

What We're Learning: How to Report on the Quality of Physician Practices

The Challenge

Publicly reporting on the quality of health care serves three important purposes. It enables:

- Patients to make informed choices about their care and be better partners with their doctors.
- Health care professionals to see where they can improve their performance.
- Consumers and purchasers to see the quality of services they are getting for their money.

As part of the Robert Wood Johnson Foundation's *Aligning Forces for Quality* (AF4Q) initiative, 16 alliances across the country have published public reports about the quality of care local physicians provide—reports that everyone who gets, gives, or pays for care can use. The content of these reports has varied. Some rely on insurance claims data, others use metadata taken directly from physicians' medical records, and several directly survey patients to ask how they experienced care.

Many alliances overcame initial resistance from local physicians to performance measurement. Alliances have also encountered difficulty getting consumers to use their reports.

However, there is substantial evidence that providers are using performance data to improve their care. Alliances are also learning how to make their reports more consumer friendly.

The Facts

 **200**
websites and growing

Public reporting of performance measurement data is growing. More than 200 websites provide information about local health care providers.¹

 **48**
states

Initiatives to publicly report performance data are popping up across the country. Every state except for Alaska, Idaho, and the District of Columbia has at least one public report on the quality or cost of care provided by hospitals or physicians.²



What's Working

Reporting about the quality of health care can be controversial, especially when reporting poor performance. Most alliances sought to get all necessary stakeholders on board from the outset, including physicians, health plans, data experts, purchasers, and consumers. Without stakeholder buy-in, it is difficult to launch and sustain a public reporting program.

Physicians have mixed feelings about performance reporting. When working with Consumers Union to publish a special insert in *Consumer Reports*, Massachusetts Health Quality Partners (MHQP), which leads

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“Our challenge is that as science continues to improve, so do the approaches to get outcomes for patients. Because of the changes around LDL levels, we are going to change what we’re monitoring for patients with diabetes. It is a great example of how things have to evolve in health care to stay up with some of the best science, and how you can use data to motivate change and get to better performance.”

—JIM CHASE,
MINNESOTA COMMUNITY
MEASUREMENT

the state’s AF4Q efforts, found that some physicians were uneasy with being rated, and felt that the practice of medicine cannot be compared and rated like common household appliances. Other physicians countered this concern by noting that transparency is here to stay. In an effort to get the physician community’s seal of approval, many AF4Q communities develop private reports for physicians, medical group administrators, and clinic managers to review before sharing the data publicly.

Oregon Health Care Quality Corporation (Q Corp), which leads the state’s AF4Q efforts, put together a measurement and reporting committee comprised of consumers, providers, employers, policymakers, and health insurers. The committee identifies and makes recommendations to Q Corp’s board of directors on principles for measure selection and public reporting criteria.

When launching its efforts to measure the D5— a composite measure of five select treatment goals for managing diabetes—Minnesota Community Measurement, which leads the AF4Q effort in Minnesota, brought together physicians, medical group representatives, health plan leaders, and associations in a pilot program to build consensus on the initial set of measures and methodologies to be used. After the initial launch, these groups were also consulted on the evolution of measures.

FAST FACT: A study of 567 health care practices in Wisconsin showed that participation in public reporting correlated with improved performance.³

Sound data is just one piece of the puzzle when it comes to publicly reporting performance information. Data must be presented in a clear and actionable way to increase usability for both consumers and physicians. Content should present the meaning and importance of specific measures, in addition to guidance on how to use the data to make health care decisions.

MHQP recently launched a new consumer-friendly website, *HealthcareCompassMA.org*, which makes it easier for patients to search and compare more than 400 primary care doctors’ offices across the state based on how well doctors provide care, services, and treatments. To ensure usability of the website, MHQP conducted multiple rounds of testing with focus groups made up of consumers, medical group representatives, and physicians.

Wisconsin Collaborative for Healthcare Quality (WCHQ), which leads the AF4Q effort in Wisconsin, took a different approach to presenting its performance data to consumers. In 2011, WCHQ created fictional characters—Bob, Helen, and Russell—to help educate consumers on the type of care they should be receiving. Visitors to the Wisconsin Health Reports website can follow each character’s story, learn the care he or she should be receiving, and view the quality data for physicians in their area for measures related to each story. WCHQ received great results and feedback with more than 2,700 unique website visitors in the first three months after its launch. Due in part to the positive reception, WCHQ plans to launch a fourth character.

