



eCQM Solution

Reporting electronic clinical quality measures via
QHN

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Quality Measure Program Manager

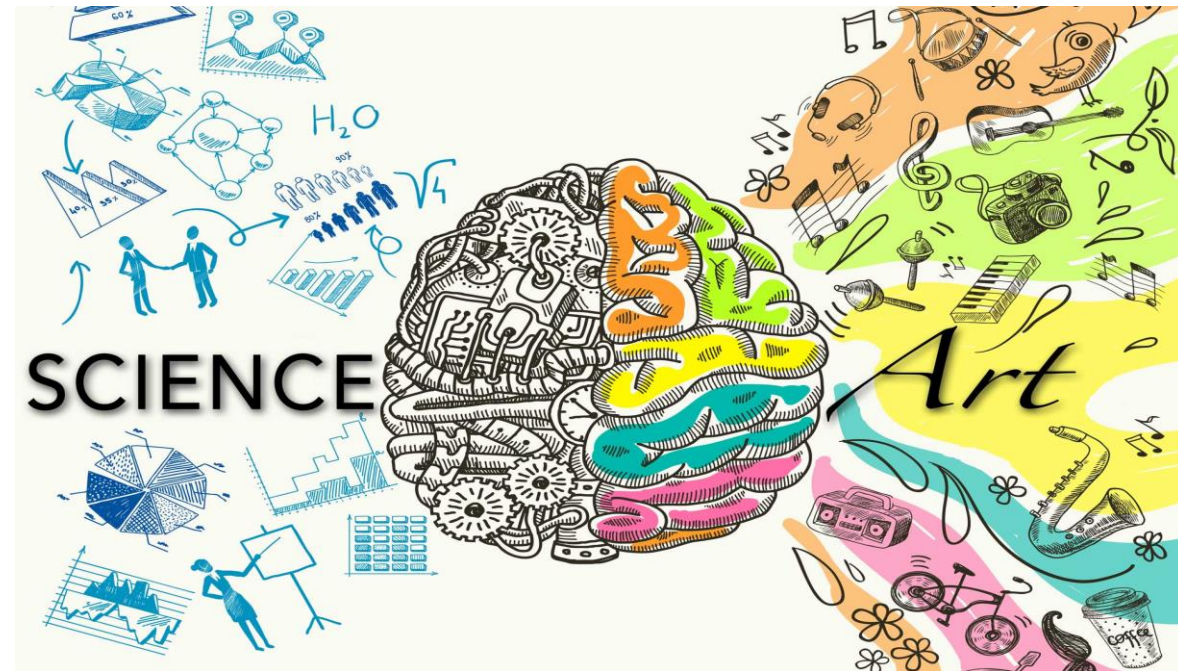
March 6, 2020



Objectives



- Review the Purpose of eCQM reporting
- Demonstrate the overall process
- Review of Value provided to practices and programs
- Reporting for RAE and Medicaid APM Programs



Reality of eCQM Reporting



- Time and Effort
- Changing Measure Specifications
- Changing EMR capabilities
- Various Program Requirements
- Lack of Validation



Vision for eCQM Reporting



- Consistent Validated Output
- Extract once and Report to Many
- Reduce Provider Burden/Stress



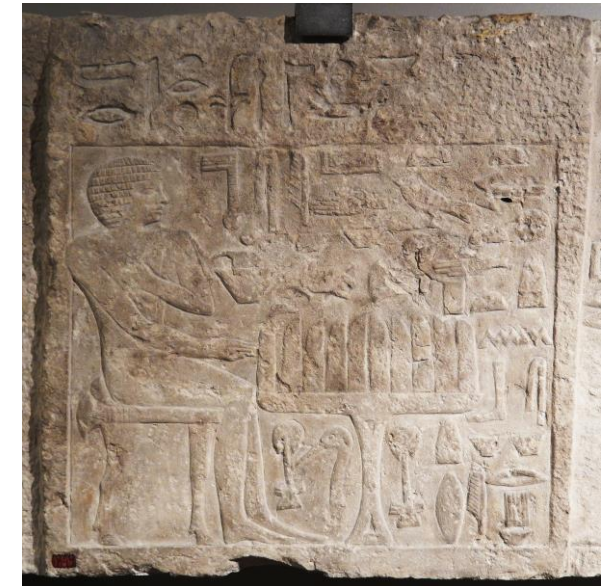
History



- Colorado State Innovation Model (SIM) ecqm program
 - Decrease burden to practices for ecqm reporting
 - Started end of 2018- finished July 2019
 - Health Data Colorado was created (QHN, CCMCN, CORHIO)

