

Date: May 20, 2009

To: National Regional Implementation (NRI) Workgroup

Re: Performance Measurement and Reporting Survey Results: Unmet Needs of Regional Coalitions

Summary reports of the results of the Performance Measurement and Reporting Survey (MARS) were presented in past meetings of the NRI workgroup. The following brief memo describes the reported “unmet needs” of regional coalitions that participated in the MARS survey.

Both national and regional organizations engaged in performance measurement and public reporting efforts were recruited for and participated in completing the MARS survey during the summer and fall of 2008. The selection criteria for participation included having produced a performance report as of 2005; and performance information was reported publicly or in a formal program of QI or pay for performance. While the objective of the MARS survey was to document local, regional and national efforts to report on quality, safety and cost using traditional measures of process and outcome, the survey focused in particular on regional efforts to measure and disseminate performance information to their local community. This survey project sought to document organizational sustainability factors (e.g., resource availability and financing), methodological and data collection details, and their impact on their stakeholder community. *Of note, many regional initiatives had not yet issued a performance report and were not eligible for study inclusion at the time of the survey.*

Based on regional initiatives’ responses to the MARS survey, several themes came to light that can be reasonably categorized as “unmet needs” of regional initiatives:

Sustainability

- Many regional initiatives were operating with uncertain or insufficient funding structures with a reliance on membership dues and limited grants.
- Resource limitations often hindered proper staffing of existing programs and limited implementation of future strategic efforts.

Technological/Methodological Issues with Measurement and Reporting

- Challenges with aggregating data across different data owners (typically health plans) to enable comprehensive performance reporting.
- Challenges with access to needed data including Medicare data.
- Challenges around proper protection of patients’ personal health information, identification of appropriate data stewardship and governance of aggregated data, and matching records (typically provider identifiers) across data sources. Attempts were made to aggregate and match records using physician tax identifiers as well as the new national practitioner identifiers.
- Limited availability of needed nationally-endorsed measures (e.g., cross-cutting, equity, patient experience, specialty care measures).

- Using nationally-endorsed measures often require the development of additional technical detail to support their standardized local data collection. Several organizations reported the available measure specification details (e.g., attributing patients to providers, sample size, assignment of measures to different physician specialties, etc.) were insufficient and required local modification of measures. Such modifications, however, contribute to inconsistency of measures used across regions, and are time- and resource-intensive to implement.
- Current measures identify little variability in quality. One organization reported being challenged by having to cull through available measures on a wide range of services and determine which are most predictive of quality.

Stakeholder Engagement

- Several organizations cited a need for greater understanding of best practices for engaging consumers and encouraging their use of performance information in health care decision-making.
- Several regional initiatives acknowledged a lack of consumer awareness and understanding of how to use available performance information.
- Resource limitations hinder proper marketing and dissemination of performance information.

Reported Assessment of Measurement and Reporting Impact

- Most organizations were unsure about their effectiveness in engaging consumers and other stakeholder groups and how to improve the relevance of available information. Most organizations could not quantify how many consumers or patients they had reached with their performance information. A few organizations reported tracking Web site hits and content that was viewed.
 - Of those organizations that tracked web hits, they reported visitors were mainly providers or health care facility administrators. Web site visits typically increased following a new performance report release, and efforts to better advertise such releases have been hampered by resource limitations.
- Several organizations reported interest in pursuing efforts to evaluate the impact of their efforts to disseminate performance information. However, the same organizations often lacked the proper staffing, knowledge and resource to pursue an informed and organized evaluation.