

Atlas



California Regional Health Care Cost & Quality Atlas

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The Integrated Healthcare Association (IHA)- a 501(c)6, NFP founded in 1994- advancing integrated care



IHA's Align. Measure. Perform. (AMP) & Atlas



AMP

- **Measures:** 50 highly aligned measures of clinical quality, utilization, total cost of care
- **Who's Included:** Commercial HMO, commercial ACO, Medicare Advantage, Managed Medicare
- **What's Viewable:** physician organization level performance

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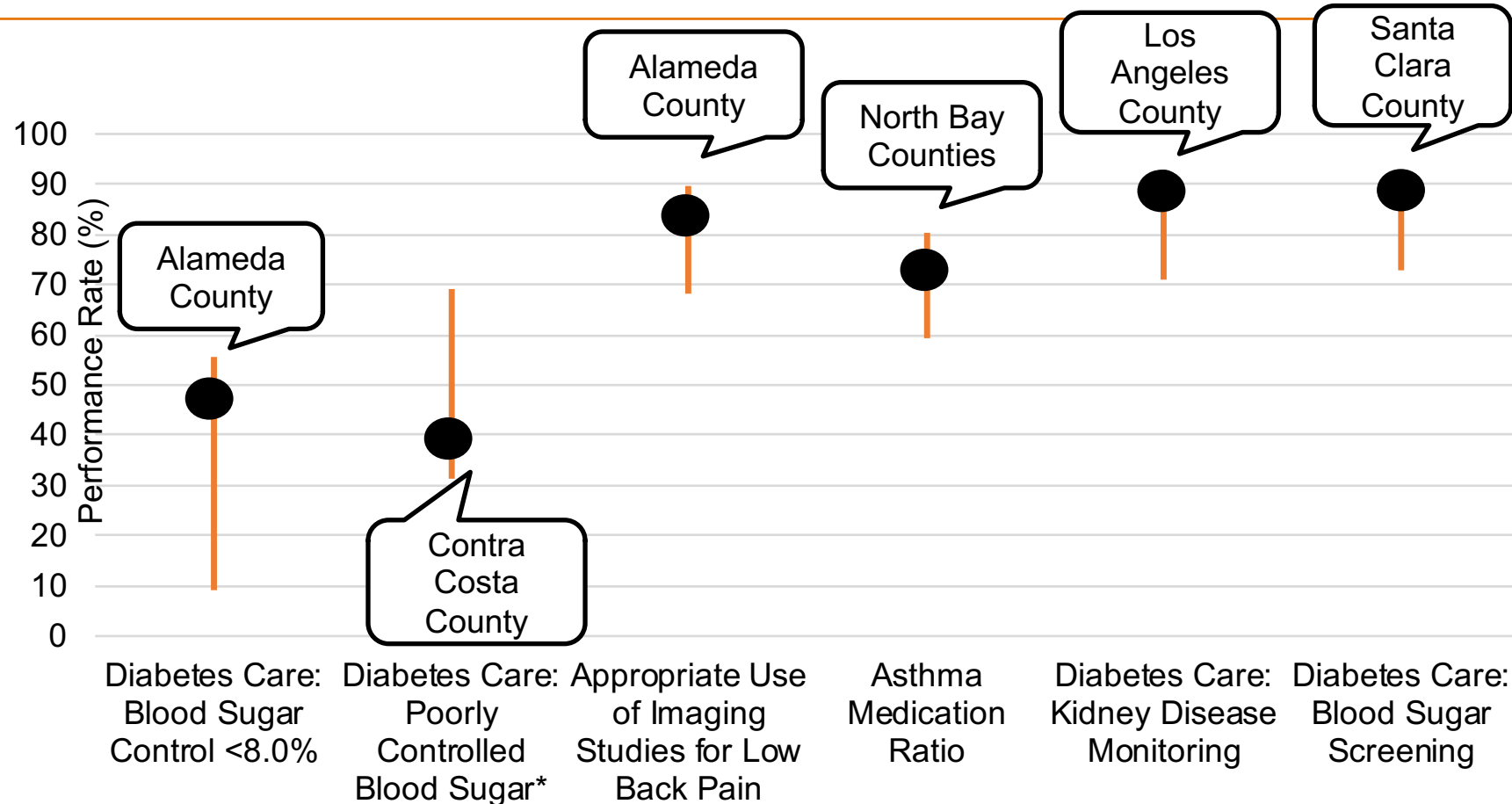
- **Measures:** Over two dozen standardized measures of clinical quality, utilization, total cost of care
- **Who's Included:** 29 million Californians inclusive of commercial HMO, PPO, Medicare FFS, Medicare Advantage and Medi-Cal
- **What's Viewable:** geographic and product line performance information