QHN Worked with the following practices:

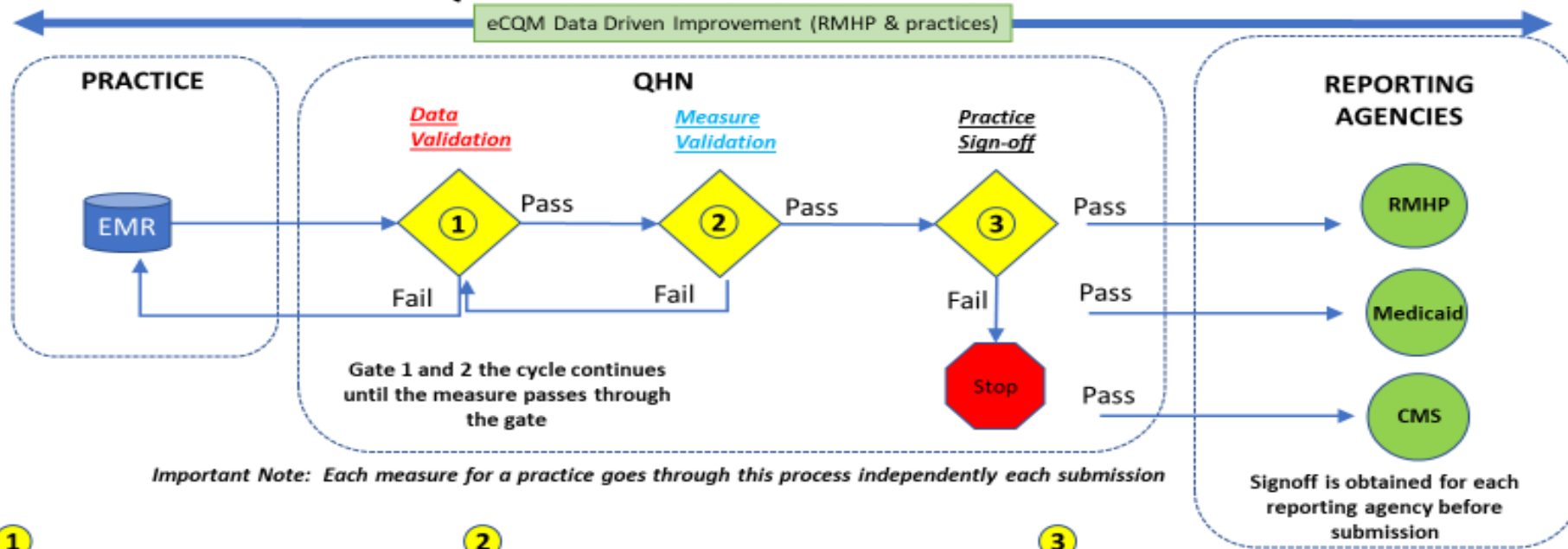
- St. Mary's Family Residency
- Cedar Point Health (5 SIM locations)
- Gunnison Valley Family Practice
- Dinosaur Pediatrics
- Mountain Medical LLC



eCQM Solution



eCQM Measure Validation Process Flow



1

Data Validation: QHN

- Data Completeness
- Data inclusiveness in CCD
- Data coded correctly in CCD
- Patient/Provider/Facility identifiers
- * Work with EMR Vendor and/or Practice as needed to fix

