Long Range Plan for Consumer Health Care Transparency

Implementation Status Report
September 2008

Florida Center for Health Information and Policy Analysis and
State Consumer Health Information and Policy Advisory Council

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Table of Contents

Introduction

In 2007, the Agency for Health Care Administration (Agency) engaged in a formal planning process to develop a long range plan for the enhancement of its consumer health care transparency initiatives. The plan will help guide the Florida Center for Health Information and Policy Analysis (Florida Center) in its mission to provide information about health care services to consumers and to serve as an information resource to researchers and policy-makers. With the assistance of the State Consumer Health Information and Policy Advisory Council and its technical workgroups, the Agency has developed a set of goals that address opportunities for expanding available consumer information related to hospitals, other facilities, physicians, and health plans.

The Agency has established goals to enhance the Florida Center's effectiveness in providing transparent health care price and quality information to the general public. *Transparency* refers to the clear communication of essential information that consumers need to make choices about their health care. In addition the Agency established strategic goals for the promotion of health information technology, which is a related responsibility of the Florida Center that supports both transparency and Florida's health care infrastructure.

At its April 2008 meeting, the Advisory Council created the Data Transparency Steering Committee for the purpose of facilitating the compilation and reporting of comparative data on health care services and setting content and format standards for reporting on the website. The new committee will take a lead role in assisting the Advisory Council and Agency in refining and implementing the Council's goals.

This document provides:
- An update of the long-range plan and the goals established by the Agency in 2007;
- A brief discussion of the background to the development of the goals;
- Statutory authority related to the plan; and
- Accomplishments of the Florida Center.

More information about the activities of the Florida Center is available in the Florida Center's Annual Report.[1]

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[1] Available online at www.floridahealthfinder.gov.

Background Information

The 2004 Affordable Health Care for Floridians Act requires that the Agency for Health Care Administration (Agency) develop a transparent health care performance and web-based reporting system.[2] The Act requires the State Consumer Health Information and Policy Advisory Council (Advisory Council) to make recommendations to the Florida Center for Health Information and Policy Analysis (Florida Center) to accomplish the requirements of the legislation. The Act was codified in law in Section 408.05 of Florida Statutes.

The Florida Center worked with the Advisory Council to implement a long-range plan to make available health care quality measures and financial data to allow consumers to compare health care services. The health care quality measures and financial data the Agency is directed to make available includes data on pharmaceuticals, physicians, health care facilities, and health plans and managed care entities. The law requires the Agency to make available patient safety indicators, inpatient quality indicators, and performance outcome and patient charge data collected from health care facilities. The Agency determines which conditions, procedures, health care quality measures, and patient charge data to disclose with input from the Advisory Council. The Act also sets specific requirements for the publication of infection rates, mortality rates and complication rates which the Agency accomplished.

The statute requires that the Agency make available performance measures, benefit design, and premium cost data from health plans licensed pursuant to chapter 627 or chapter 641. The Agency determines which health care quality measures and member and subscriber cost data to disclose with input from the Advisory Council.

The Agency determines the method and format for public disclosure of data with input from the Advisory Council. The statute specifies that, at a minimum, the data shall be made available on the Agency's Internet website in a manner that provides consumers the opportunity to conduct an interactive search that allows them to view and compare the information for specific providers. The website must include such additional information as is determined necessary to ensure that the website enhances informed decision making among consumers and health care purchasers. The website must also include appropriate guidance on how to use the data and an explanation of why the data may vary from facility to facility.

The Agency is required to report on the status of its implementation of the long range plan annually as specified in s. 408.05(3)(k), F.S.

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[2] House Bill 1629.

The State Consumer Health Information and Policy Advisory Council

The mission of the State Consumer Health Information and Policy Advisory Council is to advise the Florida Center relative to the dissemination of available health information as specified in statute. Activities related to the dissemination of health information include the identification, collection, standardization, sharing, and coordination of health-related data among federal, state, local, and private entities.

The Council makes recommendations for improvements in the health information collected and disseminated for purposes of public health, policy analysis, and transparency of consumer health care information. Florida Statutes provide that the Florida Center will collect, compile, coordinate, analyze, index, disseminate, and utilize both purposefully collected and existing health-related data and statistics.

The Advisory Council is also charged with advising the Florida Center on the development and implementation of a long-range plan for making available health care quality measures and financial data that will allow consumers to compare health care services. The Advisory Council meets quarterly at the Agency offices in Tallahassee or at various other locations in the state. Meetings are noticed in the Florida Administrative Weekly and are open to the public in accordance with the Florida Sunshine Laws.

