

California Office of the Patient Advocate

Preview of the 2014-15 Edition of the Health Care Quality Report Cards

Stakeholder Briefing

September 11, 2014

Webinar September 11, 2014 at 10 AM (PT)

Call-in: 1-855-205-7930

Go to

Conference ID: 95435939

<https://ncqaevents.webex.com/ncqaevents/j.php?MTID=md08cacb32af31ea302b6f4432b030132>

Outline

- ❖ **OPA's Refocused Charge & New Director**
- ❖ **California Health Care Quality Report Cards**
 - **Partners**
 - **Three Report Cards: HMOs, PPOs and Medical Groups**
 - **Who uses the Report Cards**
 - **Advisory Process**
 - **Data and Displays**
 - **Methodology Standards and Thresholds**
- ❖ **2014-15 Edition**
 - **New/Revised Measures**
 - **Last Year for Some Measures**
 - **Key Dates**
- ❖ **2015 and Beyond**
 - **Complaint Data**
 - **Timely Access**

Office of the Patient Advocate

Refocused Charge



With recent changes in state law, OPA's major deliverables include the following:

- ❖ **Health Care Quality Report Cards**
- ❖ **Complaint Data Reports and Baseline Review of State Consumer Assistance Call Centers**
 - **Health care consumer complaint data submitted annually to OPA from the Department of Managed Health Care, Department of Insurance, Department of Health Care Services, and Covered California. Legislative report due annually.**
- ❖ **Model Protocols for State Consumer Assistance Call Centers with recommendations for responding to and referring calls outside of their jurisdiction.**

New Director and Patient Advocate



Elizabeth “Beth” Abbott

- **Patient Advocate; OPA Director**
- **Formerly with:**
 - **Health Access California**
 - **Centers for Medicare and Medicaid Services Region IX (Regional Administrator)**
 - **Social Security Administration**

Report Card Partners



The HMO, PPO and Medical Group Report Cards are produced annually in partnership with:

- **Integrated Healthcare Association**
- **California Healthcare Performance Information System**
- **California Dept. of Insurance**
- **California Dept. of Managed Health Care**
- **National Committee for Quality Assurance**
- **American Institutes for Research**

Three Report Cards: HMO, PPO & Medical Groups



- **2014-15 Edition Report Cards:**
 - ✓ **Contain MY 2013 clinical performance and patient experience scores and ratings displayed in more than 2,000 charts**
 - ✓ **Updated profile pages for 16 health plans and 212 medical groups**
 - ✓ **Represent care for 16 million commercially-covered residents**
- **To be released October 15**
- **Accessible to millions of Californians during the Fall 2014 open enrollment**

Online Report Cards

www.opa.ca.gov



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HMO Quality Ratings Summary 2014 Edition

Quality health care is getting the right care at the right time.

This Report Card shows the quality of health care for millions of Californians who get their care through commercial insurance provided by Health Maintenance Organizations (HMOs). The 10 largest HMOs in the state are included in this Report Card.

The HMO Report Card includes health care quality scores for two major areas:

- ▶ **Clinical Performance Scores** – See the "HMO Provides Recommended Care" column below. To find more information on health conditions/topics go to the dark blue box in the right column.
- ▶ **Patient Experience Scores** – See the 3 columns below under "Patients Rate their Experience." Additional information is found in the light blue box in the right column.

The Report Card also provides other helpful information on each HMO. Click on each health plan name to find its consumer assistance number, service area, website and more.

Click on plan name for plan's star ratings and information:	HMO PROVIDES RECOMMENDED CARE	PATIENTS RATE THEIR EXPERIENCE		
		RATE THEIR HMO	GETTING CARE EASILY	HMO HELPS MEMBERS GET ANSWERS
Aetna Health of California, Inc.	GOOD	FAIR	POOR	POOR
Anthem Blue Cross - HMO	GOOD	FAIR	POOR	POOR
Blue Shield of California - HMO	GOOD	GOOD	POOR	GOOD
CIGNA HMO	GOOD	GOOD	POOR	POOR
Health Net of California, Inc.	GOOD	GOOD	POOR	POOR
Kaiser Permanente - Northern California	EXCELLENT	EXCELLENT	GOOD	POOR
Kaiser Permanente - Southern California	EXCELLENT	EXCELLENT	POOR	POOR

