

REPORT 1:

# Using Information to Recognize Good Care

Quality of Health Care for Medicare Patients  
in Shelby County, Tennessee

June 2009

This **TAKE CHARGE** *for better health* report uses Medicare claims data from 2006 & 2007 to report primary care physician performance in doctors' offices across Shelby County.

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**Aligning Forces  
for Quality** | Improving Health & Health Care in  
Communities Across Greater Memphis

An initiative of the Healthy Memphis Common Table and the Robert Wood Johnson Foundation.

Copies of this report and additional data are available at:  
<http://www.healthymemphis.org/>

## Foreword

Every American deserves quality health care. Yet despite advances in medicine, we know that many people do not get the right care at the right time. It isn't a problem that can be pinpointed to one cause ... and it doesn't have a simple solution. Making health care better will take rethinking the “who, what, when, where and why” of health care:

- **who** gets care,
- **what** care is needed,
- **when** care is needed,
- **where** is the best place to get care, and
- **why** the choices made are the best approach.

The tricky part is to get everyone who gives care, gets care and pays for care on the same page when it comes to making health care better. Each group has a role to play in improving care. We believe that putting good information in the hands of those who need it can support these efforts.

*Those who give care* ..... need information to better understand what they do well and what they need to improve.

*Those who get care* ..... need information to make decisions about what good care is and how to get it.

*Those who pay for care* .... need information about the quality and price of care in order to determine whether health care delivers value that's worth the investment.

Part of our work at the Healthy Memphis Common Table is to report information to the public about the quality of health care in our community. In a series of reports titled **TAKE CHARGE** *for better health*, we will provide guidance about:

- using information to recognize good care,
- using information to get good care, and
- using information to give good care.

Our goal is to bring information to consumers so that they can better understand, demand and choose quality health care. Within each report will be clear, simple steps for action to take charge and get better care to improve your overall health.

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# Highlights

The information in this report is a bird's eye view of quality of care for Medicare patients in 2007. Quality of care is based on accepted measures of what good care should look like in doctors' offices that provide preventive, heart and diabetes care.


The overall level of care given in doctors' offices throughout Shelby County is similar to care received across Tennessee and the nation. However, the level of care tends to fall below national goals set for health improvement. In Shelby County major differences include: 1) more patients than expected get a blood test every year that helps them better manage their diabetes, and 2) fewer patients with depression get and stay on antidepressant medicine.

## For every 10 Medicare patients seen in Shelby County who should have gotten:

- **medicine monitoring ...**

 9 patients on long term medicine got recommended monitoring for safety.


- **a kidney function test ...**

 8 patients with diabetes got medical attention to prevent kidney damage.


- **a hemoglobin A1c test ...**


 8 patients with diabetes got an A1c test.

- **beta blockers medicine ...**


 8 heart attack patients were put on beta blockers upon discharge.

- **an LDL cholesterol test ...**

 8 heart disease patients got an LDL (bad) cholesterol checked at follow up.

 7 patients with diabetes got an LDL (bad) cholesterol test.


- **specific medicine use ...**

 6 patients with rheumatoid arthritis got an anti-rheumatic medicine.

- **breast cancer screening ...**

 5 women got a mammogram.


- **a retinal eye exam ...**

 5 patients with diabetes got a retinal eye exam.

- **medicine support ...**

 3 patients with depression got and stayed on antidepressants.

- **colon cancer screening ...**

 3 adults got a test to screen for colon cancer.

## About the Report

### **What is good care?**

Good care is delivered when people get the health care they should when they need it the most.

### **How is good care determined?**

Medical research provides evidence of what care will result in the best patient outcome. This information is used to develop 'standards of care' that doctors can use when treating patients. For example, it is known from studies that breast cancer occurs more often in women once they reach 40 years of age. Based on this information, it is standard care to provide breast cancer screening to all women over age 40.

### **How is good care measured?**

One way to measure the quality of care is by clearly defining the most important health services that should be provided to patients who have or are at risk for certain conditions. The number of individuals who actually got the service (a test, medicine, or some other form of care) out of all individuals that should have gotten the service can then be measured. In the example above, the number of women over the age of 40 who got a mammogram out of all women over age 40 that were seen by their doctor would be measured. This rate of breast cancer screening is called an 'indicator of quality care'.

