

Quality Transparency

Regional Healthcare Quality Report – October 2018

We are pleased to provide the regional summary report of clinical quality performance for data period **July 1, 2017 – June 30, 2018**. The purpose of this project is to promote healthcare quality transparency and improvement in the Greater Columbus region.

REGIONAL PERFORMANCE SNAPSHOT

Aggregated data represent **157 provider practice sites** serving a total of **770,113 patients**. Based on information shared by the organizations, we estimate the payer mix for all patients to be: Commercial = 53%, Medicare = 27%, Medicaid = 15%, Self Pay/Other = 5%

Quality Measure	Aggregate performance	2014-2017 target	2018 target	Total sites reporting	Percent of sites ≥ 2014-2017 target	Percent of sites ≥ 2018 target	Total patients in denominator
Controlling High Blood Pressure	69%	61%	75%	152	80%	32%	187,922
Colorectal Cancer Screening	59%	71%	71%	152	22%	22%	252,241
Diabetes: A1C in Control ¹	78%	84%	91%	152	36%	5%	83,281
Diabetes: Nephropathy	79%	-	90%	107	N/A	19%	64,527
Tobacco Use Screening and Cessation	87%	-	95%	152	N/A	28%	484,053
Depression: Screening and Plan	53%	-	-	92	N/A	N/A	253,096
Depression: Utilization of PHQ-9	43%	-	30%	24	N/A	42%	11,566
Depression: Remission at 12 months	16%	-	2.2%	42	N/A	64%	2,479
Depression: Response at 12 months ²	8%	-	-	13	N/A	N/A	946

Green – aggregate of reporting practices is above 2018 target; *Red* – aggregate of reporting practices is below 2018 target

¹Reported as inverse of definition (in control); ²Two organizations reporting on this measure

Notes:

Targets – 2014-2017 targets were based on Healthy People 2020 goals. Healthy People 2020 goals do not exist for several of the measures in this project. New regional targets were collaboratively agreed upon in 2018 by project partners based on alignment with CPC+ and other quality targets and benchmarks identified over the course of the project.

CPC+ - Controlling High Blood Pressure and Diabetes: A1C in Control are the two quality measures that practices participating in CPC+ will be required to report on for the 2019 performance period.

ABOUT THE PARTICIPANTS

The following 13 healthcare organizations contributed data for this performance period:

Berger Health Partners	Mount Carmel Medical Group
Central Ohio Primary Care	OhioHealth Physician Group
Concord Counseling Services	The Ohio State University Wexner Medical Center – Primary Care
Heart of Ohio Family Health Centers	PrimaryOne Health
Hilliard Family Medicine	Southeast, Inc.
Holzer Health System	Syntero
Lower Lights Christian Health Center	

- Federally Qualified Health Centers (Heart of Ohio Family Health Centers, Lower Lights Christian Health Center, PrimaryOne Health, and Southeast, Inc.) provide healthcare services to citizens and non-citizens who are medically underserved, underinsured, or uninsured.

- Heart of Ohio Family Health Centers: 3 practice sites reported at the organization level; data is for 1/1/2018-9/18/2018

- Lower Lights Christian Health Center: 7 practice sites reported at the organization level

- Southeast, Inc.: 3 practice sites reported at the organization level; serves homeless, most with mental health or substance use disorders

