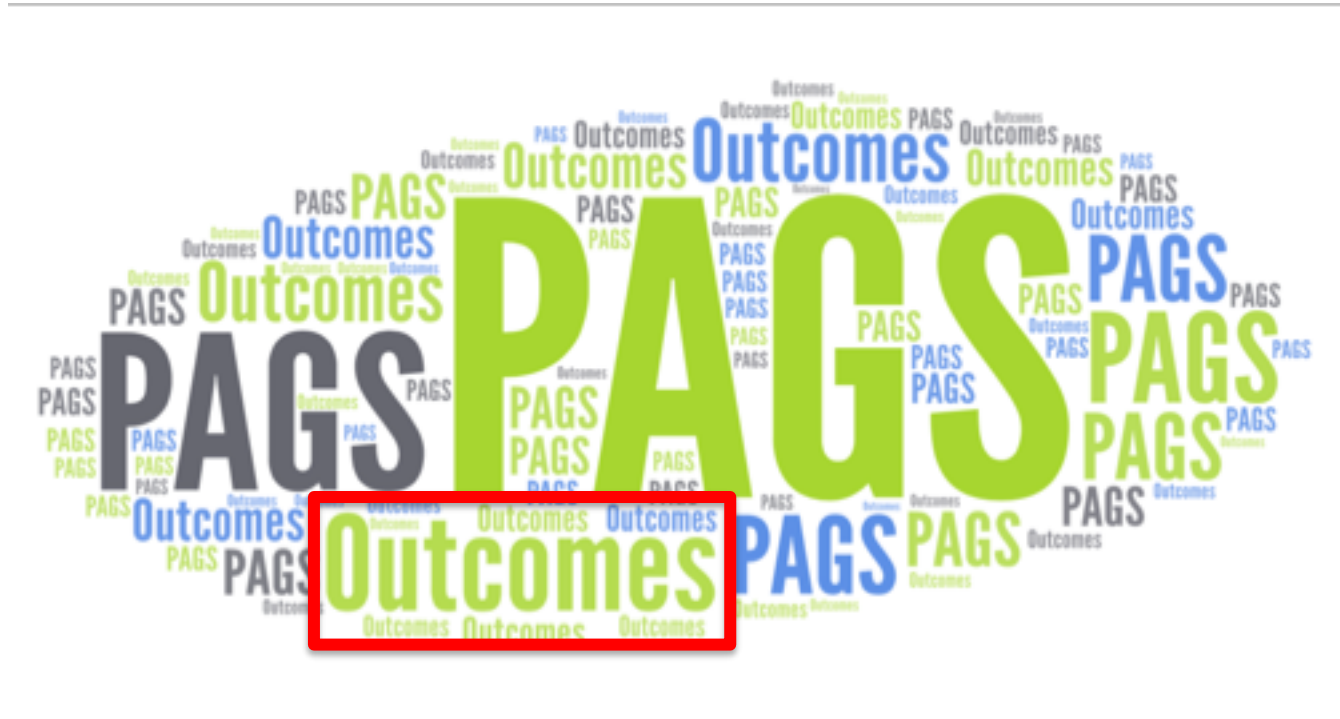


From Volume to Value Outcomes Measurements



Can You Select the Quality Apples?



Objectives

- Show the formula for measuring value
- Describe why value is important metric to record
- Discuss the tools and methods to produce valid information
- How to get started

Why Is U.S. HC So expensive?

