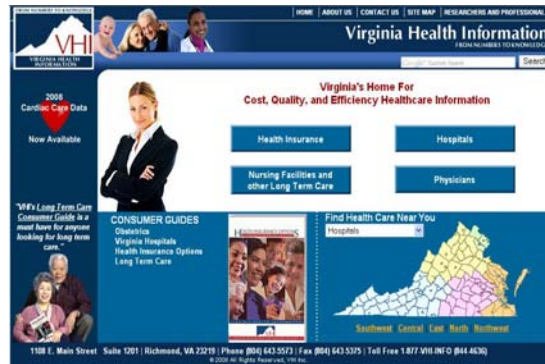# Virginia Health Information

2008 Annual Report

New Initiatives and Programs

Michael Lundberg
Executive Director

September 4, 2008

Virginia Health Information

- Formed in 1993 as a public/private partnership
- Virginia's state-recognized entity to collect, analyze and disseminate Virginia health care data
- Contracts with State Health Commissioner, DMV, DMHMRSAS, private contracts sales and services

Health Data for Varied Needs

- **Hospital Discharge Data**: 870,000 discharges per year from 90+ hospitals
- **EPICS**: financial and operational information from 370+ ambulatory surgical centers, hospitals and nursing homes
- **Outpatient Surgical Data**: for 7 procedure groups from ambulatory surgery centers, hospitals and physicians
- **HMO Data:** from State Corporation Commission and National Committee on Quality Assurance
- **Long-term care:** adult day care, assisted living, CCRCs, home care and nursing facilities
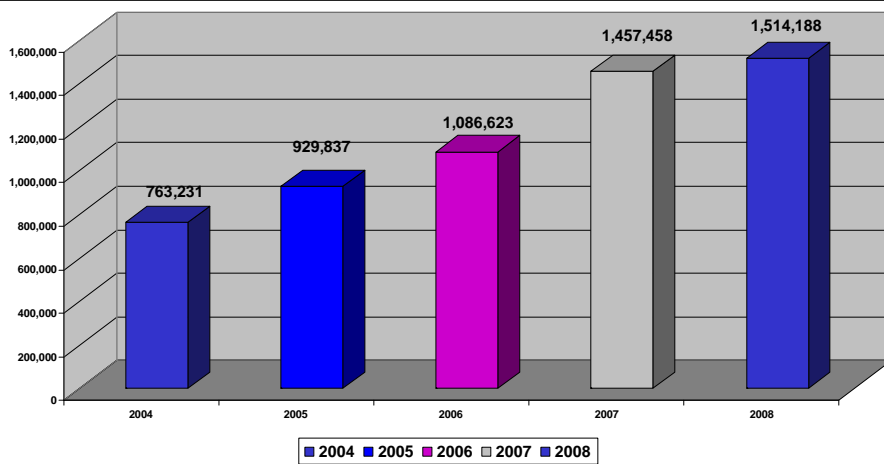- Hospital and other facility **licensure data**
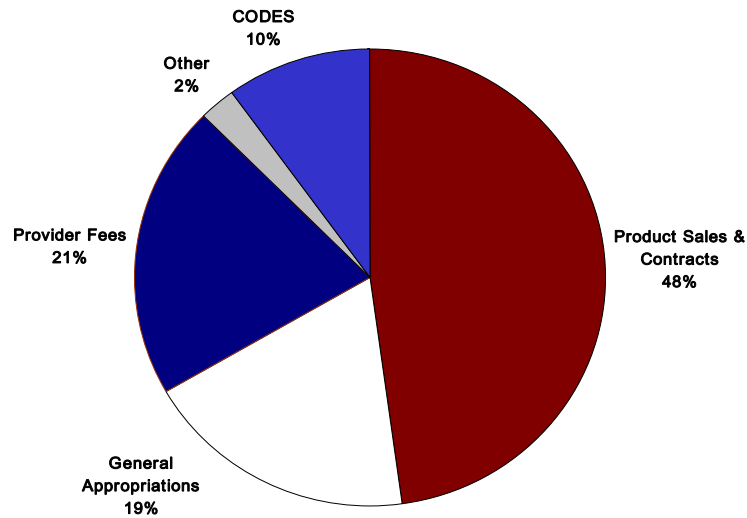
VHI Publications
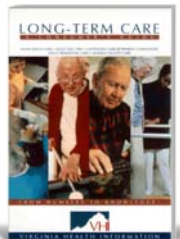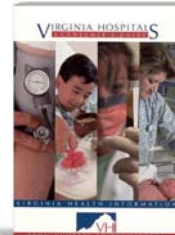
Cardiac Care Reports

Databases/Reports on:
Hospitals,
Nursing Facilities
Assisted Living, CCRCs
Outpatient Surgery
HMOs, Physicians
Certificate of Need Data

