Annual Quality Study Finds Increased Attention to Obesity, Improvement Among Medicare Plans

Washington, DC—Annual analysis of the health care of a record number of Americans by the National Committee for Quality Assurance (NCQA) gives a new picture of health care quality.

The State of Health Care Quality Report 2012 synthesizes data collected throughout 2011 by NCQA’s Healthcare Effectiveness Data and Information Set (HEDIS®), health care’s most widely used performance improvement tool. Findings include:

More Attention to Obesity

Adult Body Mass Index (BMI) Assessment, a relatively new measure related to obesity, was the most improved of the more than 40 quality measures the report covers, rising an average of 17 percentage points across all health plans, including 18 points in Medicare HMOs and 26 points in Medicare PPOs.

These findings show that clinicians are paying more attention to obesity—a critical first step in helping patients understand the need to manage their weight.

Three measures of care related to childhood obesity also saw substantial gains, implying that efforts such as First Lady Michele Obama’s Let’s Move campaign to fight childhood obesity may be gaining traction.
Medicare Plans Are Most-Improved
Medicare Advantage plans had larger overall improvements than commercial or Medicaid plans.

The greatest gains were among measures that are part of the Star rating system for Medicare Advantage plans—suggesting that the pay-for-performance program is improving care.

Accredited Plans Perform Better
Comparing Medicare Advantage plans that are NCQA-Accredited with those that are not, results show that accredited plans performed better on more than 75 percent of quality measures. Nonaccredited plans outperform accredited plans at a statistically significant level on only one measure—an exception that proves the rule linking accreditation to higher quality.

Federal regulations require all Medicare Advantage plans to report HEDIS data, making those plans the ideal laboratory for analyzing accreditation’s relationship to quality. Insurers that perform well in Medicare Advantage and offer commercial plans tend to be high performing in both markets.

Measurement & Transparency at an All-Time High
This year’s report summarizes the quality of care received by a record 125 million Americans—40 percent of the U.S. population and an increase of 7 million people from last year’s total. The increase shows unprecedented acceptance of measurement and transparency across health plans. It also means more is known about the quality of U.S. health care than ever before.

Click here for the full report.

About NCQA
NCQA is a private, non-profit organization dedicated to improving health care quality. NCQA accredits and certifies a wide range of health care organizations. It also recognizes clinicians and practices in key areas of performance. NCQA’s Healthcare Effectiveness Data and Information Set (HEDIS®) is the most widely used performance
measurement tool in health care. NCQA is committed to providing health care quality information for consumers, purchasers, health care providers and researchers.