Aging of our population

Administrative costs

Threat of malpractice-defensive medicine

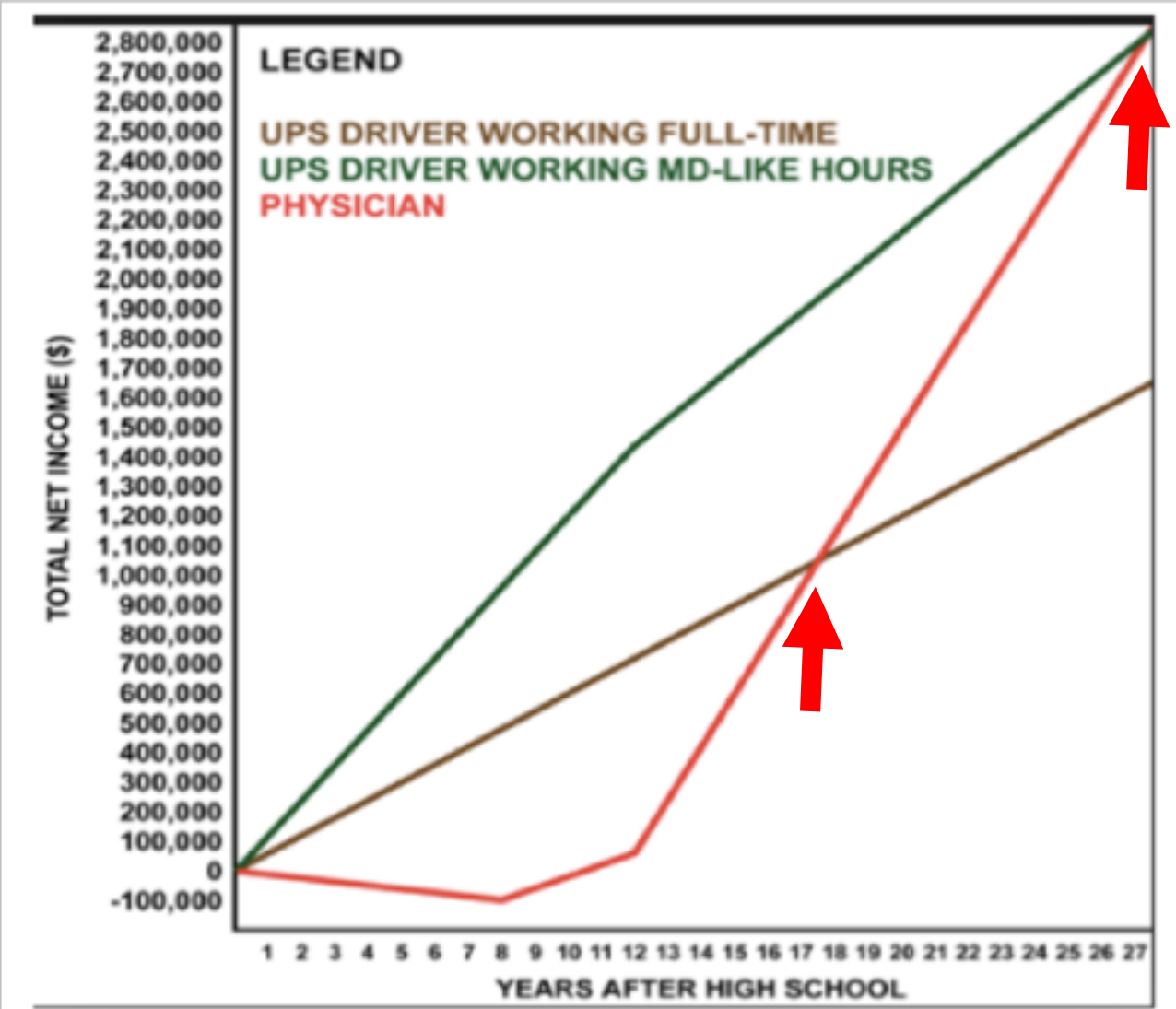
Waiting lists

Increase in chronic diseases (obesity)

Cost of technology and medications

P.S. It is *not* the fees of the doctors!

Salaries of UPS Driver vs. Doctor



Ref: http://www.er-doctor.com/doctor_income.html

Definition of Value

Value = outcomes\cost



New, Modern, Real Definition of Value

Value = health outcomes *that matter to the patient* \ cost



New Paradigm

- From volume to value
- Value will be rewarded



One More Reason to Conduct OCM

Your income will depend upon it!