VHI Revenues FY2004 - FY2008
Driven by Diversification

FY 2008 Revenues

CODES
10%

Other
2%

Provider Fees
21%

Product Sales &
Contracts
48%

General
Appropriations
19%

New Initiatives

- Consumer Healthcare Pricing Transparency 2008 Legislation HB603/SB396
- Psychiatric Bed Registry
- Adding Clinical Data to Administrative Data – Hybrid Data
- Health Information Portal **www.vhi.org**

Consumer Healthcare Pricing Transparency 2008 Legislation

HB 603 2008 603-O'Bannon & SB 396-Edwards

- Purpose—provide consumers information on average reimbursement amounts for certain health care services
- State Health Commissioner to contract with nonprofit-VHI for an annual survey of (health insurance) carriers
- Carriers to report average $$ paid for a minimum of 25 most frequently reported health care services from hospitals (inpatient, outpatient, physician offices)
- Information will be publicly available at **www.vhi.org**
- Will not identify carriers
- Stakeholders—Anthem, MSV, Southern Health, VAHP, VHHA, VHI work to include existing service quality data and guidance to the price information - in the future, seek to include price/quality information for episodes of care

Actions to Date

- Transparency Workgroup active since April
- Studied available data from local, state and federal sources on top/frequently occurring health care services in
  - Ambulatory Surgery Centers
  - Hospitals
    - inpatient and outpatient services
  - Physician offices
- Workgroup recommendations endorsed by VHI Board and approved by State Health Commissioner

Initial List Covers
Major Types and Places of Care

- Preventive Health (4)
- Emergency Department Visits (2)
- Radiology/other (6)
- CT of Abdomen (1)
- MRI (2)
- Surgical Procedures (12)
- Maternity (3)

Still to Come

- Develop detailed specifications with carrier input
- Establish timeframe/timeline for submission
- Accept, review data with workgroup for format and detail
- Develop web-based report(s) for consumers
- Publish
- Measure use, obtain feedback, revise

Psychiatric Bed Registry
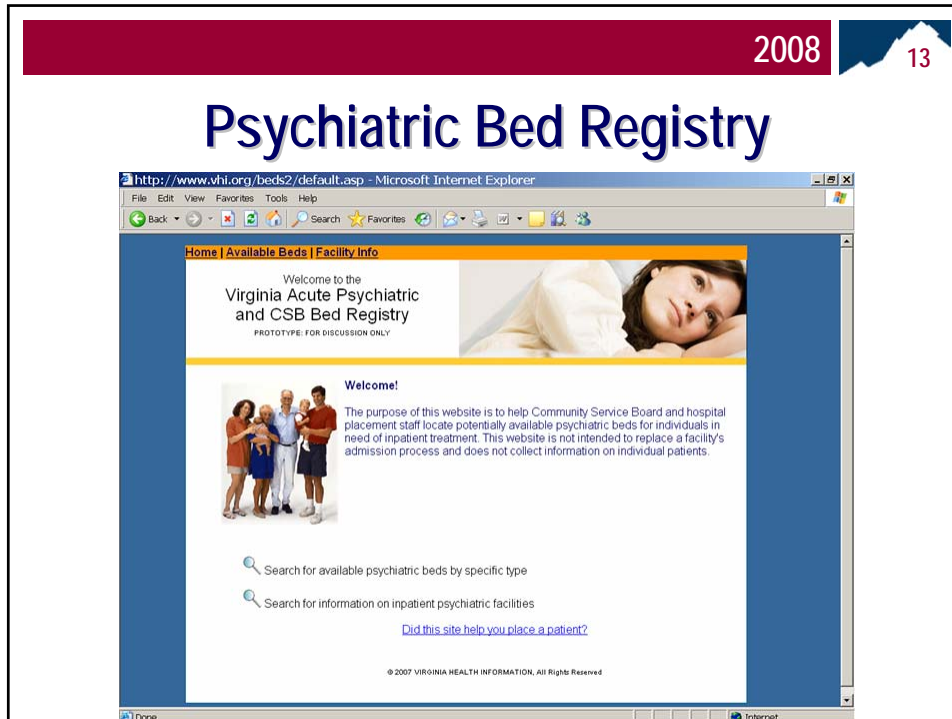
Psych Bed Registry

- **Current Status**
  - January 2008—VHI signed contract with DMHMRSAS w/workplan
  - May 20, 2008—Task Force established and met; 30-day website review and comment period
  - June 03, 2008—Comments suggestions received
  - August 6, 2008--Sent DMHMRSAS comments/suggestions for sign off and further web programming for finalization
- **Next Steps**
  - Incorporate/test approved revisions
  - Task Force meeting to finalize/approve draft site
  - Bed census and Beta testing
  - Release and Training
  - Tracking and Reports on use and success in placement

Adding Clinical Data to Administrative Data Pilot States

Adding Clinical Data to Administrative Data AHRQ/VHI Contract

- The Agency for Healthcare Research and Quality (AHRQ) sponsored research demonstrating that adding selected clinical data to administrative data improves ability to predict outcomes that rivals medical record abstraction at a fraction of the cost

- AHRQ offered a competitive RFP to 38 eligible states to demonstrate proof of concept by merging administrative and clinical data into "hybrid" dataset

Why is This Important?

