

# Survey says city's condition is critical in health care cost, quality

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Oklahoma City's "ambulatory health care," or non-hospital medical care, is ranked at the bottom of a 14-region survey released Thursday by the Robert Wood Johnson Foundation.

If the foundation graded on the curve, Oklahoma City would have received an "F" for its score on seven key areas measured in its "Market Scan of Quality Initiatives in 14 Regions."

However, the city was the only one of the 14 areas to receive a "D" for categories that included community leadership, quality improvement, performance measurement and public reporting.

"Dog last," said Jeff Greene, president and chief executive of Oklahoma City-based MedEncentive and one of the many health care industry sources on which the survey drew to reach its conclusions.

"The measurements and the methods that (the foundation) used might not be the best, but I think they got the criteria right on, and I think they got the ranking of Oklahoma City correct, too," he said.

The survey compared Oklahoma City with Boston; Cincinnati; Detroit; Indianapolis; Madison, Wis.; Memphis; Minneapolis; Phoenix; Portland, Ore.; Rhode Island; Rochester, N.Y.; Savannah, Ga.; and Seattle.

Boston earned the only "B" in the survey, and every other city or region but Oklahoma City earned a "C."

Boston scored 43.2 total points in the seven categories. It earned a high of 9.4 in the "performance measurement" category.

Oklahoma City, by contrast, scored 20.1 total points in the seven categories and had a high of 7.2 in the area of "community leadership".

The city scored a 0.0 in the "health IT incentives and infrastructure" category.

The survey reveals the need for better education on both cost and quality of health care, Greene said.

"We feel like we have the solution in that we are going to ask others to form a coalition to address this list of criteria to help move Oklahoma City from last to first," he said.

In fact, Greene said he has been recruiting participants in the coalition and has yet to have someone reject his request.

"This is a call to arms, an opportunity to get a third party to come in to say look, these things are important, and if you want health care to be more affordable, we have to address these seven criteria," Greene said. "I think the general consensus is that when we consume health care, we don't know what the cost is, what the price is and we don't know what the relative level of quality that our providers have demonstrated is."

Dr. Doug Folger, chief medical officer with the OU Physician Group, said Oklahoma City's scores suffered in part because it has little "interconnected" health care

## Oklahoma City's Score

Here are Oklahoma City's scores in the seven categories studied by the Robert Wood Johnson Foundation, with the high score and city in parenthesis:

1) Community leadership	7.2
(Memphis 8.9)	
2) Quality improvement	2.3
(Minneapolis 6.7)	
3) Performance measurement	5.4
(Boston 9.4)	
4) Public reporting	3.6
(Boston 9.1)	
5) Physician financial incentives	1.3
(Minneapolis/Seattle 4.5)	
6) Health IT incentives	0.0
(Boston 8.2)	
7) Consumer engagement	0.3
(Minneapolis 9.4)	

technology that lets physicians or hospitals communicate electronically.

"We just don't have a very well-developed electronic information system in this market," Folger said.

"We also haven't gotten very far along in pay-for-performance issues, where individual performance or group practice performance is measured and patients are steered to physicians that have the high quality scores."

Greene's company has developed a "pay-for-performance" health care system that financially rewards both the patient and the doctor for following what he called an

"evidence-based" treatment of most medical conditions.

"There are markets that are far ahead of Oklahoma City in this regard, and this gets back to what we (MedEncentive) are about," Greene said.

Folger said that increased emphasis on physician performance could boost Oklahoma City's scores compared with cities included in the survey.

In the area of health care IT incentives, the three other peer cities scored as low as did Oklahoma City, Folger said.

"It's obvious that nationally we're not very far advanced in our information technology connectiveness at this point, and that's a real challenge for the future, I think," he said.

The survey was conducted almost two years ago, which already dates some of the findings released Thursday, said Melissa Hill, marketing strategies manager for the Oklahoma Foundation for Medical Quality.

"An important thing to remember is this scan was taken at a point in time, and it might look very different if you did the scan today because there have been advances in some areas," Hill said.

The survey also provided a very narrow snapshot of the health care industry overall, excluding hospitals, she said.