- Holzer Health System reporting data for 1/1/2018 – 6/30/2018

REGIONAL PERFORMANCE DETAIL

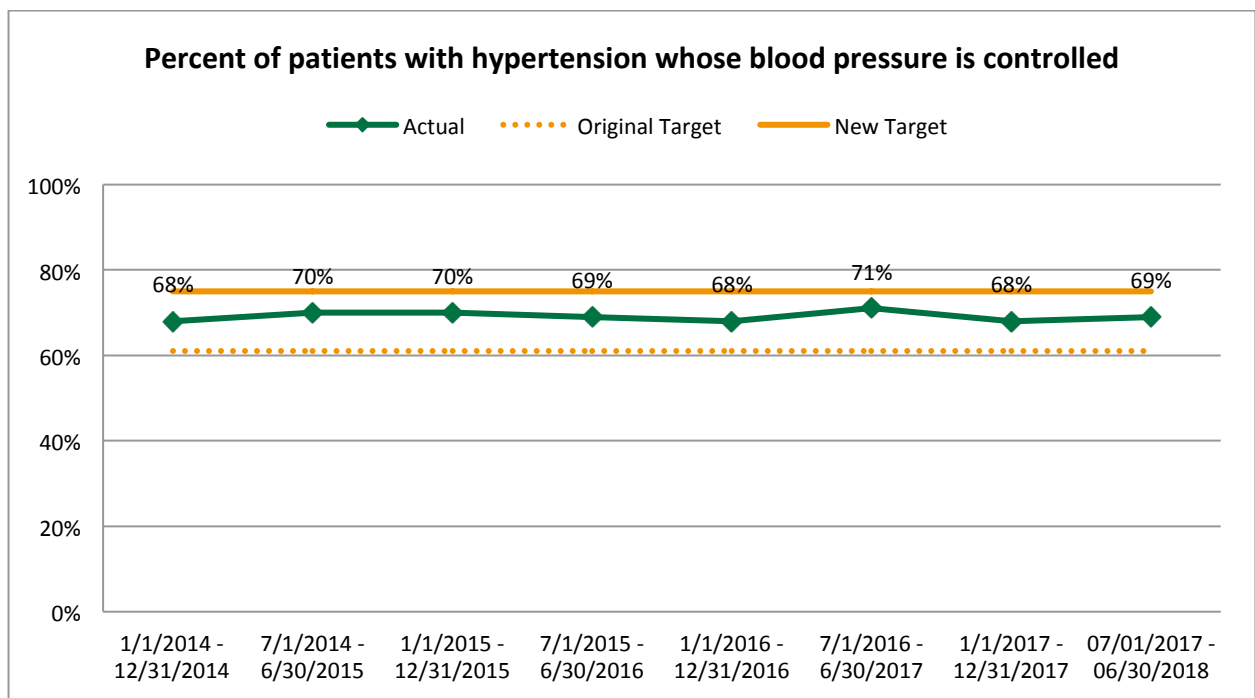
Controlling High Blood Pressure

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 = 69%

Regional aggregate performance

- There was a 1 percentage point increase from last period's performance
- We have consistently exceeded the original regional target of 61%, but have remained relatively constant in regional performance rates.
- We did not meet the new regional target of 75%.



The following practices (listed alphabetically) performed in the 90th percentile of all practices reporting this measure. The top performing practice was **Berger Health Partners Walnut Street** at 92%.

Berger Health Partners Walnut Street
 Berger Health Partners West Main Street
 COPC Westerville
 Fairway Family Physicians
 Family Medicine North
 Family Practice Center Of Westerville
 Granville Pike Family Physicians
 MCMG Wedgewood

MCMG Worthington
 Northside Internal Medicine
 PrimaryOne Health Dublin
 PrimaryOne Health West Broad Street
 Suburban Internal Medicine
 Upper Arlington Preventative Primary Care
 Worthington Internal Medicine

