

NCQA



Strengths and limitations of claims data for performance measurement

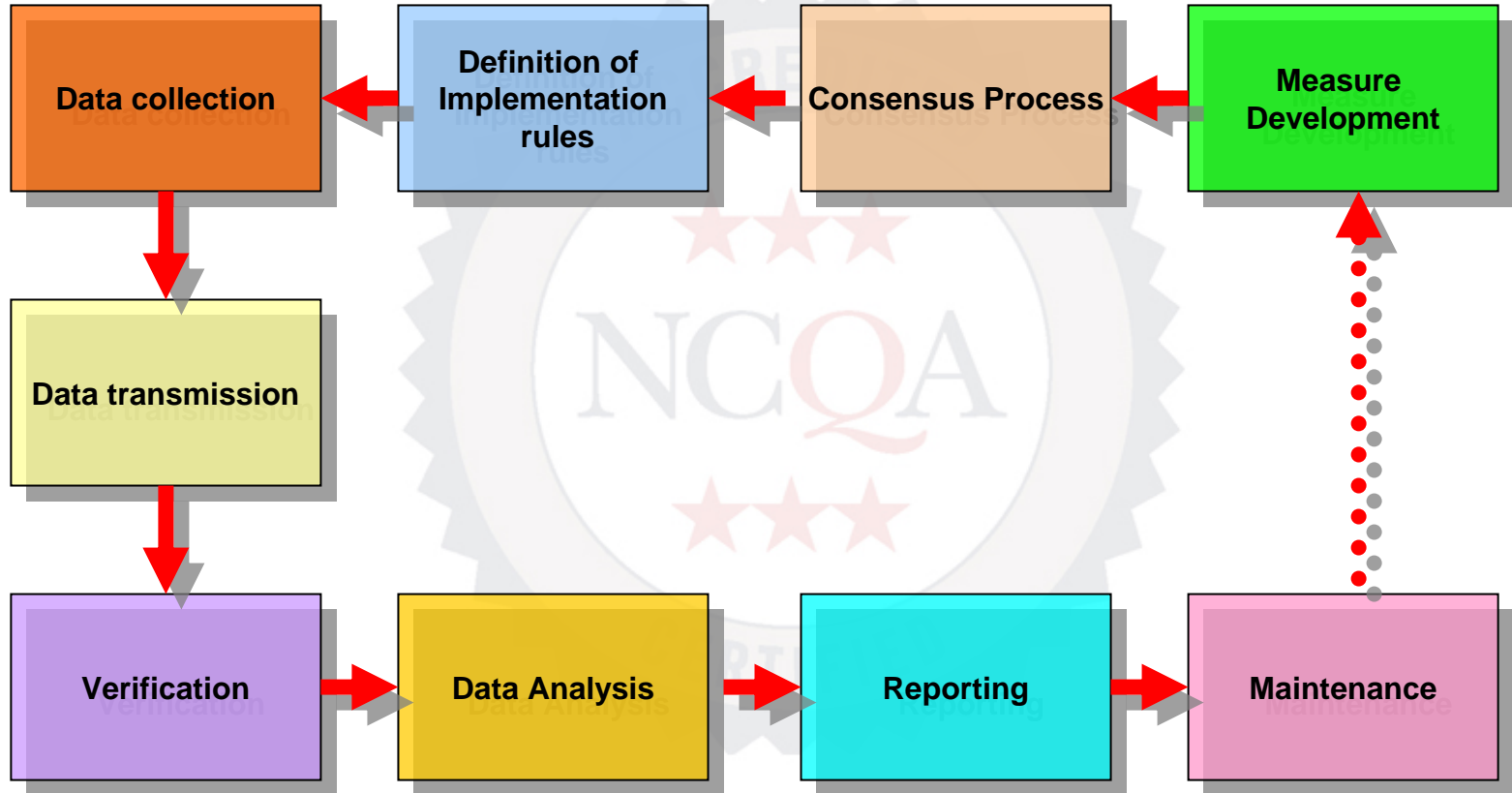
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Agenda

- **Developing and implementing performance measures**
- **Claims data and performance measurement**
- **Advancing performance measurement through claims**

A performance measurement system



Technical construction of measure

- **Rates/percentages**
- **Define eligible population (denominator)**
 - Age, gender, diagnoses, exclusions
- **Define numerator**
 - Processes, outcomes, time windows
- **Define data elements**
 - clinical procedures/tests, physiological correlates (lab value), pharmaceutical use

Desirable Measure Attributes

Relevance	Soundness	Feasibility
<ul style="list-style-type: none"> • Meaningfulness • Health importance • Financial import. • Cost-effectiveness • Strategic import. • Controllability • Variance • Improvability 	<ul style="list-style-type: none"> • Evidence • Reliability • Validity • Accuracy • Case-mix adjustment • Data source comparability 	<ul style="list-style-type: none"> • Precise specs • Reasonable cost • Confidentiality • Data availability • Auditability

