Accountable Care Organizations

CG-CAHPS, and Transparency

Thomas Schlesinger, Ph.D
Gundersen Lutheran Health System
La Crosse, WI
• Integrated Delivery System
  – Approximately 6,500 Total Employees
  – 776 providers employed / 474 medical staff
  – 41 clinic locations
  – 325-bed Tertiary Medical Center

• Physician-led organization
The Larger Context of American Healthcare
The Cost Issue
Structure of the American health care system
Accountable Care Organizations
CG-CAHPS and transparency
Impact on Health Literacy
A Famous Phrase

Δ

Change
Access  Quality  Cost
The Changing Landscape of American Healthcare
The Problem of Rising Costs

Likely to Change the Landscape of American Health Care
National Health Expenditures
As a Percent of Gross Domestic Product

Other important expenditures are being squeezed out.

Source: CMS
Figure 3. Projected Spending on Health Care as a Percentage of GDP

Projected spending on health care under an assumption that excess cost growth continues at historical averages.

Source: Congressional Budget Office, 2007 (15)

Note: Excess cost growth refers to the number of percentage points by which the growth of spending (per capita) is assumed to exceed the growth of nominal gross domestic product (per capita).
Payment reform must include the patient

- Any strategy to bend the cost curve must go beyond health providers and include patient engagement.

- Once the focus is on getting and staying healthy, patient engagement and patient education increasingly important in effective and efficient care.
Thinking about your own work

How does health literacy impact patient engagement?

If the goal becomes patient engagement, how might your strategy around patient education change?
Two Structural Barriers

1. Fragmented nature of health care industry that doesn’t deliver highly coordinated, efficient care.

2. Reimbursement system rewards treatment - not getting or staying healthy
The Affordable Care Act

Focused on increasing access to health care insurance
Began process to reform payment and thus delivery system.

Accountable Care Organizations
  - Accountable for the value of the care
Defining Accountable Care

An entity that can implement organized processes for improving quality and controlling costs of care and be accountable for those results.
The Affordable Care Act
Reorganizing American Health Care

To Add Needed Infrastructure
Just a few years ago, 80% of American physicians were in solo or single specialty practices*

Hing, National Center for Health Statistics
Health Care is still a cottage industry
A Key Change: How Care Is Paid For

- Current reimbursement system
  - Regulatory fee schedule
  - Incents expensive treatment of illness
  - Dis-incent activities not found on fee schedule
To reform the delivery system, the payment system must change

- ACO Reimbursement
  - Pay to maintain the health of a population
- Paying for Value not volume
  - Global payment
  - Comprehensive, coordinated care
- A new structure
1. Standard measures agreed upon
2. Voluntary Public Reporting
3. Pay-for-Reporting
4. Pay-for-Performance
Current fragmented structure problematic
Greater size and comprehensive orientation
Global payment alters the incentives
Ability to Measure and Report on the Quality of Care

Increasing Focus on the Public Reporting of Quality and the Patient Experience
The Six Dimensions of Quality

SAFE  EFFECTIVE  FAMILY-CENTERED  TIMELY  EFFICIENT  EQUAL
Patient and Family-Centered Care
The Patient’s Perspective

Patient Satisfaction vs. Experience
Measuring Different Things

Patient Satisfaction
- Rate how the quality of the experience
  - Very Poor
  - Poor
  - Fair
  - Good
  - Very Good

Patient Experience
- Rate how often a best practice occurred
  - Never
  - Sometimes
  - Usually
  - Always
  ---------------
  - No
  - Yes, Somewhat
  - Yes, Definitely
Scoring Different Things

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H-CAHPS

Hospital-Consumer Assessment of Health Providers and Systems

- Standard survey of the patient’s experience in the hospital
- Adopted by CMS
- Linked to reimbursement
- Pay for Performance beginning in 2012
Bars below tell the percent of patients who reported that their nurses "always" communicated well.

**How often did nurses communicate well with patients?**

- **Average for all Reporting Hospitals in The United States**: 76%
- **Average for all Reporting Hospitals in Wisconsin**: 79%
- **UNIVERSITY OF WI HOSPITALS CLINICS AUTHORITY**: 78%
- **MERITER HSPTL**: 78%
- **ST MARYS HOSPITAL**: 81%
CG-CAHPS

Clinic and Group-Consumer Assessment of Health Providers and Systems

- Standard survey of the patient’s experience in for clinic practice
- Not yet adopted by CMS
- Not yet linked to reimbursement
- No single standard yet
CG-CAHPS Survey

What do we know

- Adult and child versions
- Primary care and specialty care

What don’t we know

- Visit-specific questions
- 12 month look-back
Will CG-CAHPS follow the same track as H-CAHPS?

- Proposed standard for ACOs
- Linked to reimbursement?
- Do we know how soon?
- Barriers
What are the questions on CG-CAHPS?
Two Global Questions

- Using any number from 0 to 10, where 0 is the worst doctor possible and 10 is the best doctor possible, what number would you use to rate this doctor?

- Would you recommend this doctor's office to your family and friends?
The Access Section
In the last 12 month...

- ...how often did you get an appointment as soon as you thought you needed?
- ...how often did you get an answer to your medical question that same day?
- ...how often did you get an answer to your medical question as soon as you needed?
- ....how often did you see this doctor within 15 minutes of your appointment time?
- did you see this doctor within 15 minutes of your appointment time?
During your most recent visit...

...were clerks and receptionists at this doctor's office as helpful as you thought they should be?

