



First checkup for area's clinics

By [Carol M. Ostrom](#), Seattle Times health reporter, 2/1/08

After years of work, lots of fanfare and a plentiful dose of disagreement, a collaboration by employers, health insurers, unions and medical providers around Puget Sound has produced a first-of-its-kind, comprehensive comparison of the medical care performed at 14 different clinic systems in the Puget Sound area. The "**Community Checkup**" report, released Thursday, uses billing records for 1.6 million patients to compare the care that is being delivered to the region's health-care consumers to national standards. It covers 21 different areas, including diabetes, heart disease, cancer screening and low back pain, and rates clinics against regional averages.

"The goal here is to shine a light on our health-care delivery system, in a way that everyone can see how health care is being provided, and from there, how to make much better choices," said King County Executive Ron Sims, who helped start the coalition, called the **Puget Sound Health Alliance**.

But it's not yet clear just how useful such ratings will be to the "consumers" of health care — who are sometimes patients but are more often businesses and government agencies that purchase health coverage for workers. For now, businesses and insurers are barred from using the data to change employee benefit plans, negotiate new contracts or choose clinics to be included in "preferred provider" networks. The medical community wanted to have time to see the report before contracts or insurer networks were affected, said Diane Giese, spokeswoman for the Alliance.

And whether individual patients will use the information to make changes is still a question mark.

Long, costly process

Producing the report, along with related health-quality work, was a long, costly process — three years and \$3.5 million. The alliance began in late 2004 at the urging of a King County task force. The goal was to develop a system to improve quality — which, Sims believed, would lead to cost containment — align incentives among employers, insurers, doctors and patients, and to agree on clinical guidelines and measures to be used in a report. The alliance now includes 160 organizations, including Boeing, Starbucks and Washington Mutual, and more than 50 people. Its board includes representatives from medical providers, health insurers, large businesses, King County, the city of Seattle, and union-employer trusts. "Consumer representatives" also were included on specific committees.

The report compares 14 clinic systems that volunteered to have their scores published, and rates 81 individual clinics of six or more doctors. In all, it covers roughly 65 to 70 percent of insured patients in the five-county region, said Margaret Stanley, the alliance's executive director. The analysts hired by the alliance, using patient billing records, calculated how often patients received the recommended care based on national standards.

The report shows success in some cases. For example, more than 90 percent of children seen for a common cold were not given an unnecessary antibiotic — better than the top performing states measured in a national report. But in other cases, such as colon cancer screening, Puget Sound-area clinics are far behind the best-performing states. And even in Puget Sound, the average of all clinics is significantly lower than the top-performing clinic system.

The survey shows that "everyone has room to improve," said Dr. David Fleming, director of Public Health — Seattle & King County, who chairs the alliance's board.

Improving care

The directors of several clinics included in the report said they expected patients to use the report's ratings to help improve their own personal care. "This gets patients involved in the quality process," said Dr. David Dreis, medical director of clinical outcomes at Virginia Mason Medical Center.

And for the clinics and medical providers, it provides a unique, public measurement. "You can't improve what you don't measure," said Dr. Peter McGough, chief medical officer of University of Washington Medicine Neighborhood Clinics. Some UW doctors were "stunned" to find they were below par on care for diabetics and breast-cancer screenings, and have quickly worked to significantly improve care, McGough said.

Doctors' "first instinct is [to ask] 'How am I doing compared to others?'" said Lloyd David, CEO and executive director of The Polyclinic and a board member of the alliance.

But Dr. Warren Fein, medical director for Swedish Physicians, a 12-clinic network of primary-care clinics, questioned whether the burden for improving care should fall primarily on doctor and patients. In some cases, he said, insurance plans control the levels of care. For example, patients might skip colon-cancer screenings because their insurance doesn't cover them adequately. Does the alliance have a "strategy for improvement?" Fein asked. "I'm hopeful, but I haven't heard anything along those lines. "

Alliance Executive Director Margaret Stanley said the report includes recommendations for patients, medical providers, insurers and employers, such as designing benefits to cover cancer screening.

Information

The "Community Checkup" report: www.wacommunitycheckup.org/

The Puget Sound Health Alliance:
www.pugetsoundhealthalliance.org/about/index.html