



COSTAWARE LAUNCH

APRIL 7, 2022

[HTTPS://COSTAWARE.DHSS.DELAWARE.GOV/](https://costaware.dhss.delaware.gov/)

"LIVE" ON APRIL 7, 2022 AT 12:00 P.M. ET

AGENDA



About the Initiative



Website Demonstration



Methodology



Next Steps



Q&A

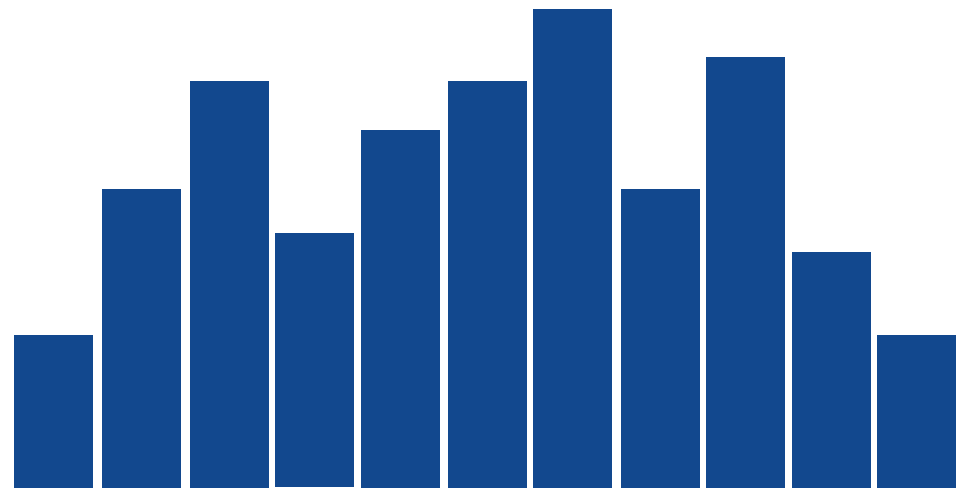
CostAware

Delaware's State Health Care Costs

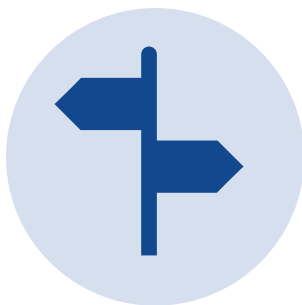


ABOUT THE INITIATIVE

**Introductory remarks
from DHSS Cabinet
Secretary Molly Magarik**



STATE CONTEXT



Delaware's
"Road to Value"



Spending and
Quality Benchmarks





NATIONAL CONTEXT

COSTAWARE WEBSITE VERSION 1.0 – APRIL 2022

- Delaware's Health Care Claims Database (HCCD)
 - 2019 data
- 2019 Publicly available CMS Quality data
 - Hospital Compare
 - Medicare Shared Savings Program
- All results aggregated by **unnamed** Hospital and Accountable Care Organization (ACO)





WEBSITE DEMONSTRATION

[HTTPS://COSTAWARE.DHSS.DELAWARE.GOV/](https://costaware.dhss.delaware.gov/)

