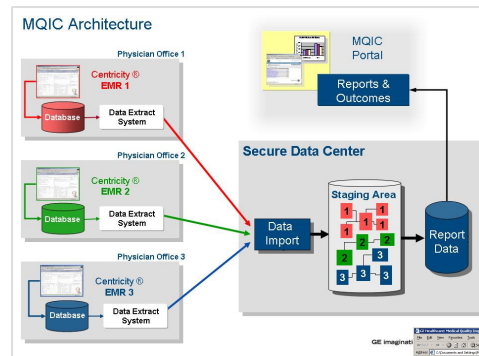


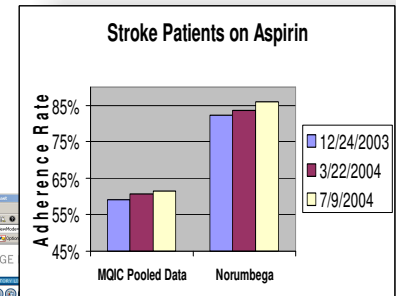
Pay for Performance Reporting & Quality Improvement

An Implementation Strategy

Tom Ricciardi, PhD



GE Healthcare dashboard showing various patient metrics and a file explorer window.



The State of Quality in Medicine

Americans receive only 55% of recommended care.



Source: McGlynn et al. NEJM 2003; 348:2635-45

National Response: Pay for Performance

The screenshot shows a Microsoft Internet Explorer browser window with the title "MEDICARE 'PAY FOR PERFORMANCE (P4P)' INITIATIVES - Microsoft Internet Explorer provided by GE Healthcare". The address bar shows the URL "http://www.cms.hhs.gov/media/press/release.asp?Counter=1343". The browser interface includes a menu bar (File, Edit, View, Favorites, Tools, Help), a search bar, and a search button. The main content area displays the CMS logo and navigation links: Home, About CMS, FAQs, Feedback, Search now, Go, Professionals, Governments, Consumers, and Media Center. A sidebar on the left lists "Programs" (Medicare, Medicaid, SCHIP, HIPAA, CLIA) and "Topics" (Advisory Committees, Coverage, Demonstrations, Manuals, Medicare Modernization Act, New Freedom, Open Door Forums, Oral Health, Partner with CMS). The main content area features a "Fact Sheet" section with contact information for the CMS Office of Public Affairs and a "Topics" sidebar with links to Search, Media Releases, Press Releases, Fact Sheets, and Testimony. The main text of the fact sheet is titled "MEDICARE 'PAY FOR PERFORMANCE (P4P)' INITIATIVES" and describes Medicare's initiatives to improve care quality. The text states: "Medicare has various initiatives to encourage improved quality of care in all health care settings where Medicare beneficiaries receive their health care services, including physicians' offices and ambulatory care facilities, hospitals, nursing homes, home health care agencies and dialysis facilities." Below this, it says: "The foundation of effective pay-for-performance initiatives is collaboration with providers and other stakeholders, to ensure that valid quality measures are used, that

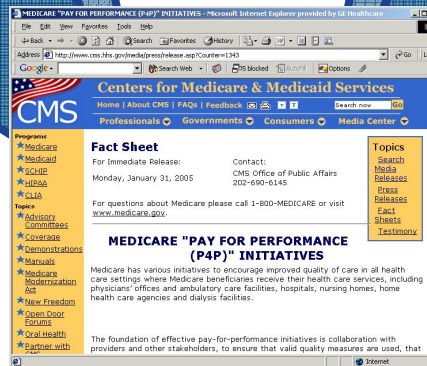
National Drivers of Pay for Performance

Physician Group
Practice
Demonstration

Care Mgmt
Performance
Demonstration

- Care Coordination
- Administration
- Outcomes

- Technology
- Outcomes



P4P – Mixed Reviews



The screenshot shows the homepage of amednews.com, which is described as 'THE NEWSPAPER FOR AMERICA'S PHYSICIANS'. The page is divided into several sections:

- SECTIONS:** Government, Profession, Business, Opinion, Health.
- LISTINGS:** Latest issue, By date, By region, Map, By health plan, By section, News briefs, Columns, Editorials, Letters, Topics, Series, Other years, Resources, Search.
- SERVICES:** Mobile edition, E-mail alert, RSS, Subscribe!, Staff directory.