2

Measure Validation: QHN and RMHP

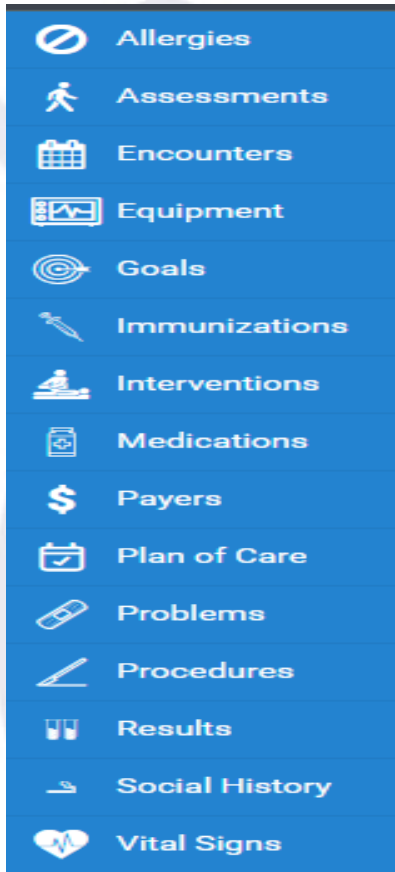
- Numerator/Denominator Validation per measure technical specs (QHN)
- Clinical Mapping/Normalization (QHN)
- Practice Measure Report Comparison (QHN and RMHP)

3

Practice Sign-Off

- Practice confirms that measures are accurate and can be reported to agencies
- Practice can confirm some or all measures to be reported
- Practice indicates agency per measure for submission

Data Validation- done by QHN



- Receive data via CCD (Continuity of Care Document)
- Check for:
 - Data Completeness
 - Data Inclusiveness
 - Data coded correctly
 - Proper Identifiers (Patient, Facility, Encounters)
- Work with EMR/Vendor/Practice

Measure Validation- QHN & RMHP



- Run measures via Diameter- NCQA ecqm certified solution
- Validate measures
 - Review sample of patients in each measure
 - Denominator-
 - Eligible encounter
 - Correct age
 - Correct diagnosis
 - Numerator-
 - Correct qualifying event (BP within normal range, good BMI, smoking status, etc)

Practice Sign Off

- Validated measures presented to practice for Sign Off
- Practice can confirm some or all measures to be reported
- Practice indicates agency per measure for submission



Questions?



Stefanie Posavec

Patient Centered Data

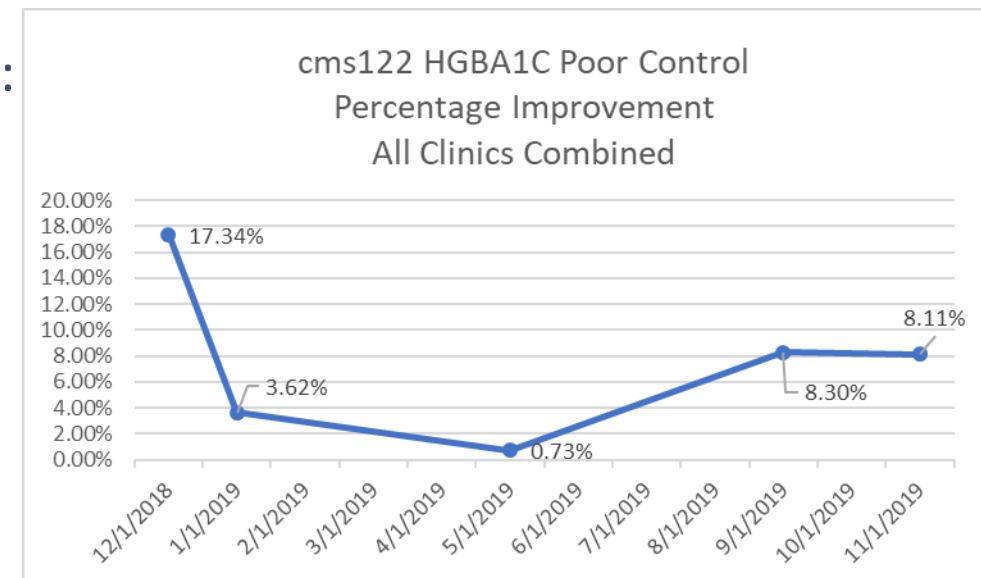


- Patient's receive care in multiple locations
- EMR's have the data entered into them in their practice or their organization
- HIE (QHN) has patient centered data from multiple sources
 - Primary Care Practices
 - Specialty Practices
 - Hospitals
 - Outpatient Centers
 - Labs



