

REPORT 2:

Using Information to **Get** Good Care

Quality of Health Care for Medicare Patients
in Shelby County, Tennessee

August 2009

This **TAKE CHARGE** *for better health* report uses Medicare claims data from 2006 & 2007 to report primary care physician performance in doctors' offices across Shelby County.

Healthy Memphis Common Table would like to acknowledge the Robert Wood Johnson Foundation's *Aligning Forces for Quality* Initiative for supporting this report series through their grant.

This report was prepared by the Healthy Memphis Data Center with support from members of the Performance Measurement and Public Reporting Steering Committee of the AF4Q initiative. The Healthy Memphis Data Center is a collaborative effort of University of Tennessee Health Science Center, QSource, University of Memphis, Memphis & Shelby County Health Department and the Healthy Memphis Common Table.

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This report contains information using certain Medicare claims data from 2006 and 2007, which is provided to us by a third party. This information is limited in scope and this information does not provide a comprehensive assessment of any healthcare provider or the services provided by any healthcare provider. Therefore, you should not use this information as your sole source information for choosing any healthcare provider.

**Aligning Forces
for Quality** | Improving Health & Health Care in
Communities Across Greater Memphis

An initiative of the Healthy Memphis Common Table and the Robert Wood Johnson Foundation.

Copies of this report and additional data are available at:
<http://www.healthymemphis.org/>

Foreword

Every American deserves quality health care. Yet despite advances in medicine, we know that many people do not get the right care at the right time. It isn't a problem that can be pinpointed to one cause ... and it doesn't have a simple solution. Making health care better will take rethinking the “who, what, when, where and why” of health care:

- **who** gets care,
- **what** care is needed,
- **when** care is needed,
- **where** is the best place to get care, and
- **why** the choices made are the best approach.

The tricky part is to get everyone who gives care, gets care and pays for care on the same page when it comes to making health care better. Each group has a role to play in improving care. We believe that putting good information in the hands of those who need it can support these efforts.

Those who give care need information to better understand what they do well and what they need to improve.

Those who get care need information to make decisions about what good care is and how to get it.

Those who pay for care need information about the quality and price of care in order to determine whether health care delivers value that's worth the investment.

Part of our work at the Healthy Memphis Common Table is to report information to the public about the quality of health care in our community. In a series of reports titled **TAKE CHARGE** *for better health*, we will provide guidance about:

- using information to recognize good care,
- using information to get good care, and
- using information to give good care.

Our goal is to bring information to consumers so that they can better understand, demand and choose quality health care. Within each report will be clear, simple steps for action to take charge and get better care to improve your overall health.

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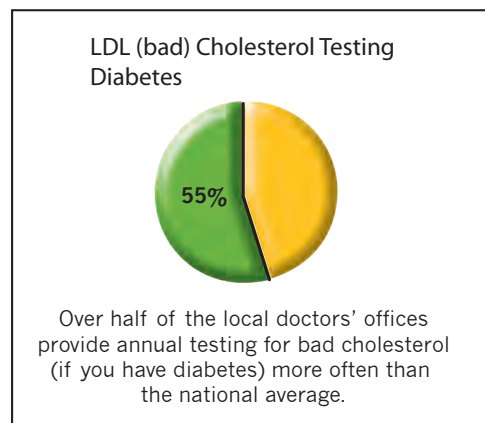
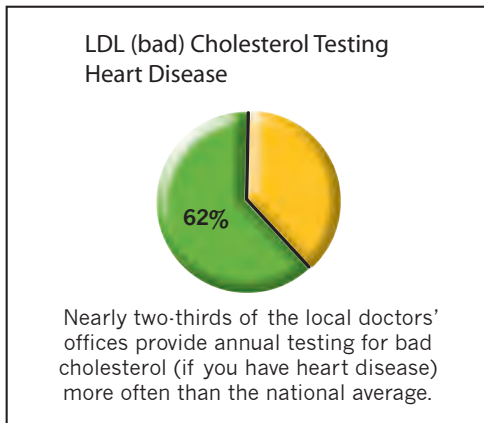
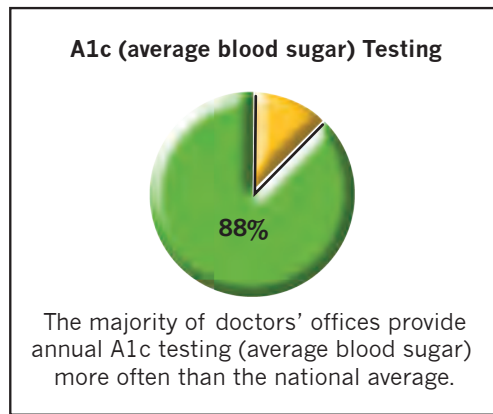
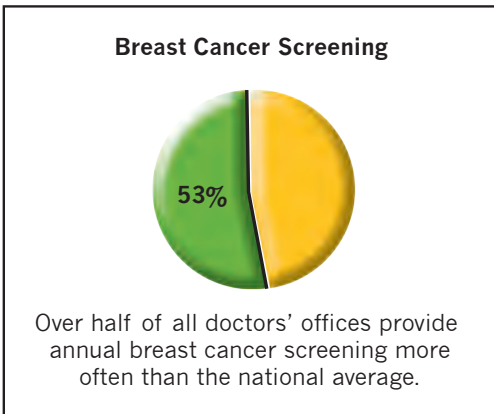
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Highlights