.did clerks and receptionists at this doctor's office treat you with courtesy and respect?
Physician Communication Section
During your most recent visit…

- ...did this doctor explain things in a way that was easy to understand?
- ...did this doctor listen carefully to you?
- ...did you talk with this doctor about any health problems or concerns?
- ...did this doctor give you easy to understand instructions about taking care of these health problems or concerns?
- ...did this doctor seem to know the important information about your medical history?
- ... did this doctor show respect for what you had to say?
- ... did this doctor spend enough time with you?
One of the challenges in health literacy is how to identify areas for improvement and how to measure improvement.
AHRQ on Health Literacy

To measure, from the patients’ perspective, how well health information is communicated to them by health care professionals.

- To encourage a greater emphasis in the provider community on patient-centered care.
Extensive Item Set

- Communication with doctors.
- Communication about health problems and concerns.
- Communication about medicines.
- Communication about tests.
- Communication about forms.
- Disease self-management.

www.cahps.ahrq.gov
Examples

- ...how often did the doctor let you talk without interruption?
- ...talk to you about the pro’s and con’s of each choice...
- ...enough information about surgery before it was done
- ...use medical words you did not understand
- ...ignore what you told him or her
The CAHPS Item Set for Addressing Health Literacy is intended to serve as both a measure of whether health care professionals have succeeded in reducing the health literacy demands they place on patients, and as a tool for quality improvement.
Using the CAHPS Literacy Questions

- Identify specific topic areas for quality improvement (e.g., communication about test results, medications, and forms).
- Recognize behaviors that inhibit effective communication (e.g., talking too fast, using medical jargon).
- Assist in designing a safer, shame-free environment where patients feel comfortable discussing their health care concerns (e.g., showing interest in questions, explaining forms).
- Measure the effect of behaviors that promote effective communication (e.g., confirming understanding through teach-back, using visual aids).
What might public reporting look like?
Results will be reported using “top box” scoring: percent of patients giving most positive response for given measure

3 composite measures
  - Able to get appointments and care when needed
  - Helpful and courteous office staff
  - Effective doctor-patient communication

3 individual survey questions
  - Received test results from the doctor’s office
  - Willing to recommend the doctor to other people
  - Rating the doctor as a “9” or “10” with 10 being best score
Physician Compare

What type of provider are you looking for?

Required Search Criteria

Type
- Physician: Internal Medicine
- Other Healthcare Professional: Select a Professional

Location - ZIP Code or City, State

54601 eg. 10009 or New York, NY

Search Providers
<table>
<thead>
<tr>
<th>CLINIC</th>
<th>Able to get appointments and care when needed</th>
<th>Helpful and courteous office staff</th>
<th>Effective doctor-patient communication</th>
<th>Received test results from the doctor’s office</th>
<th>Rating the doctor as a &quot;9&quot; or &quot;10&quot;</th>
<th>Willing to recommend the doctor to other people</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benchmark Pilot Average (WI)</td>
<td>Always</td>
<td>Definitely Yes</td>
<td>Definitely Yes</td>
<td>Yes</td>
<td>Rating the doctor as a &quot;9&quot; or &quot;10&quot; with 10 being the best possible score</td>
<td>Definitely Yes</td>
</tr>
<tr>
<td></td>
<td>64%</td>
<td>94%</td>
<td>92%</td>
<td>91%</td>
<td>78%</td>
<td>91%</td>
</tr>
<tr>
<td>Gundersen Clinic, Ltd. LaCrosse Internal Medicine</td>
<td>69%</td>
<td>97%</td>
<td>94%</td>
<td>93%</td>
<td>84%</td>
<td>93%</td>
</tr>
<tr>
<td>Gundersen Clinic, Ltd. Viroqua Clinic</td>
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<td>95%</td>
<td>94%</td>
<td>87%</td>
<td>80%</td>
<td>93%</td>
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<tr>
<td>Luther Midelfort Eau Claire Luther Campus</td>
<td>59%</td>
<td>94%</td>
<td>94%</td>
<td>97%</td>
<td>82%</td>
<td>92%</td>
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</tbody>
</table>
### Denver-area, all-physician average

<table>
<thead>
<tr>
<th>Doctor Name</th>
<th>Age</th>
<th>Specialty</th>
<th>Travel Distance</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr. Alan Aboaf</td>
<td>46</td>
<td>Internal Medicine</td>
<td>16.14 miles</td>
<td>79</td>
</tr>
<tr>
<td>Dr. Pamela Abrams</td>
<td>31</td>
<td>Family Medicine</td>
<td>11.16 miles</td>
<td>68</td>
</tr>
<tr>
<td>Dr. Jack Aikin</td>
<td>78</td>
<td>Internal Medicine</td>
<td>18.16 miles</td>
<td>92</td>
</tr>
<tr>
<td>Dr. Bradley Alger</td>
<td>29</td>
<td>Family Medicine</td>
<td>8.54 miles</td>
<td>73</td>
</tr>
</tbody>
</table>

Choose up to 4 doctors to compare. [Compare]
<table>
<thead>
<tr>
<th>Overall rating of Doctor...</th>
</tr>
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<tbody>
<tr>
<td><strong>Dr. Abrams</strong></td>
</tr>
<tr>
<td><strong>Dr. Aikin</strong></td>
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<tr>
<td><strong>Dr. Alger</strong></td>
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<tr>
<td><strong>Dr. Allbright</strong></td>
</tr>
<tr>
<td><strong>Community Average</strong></td>
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<th>Overall, being able to get appointments and care when needed</th>
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<th>Overall, how well doctor communicates...</th>
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A Paradigm Shift in Transparency

• Initial reporting at level of clinic/department
• But the intent is clearly physician-level comparison on quality and the patient experience
What does this all mean to you?
DISCUSSION