

Utah Health Status Update:

Comparing Clinics' Quality of Care Using Utah's APCD

August 2016

All Payer Claims Databases (APCDs) are comprehensive, longitudinal, multi-payer datasets capable of providing unprecedented research and policy opportunities for improving the health care delivery system¹ as well as public reporting on transparency of health care. Currently, 21 states have APCDs in operation or development.

The Utah All Payer Claims Database (APCD) collects medical, pharmacy, and dental claims data from both private and government payers, including Medicaid and some Medicare Advantage, Medicare Supplemental, Medicare Part D, and federal employee health plans. There are a total of 37 APCD data suppliers, representing roughly 80% of the Utah population.

Administrative data about health care claims are used to produce health care cost and quality measures and to promote transparency. In December 2014, the Office of Health Care Statistics (OHCS) used APCD data to publish quality measures calculated by geography.² The clinic quality comparisons expand on this work by producing quality measures comparing medical clinics.³ Clinics⁴ with five or more physicians are identified by name in public

KEY FINDINGS

- After reviewing five quality measures with community stakeholders, two were selected for clinic comparisons: Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Testing and Avoidance of Antibiotic Treatment for Adults with Acute Bronchitis (AAB).
- Limited variation and high compliance rates amongst clinics demonstrates annual HbA1c testing for diabetics is a well-established practice.
- The AAB measure shows much greater variation between clinics. However, it is worth noting that low compliance rates were consistent with national averages which range from 25.9%-28.5% depending on insurance type.

data and clinics with fewer than five physicians are aggregated into small health areas. Identified clinics reviewed their data prior to publication.

Quality measures reported in the clinic comparisons data were reviewed by the Transparency Advisory Group (TAG) during summer 2015. TAG is a subcommittee of the Health Data Committee tasked with convening public meetings of community stakeholders to provide guidance on health care cost and quality transparency. TAG is jointly staffed by OHCS and *HealthInsight*. After reviewing five quality measures with community stakeholders, two were selected for clinic comparisons: Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Testing and Avoidance of Antibiotic Treatment for Adults with Acute Bronchitis (AAB).

Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Testing: HbA1c testing measures the percentage of adults aged 18–75 with diabetes (type 1 and type 2) who had a blood sugar test. According to the National Committee for Quality Assurance (NCQA):

Proper diabetes management is essential to control blood glucose, reduce risk of complications and prolong life. With support from health care providers, patients can manage their diabetes with self-

HbA1c Compliance Rates

Table 1. Ten highest and lowest HbA1c compliance rates* with 11 or more diabetes patients among 140 clinics, Utah, 2014

Ordor	Organization Name	Diabetes Patients Receiving Appropriate Care	Total Diabetes Patients	HbA1c Compliance Rate
1	Intermountain Cottonwood Family Practice	27	27	
2	Thyroid Institute of Utah	27	27	
3	McKay Dee Internal Medicine	47	47	
	,			
4	Rocky Mountain Family Practice	11	11	
5	Intermountain South Cache Valley Clinic	28	28	
6	Canyon View Spanish Fork Clinic	45	45	
7	Jordan Meadows Medical Center (West Jordan)	135	136	99.3%
8	Jordan Meadows Medical Center (West Valley)	126	127	99.2%
9	Intermountain Budge Clinic	99	100	99.0%
10	Community Health Centers	112	114	98.3%
131	Pioneer Comprehensive Medical	17	21	81.0%
132	U of U Hematology-Oncology Division	16	20	80.0%
133	Utah Cancer Specialists (Salt Lake City)	12	15	80.0%
134	Wasatch Medical Center	29	37	78.4%
135	West Jordan Medical Center	18	23	78.3%
136	Dixie Regional Hospital Physicians Group	18	23	78.3%
137	San Juan Health Services District	9	12	75.0%
138	Utah Cancer Specialists (Murray)	20	27	74.1%
139	Alpine Internal Medicine	49	67	73.1%
140	Lakeview Internal Medicine and Surgery	21	29	72.4%
STAT	EWIDE HbA1c SCREENING RATE			82.0%

*A higher compliance rate is better

care, taking medications as instructed, eating a healthy diet, being physically active and quitting smoking.⁵

Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis: AAB measures the percentage of adults 18–64 years of age with a diagnosis of acute bronchitis who were not dispensed an antibiotic prescription (a high rate is better). According to the NCQA:

Acute bronchitis almost always gets better on its own; therefore, adults who do not have other health problems should not take antibiotics. Ensuring the appropriate use of antibiotics for patients with acute bronchitis will help them avoid harmful side-effects and possible resistance to antibiotics over time.⁶

Findings

The two measures produced different amounts of variation between clinics. Limited variation and high compliance rates amongst clinics demonstrates annual HbA1c testing for diabetics is a well-established practice. Insurance carriers report a national average of 86.3%–92.8% compliance for this HbA1c measure depending on insurance type.⁵

However, the AAB measure shows much greater variation between clinics. Some of this may be due to the low number of observations (n) which is important to consider during interpretation. Table 2 is limited to clinics with 11 or more bronchitis patients and still displays variation. Although there is variation, the average of AAB measure in Utah is 49.1% which is better than national averages which range from 25.9%–28.5% depending on insurance type.⁷

For more information on the Utah APCD, visit <u>https://ibis.health.utah.gov/pdf/opha/publica-tion/hsu/SE01_APCD.pdf</u>.

For additional information about this topic, contact Norman Thurston, Utah Department of Health, (801) 538-7052, email: <u>nthurston@utah.gov</u>; or the Office of Public Health Assessment, Utah Department of Health, (801) 538-9191, email: chdata@utah.gov.

Antibiotic Avoidance Compliance Rates

Table 2. Ten highest and lowest antibiotic avoidance compliance rates* with 11 or more bronchitis patients among 54 clinics, Utah, 2014

		Bronchitis Patients Receiving Appropriate	Total Bronchitis C	AAB ompliance
Order	Organization Name	Care	Patients	Rate
1	Intermountain Central Orem Clinic	17	17	100.0%
2	Intermountain South Jodan Clinic	12	12	100.0%
3	Intermountain Rose Canyon Clinic	22	23	95.7%
4	Intermountain South Sandy Clinic	18	19	94.7%
5	Intermountain Salt Lake Clinic	25	27	92.6%
6	Intermountain West Jordan Clinic	25	27	92.6%
7	Intermountain North Canyon Family Practice	48	56	85.7%
8	Cottontree Family Practice	30	38	79.0%
9	Intermountain Syracuse Clinic	12	16	75.0%
10	Premier Family Medical (Lindon)	21	30	70.0%
45	Foothill Family Clinic South	38	148	25.7%
46	Intermountain North Temple Urgent Care Clinic	: 3	12	25.0%
47	Brigham Medical Clinic	12	48	25.0%
48	Jordan Meadows Medical Center (West Valley)	6	25	24.0%
49	Ogden Regional Medical Center Primary Care	22	98	22.5%
50	Jordan Meadows Medical Center (West Jordan)) 15	67	22.4%
51	Ogden Clinic	28	152	18.4%
52	St. George Clinic	3	17	17.7%
53	Holladay Family Practice	8	68	11.8%
54	Layton Family Practice	1	17	5.9%
STAT	EWIDE AAB RATE			49.1%

*A higher compliance rate is better.

1. Paradis, Rebecca; Barolini, Erin *All Payer Claims Databases: Unlocking the Potential*, A NEHI Issue Brief, November 4, 2014.

2. The small area quality measures were published on UDOH's OpenData portal. <u>https://opendata.utah.gov/d/u8tb-sa6w?category=Health&view_name=All-Payer-Claims-Database-APCD-Quality-Measures</u>.

3. The clinics' measures can be compared using the data lens view on UDOH's OpenData portal. <u>https://opendata.utah.gov/view/bszg-kzbv</u>.

4. For our purposes, a "clinic" is a physician or group of physicians practicing at a specific location.

5. "Comprehensive Diabetes Care," NCQA, 2015 HEDIS. <u>http://www.ncqa.org/report-cards/health-plans/state-of-health-care-quality/2015-table-of-contents/diabetes-care#sthash.yFIfCDPO.dpuf.</u>

6. "Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis," NCQA, 2015 HEDIS. <u>http://www.ncqa.org/report-cards/health-plans/state-of-health-care-quality/2015-table-of-contents/acute-bronchitis#sthash.B00S5Sh2.dpuf.</u>

7. "Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis," 2014 AAB compliance rates. <u>http://www.ncqa.org/report-cards/health-plans/state-of-health-care-quality/2015-table-of-contents/acute-bronchitis.</u>

UDOH ANNOUNCEMENT:

Utah is overdue for a large earthquake and we are always under threat of other public health emergencies or disasters. Each citizen in the state of Utah must take it upon himself or herself to be prepared. For resources, visit http://www.utah.gov/beready/index.html.