### **Why are these indicators important to me?**

Knowing the indicators (and the reasons for them) helps individuals to understand the most important care they should be receiving. It also helps to know what services to ask for if you are not already receiving them from your doctor.

### **Why are these indicators important to the public?**

Improving health care is a top priority in this country. We have to have information about "what is" before we know what "should be" and work towards change. The indicators in this report are recognized nationally as essential health care services. Use of commonly accepted quality indicators allows comparison between levels of care provided in doctors' offices throughout the county, state and nation. In turn, resources can be directed to improve health care in the areas of greatest need.

### **Where did the information in this report come from?**

Each time a patient goes to the doctor, a bill (claim) is sent to Medicare containing information about diagnoses and treatments provided. The information from all of the bills sent in 2006 and 2007 are added together to see how many patients got the service that needed the service.

### **What information is available in this report?**

Information about 11 different indicators for the quality of preventive, diabetes, and heart care is presented. For each indicator, the quality of care is compared to care received across the county, state and nation. Individuals can also compare the quality of care against national (Healthy People 2010) goals for health improvement.

### **How do I use this information?**

The most important goal of this report is for the consumer to learn about what good care is and to make sure they are receiving it. In addition, individuals can determine if their current level of care is acceptable and, if not, find a higher quality of care.

# Preventive Care

Why are these indicators important?

- Breast cancer screening**

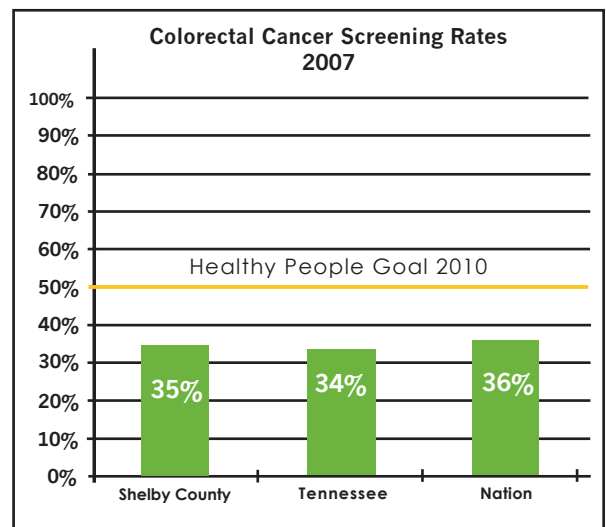
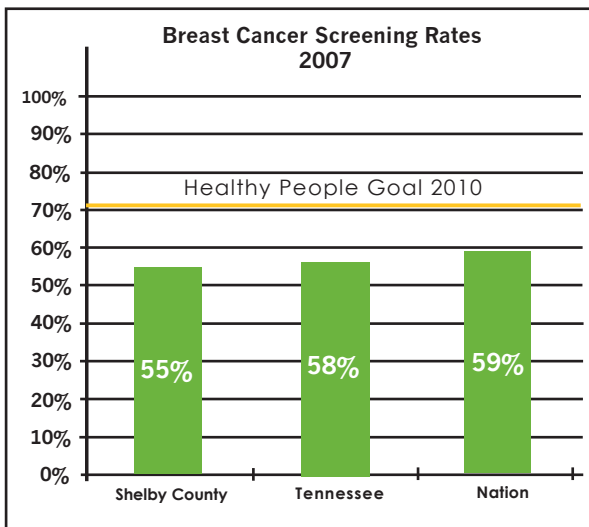
If you are a woman over the age 40 having a mammogram to screen for breast cancer every one to two years reduces the risk of death from breast cancer. A mammogram is an X-ray exam of the breast used for the early detection of developing tumors, especially cancerous ones.

- Colorectal cancer screening**

If you are an adult over the age of 50 having the appropriate test to screen for colorectal cancer greatly reduces the risk of death. There are many different tests that can screen for colon cancer.

### What are the **Take Charge** for better health messages?

- Preventive care screening rates in Shelby County are similar to rates in Tennessee and national rates, but fall short of Healthy People (HP) 2010 goals.
- Just over half (55 %) of female Medicare patients over age 40 in Shelby County got a mammogram to screen for breast cancer. That means that for every 10 patients who needed one, about 5 got one. The HP goal is for every 10 patients who need a mammogram, at least 7 should get one.
- One-third (35 %) of all Medicare patients over age 50 in Shelby County got a test to screen for colon cancer. That means for every 10 patients who needed one, about 3 got one. The HP goal is for every 10 patients who need a test to screen for colon cancer, at least 5 should get one.



