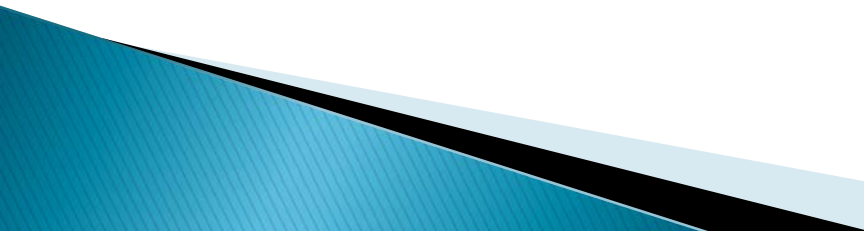


Data and Value Based Payment Systems; Structured Data is your Friend

Patty Kosednar, PMP, CPEHR
MT HIE Stakeholder Meeting
12/7/2016

Patty Kosednar

- ▶ Health IT Consultant with Mountain–Pacific
 - ▶ Project Management Professional (PMP)
(Project Management Institute)
 - ▶ Certified EHR Professional
 - ▶ Assist with EHR implementations, meaningful use and PQRS program, quality improvement and data informatics/reporting
 - ▶ Focus on use of HIT/EHRs & data for clinical transformation and improve health outcomes
- 

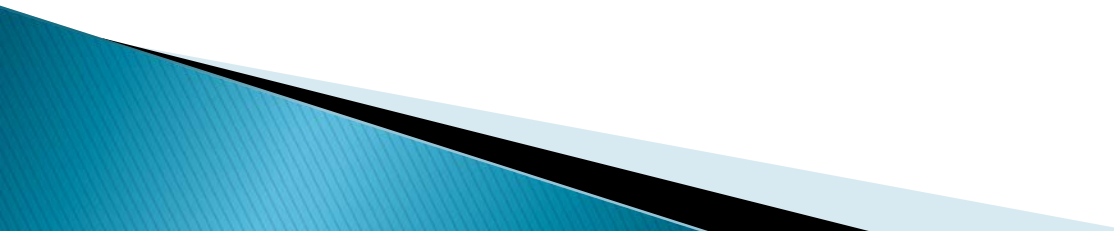
Mountain–Pacific

- ▶ Quality Innovation Network/Improvement Organization for Montana, Wyoming, Alaska and Hawaii (CMS contract)
- ▶ Provide Medicaid utilization review and management services contracted by Montana Department of Public Health and Human Services
- ▶ Health Technology Services, a department of Mountain–Pacific offers consulting services to assist with the clinical transformation toward value based services, focusing on use of EHR, HIT and data for quality improvement and reporting

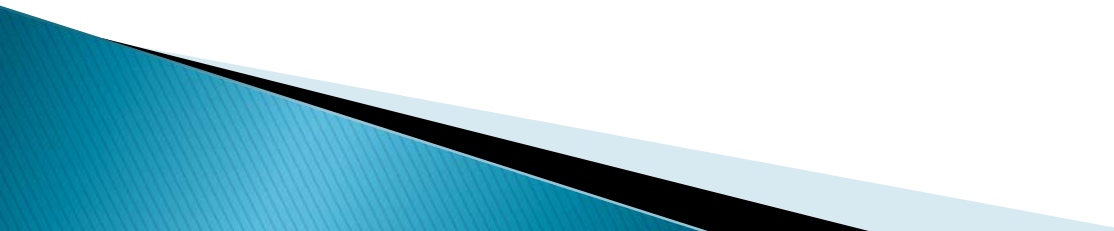
Objectives For Discussion

- ▶ To define structured data (discrete data)
- ▶ Review the role of and importance of structured data in your EHR for:
 - quality improvements/health outcomes
 - reimbursement via value based payment models
 - Interoperability/health information exchange
- ▶ What to do to implement the correct use of structured data entry/workflows in your EHR

What is Structured Data?