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Print all charts

- HI RECC
- ▶ Asthma Care
 - ▶ Behavioral Health
 - ▶ Checkup
 - ▶ Chlamydia Screening
 - ▶ Diabetes Care
 - ▶ Heart Care
 - ▶ Maternity Care
 - ▶ Treating Children: Getting the Right Care
 - ▶ Treating Bronchitis: Getting the Right Care
 - ▶ Giving Lab Tests for Patients Taking Medications for a Long Time
 - ▶ Testing for Cause of Back Pain
- PATIENTS RATE THEIR EXPERIENCE
- ▶ Getting the Right Care
 - ▶ HMO Helps Members Get Answers
- Two additional Patient Experience Topics:
- ▶ Member Complaints
 - ▶ Patient Communication

PPO Quality Ratings Summary 2014 Edition

Quality health care is getting the right care at the right time.

This Report Card shows the quality of health care for millions of Californians who get their care through commercial insurance provided by Preferred Provider Organizations (PPOs). The 6 largest PPOs in the state are included in this Report Card.

The PPO Report Card includes health care quality scores for two major areas:

- ▶ **Clinical Performance Scores** – See the "PPO Provides Recommended Care" column below. To find more information on 10 health conditions/topics, click on the health condition. To learn how the star ratings are calculated, click on the "About the Medical Group Ratings" link at the bottom of this page.

Contra Costa

Choose a different county

Quality health care is getting the right care at the right time.

The Medical Group Report Card includes quality health care scores for two major areas:

- ▶ **Clinical Performance Scores** – See the "Medical Group Provides Recommended Care" column below. This star rating combines scores for the first 6 of the 9 health conditions/topics listed in the dark blue box in the right column. To see star ratings for each health condition/topic, click on the health condition. To learn how the star ratings are calculated, click on the "About the Medical Group Ratings" link at the bottom of this page.
- ▶ **Patient Experience Scores** – See the column below under "Patients Rate Their Medical Group." This star rating is based on one question that asked a sample of medical group patients to rate their overall care in 2012. Five additional patient experience topics can be found in the light blue box in the right column. Click on a specific topic to see more patient experience star ratings. To learn how the star ratings are calculated, click on the "About the Medical Group Ratings" link at the bottom of this page.

The Report Card also provides other helpful information on each medical group. Click on each medical group name to find its consumer assistance number, service area, website and more.

Print this chart
Print all charts for Contra Costa County

Click on medical group for group's star ratings and information:	MEDICAL GROUP PROVIDES RECOMMENDED CARE	PATIENTS RATE THEIR MEDICAL GROUP
Affinity Medical Group	GOOD	FAIR
Alta Bates Medical Group - A Division of Brown and Toland	FAIR	GOOD
Bay Valley Medical Group	FAIR	FAIR
Hill Physicians Medical Group - Bay Region	GOOD	GOOD
John Muir Physician Network	GOOD	EXCELLENT
Sutter East Bay Medical Foundation	GOOD	GOOD
The Permanente Medical Group, Inc. - Diablo/Antioch Medical Centers	GOOD	GOOD
The Permanente Medical Group, Inc. - Oakland/Richmond Medical Centers	GOOD	FAIR

MEDICAL GROUP PROVIDES RECOMMENDED CARE

- ▶ Asthma Care
- ▶ Checking for Cancer
- ▶ Chlamydia Screening
- ▶ Diabetes Care
- ▶ Heart Care
- ▶ Treating Children: Getting the Right Care
- ▶ Treating Bronchitis: Getting the Right Care
- ▶ Giving Lab Tests for Patients Taking Medications for a Long Time
- ▶ Testing for Cause of Back Pain

PATIENTS RATE THEIR MEDICAL GROUP

- ▶ Communicating with Patients
- ▶ Coordinating Patient Care
- ▶ Health Promotion
- ▶ Helpful Office Staff
- ▶ Timely Care and Service

information is found in

consumer assistance

on this chart

all PPO Quality Ratings charts

PPO PROVIDES RECOMMENDED CARE

- ▶ Asthma and Lung Disease Care
- ▶ Behavioral and Mental Health Care
- ▶ Checking for Cancer
- ▶ Chlamydia Screening
- ▶ Diabetes Care
- ▶ Heart Care
- ▶ Maternity Care
- ▶ Treating Adults: Getting the Right Care
- ▶ Treating Children: Getting the Right Care
- ▶ Testing for Cause of Back Pain