FAST FACT: The National Quality Forum has identified and endorsed more than 750 standardized measures for publicly reporting performance.⁴

1 “10 Performance Measurement and Public Reporting Facts.” Robert Wood Johnson Foundation www.rwjf.org/content/dam/farm/reports/issue_briefs/2012/rwjf400299/subassets/rwjf400299_2 Accessed August 10, 2014.

2 Ibid.

3 Ibid.

4 James, Julia. 2012. “Health Policy Brief: Public Reporting on Quality and Costs.” *Health Affairs*.



Building a Consumer-Friendly Public Reporting Website

Making publicly reported data useful requires the data to be presented in a user-friendly format. [Massachusetts Health Quality Partners](#) (MHQP) created and launched its public reporting website, [Healthcare Compass](#), in June 2014. The website enables people to search and compare more than 400 primary care doctors' offices across the state based on clinical quality data and surveys of more than 64,000 patients.

Before MHQP started building the site, they examined 11 consumer websites, including those from fellow [Aligning Forces for Quality](#) communities, such as [Minnesota Community Measurement](#), [Oregon Health Care Quality Corporation](#), and [Maine Quality Counts](#). They studied elements that were important for their website, including how they enabled users to sort data and the types of icons used to present the ratings.

Consumers from MHQP's Consumer Health Council played an integral role in the website creation. Council members were part of the decision-making process from the first strategy sessions through the design and testing process. Physicians also participated in the design and review process. As part of a multistakeholder workgroup, physicians and consumers worked together to come to agreement on a way to present data that would be a fair, accurate, and user-friendly depiction of physician performance.

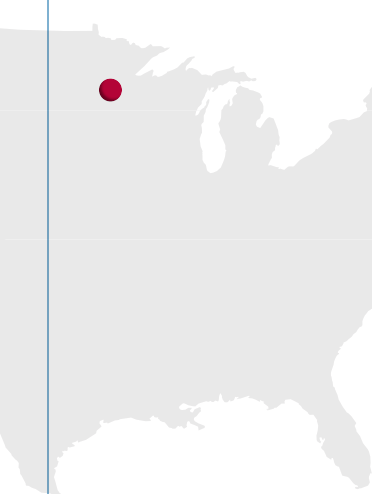
Once they had developed a beta site, MHQP conducted numerous rounds of usability testing with both consumers and members of the practices that were part of the report. This testing helped MHQP understand potential factors, such as how easy it is for users to navigate the site, understand what the measures of care presented on the site mean, and decipher the rating system's icons.

Based on the feedback, MHQP created pop-up boxes that explain each measure when the user clicks on the measure name. Included in these pop-ups are information on what the measure is, why it is important, tips on what the patient and doctor can do to manage the health condition, and additional resources.

Since its launch, the website has received excellent feedback from consumers and providers alike. MHQP is now considering taking the new feedback it has received from website visitors and implementing new elements, such as an interactive blog, and including details about practices, such as their office hours, phone number, and directions.

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Selecting Measures That Stand the Test of Time

How do patients know if a physician's practice takes good care of its patients? How do physicians know where they have room to improve? How do purchasers know if they are getting good quality services for their health care dollars?

We can only know the quality and value of care by measuring and reporting provider performance against a common standard. This enables everyone to see who does a good job and where they can do better.

Deciding what to measure is a vital first step in public reporting about the performance of local health care providers. *Minnesota Community Measurement* (MNCM) developed a set of measures for diabetes care called the D5, which illustrates the completeness of diabetes treatment. In doing so, they left the door open for the measures to evolve with the science.

The D5 is a set of five treatment goals that together represent the standard for managing diabetes. When a practice gives care that meets the D5 composite measure, his or her risk for complications such as heart attacks, strokes, and problems with the kidneys, eyes, and nervous system.

MNCM publicly reports on its website, MNHealthScores.org, on how well physicians across the state work with their patients to achieve the D5's indicators: blood pressure less than 140/90 mmHG; LDL cholesterol less than 100 mg/dl; blood sugar (HA1c) less than 8 percent; tobacco-free; and taking aspirin as appropriate. These measures were selected because they reveal the completeness of care that patients with diabetes need to manage the complications that can arise from their chronic condition.