This report shows how often doctors' offices provide four important health care services to their Medicare patients. These health services include:

- Mammograms to screen for breast cancer among all women between the ages of 40 and 69 years,
- Testing for A1c (average blood sugar) to improve diabetes management among all adults with diabetes,
- Testing for LDL (bad) Cholesterol to monitor and reduce risk of heart attack among all adults with diabetes,
- Testing for LDL (bad) Cholesterol to monitor and reduce risk of heart attack among all adults with heart disease

In this report, results are shown for about 200 doctors in 51 local offices that provide primary care services. The level of care provided in the majority of these offices is similar to or better than the care provided in offices throughout the country. The charts below show the percent of doctors' offices that meet or exceed the national average for providing the recommended health services outlined above. That means that the recommended care is provided more often than the national average for such care. For example, if you have diabetes, you are much more likely to get your average blood sugar tested at least yearly compared to the national average.



About the Report

What is good care?

Good care is delivered when people get the health care they should when they need it the most.

How can good care be determined?

Medical research provides evidence of what care will result in a certain patient outcome. This information is used to develop certain standards of care that doctors can use when treating patients. For example, it is known from studies that breast cancer occurs more often in women once they reach 40 years of age. Based on this information, a certain standard care to provide breast cancer screening to all women over age 40.

How is good care measured?

One way to measure the quality of care is by clearly defining the most important health services that should be provided to patients who have or are at risk for certain conditions. The number of individuals who actually got the service (a test, medicine, or some other form of care) out of all individuals that should have gotten the service can then be measured. In the example above, the number of women over the age of 40 who got a mammogram out of all women over age 40 that were seen by their doctor would be measured. This rate of breast cancer screening is called an 'indicator of quality care.'

Why are these indicators important to me?

Knowing the indicators (and the reasons for them) helps individuals to understand the most important care they should be receiving. It also helps to know what services to ask for if you are not already receiving them from your doctor.

Why are these indicators important to the public?

Improving health care is a top priority in this country. We need information about "what is" before we know "what should be" and work towards change. The indicators in this report are recognized nationally as essential health care services. Use of commonly accepted quality indicators allows comparison between levels of care provided in doctors' offices throughout the county, state and nation. In turn, resources can be directed to improve health care in the areas of greatest need.

Where did the information in this report come from?

Each time a patient goes to the doctor, a bill (claim) is sent to Medicare containing information about diagnoses and treatments provided. The information from all of the bills sent in 2006 and 2007 are added together to see how many patients received certain services.

What information is available in this report?

Information about four different indicators for the quality of preventive, diabetes, and heart care is presented. For each indicator, the level of care provided by primary care doctors in local offices is compared to the average level of care provided in doctors' offices throughout the nation. Individuals can also compare the quality of care against national (Healthy People 2010) and local (Healthy Memphis) goals for health improvement.

How do I use this information?

The most important goal of this report is for consumers to learn about what good care is and to make sure they are receiving it. In addition, individuals can determine if their current level of care is acceptable and, if not, find a higher quality of care.

Overall Primary Care

The performance at fifty-one doctors' offices providing primary care services to Medicare patients in Memphis and Shelby County is shown in Table 1 on the following pages.

The rates in the table, expressed as percentages, are created by dividing the number of patients who got a service by the total number of patients who should have gotten the service. For example, if a doctor's office scores a 50% on breast cancer screening, that means that half of all women* over 40 who should have received a mammogram actually did.

Table 1 also shows a four-star rating system used to provide an overall primary care rating on all of the four indicators of quality care added together. For each indicator, a star is given if the doctors' office provides that service more often than the national average. In addition, a green up arrow ▲ next to the indicator's rate shows whether a doctors' office improved how often they provided that service between 2006 and 2007.

For Example, the Mid South Health Loop earned 3 out of 4 stars for providing annual breast cancer screening, A1c testing, and testing for bad cholesterol (among heart disease patients) more often than a typical doctor's office. The Health Loop also improved breast cancer screening rates by more than 10% between 2006 and 2007.

The Four Indicators of Quality Care:

Breast Cancer Screening

the percent of all women 40 to 69 years of age who had a mammogram,

Testing for A1c in Diabetes

the percent of all adults with diabetes who had an A1c (average blood sugar) Test,

Testing for LDL (bad) Cholesterol Testing for Diabetes

the percent of all adults with diabetes who had an LDL (bad) Cholesterol Test and,

Testing for LDL (bad) Cholesterol Testing for Heart Disease

the percent of all adults with heart disease who who had an LDL (bad) Cholesterol Test.

