“Choosing Wisely is a good place for communities and cross-sector stakeholders to start thinking about collaborating, as it focuses not just on population health improvement measures but also clinical procedures and measures that have room for improvement from an efficiency or use perspective.”

**Community Overview**

The Greater Detroit Area Health Council (GDAHC) is a not-for-profit organization that has extensive knowledge of data analysis, performance measurement, and data dissemination. GDAHC currently works as one of seven initiatives across the country focused on the use of electronic health records and supporting data to identify population-level issues, such as antibiotic use for viral infections and appropriate screening for Vitamin D deficiencies, with a goal to improve quality, health, and efficiency. As a part of the Community Health Peer Learning (CHP) Program, GDAHC is dedicated to transparency in data sharing, and has successfully launched a system of multi-payer data measurement and public reporting of physician performance on its website (myCareCompare.org). Further, GDAHC provides aggregated individual physician level data to physician organizations to guide quality improvement.

**Key Insights & Lessons**

GDAHC offers decades of experience of key lessons and process steps learned from past community-wide, multi-sector collaborative endeavors:

- **A business case needs to be developed for each relevant stakeholder.** It is important that all stakeholders understand what can be achieved from working together from both a population health / quality improvement perspective, and also from an efficiency and cost perspective.

- **Form an advisory group.** Some type of governing team should lead each initiative to set goals, identify relevant partners and data sources, provide oversight and continuous monitoring to the work, establish the data needs and sharing principles and agreements, and identify sustainability plans and spread, among other activities.

- **Identify a physician champion.** If work involves engaging physicians, it is important and necessary to identify a physician champion to assist in facilitating interest and engagement from the broader physician community.

- **Project management.** Set achievable community/population level goals (and at the same time, recognize the “big hairy audacious goals” that can be used as stretch goals), manage to the goals (roll the log), and show progress to keep the momentum and people at the table. Follow Plan-Do-Check-Act (PDCA).

**Community Snapshot**

<table>
<thead>
<tr>
<th>Site Type</th>
<th>Regional Health Improvement Collaborative (Not-for-profit)</th>
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</thead>
<tbody>
<tr>
<td>Areas of Expertise</td>
<td>Data Analysis</td>
</tr>
<tr>
<td></td>
<td>- Access and assess baseline data from EHRs, claims data, and population-level data</td>
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<tr>
<td></td>
<td>- Performance Measurement + Data Dissemination</td>
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<td></td>
<td>- Distribute consumer education materials</td>
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<td>- Multi-payer data measurement and public reporting of physician performance</td>
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<td></td>
<td>- Provide aggregated individual physician-level data to physician organizations</td>
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<td></td>
<td>- Identify health priorities using data presented at Steering Committee meetings</td>
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KEY ACHIEVEMENTS

• Choosing Wisely Initiative: GDAHC’s Choosing Wisely initiative focuses on the use of EHR and other supporting data to identify a series of population-level goals for improvements in quality, health, and efficiency. Work includes accessing and assessing baseline data from EHRs, claims data, and other population-level data; interventions at the physician and physician organization level; consumer-facing messaging and other data driven strategies for better decision making, quality, and care; and achieving certain population-level goals for each focus area.

• Public Transparency: GDAHC facilitates stakeholder collaboration for public transparency around quality, cost, and patient experience, with teams dedicated to data measurement, reporting, and patient experience surveying. The multi-payer measurement reports are published on myCareCompare.org and provide aggregated individual physician level data to physician organizations for internal quality and performance improvement efforts.

• Data-Driven Interventions: GDAHC evaluates data collected through its public reporting initiative and identifies opportunities for improvement. In one instance, GDAHC identified a community issue of ED use for PCP treatable conditions and convened a team to develop effective strategies to encourage appropriate ED utilization. PCP practices participating in the pilot were able to successfully reduce their patients’ ED use for PCP treatable conditions from 49.2 visits/1000 to 7.3 visits/1000.

LEAD AGENCY

• Greater Detroit Area Health Council (GDAHC) (www.gdahc.org) is a cross-sector, multi-stakeholder non-profit organization in Southeast Michigan (SEMI) that leads transformational programs designed to improve health, increase access to whole-person care, and ensure that health care is affordable. It is a Regional Health Improvement Collaborative, member and governing participant of the Network for Regional Health Improvement, and a Robert Wood Johnson Foundation Aligning Forces for Quality grantee.

MEET THE PROJECT TEAM!

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Ask him about:
• Business operations
• Process management
• Strategy and tactics
• Continuous process improvement

Ask her about:
• Leadership
• Fostering relationships
• Vision and strategy
• Financial management and control

Ask him about:
• Project management
• Administration
• Managing relationships
• Analysis

Ask her about:
• Public health administration
• Strategic guidance
• Expert content management

PARTNERS/COLLABORATORS

• The Henry Ford Physician Network (HFPN): HFPN is a physician-led Clinically Integrated Network located in SEMI, with over 1,700 physicians. The mission and primary objective is to achieve the goals of: (i) placing patients and their families at the center of all activities; (ii) ensuring coordination of care regardless of time or place; (iii) attending carefully to care transitions; (iv) managing resources carefully and respectfully; (v) proactively reaching out to patients with reminders and advice; (vi) being innovative in improving care and health while lowering costs; and (vii) investing continually in the development and pride of its workforce, including affiliated clinicians, while simultaneously improving care for individuals, improving health of populations, and lowering growth in health care expenditures.

• Detroit Medical Center Physician Hospital Organization (DMC PHO): DMC PHO is a physician organization with 681 member physicians practicing in SEMI. DMC PHO facilitates physician participation in health plans and provides services that promote quality and efficiency in the practice and business of healthcare. DMC PHO has successfully participated as a Pioneer Accountable Care Organization (ACO) through the Centers for Medicare and Medicaid Services with a subset of their participating physicians, realizing improvements in care and cost reductions.

• The Michigan State Medical Society (MSMS): MSMS is the state’s premier professional association for medicine with over 15,000 physicians, residents, and medical students statewide and will assist with spread and education. Since its founding in 1866, MSMS has been committed to promoting a health care environment that supports physicians in caring for and enhancing the health of Michigan (MI) citizens through science, quality, and ethics in the practice of medicine.

• The UAW Retiree Medical Benefits Trust: The UAW Retiree Medical Benefits Trust (the “Trust”) provides health care benefits for retired UAW members of General Motors, Ford, and Chrysler, along with their eligible dependents. When the Trust launched in January 2010, it became the largest non-governmental purchaser of retiree health care in the United States, covering over 860,000 persons. The UAW Trust is pleased to collaborate with The Greater Detroit Area Health Council (GDAHC) to promote Choosing Wisely.