



**Springfield Medical
Care Systems**

Where People Come First

*Making Health Reform A Reality —
Quality care, accessible to all.*

Springfield Medical Care Systems

**Blueprint for Health
Semi-Annual Conference
October 20, 2014**

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Outline:

- The **BIG** Demand for Data
- Methods to Measure
- Making Best Effort Data – Trusted Data



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Exporting Our Quality Data:



“Can You Send Us Quality Data?”



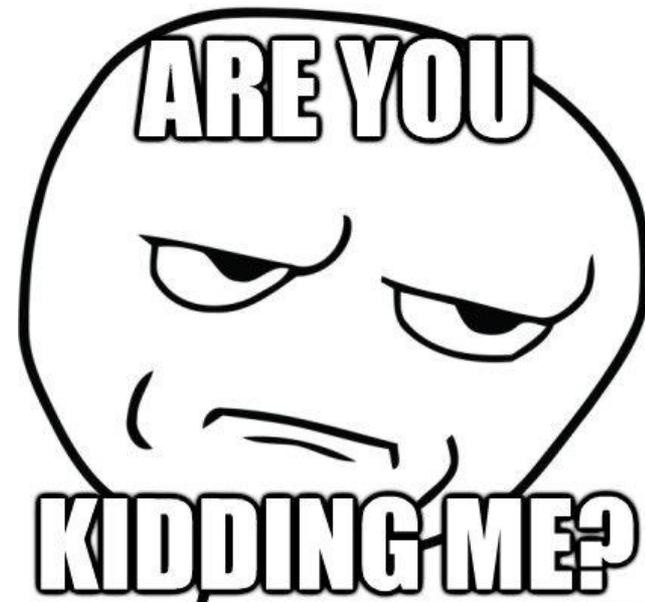
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Who Wants Some Data – Different Data?

- Internal Reporting - Scorecard
- Vermont Blueprint
- UDS
- NCQA
- One Care Vermont (ACO)
- CHAC (ACO)
- Meaningful Use
- CMS
- Insurers
- Public Reporting





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No Problem?



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How we have done it:

Measures	2014			
	Jan	Feb	Mar	Source
Safety and Reliability				
At Risk Population				
- Diabetes Mellitus:				
• Percentage of patients with HgbA1c < 9 (Community Health Center), Most recent test	79.2	73.3	68.3	MR
• Percentage of patients with HgbA1c < 8 (ACO), Most recent test	58	66.7	58.3	MR
• Percentage of patients with HgbA1c < 7 (Vermont Blueprint), Most recent test	39.3	40	40	MR
• Percentage of patients with HgA1c > 8 (ACO), Most recent test	40	31.7	33.3	MR
• Percent of patients whose LDL-C level is less than 100mg/dl, Most recent test	39.8	25	41.7	MR
• Tobacco non use – Tobacco use and assessment	63.3	48.3	58.3	MR
• Aspirin, daily use (ACO)	44.8	53.3	43.3	MR
- Hypertension				
• BP < 140/90 (Community Health Center, ACO)	61.7	63.3	38.3	MR
• BP < 130/80 (Vermont Blueprint)	30	36.7	18.3	MR
- Ischemic Vascular Disease (IVD)				
• IVD: Complete lipid profile and LDL. Control < 100mg/dl	47.5	58.3	61.7	MR
• IVD: 18 y.o. plus prescribed aspirin or other antithrombotic therapy	77.5	73.3	78.3	MR
- Heart Failure				
• Percentage of patients receiving Beta Blocker Therapy for LVSD	78.9	93.1	81.7	MR
- Coronary Artery Disease with Diabetes Mellitus and/or LVSD < 40%				
• Percentage of patients receiving ACE or ARB therapy	81.7	80	73.3	MR
• CAD 18 y.o. plus prescribed lipid lowering therapy	88.3	81.7	73.3	MR
- Asthma, Persistent Age: 5-40				
• Percentage of patients receiving inhaled cortico steroid or other alternative pharmacologic therapy	62.2	43.4	50	MR
• 1 planned visit per year	35.8	20	30	MR
- Pregnancy,				
• Percent of pregnant women beginning prenatal care in the first trimester	90	100	100	MR
- Childbirth				
• Volume of births less than 2500 grams	100	100	100	MR