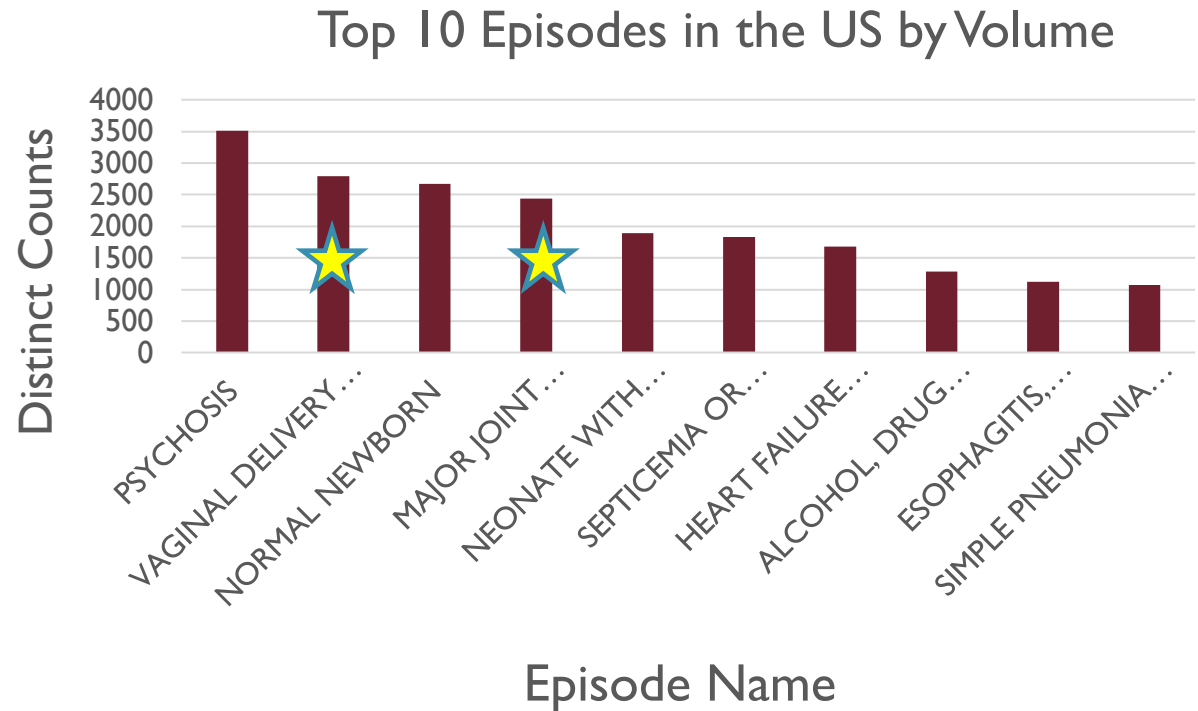
⁷
“LIVE” ON APRIL 7, 2022 - 12:00 P.M. ET

METHODOLOGY – DATA ENHANCEMENT TOOLS



METHODOLOGY – ALIGNMENT WITH NATIONAL DATA

Delaware data shows similarities to national trends.



 Featured on CostAware 1.0

3M

METHODOLOGY – EPISODES OF CARE

■ Average Cost and Utilization

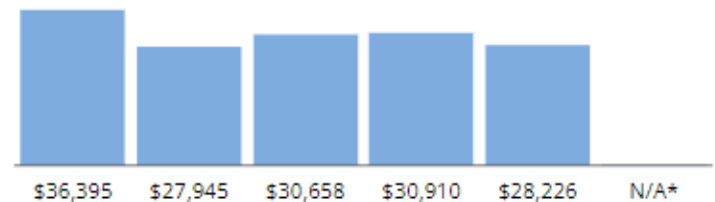
- Vaginal Delivery, C-Section, Knee & Hip Replacement, Colonoscopy, PCI
- Average amount per episode
- By payer type – Medicaid, Medicare Advantage, Commercial

■ Data and Methods

- MS-DRG-based “episodes”
- Assigned to hospitals based on billing provider NPI
- Average amount paid reflects all services billed between admission and discharge dates

Knee and Hip Replacement | 2019

Cost per episode across 6 Delaware hospitals



*Not enough data to report.

Commercial ▼



METHODOLOGY – SERVICES

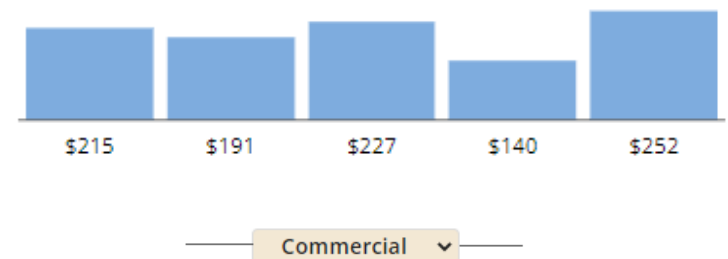
■ Average Cost and Utilization for:

- Doctor's Office & ED Visits, Lab & Imaging Services
- Top procedures by claim volume and total paid amount

■ Data and Methods:

- Claims identified based on CPT codes
- Average amount paid calculated by service and payer type
- Assigned to billing providers based on NPIs
- Grouped by ACO

Head CT | 2019
Cost per service across 5 Delaware ACOs



METHODOLOGY - TOTAL COST OF CARE (TCOC)

