



County Level Profiles to Facilitate Community Assessments

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CENTER FOR IMPROVING
VALUE IN HEALTH CARE

Session Agenda

- About CIVHC/Colorado All Payer Claims Database
- Health care claims data
- Other common health data sources
- Overview of health system measures:
 - Integrating health care and public health measures
- Building a county profile – interactive session
- Wrap up





Our Mission

We strive to empower individuals, communities, and organizations through collaborative support services and health care information to advance the Triple Aim: **Better Health**, **Better Care**, **Lower Cost**

We are:

- Non-profit
- Independent
- Objective





Who We Serve

Change Agents

Individuals, communities, or organizations working to lower costs, improve care, and make Colorado healthier.



Clinicians



Hospitals



Government



Consumers



Employers



Researchers



Health Plans



Non-Profits



Focus Areas



Public CO APCD Data
Identify opportunities for improvement in your community through interactive reports and publications



Custom CO APCD Data
License data from the most comprehensive claims database in CO to address your specific project needs



Data Literacy
Attend data academies to learn how to use available data resources across the state and country



CIVHC Connect
Participate in convenings to discuss innovative ideas and programs aimed at transforming health care

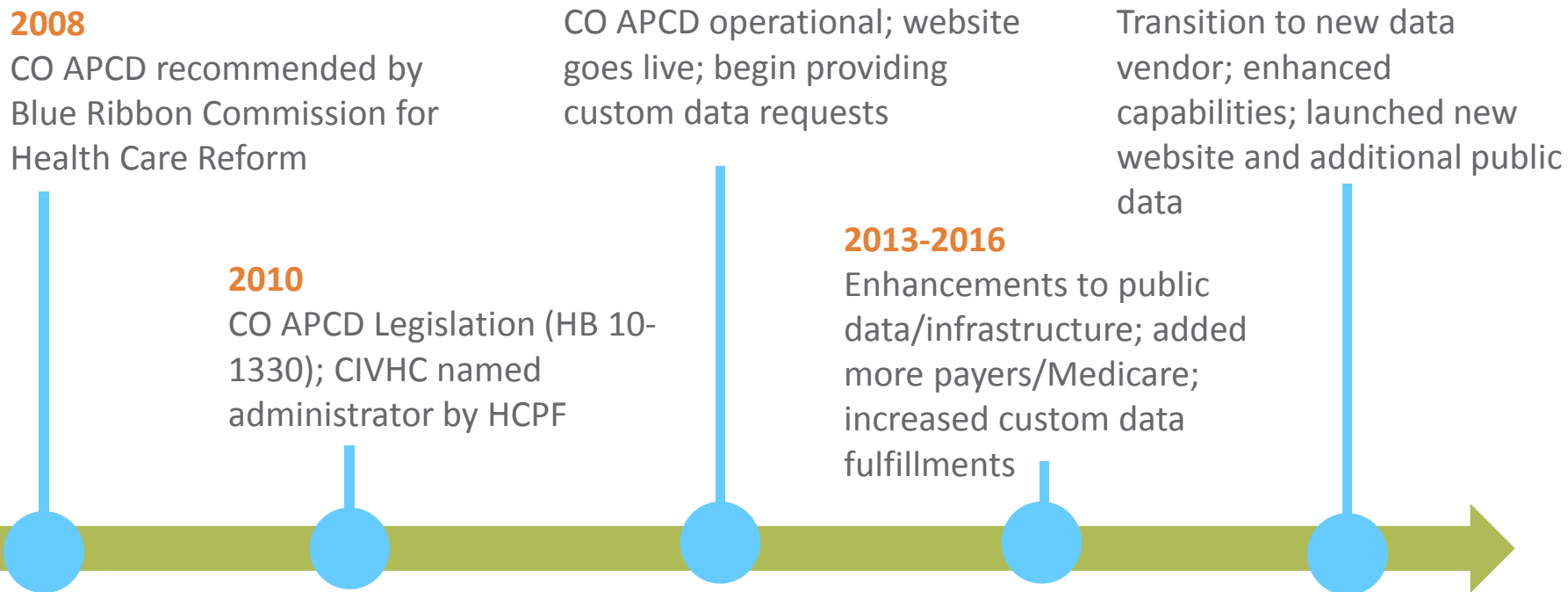


Programs and Convening
Get involved with data, education, work groups, and convening around serious and advanced illness