Patient Centered Data

- EMR Data + QHN Data = Patient Centered Data
- Often shows an improvement in measure performance
 - cms122- Hemoglobin A1C Poor Control
 - In 2019 Practices rate improved anywhere from 1.7%- 30% with addition of HIE data
- Other Measures we are now testing for improvement:
 - cms124- Cervical Cancer Screening
 - cms125- Breast Cancer Screening
 - cms130- Colorectal Cancer Screening
 - cms117- Childhood Immunizations
 - cms153- Chlamydia Screening



Validation Lessons Learned



- Duplicate Patients counted in EMR report
- Patients of wrong age for measure in EMR report
- Patients without a qualifying encounter in EMR report
- Patients without qualifying diagnosis in EMR report



EHR Hostages



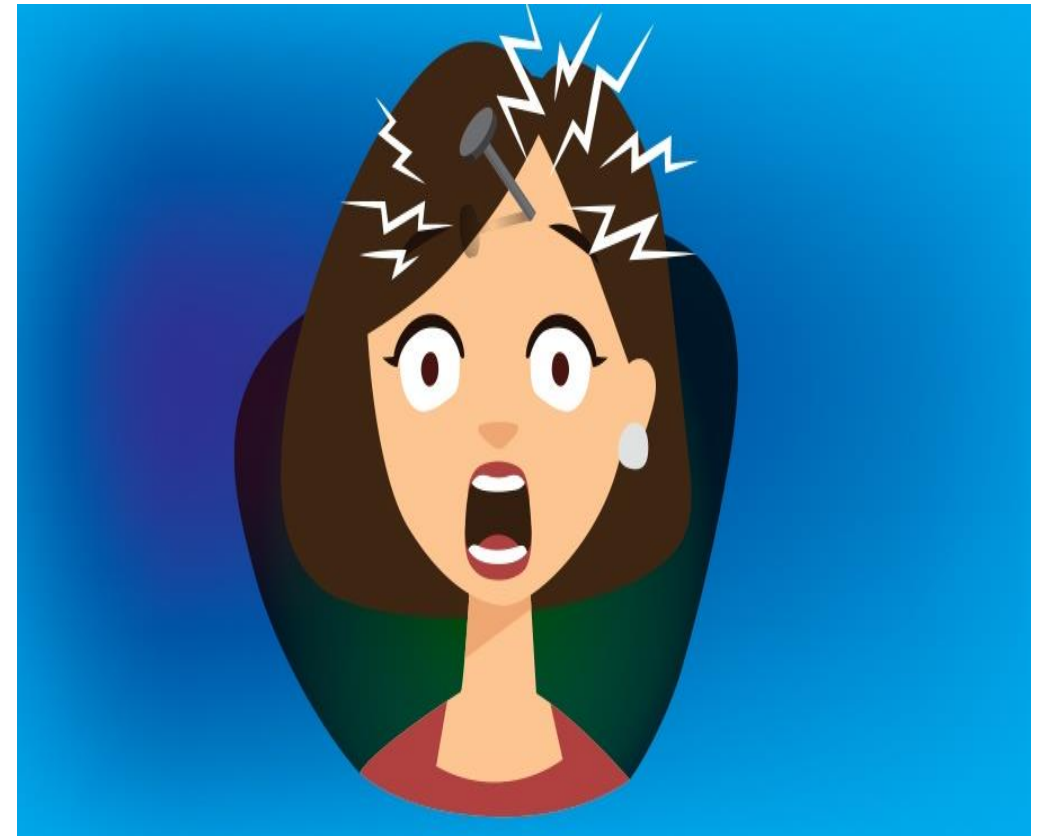
- Measure Availability
- Report Availability
- Upgrade requirements
- Costs
- Limited reporting timeframes