PATIENTS RATE THEIR EXPERIENCE

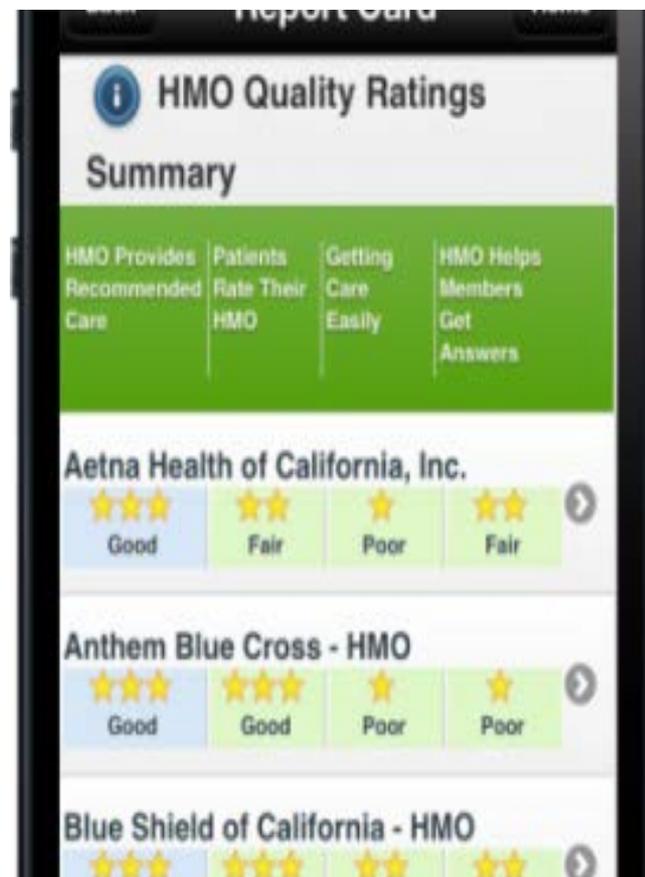
Getting Care Easily
PPO Helps Members Get Answers

Three additional Patient Experience Topics:

Member Complaints
Patient Communication

The California Health Care Report Cards Mobile Apps

- **Free Android and iPhone mobile apps developed in partnership with the California Department of Health Care Services.**
 - ✓ Make Report Cards more accessible
 - ✓ Additional information including “Questions to ask the doctor”



Who Uses Report Cards?

•Consumers

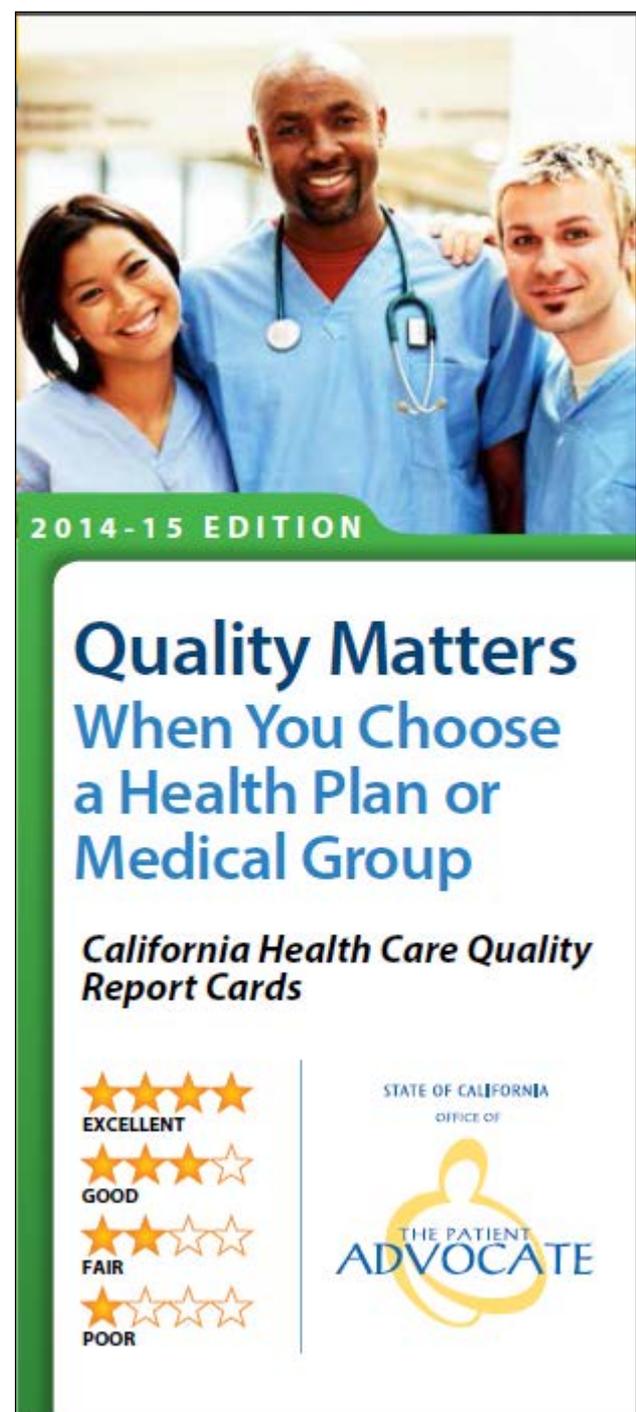
- ✓ To select a health plan and medical group
- ✓ In using benefits and making other health care decisions