The main content area features a news article under the heading 'GOVERNMENT & MEDICINE':

- AMA: Medicare pay-for-performance must be voluntary and not punitive**
- MedPAC wants the federal government to withhold up to 2% of physicians' reimbursement to create a reward pool for high performers.**

The article is by David Glendinning, AMNews staff, dated March 21, 2005. The text of the article begins with: 'Washington -- Members of Congress are receiving some conflicting advice on pay-for-performance from the nation's physicians and the advisory panel tasked with making Medicare payment recommendations.' The second paragraph starts with: 'The American Medical Association recently unveiled a set of principles that it will use to assess any program that pays doctors differently based on their performance. To garner the Association's support, the programs must focus on quality improvement, allow physicians to opt out and use payment incentives, rather than penalties.'

- Who Benefits?
- Budget neutral?
- Punitive?
- Reporting Burden?

Problem

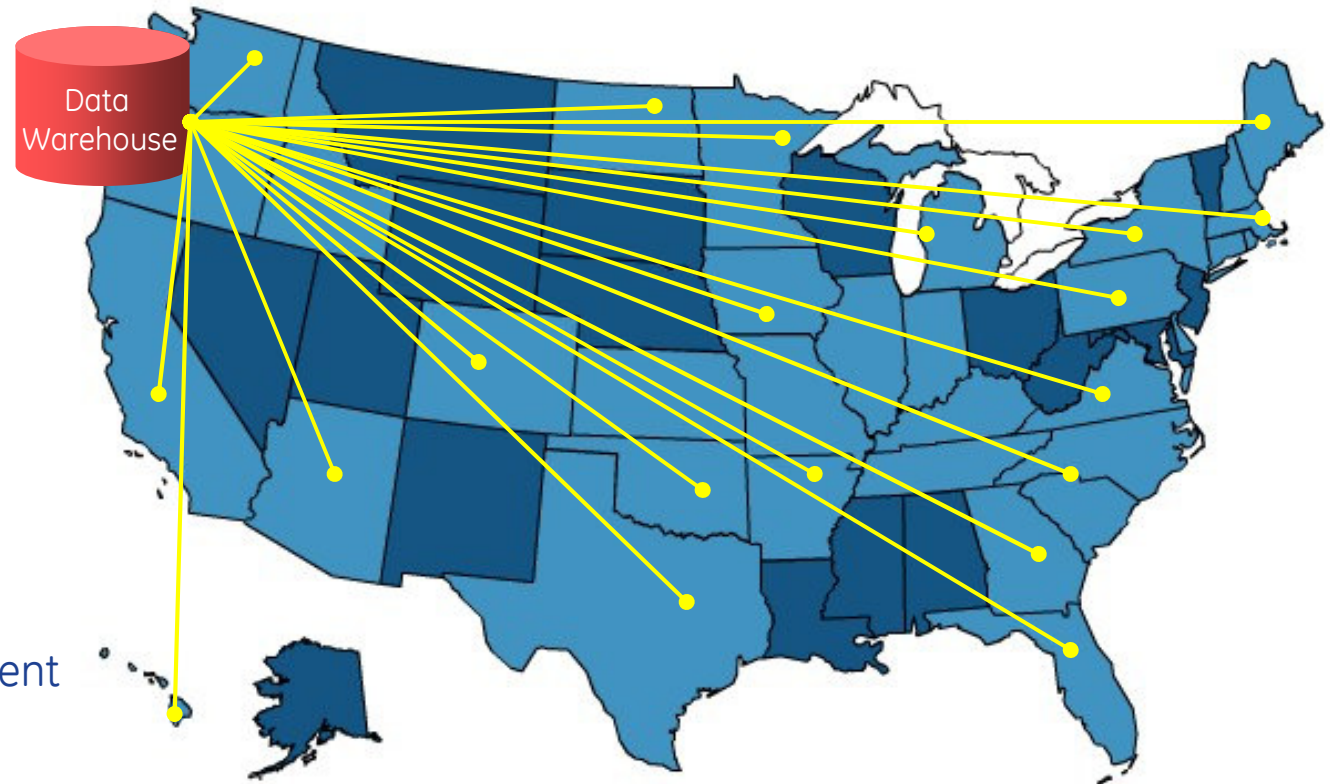
Physicians are lacking the information tools & processes required to:

- Improve quality & process of care
- Measure clinical performance
- Increase reimbursement



Medical Quality Improvement Consortium (MQIC)

MQIC: 4 Million Patients & Growing



Centricity EMR Users

Use data to improve patient care

Strengthen clinical reporting

- Disease management
- Quality of care
- Practice profiles

Clinical research

MQIC: 5,100+ Providers by Specialty

Family Practice	818
Internal Medicine	1088
Pediatrics	432
Obstetrics & Gynecology	152
Geriatrics	43
Total Primary Care MD	2,533

Cardiology	227
Surgery	153
Infectious	58
Pulmonology	96
Hematology/Oncology	85
Neurology	77
Orthopedics	56
Other Specialties	712
Total Specialty MD	1,464

Focus on Primary Care → 63%

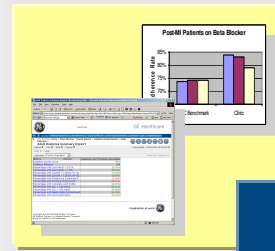
Growing Specialties Over Time

Last updated 5 June 2005

Resident MD	415
Allied Health Professionals	694

MQIC Components

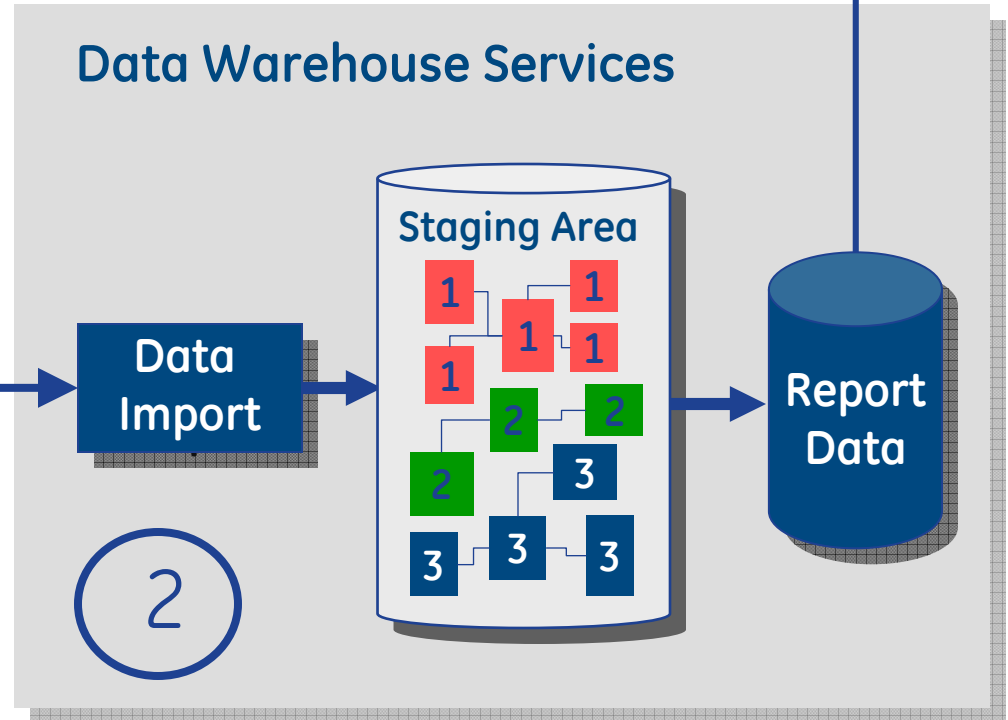
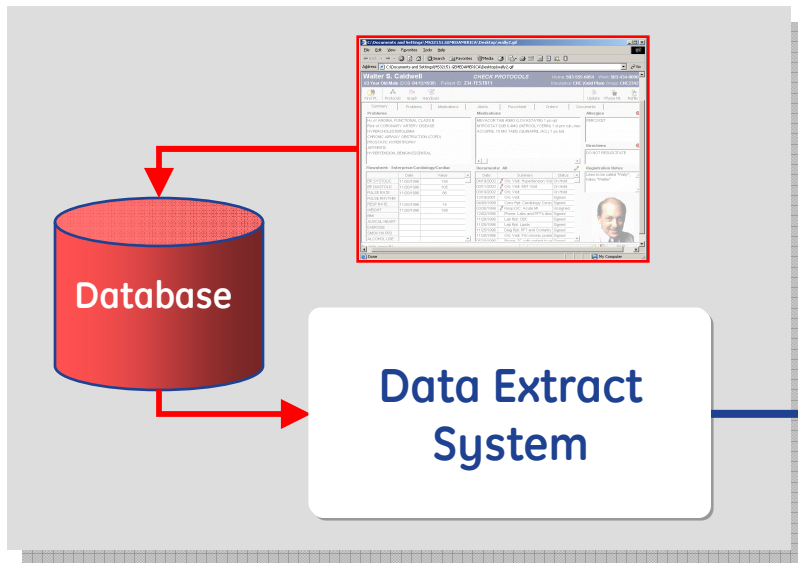
3