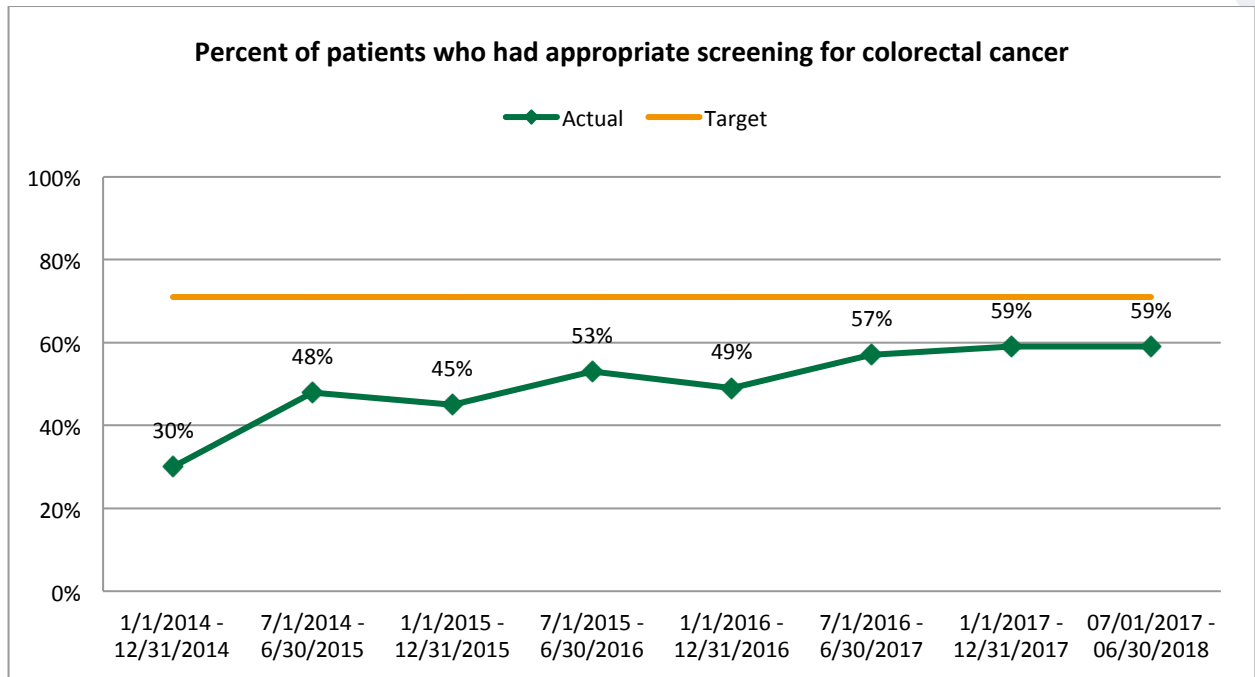
Colorectal Cancer Screening

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 has been continuous improvement since 2014
- There was no change from last period's performance
- We did not meet the regional target of 71%.



The following practices (listed alphabetically) performed in the 90th percentile of all practices reporting this measure. The top performing practice was **Amico and Associates** at 92%.

Amico and Associates
 Arlington Mill Run
 Berger Health Partners Northridge Rd.
 Central Ohio Medicine
 COPC Westerville
 Family Practice Center Of Westerville
 Jasonway Internal Medicine
 MCMG TriVillage
 MCMG Worthington
 Michael R Ports MD
 Northside Internal Medicine

Northwest Family Physicians
 Ohio State Family Medicine at Thomas Rardin
 Ohio State Outpatient Care Gahanna: Family Medicine
 Ohio State Primary Care at New Albany
 OhioHealth Pickerington Medical Campus Refugee Rd.
 Stoneridge Medical Services: Primary Care-General Internal Medicine
 Worthington Internal Medicine

