

# New Hospital and Clinic Quality Measures (HB128)

## Accomplishments & Future Plans

**Barry Nangle, Ph.D.**

Director, Center for Health Data  
*Utah Department of Health*

Health and Human Services Interim Committee  
September 19, 2012



In partnership with:



## Accomplishments

- ▶ **JUNE 29 2012:** Released *"A Snapshot of Clinical Performance by Utah Small Area"*



### *A Snapshot of Clinical Performance by Utah Small Area*

#### Introduction

Health care clinics in Utah vary in a number of important ways. Clinics not only vary by their location and the services they provide, they also vary in the quality of care they provide to Utahans. *This report is a preliminary investigation into how the clinics in Utah are performing statewide.*

To report clinic data at a community level, Utah has been divided into *small areas* so that they can be compared.

#### Small areas are based on:

- Population size
- Political boundaries
- Economic similarity



Currently, there are five health care measures being used to compare clinics. Each measure has its own map of Utah, with a listing of the small areas. The small areas have been rated to highlight both the highest (top 20% in Utah) and lowest performing areas (lowest 20% in Utah). The small area ratings are based on the residence of the patients, not the location of the clinic. The data used to create the maps can be found in the Appendix.

\*\*It is important to note that the data in this report come from a limited dataset that includes only claims from commercially-insured Utahans (2010). Please take this into consideration when any comparisons to other data are made.\*\*

[http://utahatlas.health.utah.gov/HB128SA\\_2010.pdf](http://utahatlas.health.utah.gov/HB128SA_2010.pdf)

## Reporting Task Force

Keely Cofrin-Allen	Utah Department of Health
Mark Bair MD	Utah Medical Association
Jeff Black	HealthInsight
Mark Briesacher MD	Intermountain Healthcare
Tom Burton	HQ Catalyst
Korey Capozza	HealthInsight
Kim Dunn	HealthInsight
Rob Ence	AARP
Doug Hasbrouck MD	HealthInsight
Lynette Hansen	Altius Health Plans
Jeff Hawley	Utah Department of Insurance
Judi Hilman	Utah Health Policy Project
Brian Jackson MD	ARUP
Michelle McOmber	Utah Medical Association
Kimberly Mueller	HealthInsight
Christie North	HealthInsight
Debra Scammon PhD	University of Utah
Scott Williams MD	HCA
Sarah Woolsey MD	HealthInsight
Theresa Hall	Intermountain Healthcare

## Report Highlights

- Included data from All Payers Claims Database (APCD)
- Reported on 5 nationally recognized health plan quality measures (HEDIS)
  - Cholesterol Screening (LDL-C)
  - Blood Sugar Screening (HbA1c)
  - Kidney Disease Screening (Nephropathy)
  - Well-Child Visit with a Primary Care Provider: 5 or more
  - Breast Cancer Screening
- Highlighted the highest (top 20% in Utah) and lowest performing areas (lowest 20% in Utah) by small area

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In partnership with:  
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a partnership for the future of health care.

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**A Snapshot of Clinical Performance by Utah Small Area**