■ Based on HealthPartners NQF-Endorsed Methodology

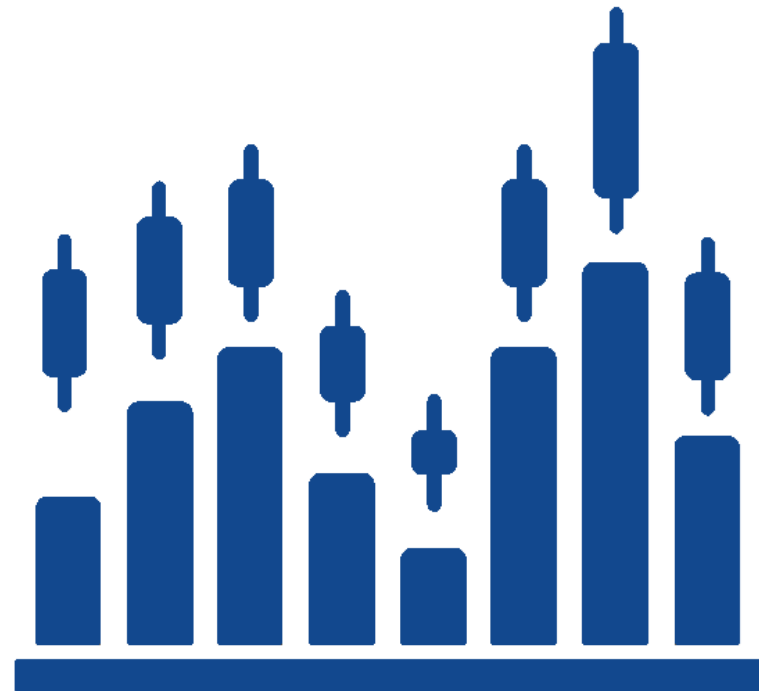
- Reflects *all* services provided to patients (regardless of where the service was rendered)
- Captures the impact of both prices and utilization on TCOC
- Measures are risk adjusted to address “some patients are sicker than others” concerns
- Applied to commercial claims data only



TREATMENT OF OUTLIER VALUES

■ Outlier Values

- Do not reflect typical costs
- May exist due to incomplete data or human error
- Impact the accuracy and relevance of average cost estimates



LOOKING AHEAD: COSTAWARE 2.0



Provider
information



More services,
episodes, and
medical conditions



Additional sites of
care



Geographic details





CostAware

Delaware's State Health Care Costs

QUESTIONS?

Send additional questions to DHCC@delaware.gov

CONTRIBUTORS





APPENDIX

DRG Detail

Hospital ..	Category	DRG (group)	Hospital Rank	GMLOS	LOS	Count	Total
Hospital 1	Commercial	Knee & Hip Replacement	0.000	2.4	1	2	*
			0.032	2.4	1	1	\$1,753
			0.065	2.4	1	1	\$1,828
			0.097	2.4	1	1	\$1,848
			0.129	2.4	1	1	\$1,848
			0.161	2.4	1	1	\$1,857
			0.194	2.4	2	1	\$20,027
			0.226	2.4	1	1	\$37,610
			0.258	2.4	1	1	\$37,665
			0.290	2.4	1	1	\$37,947
			0.323	2.4	1	1	\$38,430
			0.355	2.4	1	1	\$40,178
			0.387	2.4	2	1	\$40,251
			0.419	2.4	1	1	\$40,368
			0.452	2.4	1	1	\$40,646
			0.484	2.4	1	1	\$40,712
			0.516	2.4	1	1	\$41,046
			0.548	2.4	4	1	\$41,446
			0.581	2.4	1	1	\$41,731
			0.613	2.4	1	1	\$43,160
			0.645	2.4	1	1	\$43,425
			0.677	2.4	1	1	\$43,778
			0.710	2.4	1	1	\$43,821
			0.742	2.4	1	1	\$43,898

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			0.710	2.4	1	1	\$43,821
			0.742	2.4	1	1	\$43,898
			0.774	2.4	2	1	\$43,899
			0.806	2.4	1	1	\$44,754
			0.839	2.4	4	1	\$45,269
			0.871	2.4	2	1	\$46,564
			0.903	2.4	5	1	\$55,004
			0.935	2.4	2	1	\$61,554
			0.968	2.4	6	1	\$69,532
			1.000	2.4	7	1	\$98,974

THE FOLLOWING SLIDES ARE SCREENSHOTS OF THE WEBSITE

Delaware.gov Agencies News Topics Contact

CostAware

Delaware's State Health Care Costs

Home FAQ & Resources Methodology Contact Us

On the road to quality health care

Awareness of Cost Leads to Greater Value

CostAware
Delaware's State Health Care Costs

Compare Cost and Quality Data for Delaware Hospitals and Accountable Care Organizations (ACO).

Welcome from Department of Health and Social Services Cabinet Secretary Molly Magarik.
"Sometimes the highest cost care is not always the highest quality."