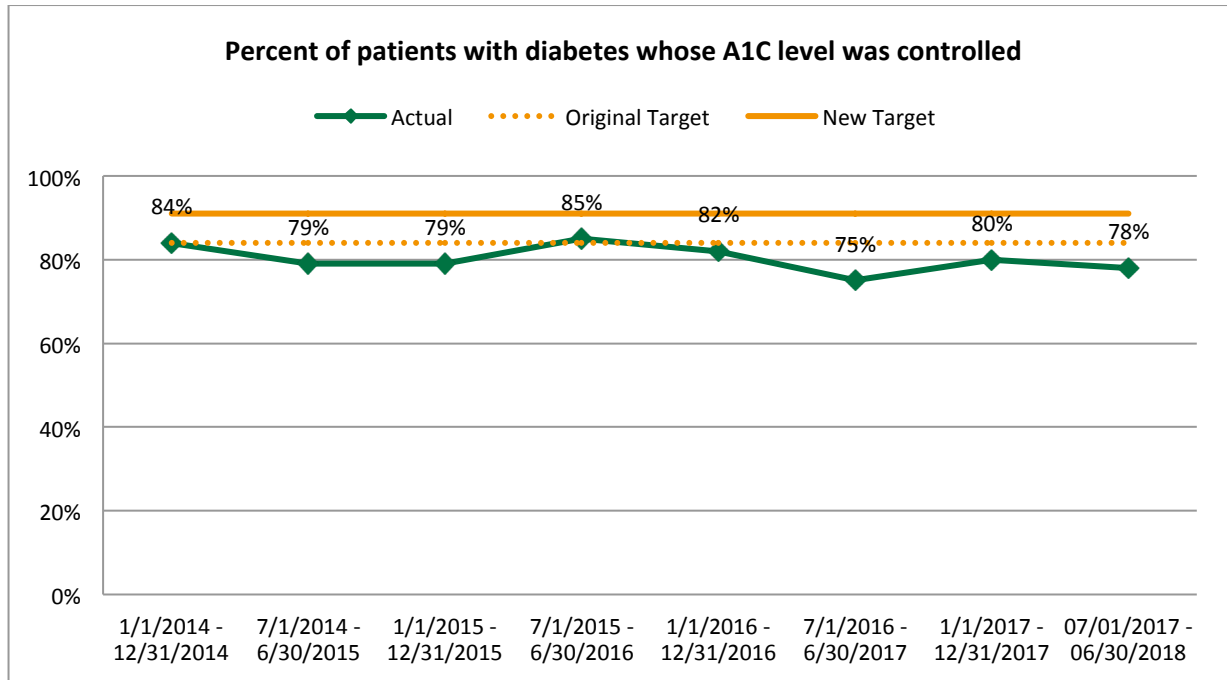
Diabetes Care: Hemoglobin Control *(reported as In Control ≤9.0%)*

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)

Regional performance for the current period = 78%

Regional aggregate performance

- There was a 2 percentage point decrease from last period's performance
- We did not meet the original target of 84% or the new target of 91%.



The following practices (listed alphabetically) performed in the 90th percentile of all practices reporting this measure. The top practices performed at **93%** and are indicated by an asterisk (*).

Bexley Health Services at Wexner Heritage Village
 COPC Westerville
 Grant Medical Education Outpatient Care Center (formerly Grant Family Practice)
 Internal Medicine and Pediatrics at Hilliard: General Internal Medicine and Pediatrics
 Jasonway Internal Medicine
 Martha Morehouse Medical Plaza: Primary Care – General Internal Medicine
 Ohio State Family Medicine at Thomas Rardin
 Ohio State Family Medicine at Worthington
 Ohio State Outpatient Care Lewis Center: General Internal Medicine and Pediatrics*
 Ohio State Outpatient Care Upper Arlington: General Internal Medicine
 Ohio State Primary Care at New Albany*

OhioHealth Marion Area Physicians Lexington
 OhioHealth Marion Area Physicians Mallard Square
 OhioHealth Pickerington Hill Rd.
 OhioHealth Primary Care Physicians Delaware Internal Medicine
 OhioHealth Primary Care Physicians Reynoldsburg
 OhioHealth Primary Care Physicians Sunbury Family Practice
 OhioHealth Westerville Medical Campus
 Philip Heit Center for Healthy New Albany: Primary Care
 Stoneridge Medical Services: Primary Care- General Internal Medicine*
 Worthington Internal Medicine

