

Quality Transparency

Regional Quality Data Report – May 2018

We are pleased to provide the regional summary report of clinical quality performance for data period **January 1, 2017 – December 31, 2017**. The purpose of this project is to promote quality transparency and improvement in the Greater Columbus region.

About the Organizations

The following organizations contributed data for this data period:

Berger Health Partners
 Central Ohio Primary Care Physician
 Concord Counseling Services
 Heart of Ohio Family Health Centers
 Hilliard Family Medicine
 Lower Lights Christian Health Center

Mount Carmel Medical Group
 OhioHealth Physician Group
 The Ohio State University Wexner Medical Center – Primary Care
 PrimaryOne Health
 Southeast, Inc.
 Syntero

- Federally Qualified Health Centers (Heart of Ohio Family Health, Lower Lights Christian Health Center, PrimaryOne Health, Southeast) provide healthcare services to citizens and non-citizens who are medically underserved, underinsured, or uninsured.
- Heart of Ohio Family Health: 3 practice sites reported at an organization level
- Lower Lights Christian Health Center: 6 practice sites reported at an organization level
- Southeast Inc: 2 practice sites reported at the organizational level; serves homeless, most with mental health or substance use disorders

Regional Performance Snapshot

Aggregated data represents **147 practice sites** serving a total of **761,303 patients**. Based on information shared by the organizations, we estimate the payer mix for all patients to be: Commercial = 53%, Medicare = 26%, Medicaid = 14%, Self Pay/Other = 8%

Quality Measure	Target	Aggregate of all sites reporting	# of sites reporting	% of sites ≥ target	# of patients
Controlling High Blood Pressure	61% ²	68%	145	66%	195,729
Colorectal Cancer Screening	71% ²	59%	145	19%	249,013
Diabetes: A1C in Control ¹	84% ²	80%	145	29%	80,854
Tobacco Use Screening and Cessation	-	82%	145	N/A	452,758
Diabetes: Nephropathy	-	80%	107	N/A	57,707
Depression Utilization of PHQ-9	-	27%	16	N/A	6,730
Depression Remission at 12 months	-	2%	12	N/A	214
Depression Response at 12 months	Not enough data collected to report on this measure				

Green – aggregate of reporting practices is above target; *Red* – aggregate of reporting practices is below target

¹Reported as inverse of definition (in control); ²Healthy People 2020

Notes:

Targets – Healthy People 2020 targets do not exist for several of the measures in this project. These will be identified in ongoing project planning with partners. Next to each graph, we have included the CPC+ 70th percentile performance (if available) to provide a benchmark for comparison purposes.

Depression Response at 12 months– We received data from only one organization for the depression response measure, therefore we did not include this data as a regional aggregate.