HHS will tie 90% of all Medicare fee-for-service payments to *value* next year



Yesterdays Outcome Measurement

- Survival
- Morbidity (complications)
- LOS
- Readmission rate
- Radiographic and lab results



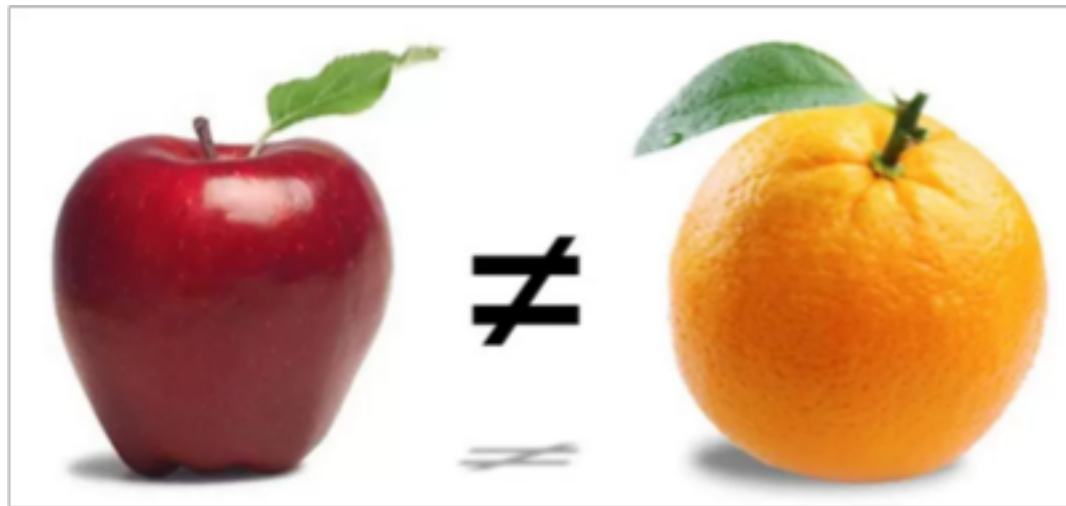
OCM—The New Paradigm

- *Patient satisfaction-pts. with a positive experience have better clinical quality*
- Functional status
- Quality of life issues
- **Must** reflect *what is important to patients*



Challenges of Outcome Measurement: Co-Morbid Conditions

- Indicators of risk: age, patient medications, laboratory data
- Must adjust data to consider risk factors
- Compare apples to apples



Getting Started

- Start with high volume diseases or conditions
- Look at cost (*\$s and* lost productivity)
- Conditions that are well-defined and have quantifiable measures: LapHys, VH, SUI surgery, cervical biopsies, Hysteroscopy, D & C

Measuring Patient Experience

- How long did patients wait before being seen?
- Did doctor answer patient's questions using easy to understand language?
- Did someone in the office follow up on test results and imaging studies?



Example From The Restroom at Atlanta Airport



Another Nice Example

The logo for Tulane Institute of Sports Medicine, featuring the word "Tulane" in a large serif font, "INSTITUTE OF" in a smaller sans-serif font below it, and "Sports Medicine" in a serif font at the bottom, with a stylized figure icon to the left.

**WE WANT
TO HEAR
FROM YOU!**

A large, black and white QR code located on the right side of the sign, intended for scanning with a mobile device.

Please use your mobile device's camera to scan the QR code to access our patient satisfaction survey.

How Are OC Measures Developed?