The Advisory Council delegates special projects to its technical workgroups that meet on an as needed basis. The current workgroups are the Health Plan Consumer Report Technical Workgroup (Health Plan), the Health Care Facilities Technical Workgroup (Facilities), the Physicians Data Technical Workgroup (Physician), the Public Relations Technical Workgroup (Public Relations), and the Health Information Exchange Coordinating Committee (HIE Committee). The HIE Committee was created in December 2007 to advise and support the Agency in developing and implementing a strategy to establish a privacy-protected, secure, and integrated statewide network for the exchange of electronic health records.

In addition to the technical workgroups, a Data Transparency Steering Committee was created in April of 2008 to review national standards for reporting and make recommendations to the Advisory Council on defining a standard method of reporting information for facilities, physicians and health plans. The committee is comprised of the Chair and one member from the Health Plan, the Health Care Facilities, the Public Relations, and the Physicians Data Technical Workgroups and other persons with technical or related expertise as needed. This committee meets at the call of the Advisory Council, or at least semi-annually at a minimum.

Initial Accomplishments

The Florida Center contracts with I.S. Consulting, Inc. which utilizes methodologies from the Agency for Healthcare Research and Quality (AHRQ) and 3M to report risk adjusted hospital and ambulatory surgical center performance data on FloridaHealthFinder.gov. The published performance data include mortality rates (AHRQ Measures), complication rates (AHRQ Measures), hospital-acquired infection rates (AHRQ Measures) and hospital readmissions (3M- Potentially Preventable Readmission). Ambulatory Surgical performance data are risk adjusted utilizing the 3M Ambulatory Patient Groups (APGs) for reporting charges for select procedures. The Florida Center publishes the definitions of all of the data, descriptions of each procedure, and an explanation about why the data may differ from facility to facility. In addition, users may view and compare information for specific facilities when utilizing the interactive search tool and map.

All the Florida Center data and links are available on the new consumer website www.FloridaHealthFinder.gov launched in November 2007. This website contains new features and information as well as information previously available on the original websites, FloridaCompareCare and FloridaHealthStat. One of the most notable additions is the user-friendly A.D.A.M. Health Encyclopedia and Symptom Navigator. The A.D.A.M. Health Encyclopedia includes thousands of unique articles and illustrations. Some of the health care topics include medical conditions and procedures, symptoms, nutrition, preventive care, surgeries, treatments, and much more. The Symptom Navigator offers a consumer friendly interface that allows a user to click on a picture of a human body, indicate where it hurts and find out more about the symptom to determine whether to treat the symptom at home or see a doctor. Additional tools include links to health care data on certain medical conditions and procedures, when available, such as hospitalizations and readmission rates in Florida, as well as the average length of stay and average charges for those conditions or procedures.

In June, 2005, as a result of a collaborative effort by the Agency and the Office of the Attorney General, www.MyFloridaRx.com went live. This website was developed by the Florida Attorney General and the Agency to help consumers shop for the lowest prescription drug prices in their area. The Florida Prescription Drug Price website provides pricing information for the 100 most commonly used prescription drugs in Florida. The prices are the "usual and customary prices," also known as retail prices, reported monthly by pharmacies. The prices listed on the website represent the price that an uninsured consumer, with no discount or supplemental plan, would normally pay.

Data collected on health plans can also be found on the www.FloridaHealthFinder.gov website. The health plan consumer search tool provides information on member satisfaction quality of care, available HMOs and coverage areas that consumers can access through an interactive map.

Consumers can conduct searches interactively and compare information among health plan providers. The Advisory Council provided input on the method and format of the health plan data published on the website. The website enhances the informed decision-making of consumers and health care purchasers, and includes guidance on how to use the data and explains why measures can differ among providers.

A glossary is available online that describes the terms found on the website as well as information on how the data was collected and how it is being presented. Additionally, a link is provided to the National Committee on Quality Assurance (NCQA) Health Plan Report Card. This is an interactive tool designed to help consumers find a health plan. A link is provided to the Centers for Medicare and Medicaid that allows consumers to compare Medicare health plans on costs, benefits, quality of care, and member satisfaction.

Information on claims payment data for Florida Health Plans is provided through a link to the Office of Insurance Regulation at the Florida Department of Financial Services. The site allows the user to view a set of financial indicators for health insurance plans. These indicators include enrollment, gross annual premium, and reported average days to pay claims. The Office of Insurance Regulation also provides a website that allows the user to view average health insurance premium rates (small group) for selected health insurance plans.

Additional financial information is available through a link to the National Association of Insurance Commissioners (NAIC). The site allows the user to view a set of financial indicators such as premiums earned, medical loss ratio, capital and surplus, assets and liabilities, and current ratio for a chosen health insurance company. The site also provides health plan complaint information.

