

2021 Partners in Excellence

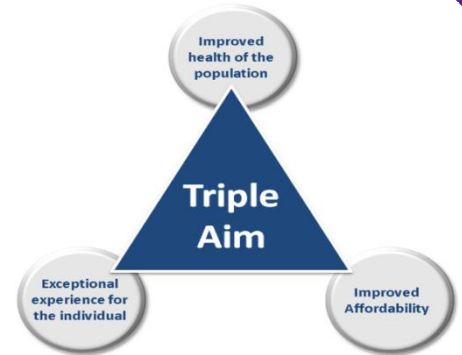
Executive Overview, Targets, and Methodology

Overview

The Partners in Excellence program forms the basis for HealthPartners' financial and public recognition for medical or specialty groups achieving high levels of performance on the Triple Aim of exceptional clinical quality, patient experience, and affordable care.

Our goal is to recognize and reward groups who deliver on the Triple Aim: To improve health while improving the affordability and consumer experience of health care.

Financial rewards are based on medical or specialty group performance as measured by HealthPartners using Minnesota Community Measurement and HealthPartners developed and reported measures.



2021 – Quality Dimensions: *Health & Patient Experience*

For the 2021 Partners in Excellence program, the focus continues to be on recognizing performance across meaningful quality clusters within the quality dimensions of health and patient experience. Each quality cluster consists of several individual quality measures that are assigned points based on a target performance that is then translated into a star rating for that quality cluster overall.

This method balances a group's performance across a spectrum of care and rewards for consistent top performance in each dimension.

- The Health & Patient Experience Quality Dimensions consist of measures that have been grouped into categories of care specific for primary care, pediatric and specialty groups.
- These categories are called *Quality Clusters*.
- *Target ranges* are set for each measure in the quality cluster.
- *Performance levels* are determined to be *Above, At, or Below target* for each measure.
- The points assigned to each measure's performance result are summed and divided by total points available for that quality cluster.
- *One to Four Stars* are assigned to the overall quality cluster based on the percent of measures in each performance level.
- Silver award level is available when the measures in the cluster achieve 75% of the available points, equating to an overall four-star rating for the cluster.
- Gold award level is available when an overall four-star rating is achieved for the cluster and the group's Total Cost Index is less than 1.0.

The following principles are used in Partner in Excellence program:

- Use measures that are relevant and clear to providers and consumers
- Use measures that are accurate, valid, reliable and obtainable
- Use established measures, those endorsed nationally or generally accepted national or regional standards
- Draw on a range of measures from a variety of sources, where possible, for a robust overall rating methodology
- Apply consistent measurement approaches and use scoring that avoids or minimizes subjectivity
- Disclose the methodology so it is transparent to providers, consumers and employers
- Silver performance recognizes high quality care delivered in the Health or Patient Experience dimension
- Gold performance recognizes high quality care delivered in the Health or Patient Experience dimension and at an affordable total cost.

Quality Performance Evaluation Steps

Quality Dimensions: Health & Experience

Individual measures are grouped into quality clusters for each dimension

Health Dimension Quality Cluster

• Clinical Quality

Patient Experience Dimension Quality Cluster

• Getting timely appointments, care and information; Communication; Helpful, Courteous and Respectful Office Staff; Care Coordination; Provider Rating

Target Assessment

Each individual measure in the quality cluster is assessed as either above, at or below the Target interval.



Target Interval
Above



Target Interval
Within



Target Interval
Below

Value Assignment

A point value is determined based on the target result achieved for each measure within a cluster. In some cases, individual measure point values may be weighted to produce composites within each cluster. For example, the depression care measures are each weighted 1/7th in the clinical quality cluster.



= 1 point



= 0.5 point



= 0 point

Overall Performance Assessment

Total points achieved is divided by the total available points in each quality cluster to determine the overall quality rating.

SILVER LEVEL PERFORMANCE

Four star overall performance when the measures in the cluster have achieved 75% of the available points.

★★★★

GOLD LEVEL PERFORMANCE




When an overall 4-star rating is achieved for that cluster and the clinic's total cost index is less than 1.0







★★★★ AND TCI < 1.0

Individual Measures and Targets




The following individual measures are used in assessing quality cluster performance. Targets are determined by the type of measure:

- Survey measures: Use confidence interval limits around the average of all survey responses.
- Sampled measures: Use confidence interval limits.
- Full population measures: Use the actual rate.