MQIC Web Portal

Reports & Outcomes

Centricity® Physician Office EMR



2


1

Data Security

HIPAA-compliant

Remove patient-identifying information

Only EMR customers can re-identify individuals

Name, SSN, Address		ne, Address
Zip code		s only
DOB --> /		
PID --> tr		ed to EPID

Clinical concepts are essential to successful reporting

Need to derive value from data stored “your way.”

Many entry forms for one concept

- myocardial infarction
- MI
- S/P MI 1987
- hx of heart attacks

Need decision support and reporting to occur at a more general level, e.g., “patients with heart disease”

Data Cleanup – Most common errors cleaned

<u>Entered Value</u>	<u>Cleaned Value</u>
120	120
110 RT	110
130 L LGE CUFF	130
refused	-1
3	-2
5' 10"	-1
350	-3



MQIC Web Portal

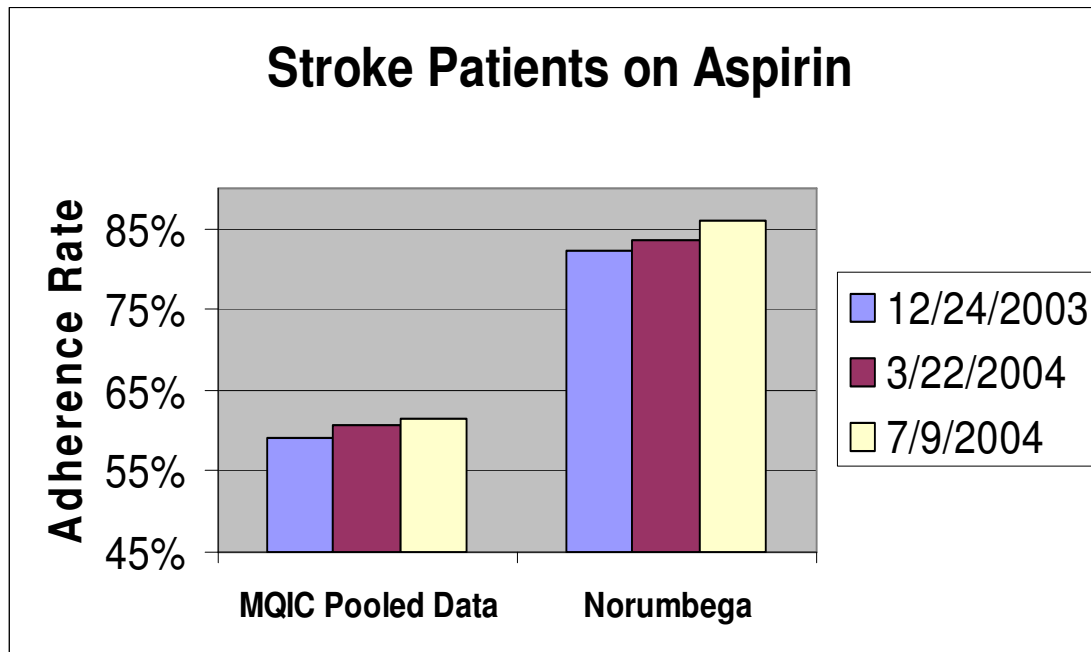
Quality Reports

Member	Metrics	Stroke Patients	Stroke Patients on Aspirin	Stroke Patients on Aspirin (%)	Stroke Patients NOT on Aspirin	Stroke Patients NOT on Aspirin (%)	IHD Patients	IHD Patients on Aspirin	IHD Patients on Aspirin (%)	IHD Patients NOT on Aspirin	IHD Patients NOT on Aspirin (%)
Westside Clinic Physician Associates		103	65	63.11%	38	36.89%	196	161	82.14%	35	17.86%