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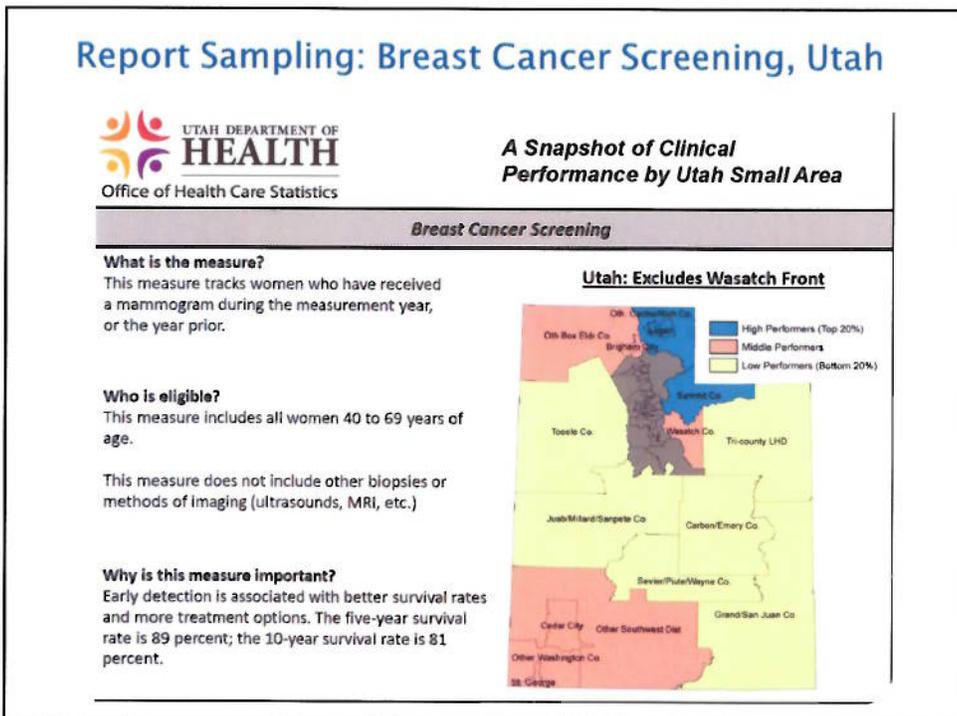
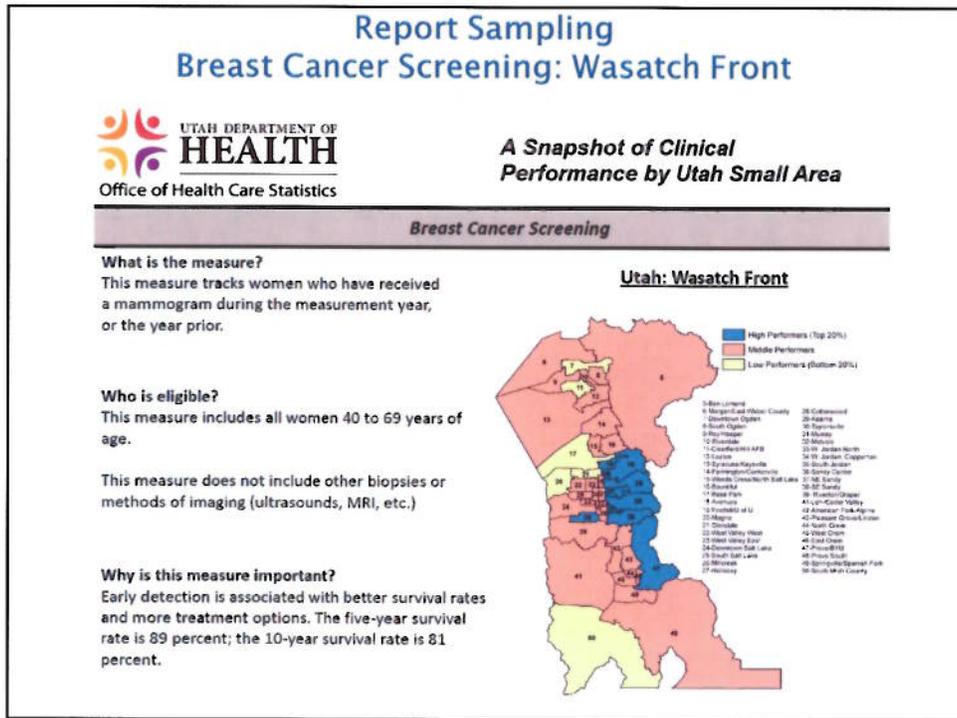
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## Report Sampling: Breast Cancer Screening: Data Table



