

AQA Principles for Public Reports on Health Care¹

The AQA recognizes the critical need to provide consumers, purchasers and other stakeholders with useful, more robust information and tools to enable them to make informed decisions about treatment, coverage and other matters related to their health care. The following principles are designed to increase the effectiveness of public reporting of quality information. These principles reflect the importance of balancing stakeholders' urgent need for useful information with the need for due diligence to ensure that the information provided is valid, reliable, and useful.

Recognizing that providers also need information to facilitate quality improvement, a separate set of principles has been developed to guide reporting to clinicians and hospitals.² The principles set forth in this document should be considered in conjunction with these other principles as well as principles for performance measurement,³ and data sharing and aggregation⁴ which the AQA has already endorsed.

Content of Reports

1. Reports should focus on areas that have the greatest opportunities in making care safe, timely, effective, efficient, equitable and patient centered.
2. Reports should rely on standard performance and patient experience measures that meet the AQA Principles for Performance Measurement (e.g., measures should be evidence-based, relevant to patient outcomes, statistically valid and reliable).
3. In addition to assessments of individual provider or group performance, reports should include appropriate contextual information to frame the purpose of the report, identification of the sponsors of the report and the source(s) of the information, and guidance on how to use the report appropriately for its intended purpose.
4. Reports should include overall composite assessments of individual provider or group performance as well as assessments of the individual measures used for the overall composite assessment (e.g., quality or cost of care).

¹ A previous version of these principles was initially endorsed by AQA as a Beta set of principles on 4/29/05.

² AQA developed separate sets of principles for reports to providers and for reports to consumers, purchasers and other stakeholders due to significant differences in these reports' purposes, content and formats.

³ AQA Parameters for Selecting Measures for Physician and Other Clinicians Performance

⁴ AQA Data Sharing and Aggregation Principles

Portrayal of performance differences

5. Reports should use fair and equitable methods to display performance differences that enable users to make decisions with meaningful, reliable information.

Transparent methods

6. Measures, methods, and data specifications should be as transparent and available as possible so that consumers, purchasers, physician and other clinicians and other stakeholders know results are valid and reliable.
7. If reports include specific targets for performance (i.e., benchmarks), the justification and explanation for setting these targets should be disclosed publicly.
8. To the extent possible, results should accurately reflect all services that are accountable in whole or in part for the performance measured. Attribution should be explicit and transparent.

Report design and testing for usability

9. When possible, consumers should be involved in the design of reports. The appropriateness of report design should be verified through consumer testing.
10. Reports should be designed for the cultural context, decision context, and literacy levels of consumers, purchasers and other end users.
11. Reports should be continually improved so that they are increasingly effective and evaluated for potential unintended consequences.

Timely results

12. In order for reports to be most useful, results should be based on the most recent data available.