eCQM Reporting Problems



- Certification does not mean standardization
 - EHR's interpret the measures differently for reporting
- Complete Patient Centered Data is not available in EHR
 - Missing data to give true measure of Patients care
- Validation takes time
 - Clinicians want/need to see Patients- not validate data
- Payment adjustment requires trust from Payers/Providers
- Some EMR's can only report measures Year to Date
- Not all measures are available in every EMR





QHN eCQM Reporting Solution



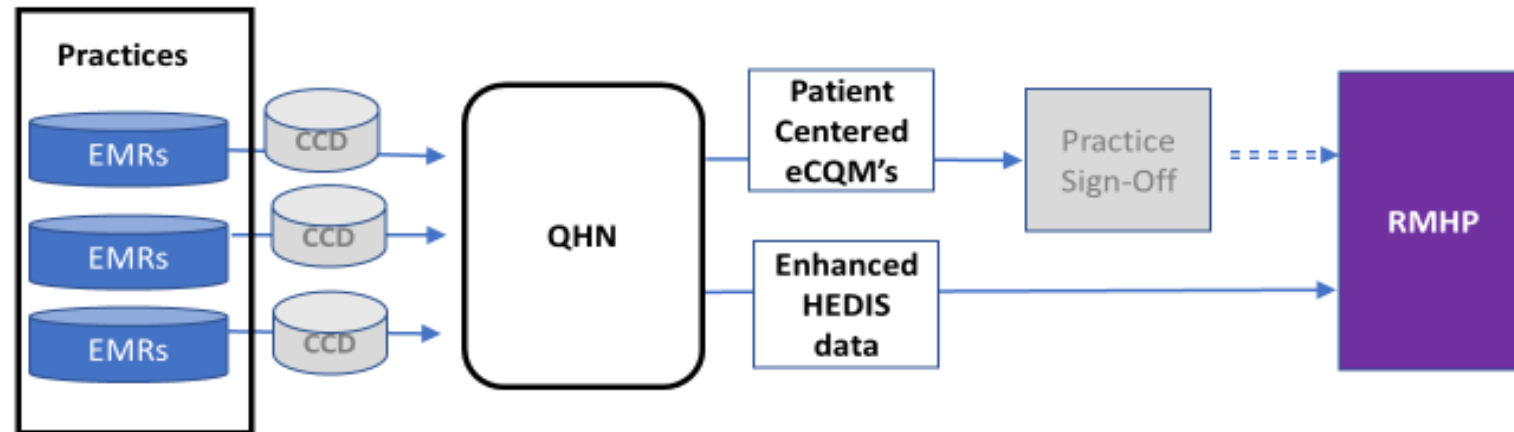
- Standardized measure methodology certified by NCQA
- Patient Centered Data is included
- Validation work can be done on behalf of Practice
- Trust can be established for Payers/Providers
- Measures to be reported not limited to individual EMR
- QHN- Qualified Registry for CMS Quality Payment Program



Reporting for RMHP



QHN and RMHP Process Workflow



Value for Practice

- Measure validation done by QHN in coordination with RMHP
- Patient Centered eCQM calculation
- Potential increased eCQM availability
- Less dependence on EMR vendor for eCQM
- Decreased HEDIS chart reviews
- Apples to Apples ecqm comparison with other practices

Value for QHN

- Increased clinical data in QHN for longitudinal patient health record
- Increased ability to report for other payers (Medicaid, CMS)
- Coordination with RMHP for measure technical assistance to practices

Value for RMHP:

- Measure validation done by QHN following standard framework
- Patient centered eCQM calculation
- Potential increased eCQM availability
- Less dependence on EMR vendors for eCQM
- Apples to apples eCQM comparison amongst practices to use for payment
- Decreased HEDIS chart reviews

Questions?