•Employers/purchasers

- ✓ Selecting plans and provider networks

•Health Care Industry

- ✓ To improve health care quality
- ✓ For stimulating competition



Advisory Process



Transparency • Collaboration • Alignment

- 1. IHA's Technical Measurement Committee reviews and advises on HEDIS, non-HEDIS and CAHPS methodology changes during its three meetings each year. Member roster online.**
- 2. OPA works with CHPI and their independent decision-making process related to medical group PAS patient experience data.**
- 3. OPA consults with an independent academic and clinical expert, Dr. Patrick Romano.**
- 4. Medical group and health plan representatives annually review their star ratings and organization information as part of quality assurance. Tentatively scheduled for week of October 6.**

OPA Report Cards use four data sets – Measurement Year 2013

Clinical Care Data:

- 1. Health Plans: Healthcare Effectiveness Data and Information Set (HEDIS[®] from NCQA's Quality Compass)**
- 2. Medical Groups: HEDIS and non-HEDIS (from Integrated Healthcare Association P4P Program)**

Patient Experience Data:

- 3. Consumer Assessment Health Plan Survey (CAHPS[®] from NCQA's Quality Compass)**
- 4. Patient Assessment Survey (PAS from California Healthcare Performance Information System)**

Types of Data Display Pages



Display both aggregate star ratings and individual measures

- **Clinical Care Ratings**

- ✓ **1 overall summary rating page for each Report Card**

- **Up to 9 condition summary rating pages – Heart Care, Diabetes, Treating Adults, Treating Children, Checking for Cancer, Asthma and Lung Disease, Chlamydia, Maternity Care, Mental Health Care**

- **Up to 47 measure displays**

- **Patient Experience Ratings**

- ✓ **1 overall summary star rating for the Medical Group Report Card**

- **5 summary star ratings for the Medical Group Report Card**

- ✓ **3 summary star ratings for the HMO Report Card – Rate my HMO, Getting Care Easily and Helps Members Get Answers**

- ✓ **2 summary star ratings for the PPO Report Card – Getting Care Easily and Helps Members Get Answers**

- **Up to 15 measures for health plan report cards**

Overall Summary Pages



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[Print this chart](#)

[Print all HMO Quality Ratings charts](#)

	HMO PROVIDES RECOMMENDED CARE ¹	PATIENTS RATE THEIR EXPERIENCE			HMO PROVIDES RECOMMENDED CARE
		RATE THEIR HMO ¹	GETTING CARE EASILY ¹	HMO HELPS MEMBERS GET ANSWERS ¹	
Click on plan name for plan's star ratings and information:					<ul style="list-style-type: none"> ▶ Asthma and Lung Disease Care ▶ Behavioral and Mental Health Care ▶ Checking for Cancer ▶ Chlamydia Screening ▶ Diabetes Care ▶ Heart Care ▶ Maternity Care ▶ Treating Adults: Getting the Right Care ▶ Treating Children: Getting the Right Care ▶ Testing for Cause of Back Pain
Aetna Health of California, Inc.	GOOD	FAIR	POOR	POOR	
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Health Net of California, Inc.	GOOD	GOOD	POOR	POOR	
Kaiser Permanente - Northern California	EXCELLENT	EXCELLENT	GOOD	POOR	
Kaiser Permanente - Southern California	EXCELLENT	EXCELLENT	POOR	POOR	
Sharp Health Plan	GOOD	EXCELLENT	POOR	GOOD	
UnitedHealthcare of California	GOOD	GOOD	POOR	FAIR	
Western Health Advantage	GOOD	GOOD	GOOD	GOOD	

