

Use of a Web-based Program by a Multi-Site Primary Care Group to Meet Organizational Quality Targets

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IUMG Primary Care Locations

Marion County, Indiana



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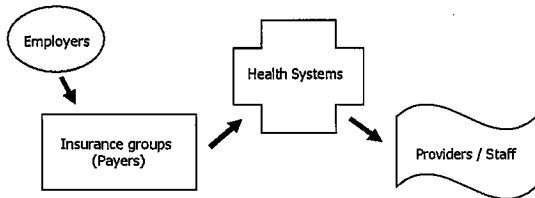
■ *Health Professions Education: A Bridge to Quality Report (2003)* articulated that organizations should ensure that health care professionals:

1. Deliver patient-centered care
2. Work as interdisciplinary team
3. Practice evidence based medicine
4. Focus on quality improvement and
5. Use information technology

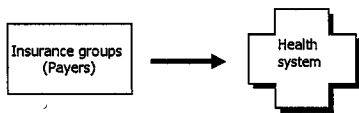
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Pay For Performance (P4P) Plans



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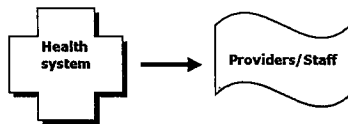


MDwise – 4% premium withhold

MPlan – per member per month

Adult Medicaid – per encounter basis

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-20% of MD salary attributed to quality targets

- 33% of staff bonus allotment

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IUMG-Primary Care and Pay For Performance (P4P) Plans

- IUMG-PC P4P plan is designed around 3 areas:
 - Quality
 - Patient Satisfaction
 - Clinical / Administrative IT Systems

Each element is assigned a predefined set of metrics where the performance is measured (HEDIS).

HEDIS – Health Employer Data Information Set

“...set of standardized performance measures designed to ensure that purchasers and consumers have the information they need to reliably compare the performance of managed health care plans.”

How did we get started – MDwise

	2001	2002	2003	2004	2005	2006
Immuniz	✓	✓	✓			✓
Asthma	✓	✓	✓	✓	✓	✓
EPSDT/Well Child	✓	✓	✓	✓	✓	✓
Needs Assmt	✓					
Shadow claims	✓					
Case Mgt process		✓				
Access X5				✓	✓	✓
Prenatal/PP visits			✓	✓	✓	✓
Pharyngitis/URI						✓
Diab measuresX3						✓
Pap						✓

Then came MPlan and adult Medicaid...

	2004	2005	2006
Chlamydia testing	✓	✓	✓
Diab A1c	✓	✓	✓
Diab LDL	✓	✓	✓
LDL post Cvent	✓	✓	
LDL in CVD			✓
Asthma	✓	✓	✓
Mammogram	✓	✓	✓
Pap		✓	✓
Cholesterol	✓	✓	✓
Access (pt satisf)	✓	✓	✓
Pneumovax	✓	✓	✓

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Web-based Application Development (Clinical Indicators)

1. IUMG-PC uses a Microsoft SQL based Data Warehouse to store data elements
2. IUMG-PC uses Intranet-based web application to present measures and patient level details to Practices and Providers
3. The web application's Security/Access is user level defined for privacy protection
4. Measure and patient level detail is currently presented to Practices and Providers in Microsoft Excel format

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Case ID	Age	Sex	R	Grand Total	RATE
STEP A	14			14	1.656%
STEP B	21	3		24	2.844%
STEP C	31	25		14	1.656%
STEP D	23	3		30	3.57%
STEP E	43	7		50	5.95%
STEP F	126	23		151	18.07%
STEP G	100	22		127	15.23%
STEP H	276	84		760	90.9%
Grand Total	831	363		1000	83.1%

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Clinical Indicators Application strategies

- Review "no" list – med rec review, scheduling system
- Patient outreach
- Review the "yes" list
- Identify members that fall onto more than one list


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Key Action Steps

- Site training on Clinical indicator tool
- Site action plan development
- Monthly graphs demonstrating site performance
- Monthly All Leader mtg presentations
- Performance Improvement grant opportunities



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Site initiatives

- "Flag for quality"
- Engagement of unlicensed personnel
- Increased point-of-care testing
- Increased phone management
- Development of additional tools
- Increase referrals to ancillary providers



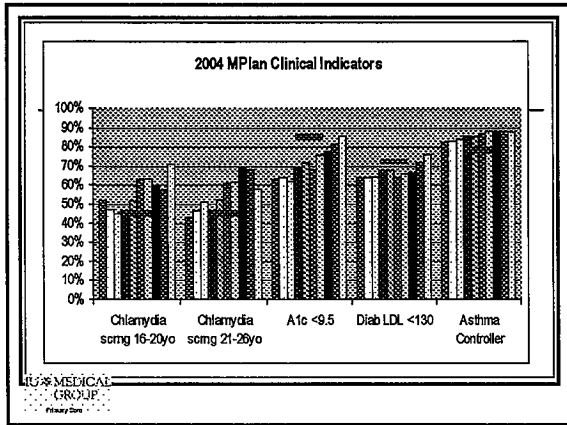
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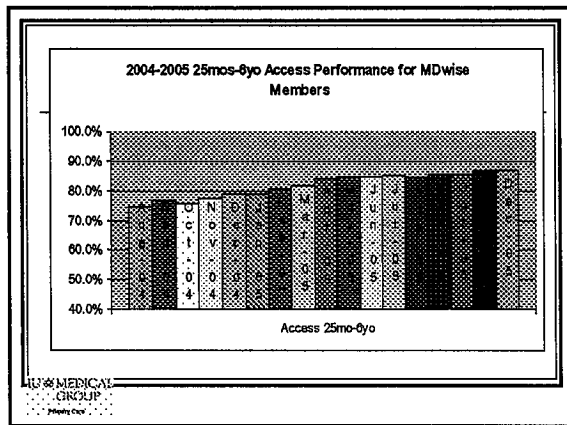
Linked successes