Find Out How Your Doctors' Office Compares!

Use Table 1 on the following pages to find your doctors' office performance for breast cancer screening, testing for A1c and bad cholesterol in diabetes, and testing for bad cholesterol in heart care. It should be noted that Table 1 shows the performance of doctors' offices (not individual doctors). If you are not sure of the name of your doctor's office, contact your doctor and ask for the name of the practice or visit www.healthymemphis.org to search for results by doctor name.

* All women refers to female patients between age 40 and 69 with insurance coverage through the Medicare fee-for-service program that see a doctor in that office.

Table 1. Overall Primary Care Rating

Doctors' Offices, letters B-Me

Preventive Care
Breast Cancer Screening %
A1c Testing %
Diabetes Care
LDL Cholesterol Testing %
Heart Care
LDL Cholesterol Testing %

National Averages *	Overall Rating	59.3	80.7	77.6	81.7
Baptist Minor Medical Center	★	46.8	71.4	75.0	90.9▲
Bartlett Raleigh Internal Medicine		46.7	74.8	65.4	76.9
Bellevue Clinic	★★★	55.7▲	86.1	91.0	90.5
Church Health Center	★	79.8▲	31.5	15.4	36.4
Collierville Family Medical Center	★	51.2	83.3	59.4	79.1
Collierville Medical Specialist	★	48.7	73.3	69.3	87.5
Complete Health Care Center	★★★	58.4	82.6	81.8	86.1▲
Covington Pike Medical Clinic	★★★★	76.1	89.7	89.7	89.8
Cresthaven Internal Medicine Associates	★★★★	78.2	94.5	89.8	93.6
East Jackson Family Medical Center	★	53.6	86.5	74.9	75.0▲
Eastmoreland Internal Medicine (Midtown)	★	57.2	80.9	57.0	64.2
Eastmoreland Internal Medicine (Whitehaven)	★★★★	81.6▲	88.9	96.5▲	100▲
Family Physicians Group	★★★	57.7	90.8	83.1	90.0
Finn Cary MD And Associates	★★★★	68.0	87.7	84.2▲	83.3
First Care Medical Center	★★★	65.3	82.2	75.0	82.5
Forest Hill Family Practice And Aesthetics	★★	42.4	94.9	76.9	85.7
Geriatrics Group Memphis	★	54.8	81.6	47.4▲	76.5▲
Humphreys Family Practice Clinic	★★	54.3	88.9	76.2	93.6▲
Internal Medicine & Cardiology	★★★★	69.2	95.2	81.6	85.5
Jackson Randle Family Health Care	★★★	92.6	86.5▲	81.1▲	NA
Kulinski Garbarini Hoover & Awdeh		47.7▲	59.6▲	59.6	57.9
Light Clinic	★★★★	70.4	94.8	96.3	97.4▲
McKenzie and VanDeven, MD's	★★	55.3▲	84.2	63.2	82.4
Memphis Internal Medicine	★★★★	73.2	87.5	83.5	88.3
Memphis Medical Specialists	★★★★	70.1	92.2	84.0▲	83.8
Memphis Primary Care Associates	★	55.0	91.5	60.2	50.0
Methodist Teaching Practice	★★★	83.3	90.5	81.0	72.7

- ★ = Meets or exceeds national average for one indicator.
- ★★ = Meets or exceeds national average for two indicators.
- ★★★ = Meets or exceeds national average for three indicators.
- ★★★★ = Meets or exceeds national average for four indicators.
- No stars = Does not meet national average for any indicator.

▲Indicates improvement of 10% or higher between 2006 and 2007 rates for each indicator.

*This data is based on a report provided by the Healthy Memphis Data Center using Medicare claims data from 2006 and 2007.