To develop the measure, MNCM brought together physicians and others from medical groups, health plans, and other stakeholder organizations to determine what facets of care were most important for limiting the complications that arise from diabetes. MNCM first reported the D5 measure in 2003 and, over time, components of the measure—such as glucose control targets—have changed as science and standards of care have evolved. And they continue to change: MNCM is now in the process of shifting from using an LDL target as a measure of appropriate statin use.

"It is a great example of how things have to evolve in health care to stay up with some of the best science," said Jim Chase, president of MNCM. "The D5 shows how you can use data to motivate change and get to better performance."

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How Public Reporting Came Together in Oregon

Through its work with *Aligning Forces for Quality*, Oregon Health Care Quality Corporation (Q Corp) is dedicated to improving health care in Oregon by leading community collaborations and producing unbiased information about the quality of health care provided throughout the state. Patients can use the reports to make informed choices about their care and be better partners with their doctors. Health care professionals can use the reports to see where they can improve their performance. And both consumers and purchasers can use the reports to see the quality of service they are getting for their health care dollars.

To develop their public report on provider quality, Q Corp created a measurement and reporting committee comprised of consumers, providers, employers, policymakers, and health insurers to work collaboratively and make recommendations to Q Corp's board of directors on principles for measure selection and public reporting criteria. This information was then made available to patients and consumers on the *Partner for Quality Care website* launched in 2009.



To learn more about measuring and reporting on physician quality, we sat down with Katrina Kahl, director of communications and marketing at Q Corp.

Q How did Q Corp manage to bring together such a diverse group of health care stakeholders—including purchasers, insurers, physicians, and consumers—to formulate a measurement and reporting committee? What did the committee accomplish?

Katrina: During the development phase, our volunteer board of directors deliberated how to successfully put together this committee, compile data, and aggregate it in a way that would allow us to measure the quality of health care provided to Oregonians.

The work of this collaborative committee has resulted in the most comprehensive directory of primary care practitioners in the state; a secure, private website that provides data doctors can use to evaluate the care they provide; a website for patients and consumers that provides tips on getting quality care and allows them to compare the quality of care in hospitals and doctors' offices in Oregon; and an annual statewide report on health care quality.

Q One challenge you faced was that many insurers consider their data to be proprietary. How were you able to gain their support to aggregate the data?

Katrina: Our board was incredibly dedicated to this measurement initiative and we received strong support from a number of organizations. For example, the Public Employees Benefits Board wrote into their health insurance contracts that if you wanted to bid to be a health insurer for them, you had to supply data to Q Corp and be a part of the collaborative. Dedication from members like this allowed us to be successful. We currently work with Oregon's largest insurers and are moving forward to bring other groups on board.

Q What is the committee's criteria for determining what quality data is publicly reported?

Katrina: In 2008, we began with the basic Healthcare Effectiveness Data and Information Set (HEDIS) measures, the standardized set of performance measurements. HEDIS measures include women's health and chronic disease care. We add new measures to our publicly reported data in a variety of ways. Certain issues and topics are brought to our attention through our work with various community groups—when they are trying to get programs off the ground to improve care, but they are lacking data or when they need metrics to track whether their initiatives are working.

Every year our team reviews all currently reported measures. The committee also looks at potential new measures against a set of criteria developed by the committee. We determine if new data needs to be added based on relevancy for physicians and consumers, and if the issue is gaining traction either nationally or locally. Since we started, we have added new measures and are now publicly reporting on close to 30 measures.

Q Are providers able to see the data before it is reported to the public?

Katrina: Providers have the ability to access their data through our secure online portal. They can review their data and make any necessary and legitimate corrections to the data before public reporting. For newly added measures, providers have a chance to privately review their data for a full year before we report it publicly.

Q What process did Q Corp undergo to develop a website to present the data?

Katrina: When we set out to develop the website, we wanted the community to embrace and adopt it as a valuable service. Before we launched the website in 2009, we conducted usability testing to ensure the site was fully functional and resonated with consumers. In 2011, we organized another round of consumer testing, and visitors navigated the site and provided input on what was useful and what was not useful. We implemented those recommendations and conducted even more testing in 2012. Based on user feedback, we adjusted the home page to specifically call out important data and measures. We also revised the navigation so it was easier for users to access the data. Finally, we added clinic-level pages so users could see results for all the different measures for a clinic on individual pages.

