

lead • inform • improve

Health Measurement Advisory Group

May 23, 2016



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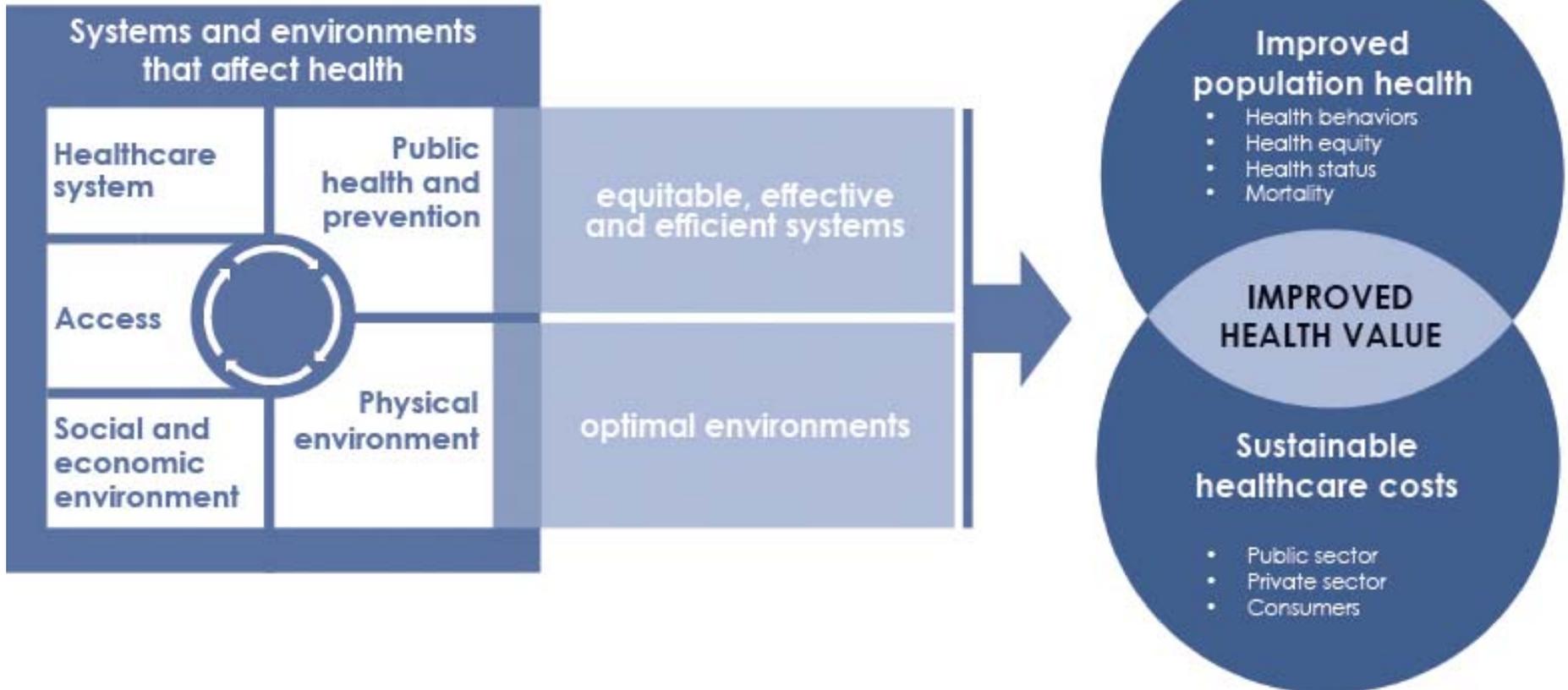
December

