The 15th Annual Grandon Lecture: Improving Ambulatory Care Quality

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The results of a March 28, 2006 Gallup poll indicate that the availability and affordability of health care is the number one concern in the U.S., ahead of other weighty issues such as Social Security, future terrorist attacks, the economy, and illegal immigration. The National Committee for Quality Assurance (NCQA), often thought of as the "watchdog" of the managed care industry, strives to improve the quality of health care, thereby increasing health care value, particularly in the ambulatory setting. NCQA is a private, non-profit health care quality oversight organization that measures and reports on health care quality. Best known, perhaps, for its accreditation of health plans using performance data, NCQA is committed to measurement, transparency, and accountability in health care, and includes a number of quality improvement programs such as the Health Employer Data Information Set (HEDIS), the Consumer Assessment of Health Plans Survey (CAHPS), measurement of quality in provider groups, and physician recognition for a variety of conditions..

Improving ambulatory care quality is essential and, in addition to NCQA, organization such as National Quality Forum and the Ambulatory Care Quality Alliance, also take part in the endeavors. On a local front, the Jefferson University Physicians (JUP) Clinical Care Committee (CCC) dedicate its efforts to measuring and improving the quality of care delivered by JUP practices. In its brief existence, the CCC has made significant

advances in improving the quality of care for Jefferson's patients. This work helped to make the 2006Grandon Lecture so pivotal.

The Department of Health Policy felt honored to host Margaret E. O'Kane as the speaker for the 15th Annual Dr. Raymond C. Grandon Lecture. Ms, O'Kane, President and Founder of NCQA, is nationally recognized as one of the most prominent leaders in health care as evidenced by numerous awards. Most notably, Ms. O'Kane was named one of Modern Healthcare's "Top 25 Women in Health Care in 2005," and she has previously been voted one of the nation's "100 Most Powerful People in Health Care." .

In what proved to be a highly informative and stimulating talk, entitled "Improving Ambulatory Quality and an Integrated Value Strategy," Ms. O'Kane addressed critical issues such as expanding measurement, transparency, and accountability in health care and she offered a seven-item value agenda for the future of health care. Ms. O'Kane affirms that "we can't improve what we don't measure," "quality data must be translated into understandable, actionable reports for consumers and purchasers," and that "once we can measure we can hold everyone accountable for improvement."

In the seven-item value agenda, Ms. O'Kane urges us to:

1. Engage and activate patients with information about care options,
2. Push prevention,
3. Get serious about patient safety,
4. Focus on chronic care,

5. Renew the emphasis on primary care,
6. Stop paying for overuse of care; and
7. Reduce geographic disparities in health spending.

Ms. O'Kane speculates that if we don't implement a value strategy, the number of uninsured and underinsured will continue to rise, doctors and hospitals will come under enormous pressure to cut costs or face draconian limits, and we will see further restrictions on capital for new devices and services. In other words, if we do not take charge our health insurance system might fall to pieces.

In addition to the keynote speech, a reactor panel including Jefferson's Judith Bachman, Abigail Wolf, MD, and Pauline Park, MD, as well as Etienne Phipps, PhD, of the Einstein Center for Urban Health Policy and Research, provided a broad range of perspectives on the topic of ambulatory care quality. Ms. Bachman, Senior Vice President of TJU, asserted that providers generally do not get reimbursed on preventive medicine, such as weight management, creating a challenge in fulfilling item two of the value agenda. Dr. Wolf, Director of Medical Student Education in JMC's Department of OB/GYN, raised concerns about potentially adverse effects of quality improvement initiatives. She stated that focusing on indicators and measures of quality that health insurance companies deem important may cause providers to neglect other important services that may not be sufficiently reimbursed. Dr. Park, Assistant Professor in the Department of Surgery, stressed that addressing issues important to patients, such as discussing the value of mammograms or engaging in conversations about having a new

child, may be deemphasized in the quality improvement world since these types of activities are not included in measurement sets, nor are they billable by providers. Dr. Phipps reinforced that we need to come to a consensus about what is in the best interest of the patients and we need to consider what we are not doing and why we are not doing it, rather than emphasizing solely on what were are currently doing.

To view Margaret O'Kane's lecture slides, please visit The Department of Health Policy's homepage: www.jefferson.edu/dhp. Additional information about NCQA can be found at: www.ncqa.org.