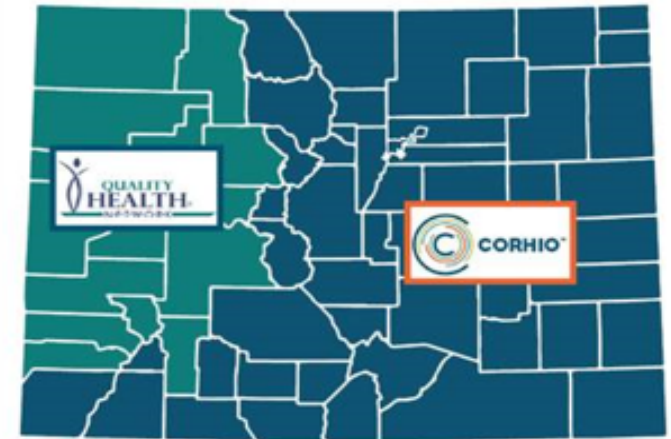


Reporting for Medicaid APM



Health Data Colorado (HDCo) Collaboration between CORHIO, QHN and CCMCN

- Colorado Regional Health Information Organization (CORHIO):
 - Work with those in the major metro areas, eastern plains, and southern border
- Quality Health Network (QHN):
 - Work with those in the Western Slope region
- Colorado Community Managed Care Network (CCMCN):
 - Work with Federally Qualified Health Centers (FQHCs)



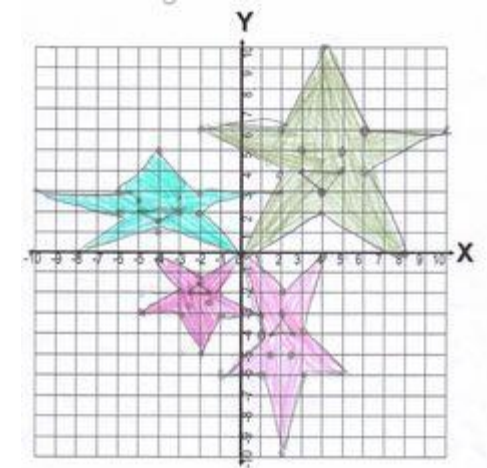
Health Data Colorado

Medicaid APM Reporting

- Reporting to Medicaid APM via Health Data Colorado
 - Electronic submission (via QHN solution)
- OR
- Manual submission (practice provides num/denom to HDCo)
- Partnering with RAE
 - Coordinate practice meetings to decrease burden

Next Steps

- QHN and RMHP 2020 Goals
 - Onboard practices for eCQM reporting
 - Prioritize with RMHP to include;
 - eCQM needs
 - Reporting program requirements
 - Ease of obtaining CCD's
 - QHN and RMHP will have a coordinated outreach to practices



Contact Information:

Emma Flores at QHN

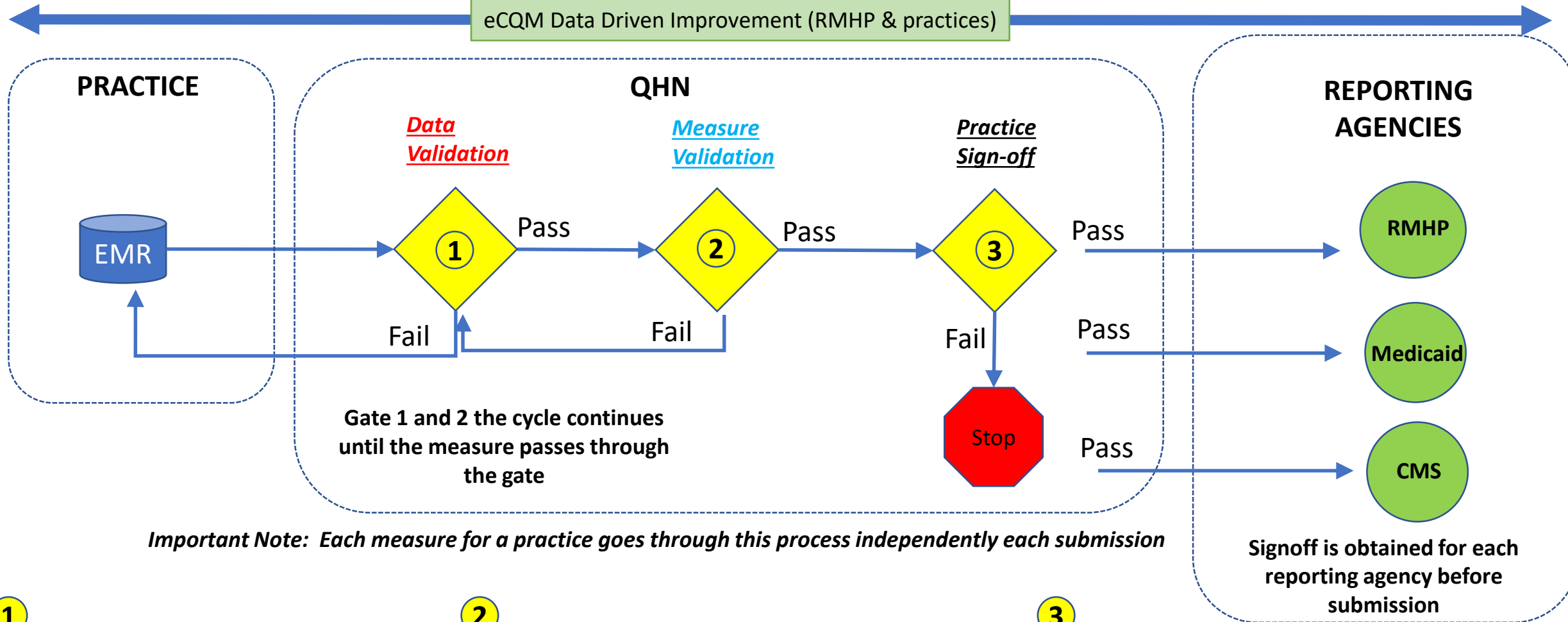
970-248-0033

eflores@qualityhealthnetwork.org

Measure Name	Measure ID	QHN Reporting Status
Screening for Clinical Depression and Follow-Up Plan	cms2	able to report for some- depends on EMR if data is in CCD
Body Mass Index (BMI) Screening and Follow-Up Plan	cms69	able to report for most
Primary Caries Prevention Intervention as Offered by PCP's and Dentists	cms74	get denom only, so far no numerator hits
Maternal Depression Screening	cms82	get denom only, so far no numerator hits
Childhood Immunization Status	cms117	able to report for all
Diabetes: Hemoglobin A1C Poor Control	cms122	able to report for all
Diabetes: Foot Exam	cms123	able to report for some- depends on EMR if data is in CCD
Cervical Cancer Screening	cms124	able to report for most
Breast Cancer Screening	cms125	able to report for most
Pneumonia Vaccination Status for Older Adults	cms127	able to report for most
Anti-Depressant Medication Management	cms128	able to report for some- depends on EMR if data is in CCD
Colorectal Cancer Screening	cms130	able to report for most
Diabetes: Eye Exam	cms131	able to report for some- depends on EMR if data is in CCD
Diabetes:Medical Attention for Nephropathy	cms134	able to report for all
ADHD Follow Up Care for Children Prescribed ADHD Medications-30 days	cms136a	able to report for some- depends on EMR if data is in CCD
ADHD Follow Up Care for Children Prescribed ADHD Medication-9 months	cms136b	able to report for some- depends on EMR if data is in CCD
Initiation and Engagement of Alcohol and Other Drug Dependence Treatment- 14 days	cms137a	get denom only, so far no numerator hits
Initiation and Engagement of Alcohol and Other Drug Dependence Treatment- 30 days	cms137b	get denom only, so far no numerator hits
Tobacco Use: Screening and Cessation Intervention- screened in 24 months	cms138a	able to report for most
Tobacco Use: Screening and Cessation Intervention- tobacco user with intervention	cms138b	able to report for most
Tobacco Use: Screening and Cessation Intervention- screened and intervention for users	cms138c	able to report for most
Falls: Screening for Future Fall Risk	cms139	able to report for some- depends on EMR if data is in CCD
Heart Failure: Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction	cms144	able to report for some- depends on EMR if data is in CCD
Appropriate Testing for Children with Pharyngitis	cms 146	able to report for some- depends on EMR if data is in CCD
Chlamydia Screening for Women	cms153	able to report for most
Appropriate Treatment for Children with Upper Respiratory Infection (URI)	cms154	able to report for most
Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents- BMI	cms155a	able to report for all
Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents- Nutritio	cms155b	able to report for some- depends on EMR if data is in CCD
Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents- Physical	cms155c	able to report for some- depends on EMR if data is in CCD
Use of High-Risk Medications in the Elderly- 1 medication	cms156a	able to report for some- depends on EMR if data is in CCD
Use of High-Risk Medications in the Elderly- 2 medications	cms156b	able to report for some- depends on EMR if data is in CCD
Depression Remission at Twelve Months	cms159	get denom only, so far no numerator hits
Depression Utilization of the PHQ-9 Tool	cms160	get denom only, so far no numerator hits
Controlling High Blood Pressure	cms165	able to report for all
Use of Imaging Studies for Low Back Pain	cms166	able to report for some- depends on EMR if data is in CCD