Table 1. Overall Primary Care Rating

Doctors' Offices, letters Mi-W

National Averages*	Overall Rating	<div style="display: flex; justify-content: space-around; font-size: small;"> <div style="text-align: center;"> Preventive Care Breast Cancer Screening % </div> <div style="text-align: center;"> Diabetes Care A1c Testing % </div> <div style="text-align: center;"> Heart Care LDL Cholesterol Testing % </div> </div>			
		59.3	80.7	77.6	81.7
Midtown Internal Medicine	★★★	42.2	86.3	92.1	93.9
MidSouth Health Loop	★★★	64.9 [▲]	84.1	75.2	84.2
MidSouth Internal Medicine	★★★★	63.6	91.4	86.4	92.6
North Internal Medicine	★★★	53.3	88.6	88.1	89.3
Occumed	★★★	68.8	90.0	96.7	NA
Peabody Family Care	★★★	58.1	87.4	82.8 [▲]	84.5
Peabody Healthcare Group	★★	45.8	87.9	75.8 [▲]	90.0 [▲]
Penmarc Internal Medicine Associates	★★★	70.5	85.1	77.0	82.5
Practice of Dr. J Garbarini	★★★	39.3	90.5	91.3	89.4
Practice of Drs Rentrop & Geater	★	31.5	84.1 [▲]	69.3	75.0
Preventive Internal Medicine Group	★★★★	71.4	86.8	87.4	95.1
Primary Care Specialists	★★★	62.9	86.0	77.7	80.7
Prime Medical Group	★	53.2	81.3	76.0	72.7 [▲]
Raleigh Cordova Medical Group	★★	67.4	89.4	72.6	72.6
Reaves, Avila & Akins MD's	★★★★	83.3	90.0	91.3	97.9
Sanders Clinic	★★★★	68.1	88.9	88.2	91.0 [▲]
Southwind Medical Specialists	★★★★	63.5	89.7	79.8	81.7
The Family Medicine Group	★★	72.5 [▲]	79.4	79.4	78.3
The Medical Group	★★★★	66.2	86.9	81.8	83.1
UT Family Medicine	★★★★	61.4	82.5	79.0	82.7
UT Medical Group	★★★	74.3	86.1	81.5	80.4
Verzosa Ungab Internal Medicine	★★	60.9	94.9	70.3	73.4
Walker & Prasad MD's	★	52.7	83.5	63.5	68.8
West Clinic	★★	48.4	77.8	85.6 [▲]	87.0

- ★ = Meets or exceeds national average for one indicator.
- ★★ = Meets or exceeds national average for two indicators.
- ★★★ = Meets or exceeds national average for three indicators.
- ★★★★ = Meets or exceeds national average for four indicators.

No stars = Does not meet national average for any indicator.

[▲]Indicates improvement of 10% or higher between 2006 and 2007 rates for each indicator.

*This data is based on a report provided by the Healthy Memphis Data Center using Medicare claims data from 2006 and 2007.

Preventive Care

The doctors' offices in Figure 1 show the highest quality of care for providing recommended breast cancer screening among local doctors' offices. Excellence in care is defined by exceeding not only the national average for breast cancer screening, but also the Healthy People 2010 and the Healthy Memphis* goals for breast cancer screening.

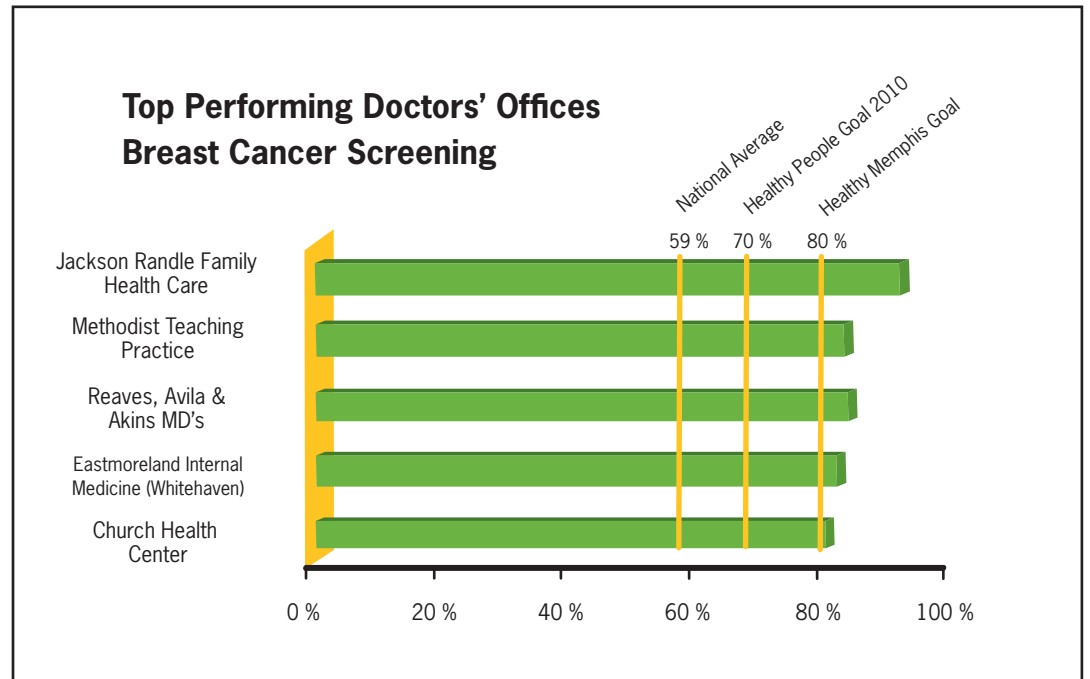


Figure 1

In 2007, each of the five doctors' offices shown provided screening to more women for breast cancer than the national average (59%), the Healthy People 2010 goal (70%), and the Healthy Memphis Goal (80%).* For example, the Jackson Randle Family Clinic provided annual breast cancer screening for almost all (93%) of their female Medicare patients between the ages of 40 and 69.

* Healthy People 2010 is a set of health goals for the nation. Diverse groups across the government, non-profit and business areas work as a team to set goals and help communities around the country plan for better health. The Healthy Memphis Goal is set by the Physician Advisory Committee of the Aligning Forces for Quality Initiative in order to provide a standard for which all primary care practices in Memphis and Shelby County can pursue excellence in care for breast cancer screening.

