

Veracity Quality Validation: Overview

Veracity Healthcare Analytics

Veracity is a specialized healthcare analytics consultancy run by Niteesh Choudhry, a Harvard Medical School professor and a leading researcher on health care quality.

We engaged Veracity to conduct a comprehensive review of our approach to assessing physician quality. They conducted a two-phase study over several months: first, they graded the validity of all of the quality metrics we've modeled; second, they assessed the metrics' effectiveness by measuring the relationship between our PCP quality scores and the care that the physician delivers.



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Phase I: Metrics Validation

Grade the validity of the quality metrics we use in our models.

Phase II: Empirical Validation

Validate the relationship between Grand Rounds quality rankings and patient outcomes.

Key Results

Results from the two-phase study revealed that our approach to physician quality is grounded in clinical best practices, and that physicians defined as high-quality have delivered demonstrably better outcomes for patients.

In the Phase I study, Veracity found that “virtually all of the metrics used by Grand Rounds to evaluate physician quality have clinical face validity and empirical evidence supporting their relationship with health care quality”. More specifically:

- **100%** of our quality measurement metrics have clinical face validity.
- **92%** of our metrics are supported by published studies.
- **95%** of our measure specifications were deemed appropriate.

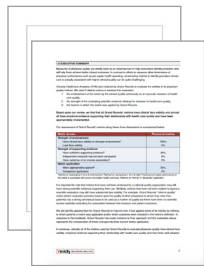
In the Phase II study, primary care physicians ranked in the top 10% by Grand Rounds provided higher quality care than other physicians for all of the metrics evaluated. The magnitude of these differences was clinically meaningful and statistically significant in all cases. Compared to patients seeing PCPs in the bottom 10%, patients seeing PCPs in the top 10% were:

- **30-40% more likely to receive appropriate cancer screenings** for colorectal, cervical, and breast cancers.
- **30-70% less likely to be prescribed high-risk medications** including high-dose opioids, high-dose benzodiazepines, concurrent opioids and benzodiazepines, butalbital for headache, and carisoprodol for back pain.

Furthermore, compared to PCPs in the bottom 10%, PCPs in the top 10% were:

- **>90% less likely to be sanctioned in the future** by their state medical board.

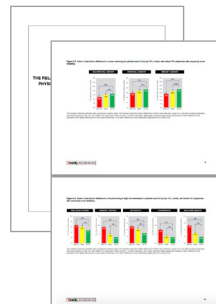
Phase I: Metrics Validation



“In summary, virtually all of the metrics used by Grand Rounds to evaluate physician quality have clinical face validity and empirical evidence supporting their relationship with health care quality. Most have been well adapted.”

— Professor Niteesh K. Choudhry,
Harvard Medical School

Phase II: Empirical Validation



“In summary, we found that top 10% primary care physicians provided higher quality care than other physicians for all of the metrics we evaluated. The magnitude of these differences was clinically meaningful and statistically significant in all cases.”

— Professor Niteesh K. Choudhry,
Harvard Medical School

Contact

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