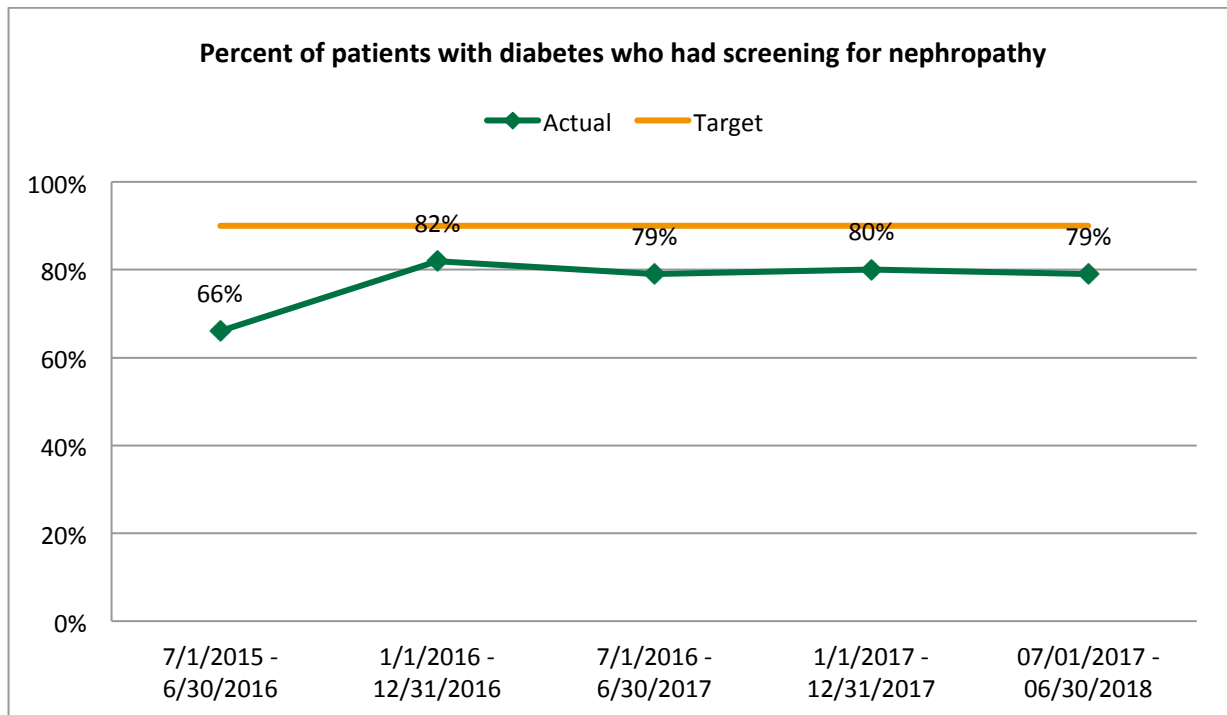
Diabetes Care: Medical attention for Nephropathy

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 = 79%

Regional aggregate performance

- There was a 1 percentage point decrease from last period's performance
- We did not meet the regional target of 90%.



The following practices (listed alphabetically) performed in the 90th percentile of all practices reporting this measure. The top performing practice was **MCMG Victorian Village** at 96%.

Berger Health Partners West Main Street
 Heart of Ohio Family Health Centers
 Holzer Gallipolis
 MCMG Big Run
 MCMG Grove City Stringtown
 MCMG New Albany
 MCMG North

MCMG Taylor Station
 MCMG TriVillage
 MCMG Victorian Village
 MCMG Wedgewood
 MCMG Worthington
 Mount Carmel Health Stations