eCQM Measure Validation Process Flow

eCQM Data Driven Improvement (RMHP & practices)



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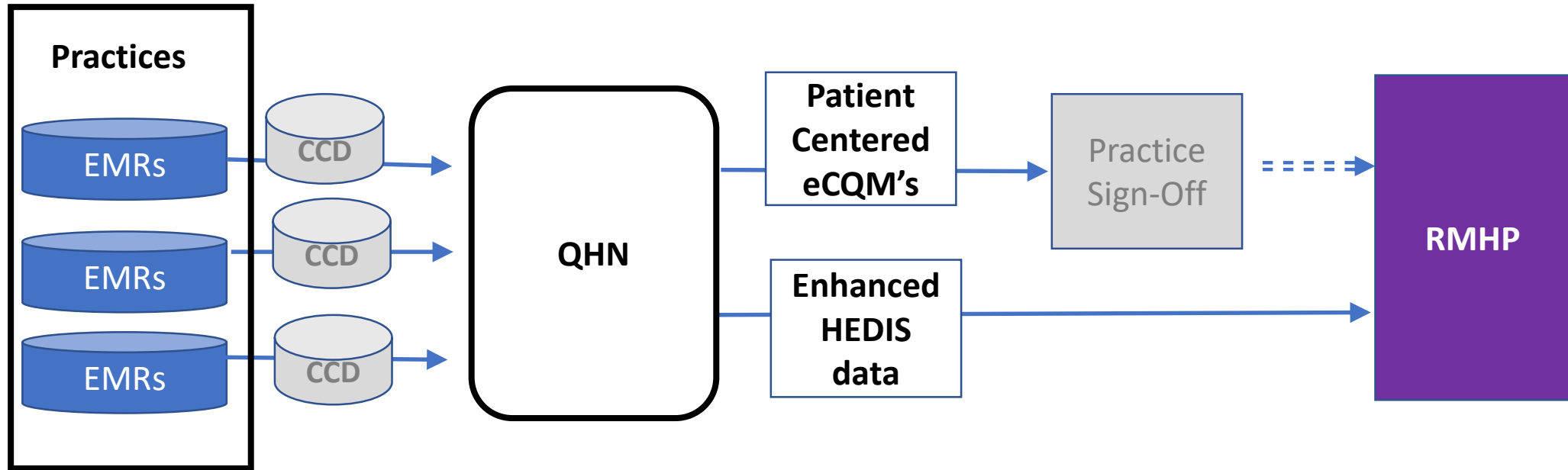
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