History of the CO APCD





What's in the CO APCD



Health Insurance Payers

We receive claims from **Medicaid, Medicare**, Medicare Advantage, and over **37 commercial payers**



Claims

The Colorado APCD has over **800+ million claims** (Medical, Pharmacy, and Dental)



Unique Lives

The Colorado APCD represents **over 4 million** unique lives, and over **70% of insured Coloradans**



What is Health Care Claims Data?

- Health insurance claims data is the information collected in order for health care services to get paid

Claim Filed



Provider files claim with insurance company for health care service.

Submission to CO APCD



Insurance company securely submits claim to CO APCD.

Data Release



CIVHC makes data available to improve health care and costs.



What's in a Health Insurance Claim?

- Information related to:
 - Who received and who provided services
 - What services were provided
 - When services were provided
 - Why the services were needed (diagnosis)
 - How much was charged and how much was actually paid, and by whom



What is the Unique Benefit of Claims Data?



Claims help you understand **how much actually gets paid** for health care services



What Else Can You Understand with Health Claims?

Utilization

Where and how often services are being used

Quality

If the care provided met national standards

Condition Prevalence

Overall health



Where Can You Get Claims Data



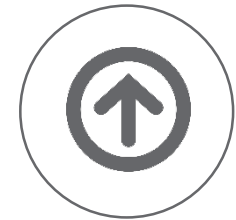
Patients



Providers



**All Payer Claims
Databases (APCD)**



**Health Insurance
Companies**



What Unique Benefits Does an All Payer Claims Database Provide?

- Includes private insurance, and represents the majority of insurance companies
- Identifies care for patients regardless of care setting (i.e. not just hospitalizations or office visits)
- Represents a large portion, if not the majority of a given population and geographic region
- Provides information across multiple years for individuals, regardless of changes in insurance

For more info on the benefits of APCDs, visit the Agency for Health Care Research and Quality: <https://www.ahrq.gov/professionals/quality-patient-safety/quality-resources/apcd/index.html>



What Can You Understand with an APCD?

MACRO LEVEL

- Populations/Demographics (M/F, Age Groups)
- Provider Types and Categories
- Payer Type (Commercial, Medicare, Medicaid)
- Total Paid

MICRO LEVEL*

- Unique Patients
- Unique Providers
- Individual Payers
- Specific Services
- Zip Code Level Geography
- Specific Dates
- Copay, deductible, co-insurance, and payer paid amounts

**Must meet HIPAA and HITECH guidelines that protect patient information*



What Kinds of Questions Can I ask with Claims Data from an APCD?

- How much does it cost to get an MRI in Denver County?
- What areas of Colorado have the highest prevalence of people with diabetes, and are they getting the care they need according to guidelines?
- Are people using their health insurance, and if so, for what services?
- Are prescription drug costs rising, and by how much annually?
- What are the top 10 conditions being treated in Emergency Rooms?



What Information is Not Typically Available in Claims Data?

- Plan benefit information (premiums, annual deductible information, etc.)
- Services paid out of pocket (flu shot, health fair screenings, etc.)
- Referral information
- Prescriptions issued but not filled
- Results of lab tests
- Medical history information
- Patient experience and decision-making information





