PrecisionBI

PBI Client Spotlight: EVMS Medical Group

Improving Quality Performance and Preparing for MIPS Using More Accurate Data

At a Glance: EVMS Medical Group, Norfolk, VA

- 200+ providers, 20 locations, 400,000+ annual encounters
- PrecisionBI partner since 2007
- The impact: Removing noise in both the patient population and clinical data resulted in up to 20% improvement in PQRS performance

"We can't currently rely on the EHRs of the world to report the best data, and it's not necessarily their fault. Canned reports [by nature] don't allow you to analyze and get rid of the noise…there's work that needs to be done to report the most accurate data."

Dr. Richard Bikowski, Chief Quality Officer, EVMS Medical Group

The Background

Many clients use PrecisionBI (PBI) for revenue cycle analysis. However, EVMS Medical Group's focus for PBI centers around managing and improving patient health with clinical data.

This includes pre-visit preparation, coding/ documentation consulting, clinical task management, and patient education.

This case study will take a closer look at how EVMS Medical Group uses PBI for quality reporting.

EVMS Medical Group submits PQRS measures as a registry. Registry reporting allows for two reporting options:

   1. Report for nine individual measures across three National Quality Strategy (NQS) domains (over 50% Medicare Part B patients) for individual providers or at the group level

   2. Report at least one measures group on a 20-patient sample (majority Medicare Part B patients) for individual providers

The Challenge

EVMS Medical Group found the challenge was not high-level reporting it was making sure the patient population and quality data that was included in their reporting was accurate.

We can't currently rely on the EHRs of the world to report the best data, and it's not necessarily their fault. Canned reports by nature don't allow you to analyze and get rid of the noise there's work that needs to be done to report the most accurate data, explained Dr. Richard Bikowski, Chief Quality Officer at EVMS Medical Group.

Dr. Bikowski went on to state an example with the Diabetes, A1C poor control measure. This measure looks at the percentage of diagnosed diabetic patients with a completed A1C test that is at goal. Many EVMS Medical Group physicians have patient encounters in non-PCP care settings (i.e. hospitals and/or nursing homes), where A1C testing results are not available for reporting in their outpatient EHR.

Unfortunately, canned EHR reports do not allow for the exclusion of patients without numerator data, nor does it allow for easy reporting of additional data obtained from non-EHR sources. Therefore, EHR reporting of performance in quality measures in this situation can be unfavorably skewed.

The Solution

To resolve this issue, EVMS Medical Group created a set of metrics and reports in PBI that:

- Identify gaps in data
- More accurately reflects true denominator (total) patients
- Include data obtained from sources outside of the EHR
- Looks for appropriate measure exclusions that might not be easily identified via direct EHR reporting

The Value

The impact of providing more accurate source data was significant. EVMS Medical Group saw up to a 20% increase in measure performance, which could mean the difference between achieving or falling below the CMS performance benchmarks.

Because their data is now more accurate, EVMS Medical Group can also use it for internal quality tracking (alongside federal reporting). In addition, because they can more accurately report other components (including location, CPT, diagnosis, patient exclusion, and clinical data), EVMS Medical Group has an advantage in isolating other difficult-to-report measures, such as smoking cessation.

Future Direction: MIPS (MU+PQRS)

As the industry moves towards MIPS, Dr. Bikowski feels the ability to remove the noise (and report more accurate data) will become even more important:

- MIPS registry submission will require reporting on at least 90% of the entire patient population (up from 50% under the current PQRS/MU programs)
- Reporting will include all insurers (not just Medicare)
- Organizations can qualify for MIPS bonus points by reporting directly from their EHR data or via registry, rather than submitting claims data from their practice management system
- Clean data gives organizations credibility with providers as they collaborate on how to improve quality measures, and how to align clinical behavior with best practices for quality reporting
- Control over data and reporting means an organization can quickly adapt to reporting rule changes (i.e. PQRS/MU to MIPS)

The EVMS Medical Group team is currently in the process of creating MIPS-based reporting logic in PBI. In addition, they plan to move quality tracking from PBI reports to PBI Dashboards, so providers have on-demand access to their quality metrics and performance. Combined with their other clinical reporting initiatives, this will help EVMS Medical Group lead the way in identifying and providing care to high-risk patients, and report their performance data efficiently and accurately.

