

ployers and consumers. Performance measurement has become an important tool to demonstrate the value of disease state management and provider performance improvement programs. Providing feedback to physicians in the form of performance reports with appropriate benchmarks increases the likelihood of physician improvement.

OBJECTIVE: The purpose of this project was to develop a simple and practical tool to evaluate performance of individual physicians and clinics in a large physician practice management organization.

METHODS: Clinical, economic (RVUs), and relational outcomes were summarized and trended over time. Clinical outcomes examined both general and disease-specific (diabetes and asthma) endpoints. Relational outcomes included patient reported disease-specific satisfaction, quality of life, and educational initiatives. Disease-specific clinical outcomes were compared to nationally developed and accepted practice guidelines. An extensive literature review on profiling and risk adjustment was also conducted to help develop format and layout of the profiles.

RESULTS: Several informative, easy-to-read reports were developed to measure provider/disease-specific clinical outcomes, provider/disease-specific satisfaction, and provider-specific economic outcomes. Provider profiles were actionable, derived from practice guidelines, minimally intrusive, and relevant. The profiles measured the performance of each provider against the overall performance of his/her clinic and against the physician practice management organization.

CONCLUSION: The development of provider profiles that summarize the critical elements essential for managing patient care is a practical way to evaluate provider performance against nationally recognized standards with minimal data collection burden. Profiles can provide valuable information to physicians about their own performance, as well as to managed care organizations and consumers interested in provider-specific outcome measures.

PP03

DESIGNING A USER-FRIENDLY OUTCOMES RESEARCH DATABASE FOR THE PRIVATE MEDICAL PRACTITIONER

Sarpong DF

Xavier University College of Pharmacy, New Orleans, LA, USA

The goal of healthcare service is to optimize biologic function and postpone the inevitable physical decline of the patient. This service is characterized by quality, effectiveness, and cost efficiency. To achieve this end, practitioners and other parties in the health industry must be continuously involved in gathering and evaluating assessment data, given that outcomes assessment is a data-driven process which quantifies the quality and effectiveness of the healthcare received by the patient. Besides methodological challenges faced by practitioners, the lack of user-friendly and cost-effective data management system poses great barrier to particularly the private practitioner.

OBJECTIVE: The primary objective of this research project was to design a user-friendly and cost-effective database system that will afford private medical (health) practitioners the opportunity to be active participants in outcomes research and pharmacoeconomics/health economics.

METHOD: The main database system was designed using Microsoft ACCESS software. Microsoft ACCESS was the choice because 1) it interfaces with a number database/spreadsheet programs, and 2) it affords the user the opportunity to create distributable, royal-free, stand-alone applications. The data-entry form (an interface) was designed using Visual Basic, an object-oriented language, given that the user can write efficient and polished programs every bit as professional as commercial applications.

RESULTS: The database was user-friendly and has capabilities such the practitioner can: 1) evaluate each patient's response to treatment over time, 2) perform comparative analysis of various outcomes of different group of patients, and 3) assess the likelihood of his patients progressing to other disease states, to mention a few.

CONCLUSION: The product derived from this research project provides great promise to practitioners in private practice to be active participants in outcomes research and health economics.

PP04

COMMUNITY PHARMACIST ASSESSMENT OF THE MOTIVATIONS FOR PROVIDING PHARMACEUTICAL CARE ACROSS FOUR DOMAINS

Spruill WJ, Wade WE, Longe RL, Taylor TA, Burke SI
University of Georgia, Athens, GA, USA

OBJECTIVES: The provision of pharmaceutical care in the community pharmacy setting has the potential to improve patient outcomes while providing economic benefits to the pharmacist. This study attempts to anonymously measure the value of and reasons that a group of community pharmacists perform various pharmaceutical care services for 10 disease states as measured in four separate value domains.

METHODS: Sixty community pharmacists were mailed a questionnaire asking them to rank on a scale of 1 to 10 (1 = strongly disagree; 10 = strongly agree) reasons they would provide pharmaceutical care to a patient with 1 of 10 diseases. Reasons were assessed in four separate domains: financial, psychosocial, humanistic, and professional. Lastly, these reasons for providing pharmaceutical care were evaluated by specific disease states.

RESULTS: Thirty-eight pharmacists (63.3%) returned completed questionnaires. Strong agreement was seen across all domains with an average of all domain scores of 7.48 + 1.81. Individual domain scores ranked as psychosocial 7.97 + 1.72, professional 7.56 + 1.68, financial 7.24 + 2.04, and humanistic 7.16 + 1.82. Rank order, by average domain score, of individual disease states was asthma, hypertension, diabetes, hypercholesterolemia, anticoagu-