Quality Health Indicators

QHi Benchmarking Opportunity for Rural Health Clinics

Sharing best practices for exceptional patient care

KHERF

PiHQ

Partners in Healthcare Quality

Contact information

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Agenda

I. What is QHi?
   1) Philosophy
   2) Who participates
   3) What we measure

II. Rural Health Clinic Pilot Project
   1) Measures identified
   2) How to get started

III. Live QHi Site Demonstration

IV. Q&A

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Using benchmarking data to strengthen quality activities

1. Identify
2. Benchmark
3. Implement
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QHi Advisory Committees Direct and Drive the Project

- Charge of Committees:
  - Continuously re-evaluate current measures, their calculations and definitions
  - Consider new measures
  - Insure Core Measure Set remains relevant and meaningful
  - Make recommendations for site enhancements

- *All* QHi registered users are invited to participate

Four Pillars Of Measurement

*Providing an *Enterprise-wide* Dashboard*

- Clinical Quality
- Financial Operational
- Employee Contribution
- Patient Satisfaction
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QHi Hospital Measures

40 Clinical Quality
- 22 CMS (easy upload from CART)
- 18 User Defined

74 Financial/Operational
- Most pulled from cost report
- 44 staffing/productivity for:
  - Operating Room
  - Radiology
  - Lab
  - Physical Therapy
  - Long Term Care and SNF

8 Employee Contribution
- Salary to Operating Expense
- Staff Turnover

31 Patient Satisfaction
- All HCAHPS
- 5 HSI defined
- 2 QHi defined

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All participating hospitals are asked to collect and report the
8 QHi Core Hospital Measures

Clinical Quality
- Healthcare Associated Infections per Patient Day
- Pneumococcal Immunization (PPV23) - Age 65 and Older - CMS IMM-1b
- Discharge Instructions - CMS HF-1
- Unassisted Patient Falls

Employee Contribution
- Benefits as a Percentage of Salary
- Staff Turnover

Financial Operational
- Gross Days in AR
- Days Cash on Hand
Expanding to Rural Health Clinics

- Develop Measures
- Redesign QHi application to manage RHC data entry/reporting
- Determine Fee Schedule
- Begin Pilot Project
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RHC Pilot Project
(May 2013 – August 2013)

- May, June, July and August interested clinics can join and use the QHi site at no cost

- Clinics must sign a Data Use Agreement, complete the clinic profile form and provide contact information of the person designated as the provider contact.

- In August, participating clinics will be invoiced for the Flex year August 2013 – September 2014

Quality Health Indicators

Rural Health Clinic Quality Measures (14)
12 are National Quality Forum endorsed

1. Controlling High Blood Pressure (NQF #0018)
2. Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (NQF #0024)
3. Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention (NQF #0028)
4. Childhood Immunization Status (NQF #0038)
5. Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%) (NQF #0059)
6. Ischemic Vascular Disease (IVD): Use of Aspirin or another Antithrombotic (NQF #0068)
7. IVD: Blood Pressure Management (NQF #0073)
Quality Health Indicators

Rural Health Clinic Quality Measures (14)

12 are National Quality Forum endorsed

8. IVD: Complete Lipid Profile and LDL Control < 100 (NQF #0075)
9. Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up (NQF #0421)
10. Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Control (<8.0%) (NQF #0575)
11. Children Who Receive Preventive Medical Visits (NQF #1332)
12. Immunizations for Adolescents (NQF #1407)
13. Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Good Control (<7.0%) (MI measure)
14. CVD: Complete Lipid Profile and LDL Control < 100 (MI measure)

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Rural Health Clinic Financial Measures

(annual)

1. Patient visits per FTE
2. Total provider cost per visit
3. Medicare reimbursement per visit (from cost report)
4. Medicaid reimbursement per visit (from cost report)
5. Medicare cost per visit (from cost report)
6. Total visits (from cost report)
7. Productivity Limit (from cost report)
8. Rural Health Clinic Encounters per FTE (monthly)
Quality Health Indicators

All participating clinics are asked to collect and report the

3 QHi Core Clinic Measures

**Clinic Clinical Quality**

- Controlling High Blood Pressure (NQF #0018)
- Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention (NQF #0028)
- Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up (NQF #0421)

RHCs in QHi States

<table>
<thead>
<tr>
<th>State</th>
<th>Number of RHCs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arizona</td>
<td>17</td>
</tr>
<tr>
<td>California</td>
<td>293</td>
</tr>
<tr>
<td>Colorado</td>
<td>58</td>
</tr>
<tr>
<td>Illinois</td>
<td>221</td>
</tr>
<tr>
<td>Kansas</td>
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<tr>
<td>Kentucky</td>
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</tr>
<tr>
<td>Louisiana</td>
<td>112</td>
</tr>
<tr>
<td>Michigan</td>
<td>172</td>
</tr>
</tbody>
</table>

Total: 1,199 RHCs in QHi States

3,950 RHCs in the US
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RHC Fee Schedule
(September 2013 – August 2014)

State Partners (Partners provide state level support, contracting for multiple hospitals in QHi)
$200/year for RHCs associated with participating QHi hospitals
$500/year for RHCs independent of a participating QHi hospital
State Organizations which contract separately for multiple participating hospitals in QHi will pay no more than a combined $40,000 annually for both hospital and clinic participation.

State Partners (Partners provide state level support, contract for multiple RHCs, do not support hospital participation)
$12,000/year for up to 20 RHCs (provider based or independent)
$400/year for each additional up to 40
$200/year for each additional up to 100 ($32,000)

Independent RHC (No state/network level support)
$1,000/year

Hospital plus RHCs (No state/network level support)
$3,000/year plus $200 for each associated RHC
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Reporting Options

- Core Measure Dashboard
- Customized Dashboards
- At-a-Glance
- Best Practice Reports
- New Reports

Facilities with a score in the top 5 are noted as “Best Practice Top Performers”.

Dashboards
- Clinic to State to All QHi
- 3 month average

Note: Hospital specific data will not display on quality measure graphs for hospitals with no occurrences during the reporting period.
Customized Dashboard
- Select from any collected measure
- Clinic to State to All QHi
- 3 month average

At-A-Glance
- 12 month trend report

Best Practice Reports
- Facilities with a Top 5 score are Best Practice Performers
- Direct connection to Best Performers
- Rank of Facility
- Create customized peer groups
- Report on multiple measures
Kansas Hospital Education and Research Foundation

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New Reports
- Define Peer Group(s)
- Schedule Reports
- Select multiple measures
- Variety of display options

Export any report to Excel
www.qualityhealthindicators.org

Thank you!

Questions?

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