The Agency has legislative authority to develop a strategic plan for the adoption and use of electronic health records. The Agency is authorized to administer grants for planning, implementation of training projects to advance the development of a health information network and evaluate the outcomes of grant contracts; integrate health care data from state agencies and make the data available to health care practitioners through the health information network; and provide technical assistance to support the statewide health information network.

To accomplish this, the Agency is working with many professional associations and other stakeholders across the state. Key participants are Regional Health Information Organizations and state level initiatives including private sector initiatives promoting health information exchange. The long term goal is to support statewide health information exchange. The success of the statewide network depends on the long-term sustainability of each local participant, and their collective ability to work together to achieve a common goal of exchanging medical records for the benefit of patients across the state.

Key Transparency Components

To develop goals for continuing the Agency's transparency initiative, a planning retreat was held in June, 2007. Present at the retreat, facilitated by Vanderbilt University's Center for Better Health, were members of the Advisory Council, Technical Workgroups, and Agency staff.

One outcome of the retreat was the identification of five key components of a transparent health system including:

1. **Tools for individuals to manage their personal health**: Providing a trusted resource to Floridians so they can access evidence-based data and information to manage their personal health, and the health of family members.

2. **Tools for consumers to manage their relationships with their physicians**: Providing tools to Floridians to (1) access physicians with skills and experience appropriate to medical needs, and (2) choose providers based on published operational and quality data.

3. **Tools that personalize Agency-generated information for individual consumers**: Providing data analyzed by the Agency and reports to individual Floridians to assist in their health care decision-making. Data should be accessible in two formats: (1) a general format and (2) a personalized format that allows consumers to customize their searches, alerts, data feeds, etc.

4. **Tools for consumers to compare providers on "success" by disease or procedure**: Providing a consistent method for Floridians to compare risk-adjusted outcomes – by provider – in a format that is meaningful in selecting a health partner for their care.

5. **Tools for consumers to make "price" and "quality" trade-off decisions**: Providing a set of tools for Floridians to make balanced decisions, based on their individual needs, about the total expected price and quality for defined episodes of care.

Plan Goals and Implementation Status

The Advisory Council developed the following goals and action steps for enhancing Florida's transparency and health information technology initiatives. These goals were developed and reviewed by the technical workgroups whose members have subject matter expertise and have advised the Agency on related tasks currently underway. The status of work in accomplishing these goals is provided below and is current as of July 2008.

1. **Provide downloadable Consumer Health Tools on the Florida Health Finder Website.**

> **Details:** Provide templates of prescription lists, doctor contacts, and a history form on the website. Consumers will be able to enter their own personal information, print the form, email the form, and/or save the form on their own personal computer.
>
> **Statutory Authority:** 408.05 (3)(k)3, F.S.
> **Data Requirements:** No data reporting required.
> **Success Metrics:** Website visits and survey findings.

Work Groups	Legislation	Budget	Time
Facilities	No	Maybe	1 Year

Action Steps: Provide templates of prescription lists, doctor contacts and a medical history form on the website.

Status: The Florida Center is assessing available personal health record forms, electronic personal health record developments, and the best approach to meet unique consumer needs. Tip sheets have been recently added that give consumers a quick check list when preparing for a hospital visit and advice on how to ask hospitals and doctors about prices.

Key Transparency Components: Tools that personalize AHCA-generated information for individual consumers.

2. **Publicly report actual prices for all health care services.**

> **Details:** The current listed prices are not representative of the prices that most Floridians pay for health care. To the extent possible the Florida Center will seek out additional data sets that include more applicable pricing data.
>
> **Statutory Authority:** 408.05 (3)(k), F.S.
> **Data Requirements:** Additional data collection may be required.
> **Success Metrics:** Website visits and survey findings.

Work Groups	Legislation	Budget	Time
Facilities/Health Plan	Maybe	Yes	3 Years

Action Steps: Agency staff will explore the feasibility of collecting claims data and required statutory changes. To the extent possible, the Florida Center will seek out additional data sets that include more applicable pricing data such as claims data or data sets that provide usual and customary prices.

Status: Agency staff presented information on claims data collection to the work group. It was recommended that staff continue to research, study feasibility and develop a plan for incremental implementation. The ability to access Medicare, Medicaid and state employee claims data and use it for this purpose will be examined.

Agency staff is also researching the feasibility of collecting diagnostic imaging data. Florida State University will study and report on emergency department pricing (charges) in FY 08-09.

Key Transparency Components: Tools for consumers to make "price" and "quality" trade-off decisions.

3. **Continue to solicit consumer feedback and evaluate the website.**

> **Details:** As the Agency continues to develop the Florida Health Finder website, the information on the site must be relevant, important, and easily accessible to the consumer. Consistent evaluation and feedback from site users will engender trust and help us to better meet consumer needs.
>
> **Statutory Authority:** 408.05 (3)(k)3, F.S.
> **Data Requirements:** Voluntary data collection.
> **Success Metrics:** Website visits and survey findings.