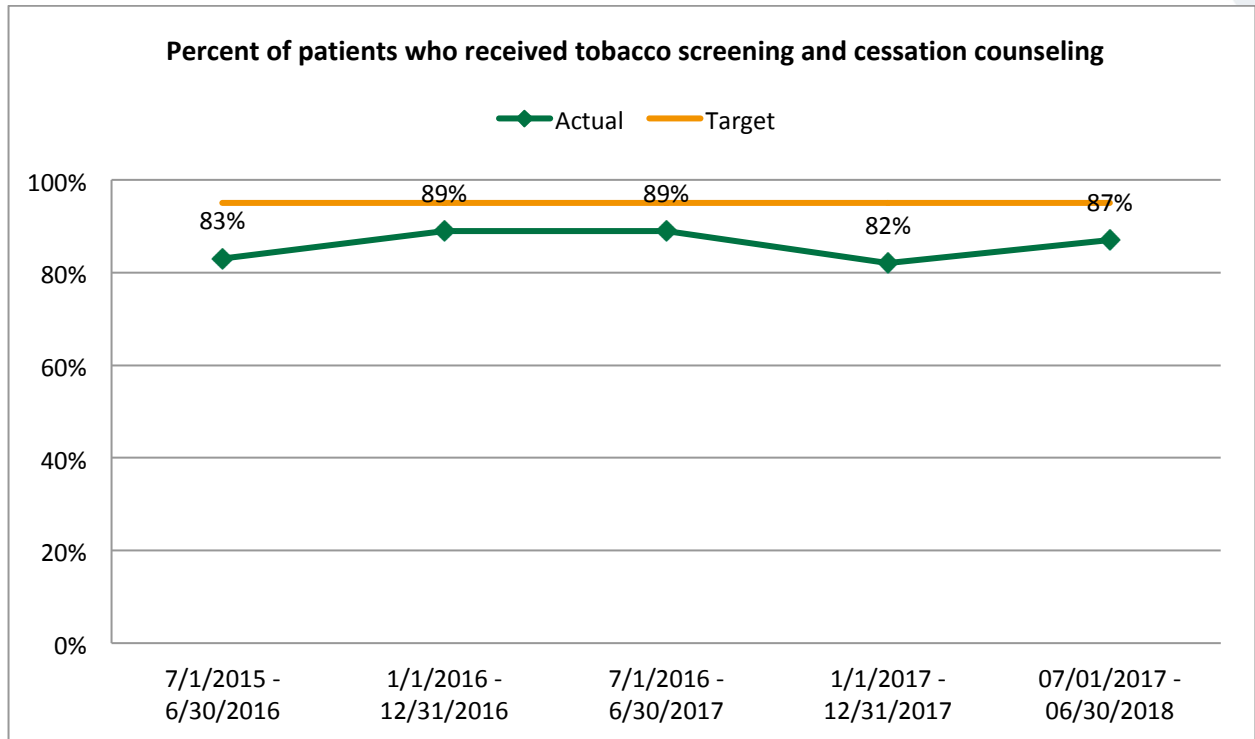
Tobacco Use: Screening & Cessation Intervention

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. (NQF#0028)

Regional performance for the current period = 87%

Regional aggregate performance

- There was a 5 percentage point increase from last period's performance
- We did not meet the regional target of 95%.



The following practices (listed alphabetically) performed in the 90th percentile of all practices reporting this measure. The top practices performed at 99% and are indicated with an asterisk (*).

Amico and Associates*
 Arlington Mill Run*
 COPC Westerville*
 Fairway Family Physicians
 Granville Pike Family Physicians*
 Holzer Athens
 Holzer Meigs
 Internal Medicine and Pediatrics at Grandview
 MCMG Grove City Stringtown
 MCMG Worthington
 Michael R Ports MD
 Ohio State Family Medicine at Thomas Rardin

Ohio State Outpatient Care Gahanna: Family Medicine
 Ohio State Outpatient Care Upper Arlington: Family Medicine and Primary Care*
 Ohio State Primary Care at New Albany
 OhioHealth Marion Area Physicians 1040 Delaware
 OhioHealth Primary Care Physicians Hilliard-Nike Dr.
 Stonegate Medical Associates
 Stoneridge Medical Services: Primary Care-General Internal Medicine*