Built on a single data platform with standardization throughout

Key Takeaways from Atlas and AMP Analysis

- There is wide variation in quality and cost in California that is persistent over time regardless of health plan product or provider delivery model
 - Northern California and urban areas generally perform better on quality
 - Southern California generally performs better on cost
 - Less variation in Medi-Cal; comparability to commercial and MA is limited
- Health plan products that use integrated networks show superior cost and quality overall and much lower patient cost sharing
- Financial risk sharing (capitation) between plans and providers tracks to higher quality and lower costs—the more capitation, the better the performance
 - Accountable Care Organizations (“ACOs”) have variable cost and quality performance but are superior to non-integrated care networks
- Lack of Medi-Cal data limits Atlas’ ability to do comparable analysis

Chronic Care Management - Wide Variation* - same pattern for preventive health screenings



*commercial enrollees

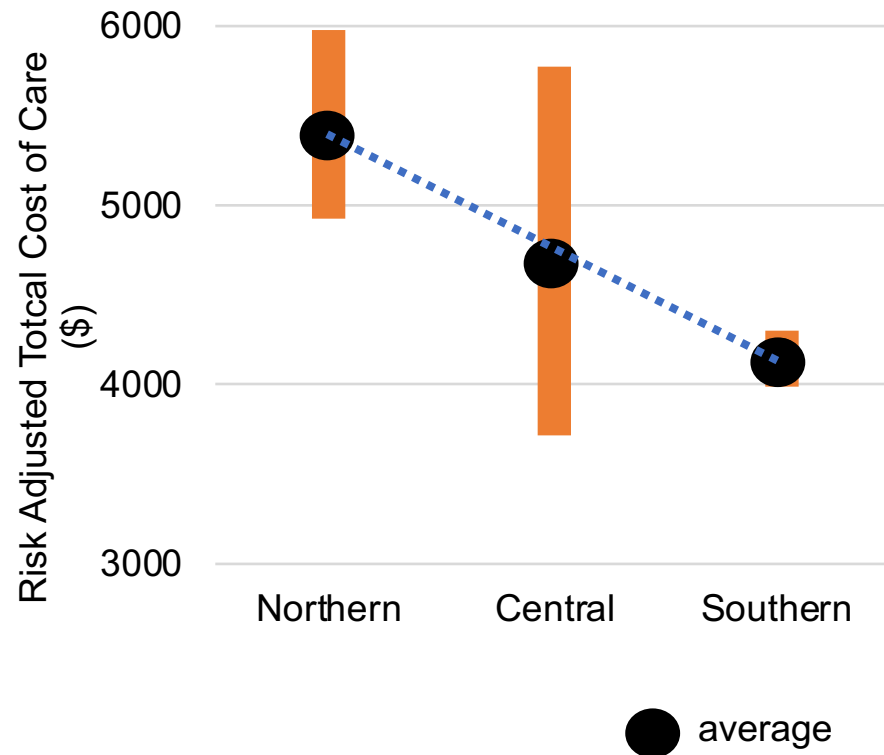
● State Average

* Lower is Better

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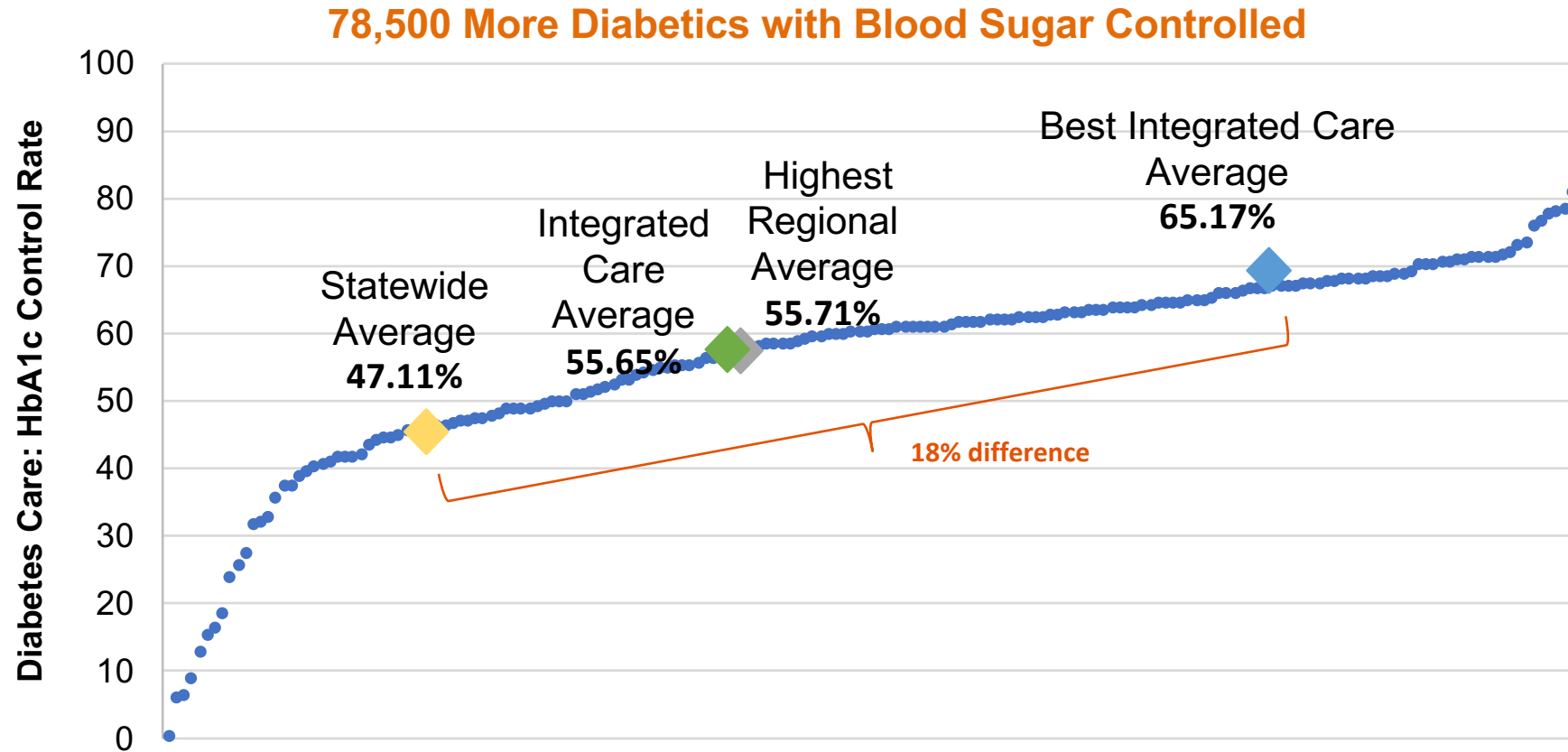


Wide Variation in Cost within and between CA Regions* - available at the county or Covered CA regional level