Public CO APCD Data Resources

Available at www.civhc.org

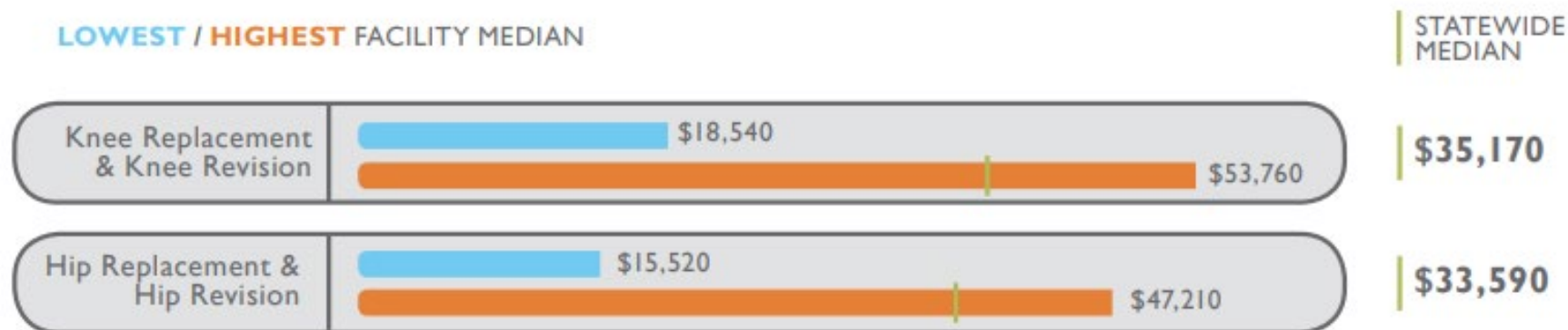


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Shop for Care

Comparing prices across Colorado providers for expensive procedures such as births, hip & knee replacements, and MRIs can help Coloradans realize significant cost savings.



Use this tool to shop for **prices and quality** by **named providers**



Interactive Population Health Reports

- What Data is Available?
 - **Colorado Cost, Utilization, Quality, and Condition Prevalence information**
- All reports include:
 - Trend information
 - **Payer Selections:** Medicaid, Medicare Advantage, Commercial
 - **Geographical Selections:** Rural & Urban, County-level, Health Statistics Regions



Cost of Care

Understanding how costs differ across the state helps communities, policy makers, and others begin to identify solutions to reduce variation.

What cost information is available?

- Per Person Per Year Information by Service Category:
 - Inpatient
 - Outpatient
 - Professional
 - Pharmacy

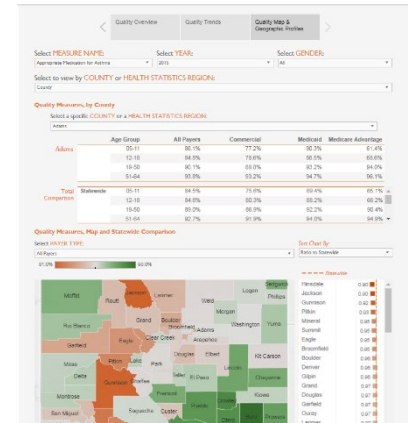


Quality of Care

Understanding and addressing inequities in the quality of care provided across Colorado starts with understanding where disparities exist.

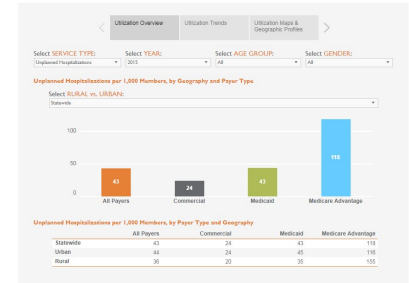
What quality information is available?

- Measures:
 - Appropriate Medication for Asthma
 - Diabetes A1c Test
 - Breast Cancer Screening
 - Cervical Cancer Screening
 - Colorectal Cancer Screening



Utilization of Services

Understanding where patients are accessing services is an important first step toward ensuring consumers understand where to go for care.

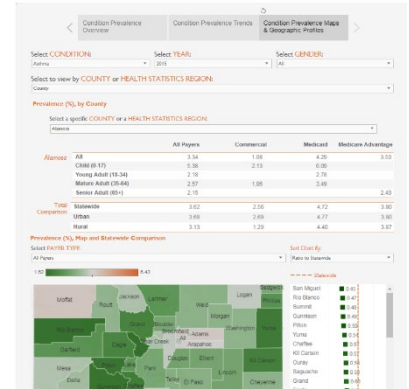


What utilization information is available?