Diabetes Care

The doctors' offices in Figure 2 show the highest quality of care for providing recommended A1c (average blood sugar) testing for diabetes care among local doctors' offices. Excellence in care is defined by exceeding not only the national average for A1c testing, but also the Healthy People 2010 and the Healthy Memphis goals for A1c testing.

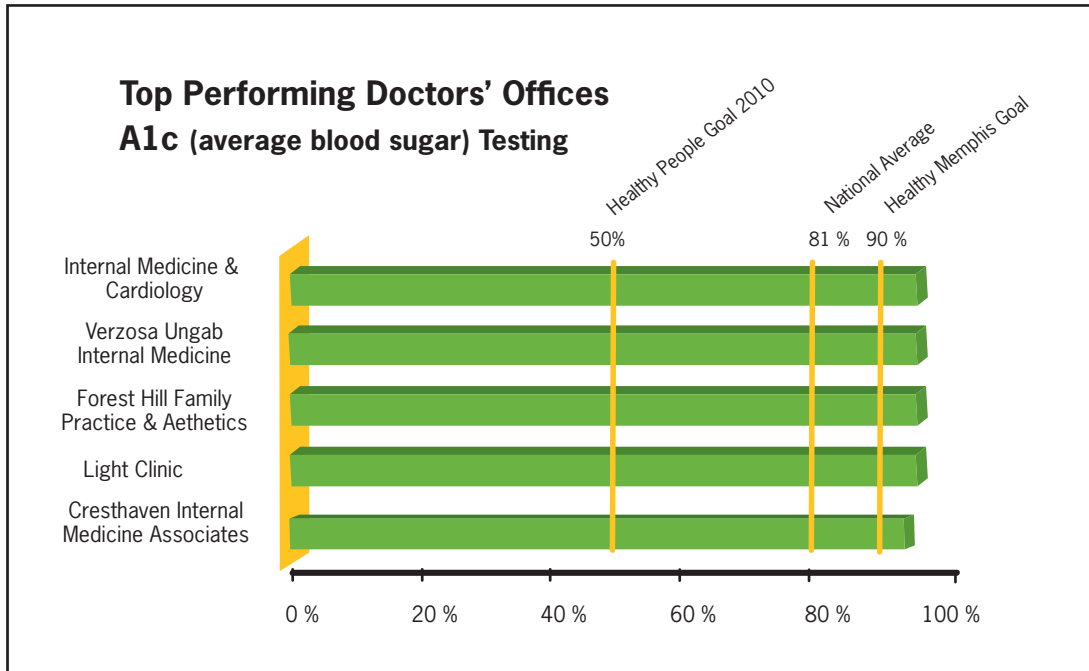


Figure 2

In 2007, each of the five doctors' offices shown provided A1c testing to more patients than the Healthy People 2010 goal (50%), the national average (81%), and the Healthy Memphis Goal (90%). For example, Internal Medicine & Cardiology provided A1c testing at least once a year to almost all (95%) of their patients with diabetes.

Diabetes Care

The doctors' offices in Figure 3 show the highest quality of care for providing recommended testing of LDL (bad) cholesterol in diabetes care among local doctors' offices. Excellence in care is defined by exceeding not only the national average for LDL testing, but also the Healthy Memphis goal for LDL testing in diabetes.