*A Snapshot of Clinical  
Performance by Utah Small Area*

*Appendix: Data Tables*

### Breast Cancer Screenings

**State Average 42.97%**

Avenues	56.46%	South Ogden	45.13%	Springville/Spanish Fork	41.77%	West Valley West	37.92%
Foothill/U of U	56.08%	Sandy Center	44.95%	Bountiful	41.72%	Ben Lomond	37.32%
Logan	53.43%	Farmington/Centerville	44.72%	Midvale	41.60%	West Valley East	36.93%
Sandy, NE	51.54%	Woods Cross/No. SL	44.64%	Other Washington Co.	41.40%	Downtown Ogden	36.66%
Other Cache/Rich Co.	50.96%	West Orem	44.44%	Syracuse/Kaysville	41.26%	Carbon/Emery Co.	36.63%
Summit Co.	50.90%	Provo South	44.36%	American Fork/Alpine	40.99%	Rose Park	36.46%
Sandy, SE	50.17%	North Orem	44.36%	Layton	40.80%	Sevier/Piute/Wayne Co.	36.41%
Holladay	49.97%	Morgan/East Weber Co.	44.18%	Riverdale	40.70%	TriCounty LHD	36.07%
Millcreek	49.54%	W. Jordan, Copperton	43.35%	Kearns	39.66%	Clearfield/Hill AFB	35.18%
Cottonwood	48.79%	West Jordan No.	42.54%	South Salt Lake	39.22%	Utah Co. South	34.29%
Provo/BYU	48.71%	Murray	42.31%	Other Box Elder Co.	39.20%	Grand/San Juan Co.	33.83%
Downtown Salt Lake	48.17%	Pleasant Grove/Lindon	42.30%	Brigham City	39.07%	Tooele Co.	33.50%
South Jordan	47.47%	Cedar City	42.30%	Wasatch Co.	38.95%	Magna	33.02%
East Orem	47.16%	St. George	42.24%	Lehi/Cedar Valley	38.42%	Glendale	32.04%
Taylorsville	46.76%	Other Southwest Dist.	42.10%	Roy/Hooper	38.01%	Juab/Millard/Sanpete Co.	31.56%
Riverton/Draper	45.17%						

These percentages represent the number of individuals living in these areas who received the recommended procedure.

## Future Quality Measures

## *Cervical Cancer Screening*

*This measure tracks women who have received one or more Pap tests for cervical cancer.*

- ▶ **Who is eligible?\*** This measure includes all women 21 to 64 years of age. For commercial purposes the measurement year and the prior two years are utilized, for Medicaid it is only the measurement year.

\*Women who have had a hysterectomy are excluded.

- ▶ **Why is this measure important?** The cost of treating cervical cancer is between \$300 and \$400 million annually and is concentrated in care of women detected at a late stage.
- ▶ **Technical Issues:** This measure relies on looking back two years for commercial populations, may be an issue for assigning patients to the measure.

## *Chlamydia Screening*

*This measure tracks women who had at least one test for chlamydia.*

- ▶ **Who is eligible?\*** This measure includes all sexually active women 16 to 24 years of age. To be determined eligible, both claims and pharmacy data must be used, although a member only needs to be identified with one method to be included.

\*Women who have had a pregnancy test and other requirements will be excluded from the data.

- ▶ **Why is this measure important?** Untreated chlamydia can damage a woman's reproductive organs, possibly causing permanent and irreversible damage to the fallopian tubes and uterus leading to infertility.
- ▶ **Technical Issues:** This measure does not appear to have any obvious technical issues.

### *Use of Imaging Studies for Low Back Pain*

*This measure tracks the percentage of members with a primary diagnosis of low back pain who did not have an imaging study within 28 days.*

- ▶ **Who is eligible?** This measure examines all members 18 to 50 years of age who have been diagnosed with lower back pain (excludes: cancer, trauma, IV drug abuse, neurological impairment).
- ▶ **Why is this measure important?** Lower back pain is one of the most common musculoskeletal conditions, affecting over 31 million individuals. Persistent pain lasting between 3 to 6 months is rare (5 to 10% of patients), most cases are benign and do not warrant imaging studies.
- ▶ **Technical Issues:** This measure does not appear to have any obvious technical issues.

### *Appropriate Testing for Children with Pharyngitis*

*This measure tracks the percentage of children who were diagnosed with pharyngitis, dispensed an antibiotic, and received a strep test.*

- ▶ **Who is eligible?** This measure examines all members 2 to 18 years of age who have been diagnosed with pharyngitis
- ▶ **Why is this measure important?** Pharyngitis is easily diagnosable through administrative data and can be tracked to determine if antibiotics are being used rationally. It is recommended that antibiotics be dispensed after a strep test has been performed. It has been estimated that up to 35% of all antibiotics for pharyngitis are unnecessary.
- ▶ **Technical Issues:** This measure does not appear to have any obvious technical issues.

## *Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis*

*{ This measure tracks the percentage of members who were diagnosed  
with acute bronchitis and did not receive antibiotics. }*

- ▶ **Who is eligible?** This measure examines all members 18 to 64 years of age who have been diagnosed with an acute bronchitis.
- ▶ **Why is this measure important?** Antibiotics are often prescribed incorrectly for acute bronchitis. It is estimated 90% of the cases of acute bronchitis are nonbacterial, while antibiotics are prescribed 65 to 80% of the time, which can lead to drug resistance.
- ▶ **Technical Issues:** This measure does not appear to have any obvious technical issues.

