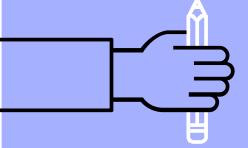
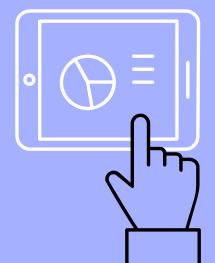


Measuring and Incentivizing Quality



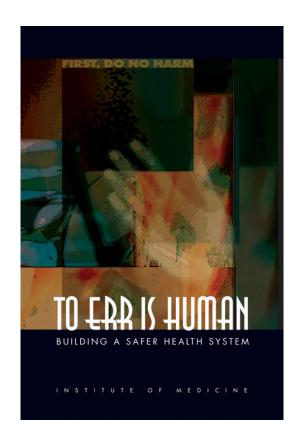
Dana Neutze, MD PhD
October 5th, 2019



Learning objectives

- 1) Participants will understand the need to measure quality
- 2) Participants will have an understanding of different methods for measuring quality
- 3) Participants will be able to assess multiple ways to structure incentives





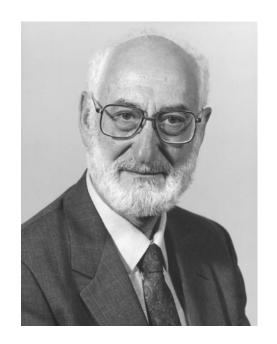




6 Aims for Improvement

- Effectiveness
- Efficiency (cost)
- Equity
- Patient-centeredness
- Safety
- Timeliness





Avedis Donabedian 1911-2000



Donabedian Model

Structure

Process



Doctorreported outcomes

Patientreported outcomes

- PCP:patient ratio
- MA:provider ratio
- Years of training

- Screening
- Monitoring
- Wait times

- DRO: A1c levels Life-expectancy
- PRO: PHQ9

Patient satisfaction

Process vs Outcome

Advantages

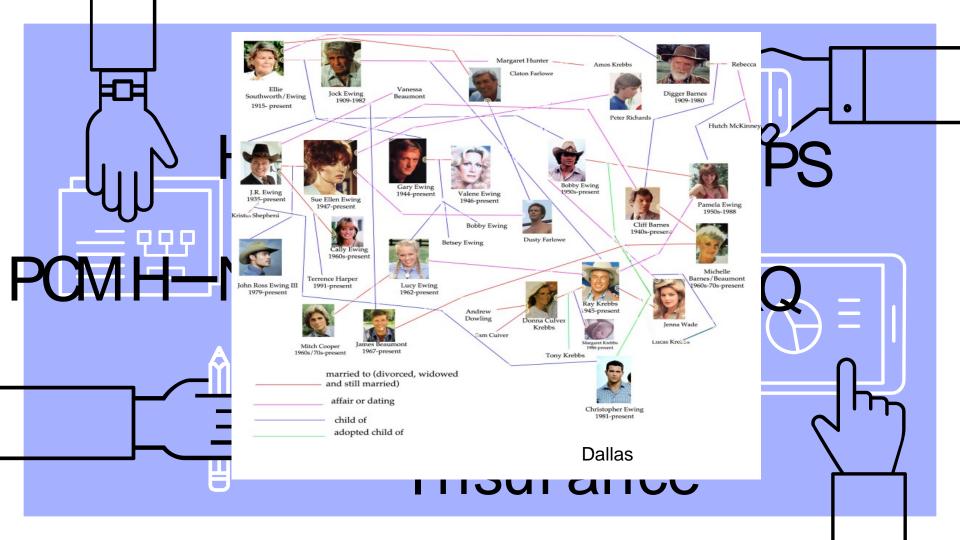
Disadvantages

Advantages

Disadvantages





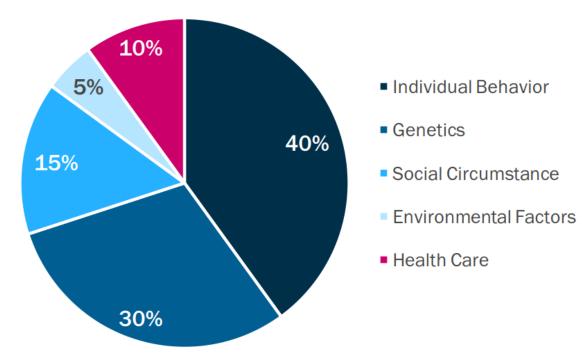


Donabedian Model- NQF measures



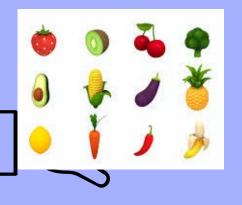
28 645 376

Determinants of Overall Health



Source: We Can Do Better — Improving the Health of the American People, The New England Journal of Medicine, September 2007















JAMA Internal Medicine | Original Investigation

Assessment of the Effect of Adjustment for Patient Characteristics on Hospital Readmission Rates Implications for Pay for Performance

Eric T. Roberts, PhD; Alan M. Zaslavsky, PhD; Michael L. Barnett, MD, MS; Bruce E. Landon, MD, MBA; Lin Ding, PhD; J. Michael McWilliams, MD, PhD

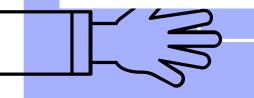
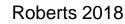


Figure 2. Differences in Outcomes Between Hospitals Serving Higher-Risk Medicare Beneficiaries and Those Serving Lower-Risk Patients, Before and After Adjustment for Additional Patient Characteristics

