

The California Regional Health Care Cost & Quality Atlas (“the Atlas”) is a comprehensive benchmarking tool that highlights variation in cost, clinical quality and hospital utilization by geography and insurance type across the state.

### Why?

The Atlas enables “hot-spotting” for targeted improvement efforts. By illustrating performance gaps in our communities, we can improve access, quality and cost and reduce disparities for all Californians.

### What does the Atlas include?

Performance information for:

- Provider risk sharing arrangements
- Accountable Care Organizations (ACOs)
- Large, small, and self-insured employers
- Individually insured members
- Members with selected chronic conditions
- Commercial HMOs & PPOs
- Medicare Advantage & Fee-For-Service (FFS)
- Medi-Cal Managed Care & FFS

Approximately 75% of California’s population included

Payer	Enrollment
Commercial	14 M
Medicare	5 M
Medi-Cal	11 M
<b>Total</b>	<b>30 M</b>

### What does the Atlas measure?



#### Clinical quality

Cancer screenings, diabetes care, asthma medications, appropriate bronchitis and low back pain care, and safe opioid use



#### Hospital utilization

Emergency department visits, readmissions, inpatient utilization, and the frequency of selected procedures



#### Cost of care

The average annual cost per member including cost by major service category and member cost sharing

## Key findings

- Persistent wide and unacceptable variation in quality and cost in California, some of which may be avoidable
  - **Northern CA:** strongest quality performance but at relatively high cost
  - **Southern CA:** solid quality performance at much lower cost
  - **Central CA:** weaker quality performance with mixed cost results
- Financial risk sharing (capitation) between plans and providers typically results in better quality and lower total cost
- Integrated care models generally perform better than non-integrated models
- California's costs have increased over time but less than national benchmarks



## How findings from the Atlas can be used to improve health care

- ✓ Use the uniform definition of value-based performance from the Atlas as a starting point for improvement expectations
- ✓ Focus investments on geographies or specific conditions showing the most need
- ✓ Compare a product, region, or organization's performance to Atlas benchmarks
- ✓ Promote integrated care models and financial risk sharing given the better value the Atlas shows for these arrangements

Take a tour and explore the insights at [atlas.iha.org](https://atlas.iha.org)

**About IHA:** Founded in 1994 and based in Oakland, CA, the nonprofit, non-partisan Integrated Healthcare Association is guided by a board of industry-leading health plans, physician organizations, and hospitals and health systems, plus representatives of purchaser, consumer, academic, pharmaceutical, and technology entities. As a member-driven organization convening diverse stakeholders committed to advancing high-quality, affordable, patient-centered care, IHA generates objective data and insights to help forge common ground across California's health care community.

The Atlas emerged out of initial planning done by IHA and the California Health and Human Services (CHHS) Agency, and is supported by the California Health Care Foundation ([CHCF](https://www.chcf.org)), which works to improve the health care system so it works for all Californians.