Evaluasi Mutu Pelayanan Kesehatan dalam Managed Care

Evaluating Quality of Healthcare Providers in Managed Care
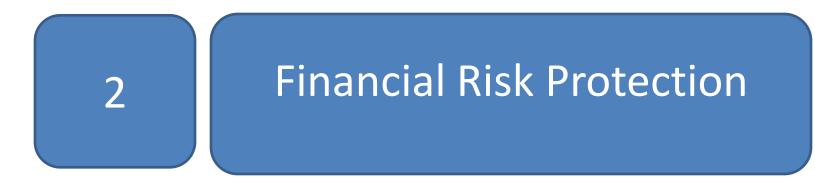
Pokok bahasan

- Review indikator-indikator yang digunakan di negara lain
- Bagaimana dengan indikator-indikator mutu untuk BPJS ?

Universal Health Coverage (WHO)

- All people obtain the health services they need without the risk of severe financial problems linked to paying for them.

- At the same time, the health services people receive need to be of good quality.

Two critical points:

1	Access → Coverage (health promotion, prevention, treatment)
2	Financial Risk Protection

World Health Organization

- Measuring progress towards Universal Coverage:
  - Health Service **Coverage** associated with the MDG Targets
  - Health **Outcomes** associated with the MDG Targets
  - **Financial Risk protection** Indicators
  - Selected Health System Determinants of Health Service **Coverage**

Prevention Quality Indicators AHRQ

- Measuring Performance in Medicaid Managed Care:
  - AHRQ Prevention Quality Indicators → Hospital Discharges for Ambulatory Care Sensitive Conditions:
    - Chronic conditions: uncontrolled diabetes without complication, short-term diabetes complications, long-term diabetes complication, CHF, Hypertension, Angina without a procedure, asthma, COPD
    - Acute conditions: bacterial pneumonia, urinary tract infection, ruptured appendix, pelvic inflamatory disesase, gastroenteritis (pediatric)
  - Hospitalization may have been preventable with better outpatient care

Agency for Healthcare Research and Quality (AHRQ) Indicators

- Inpatient Quality Indicators (IQIs): 32 indicators

- Patient Safety Indicators (PSIs): 27 indicators

- Prevention Quality Indicators (PQIs): 14 indicators for ambulatory care sensitive conditions

- Pediatric Quality Indicators (PDIs): 18 indicators

Medicare & Medicaid in USA

- Requires an independent organization to review states Medicaid Health Plan: External Quality Review Organization (EQRO) → Michigan Peer Review Organization for New Jersey
- Indicators:
  - HEDIS (Healthcare Effectiveness Data and Information Set Performance Measures) developed by National Committee for Quality Assurance (NCQA): 75 measures across 8 domains
  - CAHPS (Consumer Assessment of Healthcare Providers and System Performance Measures: members satisfaction surveys (mail and phone)

Kaiser Permanente Evaluation (San Diego, 2009)

- Annual review by Health Service Advisory Group (HSAG), an EQRQ, using:
  - HEDIS
  - CAHPS

Examples of indicators (from HEDIS) used by MPRO New Jersey (2009)

- Childhood Immunization Status
- Well-Child visits
- Adolescents Well-Care visits
- Lead Screening in Children
- Prenatal and Postpartum Care
- Breast Cancer Screening
- Cervical Cancer Screening
- Use of Appropriate Medication for People with Asthma
- Comprehensive Diabetes Care

Examples of indicators used from HEDIS in Nevada (2010)

- Breast Cancer Screening
- Cervical Cancer Screening
- Childhood Immunization Status
- Comprehensive Diabetes Care – HbA1c Testing
- Emergency Department Visits
- Adults' Access to Preventive/Ambulatory Health Services
- Children and Adolescents' Access to Primary Care Practitioners

HEDIS Indicator (2013)

- Avoidance of antibiotic treatment in adults with acute bronchitis
- Adolescent well care visits
- Children and adolescent's access to primary care practitioners
- Cervical Cancer screening
- Comprehensive diabetes care
- Childhood immunization status
- Immunization for adolescents
- Use of imaging studies for low back pain
- Medication management for people with asthma
- Annual monitoring for patients on persistent medication

- Prenatal and postpartum care
- Well child visits in the third, fourth, fifth, and sixth years of life
- Weight assessment and counseling for nutrition and physical activity for children and adolescents
- Adults' access to preventive/ambulatory health services
- Adult BMI Assessment
- Antidepressant medication management
- Disease-modifying anti rehumatic drug therapy for RA

