

Data Consortium Meeting Summary 7-15-08

The Kansas Health Policy Authority (KHPA) hosted the fourth meeting of the Data Consortium on Tuesday, July 15th at the Eisenhower State Office Building Auditorium in Topeka. Representatives of 7 member agencies/organizations were present as well as other interested parties.

The meeting began with an update on the State Quality Improvement Institute. Kansas is one of nine states selected to participate in this program. The states will receive technical assistance and advice to implement health care quality improvement policies to which they have committed. Staff from the Commonwealth faculty made a site visit to Kansas June 13th; members of the Kansas team attended the SQII Kick-off meeting in Chicago June 25-27. Kansas selected medical homes for children and preventing hospitalization for asthma as focus areas.

Although “medical home” does not have a universal definition, Kansas’ goal is to transform the health care delivery system to one that is coordinated, convenient, consumer-friendly and provides quality care. A 100-day work plan was developed – the first milestone is to finalize the action plan by July 31st. Dr. Nielsen emphasized the fact that this is not strictly a KHPA project – it will require input/support from a broad range of stakeholders (represented by the Medical Home committee, Data Consortium) and policy-makers.

The primary purpose of this meeting was to receive updates from the four workgroups (Access to Care, Quality & efficiency, Affordability & Sustainability, and Health & Wellness). 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.

Having collected extensive lists of measures in each of their subject areas from State and nation-wide sources, all four workgroups have begun the process of narrowing those lists to the requested 20-50 measures. Criteria for selecting measures has varied among the groups, beyond the common requirements of data reliability, validity, comparability, frequency and availability. In considering the audience for the future reports, the groups’ primary aim is toward policy-makers, but they are still very aware of (and interested in knowing what is sought by) consumers. Karen Cole, Dykes Library, offered very timely assistance in this area, as she will soon embark on visits around the State to train, promote and learn what consumers would like to see added to Kansas Health Online.

Workgroup specific information:

Access to Care (Dr. Hareesh Mavoori – KHPA) – has met 4 times. From a list of 99 measures recommended by group members, it has been narrowed to 44, 20 of which are “tier 1” (available for first-year reporting). Health Disparities will be handled by breaking out selected measures by ethnicity, income level and other demographic variables rather than treated as a separate indicator. 3 new indicator categories: Access to Primary Care, Medical Home, and Cross-Cutting were created in addition to the 4 from the original list: Health Insurance Status, Health Professions Workforce, Safety Net Stability, and Medicaid Eligibility.

Affordability and Sustainability (Gina Maree – KHI) – has met 4 times. Measures have been grouped into the broad categories of: General State Health Care Expenditures, Medicaid/HealthWave, Safety Net Clinics, Community Mental Health Clinics, Private Insurance Expenditures, Health Insurance Premiums, Cost Sharing for Consumers, Uncompensated Care,

and Public Health. Workgroup members will be assigned specific measures to research for data options; the narrowing/prioritizing process continues.

Quality and Efficiency (Larry Pitman – KFMC) – has met 3 times. Their original list of 400+ was categorized following the Healthy People 2010 framework. The list has been narrowed considerably; review will continue at the 4th meeting – scheduled for 7-16-08.

Health and Wellness (Dr. Ghazala Perveen and Paula Marmet – KDHE) – has met twice. Over 130 measures have been grouped into the broad categories of: Chronic Disease, Infectious Disease, Health Screening for Infectious Chronic Diseases, Maternal and Child Health, Injury, Disability, and Environmental Health. The group has debated the merits of selecting measures based on breadth or depth and continues to seek the proper balance.

Dr. Marci Nielsen asked the workgroups to consider/identify their long-term goals as well as the short-term (“impactability” factor) as they continue reviewing the reporting measures. She also advised looking at Kansas’ rank in the nation on various health care factors for guidance on the areas that need attention.

A question was raised by Dr. Andy Allison about the degree to which long-term care will be included in reports.

Workgroups were asked to add some measures to their lists that relate to the “medical home.”

Timeline – by October 2008, the workgroups are asked to present 20+ measures and their sources to the Data Consortium, for consideration/approval. These will be presented to the KHPA board the following month. January 2009 is targeted for report implementation.

Data Analytic Interface update – Since the last meeting, CMS and CITO have given approval, pre-JAD sessions have begun, and final negotiations with the selected vendor have been completed. Contract signing is expected in the next few days.

Demographic Stratification - Dr. Mavoori and Dr. Allison presented proposed groupings for age, race/ethnicity, income, geographic divisions and other sub-population categories and asked the persons present and the workgroups to consider for future discussion. It was pointed out that standardization may be difficult, given the wide range of data sources and the program variations that dictate some groupings (particularly age). Dr. Allison asked the group to attempt to identify the most commonly used/accepted breakdowns in the available (tier 1) data.

Next Meeting – August 20, 2008 at Landon State Office Building, Conference Room 106, 10:00 am – noon.