

Choice Care Quality Improvement Program Results

Chronic Care – Preventive Care

The table below compares quality measures of individual primary care clinics or clinic systems to quality measures for Medica’s primary care clinic network as a whole (Medica aggregate).

!	Significantly above the Medica aggregate
*	No significant difference from the Medica aggregate
-	Significantly below the Medica aggregate
N/A	Not measured or sample size was too small

	Chronic Care	Preventive Care							
	Child Asthma	Health Promotion		Adult Cancer Screening			Child & Young Adult		
Plan Aggregate	31%	79%	90%	54%	81%	59%	67%	62%	84%
Clinic System	Optimally Managed Asthma	Depression Assessment	Alcohol Use Assessment	Colorectal Cancer Screening	Cervical Cancer Screening	Breast Cancer Screening	Complete Child & Teen Checkup	Blood Lead Test	Chlamydia Screening Done
Allina Medical Clinic	-	*	*	!	!	*	*	57%	*
Altru Health System	N/A	N/A	N/A	N/A	N/A	N/A	*	N/A	N/A
Apple Valley Medical Center	N/A	N/A	N/A	N/A	N/A	N/A	-	N/A	N/A
Aspen Medical Group	-	-	*	N/A	*	*	*	63%	*
Bloomington Lake Clinic	N/A	N/A	N/A	N/A	N/A	N/A	-	N/A	*
Brainerd Medical Center	N/A	N/A	N/A	N/A	N/A	N/A	*	N/A	-
Buffalo Clinic	N/A	N/A	N/A	N/A	*	*	!	53%	*
Camden Physicians	N/A	N/A	N/A	N/A	N/A	N/A	-	N/A	N/A
Cedar Riverside Peoples Center	N/A	N/A	N/A	N/A	-	-	*	71%	N/A
CentraCare Clinic	*	*	*	*	*	!	*	60%	*
Children’s Healthcare	!	N/A	N/A	N/A	N/A	N/A	!	68%	*
Columbia Park Medical Group	-	*	!	*	*	*	*	63%	*
Community University Healthcare Center	N/A	N/A	N/A	N/A	*	N/A	!	70%	N/A
Crossroads Medical Center	N/A	N/A	N/A	N/A	N/A	N/A	-	N/A	N/A
Duluth Clinics	*	*	!	!	*	*	*	61%	*
Fairview	*	*	!	!	!	*	*	62%	!
Family Health Services Minnesota	N/A	N/A	N/A	N/A	N/A	N/A	*	N/A	N/A
Fremont Community Health	*	!	*	N/A	*	*	N/A	74%	*
HealthEast Clinics	*	*	*	N/A	*	-	*	64%	*
HealthPartners	*	*	*	!	*	*	!	70%	*
Hennepin Faculty Associates/HCMC	*	*	!	!	!	*	!	63%	!
Indian Health Board of Minneapolis	N/A	N/A	N/A	N/A	*	N/A	*	69%	*
Innovis Health	N/A	N/A	!	N/A	*	*	-	59%	*
Lakeview Clinic	N/A	N/A	N/A	N/A	N/A	N/A	*		N/A
MeritCare Clinic	-	*	*	*	!	!	*	56%	N/A
Metropolitan Pediatric Specialists	N/A	N/A	N/A	N/A	N/A	N/A	*	N/A	-
Mille Lacs Family Clinic	N/A	N/A	N/A	N/A	N/A	N/A	*	N/A	N/A
Multicare Associates of the Twin Cities	N/A	N/A	N/A	N/A	*	*	*	55%	N/A
North Clinic	N/A	N/A	N/A	N/A	N/A	N/A	*	N/A	N/A
North Memorial Clinics	N/A	-	*	N/A	*	*	-	49%	*
North Point Health & Wellness	*	!	*	N/A	*	!	!	64%	*
Northstar Physicians	N/A	-	*	*	*	*	!	60%	*
Northwest Family Physicians	N/A	N/A	N/A	N/A	N/A	N/A	*	N/A	N/A
Oakdale Obstetrics and Gynecology	N/A	N/A	N/A	N/A	!	*	N/A	N/A	*
Open Cities	N/A	*	*	N/A	-	*	*	53%	-
Park Nicollet Clinics	*	*	*	!	*	!	*	61%	*
Partners in Pediatrics	!	N/A	N/A	N/A	N/A	N/A	!	67%	!
Pediatric & Adolescent Services	!	N/A	N/A	N/A	N/A	N/A	!	89%	N/A

Comparisons are based on a 95% confidence interval calculated for both Medica health plan level results and individual clinic system results. The confidence interval tells you that you can be 95% confident that the true population rate is represented on the table above.

Exception: The Blood Lead Rates displayed represent the total population for each group, rather than a sample.

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Choice Care Quality Improvement Program Results Adult Diabetes – Childhood Asthma – Preventive Care

The table below compares quality measures of individual primary care clinics or clinic systems to quality measures for Medica’s primary care clinic network as a whole (Medica aggregate).

!	Significantly above the Medica aggregate
*	No significant difference from the Medica aggregate
-	Significantly below the Medica aggregate
N/A	Not measured or sample size was too small

	Chronic Care	Preventive Care							
	Child Asthma	Health Promotion			Adult Cancer Screening			Child & Young Adult	
Plan Aggregate	46%	41%	35%	53%	81%	58%	71%	59%	78%
Clinic System	Optimally Managed Asthma	Depression Assessment	Alcohol Use Assessment	Colorectal Cancer Screening	Cervical Cancer Screening	Breast Cancer Screening	Complete Child & Teen Checkup	Blood Lead Test	Chlamydia Screening Done
Pediatric and Young Adult Medicine	N/A	N/A	N/A	N/A	N/A	N/A	*	N/A	N/A
Quello Clinic	N/A	N/A	N/A	N/A	N/A	N/A	*	49%	N/A
Ridgeview Clinics	N/A	N/A	N/A	N/A	N/A	N/A	-	N/A	N/A
Silver Lakes Clinic	N/A	N/A	N/A	N/A	N/A	N/A	*	N/A	N/A
South Lake Pediatrics	N/A	N/A	N/A	N/A	N/A	N/A	*	N/A	N/A
Southdale Pediatric Associates	N/A	N/A	N/A	N/A	N/A	N/A	!	N/A	N/A
Southside/Green Central Community Clinic	N/A	N/A	N/A	N/A	*	N/A	!	62%	!
St Cloud Medical Group	*	N/A	N/A	N/A	*	*	!	51%	*
St Luke's Hospital Association	N/A	N/A	N/A	N/A	N/A	N/A	*	N/A	N/A
Stillwater Medical Group	N/A	*	-	*	N/A	*	*	N/A	N/A
University of MN Physicians	*	!	*	N/A	*	*	*	59%	*
Wayzata Children's Clinic	N/A	N/A	N/A	N/A	N/A	N/A	!	N/A	N/A
Westside Community Health	N/A	N/A	N/A	N/A	*	*	*	64%	!

Comparisons are based on a 95% confidence interval calculated for both Medica health plan level results and individual clinic system results. The confidence interval tells you that you can be 95% confident that the true population rate is represented on the table above.

Exception: The Blood Lead Rates displayed represent the total population for each group, rather than a sample.

Explanation of Quality Measurements

Optimally Managed Asthma

How Medica measures quality: Medica refers to the four actions described in the **Optimally Managed** section (below) as the main indicators of the quality of childhood asthma care for a primary care clinic or clinic system.

Definition & background: Childhood asthma is a disease of the bronchial tubes, or airways of the lungs. Asthma causes these airways to tighten, which makes breathing difficult. It is very important that children with asthma and their parents understand how to care for asthma and prevent asthma episodes, which are often called an “asthma attack.” Childhood asthma care for ages 5 to 19 is measured during each calendar year. One of the best opportunities for improvement in the treatment of asthma is a plan, written by a doctor, that is customized to fit each child’s asthma care needs. This plan is called an “asthma action plan.”

- **Optimally Managed:** Asthma care is considered to be optimally managed when a doctor completes all four of the following actions for each child: Confirm that the child is not exposed to tobacco smoke, has received an asthma action plan, documents the severity of asthma, and if a child has persistent asthma, the doctor recommends an anti-inflammatory medication.

- **Asthma Action Plan:** An asthma action plan is easy to use. It explains what should be done when mild, moderate and/or severe asthma symptoms develop. Each plan is written for a child's unique asthma care needs.

Colorectal Cancer Screening

How Medica measures quality: Medica refers to the 3 screenings described in the **Screening Options** section (below) as the main indicators of the quality of colorectal screening for a primary care clinic or clinic system.

Definition & background: According to the American Cancer Society, colorectal cancer is the second leading cause of death from cancer in the United States. The risk of developing colorectal cancer rises after age 50 and is common in both men and women. Today there are more ways than ever to treat colorectal cancer. Often, pre-cancers can be detected and removed preventing any cancer from developing. As with almost all cancers, the earlier it is found the more likely that the treatment will be successful. If colon cancer is detected in its early stages, it is up to 90 percent curable.

- **Screening Options:** Beginning at age 50, men and women who are at average risk for developing colorectal cancer should have at least one of the three screening options below:
 1. Fecal Occult Blood Test (FOBT) every year, or
 2. Flexible Sigmoidoscopy every 5 years, or
 3. Total Colon Evaluation (colonoscopy or flexible sigmoidoscopy with double-contrast barium enema) in the past 10 years. Men and women with a higher risk for developing colorectal cancer should have a total colon evaluation every 5 years.

Cervical Cancer Screening

How Medica measures quality: Medica refers to the testing recommendations described in the **Pap Testing** section (below) as the main indicators of the quality of cervical cancer screening for a primary care clinic or clinic system.

Cervical Cancer Screening – Definition & background: The American Cancer Society predicted that there would be about 11,150 new cases of invasive cervical cancer in the United States in 2007. About 1/3 or 3,670 were predicted to die from this disease that same year. Although these numbers seem high, it is important to know that when found and treated early, cervical cancer can often be cured.

Cervical cancer was once one of the most common causes of cancer death for American women. However, since 1955, the number of deaths from cervical cancer has dropped. The main reason for this change is the use of the Pap test to find cervical cancer early.

- **Pap Testing:** The American Cancer Society recommends that all women should begin cervical cancer testing (Pap testing/screening) about 3 years after they become sexually active, but no later than when they are 21 years old. Initially, testing should be done every year. Beginning at the age of 30, if Pap tests are normal for 3 years, the frequency can drop to every 2-3 years.

Breast Cancer Screening

How Medica measures quality: Medica refers to the screening recommendations described in the **Mammogram Screening** section (below) as the main indicators of the quality of breast cancer screening for a primary care clinic or clinic system.

Definition & background: According to the American Cancer Society, breast cancer is the most common cancer among women in the United States and is the second leading cause of death in women, after lung cancer.

- **Mammogram Screening:** The breast cancer screening test used most often is called a mammogram. This test is essentially a safe and highly accurate X-ray photograph of the breast. Although the mammogram has been around for about 30 years, the technique continues to be the most important tool doctors have to help them diagnose, evaluate, and treat breast cancer. Leading experts, the National Cancer Institute, the American Cancer Society, and the American College of Radiology now recommend annual mammograms for women over 40.

Complete Child & Teen Checkups

How Medica measures quality: Medica refers to the examination described in the **Complete Child & Teen Checkups** section (bullet point below) as the main indicator of the quality of complete child & teen checkups for a primary care clinic or clinic system.

Definition & background: Well-child checkups (also referred to as Child and Teen Checkups) help health care providers measure a child's growth and development and accomplish very important "anticipatory guidance" (educating parents & children in healthy habits of diet, exercise, safety, etc.). It is important to schedule preventive checkups at regular intervals so that any health problems can be treated early before they become a serious illness and to help children learn good health habits. During a checkup, a child's eyes and ears will be tested. The health care provider will see if breathing is normal and if the child has lost or gained weight. Shots to prevent disease will be given, and the child's pulse and blood pressure will be checked. In addition to a blood lead test for children 6 years of age or younger, other tests might also be needed.

- **Complete Child & Teen Checkups:** A well-child exam is considered to be a "Complete Child & Teen Checkup" when the medical record shows that all parts of the well-child exam have been completed.

Blood Lead Test

How Medica Measures Quality: Medica uses the screening rates described in the **Blood Lead Screening** section (below) as the main indicator of the quality of blood lead screening for a primary care clinic or clinic system.

Definition & background: Lead is a highly toxic substance and exposure to it is known to cause a variety of health problems in children. These problems, which are often irreversible, will affect children throughout their lives and may impede their future success. The National Safety Council estimates that there are more than 400,000 American children under the age of six who have elevated levels of lead in their blood.

- **Blood Lead Screening:** In support of this public health issue, Medica has established an ongoing goal to increase the rate at which clinics screen children, 9 to 30 months old, for blood lead when they are seen for a well child visit. Medica focuses measurement and improvement efforts on the rate of blood lead tests that are done, with a goal of increasing that rate.

Chlamydia Screening Done

How Medica measures quality: Medica uses the screening rates described in the **Chlamydia Screening** section (below) as the main indicator of the quality of Chlamydia screening for a primary care clinic or clinic system.

Definition & background: Sexually active women 13-24 years of age are at greatest risk for complications as a result of undetected and untreated Chlamydia infection. Early detection has been found to be the most effective way to prevent the serious health problems in women and newborn babies that this often “silent disease” can cause.

- **Chlamydia Screening:** In support of this public health issue, Medica has established an ongoing goal to increase the rate at which clinics screen for chlamydia, specifically for this age group. Medica focuses measurement and improvement efforts on the rate of chlamydia screenings that are actually done, with a goal of increasing that rate.