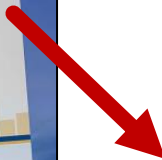
Get started by selecting an episode or service to see the difference in cost.

Episodes of Care

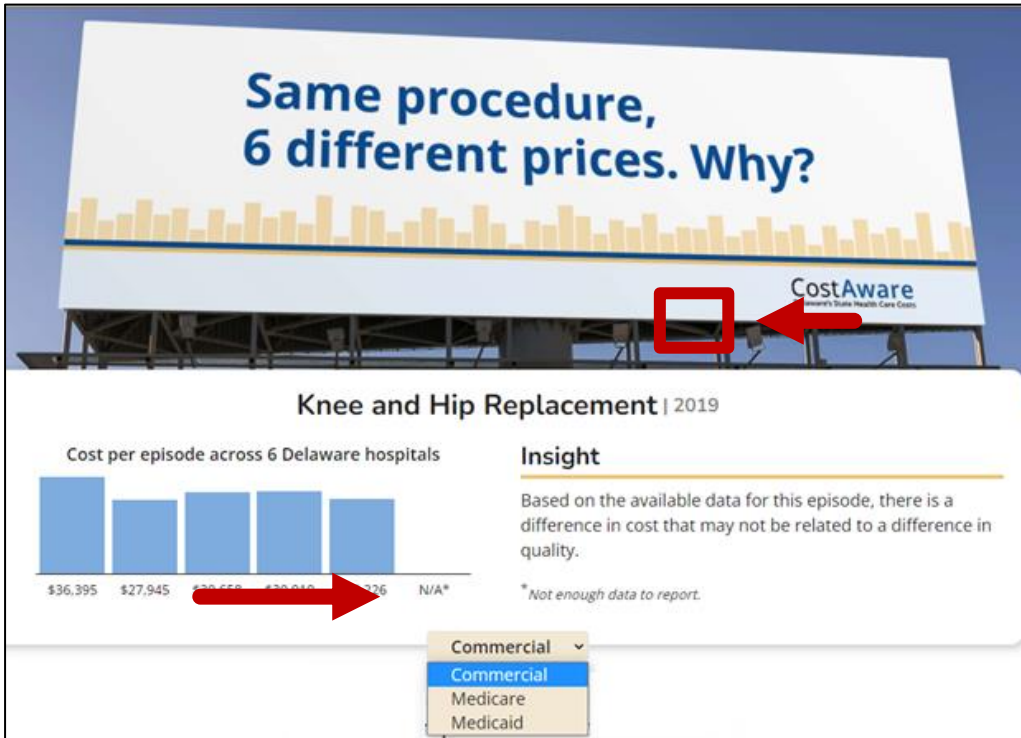
- Percutaneous Coronary Intervention
- C-Section
- Emergency Department Visits
- Knee and Hip Replacement
- Vaginal Delivery

Services

- Blood Count: CBC, and Differential WBC Count
- Colonoscopy
- Doctor Visits
- Hemoglobin A1c



Home FAQ & Resources Methodology Contact Us



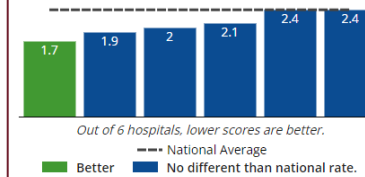
About Knee and Hip Replacement

Knee and Hip Replacement is a surgery that involves complete removal of the damaged knee or hip joint and replacement with an artificial joint. This medical procedure requires multiple services from different providers. Episodes of care combine these services to create a single estimate of average cost.

The estimate above reflects costs for all medical services received between the admission and discharge date or on the date of service. The average cost displayed is based on plan paid amount, plus copay, coinsurance, and deductible—not charged amount. See the Methodology page for more information.

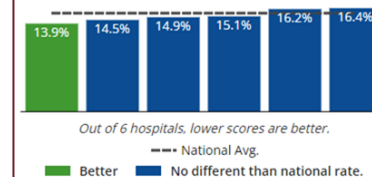
Rate of complications for hip/knee replacement patients

Number of patients readmitted within 30 days of being hospitalized for a knee or hip replacement surgery compared to the total number of knee or hip replacement surgeries performed by that hospital.



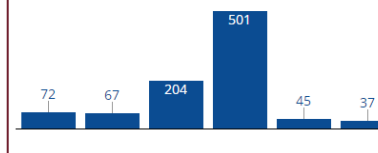
Hospital-wide Rate of Readmission after Discharge

Hospitals that provide high quality care and ensure adequate follow-up can prevent patients from returning to the hospital and help lower cost.