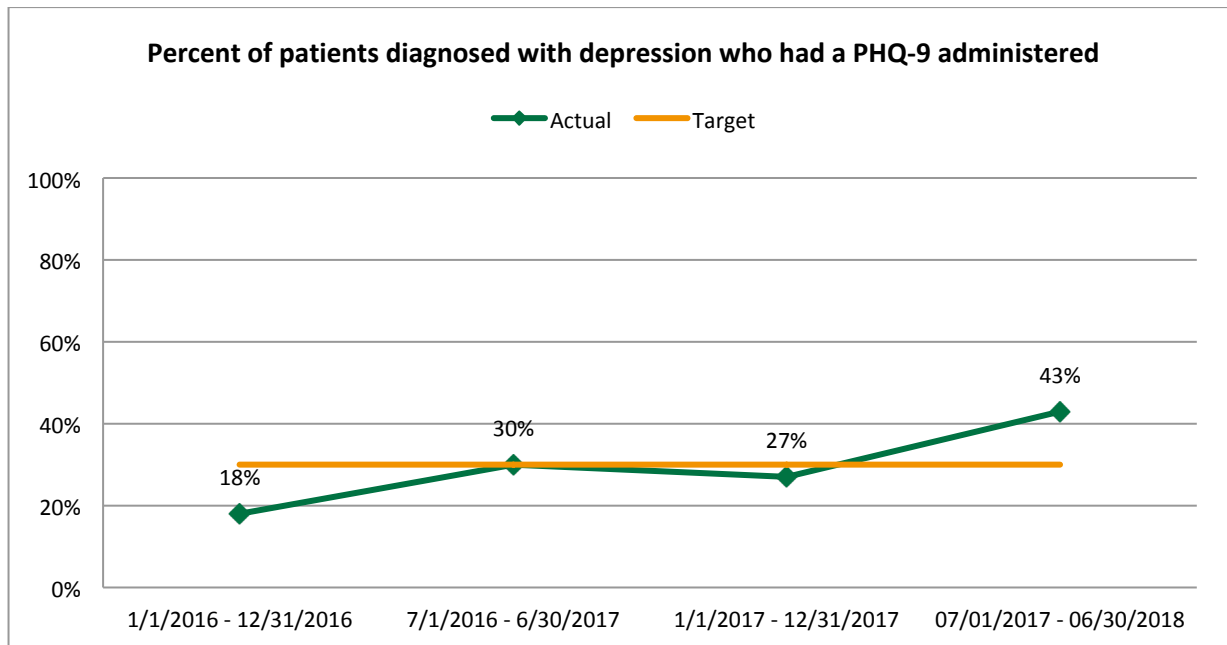
Depression Utilization of the PHQ-9 Tool

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 = 43%

Regional aggregate performance:

- There was a 16 percentage point increase from last period's performance
- We exceeded the regional target of 30%



The following practices (listed alphabetically) performed in the 90th percentile of all practices reporting this measure. The top performing practice was **Concord Counseling Services** at 72%.