- Use of appropriate medication for people with asthma
- Breast cancer screening
- Controlling high blood pressure
- Chlamydia screening for women
- Cholesterol management for patient with cardiovascular conditions
- Care for older adults
- Colorectal cancer screening
- Appropriate testing for children with pharyngitis
- Use of High risk medication in the elderly

- Potentially harmful drug disease interaction in the elderly
- Follow up after hospitalization for mental illness
- Glaucoma screening in older adults
- Lead screening in children
- Medication reconciliation post discharge
- Osteoporosis management in women who had a fracture
- Persistence of beta blocker treatment after a heart attack

- Pharmacotherapy management of COPD exacerbation
- Use of spirometry testing in the assessment and diagnosis of COPD
- Appropriate treatment for children with upper respiratory infection
- Well-child visits in the first 15 months of life

Specific measures from CAHPS used by MPRO

- Overall rating of healthcare
- Getting needed care quickly
- Overall rating of personal doctor
- Overall rating of specialist
- Rating of Customer Service Responsiveness
- Dental visits in last 6 months
- Overall rating of dental care
- Coordination of Care from other health providers
- Ease of getting mental health treatment or counseling
- Overall rating of mental health care
- Number of emergency room visits to get health care

Center for Medicare & Medicaid Service (USA)

- **Complication** measures for total hip arthroplasty and total knee arthroplasty
- 30-day **readmission** measures for THA and TKA
- 30-day risk-standardized **mortality** measures for AMI, HF, Pneumonia
- 30-day risk-standardized **readmission** for COPD
- 30-day risk-standardized **mortality** for COPD
- 30-day risk-standardized **readmission** for Stroke
- 30-day risk-standardized **mortality** for Stroke

Future measures (Center for Medicare & Medicaid Service)

- **Outcome measures**: look at the morbidity and mortality arising from a disease.
- **Resource use measures**: look at the utilization patterns of specific providers by either measuring the use or overuse of a particular test or intervention or by comparing the relative resource use for an episode of care
- Measures focusing on **transitions**: the use of quality measures that foster better transitions and coordination of care in two ways: multiple actors, and behavior of actors

Financial KPIs

- Contracting indicators:
  - profitability, outstanding account receivable, termination notification period, denials as a percent of net revenue, underpayments, self-pay bad debt, average annual losses, etc.

Indicators for insurance provider

- Product value:
  - Incurred expense ratio
  - Incurred claims ratio
  - Net income ratio
- Product awareness and client satisfaction:
  - Renewal ratio
  - Coverage ratio
  - Growth ratio

- Service Quality:
  - Promptness of claims settlements
  - Claims rejection ratio
- Financial prudence:
  - Solvency ratio
  - Liquidity ratio

Bagaimana dengan Pelayanan Kesehatan pada era BPJS di Indonesia ?

Adakah indikator-indikator mutu untuk pelayanan kesehatan

- Puskesmas: Indikator-indikator kinerja program yang dikembangkan dari SPM Dinas Kesehatan

- Rumahsakit: indikator-indikator kinerja pada SPM Rumahsakit

- Perlu dipilih indikator-indikator yang dapat menilai terutama: akses/coverage dan proxy indicator yang dapat digunakan untuk menilai mutu (& safety) layanan yang diberikan

Stakeholders's indicators

Stakeholders	Economic indicators	Quality/Safety indicators	Access indicators
Community			
Healthcare provider			
Insurance provider			
Individual members (PBI)			
Individual members (Non-PBI)			
Clinical/Professional providers			
Regulator			

Siapa yang akan melakukan evaluasi ?

- Lembaga independen ?
- Lembaga akreditasi ?
- BPJS ?
- Penyedia Pelayanan Kesehatan ?
- Pemerintah ?

Bagaimana metoda evaluasi ?

- Self evaluation ?

- External evaluation ?

- Reports vs site visits ?

Kesimpulan

- Perlu dipilih/disusun indikator-indikator untuk masing-masing stakeholders
- Perlu adanya kejelasan tujuan evaluasi untuk masing-masing stakeholders
- Siapa yang akan melakukan evaluasi ?
- Mekanisme/metoda evaluasi ?
- Reporting hasil evaluasi kepada siapa?

Terimakasih