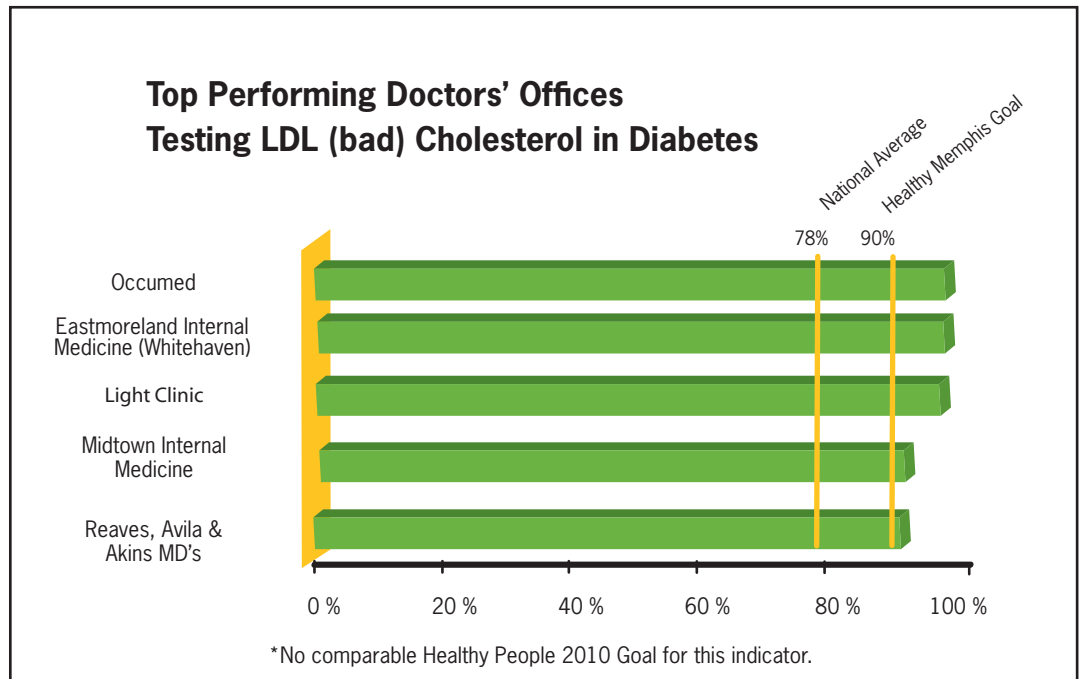


Figure 3

In 2007, each of the five doctors' offices shown provided testing for LDL (bad) cholesterol to more patients with diabetes than both the national average (78%) and the Healthy Memphis Goal (90%). For example, Occumed provided annual LDL testing to almost all (97%) of their patients with diabetes.

Heart Care

The doctors' offices in Figure 4 show the highest quality of care for providing recommended testing for LDL (bad cholesterol) in heart care among local doctors' offices. Excellence in care is defined by exceeding not only the national average for LDL testing, but also the Healthy Memphis goal for LDL testing in heart care.

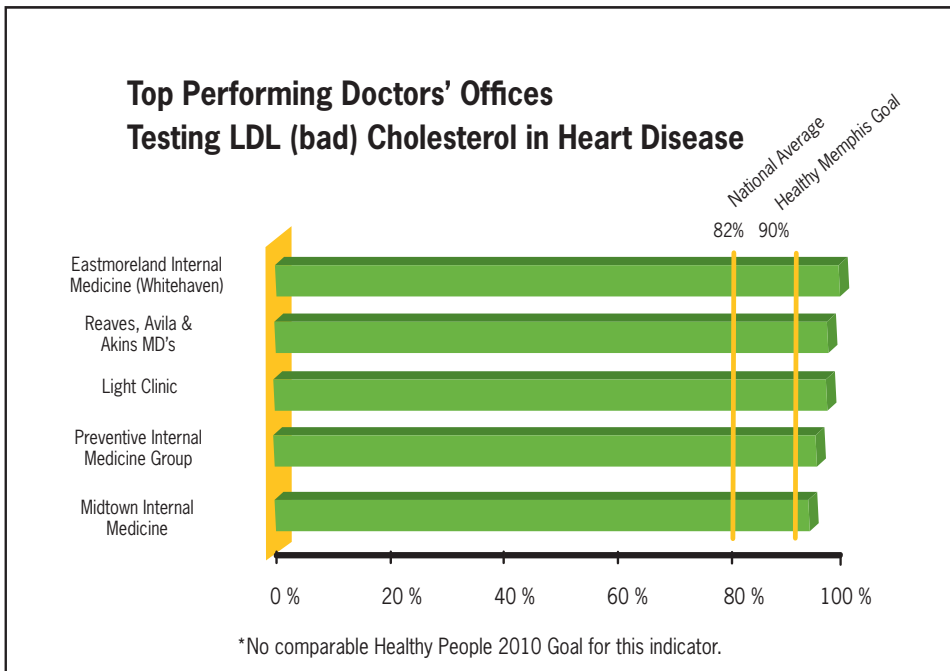


Figure 4

In 2007, each of the five doctors' offices shown provided testing for LDL (bad) cholesterol to more patients with heart disease than both the national average (82%) and the Healthy Memphis Goal (90%). For example, the Whitehaven office of the Eastmoreland Internal Medicine clinic provided annual LDL testing to all of their patients with heart disease

Using Information to **Take Charge** for better health!



Finding and using quality information is an important part of making health care choices. The information in this report is one source that can be used to choose doctors based on their ability to deliver good care. Health care consumers should seek additional sources of information about choosing a doctor in order to find good care.

How can I use the information in this report to get good care?

The most important goal of this report is for the consumer to learn about what good care is and to make sure they are receiving it. In addition, individuals can determine if their current level of care is acceptable and, if not, find higher quality care. Using the information in this report requires the consumer to think about the following four questions:

1) Does your doctor's office provide the recommended health care service more often than a typical doctor's office?

Use Table 1, Overall Primary Care Rating, on pages 8 & 9 of this report to compare your doctor's office rates for breast cancer screening, A1c (average blood sugar) testing, and testing for LDL (bad) cholesterol to the national average for each indicator. The national average for each of the four indicators can be found in the first row of Table 1. Based on your health and medical history, certain indicators may be more important to you than others. If your doctor's office rates are higher than the national average, you are getting better than typical care.

2) What is the performance of your doctor's office?