PATIENTS RATE THEIR EXPERIENCE

- ▶ Getting Care Easily
- ▶ HMO Helps Members Get Answers

Two additional Patient Ratings:

- ▶ Member Complaints
- ▶ Doctor Communications

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Condition Summary Pages

Diabetes Care Summary 2014 Edition

Why is it important to get care for diabetes?

When a person has diabetes, the body's blood sugar (glucose) builds up above the normal level. When the level of blood sugar is high, diabetes can lead to other health problems like kidney failure, blindness and amputations. To see how well you are controlling your diabetes, it is important that your doctor regularly check your eyes, kidneys, blood sugar, blood pressure and cholesterol level. Highly rated HMOs will work with you to help control your diabetes and prevent more health problems.

What do the scores mean?

The stars tell you how successful each HMO was at helping patients with diabetes get the care they needed. More stars are better.

 Print this chart
 Print all Diabetes Care charts

DIABETES CARE

Aetna Health of California, Inc.



FAIR

Anthem Blue Cross - HMO



GOOD

Blue Shield of California - HMO



GOOD

CIGNA HMO



GOOD

Health Net of California, Inc.



GOOD

Kaiser Permanente - Northern California



EXCELLENT

Kaiser Permanente - Southern California



EXCELLENT

Sharp Health Plan



GOOD

UnitedHealthcare of California



GOOD

Western Health Advantage



GOOD

Links show the 7 scores for 'HMO Diabetes Care Summary':

- ▶ Eye Exam for Diabetes Patients
- ▶ Testing Blood Sugar for People with Diabetes
- ▶ Controlling Blood Sugar for Diabetes Patients
- ▶ Testing Cholesterol for Diabetes Patients
- ▶ Controlling Cholesterol for Diabetes Patients
- ▶ Testing Kidney Function for Diabetes Patients
- ▶ Controlling Blood Pressure For Diabetes Patients

Measure Pages



Successfully Controlling Diabetes 2014 Edition

Los Angeles - West

Choose a different county

Why is it important to successfully control your diabetes?

When you have... [read more](#)

Look for differences of at least 4%. Smaller differences usually not significant.

Kaiser Permanente - Southern California Permanente Medical Group - South Bay	50%
Cedars-Sinai Medical Group	49%
Kaiser Permanente - Southern California Permanente Medical Group - Downey	48%
Kaiser Permanente - Southern California Permanente Medical Group - Woodland Hills	48%
Kaiser Permanente - Southern California Permanente Medical Group - Panorama City	48%
Kaiser Permanente - Southern California Permanente Medical Group - Los Angeles	43%
Kaiser Permanente - Southern California Permanente Medical Group - West Los Angeles	43%
HealthCare Partners Medical Group	41%
Axminster Medical Group	39%
UCLA Medical Group	39%
Cedars-Sinai Health Associates	37%

Controlling Blood Sugar For Diabetes Patients 2014 Edition

Why is it important to control blood sugar if you have diabetes?

When a person has diabetes, the body's blood sugar (glucose) builds up above the... [read more](#)