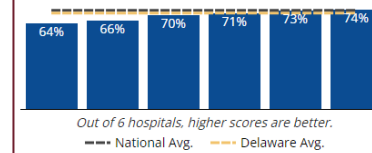
Hospital Utilization

The number of episodes reported by 6 hospitals in Delaware across insurance types.



Patient Satisfaction

Captures the percent of patients who gave their hospital a rating of 9 or 10 (on a 0 to 10 point scale)





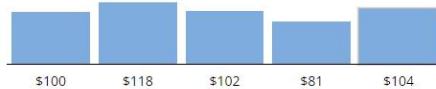
Same service, 5 different costs. Why?



CostAware
Delaware's State Health Care Costs

Screening Mammography | 2019

Cost per service across 5 Delaware ACOs



Insight

Based on the available data for this service, there is a difference in cost that may not be related to a difference in quality.

* Not enough data to report.

Medicaid ▾

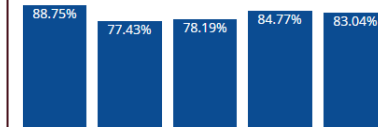
About Screening Mammography

Used to screen for breast cancer.

Estimates reflect both the facility costs (taking the image) and the professional cost (reading the image). The average cost displayed is based on insurance paid amount, plus patient's copay, coinsurance, and deductible amounts. See the Methodology page for more information.

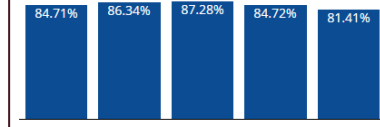
Breast Cancer Screening

Percentage of women 50-74 years of age who had a mammogram to screen for breast cancer.



Quality

The percentage of patients who reported they could get timely care, appointments, and information from their physicians.



Utilization

Delaware statewide utilization (rate per 1,000 population.)

32.16

Screening Mammography

Frequently Asked Questions

About the Website

- 1. What is the purpose of this website?** The CostAware website is how the Delaware Health Care Commission (DHCC) will share its assessments of Delaware's health care systems. It will share comparisons of health care activity, costs and outcomes for health care services, providers, and programs. These findings are intended to inform collaborative initiatives and programs among health care providers that will promote access to high-quality affordable care.
- 2. Why can't I see the names of hospitals or providers?** This initial version of CostAware is the first phase of the DHCC's effort to increase transparency in performance of the Delaware health care system. It is anticipated that future versions of CostAware will include more detailed cost, utilization, and quality information.
- 3. How can the information be used?** CostAware webpages are expected to increase awareness of Delaware's health care variations in cost and quality. As CostAware reports are developed, they will provide information that allows consumers, employers, and other purchasers of health care to make informed decisions about where to seek health care that meets their needs.
- 4. Who developed the website?** The CostAware website was developed by the Delaware Health Care Commission (DHCC) and the Department of Health and Social Services (DHSS).
- 5. Are the costs for Delaware hospitals only?** Currently, yes. DHCC and DHIN are exploring options for providing similar information for hospitals located in neighboring states in future versions of CostAware.



About the Methodology

- 1. What is the data source?** The Delaware Health Care Claims Database (HCCD), maintained by the Delaware Health Information Network (DHIN). This database is a collection of claims data from Medicare, Medicaid and commercial health insurers and is the largest repository of claims data in the state. For more information about the HCCD, visit: <https://dhin.org/healthcare-claims-database/>
- 2. Why do prices differ across hospitals and providers?** Many factors contribute to price variation including differences in clinical practice, billing practices, contractual relationships between payers and providers and payment systems used by health insurers.
- 3. Why are the unit costs would be grouped by ACO?** ACO groupings were chosen to be consistent with the CMS quality measures displayed on the CostAware website. CMS reports this data by ACO.
- 4. How was ACO data calculated?** ACO calculations were based on the providers associated with the ACO and their entire panels having a claim in the HCCD. Because primary care practices belonging to ACOs may not have onsite imaging facilities or their own labs, these services are often provided at other locations. When this occurs, the cost of an imaging procedure or lab service is assigned to the patient's ACO based on patient attribution. As an example, Jane Doe receives an MRI at the independent anonymous imaging center. Because Jane is attributed to a physician practice associated with ACO 1, the cost of Jane's MRI is assigned to ACO 1 for purposes of calculating the average cost.