Q What results have you seen in consumers and providers using the data?

Katrina: Our partner consumer advocacy groups and membership organizations in Oregon allow us to communicate with their members to reiterate the idea that they should be using the website to find and compare providers. This approach has helped increase the number of consumers using the website.

When we release our reported data twice a year, we see a jump in the number of providers visiting the secure provider portal. This tells us that providers are looking at the data, paying attention to the data, and reviewing how they compare to their peers.

Quality Field Notes



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Public Reporting

Resource Guide

Overview Materials on Public Reporting

Resource	Source	Description	Link
Public Reporting Can Boost Health Care Quality—Locally	<i>HealthLeaders Media</i>	An article on efforts in AF4Q communities to use public performance reports to improve care.	www.healthleadersmedia.com/print/PHY-304306/Public-Reporting-Can-Boost-Healthcare-QualitydashLocally
Composite Measures: A New Gold Standard in Diabetes Care	<i>Aligning Forces for Quality</i>	An overview of efforts in AF4Q communities to measure diabetes care.	http://forces4quality.org/composite-measures-new-gold-standard-diabetes-care
The D5 for Diabetes	Minnesota Community Measurement	An overview of the D5 and how the measure set helps patients and doctors better manage diabetes.	http://mncm.org/reports-and-websites/the-d5/
Issue Brief: Performance Measurement and Quality Improvement	<i>Aligning Forces for Quality</i>	A brief that examines lessons from AF4Q alliances that have made information about the quality of care local physicians provide publicly available.	http://www.rwjf.org/content/dam/farm/reports/issue_briefs/2013/rwjf409069
Infographic: Measurement + Reporting = Improvement	<i>Aligning Forces for Quality</i>	An infographic examining efforts across the country to use public reports to improve quality of care.	http://www.rwjf.org/content/dam/farm/reports/issue_briefs/2013/rwjf409077 (download)
Improving Public Reporting Websites for Consumers	Robert Wood Johnson Foundation	A brief on the lessons learned from consumer testing of AF4Q public reporting websites.	www.rwjf.org/en/research-publications/find-rwjf-research/2012/04/improving-public-reporting-websites-for-consumers.html
Lessons Learned in Public Reporting	Robert Wood Johnson Foundation	A brief on how to determine what measures to publicly report.	www.rwjf.org/en/research-publications/find-rwjf-research/2011/04/lessons-learned-in-public-reporting.html
Can Publicly Reporting the Performance of Health Care Providers Spur Quality Improvement?	Robert Wood Johnson Foundation	A report on efforts in AF4Q communities to publicly report quality of care data.	www.rwjf.org/en/research-publications/find-rwjf-research/2012/08/reform-in-action--can-publicly-reporting-the-performance-of-heal.html
How to Display Comparative Information That People Can Understand and Use	<i>Aligning Forces for Quality</i>	A report that includes information on how AF4Q communities are determining how to best display public reports.	http://forces4quality.org/how-display-comparative-information-people-can-understand-and-use
Working with <i>Consumer Reports</i> to Educate Consumers to Make Informed Health Care Decisions	Robert Wood Johnson Foundation	A report that examines how AF4Q communities partnered with <i>Consumer Reports</i> to publicly report data.	http://www.rwjf.org/content/dam/farm/reports/issue_briefs/2014/rwjf413645

