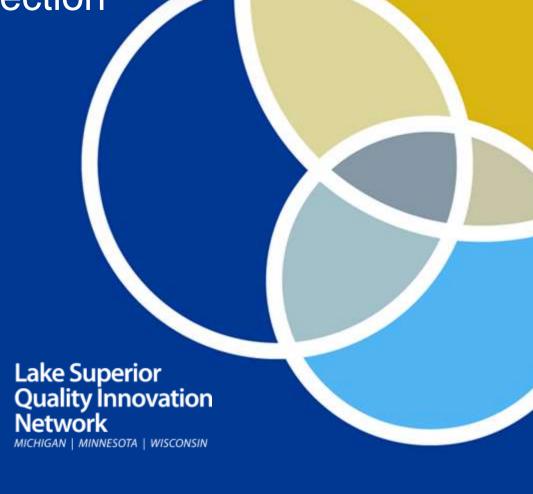
Assessing Transformation Readiness Under MACRA/MIPS:
Barriers to Data Collection

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### Objectives

- 1. Describe MACRA/MIPS through the quality lens
- Explain Transformation Readiness Assessment process
- 3. Share insights and findings
- 4. Set the stage for data needs and opportunities

### Stratis Health

- Independent, nonprofit, Minnesota-based organization founded in 1971, working at the intersection of research, policy, and practice
- Mission: Lead collaboration and innovation in health care quality and safety, and serve as a trusted expert in facilitating improvement for people and communities

### Stratis Health Initiatives

A diverse portfolio of initiatives, funded by federal and state agencies, foundations, and health plans, including:

- Serving as one of 14 regional QIN-QIOs
  - Stratis Heath leads the Lake Superior Quality Innovation Network serving Michigan, Minnesota, and Wisconsin under the CMS Medicare Quality Improvement Organization Program.
  - Quality, safety, prevention, value-based care
- Improving Health Equity
  - Health literacy, cultural competence, race/ethnicity/language data
- Rural Health
  - Palliative care, patient safety, rural-relevant measures, value
- Health Information Technology
  - Regional Extension Center HIT, HIT toolkits, consulting toward health transformation



## Stratis Health Perspective on MACRA/MIPS

- Focus and priority are on improving quality and safety in a value-based care environment, and we view incentives and value-based purchasing programs as tools and levers for improvement
- We are a knowledgeable and trusted source of valuebased purchasing policy and program interpretation, at both federal and state levels
- We uniquely hold a comprehensive view across settings and into the community and are committed to integration

### **Stratis Health Focus**

# Four Pillars of Transformation Readiness of Health Care Organizations

- Leadership
- Organizational Change and Quality Improvement
- Evidence Based Practice
- Establishing and Enabling IT Platforms

## Transformation Readiness Assessment Process

### Current & Future state

- Clinician
- Eligibility
- Quality reporting
- Technology: MU, PQRS

### **Impacts**

- Provider
- Organization
- Patients
- Payments

### Data analytics

- Population risk management
- Quality Measures and outcomes
- Cost: patient and organizational
- Utilization: within and outside settings



## Assessment Categories: Value Based Care Tool

#### Rural Health Value: Value Based Care Assessment Tool

\*Collaborative efforts of Office of Rural Health Policy, the RUPRI Center for Rural Health Policy Analysis (RUPRI Center), and Stratis Health <a href="http://cph.uiowa.edu/ruralhealthvalue/TnR/vbc/vbctool.php">http://cph.uiowa.edu/ruralhealthvalue/TnR/vbc/vbctool.php</a>

#### Categories

- 1. Leadership/Governance/Change
- 2. Quality Improvement /Best Practice
- 3. Information Systems (EHR, HIE, portals)
- 4. Patient/Family Engagement
- 5. Care Management (access, HCH, etc.)
- 6. Care Coordination Across Settings
- 7. Population and Community Health
- 8. Financial Risk Management: Readiness for APM

## Transformation Readiness Assessment Tools



- 2. Provider Eligibility, Quality Reporting, Technology Tool
- Meaningful Use Assessment Tool (2016 and Medicaid)
- 4. MIPS Scoring
  - ACI Score
  - 2. CPIA score
  - 3. Quality: cross-walked measures, no scoring tool
  - 4. Value scores: no scoring tool

Rural Health Value: Value Based Care Assessment Tool ttp://cph.uiowa.edu/ruralhealthvalue/TnR/vbc/vbctool.php



# Insights and Findings: Strengths

#### **Strengths:**

- High Adoption and Use of EHRs
- Robust Quality Improvement processes
- Collaboration of Minnesota Stakeholders
  - Statewide strength, working on organizational and regional collaborations for HIE and VBC

# Insights and Findings: Opportunities

#### **Opportunities:**

- Align quality measures across payers
- Improve data consistency
- Present real-time actionable data
- Improve care coordination across settings
- Develop patient-centered metrics
- Support/promote accountability
- Identify and manage population health
- Promote cultural change

## Barriers to Data Use and Collection

#### Technology

- Ease of Use
- Capacity
- Interoperability

#### Limited Resources

- Staff time and expertise
- Provider burden
- Processes: Workflow, change management

#### Data Analytics

- Limited access to utilization data
- Population health, predictive analytics
- Lack of alignment of quality measures

### Alignment of Quality Measures

What do we hear most consistently from health care organization and stakeholders? Alignment!

- Federal and state
- Third party payers
- Professional organizations
- Clinical best practices
- New: patient reported outcomes

### QIN-QIO Role

- The network of Medicare QIN-QIOs across the country are now offering education and support for practices to participate in the new CMS Quality Payment Program
- Contact your regional QIN-QIO to coordinate your efforts:

http://www.qualitynet.org/dcs/ContentServer?c=Page&pagename= QnetPublic%2FPage%2FQnetTier2&cid=1228774346757

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