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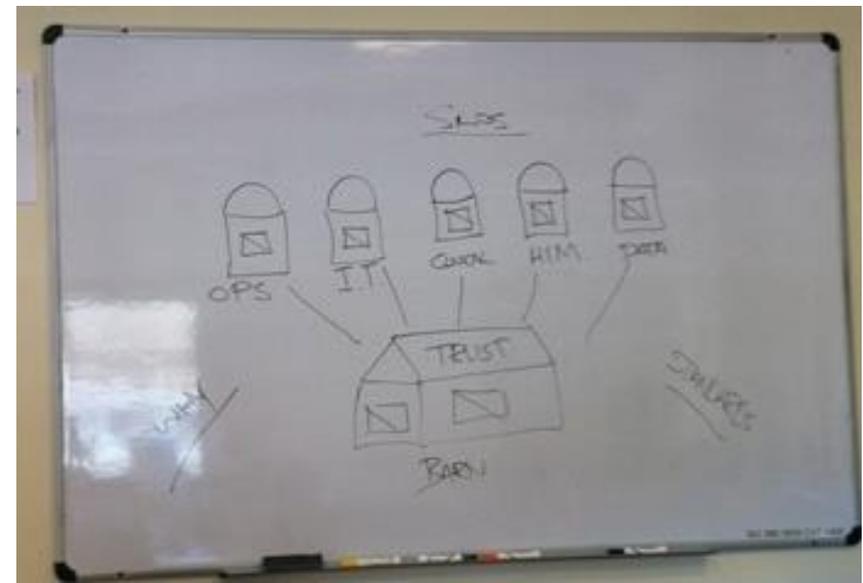
QI & Data Team

Data Team Members

- Lori Twombly SHC Practice Manager
- LaTosha Ings, Clinical Applications Specialist
- Kris Jarvis, Clinical Applications Specialist
- Maureen Shattuck, RN, Clinical Support
- Carrie Kelly, Health Information
- Thomasena Coates, MPH, Health Access
- Chip Beehler, MD, Physician advisor

Current Activities:

- Receiving high level Allscripts report training
- Completed our first One Care VT Quality Data reporting
- Producing our monthly CHC quality measures scorecard
- Data mapping
- Level III Medical Home (Five Sites)





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Putting it All Together!

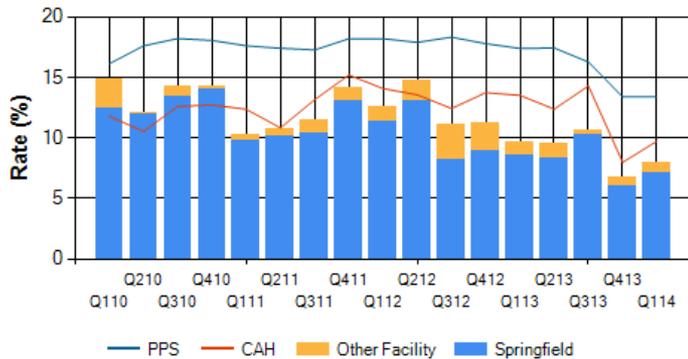




Readmission comparison

Vermont Hospital and CAH comparative readmission data:

Springfield Readmission Rate Per Discharge



Readmission Data Actual					Rate / Discharge		
Qtr	Discharges		Readmits		Rate / Discharge		
	Springfield	Springfield	CAH	PPS	Springfield	CAH	PPS
Q112	582	73	351	1655	12.50%	14.10%	18.20%
Q212	567	84	314	1636	14.80%	13.60%	17.90%
Q312	486	54	279	1651	11.10%	12.40%	18.30%
Q412	462	52	307	1578	11.30%	13.80%	17.80%
Q113	458	44	310	1579	9.60%	13.50%	17.40%
Q213	443	42	274	1568	9.50%	12.40%	17.40%
Q313	507	54	321	1483	10.70%	14.30%	16.30%
Q413	446	30	168	1106	6.70%	8.00%	13.40%
Q114	491	39	218	1092	7.90%	9.70%	13.40%

Daily Readmission Rate

Readmits	Readmit days	no. days
256	0.36	709

Percent of 3 day appt. requests met and percents of total requests. Includes discharges from other hospitals.