Value

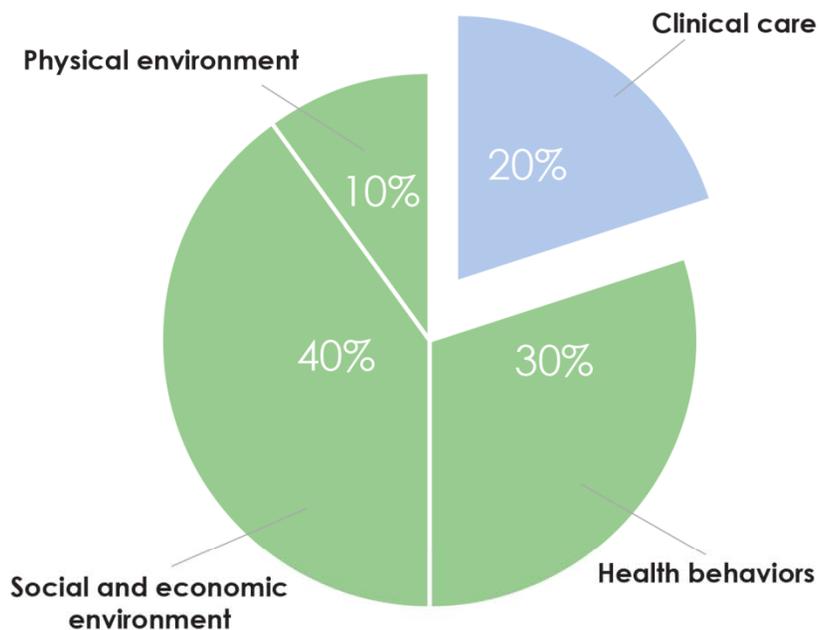
Costs



2014
Health
Value
Dashboard



Factors that influence health

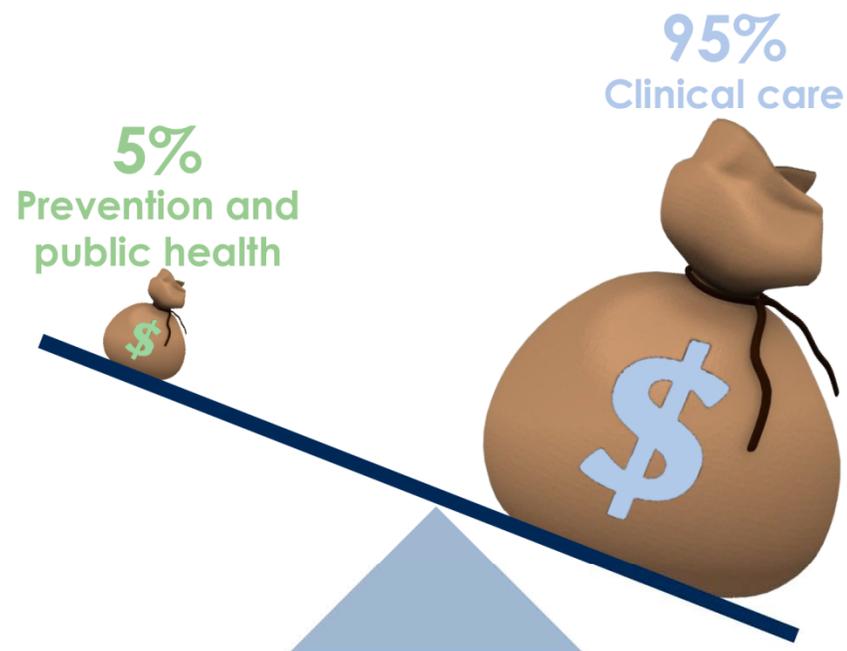


Source: County Health Rankings and Roadmaps population health model¹

Access to quality health care is necessary, but not sufficient, for good health.



Health spending



Source: Analysis of national health expenditures²

...But we spend most of our healthcare dollars on clinical “sick care” instead of prevention.

What makes this dashboard different?

	<i>America's Health Rankings</i>	<i>Commonwealth Scorecard</i>	<i>County Health Rankings</i>	<i>Kaiser State Health Facts</i>	<i>Gallup-Healthways Wellbeing Index</i>	<i>RWJ DataHub</i>	<i>Network of Care</i>	HPiO
Primary format	Interactive & At-a-glance	Interactive & At-a-glance	Interactive	Interactive	At-a-glance	Interactive	Interactive	At-a-glance (Phase I)
Population health	adequately covered	adequately covered	adequately covered	adequately covered	adequately covered	adequately covered	adequately covered	adequately covered
Healthcare costs	not covered	minimally covered	not covered	adequately covered	not covered	adequately covered	adequately covered	adequately covered
Healthcare system	adequately covered	adequately covered	adequately covered	adequately covered	adequately covered	adequately covered	adequately covered	adequately covered
Access	adequately covered	adequately covered	adequately covered	adequately covered	adequately covered	adequately covered	adequately covered	adequately covered
Social and economic environment	adequately covered	not covered	adequately covered	adequately covered	adequately covered	adequately covered	adequately covered	adequately covered
Physical environment	adequately covered	not covered	adequately covered	not covered	adequately covered	not covered	adequately covered	adequately covered
Public health and prevention	minimally covered	not covered	not covered	not covered	not covered	minimally covered	minimally covered	adequately covered
Health value	not covered	not covered	not covered	not covered	not covered	not covered	not covered	adequately covered

= adequately covered
 = minimally covered
 = not covered

What is the value added?

- ✓ Includes costs
- ✓ Comprehensive set of health determinants
- ✓ Concise at-a-glance format for policymaker audience