- Begin with evidence base
- Begins with clinical research that links OC with improved patient health
- Use guidelines-a suggested treatment for certain patients, illnesses, or clinical circumstances
- ACOG has guidelines considered standards of care

Satisfaction With Surgical Outcome After Hysterectomy

- Overall improvement in QOL
- Vaginal bleeding
- Pain relief-pelvic pain, back pain
- Relief of urinary symptoms
- Ability to do ADL
- Ability to do recreational activities
- Resume sexual activities
- Complications-fistula, ureteral\bowel injury

Adjusting For Risk

- Risk factors: DM, CRF, BMI, cardiac status, CBC, total protein, COPD
- Psychological factors
- Patient's compliance
- Smoking history



Bottom Line

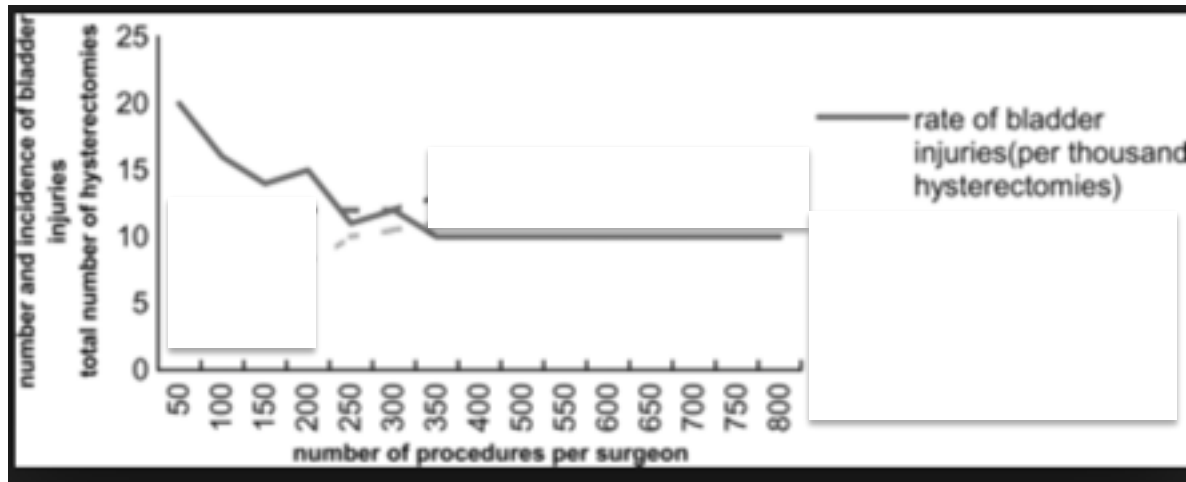
Benefit of OCM is to inform and stimulate continuous practice improvements



Where does the data come from?

- Brief questionnaires
- Longer questionnaires with interviews
- Postal\telephone
- Coding data
- **EMR**

Complications After Hysterectomy



THM: More experienced surgeons have fewer complications

The Role of Patient Satisfaction

- Patient Satisfaction → Improved Quality
- Enhanced Quality → Better Outcomes



Current Outcome Measurement

- At present OCM are rare or nonexistent
- (Scandinavian countries have national quality registries)
- Currently in U.S. - Mandated OCM for transplantation, IVF, dialysis
- At present OCM focused on only immediate results

1st Conclusion

- OCM is possible, practical and economically feasible
- OCM identify major variations in care
- Risk adjustment *must be implemented* into OCM
- Goal: outcome improvement and reducing variation

2nd Conclusion

- OCM is single most important tool to promote innovation in the delivery of HC
- Every gynecologist should start with the conditions they treat and then track progress against past performance

3rd Conclusion \ Summary

- Hopefully you have seen how to identify OC for common gynecologic conditions
- OCM will soon become mandatory for every doctor and hospital
- Result is to shift focus from short-term cost reduction to long-term value improvement

Take Home Message

The purpose of OCM is to improve care and *not* to keep score!



Final, Final, Final Word

- We hope you have received a few ideas that you can use in your practice
- Let us hear from you if you have questions or request any additional information
- doctorwhiz@gmail.com
- rking@vanguardcommunications.net