Appt. % within 3 d	%3 day requests met	Appt. % within 5 d	Appt. % within 7 d	Appt % >7d	Total
49.8%	100.0%	23.3%	27.0%	29.3%	1788



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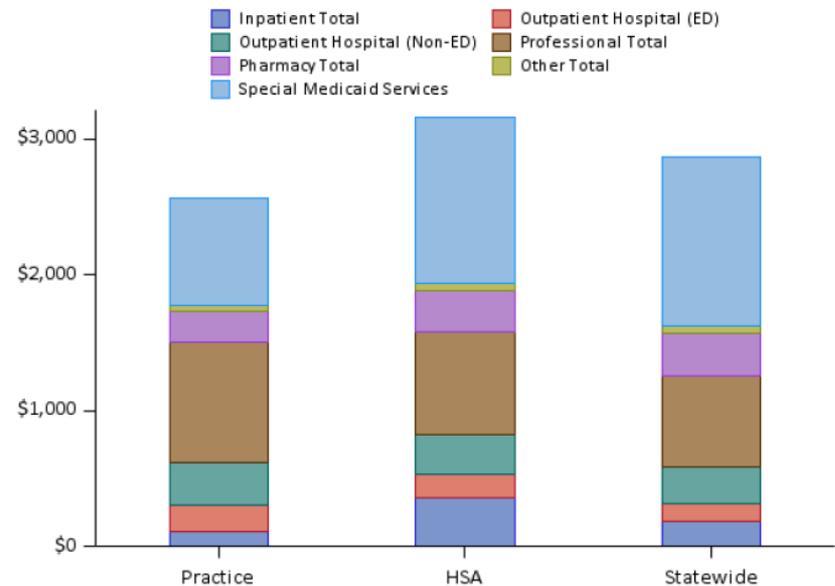
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Practice Profile: Ludlow Health Center

VERMONT
Blueprint for Health

Smart choices. Powerful tools.

Total Expenditures by Major Category





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UDS

UDS Health Center Performance Annual Comparison Report - 2013

	2010	2011	2012	2013	2013 Change
Access					
Total Number of Patients Served	20,092	23,961	24,367	23,836	-531
Dental Patients Served	0	425	891	1152	261
Agricultural Worker Patients Served	57	45	57	128	71
Homeless Patients Served	58	63	87	99	12
Public Housing Patients Served					
Quality of Care/Health Outcomes					
% of Prenatal Patients Served in 1st Trimester	93.08%	87.50%	90.41%	88.74%	-1.67%
% of Women with Pap Test	85.71%	85.71%	64.29%	80.00%	15.71%
% Children Age 2 Immunized	88.57%	87.14%	50.00%	84.29%	34.29%
Counseling and BMI Percentile	<small>Data not collected until 2011</small>	22.86%	41.43%	38.57%	-2.86%
Screening and Counseling	<small>Data not collected until 2011</small>	45.71%	27.14%	54.29%	27.15%
%Adults Assessed for Tobacco Use	<small>Data not collected until 2011</small>	82.86%	100.00%	98.50%	-1.50%
% Adult Tobacco Users receiving intervention	<small>Data not collected until 2011</small>	20.00%	28.57%	95.71%	67.14%
Pharmalogical Therapy	<small>Data not collected until 2011</small>	98.57%	94.29%	90.00%	-4.29%
% of Adults on Lipid Lowering Therapy	<small>Data not collected until 2011</small>	<small>Data not collected until 2011</small>	98.57%	92.86%	-5.71%
Colorectal Ca Therapy	<small>Data not collected until 2011</small>	<small>Data not collected until 2011</small>	54.29%	85.71%	31.42%
	<small>until 2011</small>	<small>until 2011</small>	100.00%		-100.00%
% Low and Very Low Birthweight Newborns	3.47%	5.62%	2.94%	0.93%	-2.01%
% Diabetic Patients with HbA1c < = 9%	75.71%	77.14%	78.57%	91.43%	12.86%
% of Hypertensive Patients with BP < = 140/90	65.71%	77.14%	82.86%	71.43%	-11.43%
Financial Cost/Viability					
Total Cost per Total Patient	\$537.72	\$630.91	\$693.63		\$62.72
Medical Cost per Medical Visit.	\$146.12	\$149.85	\$153.52		\$3.67



