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# FEHB Program Carrier Letter

## All FEHB Carriers

U.S. Office of Personnel Management  
Healthcare and Insurance

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**Letter No. 2011-16**

**Date: July 13, 2011**

Fee-for-Service [12]    Experience-rated HMO [12]    Community-rated [12]

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**SUBJECT: Measuring Performance of Healthcare Delivery**

In this Carrier Letter, we are requesting information on quality performance metrics that FEHB carriers may be currently utilizing and that are also appropriate for the federal population. As healthcare delivery systems evolve, we hope to help aggregate performance metrics that can help encourage improvement and foster innovation.

Please note that this letter is an information request. We have recently reviewed a number of different performance metric tools, and also asked for input from a number of FEHBP carriers. We have enclosed two charts to be completed, in which we have listed a number of metrics. Many of these metrics are HEDIS based; their respective HEDIS codes are listed as well.

The final category listed refers to **potentially avoidable medical events**. These events (whether they are preventable or avoidable adverse events) are a direct result of failure(s) to follow recognized, evidence-based best practices or guidelines at the individual and/or system level. They may be caused by misdiagnosis, failure to diagnose, delay in diagnosis and treatment, failure to follow up, or poor performance in the operating room. Others also term them as Potentially Preventable Events (PPEs). If your carrier reports/collects this information under *any* methodology, please mark “yes” to the answers on the attached chart.

An explanation of the chart, as well as the information to be completed is as follows:

1. Admin/Hybrid: "Hybrid" specifications include the use of administrative data supplemented with medical record review. "Admin" measures refer to data, such as claims or demographic information, which are used for administration purposes. Performance metrics can be derived from either of these two categories, and our specific question is to which methodology your carrier uses for each respective metric. Please mark both categories if your organization uses both methodologies for specific situations.
2. Currently Collecting for FEHBP Beneficiaries: Please check whether your carrier collected (not necessarily reported) the respective metric for the FEHBP population for 2010 (Jan 2010-Dec 2010).
3. Currently Collecting for non-FEHBP Beneficiaries: This category refers to non-FEHBP beneficiaries. Please list whether your carrier collected (not necessarily reported) the respective metric for any population in 2010 (Jan 2010-Dec 2010). If your organization collected the metric for your entire population, please check “Total Carrier Population”. If your organization collected the metric for only a small segment of your population please check “Any Carrier Sub-Population”.

4. Current Challenges: Please check this box if there are significant challenges to collecting this metric. If so, please fill out Attachment (2) [Current Challenges] next to the respective metric and list these specific challenges.

Attachment (1) is the worksheet to be completed, and Attachment (2) is the “Current Challenges” worksheet that allows your organization to list potential barriers to collecting/reporting certain metrics. Your responses will be extremely helpful as we assess ways in which we might be able to measure healthcare performance.

If you have any questions regarding this letter or your requested responses, please contact our Health Economist, Mircea Marcu, at [mircea.marcu@opm.gov](mailto:mircea.marcu@opm.gov) or at (202) 606-4819. Please also email your responses to Dr. Marcu by **25 July 2011**.

Thank you very much for your assistance and cooperation. It is greatly appreciated.

John O’Brien  
Director  
Healthcare and Insurance