

Quality Composite Score Overview

Medical Groups and Clinics

The [Quality Improvement Committee](#) is charged with overseeing the quality reporting done by the Washington Health Alliance. A subset of clinical leaders from this committee and the Health Economics Committee led the development of the composite score methodology. The following provides a general overview of the composite score methodology. This methodology builds on the long-standing methodologies and [technical specifications](#) of the [Community Checkup](#).

Selecting the Composite Score Measures

This composite score utilizes 29 measures grouped into four domains (listed in the table on page 2). All of the measures are derived from the Community Checkup and were selected as commonly used indicators of strong primary care. These measures are all previously vetted and approved by the Quality Improvement Committee and meet the Alliance's minimum volume requirements.

Building the Composite Measure

The nature of individual measures can differ greatly. To make the results of differing measures comparable, each measure's results are standardized using statistical techniques to determine how different an entity's individual results for each measure are from the measure's state average. This enables an apples-to-apples comparison of performance levels between measures that may be very different in nature.

The domain score for each entity is based on the degree of difference between an entity's individual measure result and the state average within that domain. Each overall domain score is then weighted and combined with other domain scores to determine the final composite score for the entity.

Presenting the Results

The domain and composite scores described above are presented as the actual score with 0.0 equal to the state average. A positive score indicates better overall performance than the state average with a negative score indicating overall performance below the state average. The higher the score (positive or negative), indicates the degree to which the entity's performance is better or worse than the state average.

To make the score more broadly accessible, the percentile is color-coordinated with shades of green-grey-red as visual representation of performance. Green represents better performance, grey average performance and red worse performance.

The percentile at which an individual composite or domain score falls when compared to other individual composite scores is also included. The percentile, which ranges between 0 and 100% represents the distribution of all composite or domain scores and provides an understanding of each entity's performance relative to other entities. For example, a medical group at the 80th percentile means we estimate its performance would exceed 80% of all other medical groups.

Table 1. Domain Contents

Prevention and Screening
Breast cancer screening
Cervical cancer screening
Colon cancer screening
Chlamydia screening
Adolescent well-care visits
Well-child visits (in the first 15 months)
Well-child visits (ages 3-6 years)
Chronic Disease Care
Follow up for children prescribed ADHD medication (30 days)
Follow up for children prescribed ADHD medication (9 months)
Staying on antidepressant medication (12 weeks)
Staying on antidepressant medication (6 months)
Asthma medication ratio
Eye exam for people with diabetes
Blood sugar (HbA1c) testing for people with diabetes
Kidney disease screening for people with diabetes
Taking diabetes medication as directed
Monitoring patients on high-blood pressure medication
Taking hypertension medications as directed
Taking cholesterol-lowering medications as directed
Statin therapy for patients with cardiovascular disease
Coordinated, Cost-Effective Care
Potentially avoidable ER visits
Hospital readmissions within 30 days
Appropriate, Cost-Effective Care
Avoiding antibiotics for adults with acute bronchitis
Appropriate testing for children with sore throat
ADHD medication generic prescriptions
Stomach acid medication generic prescriptions
Antidepressant medication generic prescriptions
Avoiding x-ray, MRI and CT scans for low-back pain
Avoiding antibiotics for children with upper respiratory infection