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OneCare Vermont Quality Measure Scorecard

OCV

Domain	Measure	30th perc.	40th perc.	50th perc.	60th perc.	70th perc.	80th perc.	90th perc.	OCV Score	n
Patient/Caregiver Experience	1 Getting Timely Care, Appointments, and Information	30.00	40.00	50.00	60.00	70.00	80.00	90.00		
	2 How Well Your Doctors Communicate	30.00	40.00	50.00	60.00	70.00	80.00	90.00		
	3 Patients' Rating of Doctor	30.00	40.00	50.00	60.00	70.00	80.00	90.00		
	4 Access to Specialists	30.00	40.00	50.00	60.00	70.00	80.00	90.00		
	5 Health Promotion and Education	54.71	55.59	56.45	57.63	58.22	59.09	60.71		
	6 Shared Decision Making	72.87	73.37	73.91	74.51	75.25	75.82	76.71		
	7 Health Status/Functional Status	N/A								
Care Coordination/ Patient Safety	8 Risk Standardized, All Condition Readmissions	16.62	16.41	16.24	16.08	15.91	15.72	15.45		
	9 ASC Admissions: COPD or Asthma in Older Adults	1.24	1.02	0.84	0.66	0.52	0.36	0.00		
	10 ASC Admission: Heart Failure	1.22	1.03	0.88	0.72	0.55	0.40	0.18		
	11 Percent of PCPs who Qualified for EHR Incentive Payment	51.35	59.70	65.38	70.20	76.15	84.85	90.91		
Preventive Health	12 Medication Reconciliation	30.00	40.00	50.00	60.00	70.00	80.00	90.00	73.81	547
	13 Falls: Screening for Fall Risk	17.12	22.35	27.86	35.55	42.32	51.87	73.38	46.30	432
	14 Influenza Immunization	29.41	39.04	48.29	58.60	75.93	97.30	100.00	71.36	398
	15 Pneumococcal Vaccination	23.78	39.94	54.62	70.66	84.55	96.64	100.00	77.73	440
	16 Adult Weight Screening and Follow-up	40.79	44.73	49.93	66.35	91.34	99.09	100.00	70.94	413
	17 Tobacco Use Assessment and Cessation Intervention	30.00	40.00	50.00	60.00	70.00	80.00	90.00	91.37	417
	18 Depression Screening	5.31	10.26	16.84	23.08	31.43	39.97	51.81	24.71	344
	19 Colorectal Cancer Screening	19.8	33.9	48.5	63.3	78.1	94.7	100	65.33	424
	20 Mammography Screening	28.6	42.9	54.6	65.7	76.4	88.3	99.56	68.04	413
	21 Proportion of Adults who had blood pressure screened in past 2 years	30.00	40.00	50.00	60.00	70.00	80.00	90.00	68.66	351
At-Risk Population Diabetes	Diabetes Composite 22 – 26	17.39	21.20	23.48	25.78	28.17	31.37	36.50	23.08	416
	ACO #22. Hemoglobin A1c Control (HbA1c) (<8 percent)									
	ACO #23. Low Density Lipoprotein (LDL) (<100 mg/dL)									
	ACO #24. Blood Pressure (BP) < 140/90									
	ACO #25. Tobacco Non Use									
ACO #26. Aspirin Use										
27 Percent of beneficiaries with diabetes whose HbA1c in poor control (>9 percent)	70.00	60.00	50.00	40.00	30.00	20.00	10.00	22.12	416	
At-Risk Population Hypertension	28 Percent of beneficiaries with hypertension whose BP < 140/90	60.00	63.16	65.69	68.03	70.89	74.07	79.65	67.04	443
At-Risk Population IVD	29 Percent of beneficiaries with IVD with complete lipid profile and LDL control < 100mg/dl	35.00	42.86	51.41	57.14	61.60	67.29	78.81	60.92	412
	30 Percent of beneficiaries with IVD who use Aspirin or other antithrombotic	45.44	56.88	68.25	78.77	85.00	91.48	97.91	86.65	412
At-Risk Population HF	31 Beta-Blocker Therapy for LVSD	30.00	40.00	50.00	60.00	70.00	80.00	90.00	81.78	236
At-Risk Population CAD	CAD ACO #32. Drug Therapy for Lowering LDL Cholesterol									
	Composite ACO #33. ACE Inhibitor or ARB Therapy for Patients with CAD and Diabetes and/or LVSD	54.1	61.4	66.1	70	72.3	76.4	79.84	58.95	458

