

Data Consortium Meeting Summary 4-30-08

The Kansas Health Policy Authority (KHPA) hosted the third meeting of the Data Consortium on Wednesday, April 30th at the KHPA offices in Topeka. Representatives of 11 member agencies/organizations were present as well as other interested parties.

The primary purpose of this meeting was to receive updates from the four workgroups (Access to Care, Quality & efficiency, Affordability & Sustainability, and Health & Wellness) which were formed at the February meeting. They have been charged with laying the groundwork for reporting in their respective domains by selecting measures and indicators, identifying essential elements to include in the report designs and identifying existing and needed data to produce the reports. Work is to be completed in time for the Data Consortium to finalize recommendations in October 2008, which will be made to the KHPA board the following month. January 2009 is targeted for report implementation. Dr. Allison clarified the role of this body at this point in time, which is to assure continuity in selection methods, some conformity in report design, and a balance in the number of measures selected across the four domains.

All four workgroups have defined their subject areas, some more easily than others. They reported having discussions about the intended audience(s) of the reports that are to be created and how that might influence the selection of data elements. Members have gathered lists of state and national databases pertinent to each subject area. The Quality and Efficiency group developed a grid that spells out key selection criteria such as availability, validity and reliability; this will aid in screening and ranking the measures as the universe is narrowed to approximately 20 for each group. This grid was shared among all of the workgroups. As a starting point for populating the grid, some of the groups adopted the framework of Healthy People/Healthy Kansans 2010.

Group-specific information:

Access to Care, led by KHPA (presenter: Hareesh Mavoori) – has met twice. Members have submitted their “top 20” indicators, which are being compiled into a master list (currently with 99 measures), to be evaluated and ranked at the next meeting, on May 14th.

Quality and Efficiency, led by KFMC (presenter: Larry Pitman) – has met twice. Over 400 “quality” measures have been identified at this point. Narrowing the list is the ambitious goal of the next meeting, on May 21st.

Health and Wellness, led by KDHE (presenter: Paula Marmet) – has met once. This group expanded the list of criteria to use when deciding which measures to include in their final list. “Changeability” – i.e. the degree to which an indicator or measure can be improved via policy or other intervention – was a topic of considerable discussion. The next meeting will be by July 2nd.

Affordability & Sustainability, led by KHI (presenter: Gina Maree) – has met twice. Two challenges facing this group: defining “affordability” (which is not simply “cost” and varies, depending on one’s perspective), and the fact that there are not a lot of commonly used indicators for this principle. They have identified a need for an inventory of the regulatory mandates for reporting data to better understand the state’s legal authority to collect data. Next meeting date – June 2, 2008.

Dr. Mavoori provided updates on other activities pertinent to the Data Consortium:

State Quality Improvement Institute - Kansas is one of nine states selected to participate in this program, organized by Commonwealth Fund and Academy Health. The institute will provide targeted technical assistance, advice and access to reports and background research to help the states which have made commitments to health care quality. The focus areas for Kansas will be medical homes for children and preventing hospitalization for asthma.

Kansas Health Information Advisory Panel - Gov. Sebelius has charged the KHPA board with establishing a panel to provide guidance on policy issues related to health information technology and on a resource center for stakeholders. The panel will be made up of 14 members representing a broad spectrum of the medical field. The nomination period for those positions was to end March 14, 2008, but has been extended in an effort to draw candidates from more of the recommended areas. The appointments are expected to be completed during May and work is to begin soon afterward to implement policy recommendations from the KHPA Board.

Data Analytic Interface -A vendor has been selected; final justification for the selection has been sent to CMS and a response is anticipated by June. Once the contract is awarded, implementation is expected to be completed in one year.