Regional Performance Detail

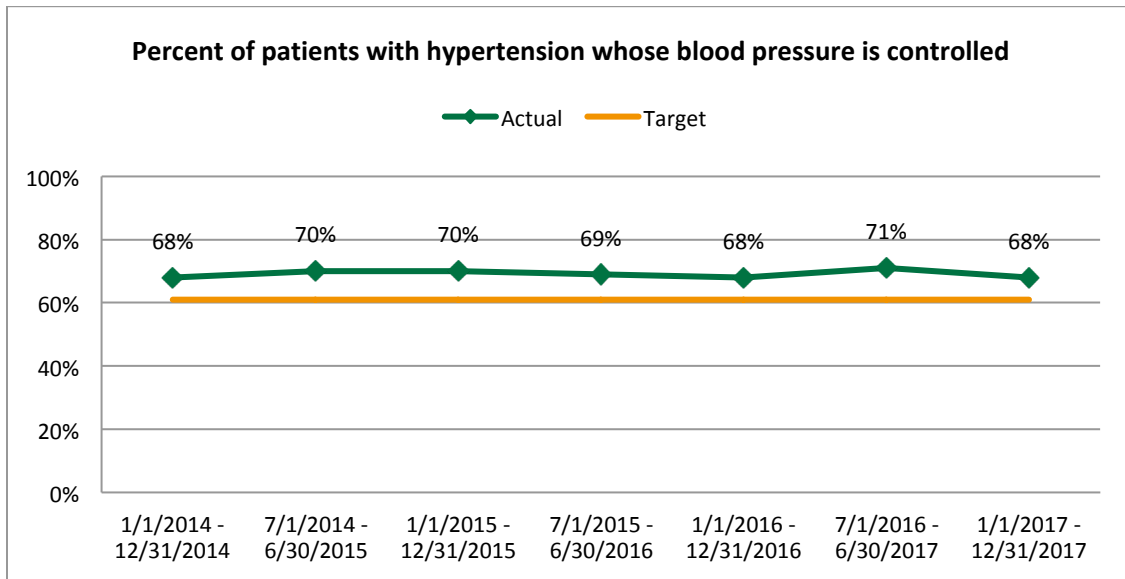
Controlling High Blood Pressure

Percentage of patients 18-85 years of age who had a diagnosis of hypertension and whose blood pressure was adequately controlled (<140/90mmHg) during the measurement period. (NQF#0018)

Regional performance for the current period = 68%

Regional aggregate performance

- There was a 3 percentage point decrease from last period's performance
- We have consistently exceeded the Healthy People 2020 target of 61%
- The CPC+ 70th percentile benchmark for 2018 is 71%



The following is a list of the top 10 performing practice sites for this measure during the current performance period (listed alphabetically):

- Berger Health Partners – Northridge Road
- Berger Health Partners – Walnut Street
- COPC Westerville
- Family Practice Center Of Westerville
- Granville Pike Family Physicians
- MCMG Wedgewood
- MCMG Worthington
- OhioHealth Primary Care Physicians London
- PrimaryOne Health – Cramer Creek
- Suburban Internal Medicine

The following practice site showed the biggest improvement over three or more periods:

- Berger Health Partners – Walnut Street

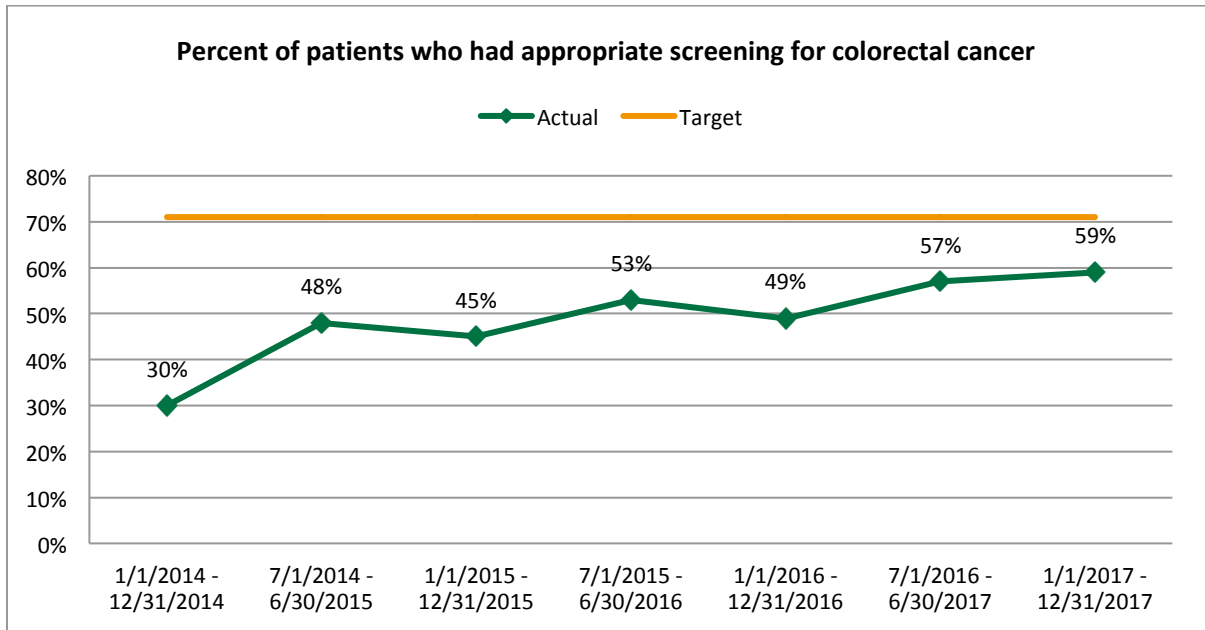
Colorectal Cancer Screening

The percentage of patients 50–75 years of age who had appropriate screening for colorectal cancer. (NQF#0034)

Regional performance for the current period = 59%

Observations about regional aggregate performance

- There was been continuous improvement from 2014 – 2017
- There was a 2 percentage point increase from last period's performance
- We did not meet the Healthy People 2020 target of 71%
- The CPC+ 70th percentile benchmark for 2018 is 56.2%



The following is a list of the top 10 performing practice sites for this measure during the current performance period (listed alphabetically).

- Amico, Stock, And Associates
- Arlington-Mill Run Internal Medicine
- Central Ohio Medicine
- COPC Westerville
- Jasonway Internal Medicine
- MCMG Worthington
- Michael R Ports MD
- Northside Internal Medicine
- Northwest Family Physicians
- OSU General Internal Medicine

The following practice site showed the biggest improvement over three or more periods:

- OhioHealth Primary Care Physicians - London

Diabetes Care: Hemoglobin Control (reported as In Control $\leq 9.0\%$)

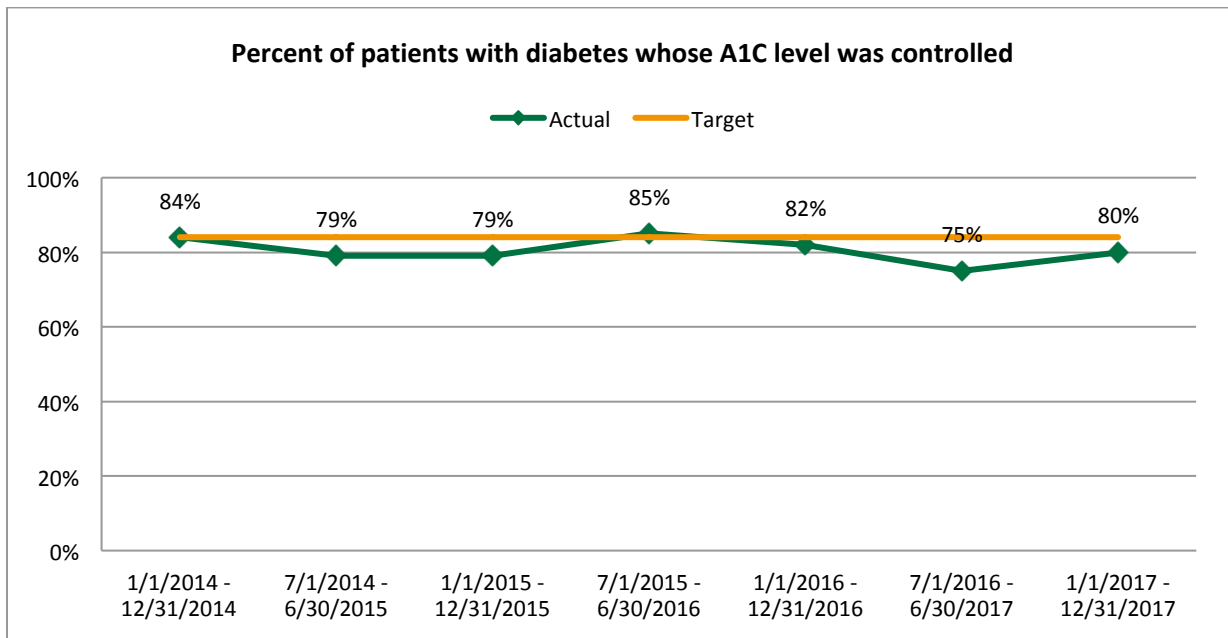
The percentage of patients 18-75 years of age with diabetes (type 1 and type 2) whose most recent HbA1c level during the measurement year was greater than 9.0% (poor control) or was missing a result, or if an HbA1c test was not done during the measurement year. (NQF#0059)

Note: Data is reported as the inverse of the measure definition for purposes of this project

Regional performance for the current period = 80%

Regional aggregate performance

- There was a 5 percentage point increase from last period's performance
- We did not meet the Healthy People 2020 target of 84%
- The CPC+ 70th percentile benchmark for 2018 is 90.9%



The following is a list of the top 10 performing practice sites for this measure during the current performance period (listed alphabetically):

- CarePoint Gahanna Family Medicine
- Central Ohio Medicine
- COPC Westerville
- General Internal Medicine
- General Internal Medicine & Geriatrics
- General Internal Medicine Upper Arlington
- Granville Pike Family Physicians
- Jasonway Internal Medicine
- Northside Internal Medicine
- OSU Primary Care at New Albany

The following practice site showed the biggest improvement over three or more periods:

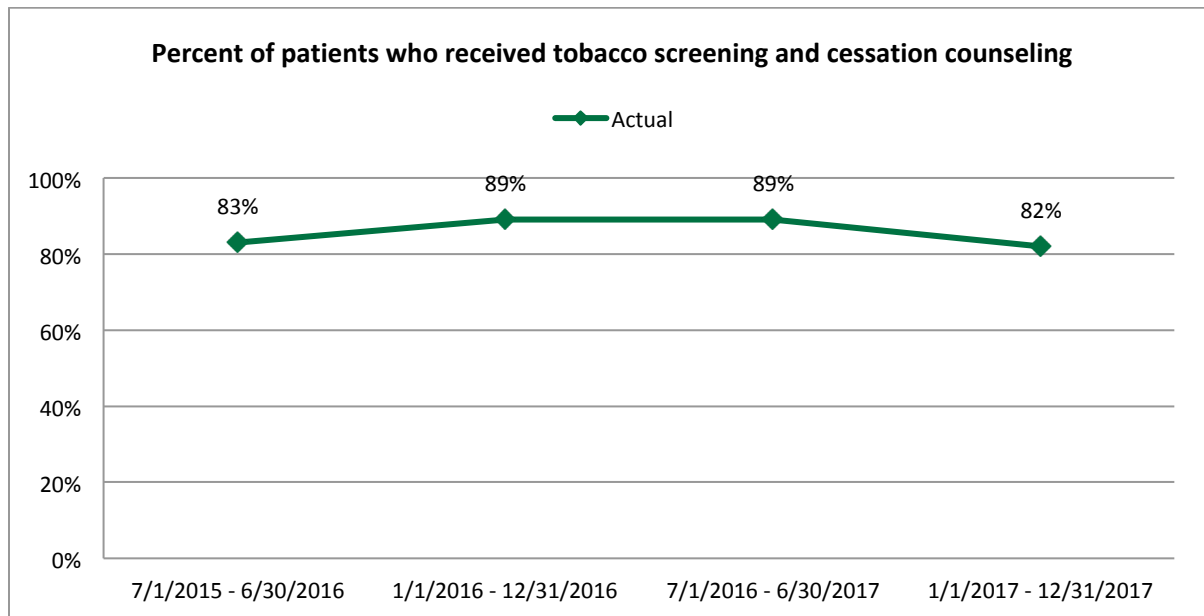
- Berger Health Partners – West Main Street

Tobacco Use: Screening & Cessation Intervention (NQF#0028) - Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 24 months AND who received cessation counseling intervention if identified as a tobacco user.