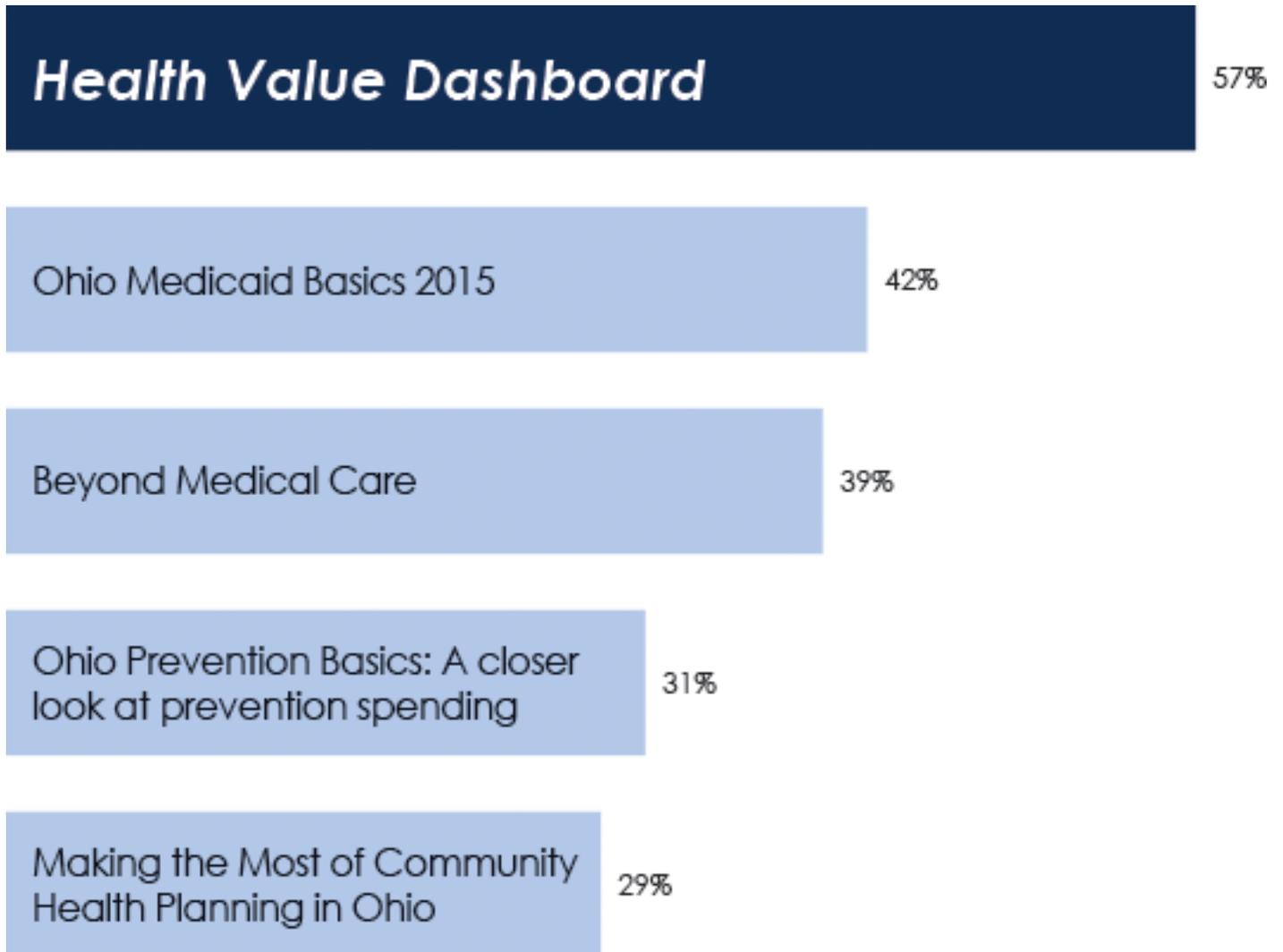
2014 *Dashboard* activities and impact

Dashboard dissemination

- Released Dec. 2014 at HPIO forum (94 participants)
- 2 webinars in Feb. 2015 (101 total participants)
- 35 presentations (2014-2015)
- 3x legislative testimony (2015)
- 13 media stories (2014-2015)
- 6,756 page views on *Dashboard* website (2014-2015)

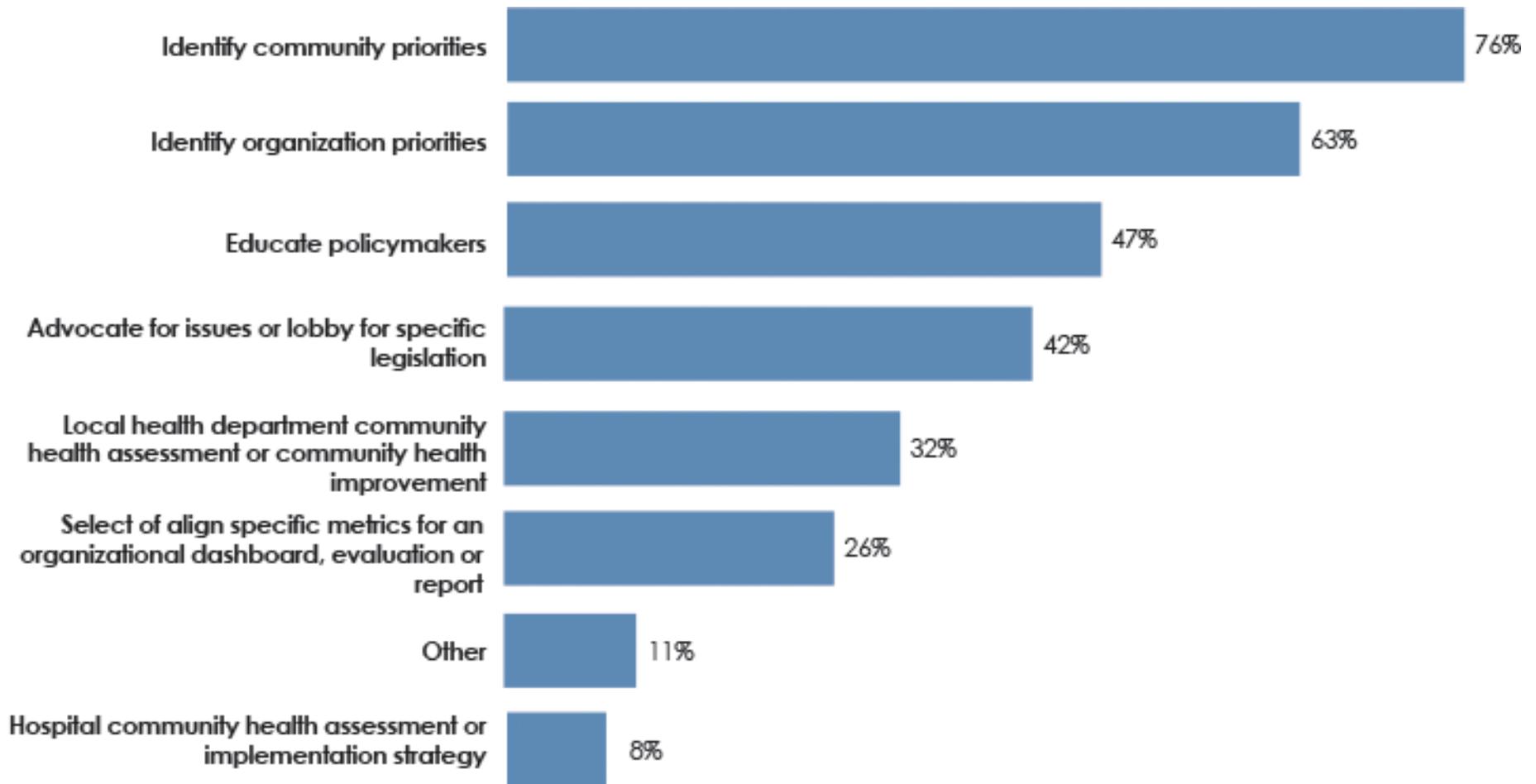
HPIO's top 5 most useful publications of 2015

"Which publications/resource pages did you find most useful for influencing the policymaking process?"
(n=234)



“How does your organization plan to use the 2014 *Health Value Dashboard*?”