Concord Counseling Services
Southeast, Inc. Community Health Center

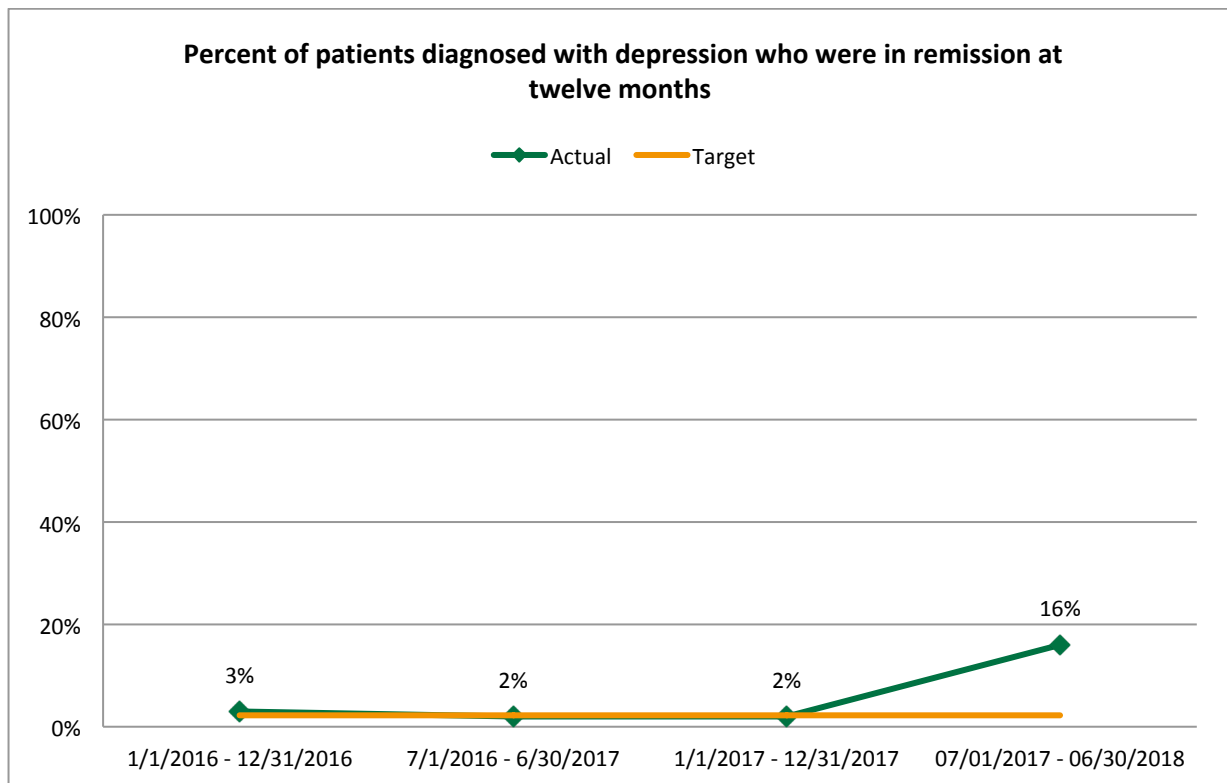
Depression Remission at Twelve Months

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 a 14 percentage point increase from last period's performance
- We exceeded the regional target of 2.2%



The following is a list of the practice sites performing in the 90th percentile of all practices reporting this measure (listed alphabetically). The top performing practice was **MCMG TriVillage** at 50%.

MCMG Big Run
MCMG Grove City
MCMG Hilliard
MCMG TriVillage

Screening for Clinical Depression and Follow-Up Plan

Percentage of patients aged 12 years and older screened for depression on the date of the encounter using an age appropriate standardized depression screening tool AND, if positive, a follow-up plan is documented on the date of the positive screen (NQF #0418)

Regional performance for the current period = 53%

Regional aggregate performance:

- This is the first year that this measure was reported for the project so past performance is not available.
- There is currently not a regional target for this measure.

The following practices (listed alphabetically) performed in the 90th percentile of all practices reporting this measure. The top performing practice was **Syntero** at 100%.

Holzer Gallipolis
MCMG Big Run
MCMG Grove City Stringtown
MCMG Lewis Center
MCMG Pickerington
MCMG Polaris
MCMG West
MCMG Worthington
Mount Carmel Health Stations
Syntero

Depression Response at 12 months

Patients age 18 and older with major depression or dysthymia and an initial Patient Health Questionnaire (PHQ-9) score greater than nine who demonstrate remission at twelve months (+/- 30 days after an index visit) defined as a PHQ-9 score less than five (NQF #0710)

Regional performance for the current period = 8%

Regional aggregate performance:

- This is the first year that performance was reported by more than one organization, so past performance is not being reported
- There is currently not a regional target for this measure.
- Two organizations with 13 sites reported on 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. Practices provide data from their electronic health records and performance is then calculated for their site and the region. Data represent all patients and all payers for each practice site, which is based on the unique practice address.

Measures	Aligns with	Reporting Year			
		2015	2016	2017	2018
Controlling High Blood Pressure (ages 18-85) (NQF#0018)	CPC+, Ohio CPC, MIPS, ACO, UDS	X	X	X	X
Tobacco Use: Screening & Cessation Intervention (Ages 18+) (NQF#0028)	CPC+, Ohio CPC, MIPS, ACO, UDS	X	X	X	X
Colorectal Cancer Screening (ages 50-75 years) (NQF#0034)	CPC+, MIPS, ACO, UDS	X	X	X	X
Diabetes Care: Hemoglobin A1c reported as In Control ≤9.0% (Ages 18-75) (NQF#0059)	CPC+, Ohio CPC, MIPS, ACO, UDS		X	X	X
Diabetes Care: Medical attention for Nephropathy (Ages 18-75) (NQF#0062)	CPC+, MIPS		X	X	X
Depression: Screening and follow-up plan (Ages 12+) (NQF#0418)	CPC+, MIPS, ACO, UDS				X
Depression: Remission at twelve months (Ages 18+) (NQF#0710)	MIPS			X	X
Depression: Utilization of PHQ-9 Tool (Ages 18+) (NQF#0712)	CPC+, MIPS			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	157

CPC+ - Comprehensive Primary Care Plus; Ohio CPC – Ohio’s Comprehensive Primary Care program; MIPS – Merit-based Incentive Payment System; ACO = Accountable Care Organizations as part of the Medicare Shared Savings Program; UDS – Uniform Data System (quality reporting system for federally-funded health centers)