Work Groups	Legislation	Budget	Time
Facilities	No	Maybe	Ongoing

Action Steps: Agency staff will provide periodic updates on consumer survey methods and findings for review by the workgroup. Agency staff will put together scenarios so the workgroup can provide feedback on the ease of locating information on the website.

Status: The Florida Center has reported survey results including customer suggestions, most popular pages and other information. Staff has worked with the vendor to increase website visibility, make the customer survey more prominent, and provide website tutorials and navigation tips. Staff is currently drafting scenarios for use by the workgroup as an exercise to locate information on the website. This feedback will provide valuable information on areas to enhance.

Key Transparency Components: A trusted resource for tools for individuals to manage their personal health.

4. **Integrate cutting edge Internet technology to establish a virtual community on Florida Health Finder.**

Details: There are numerous Internet technologies that are available to enhance the Florida Health Finder website such as: online personal health profiles, moderated health information web bulletin boards, email health alerts, social networking site (Facebook, You Tube, etc.), and much more. **Statutory Authority:** 408.05 (3)(k)3, F.S. **Data Requirements:** No data collection requirements. **Success Metrics:** Website visits and survey findings.	

Work Groups	Legislation	Budget	Time
Facilities	No	Maybe	3 Years

Action Steps: Agency staff will research what is available (Facebook, You Tube, e-mail health alerts) whether these options provide an opportunity for linking to existing sites and the cost.

Status: The Agency is researching the feasibility of utilizing additional Internet services, unmet consumer needs, ADA requirements and other technical issues.

Key Transparency Components: Tools that personalize Agency-generated information for individual consumers.

5. **Improve and streamline Data Analysis Methodology.**

Details: The Florida Center must continue to revise and update its data collection and analysis methodology to maintain and improve its high standard of quality. A few of the ideas discussed at the retreat include: ● Publicly report Potentially Preventable Readmissions and Complications; ● Update APR-DRGs as needed; ● Improve representation of pediatric data; ● Increase the timeliness of updating the data online; and ● Redesign and improve the data collection system (including adverse incidents). **Statutory Authority:** 408.061(1), F.S. **Data Requirements:** Revise data collection requirements. **Success Metrics:** Website visits and survey findings.

Work Groups	Legislation	Budget	Time
Facilities	No	Yes	1-3 Years

Action Steps: The Agency will review data collected, assess other methodologies for reporting, and align submissions with other reporting entities whenever possible.

Status: The A.D.A.M. patient education tool was added to the Florida Health Finder website in November 2007. This tool includes the A.D.A.M. Health Encyclopedia and System Navigator. It includes thousands of unique articles and illustrations on medical conditions and procedures, symptoms, nutrition, preventive care, surgeries, treatments, and much more. When available, a link is provided to cost and quality information for the condition on the website.

The collection of Surgical Infection Prevention (SIP) data was found to be redundant with data currently provided to CMS, and the Agency deleted the requirement in rule in June 2008.

The first publication of Potentially Preventable Readmissions for 54 conditions and procedures was released in June 2008. The *Readmission Rate* is the percentage of patients who were readmitted to the same hospital or another short term acute care hospital for the same or related condition within 15 days of the initial discharge. Readmissions are costly and may indicate an opportunity to improve quality of care.

Legislation passed in the 2008 legislative session requires that the Agency increase the number of procedures reported on the website and provide the range of prices (charges) in addition to the average charges. Work related to these additions is underway and expected to be completed by the next data update.

The Agency has received a grant from the federal Agency for Health Care Research and Quality to perform a study to determine the feasibility of collecting clinical laboratory data linked to inpatient data currently reported. Several Florida hospitals have volunteered to participate in the study to be completed in 2009.

Proposed rules to update data collection requirements, streamline the certification process, and integrate rehabilitation hospital reporting are expected to be completed by early 2009 to be implemented in 2010.

Key Transparency Components: Tools for consumers to compare providers on successful outcomes by disease or procedure.

6. Promote the Florida Health Finder Website.

> **Details:** In order for Florida Health Finder to become the one stop shop for health care resources in Florida, Floridians must know about the site. Creative low cost website promotion must be ongoing. Promotion may include: website brochure development, press kits, website posters, Agency promotion partners, etc.

Statutory Authority:	408.05 (3)(k)3, F.S.		
Data Requirements: Voluntary data collection.			
Success Metrics: Website visits and survey findings.			

Work Groups	Legislation	Budget	Time
Public Relations	No	Maybe	Ongoing

Action Steps: Create ongoing low cost website promotion. The PR workgroup will determine how to roll out promotional materials, what resources are available and who the target audience is.

Status: A press kit including brochures and bookmarks was developed and produced and provided to members of the Advisory Council and workgroups to use in presentations and at conferences. These items were distributed at the Nova Southeastern University's Senior Health Fair on March 30, 2008. A copy of the Florida Health Finder icon with hyperlink to the website was provided to members for use in their email correspondence and on their industry's Web pages. A pod cast script has been developed that may be presented by the Governor. A media event is being planned that will be held in middle schools and high schools and focus on classes using the website as a tool in their daily lessons.

The Agency has initiated a partnership with the Florida Electronic Library and will make use of the Florida Electronic Library's consumer survey as a starting point for determining those health related issues about which consumers are most seeking information. The Council has recommended expanding the partnership to design and develop a teaching model for librarians that will educate on the use of the website and its contents so librarians can direct and assist consumers in the use of the website.

The Agency is currently testing an Internet campaign using Google AdWords. When someone searches for certain health care keywords or participating health care websites, an ad for our website will appear on a rotating basis. The Agency will evaluate the increase in website traffic that results and determine whether to continue to purchase the ads.

Key Transparency Components: A trusted resource for tools for Individuals to manage their personal health.

7. Add Medicaid information to the Florida Health Finder Website.

Details: Add a Medicaid portal to the Florida Health Finder Website including Medicaid specific data, a physician locator, information on Medicaid HMO plans, Choice Counseling, etc.

Statutory Authority: 408.063, F.S.
Data Requirements: Use data available from Florida Medicaid.
Success Metrics: Website visits and survey findings.

Work Groups	Legislation	Budget	Time
Health Plan	No	Maybe	2 Years

Action Steps: The Florida Center and Florida Medicaid will coordinate to develop a prototype of a Medicaid beneficiary website.

Status: Information about Medicaid services and expenditures is now posted on FloridaHealthFinder.gov website. This new information includes Medicaid expenditures for hospitals, nursing homes, home health agencies, hospice, physicians and more. It also provides Medicaid beneficiaries with information on Medicaid services, finding Medicaid doctors, dentists and specialists, choosing a Medicaid Managed Care Plan, and general information on Medicaid and Medicare.

Additionally, collaborative meetings have been held regarding posting additional performance measures for Medicaid health plans. Discussion continues on content and hosting.

Key Transparency Components: Tools that personalize Agency-generated information for individual consumers.

8. **Provide consumers access to their health insurance plan information on the Florida Health Finder Website.**

Details: Provide consumers with information on health plan premiums, deductibles, co-pays and co-insurance.

Statutory Authority: 408.05 (3)(k)2, F.S.
Data Requirements: Additional data collection may be required.
Success Metrics: Website visits and survey findings.

Work Groups	Legislation	Budget	Time
Health Plan	Maybe	Yes	3 Years

Action Steps: The Agency will explore alternative interim approaches to collecting claims data to add more information about health insurance plans.

Status: The website currently provides a link to the Office of Insurance Regulation (OIR) website where average health insurance premium rates for small groups are provided. Another OIR link provides a report that shows financial indicators and enrollment data for Florida health insurance plans including total premiums, losses, covered lives, and average number of days taken to pay claims.

Claims data, if collected, may provide more detailed information about the payments made by health plans to health care facilities and providers and other information.

Staff is also working to identify additional health plan financial information that might be disseminated to researchers and health care professionals.

Key Transparency Components: Tools that personalize Agency-generated information for individual consumers.

9. **Display physician quality & price information on the Florida Health Finder website.**

> **Details:** The strategic planning teams envision displaying disease outcome data, price information, and procedure volume data by physician on the website. There was also discussion by several of the teams about directly linking to the Department of Health's Medical Quality Assurance website database.
>
> **Statutory Authority:** 408.05 (3)(k), F.S.
> **Data Requirements:** Additional data collection may be required.
> **Success Metrics:** Website visits and survey findings.

Work Group	Legislation	Budget	Time
Physician	Maybe	Maybe	1 - 3 Years

Action Steps: The strategic planning teams envision displaying disease outcome data, price information, and procedure volume data by physician on the website. There was also discussion by several of the teams about directly linking to the Department of Health's Medical Quality Assurance website database.

Status: The Florida Center is currently assessing the feasibility of using the Clinical Classification Software (CCS) groupings developed at the federal Agency for Healthcare Research and Quality (AHRQ). The CCS is a tool for clustering patient diagnoses and procedures into a manageable number of clinically meaningful categories. The Florida Center is also working with the vendor to obtain physician volumes on various procedures for reporting on the website. At the recommendation of the Advisory Council, the Florida Center is researching what has been done on both a federal and state level for reporting physician data.

Key Transparency Components: Tools for consumers to manage their relationships with their physicians.

10. **Develop the infrastructure for the use of Health Information Technology**

> **Details:** At the strategic planning meeting there was an emphasis on the need for widespread adoption of health information technology. Most industrial sectors in the USA have realized enormous savings from implementing information technology (IT). The health care industry has

lagged behind and has not realized the benefits of incorporating IT into its system. Benefits accrue in the administrative, clinical and record-keeping sectors of the health care industry, and are awaiting appropriate levels of investment to be realized. Infrastructure development is essential to support health information technology adoption.

Statutory Authority: 408.062(5), F.S.
Data Requirements: Voluntary data collection.
Success Metrics: Technology adoption rates and survey findings.

Work Groups	Legislation	Budget	Time
HIE Committee	No	Yes	Ongoing

Action Steps: Develop broadband infrastructure for telemedicine and health information exchange.

Status: Big Bend RHIO received a Federal Communications Commission (FCC) funding award in 2008; the Agency is providing technical support and exploring possible extension of this project to other regions.

Key Transparency Components: Tools for consumers to manage their relationships with their physicians.

11. Promote statewide use of Health Information Technology (HIT)

Details: The promotion of HIT in the provider community is essential to increasing its use. Promotional efforts should explain the benefits of implementing HIT - for the physician who will have access to more timely and accurate information to make a diagnosis, and for the patient who will receive higher quality health care at the point of service. To this end, a comprehensive, statewide promotion strategy should be developed, which can be combined with incentive programs to engage providers in adoption of HIT.

Statutory Authority: 408.062(5), F.S.
Data Requirements: Voluntary data collection.
Success Metrics: Technology adoption rates and survey findings.

Work Groups	Legislation	Budget	Time
HIE Committee	Yes	Yes	Ongoing

Action Steps: Promote health information technology through collection and dissemination of metrics on adoption and other provider and consumer promotional materials. Promote incentive programs for electronic prescribing.

Status: An electronic prescribing clearinghouse website was initiated in 2007 and expanded in 2008.   Metrics on electronic prescribing were released in January 2008 and are to be updated in August.

A privacy and security resource center and provider education toolkit are under development through funding from the Health Information Security and Privacy Collaboration. Agency staff is coordinating with professional medical associations in the development of the toolkit and conducting educational outreach.

The Agency is evaluating the recently enacted electronic prescribing incentives program for Medicare as a model for Florida Medicaid.

Key Transparency Components: Tools for consumers to manage their relationships with their physicians.

12. Promote and support the Regional Health Information Organizations (RHIOS).

> **Details:** The Florida RHIOs are health information organizations that provide and promote health information exchange (HIE) in the state. HIE is the foundation of electronic health records and the first step towards statewide interoperability of medical record systems. The RHIOs must be supported in their development phase. As they attain maturity and create sustainable models of growth, the funding from the state can be reduced. However, without a stable basis for HIE in Florida's communities, the sharing of electronic health care records among providers will likely not move forward quickly.
>
> **Statutory Authority:** 408.05(4)(a)9.(b)(c), F.S.
> **Data Requirements:** Voluntary data collection.
> **Success Metrics:**   Technology adoption rates and survey findings.

Work Groups	Legislation	Budget	Time
HIE Committee	Yes	Yes	Ongoing

Action Steps: Agency staff will administer state grant funding for the adoption and sharing of electronic health and medical records. In addition, staff will seek grant funding from other sources and identify information technology companies or other partners that are willing to invest resources to support local health information organizations in the absence of state funding. The Agency will also facilitate data sharing among health information organizations and provide other technical support.

Status: The Agency continued administering the Florida Health Information Network grants program in fiscal year 2007-2008 that has supported the development of RHIOs and other health information organizations. A "point of care" grants program was funded for fiscal year 2008-2009 and is under development. This grants program supports the development of outpatient clinic information technology. Agency staff is

collaborating with health information organizations to facilitate provider access to Medicaid medication data and electronic prescribing.

Key Transparency Components: Tools for consumers to manage their relationships with their physicians.

13. **Develop Personal Health Records that can be displayed and accessed online by Florida residents.**

> **Details:** The ultimate goal in consumer transparency is for each patient in Florida to have access to his or her health care information including personal health information that is collected by state health care programs, such as information that can be found in Medicaid claims. A personal health record (PHR) would integrate health care records for each Floridian. Florida citizens would be able to look up their health care history and could augment those records with their own observations or information. The PHR sponsored by the State should be interoperable with other PHRs to provide a complete medical history resource for patients, which could become an important factor in the long term care of Florida's citizens.
>
> **Statutory Authority:** 408.05(4)(a)9, F.S.
> **Data Requirements:** Voluntary data collection.
> **Success Metrics:** Technology adoption rates and survey findings.

Work Groups	Legislation	Budget	Time
HIE Committee	Maybe	Yes	3 Years

Action Steps: Develop consumer materials to promote use of Personal Health Records. Explore feasibility of using the FloridaHealthFinder.gov as a gateway to the Medicaid PHR and identify a target population for pilot promotion.

Status: A Florida PHR toolkit was released in May 2008 on the Agency websites. Staff is currently working on the development of a brochure that can be downloaded and additions to the toolkit.

Key Transparency Components: Tools for consumers to manage their relationships with their physicians.

Barriers to Implementation and Recommendations

Florida Statutes (s. 408.05 (3)(k), F.S.) provide that the Agency shall identify any barriers to implementation, and recommendations of changes in the law that may be enacted by the Legislature to eliminate the barriers.

The Agency is currently exploring the feasibility of collecting claims data and whether legislation is necessary to effectively report price information to consumers. Price data currently collected is limited to Medicaid claims, hospital inpatient, emergency department, and ambulatory surgery charges, excluding physician fees, ambulatory surgery center prices, and pharmaceutical usual and customary prices.

The Agency is also developing a legislative budget request to update and upgrade the Florida Center's patient data collection and quality control systems.

Appendices

A. Quality Measures on Florida Health Finder Website

B. Statutory Advisory Groups

Appendix A: Quality Measures on Florida Health Finder Website

FloridaHealthFinder.Gov is a consumer-focused website that provides a clear, transparent view of performance data. The information can help consumers in choosing a health care facility or health plan that best serves their needs and can assist researchers studying the status of health care in Florida.

The site provides the following quality measures:

Hospital Quality and Outcome Measures

Overall Facility Performance – Volume, Risk Adjusted Average Charges, and Risk Adjusted Average Length of Stay

Information on approximately 82 conditions and procedures (both adults and pediatrics) – Volume, Risk Adjusted Average Charges, Risk Adjusted Average Length of Stay, Adult Readmissions (excluding cancer related conditions/procedures except mastectomy and deliveries)

Inpatient Mortality Data for Adults (AHRQ IQIs):
Inpatient Quality Indicators developed by AHRQ reflect quality of care inside hospitals including inpatient morality for medical conditions and surgical procedures.

Mortality Inpatient Procedures

1. Abdominal Aortic Aneurysm Repair Mortality (IQI 11)
2. Coronary Artery Bypass Graft (IQI 12)
3. Craniotomy Mortality (IQI 13)
4. Esophageal Resection Mortality (IQ I8)
5. Hip Replacement Mortality (IQI 14)
6. Pancreatic Resection Mortality (IQI 9)

Mortality Inpatient Conditions

1. Acute Myocardial Infarction (IQI 15)
2. Acute Myocardial Infarction, Without Transfer Case (IQI 32)
3. Acute Stroke Mortality (IQI 17)
4. Congestive Heart Failure Mortality (IQI 16)
5. Gastrointestinal Hemorrhage Mortality (IQI 18)
6. Hip Fracture Mortality (IQI 19)
7. Pneumonia Mortality (IQI 20)

Inpatient Complication/Infection Data for Adults (AHRQ PSIs):
Patient Safety Indicators (PSIs) are developed by AHRQ to reflect quality of care inside hospitals and focus on potentially avoidable complications and iatrogenic events.

PSI Measures:

1. Iatrogenic Pneumothorax (PSI 6)
2. Infections Due to Medical Care (PSI 7)
3. Postoperative Sepsis(PSI 13)

Ambulatory (Outpatient) Surgery Centers

Overall Facility Performance – Volume and Risk Adjusted Average Charges

Information on approximately 37 procedures (both adults and pediatrics) –
Volume and Risk Adjusted Average Charges

Health Plan Quality Measures

Health Plan Quality of Care Indicators (HEDIS Measures)

These are a set of measures that are used to report the performance of health plans. Consumers can use this information to help them to decide which health plan to choose. Purchasers of health care use the information to compare health plans and determine the relative value of care offered by managed care health plans. The measures allow the public to understand how well health plans achieve results that matter, such as, how effective and accessible is the care delivered. Data for these measures come from the Health Plan Employer Data & Information Set (HEDIS). These measures are available only from managed care health plans, mainly HMOs.

HEDIS Measures:

1. Adolescent Well-Care Visits
2. Asthma Medications for Long-Term Control
3. Beta Blocker Medicine Prescribed After Heart Attack
4. Breast Cancer Screening
5. Cervical Cancer Screening
6. Chlamydia Screening in Women
7. Controlling High Blood Pressure
8. Diabetes Care: Lipid Profile Performed
9. Diabetes Care: Lipids Controlled
10. Diabetes Care: Dilated Eye Exam Performed

11.   Diabetes Care: Kidney Disease Screening
12.   Well-Child Visits, First Fifteen Months of Life, Six or More Visits
13.   Well-Child Visits, Ages 3-6 Years

Health Plan Member Satisfaction Indicators (CAHPS Measures)*
Obtaining information on a member's satisfaction with a particular health plan is a key component in the decision of choosing a health plan. This information provides a general indication of how well the plan meets the members' expectations. Information on member satisfaction is obtained from the Consumer Assessment of Health Plans Survey (CAHPS). Health care organizations, health care purchasers and consumers use CAHPS results to (1) assess the patient-centeredness of care, (2) compare health plan performance, and (3) improve quality of care. Below are descriptions of the specific CAHPS questions that are displayed on the website:

CAHPS Measures:

1.   Ease in Getting Needed Care or Treatment
2.   Ease in Getting Appointments with a Specialist
3.   Find and Understand Information About Plan
4.   Getting Help from Customer Service
5.   How Well Providers Communicate with Members
6.   Overall Plan Satisfaction
7.   Rate the Number of Doctors to Choose From
8.   Recommend Health Plan to Family or Friends
9.   Would You Select Your Current Plan Again

* Measure is posted for two categories of reporting Parent/Children and Adults

Health Plan Member Satisfaction with Claims Payment Indicators (CAHPS Measures)

Two measures describe the opinion of current health plan members on how well their plan handles claims for services. This information is especially important for members of plans where the member pays for services out of pocket and then requests payment from the plan. Information can help consumers choose a plan where the time period between the delivery of a service and its payment is short, and where errors in payment are minimal. Please note that some health plans do not require the member to submit a claim for payment:

CAHPS Measures:

1.   Plan Handles Claims Correctly
2.   Plan Handles Claims Quickly

New Features in Development

Increase number of conditions and procedures to 150 (includes inpatient and outpatient data, both adults and pediatrics), range of charges that are risk adjusted (includes inpatient and outpatient), and physician volume reporting.

Appendix B: Statutory Advisory Groups

State Consumer Health Information and Policy Advisory Council

Holly Benson, J.D.
Agency for Health Care Administration
Appointed by the Secretary, Agency for Health Care Administration

Ana Viamonte Ros, M.D., M.P.H.
State Surgeon General of the Department of Health
Appointed by the Secretary, Agency for Health Care Administration

Carolyn Timmann
Executive Office of the Governor
Appointed by the Governor

Charles Milsted
Representative of consumers
Appointed by the Secretary, Agency for Health Care Administration

Diane Godfrey
Representative of professional healthcare related association
Appointed by the Secretary, Agency for Health Care Administration

Harry V. Spring
Representative of health care purchasers
Appointed by the Secretary, Agency for Health Care Administration

Karen L. van Caulil, Ph.D.
Representative of local health councils
Appointed by the Secretary, Agency for Health Care Administration

Kate Kemker
An employee of the Department of Education
Appointed by the Commissioner of Education

Kim Streit, C.H.E., M.B.A., M.H.S.
Representative of professional health care related association
Appointed by the Secretary, Agency for Health Care Administration

Mary Beth Senkewicz, J.D.
An employee of the Office of Insurance Regulation
Appointed by the Director of the Office

Michael L. Epstein, M.D., Vice Chair
Pediatric Representative of Health Care Coalition
Appointed by the Secretary, Agency for Health Care Administration

Michael Wasylik, M.D.
Representative of professional health care related association
Appointed by the Secretary, Agency for Health Care Administration

Paul Duncan, Ph.D.
Representative of a state university
Appointed by the Secretary, Agency for Health Care Administration

James Bracher, M.B.A.
Representative of Florida Association of Health Plans
Appointed by the Secretary, Agency for Health Care Administration

Sally House, Chair
Representative of Florida Association of Business/Health Coalitions, appointed by the
Secretary, Agency for Health Care Administration

State Electronic Prescribing Advisory Panel

Walt Culbertson
ePrescribe Florida

Lucy Gee
Florida Department of Health, Medical Quality Assurance

Vacant
State University

Zach Finn
Big Bend Regional Healthcare Information Organization

Tom Groom
SureScripts - RxHub

Todd Hardman
SureScripts - RxHub

Kathy Holzer
Florida Hospital Association

Michael Jackson
Florida Pharmacy Association

Pamela King
Florida Board of Osteopathic Medicine

Scott Langdon
Florida Health Care Coalition

Catherine Peper
ePrescribe Florida

Viki Prescott
McBroom Consulting

Dr. Lee Shettle
Florida Osteopathic Medical Association

Anne Wells
Florida Medicaid

Fred Whitson
Florida Medical Association

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