- If you are a female over the age 40, ask your doctor when you are due for your next mammogram!*
- If you are an adult over the age 50, ask your doctor what test he or she recommends to screen for colon cancer and when you are due to get it!*

**Take Charge**  
action 1

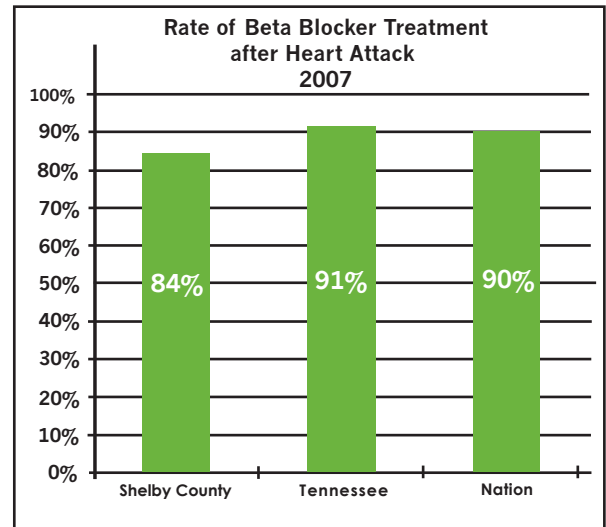
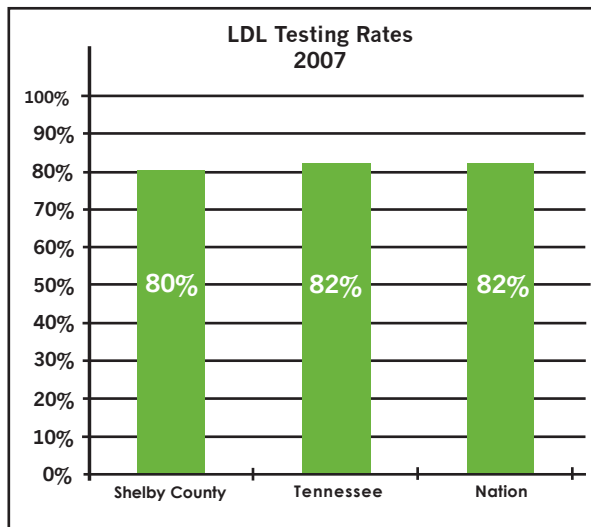
# Heart Care

Why are these indicators important?

- **LDL Cholesterol screening**  
High cholesterol can cause heart problems. Get your LDL (bad) cholesterol checked every year if you have had a heart attack or have been told you have a cardiovascular disorder. Reducing LDL cholesterol is an important step to prevent a heart attack.
- **Beta blocker treatment after a heart attack**  
A beta blocker is an important medicine to take after a heart attack. Taking this medicine after a heart attack is an important step to prevent another heart attack.

## What are the **Take Charge** for better health messages?

- Screening rates for LDL (bad) cholesterol and treatment with beta blockers following a heart attack are similar in Shelby County, Tennessee and the nation.
- In Shelby County, 8 out of every 10 heart disease patients (80%) with Medicare insurance coverage got their bad cholesterol checked during a follow up visit.
- In Shelby County, about 8 out of every 10 heart attack patients (84%) with Medicare insurance coverage were put on a beta blocker after their heart attack.



Take  
Charge  
action 2

- *If you have heart disease, ask your doctor when you are due for your next LDL (bad) cholesterol test and if beta blockers are right for you!*