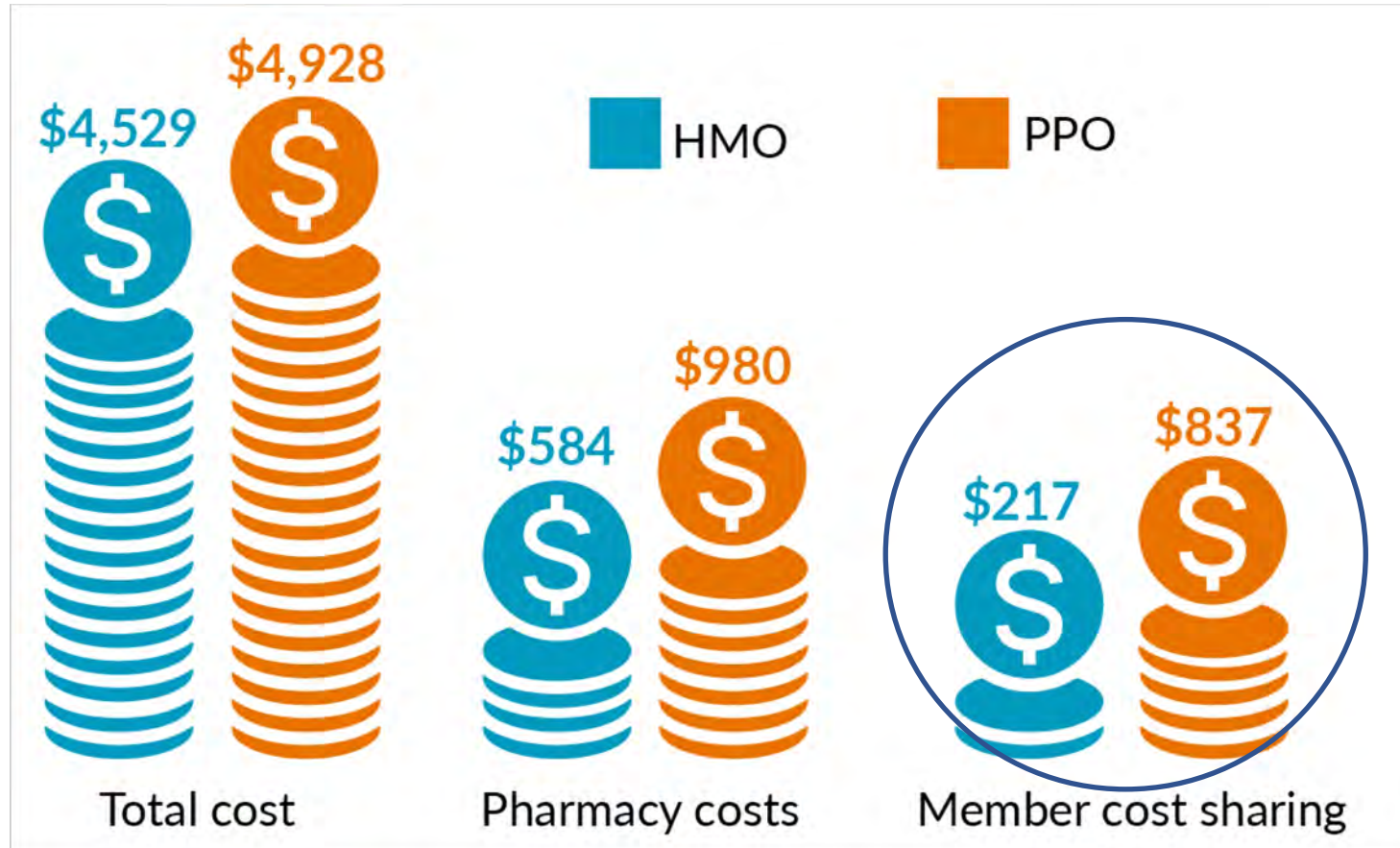
*commercial enrollees

The Delivery Model Matters - Integrated Care Outperforms (typically HMO)*

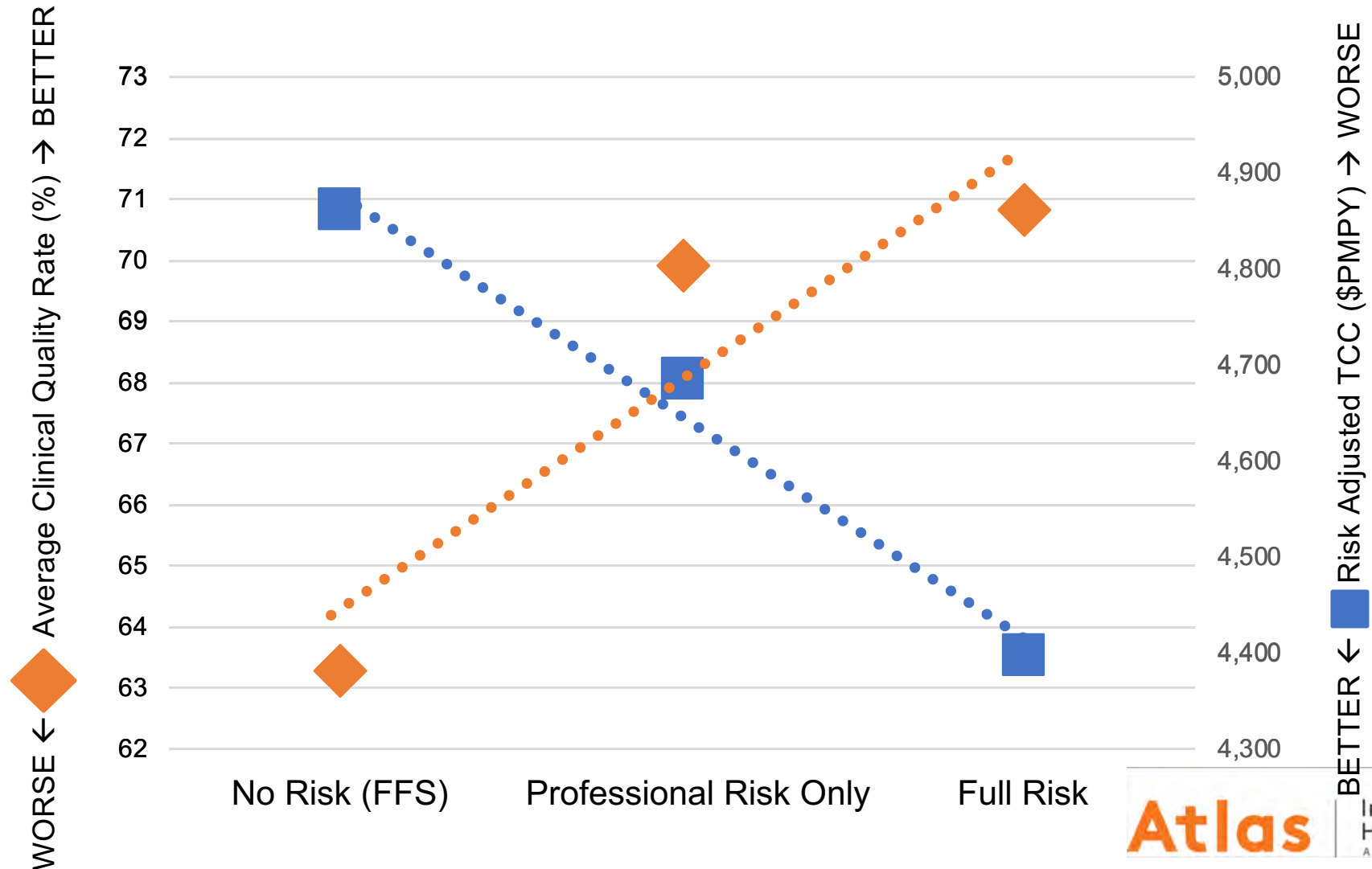


*commercial enrollees

Commercial Cost Breakdowns



Another View - Degree of Financial Risk Sharing Impact on Quality & Cost*



*commercial enrollees

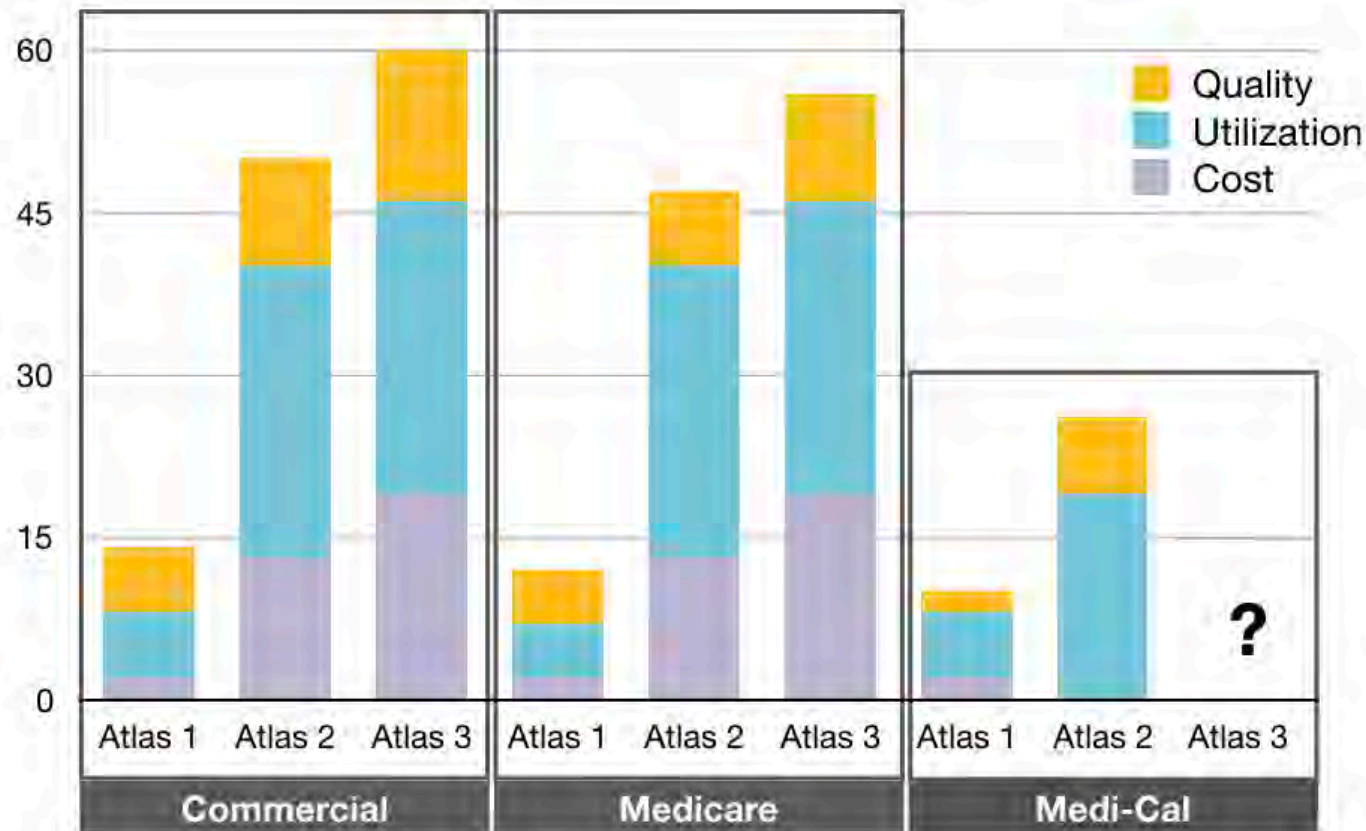
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Medi-Cal Measurement - an Atlas Outlier Now



Measurement Data Submitted Across Product Lines



What Would High Value Care in California Deliver?

If care for all commercially insured Californians were provided at the same quality as the top-performing region:



205,000 more people would have been screened for colorectal cancer



30,500 more women would have been screened for breast cancer

If care were provided at the same cost as currently high-quality, low-cost region:



overall cost of care would decrease by an estimated \$6.2 billion annually, a >10% decrease

Atlas 3 will be released in early April, then annually going forward

Possible Actions*

- Focus investments on geographies and conditions in most need of improvement
- Help define a uniform and practical definition of “value”
- Support higher value care through plan designs and provider networks
- Preferentially support integrated care models and financial risk sharing between plans and providers
- Drive full inclusion of Medi-Cal data into the Atlas program

*more complete list provided as a handout

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Healthcare
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Questions?