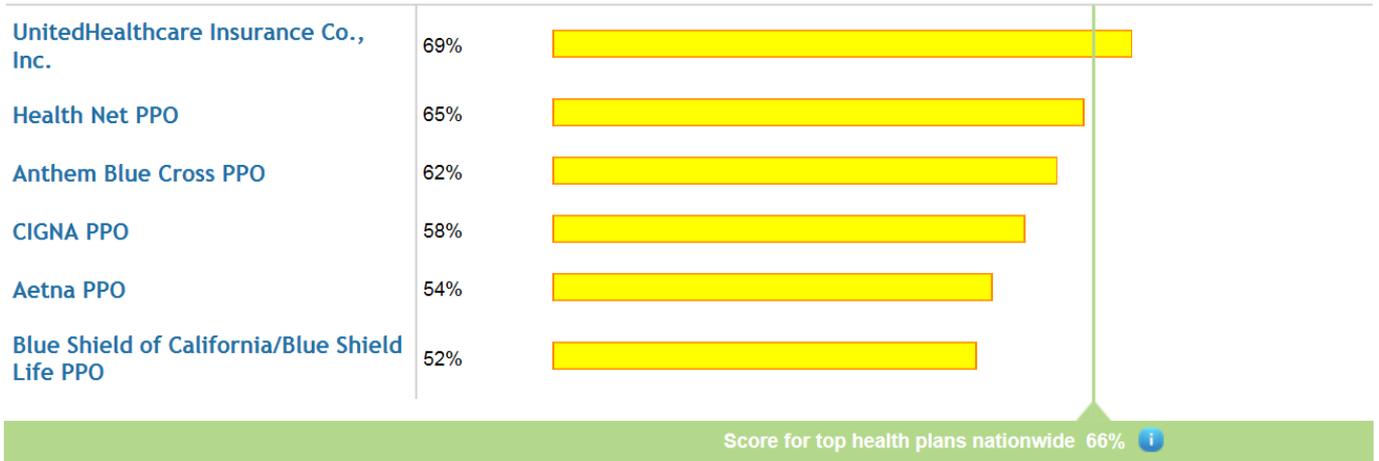
Print this chart

Look for differences of at least 4%. Smaller differences usually are not significant.

CONTROLLING BLOOD SUGAR FOR DIABETES PATIENTS

(Worse)
0%

(Better)
100%



Measure Page Description



Asthma Medicine for Adults/Adolescents 2014 Edition

Why is it important to get the right types and amounts of asthma medicines?

Asthma is a lifelong disease that causes wheezing, shortness of breath, chest tightness, and coughing. Asthma attacks can be painful and frightening. To prevent these attacks, your doctor should make sure that you get the right combination of medications for your asthma and that you know when and how to use them properly.

How should doctors treat asthma?

If you have asthma, you and your doctor should develop an asthma action plan that includes a combination of prescription medicines. Your doctor will prescribe medicines—called anti-inflammatories or controller drugs— that help reduce swelling in your lungs that may lead to asthma attacks. You should also be prescribed reliever drugs to use when you are having an asthma attack. Relievers help reduce wheezing, coughing and shortness of breath. The plan should also help you learn how to avoid triggers that can bring on an asthma attack such as tobacco smoke, mold, pet dander, and outdoor air pollution.

Talk with your doctor and health plan to find out about what other services are available. Many health plans offer additional support and resources for patients with asthma. These additional services may be educational materials (online and in print), classes or support groups, or phone counseling.

What do the scores mean?

The scores show how well each health plan did at making sure members, ages 12 through 64 who experienced frequent asthma symptoms, got the right combination of medicines — called controllers and relievers — for their asthma and knew when and how to use them properly. The higher score means more patients got the right care at the right time.

The scores are based on information from PPO member administrative records in 2012.

Star Rating Thresholds – See Methodology Descriptions for Details



- **OPA sets high standard for quality star ratings by using national all lines of business percentile cutpoints for health plans and all California participating provider groups for medical groups:**
 - ✓ **90th percentile for 4 stars or Excellent**
 - ✓ **50th percentile for 3 stars or Good**
 - ✓ **25th percentile for 2 stars or Fair (per CHPI – 10th percentile for Medical Group Patient Ratings)**
 - ✓ **Below 25th percentile for 1 star or Poor (per CHPI – below 10th percentile for Medical Group Patient Ratings)**



Methodology Standards



- Reporting Year data are compared to all lines of business data for the previous Reporting Year data.
- Typically, when a measure has major changes, same year data is compared. For this edition, same year data applies to:
 - ✓ Breast Cancer Screening
 - ✓ Asthma Medication
 - ✓ Antidepressant Medication
 - ✓ Checking if Children's Weight and Checking if Adolescent's Weight Could Cause Health Problems
 - ✓ Cervical Cancer Screening
 - ✓ Flu Shots for Adults
- See 2014 Edition Methodology descriptions for details:
 - ✓ Medical Group: <http://reportcard.opa.ca.gov/rc/medicalgroupabout.aspx>
 - ✓ HMO: <http://reportcard.opa.ca.gov/rc/hmoabout.aspx>
 - ✓ PPO: <http://reportcard.opa.ca.gov/rc/ppoabout.aspx>