# Diabetes Care

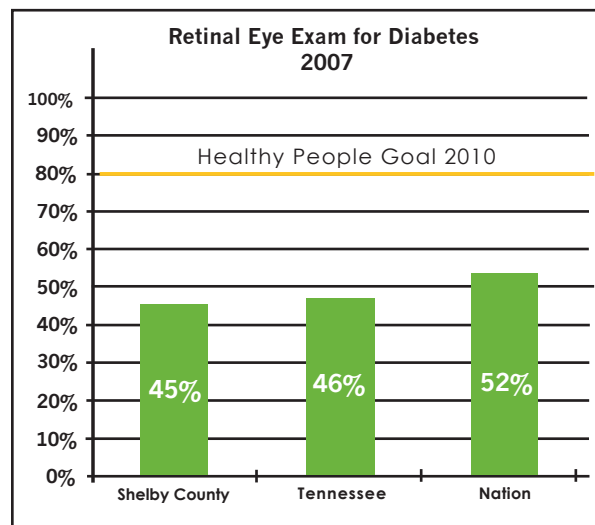
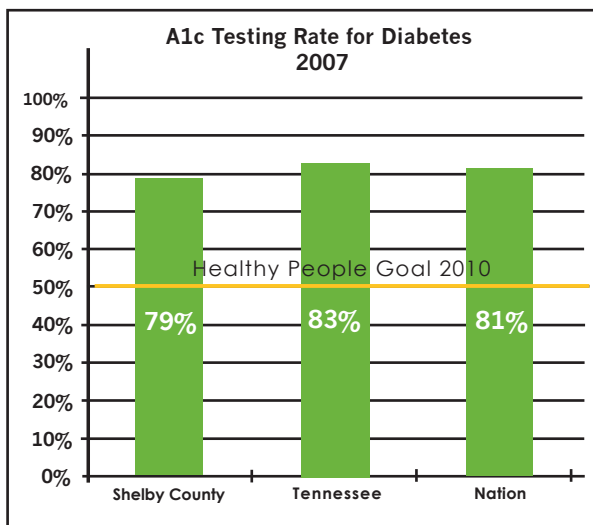
## Why are these indicators important?

- LDL Cholesterol screening
- Hemoglobin A1c (average blood sugar test)
- Medical attention for nephropathy (kidney disease)
- Retinal Eye Exam

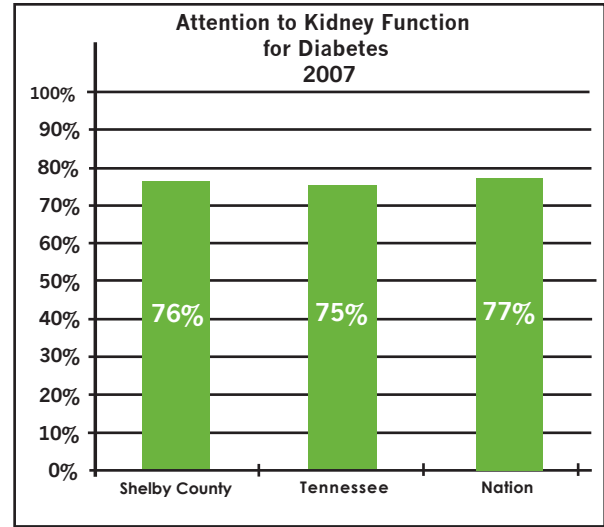
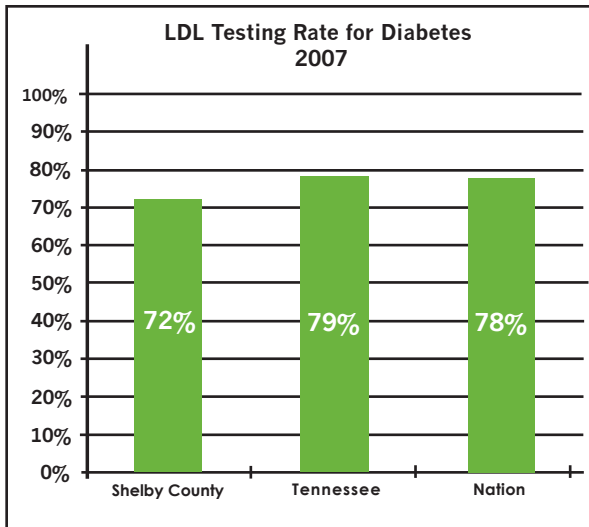
Having diabetes puts you at risk for many additional health problems. Diabetes increases the risk for diseases of the heart, eyes and kidneys. An A1c test will show you how well you are managing your blood sugar. If you have diabetes, get an A1c test at least two times per year to get information to manage your diabetes and reduce your risk of additional problems. Getting your bad cholesterol and eyes checked once a year can help reduce the risk of heart and eye disease. You can reduce your risk of kidney failure by getting your kidney function tested and treating kidney problems.