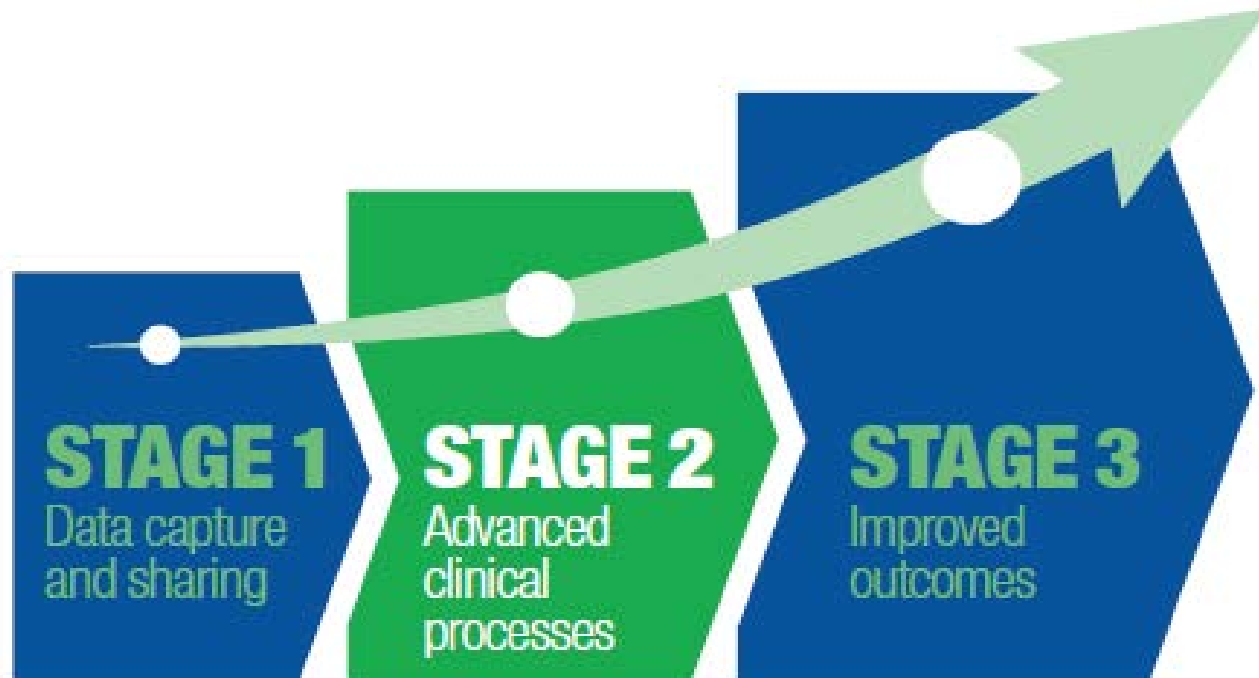
1. Data or information that is organized in a structured manner, making it computer “processable” and identifiable for system functionality, data mining and analytic purposes
 2. Also called discrete data, structured data resides in fixed or discrete fields within a record/database
- 

Using Structured/Discrete Data Means:

- ▶ Entering information in the needed format, in the correct field of your EHR
 - ▶ In the old days: “if it’s not documented in the chart it did not happen”
 - ▶ Today: “if it’s not documented in the EHR, in the correct format in the correct place (structured data) it did not happen”
- 

CMS EHR Incentive Programs

(Meaningful Use)



EHRs provide the foundation for data collection, analytics and interoperability

**“discrete (structured)
diagnostic information is
the new currency of
healthcare”**


Source: Kim Frutell, Orchard Software, 2013

Why is Structured Data Important?

Structured Data: Importance for QI/Improved Outcomes

- ▶ Not using structured data creates inaccurate or incomplete data and can put patient safety at risk
- ▶ Advanced functionality and support from the EHR cannot be fully utilized without the use of structured data
 - Alerts and CDS rules
 - Clinical recommendations
 - Patient Education/Reminders
 - Stratifying population (patient lists)
 - Interfaces and registries
- ▶ You cannot improve what you cannot measure
 - Structured data populates clinical quality measure and other reports
 - Patient lists, results, diagnosis
- ▶ Structured data requires correct and consistent workflows, standardizes workflows across the organization, increases productivity and reduces waste