(n=38 hard copy order form respondents)



HPIO *Health Value Dashboard* vs. State Health Assessment (SHA)

	<i>Dashboard</i>	SHA
Audience	<ul style="list-style-type: none"> • Policymakers • Health stakeholder 	<ul style="list-style-type: none"> • State Health Improvement Plan (SHIP) developers • State agencies, local health departments, hospitals and other local entities • General public
Purpose	<ul style="list-style-type: none"> • Track progress on health value • Motivation to address factors beyond health care 	<ul style="list-style-type: none"> • Track progress on health value • Motivation to address factors beyond health care
Approach	Concise, visual, at-a-glance	Comprehensive, more in-depth

HPIO *Health Value Dashboard* vs. State Health Assessment (SHA) secondary data

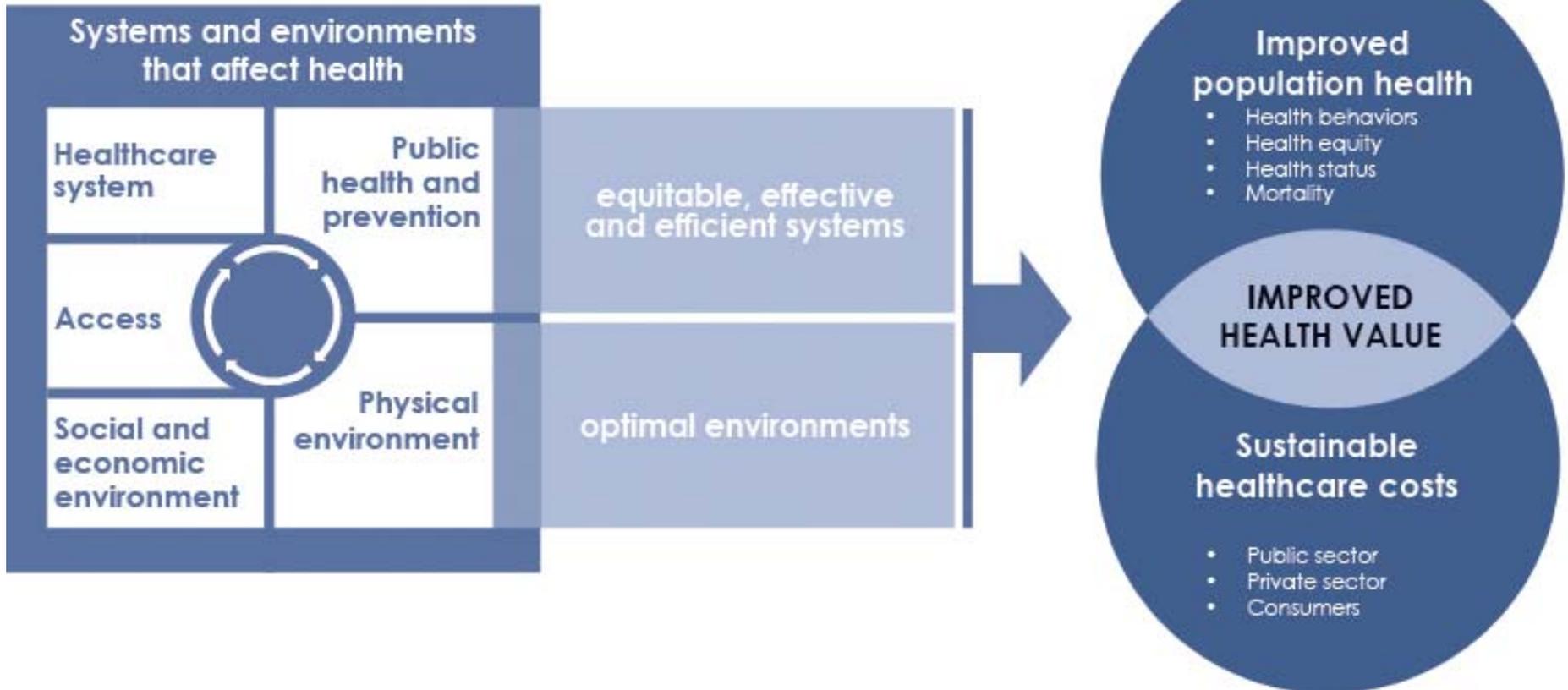
	<i>Dashboard</i>	SHA
Number of metrics	~106	~120
Data elements	<ul style="list-style-type: none"> • State rank • Trend: 2-3 years • Benchmark: Best state (benchmark) 	<ul style="list-style-type: none"> • Ohio vs. U.S. • Trend: 3 years (+ longer trend for some metrics) • Benchmark: Healthy People 2020 target (when available)
Equity	Brief equity/disparities highlights (by race/ethnicity, income, county)	Deeper dive on ~40 metrics (by race/ethnicity, income, education, gender, age, disability status, geography)
Availability of data at county level	Preferred	Strongly preferred