Example: Current NQF detail for consensus

Denominator	Women 52-69 years as of December 31 of the measurement year
Numerator	One or more mammograms during the measurement year or the year prior to the measurement year. (CPT Codes: 76090-76092; ICD-9-CM Codes 87.36, 87.37; V-Codes: V76.11, V76.12; UB-92 Codes; 401, 403)
Exclusions	<p>The following exclusions are optional:</p> <p>Exclude women who had a bilateral mastectomy and for whom administrative data does not indicate that a mammogram was performed. (For Bilateral: ICD-9-CM Codes: 85.42, 85.44, 85.46, 85.48; CPT Codes: 19180.50 or 19180 w/modifier 09950, 19200.50 or 19200 w/modifier code 09950, 19220.50 or 19220 w/modifier 09950, 19240.50 or 19240 w/ modifier 09950.) (For Unilateral: ICD-9-CM Codes: 85.41, 85.43, 85.45, 85.47; CPT Codes 19180, 19200, 19240)</p>

HEDIS® - Effectiveness of Care Measures

• Prevention

- Cancer Screening
 - Breast cancer
 - Cervical cancer
 - Colon cancer
- Immunizations (Children & Adolescents)
- Chlamydia screen
- Antibiotic prescribing
- Elderly Care
 - Pneumonia vaccination
 - Influenza vaccination
 - Urinary incontinence tx
 - Vision Screening
 - Advice for physical activity

• Chronic Care Conditions

- Hypertension
- Diabetes (6)
- Cardiovascular Disease
 - Cholesterol test & results
 - Betablocker after AMI
 - Betablocker long-term compliance
- Smoking cessation
- Osteoporosis
- Arthritis
- Asthma
- COPD
- Depression (3)
- Substance Use (3)
- Coordination of care psychiatry
- ADHD
- Low back pain
- Safe Medication Management
 - Never medications
 - Appropriate testing

Claims data sources

- **CMS**

- Medicare Part A (facility charges)
- Medicare Part B (physician services, outpatient hospital services, etc)
- Medicare Part C (HMOs, PPOs)
- Medicare Part D (Pharmacy)
- Eligibility information

- **Private health plans**

- Facility charges
- Professional charges
- Pharmacy claims
- Lab results
- Enrollment information
- Medical records (electronic or paper)
- Other – Registries/DM

- 
- Track beneficiaries
 - Monitor providers
 - Payment

What is on a claim?

- **What you get ...**

- Patient identifier and demographic information
- Facility and physician identifier (not with pharmacy data)
- Procedure Codes linked to diagnoses and any severity modifiers
- Dates of services
- Charges

- **And what you don't ...**

- Severity/complexity
- Patient history
- Physiological information (e.g., lab values)
- Detailed timing of procedures
- Processes for which no charge can be billed (e.g., pt education)
- True cost of delivering service

Can these HEDIS measures be computed through claims only?

- **Hypertension Control - Blood pressure value for people with hypertension**
- **Appropriate medication for people with asthma – long-term controller medication for people with persistent asthma**
- **Smoking cessation advice – providing brief advice for people who are regular smokers**

HEDIS® EOC - measured through claims only

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Validity of claims based measures

MEASURE_NAME	Mean Report Rate (%)	Mean Admin Rate (%)	Difference to real rate (%)
CIS Childhood Immunization Status	77.77	34.32	-43.46
AIS Adolescent Immunization Status	53.71	7.35	-46.36
CCS Cervical Cancer Screening	81.83	75.68	-6.15
BBH Beta Blocker Heart Attack	96.62	72.32	-24.30
CDC Comprehensive Diabetes Care	67.51	29.84	-37.67
CDC Comprehensive Diabetes Care	55.13	45.31	-9.82
W15 Well Ch Visit 1st 15 Mon	71.04	67.79	-3.25
W34 Well Ch Visit in 34-56 Mon	65.54	63.84	-1.70
AWC Adolescent Well-Care	38.71	36.66	-2.06
PPC Prenatal Postpartum Care	81.51	48.82	-32.70

Limitation of claims data

- **Number of submitted diagnoses**
- **Limitation to physician identifiers**
- **Presence of diagnosis on admission**
- **Effectiveness of care measures typically require accessing multiple types of claims data**
- **Accessed typically through payer systems**
 - **ability to measure provider performance dependent on payer's market share**

Advancing performance measurement

- Many useful measures can be computed when able to combine different type of claims data
- Sophisticated algorithms have been built to measure performance and to risk-adjust results
- Claims can be effectively and efficiently combined with medical record review (e.g., HEDIS)
- Healthcare transactional data will remain main source of scalable efforts until EMR dissemination has reached critical mass
- Not well suited for measures requiring detailed clinical information to assess severity, etc. (specialty care)
- Efforts at augmenting CPT codes (CPT II; G-Codes)

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