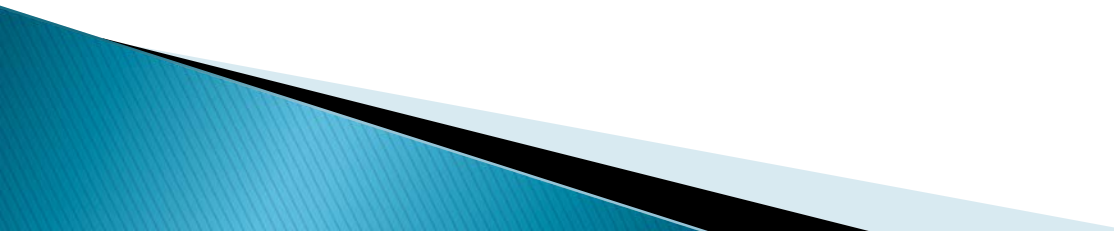
Structured Data: Importance for Value Based Payment–Reimbursement

- ▶ Reimbursement via value based payment programs will in part be based on performance on clinical quality measures (CQMs)
 - ▶ Reimbursement on CQMs will be based on data in your EHR – populated by structured data
 - ▶ Using CQMs standards and reporting will allow continuous measurement/analytics of performance
 - ▶ Use of structured data allows for reporting via your EHR, which streamlines the process and reduces administrative burden for tracking and reporting
- 

Structured Data; Importance for Interoperability/HIE

- ▶ EHR interoperability is the ability to effectively communicate health information electronically – get the right information to the right person at the right time
- ▶ Structured data (structured in the correct format, in the correct discrete field) is needed for successful interoperability (transporting/interpretation of data)
- ▶ If data is not entered correctly or consistently, transition of care documents may have incorrect or incomplete data
- ▶ Structured data enhances and streamlines coordination of care activities
- ▶ Accurate data through interoperability/HIEs is necessary to ensure patient safety

Its all about the data

- ▶ For quality reporting, reimbursement, interoperability and a MT HIE, to be successful you will need to get down to basics with your EHR
 - ▶ Correct workflows and data entry are needed to populate structured/discrete data that can be computer readable and shareable
 - ▶ There is no skipping over this step if you want to transform to a value based payment model
- 

What Can you Do?



Next Steps – you can start small

- ▶ For all the CQMs you are reporting for value based programs (ACOs, MU, MIPS, IQR/OQR, CPC+, etc)
 - Identify where you are getting the data to report (manual chart abstraction, feedback from payers, EHR)
 - Work with your EHR vendor to identify the correct workflow/data entry needed to populate the standard quality reports (CMS, UDS, GPRA, etc)
 - Work with your staff to implement the correct workflow/data entry
 - Audit and validate data from reports – continue to work with staff on correct workflows
 - The more accurate your CQM reports, the more completely you are using your EHR, the more you can focus on improving performance

Need Help?

- ▶ MT DPHHS is providing funding for technical assistance for eCQI projects
- ▶ eCQI – electronic clinical quality improvement (coined by CMS/ONC)
- ▶ eCQI projects review and standardize workflows and use of standardize reports (structured data) for clinical quality reporting and improving outcomes
- ▶ MT DPHHS funded eCQI projects have improved:
 - CMS 165 – controlling high blood pressure
 - CMS 2– clinical depression screening and follow up
 - CMS 123 – DM annual foot exams
 - CMS 131 – DM annual eye exams
 - CMS 134 – DM protein/urine screening
 - CMS 50 – Closing the referral loop

Electronic Clinical Quality Improvement

- ▶ Other eCQI projects include:
 - Focusing on accurate workflows to enhance data submission to registries
 - Implementation of needed workflows and tracking for Medicare Transitional Care Management and Chronic Care Management codes
 - Implementation of bar coded patient ID bands and bar coded inventory/medication administration

Bottom Line

- ▶ It's coming But it's not too late.
Remember, structured data is your friend
 - ▶ For help contact me at:
 - ▶ Patty Kosednar
 - ▶ Mountain Pacific/Health Technology Services
 - ▶ 406-461-4410
 - ▶ pkosednar@mpqhf.org
 - ▶ www.gotohts.com
- 