Regional performance for the current period = 82%

Regional aggregate performance

- There was a 7 percentage point decrease from last period's performance
- The CPC+ 70th percentile benchmark for 2018 is 94.7%



The following is a list of the top 10 performing practice sites for this measure during the current performance period (listed alphabetically).

- Amico And Associates
- Arlington Mill Run
- Berger Health Partners – North Court Street
- Berger Health Partners – West Main Street
- CarePoint Gahanna Family Medicine
- COPC Westerville
- Fairway Family Physicians
- Granville Pike Family Physicians
- OSU Family Practice at Upper Arlington
- Stonegate Medical Associates

The following practice site showed the biggest improvement over three or more periods:

- Mount Carmel Medical Group - Polaris

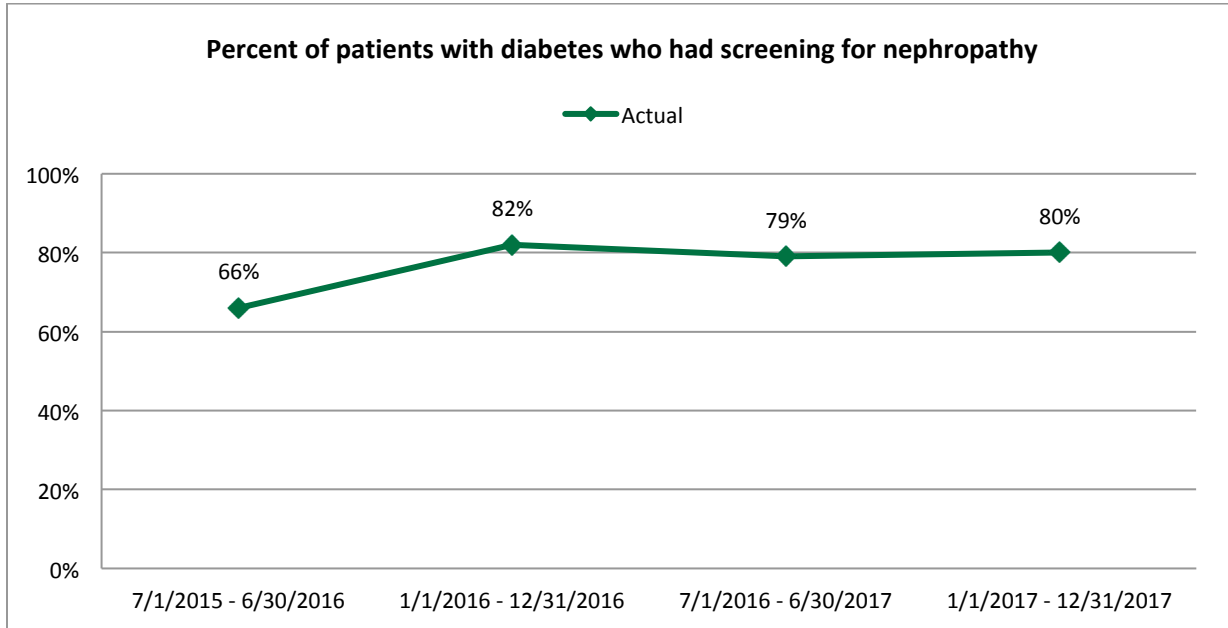
Diabetes Care: Medical attention for Nephropathy

The percentage of patients 18-75 years of age with diabetes (type 1 and type 2) who received a nephropathy screening or monitoring test or had evidence of nephropathy during the measurement year. (NQF#0062)

Regional performance for the current period = 80%

Regional aggregate performance

- There has been continuous improvement since first reporting this measure in 2015
- There was a 1 percentage point increase from last period's performance
- The CPC+ 70th percentile benchmark for 2018 is 90%