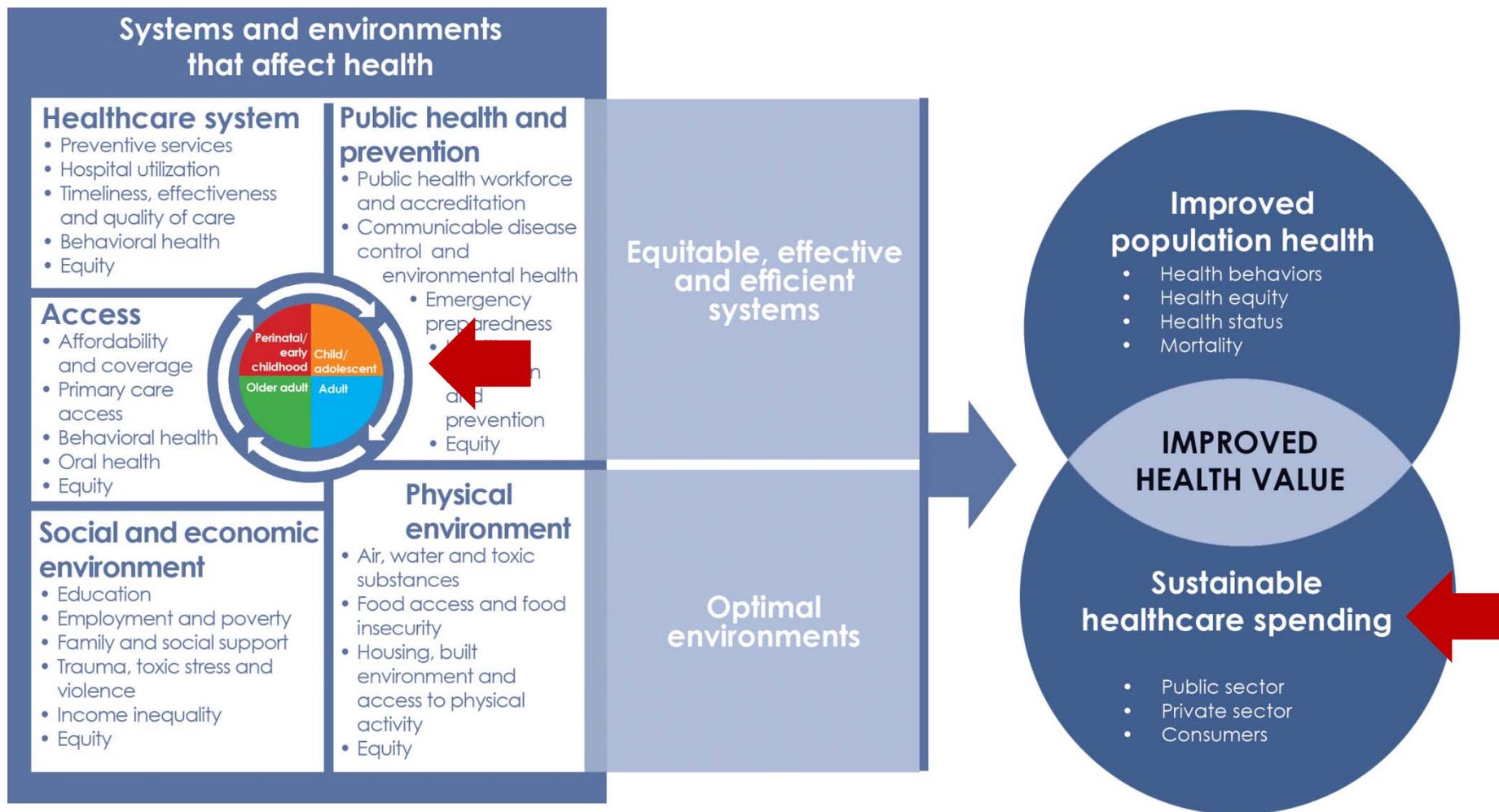
Today's meeting

Primary objective: Finalize metrics for the *2017 Dashboard*.

HPIO will review the:

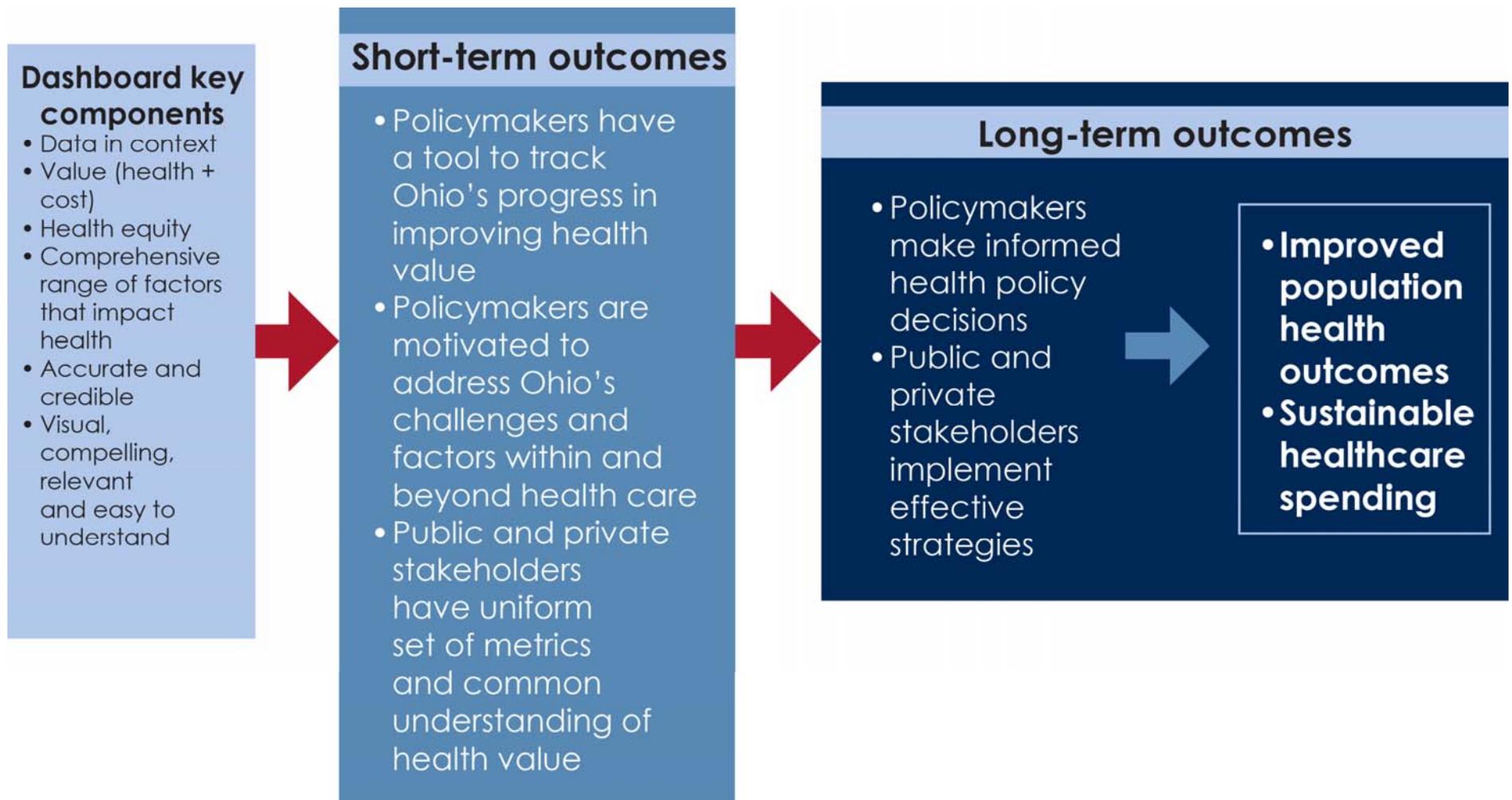
- modified conceptual framework for the *2017 Dashboard*.
- process for finalizing metrics for inclusion in the *2017 Dashboard*.
- recommendations from the Metric workgroup discussions.





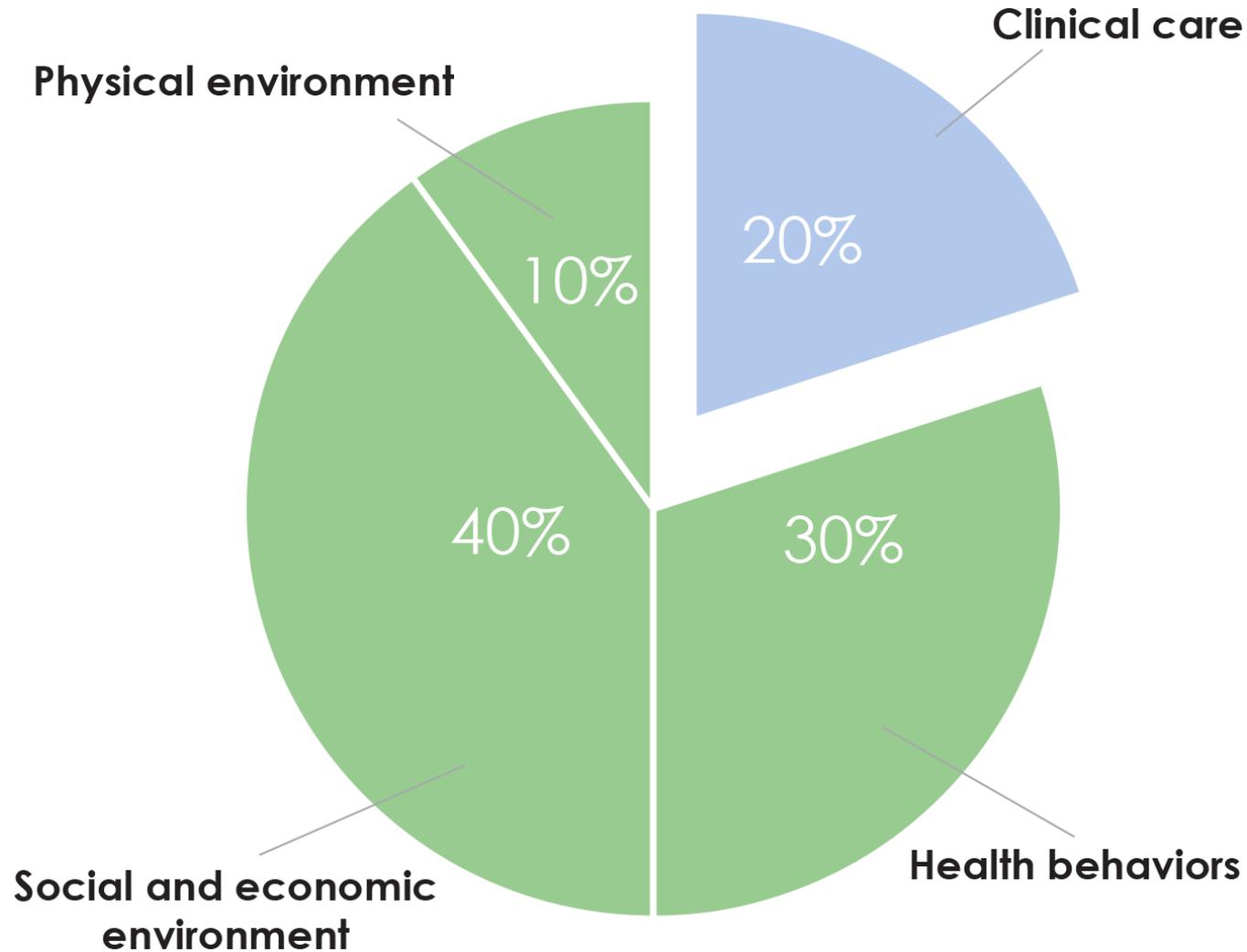
World Health Organization definition of health: Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.