PATIENT EXPERIENCE: Quality Cluster			
	Primary Care		
Measures	Target		
	LCL = Lower Confidence Limit	UCL = Upper Confidence Limit	
	 1.0 PT	 0.5 PT	 0 PT
Getting timely appointments, care and information ²	LCL >= 2.85	LCL < 2.85 AND UCL >= 2.85	UCL < 2.85
Communication ²	LCL >= 2.85	LCL < 2.85 AND UCL >= 2.85	UCL < 2.85
Helpful, Courteous, and Respectful Office Staff ²	LCL >= 2.85	LCL < 2.85 AND UCL >= 2.85	UCL < 2.85
Care Coordination ²	LCL >= 2.75	LCL < 2.75 AND UCL >= 2.75	UCL < 2.75
Provider Rating ²	LCL >= 2.75	LCL < 2.75 AND UCL >= 2.75	UCL < 2.75




HEALTH: Quality Cluster			
Clinical Quality	Primary Care/Pediatrics		
Adult Measures	Target		
	LCL = Lower Confidence Limit	UCL = Upper Confidence Limit	
	 1.0 PT	 0.5 PT	 0 PT
Colorectal Cancer Screening ¹	LCL >= 70%	LCL < 70% AND UCL >= 65%	UCL < 65%
Avoidance of Antibiotics in the Treatment of Adult Bronchitis ¹	LCL >= 80%	LCL < 80% AND UCL >= 80%	UCL < 80%
Preventive OB: Breast Cancer Screening ¹	LCL >= 80%	LCL < 80% AND UCL >= 80%	UCL < 80%
Preventive OB: Cervical Cancer Screening ¹	LCL >= 75%	LCL < 75% AND UCL >= 75%	UCL < 75%
Preventive OB: Chlamydia Screening ¹	LCL >= 55%	LCL < 55% AND UCL >= 55%	UCL < 55%
Controlling High Blood Pressure ¹	LCL >= 75%	LCL < 75% AND UCL >= 75%	UCL < 75%
Depression: PHQ9 Utilization ¹	LCL >= 70%	LCL < 70% AND UCL >= 50%	UCL < 50%
Depression: PHQ9 Follow-up at 6 Months ¹	LCL >= 36%	LCL < 36% AND UCL >= 18%	UCL < 18%
Depression: PHQ9 Follow-up at 12 Months ¹	LCL >= 36%	LCL < 36% AND UCL >= 18%	UCL < 18%
Depression: Response at 6 Months ¹	LCL >= 13%	LCL < 13% AND UCL >= 6.5%	UCL < 6.5%
Depression: Response at 12 Months ¹	LCL >= 13%	LCL < 13% AND UCL >= 6.5%	UCL < 6.5%
Depression: Remission at 6 Months ¹	LCL >= 8%	LCL < 8% AND UCL >= 4%	UCL < 4%
Depression: Remission at 12 Months ¹	LCL >= 8%	LCL < 8% AND UCL >= 4%	UCL < 4%
Optimal Diabetes are ¹	LCL >= 45%	LCL < 45% AND UCL >= 45%	UCL < 45%
Diabetic Eye Exam ¹	LCL >= 60%	LCL < 60% AND UCL >= 60%	UCL < 60%
Optimal Vascular Care ¹	Rate >= 60%	Rate < 60% AND Rate >= 60%	Rate < 60%
Use of Spirometry in Assessment and Diagnosis of COPD ¹	LCL >= 40%	LCL < 40% AND UCL >= 40%	UCL < 40%
Asthma: Optimal Asthma Care Adult ¹	LCL >= 65%	LCL < 65% AND UCL >= 40%	UCL < 40%
Child Measures	 1.0 PT	 0.5 PT	 0 PT
Follow-Up Care for Children Prescribed ADHD Medication ¹	LCL >= 45%	LCL < 45% AND UCL >= 45%	UCL < 45%
Appropriate Treatment for Children with Upper Respiratory Infection ¹	LCL >= 90%	LCL < 90% AND UCL >= 90%	UCL < 90%
Immunizations Children ¹	LCL >= 60%	LCL < 60% AND UCL >= 50%	UCL < 50%
Asthma: Optimal Asthma Care Child ¹	LCL >= 65%	LCL < 65% AND UCL >= 40%	UCL < 40%