A 30-Day readmission among hospitals catagorized based on 30-Day readmission among hospitals catagorized by the proportion of Medicare patients dually enrolled in Medicaid patient risk predicted by additional clinical and social factors Fifth (highest) quintile ▲ Fourth quintile Third quintile ▲ Second quintile 12.07 12.0- First (lowest) quintile 30 Days of Discharge, % Rate of Readmission Within 30 Days of Discharge, % 110.2 10.0 10.0-Base CMS Additional Clinical Additional Base CMS Additional Clinical Additional Clinical and Social Adjustments Adjustments Adjustments Adjustments Adjustments Adjustments c 30-Day readmission or mortality among hospitals 30-Day readmission or mortality among hospitals catagorized based on patient risk predicted by additional clinical and social factors enrolled in Medicaid Rate of Readmission or Mortality Within 30 Days of Discharge, % Rate of Readmission or Mortality Within 30 Days of Discharge, % 13.5 13.5 13.0



Base CMS

Adjustments

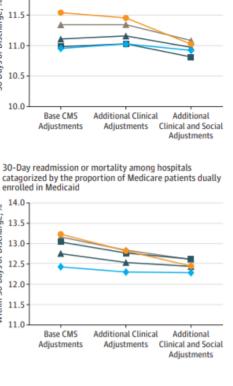
Additional Clinical

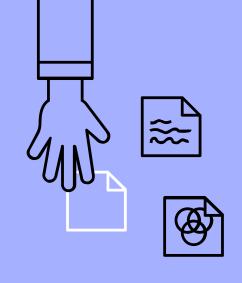
Adjustments

Additional

Clinical and Social

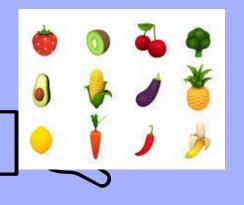
Adjustments















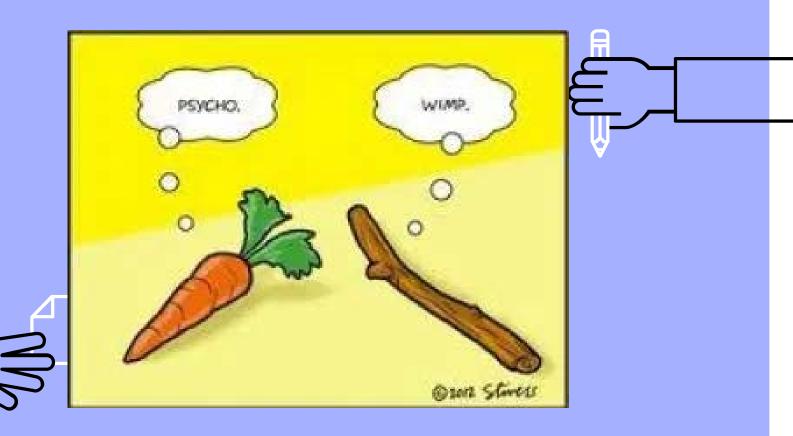


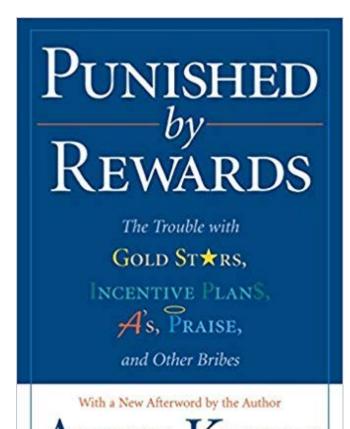


Payment models

- Merit-based Incentive Payment System (MIPS)
- Advanced Alternative Payment Models (APM) aka ACOs
- Blue Premier
- Medicaid Managed Care







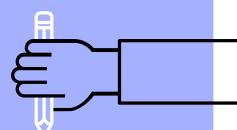
Author of No Contest and The Schools Our Children Deserve













Motivation

Extrinsic





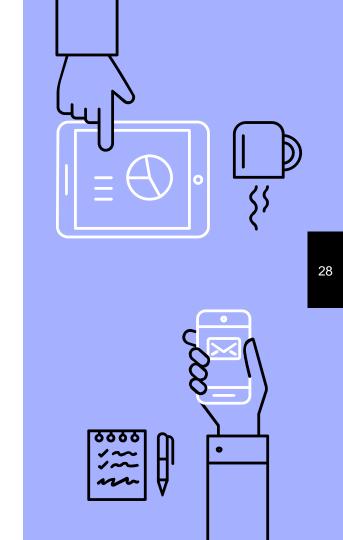


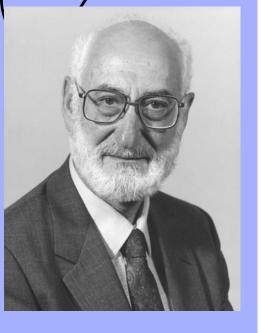




What leads to better quality?

Provider Level Staff Level Patient Level



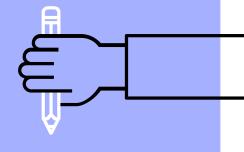




Ultimately the secret of quality is love. You have to love your patient, you have to love your profession, you have to love your God. If you have love, you can then work backward to monitor and improve the system.

-Avedis Donabedian

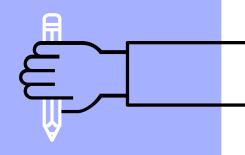




Questions?



TRANSITION HEADLINE





Let's start with the first set of slides