## What are the **Take Charge** for better health messages?

- Rates for all aspects of diabetes care in Shelby County are similar to state and national rates.
- Over three-quarters (79%) of all Medicare patients with diabetes in Shelby County got an A1c test in 2007. That means for every 10 patients who needed one, about 8 got one. That's higher than the Healthy People 2010 goal! The HP 2010 goal is for every 10 patients who need an A1c test, at least 5 should get one.
- Less than one-half (45%) of all Medicare patients with diabetes in Shelby County got a retinal eye exam in 2007. That means for every 10 patients who needed one, about 4 patients got one. The HP goal is for every 10 patients who needed a retinal eye exam, 8 patients should get one.

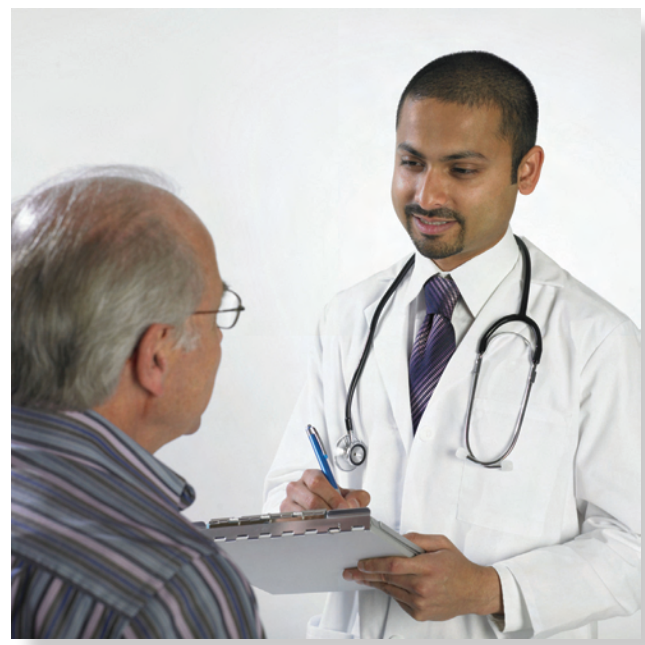


- Less than three-quarters (72%) of all Medicare patients with diabetes in Shelby County got a test for LDL (bad) cholesterol in 2007. That means about 7 of every 10 patients got the cholesterol test they need.
- Three-quarters (76%) of all Medicare patients with diabetes in Shelby County got medical attention to prevent kidney damage. That means about 8 of every 10 patients got the test they needed.



**Take  
Charge  
action 3**

*• If you have diabetes, make sure you ask for each of these tests every year and discuss the treatment options with your doctor!*



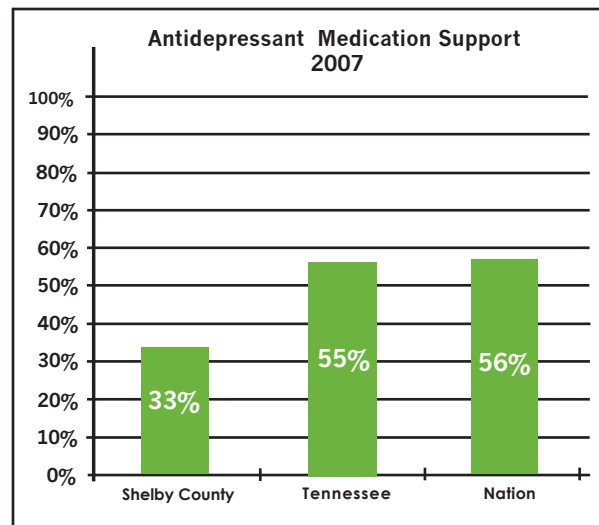
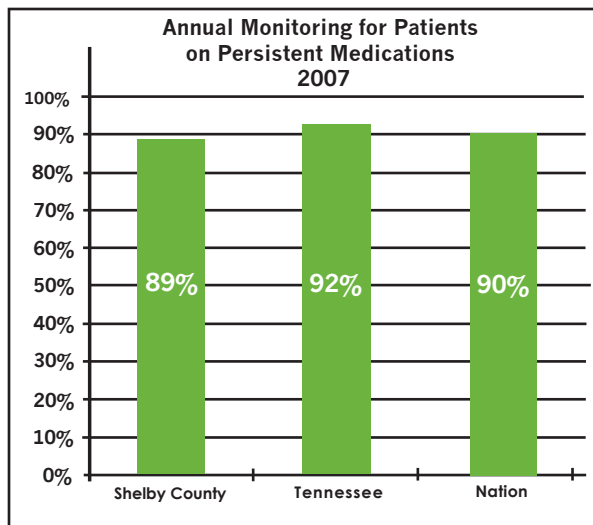
# Medication Management

