

Group close to issuing health clinic report cards

By Carol M. Ostrom, Seattle Times staff reporter, January 4th, 2007

For the past several years, employers have fretted that health-care costs have been rising at twice the rate of inflation. Starbucks, for example, announced in late 2005 that it spent more on employee health insurance that year than it had on coffee beans. Other local employers, from King County to Boeing, have looked for ways to figure out which health providers give "high-quality, efficient" health care — which usually translates as "good and low-cost" — and, just as important, which ones don't.

Enter the Puget Sound Health Alliance, a coalition of insurers, government agencies and some of Puget Sound's largest businesses, which is gearing up to crunch all that raw data — your health-care insurance claims — and, by mid-2007, spit out public report cards rating health clinics.

To hear those most involved, it's a historic effort. And Wednesday, with a hailstorm of buzzwords, federal Health and Human Services Secretary Mike Leavitt, Gov. Christine Gregoire and King County Executive Ron Sims joined a slew of other government and business leaders at Starbucks headquarters in Seattle to praise the effort and predict it all will soon become meaningful to average consumers of health care, too.

Leavitt said his department has qualified the alliance to now include Medicare patient information, which would greatly expand its database, presumably making ratings more accurate. Gregoire said her proposed 2007-09 budget would include money to help the alliance expand to include statewide claims data.

For its first report, the alliance will compare selected clinics on the way they take care of heart disease, diabetes, low back pain, depression, and the use of medications.

Eventually, business members of the alliance expect to use these ratings. But for now, the businesses won't say how. The bottom-line goal, though, is to improve health care and stem cost increases, they all say.

But getting there won't be easy. Aggressive advertisers push expensive drugs and treatments directly to patients, even though they may be no more effective than less-expensive alternatives. Another problem: Ratings now are based entirely on insurance claims, not on clinical data. Doctors have objected, saying claims data alone can't accurately reflect quality. And some employees and their unions worry that companies are more interested in saving money than in promoting their health.

In one recent local example, Regence BlueShield tried to rate the "quality and efficiency" of doctors on the Boeing engineers' union health plan, excluding physicians who didn't measure up. The doctors sued and the insurer abandoned the effort.

Despite such questions, there are pockets of harmony in the medical world, says Dr. Hugh Straley, the Group Health Cooperative medical director who serves on the health alliance's quality-improvement committee.

The alliance plans to move forward, slowly adding measurements where there is consensus about what constitutes good, cost-effective health care, says spokeswoman Diane Giese. "You've got to start somewhere," she says. "Trying to get it perfect means it will never happen."

Information

The Puget Sound Health Alliance: www.pugetsoundhealthalliance.org

Health and Human Services Secretary Mike Leavitt's proposals: www.hhs.gov/transparency