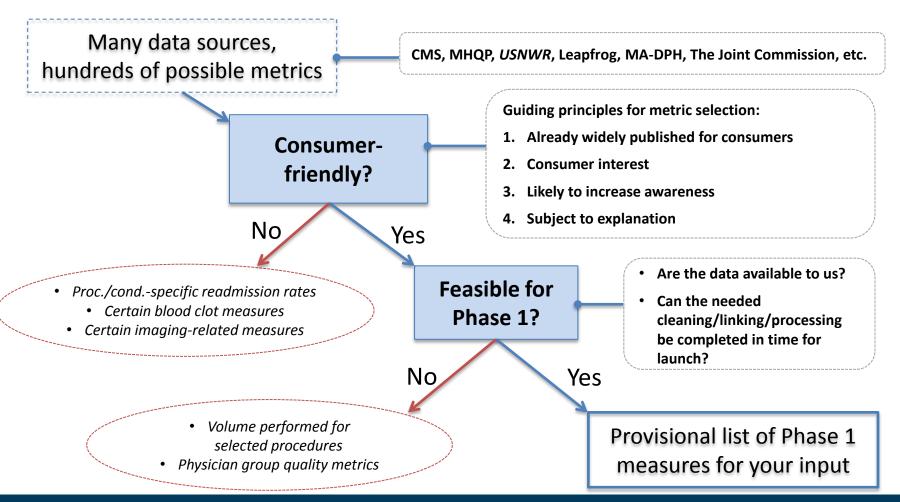
Principles Guiding Selection of Quality/Safety Metrics

Measures must be:

- Already widely published in a format intended for consumer consumption (mainly through CMS' Hospital Compare and Leapfrog)
- 2. Of relatively high interest to consumers (as identified through ongoing user testing)
- More useful than not in making consumers aware that quality/safety of care varies across providers
- 4. Explainable to consumers through integrated messages and decision aids that highlight what can and can't be understood from these data alone

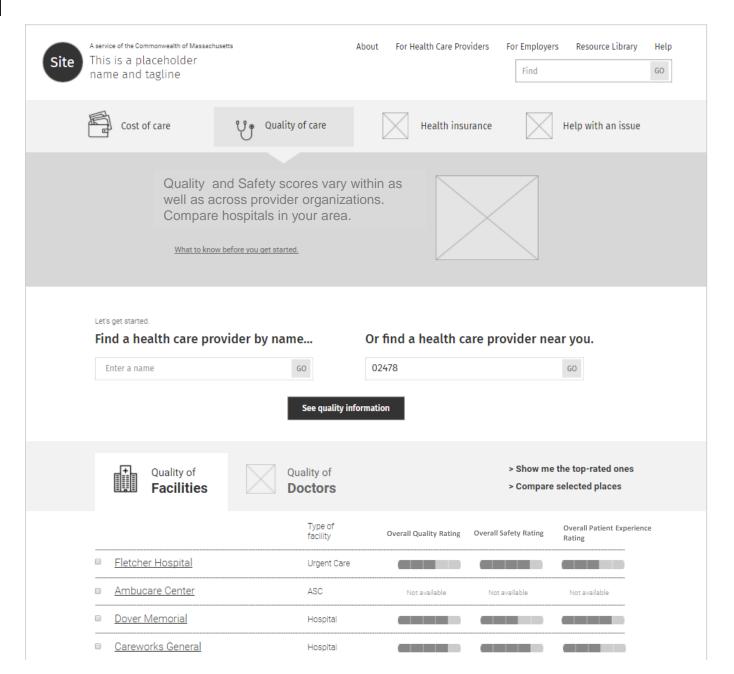


Preliminary Steps Toward a Set of Phase 1 Quality/Safety Measures



Specific areas (at "Swim" level) 1. Skim Emergency Department **Hospital Name** Median time to fibrinolysis Address Outpatients with chest pain or possible heart attack who got drugs to break up blood clots within 30 Website minutes of arrival Phone Average (median) number of minutes before Fax outpatients with chest pain or possible heart attack who needed specialized care were transferred to another hospital Outpatients with chest pain or possible heart attack who received aspirin within 24 hours of arrival or before transferring from the emergency Overall Quality Overall Safety Average (median) number of minutes before Overall Patient Experience (Hospital Compare 5 star rating) (Leapfrog Patient Safety grade) (Hospital Compare) outpatients with chest pain or possible heart attack Average (median) time patients spent in the 2. Swim emergency department before leaving from the Measures that make up the composite Select measures that make up the composite Measures that make up the composite Average (median) time patients spent in the Mortality national comparison Central line infections Communication with nurses emergency department before they were seen by a Safety of care national comparison healthcare professional Catheter Associated Urinary Tract Infections Communication with doctors Readmission national comparison Average (median) time patients who came to the Surgical Site Infections (Colon Surgery) Responsiveness of hospital staff emergency department with broken bones had to Effectiveness of care national comparison MRSA Infections Pain management wait before getting pain medication Timeliness of care national comparison C. Difficile Infections Communication about medicines Percentage of patients who came to the emergency Efficient use of imaging national comparison Discharge information department with stroke symptoms who received Care transition brain scan results within 45 minutes of arrival Cleanliness of hospital environment Quietness of hospital environment Overall hospital rating Recommend the hospital Maternity Low-risk c-sections Other relevant measures Other relevant measures Early elective deliveries Other relevant measures Able to track lab results electronically Uses outpatient safe surgery checklist Episiotomy Patients assessed and given influenza Able to track patients' lab results, tests, and Health care workers given influenza vaccination vaccination referrals electronically between visits Colonoscopy Percentage of patients with history of polyps receiving follow-up colonoscopy in the appropriate time frame 3.Dive More detail regarding above metrics More detail regarding above metrics More detail regarding above metrics Surgery Deaths among surgical inpatients with serious treatable conditions Collapsed lung Serious blood clots after surgery Accidental cuts and tears from medical treatment

Quality Draft 1



Quality Draft 2



Fletcher Hospital

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ACUTE CARE HOSPITAL

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☑ WEB SITE

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Emergency Care

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Neonatal Services



Psychiatric Services

Summary

(What to know about this information)

Overall Quality Rating

MORE ABOUT THIS

Overall Safety Rating

MORE ABOUT THIS

Overall Patient Experience Rating

MORE ABOUT THIS



Maternity

MORE ABOUT THIS

C-Sections

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Meets the target guidelines for percent of low-risk patients who had C-sections

Meets the target guidelines for percent of patients who had elective deliveries

Meets the target guidelines for percent of patients who had episiotomies

Source: Lorem Ipsum Dolor for [period of time] and [populations].

Emergency

MORE ABOUT THIS

Response Time in the ER

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Promptness in seeing patients

Efficiency in overall visit time from arrival to departure

Promptness in getting pain medication to patients with broken bones

Promptness in doing a brain scan for a patient with possible stroke

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Chest Pain or Possible Heart Attack

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User Testing



- Users' mental model of Quality before seeing it was that it was going to be like Yelp (patient reviews).
- At the outset of the user testing, consumers expressed concern over the source of the ratings.

Key Takeaways

- CHIA is developing the transparency website through an iterative process that includes providers, payers, and consumers—supported by top designers.
- We are following best practices for communicating health care information to consumers, from the design (UI/UX) process through the copywriting.
- Cost estimates and quality measures will be supplemented by decision aids designed to help patients and providers have meaningful conversations about health care choices.
- Following the launch of the Phase 1 site, CHIA is committed to a process of continuous improvement and upgrades.

DISCUSSION