If your doctor's office rates are higher than the national average(s), does "better than typical care" mean good quality to you? You can use the Healthy People 2010 and the Healthy Memphis goals from Figures 1 through 4 on pages 10 - 13 to see how your doctor's office rates (from Table 1) compare to a higher standard of care.

3) How can you partner with your doctor to get better care?

If your doctor's office rates are lower than the national average(s), make sure you get the recommended care you need. Ask your doctor about the care you need most for prevention and any conditions you may have. Use the "**Take Charge for better health** card" at the end of this report to remember to ask your doctor for important preventive, diabetes and heart care. Talk to your doctor if you are not getting a health service you think you should be getting.

4) Where can you find a higher level of care?

Use Figures 1 through 4 on pages 10 - 13 to find the practices with the highest level of care provided to their patients. It is not the purpose of this report to encourage individuals to change doctors based on the information in this report alone. Find and use additional quality information from reliable sources in making decisions about your care.

Appendix 1

Rules of Use

Healthy Memphis Common Table's **TAKE CHARGE** for Better Health Series

Overview

This purpose of this document is to guide users of the **TAKE CHARGE** for Better Health series. This series of public reports is intended to promote access to high-quality health care for all, support health improvement in our community and provide focus for quality improvement efforts. The use of information in this series of reports shall be consistent with the philosophy and guidelines described below. These guidelines apply to all reports released under the **TAKE CHARGE** for Better Health series, released by the Healthy Memphis Common Table, calendar year 2009 and beyond. The guidelines are governed by a board policy and will only be revised by the said Board of the Healthy Memphis Common Table.

Philosophy

Public reporting on indicators of quality of care through the **TAKE CHARGE** for Better Health series is an innovative effort to bring every stakeholder in the greater Memphis community – patients, hospitals, employees, nurses, insurers, doctors, EVERYONE – together to collectively and individually impact the health of our entire region. This series of reports provides information that can be used to understand what good care is and how to get it. It aims to engage the entire community in discussions about variation in care and how to improve the quality of care.

Improvements in health care quality and health outcomes require a high level of accountability among all stakeholders. The use of reliable data can lead to informed health care decision-making for consumers and providers. The **TAKE CHARGE** for Better Health series promotes and encourages consumers to actively partner with their physicians, hospitals, insurers, and employers in the management of their health. The information in these reports also supports sharing of lessons learned from efforts to improve delivery of health services. Through collaborative efforts, we can achieve a health care system that works for all stakeholders.

Guidelines for Use

The **TAKE CHARGE** for Better Health series of reports should be used solely for educational purposes with the primary intent of stimulating multi-stakeholder discussions around variation in care and quality improvement efforts. This information is not intended to be used for business purposes such as marketing/advertising, negotiating third party payer contracts or employee benefit planning.

Notify the Healthy Memphis Common Table (HMCT) of misuse. Individuals and organizations that identify any use of HMCT-produced results that is outside of these guidelines and rules should notify the HMCT via phone, email or a form on the HMCT website. The HMCT will review all contested uses and determine necessary action.

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The Board of Directors for the Healthy Memphis Common Table would like to thank the following individuals for their contribution of time and effort toward the Aligning Forces for Quality Initiative.

ADVISORY GROUP ON PUBLIC REPORTS

JIM BAILEY, MD, MPH – Director

Healthy Memphis Data Center, UTHSC

DAWN FITZGERALD – CEO – QSource

RENEE´ S. FRAZIER, FACHE, MHSA – Executive Director

& AF4Q Project Director – HMCT

CEVETTE HALL, RN, DHSc, APN, CPHQ, CMNC

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YVONNE MADLOCK – Director

Memphis & Shelby County Health Department

CINDY MARTIN – Research Data Analyst

University of Memphis

JILL NAULT – Coordinator – Healthy Memphis Data Center

AF4Q LEADERSHIP TEAM

DAVID ARCHER – CEO & President – St. Francis Hospital

JIM BAILEY, MD, MPH – Director

Healthy Memphis Data Center, UTHSC

DARLA BELT, RN – Administrative Director of Quality

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DAWN FITZGERALD – CEO – QSource

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Regional Medical Center at Memphis

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& AF4Q Project Director – HMCT

CEVETTE HALL, RN, DHSc, APN, CPHQ, CMNC

Regional Nurse Liaison, Grand West Region

Blue Cross Blue Shield of Tennessee

DONNA HATHAWAY, PhD, FAAN – Professor & Dean

College of Nursing, UTHSC

EMILY FOX-HILL, PhD, RN – Coalition Leader

Mid-South Comfort Care Coalition

MANOJ JAIN, MD – Medical Director – QSource

YVONNE MADLOCK – Director

Memphis & Shelby County Health Department

JERRY MAILOT – Chief Quality Officer

Methodist LeBonheur Healthcare

JILL NAULT – Coordinator – Healthy Memphis Data Center

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St. Andrew AME

CRISTIE UPSHAW TRAVIS, MSHHA – CEO

Memphis Business Group on Health

BEVERLY WILLIAMS-CLEAVES, MD

Bluff City Medical Society

AF4Q WORK GROUP LEADERS

JIM BAILEY, MD, MPH – Director

Healthy Memphis Data Center, UTHSC

DENISE BOLLHEIMER, MBA – Vice President, Marketing

UT Medical Group, Inc.