Health Value Dashboard logic model



Healthcare spending vs. Total health spending

Factors that influence health



Source: County Health Rankings and Roadmaps population health model

What is the problem we are trying to address?

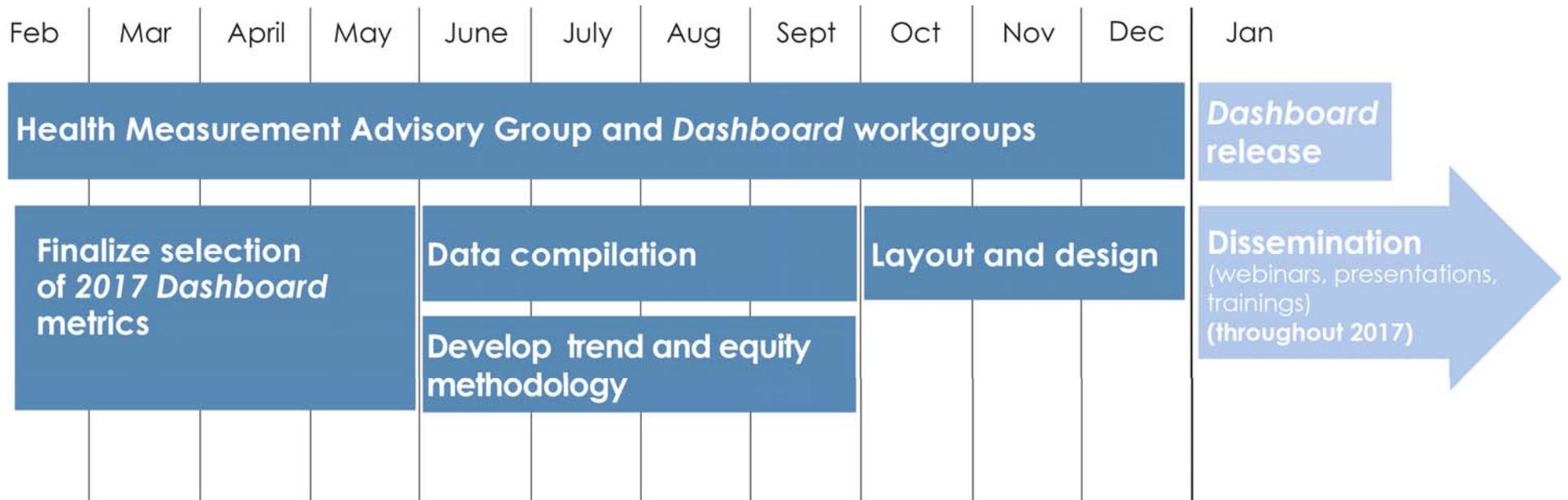


National dialogue on “total health spend”

- Specific value problem to address is unsustainable healthcare spending
- No consensus on how to calculate “total health spend”
- Actual impact of social services spending on health outcomes is not clear
- There is not always an inverse relationship between social services spending and healthcare spending

Dashboard process and review
of workgroup recommendations

2017 *Dashboard* timeline



Dashboard workgroups

Health Measurement Advisory Group

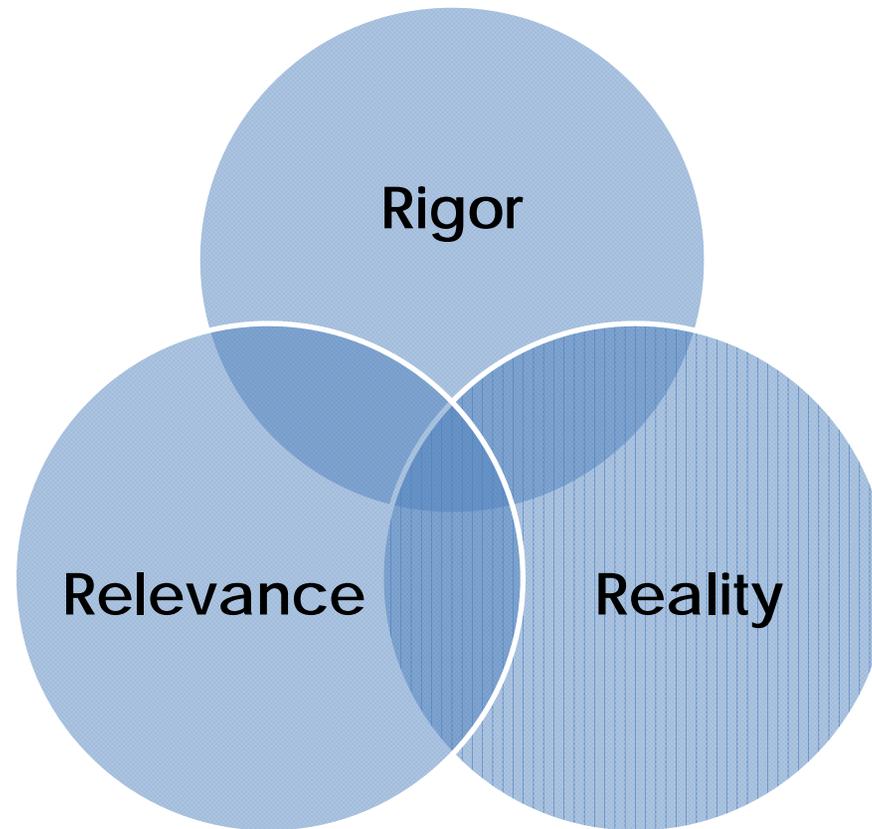
Metric selection workgroups

1. Population health
2. Healthcare costs
3. Healthcare system
4. Public health and prevention
5. Access
6. Social, economic and physical environment