The following is a list of the top 10 performing practice sites for this measure during the current performance period (listed alphabetically):

- Berger Health Partners – Walnut Street
- Berger Health Partners – West Main Street
- COPC Chen And Associates
- Heart of Ohio Family Health Centers
- MCMG Grove City Stringtown
- MCMG North
- MCMG Taylor Station
- MCMG Victorian Village
- MCMG Worthington
- Mount Carmel Health Stations

The following practice site showed the biggest improvement over three or more periods:

- Mount Carmel Medical Group - West

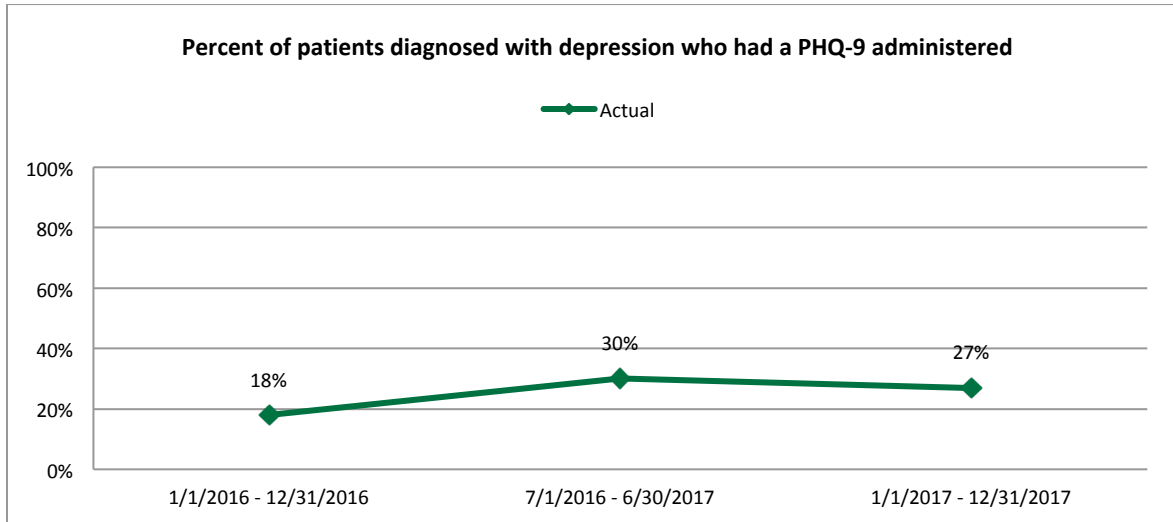
Depression Utilization of the PHQ-9 Tool

Adult patients age 18 and older with the diagnosis of major depression or dysthymia who have a PHQ-9 tool administered at least once during the four-month measurement period. (NQF#0712)

Regional performance for the current period = 27%

Regional aggregate performance:

- There was a 3 percentage point decrease from last period's performance
- the CPC+ 70th percentile benchmark for 2018 is 12.24%