Specialty Measures and Targets: Cardiology




PATIENT EXPERIENCE: Quality Cluster			
	Cardiology		
Measures	Target		
	LCL = Lower Confidence Limit	UCL = Upper Confidence Limit	
	 1.0 PT	 0.5 PT	 0 PT
Getting timely appointments, care and information ²	LCL \geq 2.85	LCL < 2.85 AND UCL \geq 2.85	UCL < 2.85
Communication ²	LCL \geq 2.85	LCL < 2.85 AND UCL \geq 2.85	UCL < 2.85
Helpful, Courteous, and Respectful Office Staff ²	LCL \geq 2.85	LCL < 2.85 AND UCL \geq 2.85	UCL < 2.85
Care Coordination ²	LCL \geq 2.75	LCL < 2.75 AND UCL \geq 2.75	UCL < 2.75
Provider Rating ²	LCL \geq 2.75	LCL < 2.75 AND UCL \geq 2.75	UCL < 2.75

Specialty Measures and Targets: Obstetrics & Gynecology




PATIENT EXPERIENCE: Quality Cluster			
	Obstetrics & Gynecology		
Measures	Target		
	LCL = Lower Confidence Limit	UCL = Upper Confidence Limit	
	 1.0 PT	 0.5 PT	 0 PT
Getting timely appointments, care and information ²	LCL \geq 2.85	LCL < 2.85 AND UCL \geq 2.85	UCL < 2.85
Communication ²	LCL \geq 2.85	LCL < 2.85 AND UCL \geq 2.85	UCL < 2.85
Helpful, Courteous, and Respectful Office Staff ²	LCL \geq 2.85	LCL < 2.85 AND UCL \geq 2.85	UCL < 2.85
Care Coordination ²	LCL \geq 2.75	LCL < 2.75 AND UCL \geq 2.75	UCL < 2.75
Provider Rating ²	LCL \geq 2.75	LCL < 2.75 AND UCL \geq 2.75	UCL < 2.75

HEALTH: Quality Cluster			
<i>Clinical Quality</i>	Obstetrics & Gynecology		
Measures	Target		
	LCL = Lower Confidence Limit	UCL = Upper Confidence Limit	
	 1.0 PT	 0.5 PT	 0 PT
Preventive OB: Breast cancer screening ¹	LCL \geq 80%	LCL < 80% AND UCL \geq 80%	UCL < 80%
Preventive OB: Cervical cancer screening ¹	LCL \geq 75%	LCL < 75% AND UCL \geq 75%	UCL < 75%
Preventive OB: Chlamydia screening ¹	LCL \geq 55%	LCL < 50% AND UCL \geq 55%	UCL < 55%




Specialty Measures and Targets: Orthopedics

PATIENT EXPERIENCE: Quality Cluster			
	Orthopedics		
Measures	Target		
	LCL = Lower Confidence Limit		UCL = Upper Confidence Limit
	 1.0 PT	 0.5 PT	 0 PT
Getting timely appointments, care and information ²	LCL >= 2.85	LCL < 2.85 AND UCL >= 2.85	UCL < 2.85
Communication ²	LCL >= 2.85	LCL < 2.85 AND UCL >= 2.85	UCL < 2.85
Helpful, Courteous, and Respectful Office Staff ²	LCL >= 2.85	LCL < 2.85 AND UCL >= 2.85	UCL < 2.85
Care Coordination ²	LCL >= 2.75	LCL < 2.75 AND UCL >= 2.75	UCL < 2.75
Provider Rating ²	LCL >= 2.75	LCL < 2.75 AND UCL >= 2.75	UCL < 2.75

Specialty Measures and Targets: Otolaryngology

PATIENT EXPERIENCE: Quality Cluster			
	Otolaryngology		
Measures	Target		
	LCL = Lower Confidence Limit		UCL = Upper Confidence Limit
	 1.0 PT	 0.5 PT	 0 PT
Getting timely appointments, care and information ²	LCL >= 2.85	LCL < 2.85 AND UCL >= 2.85	UCL < 2.85
Communication ²	LCL >= 2.85	LCL < 2.85 AND UCL >= 2.85	UCL < 2.85
Helpful, Courteous, and Respectful Office Staff ²	LCL >= 2.85	LCL < 2.85 AND UCL >= 2.85	UCL < 2.85
Care Coordination ²	LCL >= 2.75	LCL < 2.75 AND UCL >= 2.75	UCL < 2.75
Provider Rating ²	LCL >= 2.75	LCL < 2.75 AND UCL >= 2.75	UCL < 2.75