Why are these indicators important

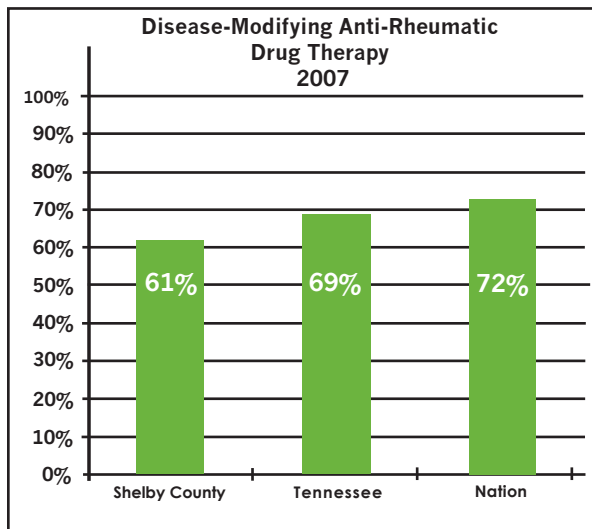
- **Annual monitoring for patients on long term medications**  
A simple blood test at least once a year is important to make sure that it is safe to continue taking certain medicines over time.
- **Continued use of antidepressant medication throughout the acute treatment phase**  
Many medicines work to manage depression. It is important to continue taking a medicine as directed by your doctor. You may have to take some medicines over a period of time before you feel the desired effect. Talk to your doctor before deciding to stop a medicine.
- **Use of disease-modifying anti-rheumatic drug therapy in rheumatoid arthritis**  
Use of medicine that can halt the progression of rheumatoid arthritis can improve quality of life for individuals with the condition.

What are the **Take Charge** *for better health* messages?

- Medication monitoring rates for Shelby County are similar to the rate in Tennessee and national rates. About 9 out of every 10 Medicare patients taking medicine over a long term in Shelby County got the recommended blood test.
- Getting and staying on an antidepressant medicine throughout the acute treatment phase is lower in Shelby County than the state and nation. One-third (33%) of all Medicare patients with a new diagnosis of depression got and stayed on an antidepressant. That means for every 10 patients who needed that treatment, only 3 got it.



- Use of medicines that can halt the progression of rheumatoid arthritis is lower in Shelby County than in Tennessee and the nation. Three-fifths (61%) of all Medicare patients with rheumatoid arthritis were given a prescription for the anti-rheumatic treatment. That means for every 10 patients who needed that treatment, only 6 got it.



Take  
Charge  
action 4

- *Make sure to ask your doctor for the test you need so you know that the medicine you are taking is safe over time!*
- *Always discuss with your doctor any concerns or problems you have taking a medicine!*
- *Ask your doctor about all treatment options including medicine!*

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## Using Information to Take Charge for better health!

✓ Check to make sure you are getting the important care you need.

### Your Personal **Take Charge** for better health card

Get the Care You Need Most:

#### **PREVENTIVE CARE**

- Mammogram (for women age 40 and older)
- Colon cancer screening (for adults 50 and older)

#### **DIABETES CARE**

- A1c testing (average blood sugar)
- LDL (bad) cholesterol testing
- Eye exam
- Kidney testing for urine protein

#### **HEART CARE**

- LDL (bad) cholesterol testing
- Beta blocker blood pressure medicine (after a heart attack)

#### **MEDICATION SAFETY**

- Ask your doctor if tests are needed to monitor your medicine
- Discuss any concerns or problems with your medicine
- Discuss all the treatment options available with your doctor



COMMON TABLE

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