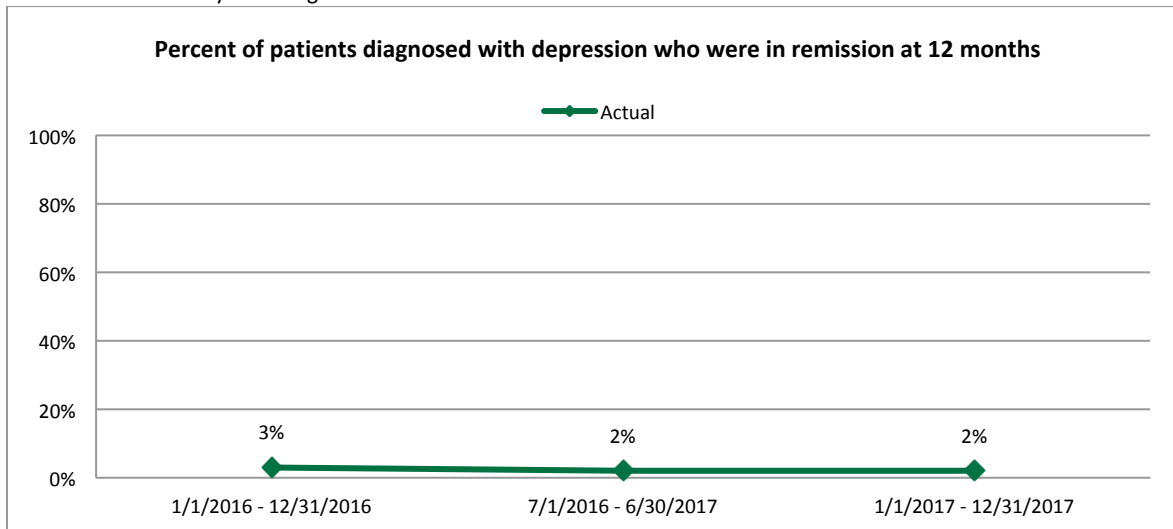
Depression Remission at Twelve Months

Adult patients age 18 and older with major depression or dysthymia and an initial PHQ-9 score > 9 who demonstrate remission at twelve months defined as a PHQ-9 score less than 5. (NQF#0710)

Regional performance for the current period = 2%

Regional aggregate performance:

- There was no change from last period's performance
- There is currently not a regional benchmark for this measure



Collaborative Terms of Use

The project partners participate under the following collaborative terms of use:

Collaborative Terms of Use	
<i>Participating Organizations</i>	<ul style="list-style-type: none"> • use reports to improve quality of care provided by your organization • share lessons learned to help improve healthcare transparency in Greater Columbus • will not use content to promote or publicize physician practices
<i>Healthcare Collaborative of Greater Columbus</i>	<ul style="list-style-type: none"> • maintain safe-space to enable the sharing of learning with participants • apply learning to catalyze best practices to improve transparency in Greater Columbus • will not use content to promote or publicize physician practices

About the Measures and Data

Through collaborative agreement, project partners have selected measures that are meaningful in helping them improve quality for their patients and the region and align with quality improvement initiatives they are currently focused on. Performance is reported by participating practices using data from electronic medical records. Data represents all patients and all payers by practice site (unique practice address).

Measures	Aligns with	Reporting Year				Reporting publicly in 2018
		2015	2016	2017	2018	
Controlling High Blood Pressure (ages 18-85) (NQF#0018)	CPC+, Ohio CPC, MIPS, UDS	X	X	X	X	X
Tobacco Use: Screening & Cessation Intervention (Ages 18+) (NQF#0028)	CPC+, Ohio CPC, MIPS, UDS	X	X	X	X	X
Colorectal Cancer Screening (ages 50-75 years) (NQF#0034)	CPC+, MIPS, UDS	X	X	X	X	X
Diabetes Care: Hemoglobin A1c reported as In Control ≤9.0% (Ages 18-75) (NQF#0059)	CPC+, Ohio CPC, MIPS, UDS		X	X	X	X
Diabetes Care: Medical attention for Nephropathy (Ages 18-75) (NQF#0062)	MIPS		X	X	X	X
Depression: Remission at twelve months (Ages 18+) (NQF#0710)	CPC+, MIPS			X	X	X
Depression: Utilization of PHQ-9 Tool (Ages 18+) (NQF#0712)	MIPS			X	X	X
Depression: Response at twelve months (Ages 18+) (NQF#1885)				X	X	
Total Number Of Sites Reporting At Least One Measure		107	131	145	147	

CPC+ - Comprehensive Primary Care Plus; Ohio CPC – Ohio’s Comprehensive Primary Care program; MIPS – Merit-based Incentive Payment System; UDS – Uniform Data System (quality reporting system for federally-funded health centers)