- Services:
 - Unplanned Hospitalizations
 - 30-Day Readmissions
 - Emergency Room Visits
 - Observation Stays
 - Outpatient Services
 - Pharmacy Scripts (All)
 - Pharmacy Scripts (Generic Only)

Condition Prevalence

Understanding and addressing inequities in the quality of care provided across Colorado starts with understanding where disparities exist.



What condition information is available?

- Conditions:
 - Asthma
 - Breast Cancer
 - Cervical Cancer
 - Colorectal Cancer
 - Lung Cancer
 - Congestive Heart Failure
 - COPD
 - Depression
 - Diabetes Type 1
 - Diabetes Type II
 - Hypertension

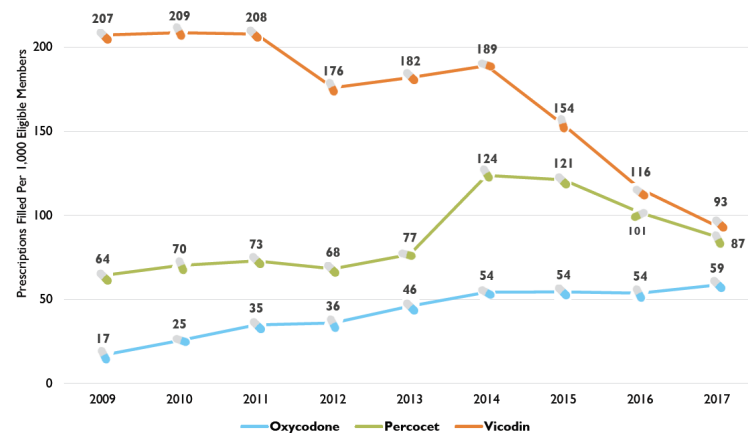
Topic-Specific Analytics

- Publications, infographics, and data extracts available at civhc.org
- Released monthly (or more frequently)
- Sign up for notifications on the civhc.org website

**Recent
release:**

Opioid Prescribing in CO

Oxycodone, Percocet, and Vicodin Prescription Trends in Colorado, 2009-2017
Commercial, Medicaid, and Medicare Advantage, CO APCD





Other Commonly Available Sources of Health Data



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Survey Data

Self-reported experience and decision-making helps answer questions like:

- How happy are patients with the care they receive at a particular hospital or doctor's office?
- Why do patients with common colds go to the ER versus and urgent care or doctor's office?
- Does cost impact whether patients decide to fill their prescriptions or access health care services?
- Why don't people eligible for subsidies buy health insurance?



Electronic Health Records and Health Information Exchanges

Clinical records that help doctors and others with access understand questions like:

- Does this patient have family history of hypertension?
- What tests have been performed on this patient in the last month and what were the results?
- How many women have cholesterol levels over 200>



Surveillance and Registry Data

Surveys or reported information focused on specific conditions that can answer questions like:

- When was the last outbreak of measles in Colorado?
- How many deaths in rural areas have occurred as a result of drug overdoses?
- What's the rate of flu vaccination across the state?





Measuring Health Systems

Integrating health care and public health measures



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Vital Signs for the Course of Health and Health Care

Health Care Measures



Institute of Medicine (2015). Vital Signs: Core Metrics for Health and Health Care Progress. Washington, DC: The National Academies Press.



Care Access

The ability to receive care when needed is a critical precondition for effective system performance.

- Best measure:
 - Unmet care need (NHIS, CAHPS, Medical Expenditure Panel Survey)
- Related priority measures:
 - Usual source of care
 - Delay of needed care
 - **Lack of health insurance**





Preventive Services

Appropriate use of preventive services is important to improving health status and outcomes as well as efficiency in the delivery of care.

- Best measure:
 - **Childhood immunization rate**
- Related priority measures:
 - **Colorectal cancer screening**
 - **Breast cancer screening**
 - Influenza immunization
 - BMI screening and follow-up
 - Tobacco screening and cessation counseling

Institute of Medicine (2015). Vital Signs: Core Metrics for Health and Health Care Progress.