Scores not available at this time for survey-based measures and CMS-calculated claims based measures.

Note: Measures 8, 9, 10, and 27 are 'reverse scored'.

n = number of beneficiaries included in the CMS GPRO submission for each quality measure. For measure 12, n is the number of discharge dates selected for medication reconciliation.

Shown are the benchmarks for each percentile, starting with the 30th percentile (corresponding to the minimum attainment level) and ending with the 90th percentile (corresponding to the maximum attainment level). OCV scores are included in the last column and the corresponding percentile rank highlighted in blue.

Defining the measures, improving the system

Metrics	EMR Source	Documentation Point	System Improvements
PREVENTATIVE HEALTH			
<ul style="list-style-type: none"> BMI obtained and counseling documented 2 y.o.-17 y.o. 	EMR Report, Vitals, Assessment, Plan	Vitals - Height and Weight	
<ul style="list-style-type: none"> BMI obtained and counseling documented 18 y.o. and above 	EMR Report, Vitals, Assessment, Plan	? Don't currently have	Data point creation
<ul style="list-style-type: none"> Tobacco assessment 18 years older and greater 	EMR Report, chart review	Social History	Add assessment question
<ul style="list-style-type: none"> Tobacco assessment cessation intervention 18 years older and greater 	Social History, Care Plan and Goals	? CPT usage	Standardize documentation area

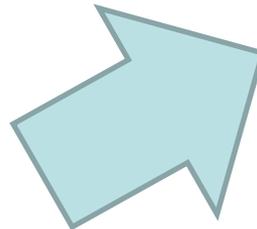
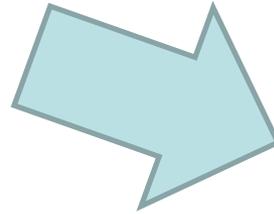
One Care	UDS
Percentage of patients aged 18 years and older with a calculated BMI in the past six months or during the current visit documented in the medical record AND if the most recent BMI is outside of normal	Random sampling of 70 charts or universe of patients age 18 and older with calculated BMI and 2 follow plan documented if patient over/under weight
Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 24 months AND who received cessation counseling intervention if identified as a tobacco user	Random sampling of 70 charts or universe of patients aged 18 years or older who have had at least one office visit in measured year, who have received medication or cessation
Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 24 months AND who received cessation counseling intervention if identified as a tobacco user	Random sampling of 70 charts or universe of patients aged 18 years or older who have had at least one office visit in measured year, who have received medication or cessation

Provider Education
Education for clinical guidelines and documentaiton
Update change
Education for clinical guidelines and documentaiton



Who Wants Some Data?

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An Accountable Quality Medical Home:

