

**CENTER FOR HEALTH
INFORMATION AND ANALYSIS**

**ANNUAL REPORT ON THE
PERFORMANCE OF THE MASSACHUSETTS
HEALTH CARE SYSTEM**

**SUPPLEMENT 5: MANAGING PHYSICIAN GROUP TOTAL
MEDICAL EXPENSES AND QUALITY**



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Managing Physician Group Total Medical Expenses and Quality

Managing Physician Group Total Medical Expenses (TME) is a category of commercial TME.¹ Managing Physician Group TME is based solely on information pertaining to the members of HMO-type products who were required to select a primary care physician (PCP).²

The quality of physician groups' care delivery for their managed members is evaluated using selected measures from the Massachusetts Standard Quality Measure Set (SQMS).

Key Findings:

Blue Cross Blue Shield of Massachusetts (BCBS) had the highest growth rate of network average health-status adjusted (HSA) Total Medical Expenses (TME) for managing physician groups at 2.8%.

Among the managing physician groups examined, growth in HSA TME between 2012 and 2013 for four of the groups exceeded the 3.6% benchmark within one of the top three payers' networks: Partners Community HealthCare Inc. (PCHI), Beth Israel Deaconess Care Organization (BIDCO), New England Quality Care Alliance (NEQCA), and Steward Network Services (Steward).

Mount Auburn Cambridge, IPA (MACIPA) had the most substantial decrease in HSA TME from 2012 to 2013 (-9.2%), in BCBS's network.

PCHI was the only physician group with HSA TME values consistently higher than the network average in both 2012 and 2013 across the top three payers' networks.

Managing physician groups continued to perform well on most patient experience and clinical quality measures, with little variation among groups.

Provider Group	% 2013 Member Months	% Change in Member Months	2012 Health-Status Adjusted TME	2013 Health-Status Adjusted TME	% Change in Health-Status Adjusted TME 2012 - 2013
Partners Community HealthCare, Inc. (PCHI)	20%	-14.9%	\$310	\$324	4.3%
Steward Network Services, Inc. (Steward)	12%	20.5%	\$294	\$298	1.3%
Atrius Health (Atrius)	11%	-0.8%	\$330	\$330	0.0%
New England Quality Care Alliance (NEQCA)	9%	-7.8%	\$303	\$306	0.9%
Beth Israel Care Organization (BIDCO)	5%	-3.4%	\$275	\$289	4.9%
UMass Memorial Health Care (UMass)	5%	-23.9%	\$264	\$272	3.0%
Baycare Health Partners, Inc. (Baycare)	4%	-1.8%	\$267	\$273	2.3%
Mount Auburn Cambridge IPA (MACIPA)	2%	-4.9%	\$350	\$318	-9.2%
Network Average			\$295	\$304	2.8%

5.1 BCBS Managing Physician Group Total Medical Expenses 2012 – 2013

I. Managing Physician Group Total Medical Expenses

Managing Physician Group TME analyses are presented on a health-status adjusted basis to account for differences in health status of members between managing physician groups within a given payer and insurance category.³

Network Average Health Status Adjusted Total Medical Expenses by Payer

Health-status adjusted (HSA) TME for members whose care is managed by reported physician groups increased modestly from 2012 to 2013. Among the top three commercial payers,⁴ BCBS had the highest growth rate of network average HSA TME for managing physician groups at 2.8% (Table 5.1); HPHC's network average HSA

¹ Commercial TME is one component of Total Health Care Expenditures (THCE). It includes expenditures by commercial payers on behalf of fully-insured and self-insured members in Massachusetts. These expenditures consist of claims and non-claims (such as performance) payments to health care providers by commercial payers, as well as member cost-sharing

(co-payments, deductibles, and co-insurance). TME is measured on a per member per month (PMPM) basis. For more information on Commercial TME, see Supplement 4.

² Managing Physician Group TME is reported by each payer for physician groups within their network that meet a reporting threshold of at least 36,000 member months. Please see Technical Appendix for the list of commercial payers that report Managing Physician Group TME data to CHIA.

Provider Group	% 2013 Member Months	% Change in Member Months	2012 Health-Status Adjusted TME	2013 Health-Status Adjusted TME	% Change in Health-Status Adjusted TME
Atrius Health (Atrius)	21%	8.0%	\$293	\$284	-3.1%
Partners Community HealthCare, Inc. (PCHI)	21%	-10.1%	\$318	\$326	2.7%
Steward Network Services, Inc. (Steward)	11%	19.9%	\$307	\$305	-0.7%
New England Quality Care Alliance (NEQCA)	9%	9.6%	\$288	\$302	4.9%
Beth Israel Care Organization (BIDCO)	8%	-2.8%	\$301	\$302	0.4%
UMass Memorial Health Care (UMass)	5%	2.7%	\$302	\$298	-1.2%
Mount Auburn Cambridge IPA (MACIPA)	3%	1.5%	\$290	\$299	3.0%
Baycare Health Partners, Inc. (Baycare)	1%	3.8%	\$293	\$290	-0.9%
Network Average			\$302	\$302	0.05%

5.2 HPHC Managing Physician Group Total Medical Expenses 2012 – 2013

Provider Group	% 2013 Member Months	% Change in Member Months	2012 Health-Status Adjusted TME	2013 Health-Status Adjusted TME	% Change in Health-Status Adjusted TME
Partners Community HealthCare, Inc. (PCHI)	22%	-13.0%	\$317	\$328	3.4%
Atrius Health (Atrius)	14%	1.3%	\$280	\$288	2.8%
Steward Network Services, Inc. (Steward)	11%	12.4%	\$285	\$302	5.8%
New England Quality Care Alliance (NEQCA)	9%	-9.2%	\$281	\$291	3.3%
UMass Memorial Health Care (UMass)	6%	-2.7%	\$286	\$283	-0.9%
Beth Israel Care Organization (BIDCO)	6%	-2.6%	\$278	\$286	2.8%
Mount Auburn Cambridge IPA (MACIPA)	3%	-3.9%	\$300	\$298	-0.9%
Baycare Health Partners, Inc. (Baycare)	3%	3.8%	\$255	\$262	2.9%
Network Average			\$293	\$300	2.3%

5.3 Tufts Managing Physician Group Total Medical Expenses 2012 – 2013

TME for managing physician groups grew by only 0.05% (Table 5.2); and Tufts' network average HSA TME for managing physician groups grew by 2.3% (Table 5.3).^{5 6 7}

Table 5.1: BCBS Managing Physician Group Total Medical Expenses 2012 – 2013

Table 5.2: HPHC Managing Physician Group Total Medical Expenses 2012 – 2013

Table 5.3: Tufts Managing Physician Group Total Medical Expenses 2012 – 2013

Health Status Adjusted Total Medical Expenses by Managing Physician Group

Among the managing physician groups examined, growth in HSA TME between 2012 and 2013 for four of the groups exceeded the 3.6% benchmark within one of the top three payers' networks:

Partners Community HealthCare, Inc.'s (PCHI) HSA TME within BCBS's network increased by 4.3% from 2012 to 2013, and its HSA TME was higher than BCBS's network average HSA TME for managing physician groups in both years (Table 5.1).

Beth Israel Deaconess Care Organization's (BIDCO) HSA TME grew by 4.9% within BCBS's network; however, BIDCO's HSA TME remained below BCBS's network average in both years (Table 5.1).

New England Quality Care Alliance's (NEQCA)'s HSA TME grew by 4.9% within HPHC's network, but remained close to HPHC's network average HSA TME in 2013 (Table 5.2).

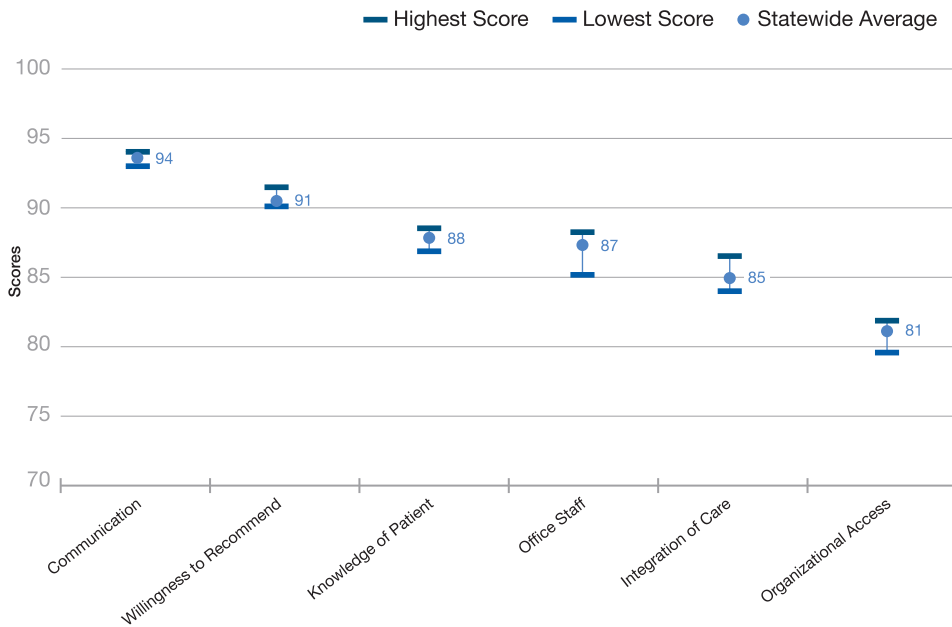
Steward Network Services' (Steward) HSA TME grew by 5.8% within Tufts' network, the largest growth rate among reported managing physician groups across the top three payers' networks. However, Steward's HSA TME was below Tufts' network average in 2012 and slightly above the network average in 2013 (Table 5.3).

³ The tools used for adjusting TME for health status of a payer's covered members vary among payers so that adjustments are not uniform or directly comparable across payers. Please note that TME data is not adjusted for differences in covered benefits within payers and between payers.

⁴ The top three payers in Massachusetts based on market share include: Blue Cross Blue Shield of MA (BCBS), Harvard Pilgrim Health Care (HPHC), and Tufts Health Plan (Tufts).

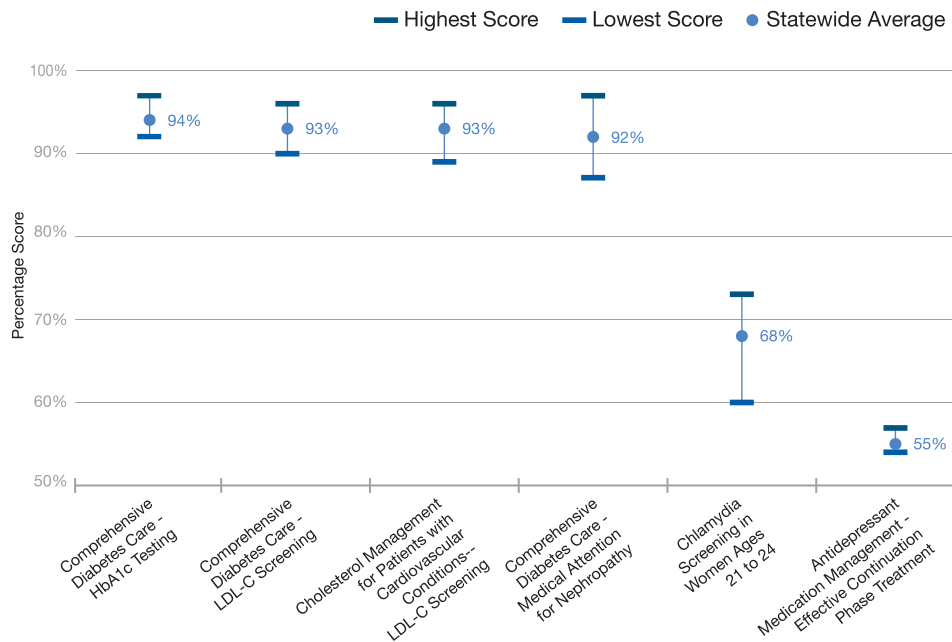
⁵ PMPM values in the tables are presented rounded to the nearest whole dollar; while percentage changes were calculated based upon the full-dollar value.

⁶ Please note that in prior years, CHIA reported Normalized HSA TME for Physician Groups; however, due to the requirements of Chapter 224 of the Acts of 2012 for benchmark monitoring,



5.1 Patient Experience Score Ranges for Managing Physician Groups (2013)

Data provided by Massachusetts Health Quality Partners (MHQP) reflects the experience of adult members whose care is managed by a primary care physician (PCP) in the state's five largest commercial payers. Experience scores range from 0 to 100, with 100 representing the most favorable response.



5.2 Clinical Quality Score Ranges for Managing Physician Groups (2012)

Data provided by Massachusetts Health Quality Partners (MHQP) reflects the experience of adult members whose care is managed by a primary care physician (PCP) in the state's five largest commercial payers. Selected HEDIS measures are shown here. See Data Book for other HEDIS results.

Among the managing physician groups examined, PCHI, NEQCA, and BIDCO exhibited an increase in HSA TME from 2012 to 2013 within each of the top three payers' networks. PCHI was the only physician group with HSA TME values consistently higher than the network average in both 2012 and 2013 across the top three payers' networks.

Mount Auburn Cambridge, IPA (MACIPA) had the most substantial decrease (-9.2%) in HSA TME from 2012 to 2013, in BCBS's network; however MACIPA's HSA TME remained above BCBS's network average in both 2012 and 2013.

II. Quality of Primary Care Delivered by Managing Physician Groups

This section examines the quality of primary care delivered by the eight largest managing physician groups⁸ to members of managed care commercial plans⁹ between 2011 and 2013, using measures selected from the Massachusetts Standard Quality Measure Set (SQMS)¹⁰:

Six patient experience measures, drawn from the Consumer Assessment of Healthcare Providers and Systems – Patient Centered Medical Home (CAHPS-PCMH) survey; and

Six Healthcare Effectiveness Data and Information Set (HEDIS) clinical measures.

Patient Experience

The CAHPS-PCMH survey⁸ is a standardized tool used to measure patient perspectives on the access to and quality of care provided by primary care providers. The experience scores outlined below

these tables report HSA TME for Physician Groups. HSA TME values for physician groups use the health status score as reported by payers to CHIA. Normalized HSA TME values recalculate the health status adjustment scores reported by payers for physician groups in order to reestablish the reference population from a larger size to the size of the population being reported. Normalized HSA TME for physician groups may be found in the Data Appendix.

⁷ The network average HSA TME values here only include managed care populations, or those members whose plans require them to select a primary care physician.

⁸ The eight managing physician groups included in this section represent 81 Massachusetts primary care medical groups. Other primary care providers, such as physician's assistants and nurse practitioners, may be captured in these quality data.

reflect adult patients' favorable responses on each of the domains of care included in the CAHPS-PCMH tool.¹¹

Massachusetts managing physician groups' scores on patient experience measures were generally above 80 out of 100 in 2013, and there was very little difference in results among groups.

Managing physician groups performed best on communication, the patient experience measure which reflects how well patients thought their doctors communicated with them, scoring between 93 and 94 out of 100. Groups had the lowest scores (between 80

and 82 out of 100) on organizational access, a measure of whether patients can get a primary care appointment when wanted or needed. (Figure 5.1)

■ **Figure 5.1: Patient Experience Score Ranges for Managing Physician Groups (2013)**

Clinical Quality

Massachusetts primary care providers generally demonstrated high performance on clinical measures of quality. Managing physician groups demonstrated the highest scores on measures of how well they managed their patients' chronic

diseases, including Comprehensive Diabetes Care (three measures) and Cholesterol Management for Patients with Cardiovascular Conditions, with performance ranging from 87% to 97%, and 89% to 96%, respectively (Figure 5.2). Performance was the lowest on Chlamydia Screening and Antidepressant Medication Management, ranging from 60% to 73%, and 54% to 57%, respectively.

■ **Figure 5.2: Clinical Quality Score Ranges for Managing Physician Groups (2012)**

⁹ Data provided by Massachusetts Health Quality Partners (MHQP) reflects the experience of adult members whose care is managed by a primary care physician (PCP) in the state's five largest commercial payers.

¹⁰ Please see <http://www.mass.gov/chia/gov/commissions-and-initiatives/statewide-quality-advisory-committee/>.

¹¹ Experience scores range from 0 to 100, with 100 representing the most favorable response.



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