Patient Safety

Avoiding harm is a primary obligation of the health care system

- Best current measure:
 - **Hospital Acquired Infection rate**
- Related priority measures:
 - Wrong-site surgeries
 - Pressure ulcers
 - Medication reconciliation
 - Patient safety measures
 - **Unnecessary care**

Institute of Medicine (2015). Vital Signs: Core Metrics for Health and Health Care Progress.





Appropriate Treatment: Evidence-Based Care

Ensuring that care is delivered based on the best evidence available

- Best current measure:
 - **Preventable hospitalizations**
- Related priority measures:
 - Hypertension and diabetes control
 - Cardiovascular risk control





Care Match with Patient Goals

Ensure that the health care system responds to the needs and values of patients.

- Best current measure:
 - CAHPS composite measure patient-clinician communication
- Related priority measures:
 - Shared decision-making
 - Patient rating of providers
 - End-of-life care
 - Likelihood of recommending



County-Level Public Data Sources

Site/Project	Data Sources	Topics
County Health Rankings (countyhealthrankings.org)	Variety of sources (e.g., Census, BRFSS)	Based on a model of community health that emphasizes the many factors that influence how long and how well we live. The Rankings use more than 30 measures that help communities understand how healthy their residents are today (<u>health outcomes</u>) and what will impact their health in the future (<u>health factors</u> : health behaviors, clinical care, social and economic factors) and <u>policies and programs</u> .
CDPHE/Colorado Health Indicators (colorado.gov/pacific/cdphe/colorado-health-indicators)	Census, BRFSS	Health Equity Model that looks at population health outcomes over the life course as a result of social determinant of health (economic opportunity, physical environment and social factors) and health factors (behaviors and conditions) framed by policies and cultural norms.
Center for Improving Value in Health Care (civhc.org)	Claims data, collected monthly in the CO All Payer Claims Database	Cost, utilization of services, condition prevalence, quality, low value care, reference-based pricing, etc.
Colorado Health Institute/ CO Health Access Survey (www.coloradohealthinstitute.org/data)	Survey conducted every other year.	Coloradans' health, their interactions with health care systems, and the impact of major health care policy developments.



Building a County Health Profile

- Overview of dashboard and suggested resources

Indicator	Morgan County	State	Comparison to State
Insurance Coverage			
Uninsured	8.00%	9.40%	-15%
Access, General, Mental & Oral Health			
General Health			
Primary Care Physician ratio	1,770:1	1,230:1	44%
Adults 18+ with one or more regular providers	77.30%	76.30%	1%
Has a usual source of care	87.9%	84.2%	4%
Days of Poor Physical Health (out of past 30)	3.6	3.4	6%
Low Birth Weight	9.0%	8.9%	1%
Premature Death	8300	5900	41%
Mental Health and Depression			
Mental health provider ratio	470:1	300:1	57%
Needed mental health in past 12 mo but didn't get it	9.3%	11.8%	-21%
Days of Poor Mental Health (out of past 30)	3.5	3.3	6%
Suicide (10th leading cause of death/100,000)	16.3	19.1	-15%
Depression	6.39	5.1	25%
Oral Health			
Dentist ratio	1,280:1	1,260:1	2%
Adult Tooth Loss	43.4%	37.0%	17%
Child Poor Oral Health	n/a	5.7%	n/a
SocioEconomic Factors and Health Behaviors			
Access to Healthy Foods (Rate per 10,000)	1.4	1.2	17%
Violent Crime (/100,000)	203	326	-38%
Children in Poverty	15%	12%	25%
Teen births (/1000)	39	22	77%
Chronic Condition, Quality and Prevention			
Arthritis			
Adult Arthritis	18.3%	22.6%	-19%
Asthma			

Individual or Group Working Session

- Build your own dashboard using the template!
- Blank Excel document available at:
 - www.civhc.org/phir2019



Wrap-Up

- Discussion of findings
 - Was there any data that surprised you?
 - Were there other measures you would have added or did add?
 - Additional data that would be helpful that wasn't available?



Thank You & Contact Information

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Join our email list at www.civhc.org for regular updates on new data releases!