Example – Norumbega Medical



- **Medium-sized primary care practice in Maine**
- **Implemented EMR over 6 years ago**
- **9 Physicians, 30 allied health providers**
- **Serving over 21,000 patients**
- **Medical Quality Improvement Consortium**



Quality metrics showing quarterly trends for MQIC Pooled Data, 13k patients versus Norumbega Medical, a multi-site primary practice. The graph shows compliance with a commonly-accepted clinical guideline for the management of patients after a stroke.

Diabetes

Adult Diabetes Summary Report. MicroStrategy Web. - Microsoft Internet Explorer provided by Comcast

Address: https://mqic.gemedicalsystems.com/microstrategy/asp/Main.aspx?evt=4001&src=Main.aspx.4001&reportViewMode=1&reportID=53DI

GE Healthcare

Metrics	Member	Westside Clinic Physician Associates
Diabetes Quality Score		55.0
Diabetes Patients		258
Percentage with Last HbA1c > 9.0 %		22.40%
Percentage with Last HbA1c < 7.0%		58.13%
Percentage with Last BP < 140/90 mm Hg		73.25%
Percentage with Last BP < 130/80 mm Hg		48.44%
Percentage with Dilated Eye Examination		13.56%
Percentage with Smoking Assessment		68.21%
Percentage with Complete Lipid Profile		99.22%
Percentage with LDL < 130 mg/dl		96.12%
Percentage with LDL < 100 mg/dl		84.88%
Percentage with Nephropathy Assessment		94.96%
Percentage with Foot Examination		53.10%

imagination at work

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GE Medical Systems, a General Electric Company,
going to market as GE Healthcare.

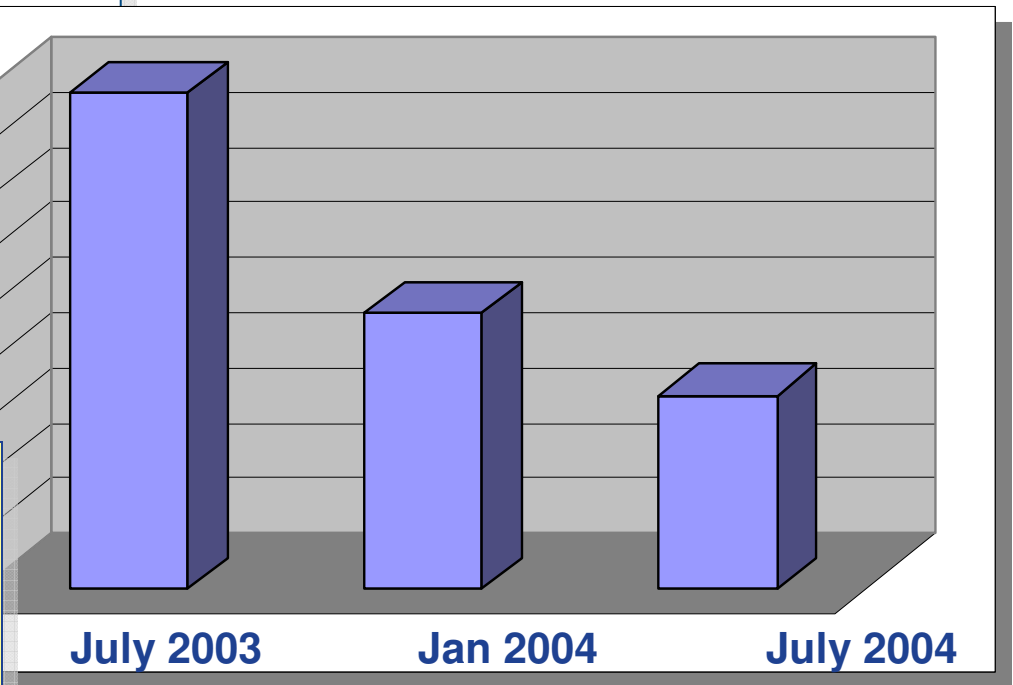


Example – Community Clinic

- Community health center near Boston
- 32 providers (12.6 FTE)
- Serving over 7,500 patients
- Federal Bureau of Primary Health Care Health Disparities Collaborative
- MQIC