Description		Performance Rate to Goal	Rate	Goal
ACO-22 Diabetes: A1C Control <8%			85.17 %	65%
ACO-23 Diabetes: LDL <100 mg/dl	●		15.56 %	84%
ACO-24 Diabetes: Blood Pressure <140/90	●		7.69 %	50%
ACO-27 Diabetes: A1C Poor Control >9%	●		16.05 %	30%
ACO-28 Hypertension: Controlling High Blood Pressure			80.86 %	65%
ACO-29 IVD:Complete lipid profile and LDL control <100mg/dl	○		42.86 %	50%
ACO-30 IVD: Use of Aspirin or other antithrombotic	●		28.57 %	50%
ACO-31 Heart Failure: Beta Blocker therapy for LVSD			65.71 %	50%
ACO-32 CAD:Drug Therapy for Lowering LDL Cholesterol	●		22.22 %	50%
DM-41 Diabetes:Eye Exam	●		10.04 %	57%

Combining more accurate data with elegant visualizations can help organizations, their physicians, and other providers navigate the world of clinical quality reporting.

The visualizations depicted in this case study are from PrecisionBI's demonstration system, not EVMS Medical Group.
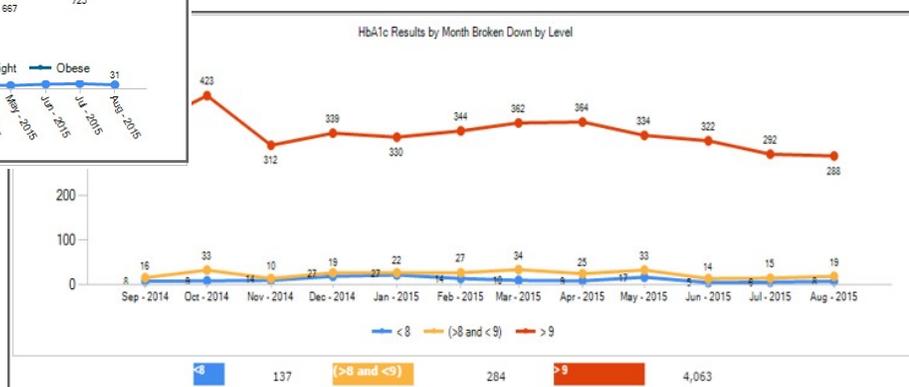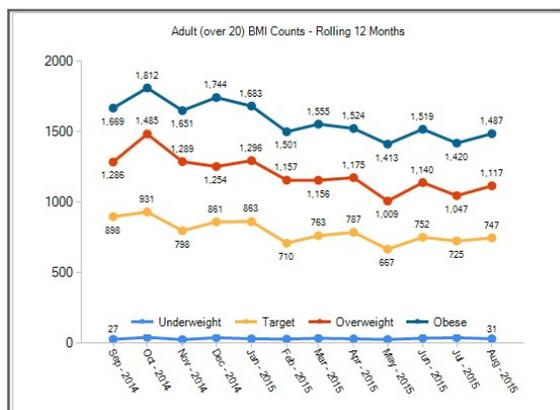
What Does this Mean For Me?

As a PBI client, you have an effective, proven solution to manage clinical/quality reporting:

- Bring multiple sources of clinical data into one place (i.e. providers with other systems)
- Refine your data to make it more accurate
- Visualize that data in a way that is meaningful, easy to interpret, and actionable

PrecisionBI also empowers its users to easily make reporting adjustments as healthcare advances towards value-based reimbursement (VBR), which has appeared in many forms (and acronyms):

- Meaningful Use (MU)
- Physician Quality Reporting System (PQRS)
- Merit Based Incentive Payment System (MIPS)
- Alternative Payment Models (APMs), such as ACOs and PCMHs
- Payer-driven initiatives, such as Chronic Care Management (CCM), Pay for Performance (P4P)

Clinical dashboards that trend health factors over time enable physicians and providers to trend clinical performance for their patient population.

About EVMS Medical Group

EVMS Medical Group is a not-for-profit physician group supporting EVMS with more than 200 physicians at over 20 locations. Its physicians specialize in family and internal medicine, obstetrics, medical and surgical specialties, as well as radiation oncology, laboratory and pathology services. These physicians support patients through comprehensive services, award-winning medical research, specialized patient-care programs and in collaboration with national and international partners developing medical technologies for the future.

About PrecisionBI

PrecisionBI (PBI) pioneered healthcare analytics and business intelligence. Since 1993, PBI has elevated healthcare analytics and business intelligence by automating it and providing our clients with clinical and financial decision support. PBI empowers its users with an enterprise-ready, self-service solution that continually seeks to exceed the demands of today's healthcare industry. With over 20 years' experience in healthcare analytics and BI, our 350+ clients are backed by some of the best talent in the industry and continually advancing the future of healthcare.