Tools and Tips on Public Reporting

Resource	Source	Description	Link
10 Performance Measurement and Public Reporting Facts	Robert Wood Johnson Foundation	10 fast facts about public reporting efforts across the country.	www.rwjf.org/content/dam/farm/reports/issue_briefs/2012/rwjf400299/subassets/rwjf400299_2
Five Performance Measurement and Public Reporting Lessons for Stakeholders	Robert Wood Johnson Foundation	A list of items those developing public reports should keep in mind in order to get stakeholder buy-in.	www.rwjf.org/content/dam/farm/reports/issue_briefs/2012/rwjf400299/subassets/rwjf400299_3
Five Things to Keep in Mind When Using Information on the Quality of Local Doctors or Hospitals	Robert Wood Johnson Foundation	A tip sheet for consumers using quality data to select a physician or hospital.	www.rwjf.org/content/dam/farm/reports/issue_briefs/2012/rwjf400299/subassets/rwjf400299_1
Resource Guide: Performance Measurement and Quality Improvement	Robert Wood Johnson Foundation	A resource guide for communities looking to use public reports to improve care.	http://www.rwjf.org/content/dam/farm/reports/issue_briefs/2013/rwjf409069/subassets/rwjf409069_1
Communicating With Physicians About Performance Measurement	Robert Wood Johnson Foundation	A report on how to best begin talking with physicians about measuring and reporting performance data.	www.rwjf.org/content/rwjf/en/research-publications/find-rwjf-research/2009/12/communicating-with-physicians-about-performance-measurement.html?cid=xdx_qe_af4q
What are Best Practices for Displaying Comparative Reports on Public Reporting Websites?	<i>Aligning Forces for Quality</i>	An overview of consumer feedback to AF4Q public reporting websites.	http://forces4quality.org/what-are-best-practices-displaying-comparative-reports-public-reporting-websites
Quality Measurement & Reporting: Frequently Asked Questions	Oregon Health Care Quality Corporation	A document that addresses the most common questions about measurement and reporting received by the Oregon Health Care Quality Corporation.	http://q-corp.org/sites/qcorp/files/FAQ%20-%20Spring%202014.pdf (download)
Using Quality Corp Reports to Improve Care	Oregon Health Care Quality Corporation	An overview on how to best use public reports to improve care.	http://q-corp.org/sites/qcorp/files/How%20Providers%20and%20medical%20groups%20use%20Q%20Corp-Reports-to-Improve-Care%20Spring%202014.pdf (download)

Case Studies

Resource	Source	Description	Link
Wisconsin Health Reports—Engaging Consumers With a Storytelling Approach	Wisconsin Collaborative for Healthcare Quality	A report on efforts in Wisconsin to use fictional characters to help consumers understand comparative health care information.	www.wchq.org/news/e_news/2011_summer/storytelling_summer11.php
Publicly Reported Quality-of-Care Measures Influenced Wisconsin Physician Groups to Improve Performance	<i>Health Affairs</i>	An article on efforts in Wisconsin to use public performance reports to improve health care.	http://content.healthaffairs.org/content/32/3/536.abstract
How Data Can Boost the Value of Care	<i>Aligning Forces for Quality</i>	An overview of efforts in Oregon to use public reports to improve care.	www.rwjf.org/content/dam/files/rwjf-web-files/Research/2014/How%20Data%20Can%20Boost%20the%20Value%20of%20Care_AF4Q_July%202014.pdf (download)

Case Studies *(continued)*

Resource	Source	Description	Link
Cincinnati Case Study	Robert Wood Johnson Foundation	An examination of how the Health Collaborative convened local physicians to see how they could use performance measures to improve care.	http://www.rwjf.org/content/dam/farm/reports/issue_briefs/2013/rwjf409069/subassets/rwjf409069_2 (page 1)
Wisconsin Case Study	Robert Wood Johnson Foundation	A case study on how the Wisconsin Collaborative for Healthcare Quality's public reports helped to engage physicians in an effort to improve the rate of screening for colorectal cancer.	http://www.rwjf.org/content/dam/farm/reports/issue_briefs/2013/rwjf409069/subassets/rwjf409069_2 (page 2)
Cleveland Case Study	Robert Wood Johnson Foundation	A review of how Better Health Greater Cleveland analyzed data from its public report to identify top-performing clinics and spread best practices.	http://www.rwjf.org/content/dam/farm/reports/issue_briefs/2013/rwjf409069/subassets/rwjf409069_2 (page 3)
Interview with Kathleen Lehman	Robert Wood Johnson Foundation	An interview with Kathleen Lehman, Better Health Greater Cleveland, on efforts to improve care by publicly reporting performance data.	http://www.rwjf.org/content/dam/farm/reports/issue_briefs/2013/rwjf409069/subassets/rwjf409069_3
Quality Measurement & Reporting: Overview for Providers	Oregon Health Care Quality Corporation	An overview for physicians on the public reporting efforts in Oregon.	http://q-corp.org/sites/qcorp/files/Overview%20of%20the%20Initiative%20Spring%202014.pdf (download)