

A FACCT-Filled Agenda for Public Information

LIKE IT or not, the health care system in the United States is being driven by marketplace economics. For the marketplace to work in controlling prices and improving quality, consumers must be able to make informed choices. However, the information they need often is unavailable, hard to find, difficult to understand, or lost in the noise of confusing messages.

"We cannot have an effective private-sector health care market, with little government regulation, unless most consumers become active and informed managers of their health care," said David J. Lansky, PhD, president of the Foundation for Accountability (FACCT), a not-for-profit coalition of corporate, consumer, and government purchasers of health care based in Portland, Ore.

The foundation was established in 1995 to develop quality measures that meet the needs of buyers and users of health care. Its board members include representatives from the Health Care Financing Administration (HCFA), Federal Employee Health Benefit Plan, US Department of Defense, AFL-CIO, American Association of Retired Persons, National Alliance for the Mentally Ill, AT&T, American Express, and other major public and private purchasers of health care.

More recently, the coalition has taken on a second mission: to generate and disseminate consumer-focused information on health care quality in language that the public can understand. People need to become aware of the importance of quality, and they need to compare information on the performance quality of health care providers, Lansky said. The quality of the health care that is delivered affects its results and cost, he noted.

The foundation decided to shift its focus to educating consumers to fill a pressing need: "We saw that there already was a lot of quality measuring going on and not much informing," Lansky said. "The reason we exist is to help people make health care decisions, and measuring alone is not enough to get us there. We have lots of databases with measures in them, but by themselves, they cannot help people make good decisions.

"We are also trying to shift the nation's focus from who's to blame for problems in the American health care system to how health care providers and buyers can work with consumers to build a health care system that is more responsive and accountable to the public's needs."

Serving as Translators

To produce its communication materials and messages, FACCT has been de-

veloping and using rigorous science-based measures for assessing quality. The foundation then translates the scientific evaluations into terms the public can use to make health and lifestyle decisions. FACCT then provides its communication materials and messages to its board member organizations for use in their educational programs. These private, professional, government, and consumer organizations represent about 80 million Americans.

"If these large national organizations begin to discuss the same themes and ideas with the public, it may increase the public's understanding of how to operate in a quality-driven health care system," Lansky said. "But if they don't—if they each develop their own communication strategy and messages—we will continue to have an enormous amount of noise and confusion that will undermine any chance of creating a quality-driven health care system."

FACCT Foundation for Accountability

With support primarily from HCFA and the Federal Employee Benefit Program, FACCT has developed a communications model for talking to the public about health care quality measures. According to Lansky, the 5-point model provides a framework for organizing and weighting data from multiple sources, including the National Committee on Quality Assurance's HEDIS, the Agency for Health Care Policy and Research's CAHPS, the Joint Commission on Accreditation of Healthcare Organization's ORYX, FACCT's own measurement tools, and public health databases. The 5 categories are these:

- **The Basics**—Are the health care providers delivering the basics of good health care? Do they provide consumers with the same access, clarity of information, courtesy, compassion, and other basic values they receive when they buy clothes or a car?

- **Staying Healthy**—Are the health care providers helping the patients avoid illness?

- **Getting Better**—Are the health care providers helping patients get better when they have an acute illness or a flare-up of chronic illness?

- **Living With Illness**—Are the health care providers helping patients with chronic illness maximize the qual-

ity of their life by helping them cope with the illness, minimizing their pain and symptoms, and helping them stay in school or at work?

- **Changing Needs**—Are the health care providers helping patients and their families adjust to increasing illness, disability, or death?

Carrying Out Field Tests

By creating a common format and vocabulary, FACCT's framework is designed to make quality performance reports and other resources easier for people to understand and use, Lansky said, adding: "To achieve this, we took our measures for illnesses such as diabetes out to people who have the disease and asked them if we got it right. We also asked them to weight the importance of each element of good care and to provide a score for those elements based on what is most important to them. We then did the same surveys and field tests with experts who provide the care and with researchers in the area."

To create these measures for holding health care providers accountable for high-quality care, FACCT combines the patients' reasonable expectations with the best available guidelines and research. "While we want all our measures to reflect the best science and clinical research available, we also seek to measure as an outcome the patients' 'experience of care,'" Lansky said.

The results are simple, easily understandable scores that combine the technical issues involved in managing the particular illness and the patients' values. The score by which medical plans or groups can be judged ranges from 0 to 100 in each of the 5 framework areas, he said.

The 8 quality-assessing tools that FACCT has endorsed include those for diabetes, adult asthma, breast cancer, major depression, and 4 population-wide tools for assessing health risk behavior, health status of people at least 65 years of age, health status of people younger than 65 years, and consumer satisfaction with health care plans. The foundation is developing measures for coronary artery disease, alcohol abuse, pediatrics, HIV/AIDS, and end-of-life care.

"We believe it is vitally important for leadership organizations to begin to talk to the public about quality issues related to their health care," Lansky said. As we know, for many diseases, such as asthma and diabetes, health outcomes often depend on the patients' ability to become their own health care manager."

—by Andrew A. Skolnick