Changes for 2014-15 Edition to be Released in October 2014



1. Two new measures added

2. Updated data and measure descriptions

- ✓ **Final year for measures about cholesterol testing and control and the all or none medical group diabetes testing and control**
- ✓ **Age band revisions**

Shortened timeline precludes adding any new features or other major changes until later in the cycle

Two New Measures



1. HPV Vaccine for Male Adolescents – Medical Group Report Card

- ✓ HPV Vaccine for Male and Female Adolescent measure descriptions now note this is an important cancer prevention effort for both girls and boys.

2. Preventing Hospital Readmissions After Discharge (All Cause Readmissions) – HMO, PPO and Medical Group Report Cards

- ✓ First resource use measure in Report Cards that will be reported only as a “higher rate is better,” bar chart measure with no national reference line.
- ✓ Measure description will link to new OPA website page about preventing hospital readmission.
- ✓ See draft measure description included in these slides.

Measure Description Revisions



- 1. The 2014-15 Edition Report Cards is the final year to report cholesterol testing and control measures for Diabetes Care and Heart Care. Measure descriptions include brief statement of new guidelines and refer to the CDC website for more information.**
- 2. Age bands revised for a few measures:**
 - ✓ Breast Cancer Screening (50 to 74) (previously 40-69)
 - ✓ Flu Shots for Adults (18 to 64) (previously 50-64)
- 3. This is also the final year for the current stand alone Medical Group measure “Successfully Controlling Diabetes” that rolls up three all-or-none measures: A1c <8, LDL cholesterol <100, nephropathy test**
 - ✓ Next year’s new measure being considered by OPA will include four all-or-none measures:
 - Two A1c tests and nephropathy monitoring
 - A1c <8.0% and blood pressure <140/90 mm Hg

Draft Measure Description: Preventing Hospital Readmission After Discharge



Why is it important to prevent returning to the hospital?

There are many patients who have to go back to the hospital after being discharged. In many of these cases, the return trip to the hospital could have been prevented. Return hospital trips should be avoided because they can often lead to more serious or new health problems. With return hospital visits, there are also more hospital bills and more time away from work.

How should your doctor and the hospital staff help you avoid another hospital stay?

A good discharge plan is important. Hospital staff should work or communicate with your doctor on the discharge plan before you leave the hospital. Hospital staff should discuss the care instructions with you and your family member or caregiver. Be sure to ask questions if you don't understand the instructions. If you can't follow the discharge instructions, be sure to ask for help or alternatives. Different resources may be available such as in-home care services, transportation assistance or the possibility of transferring to a different type of care facility.

For more information to help you and your caregivers manage your care after a hospital stay, visit <http://www.opa.ca.gov/Pages/HospitalCare.aspx#discharge>

What do the scores mean?

The scores show how well each health plan/medical group did at making sure patients did not return to the hospital for the same or a different health condition within 30 days after a hospital visit. The higher score means more patients got the right care at the right time.

The scores are based on information from HMO or PPO member administrative/medical group patient records in 2013.

DRAFT DRAFT

Important Key Dates



- ❖ **Health Plan and Medical Group star rating and profile page preview planned for October 6-8, 2014**
 - **Webinar scheduled for Oct. 6 at 10 am**

- ❖ **2014-15 Edition Report Cards Release planned for October 15, 2014**

2015 and Forward



- 1. Complaint Data Public Reporting: OPA to report health care complaint data from Dept. of Managed Health Care, Dept. of Insurance, Covered California and Dept. of Health Care Services. Two reports are due July 1, 2015:**
 - **Baseline Report – Information on the state call center’s protocols and processes for getting and referring inquiries, data, etc.**
 - **Legislative Report – Analysis of consumer complaint data received by state call centers**
- 2. Timely Access Compliance Rate reporting for HMO health plans**
- 3. Continued assessment on usability of OPA’s Health Care Quality Report Cards including online survey**

OPA Contacts



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OPA website: www.opa.ca.gov

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