MICHAEL CATES, CAE – Executive Vice President

The Memphis Medical Society

DAWN FITZGERALD – CEO – QSource

RENEE´ S. FRAZIER, FACHE, MHSA – Executive Director

& AF4Q Project Director – HMCT

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Memphis City Schools

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JUANITA WHITE – Consumer Representative

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National Partnership for Women and Families

ALFRED J. WOOTEN, MBA – Senior Project Manager

FedEx Corporate Services

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Blue Cross Blue Shield of Tennessee

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Blue Cross Blue Shield of Tennessee

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CIGNA Healthcare of Tennessee, Inc. - Memphis

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RENEE´ S. FRAZIER, FACHE, MHSA – *Executive Director & AF4Q Project Director* – HMCT

CEVETTE HALL, RN, DHSc, APN, CPHQ, CMNC

Regional Nurse Liaison, Grand West Region
Blue Cross Blue Shield of Tennessee

RODNEY HOLMES – *CEO*
Mid South eHealth Alliance

JILL NAULT – *Coordinator* – Healthy Memphis Data Center

DAVID ROSENTHAL, PHD
UT Health Informatics and Information Management

CRISTIE UPSHAW TRAVIS, MSHHA, CHAIR – *CEO*
Memphis Business Group on Health

TERESA WATERS – *Associate Professor*
UT Health Science Center

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BILL APPLING – J. William Appling & Associates

JIM BAILEY, MD, MPH – *Director*
Healthy Memphis Data Center, UTHSC

MICHAEL CATES, CAE – *Executive Vice President*
The Memphis Medical Society

JAMES ENSOR, MD – *Physician*
Memphis Internal Medicine

RENEE´ S. FRAZIER, FACHE, MHSA – *Executive Director & AF4Q Project Director* – HMCT

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MANOJ JAIN, MD – *Medical Director* – QSource

ROBERT KERLAN, MD – *Physician*
Memphis Medical Specialist

ROBERT KIRKPATRICK, MD – *Physician*
Family Medicine, St. Francis

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WILLIAM LIGHT, MD – *Physician* – The Light Clinic

DAVID L. MANESS, DO, MSS, FAAFP – *Professor and Chair*
UT Department of Family Medicine

GEORGE MAYZELL, MD – *Physician*
Methodist Chief Patient Care Officer

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GERALD PRESBURY, MD – *Physician*
Bluff City Medical Society

JANICE PRIDE-BOONE, MD – *Physician*
Bluff City Medical Society

WILEY ROBINSON, MD – *Physician*
Inpatient Physicians Mid-South

CLAUDETTE SHEPHARD, MD – *Physician* – UT Medical Group

HENRY STAMPS, MD – *Physician* – Bluff City Medical Society

CRISTIE UPSHAW TRAVIS, MSHHA – *CEO*
Memphis Business Group on Health

CLARENCE WATRIDGE, MD – *Physician*
Semmes-Murphey Clinic

BEVERLY WILLIAMS-CLEAVES, MD
Bluff City Medical Society

ROBERT YATES, MD – *Regional Medical Director, West Grand Region* – Blue Cross Blue Shield of Tennessee

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Healthy Memphis Data Center, UTHSC

MELROSE BLACKETT, MD – *Physicians, Obstetrics & Gynecology* – Blackett and Townsen

SHELLEY DURFEE – *Owner* – Shelley Durfee Public Relations

ROBERTA ESMOND – *Contracts Administrator* – QSource

RENEE´ S. FRAZIER, FACHE, MHSA – *Executive Director & AF4Q Project Director* – HMCT

CEVETTE HALL, RN, DHSc, APN, CPHQ, CMNC
Regional Nurse Liaison, Grand West Region
Blue Cross Blue Shield of Tennessee

Notes

Using Information to Take Charge for better health!

✓ Check to make sure you are getting the important care you need.

Your Personal **Take Charge** for better health card

Get the Care You Need Most:

PREVENTIVE CARE

- Mammogram (for women age 40 and older)
- Colon cancer screening (for adults 50 and older)

DIABETES CARE

- A1c testing (average blood sugar)
- LDL (bad) cholesterol testing
- Eye exam
- Kidney testing for urine protein

HEART CARE

- LDL (bad) cholesterol testing
- Beta blocker blood pressure medicine (after a heart attack)

MEDICATION SAFETY

- Ask your doctor if tests are needed to monitor your medicine
- Discuss any concerns or problems with your medicine
- Discuss all the treatment options available with your doctor



COMMON TABLE

MAIN OFFICE
3175 Lenox Park Boulevard Suite 309
Memphis, Tennessee 38115
(901) 273-2617
www.healthymemphis.org

Revision date: November 16, 2009