Additional workgroups

1. Equity
2. Methodology
3. Layout and messaging

Decision criteria for updating metrics



Consistency across editions = comparisons over time

Changes from 2014 to 2017 edition

Metric changes	Population Health	Healthcare spending	Healthcare system	Access	Public health and prevention	Social and economic environment	Physical environment
Number of metrics replaced	1	2	1		4	3	1
Number of metrics removed		2					
Number of new metrics		1		1 (tentative)			
Number with revisions to metric description/ name	1	2		3	2	3	1
Number of new metric sources	2	1		1			
Total metrics (not including equity break-out metrics)	16	11 (-1)	15	15 (+1)	15	15	14

Population health domain

Health behaviors subdomain

- Replaced
 - Binge drinking with excessive drinking
- Changed source
 - Youth all-tobacco use (from YRBS to NSDUH)

Conditions and diseases subdomain

- Changed source
 - Youth obesity (from YRBS to OMAS)

Overall health and wellbeing subdomain

- Revised
 - Overall health status (% excellent or good health, rather than fair or poor health)

Healthcare spending domain

- Changed domain name from healthcare “cost” to “spending”

Total subdomain:

- Moved “out-of-pocket spending” to **Total** subdomain
- Removed:
 - healthcare spending per capita
 - healthcare spending growth per capita

Healthcare spending domain

Employer subdomain:

- Clarified that metrics include self-insured employers

Commercial subdomain:

- Added:
 - Average monthly marketplace premiums”
 - 27 year old, with income of \$25,000
 - Family of four with income of \$60,000
- Changed subdomain name to **Commercial/Marketplace**

Healthcare spending domain

Medicare subdomain:

- Removed:
 - Medicare spending per enrollee
 - Medicare spending growth per enrollee
- Replaced with
 - Amount of price-adjusted Medicare spending per enrollee
 - Total cost for chronic conditions, per Medicare beneficiary
 - Include dually-eligible enrollees or Medicare only?

Healthcare spending domain

Medicaid subdomain:

- Change in source:
 - Medicaid spending per enrollee (all enrollees)

Healthcare system domain

Preventive services subdomain:

- Removed:
 - Diabetes A1c measurements
- Replaced with:
 - Diabetes with long-term complications

Access domain

Affordability & coverage subdomain:

- Change in source:
 - Unable to see doctor due to cost

Behavioral health subdomain:

- Add new metric around youth/child mental health
 - Children without private insurance covering mental/emotional health
 - Youth with MDE who did not receive mental health services

Access domain

Workforce subdomain:

- Change in name:
 - Underserved, primary care physicians
 - Underserved, dentists
 - Underserved, psychiatrists

Public health and prevention domain

Public health system subdomain

- Changed name of subdomain
 - Was “Public health workforce and accreditation”
- Replaced
 - Accreditation of local health departments with comprehensiveness of public health system
- Revised
 - Public health workforce (state + local)

Public health and prevention domain

Multiple subdomains

- Replaced
 - WIC at farmers markets and youth distracted driving with HIV prevalence or youth marijuana use; low birth weight; and teen pregnancy
 - Safe sleep by income level with low birth weight by race/ethnicity for equity break-out metric

Social and economic environment domain

Education subdomain

- Revised
 - High school graduation (revised methodology)
 - Educational attainment (% ages 25+ with bachelor's degree) changed to some college (% 25-44 with some post-secondary education)

Social and economic environment domain

Multiple subdomains

- Replaced
 - Social-emotional support, teen birth rate and single-parent households with labor force participation rate, low-income working families with children and adult incarceration

Equity subdomain

- Revised
 - Income inequality (median household income ratio, rather than Gini coefficient)

Physical environment domain

Air, water and toxic substances subdomain

- Revised
 - Lead poisoning (changed from BLL >5 ug/dL to >10 ug/dL; Ohio map)
- Replaced
 - Complete streets with bike and pedestrian infrastructure funding

Equity subdomain

- Added lead poisoning by geography and/or race/ethnicity

Finalizing the *2017 Dashboard* metrics

Metric changes

When you recommend a metric for addition to the *Dashboard* you need to:

- Identify which existing metric the new metric should replace.
- Provide a link or source where we can find state-level data for the new metric.
- “Make the case” for the metric using the [metric selection criteria](#).

Discussion questions

1. Do you think the current set of metrics aligns with the *Dashboard* conceptual framework and tracking progress towards health value? If not, what needs to be modified?
2. Do you think the current set of metrics reflects a good balance across the life course? If not, what's missing?

Are there any recommended metrics that you would to replace with a metric that is currently on the "bike rack"?



Are there any data/metric gaps you'd like to include on the "wish list"? How can we raise awareness through the *Dashboard* about these data/metric gaps?



Next steps

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Health Measurement Advisory Group

February 11, 2016 meeting materials

- [Pre-meeting materials](#)
- [Meeting presentation slides](#)
- [Meeting notes](#)
- [Metric selection workgroup list \(As of 4.1.2016\)](#)
- [Bike rack and wish list metrics from 2014 Health Value Dashboard](#)
- [Metric selection criteria finalized at 2/11/2016 HMAG meeting](#)

Upcoming meetings

Population health workgroup

- Friday, March 11, 10:00 a.m.-11:30 a.m.
 - [Meeting notes](#)
 - [Population Health metric workgroup pre-meeting materials](#)