Specialty Measures and Targets: Behavioral Health

HEALTH: Quality Cluster			
Clinical Quality	Behavioral Health		
Measures	Target		
	LCL = Lower Confidence Limit		UCL = Upper Confidence Limit
	 1.0 PT	 0.5 PT	 0 PT
Depression PHQ9 Utilization ¹	LCL >= 70%	LCL < 70% AND UCL >= 50%	UCL < 50%
Depression PHQ9 Follow-up at 6 Months ¹	LCL >= 36%	LCL < 36% AND UCL >= 18%	UCL < 18%
Depression PHQ9 Follow-up at 12 Months ¹	LCL >= 36%	LCL < 36% AND UCL >= 18%	UCL < 18%
Depression Response at 6 Months ¹	LCL >= 13%	LCL < 13% AND UCL >= 6.5%	UCL < 6.5%
Depression Response at 12 Months ¹	LCL >= 13%	LCL < 13% AND UCL >= 6.5%	UCL < 6.5%
Depression Remission at 6 Months ¹	LCL >= 8%	LCL < 8% AND UCL >= 4%	UCL < 4%
Depression Remission at 12 Months ¹	LCL >= 8%	LCL < 8% AND UCL >= 4%	UCL < 4%

Measure Sources:

- 1 Minnesota Community Measurement DDS and Health Plan Measures
- 2 HealthPartners Digital Satisfaction Survey

BONUS POOL CALCULATIONS

Each quality cluster is assigned an individual percent of bonus pool. When the Silver target of 4 stars is met 25% of the assigned percent of bonus pool is paid out. When the Gold target, 4 star rating plus overall total cost index less than 1.0, is met then 100% of the assigned percent of bonus pool is paid out.

Quality Clusters and Targets Overview

A summary of the measures within the quality clusters that make up the Health and Experience Quality dimensions are found below.

Quality Clusters	% of Bonus Pool		Silver Level Award ★★★★	Gold Level Award ★★★★ AND Total Cost Index < 1.0
	Multi-specialty	Pediatrics Only		
PRIMARY AND PEDIATRIC CARE				
Patient Experience: To Be Determined	50%	50%	25%	100%
Clinical Quality	50%	50%	25%	100%
CARDIOLOGY				
Patient Experience	100%		25%	100%
OBGYN				
Patient Experience	50%		25%	100%
Clinical Quality	50%		25%	100%
ORTHOPEDECS				
Patient Experience	100%		25%	100%
OTOLARYNGOLOGY				
Patient Experience	100%		25%	100%
BEHAVIORAL HEALTH				
Clinical Quality	100%		25%	100%

RECOGNITION AWARDS

Innovations in HealthCare Recognition Award

We know that innovative efforts of any one dedicated medical or specialty clinic can ripple outward to improve care and change business as usual in the care delivery system. We created the Innovations in Health Care Award to recognize and celebrate just such people.

This Award is to recognize health care organizations that design and implement innovations which transform care delivery process in total or for a condition. The following criteria are used to evaluate each submitted innovation:

- The problem or issue that prompted this work represented a significant opportunity to improve the health, experience, and/or affordability of care for patients.
- Prior to implementation of the innovation, comprehensive design work was undertaken which included:
 - 1.) A goal or vision of the solution to the problem or issue,
 - 2.) Pilot project – if appropriate,
 - 3.) Measures of projected benefits,
 - 4.) Review of relevant evidence or theory when applicable,
 - 5.) Definition of a “successful” outcome,
 - 6.) Plan for ongoing measurement.
- The organization was the first to implement this innovation in this market
- This innovation represents a major change in the present care delivery process, thereby creating a new paradigm of care and changing business as usual in the marketplace.
- The ongoing success of the innovation is being measured and is documented including an evaluation of opportunities for improvement.
- The innovation reflects the Institute of Medicine’s (IOM) Six Aims of Quality Health Care by positively influencing the value equation aligned within the Institute for Health Care Improvement’s (IHI) Triple Aims of improving:
 - Health (safe, effective, equitable care),
 - Experience (timely, patient-centered),
 - Affordability (efficient)

[Innovations in HealthCare Recognition applications](#) are due July 15, with forms available online.

Preventive Care Recognition Award

Quality improvement is a vital activity in the pursuit of the Triple Aim. We have created the Preventive Care Recognition Award to recognize primary care and specialty groups for making major changes in their current processes resulting in persistent, sustainable change for preventive care screening improvement that addresses the health of the population served.

Criteria:

- Determine beginning point (Population-based current performance)
- Goal for clinical improvement activity
- Process for change (What was done and how it was done)
- Address barriers (Adoption considerations)
- Metrics & Results [e.g. base line, 6-months, etc.]
- Sustaining the Gains (Steps for sustainability & ongoing evaluation activities)

The ongoing success of the preventive care process is being measured with documented outcomes including an evaluation of ongoing opportunities for improvement.

[Preventive Care Recognition applications](#) are due July 15, with forms available online.