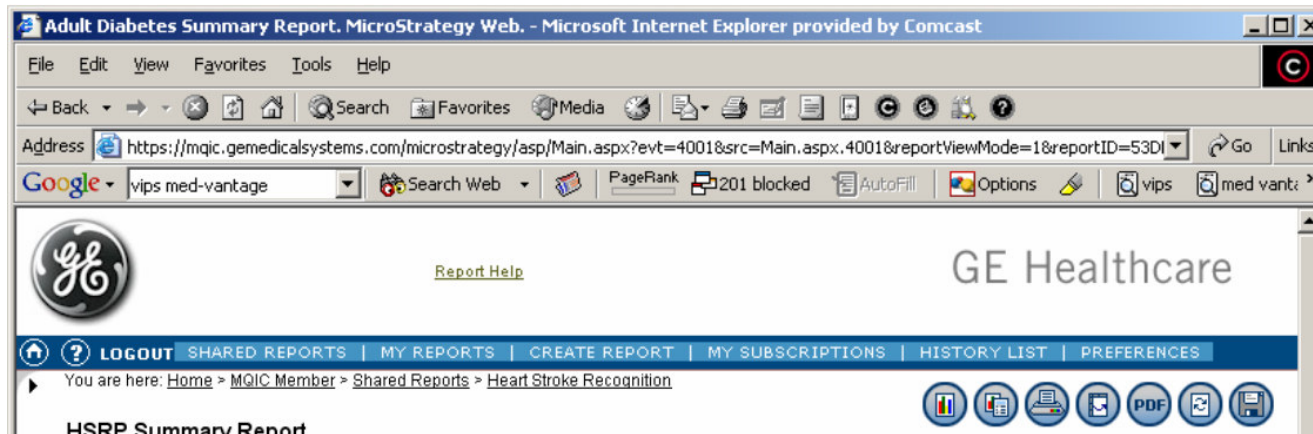
HgbA1c

8.4
8.2
8
7.8
7.6
7.4
7.2



"We have been recognized at the local and national level in the past year. Our efforts to provide the best patient care to our diabetic patients have been greatly enhanced because of the tools available to us. The EMR has become one of the critical components of our patient care delivery system."

Heart & Stroke



Metrics	Member	Westside Clinic Physician Associates
HSRP Score		40.0
Heart/Stroke Patients		513
75% of Patients w/ BP Below		145/95
Percentage with Complete Lipid Profile		95.67%
50% of Patients w/ LDL Below		120
Percentage Using ASA or Other Antithrombotic		82.23%
Percentage with Smoking Assessment		86.78%







DOQ-IT Measures in MQIC

CHRONIC DISEASE MEASURES:





Chronic Stable Coronary Artery Disease (CAD)

-  Antiplatelet Therapy
-  Drug Therapy for Lowering LDL Cholesterol
-  Beta-Blocker Therapy – Prior Myocardial Infarction (MI)
-  ACE Inhibitor Therapy

Diabetes Mellitus (DM)




-  HbA1c management
-  Urine protein testing
-  Eye Exam
-  Foot Exam

Heart Failure (HF)



-  Left Ventricular Function (LVF) Assessment
-  Left Ventricular Ejection Fraction Testing
-  Weight Measurement
-  Patient Education
-  Beta-Blocker Therapy
-  ACE Inhibitor Therapy
-  Warfarin Therapy for Patients with Atrial Fibrillation

PREVENTION MEASURES:



Blood Pressure Measures

-  Blood Pressure Measurement
-  Blood Pressure Level
-  Plan of Care



Depression Measures

-  Screening for Depression
-  Continuation of Antidepressant Medication




Cancer Screening Measures

-  Breast Cancer Screening
-  Colorectal Cancer Screening

Immunization Screening Measures

-  Influenza Vaccination
-  Pneumonia Vaccination

General Preventive Measures

-  Lipid Measurement
-  LDL Cholesterol Level
-  Tobacco Use

-  TODAY
-  Q4 2005
-  Q1 2006

CMS Physician Focus
Quality Initiative, March '04
Source: Lumetra



Thank You!

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