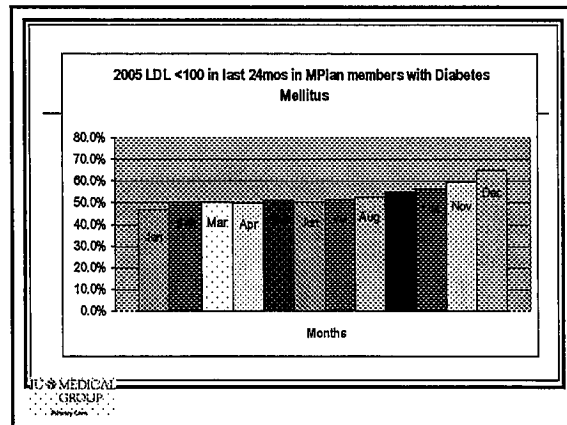
- Correct PCP information
- Educate member on office hours and appt scheduling
- Identify barriers to care
- Answer member questions
- Identify bad demographics
- Increase visit numbers = MD productivity
- Identify coding/billing issues

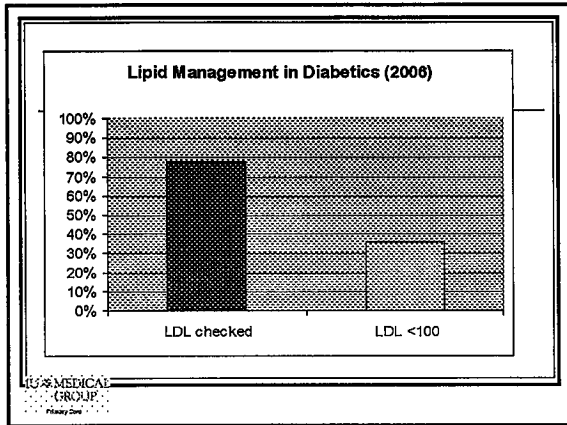


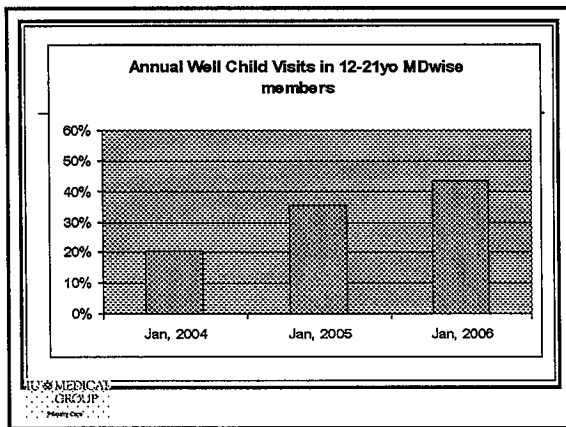
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General Outcomes

- Hit all 2004 MDwise targets
- Hit all but one 2005 MDwise targets
- Have hit 7 out of 21 2006 MDwise measures already
- Consistently hit all MPlan targets except for LDL <100 in diabetics

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Other gains

- Process changes at sites
- Push to capture data
- Involvement of non-site-based staff
- Ability to readily show performance
- Ability to quickly identify opportunities for improvement
- Process changes at sites focused toward all patients



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What have we learned:

- "It takes a village to raise a child" mentality – the entire clinic can affect the delivery of quality care
- Stay on top of the data – know how it's pulled, where it comes from, etc; Communicate with those pulling your data
- Stay in touch with those in the sites that are using the tools and looking at the data every month



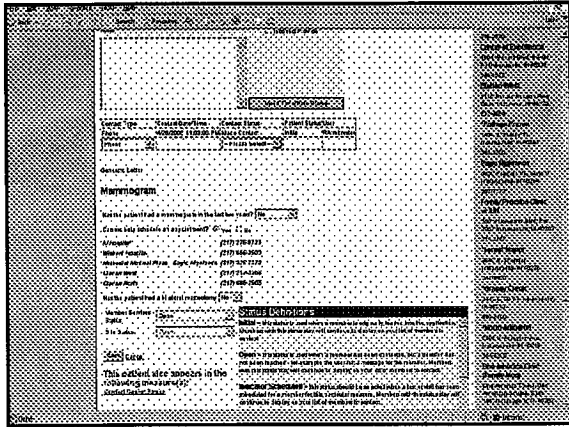
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Where do we go from here:

1. Create interactive tool



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Where do we go from here:

1. Create interactive tool
2. Create "All Patient" measures
3. Increase number of measures
4. Increase goals