- Government and private insurance carriers moving to stop paying more for certain hospital acquired conditions

- Creation of a hybrid hospital data set can improve the ability to measure differences in patient outcomes for

  - ✓ Public reporting
  - ✓ Quality improvement
  - ✓ Health services research

- Pilot allows feasibility testing of concepts without legislative mandate

AHRQ VHI Contract Objectives

- **Establish the feasibility of linking clinical (laboratory and POA values) with administrative (hospital discharge) data** for the purposes of quality improvement, quality reporting, research and public health

- **Develop a reproducible approach for joining clinical and administrative data** that can be adopted by other statewide organizations to enable improved quality measurement in the short-term

- **Set the stage** for integrating clinical and administrative data streams in the future

Virginia Health Information
Adding Clinical Data to Administrative Data
An Overview
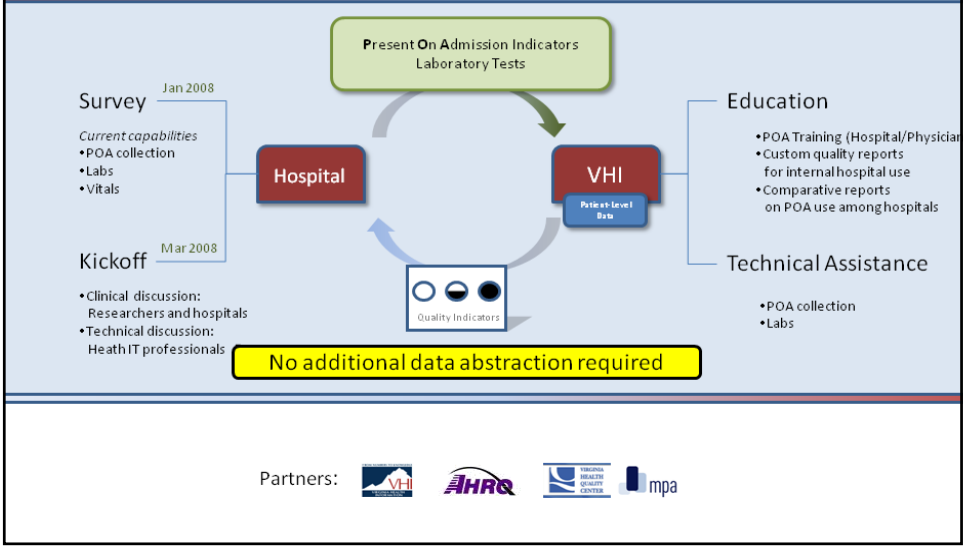
"Adding Clinical Data to Administrative Data" Status Map

Planned Use of Information

Integrate Lab and POA values with hospital discharge data

Researchers will work with VHI, hospitals and data to determine:

- How much the *Hybrid Dataset* helps in predicting patient outcomes
  - For VHI Cardiac Care Mortality and Readmission reporting
  - For other quality and patient safety indicators
  - For hospital internal quality improvement

Virginia's Health Information Portal

Stakeholders—Focus on consumers and act as a *portal* to health information from other sources including:

- Medicare for hospital, nursing facility, home health information
- Health plans' websites
- Hospitals
- Other

    Recommended by the *Governor's Health Reform Commission*

VHI Actions

- **Contracted for Consumer Focus Groups to:**
  - Review www.vhi.org and make recommendations for change
- **Evaluation by Virginia Electronic Commerce Technology Center (VECTEC) at CNU for:**
  - Usability, navigation, accessibility and
  - Draft prototype of redesign
- **Incorporated Focus Group and VECTEC recommendations into new website**

Health Information Portal www.vhi.org

Still to Come

- Integrate Outpatient Data
- Add CMS hospital consumer satisfaction and nursing facility quality information
- Add new obstetric information on hospitals and physicians
- 1 FTE planned for ongoing revisions and updates
- More consumer focus groups

Closing Thoughts

- VHI benefits from diverse Board composition, relationships with stakeholders and legislature
- Funding diversity helps VHI respond to changing healthcare environment
- New initiatives reflect changing needs of businesses, consumers and policymakers
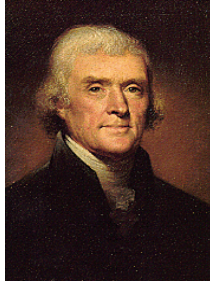
"Without health there is no happiness. An attention to health, then should take place of every other object."

Thomas Jefferson, 1787