Primary Care Triple Aim “All Star” Recognition Award

Recognizes medical groups achieving the highest performance in both Health and Experience Quality dimensions while at the same time at the most affordable cost as measured by total cost of care.

APPENDIX I: Detailed Methodology

Star Assignment

For Partners in Excellence 2021, overall quality star rating is only calculated for Primary Care providers. Overall quality star ratings are not calculated for the Cardiology, ENT, Obstetrics and Gynecology, Behavioral Health and Orthopedics specialties. In addition:

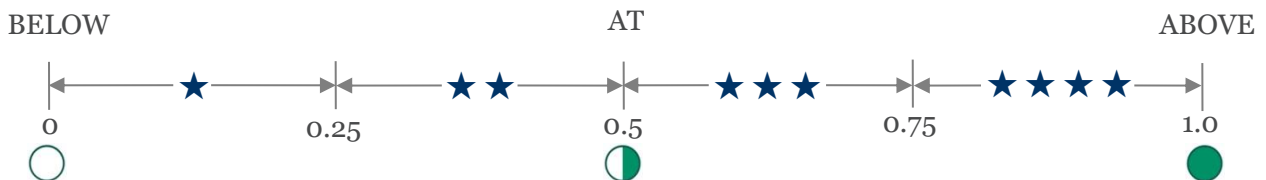
- Providers must have at least 50% of available measures within the quality cluster for a star assignment to be calculated. For clusters that have a break between child and adult measures – the quality cluster star rating will be calculated if the provider has 50% of Adult measures, 50% of pediatric measures, or a 50% combination between adult and pediatric measures.
- Providers must have star ratings in the primary care quality clusters in order to calculate an overall quality star rating.
- For some measures where a composite is not available, individual components can be weighted to produce a composite equivalent.
 - In OB and Primary Care, the three MNMCM screening measures, breast cancer, cervical cancer, and Chlamydia are each weighted 1/3
 - In Primary Care, the seven MNMCM depression measures are each weighted 1/7.
- The total number of weighted points for each quality cluster is divided by the total number of weighted possible points to produce the providers’ actual to possible points quality cluster score

Below is an example of a Medical Clinic’s individual measure performance in the Clinical quality cluster.

Clinical Quality Measures	UCL/Rate/LCL	Target	Symbol	Actual Point Value	Possible Points	Actual to Possible Points Score
Optimal Vascular	62.5%/60.0%/56.5%	50%	●	1	1	=4/5 0.8
Optimal Diabetes	42%/40%/38%	40%	◐	0.5	1	
High Blood Pressure	90%/85%/80%	75%	●	1	1	
Diabetic Eye Exam	55%	60/50%	◐	0.5	1	
Use of Spirometry Testing in the Assessment and Diagnosis of COPD	55%/50%/45%	40%	●	1	1	
Total				4	5	

Translating the actual to possible points score to a star rating is as follows:

Star assignment performance levels are set such that a provider must have 1/2 of their measures within a quality cluster above target with the other 1/2 at target to achieve a 4-star rating. To achieve a 1 star rating a provider must have greater than 1/2 of their measures below target with the remaining measures at target. For the overall quality star assignment rating, the total weighted quality score is used against this same scale.



In the example above, the 0.80 score in the Clinical Quality cluster would translate to a ★★★★★ star rating

APPENDIX II: Frequently Asked Questions

When will the results be available for me to compare my performance?

The 2021 Partners in Excellence incentive program results will be available for medical group review in July of 2021. Medical groups will receive electronic notification reports including individual measure, quality dimension, and cost assessment results in conjunction with Distinctions® product tier results.

Where can I find my current performance?

Current star and cost dollar rating performance for medical and specialty groups can be found on our website under [Cost and quality ratings](#)

Where can I find more description and source information on the measures used in the quality clusters?

Quality cluster measurement descriptions can be found under the following links:

- [Minnesota Community Measurement \(MNCM\)](#)

How do I apply for the Preventive Care or Innovations in HealthCare Recognition Awards?

Applications for either Preventive Care or Innovations are available online. Applications are **due by July 15, 2021**. All HealthPartners contracted providers are eligible to apply. If you have questions or would like WORD versions of the application, please contact HPAwards@healthpartners.com

- [Innovations in HealthCare Recognition application](#)
- [Preventive Care Recognition application](#)

Whom do I call if I have more questions?

- For general questions, please contact your HealthPartners contract manager or service specialist.
- For specific measurement questions, feel free to contact quality@healthpartners.com or 952-883- 5777.