

How to Drive Data Through Your EHR

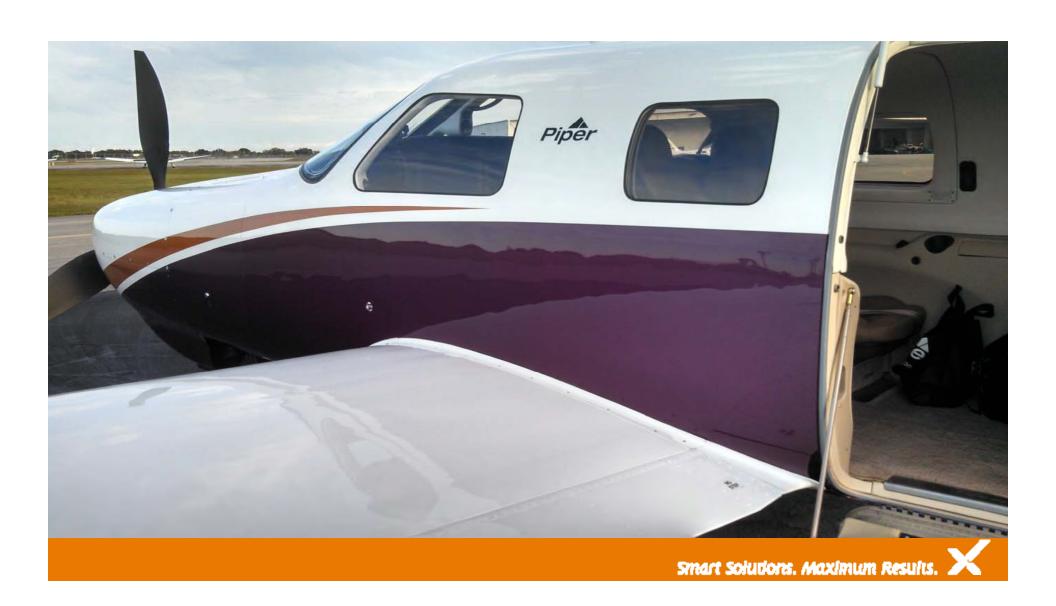
Louisiana MGMA Conference August 21, 2015

About Your Presenter...

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- > Vice President of Business Development for PracticeMax
- > Over 30 years in the Physician Practice Management Industry
- > Past President of the Healthcare Billing & Management Association (www HBMA.org)





Things don't get better by chance...



Agenda

Data? What Data?

From Meaningful Use to MIPS

Begin with the End in Mind

The Right Tool(s) for the Job

Finding Success Along the Way

WARNING: Do Not Forget About HIPAA

da·ta: 'dadə, 'dādə/

noun

"Facts and statistics collected together for reference or analysis."

What Kind of Data is Your Practice Collecting?

- > Patient demographic information
- > Patient medical information
- > Practice financial information (charges, payments, adjustments, etc.)
- > Anything else?

What Kind of Data is Your Practice Collecting?

- Diagnosis information
- Visit dates
- Medications (including reactions)
- Allergies
- > Treatment outcomes
- > Referral sources
- > Health plan information
- Social & Family histories
- > Vital signs (with trends)

- > Hospital admission & discharge dates
- > Procedures & treatment protocols
- Demographic details (age, gender, etc.)
- > Exposure to pathogens
- Travel history
- Socioeconomic data
- Employment history
- Dietary information
- Satisfaction information



"Facts and statistics collected together for reference or analysis."

You have Lots of Data at your disposal.....

The trick is to <u>use</u> it!

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What's a MIP?

Merit Based Incentive Payment System

- Replaces the Disastrous SGR reimbursement system
- Impacts all Medicare Part B providers (with few exceptions)
- > Impacts clinical operations beginning in 2017 and reimbursement in 2019 (from 4% up to 9% in 2022)

What's a MIP?

Merit Based Incentive Payment System

Measures Provider Performance in 4 Categories:

- Value Based Modifier (VBM) Measured Quality
- VBM Measured Resource Use
- Meaningful Use
- Clinical Practice Improvement

Building a Foundation for MIPS: Meaningful Use

Stage 1 MU

- Bare minimum requirements & expectations
- Create structured patient data and eRX
- > Track problems, medications, allergies
- Track Clinical Quality Measures (CQM's)
 - No performance threshold
 - Zero numerators (no requirement to show improvement)



Building a Foundation for MIPS: Meaningful Use (continued)

Stage 2 (all of Stage 1 +)

- > HIE, patient portal, secure messaging (P2P)
- COM's increase from 6 to 9 in 2014
- > Still no performance thresholds for CQM's

Drawbacks of Meaningful Use

- There are still no outcome performance measures
- Meaningful use criteria does not align with Triple Aim objectives:
 - Improved Health
 - > Improved Patient Satisfaction
 - Reduced Costs
- No consideration for weighing costs with benefits

Building a Foundation for MIPS: PQRS, HIE & VBM PQRS:

- Required to report on 9 measures
- > 1.5% penalty if you missed 2015 deadline
- > 2.0% penalty in 2017 based on 2015 PQRS reporting

Health Information Exchange (HIE):

Secure Information Sharing

Value Based Modifier Program

Preparing for 2019 - Merit Based Incentive Payment System

- > Triple Aim
- PMPM Capitation (already in use)
- Bundled Payments (starting to see more of)
- Expand Care Team (Chronic Care Management CCM)
- Group Visits/Classes
- Increased Patient Engagement & Satisfaction Research
- > Enhanced Data Gathering, Analytics & Reporting

Achieving Triple Aim Requires



Data Collection



Data Sharing



Data Analytics



EHR Adoption

95% of hospitals/54% of ambulatory providers

Interoperability (HIE)

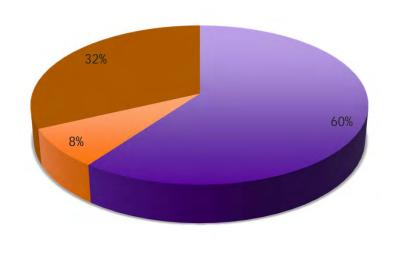
- > 56% of hospitals routinely electronically notify PCP on ER entry
- 32% of patients have direct access to lab results

Engagement

- 41% of hospitals use secure messaging
- 49% of patients are using IT to interact with their provider
- > 18% of patients are using secure texting to interact with their provider

Meaningful use results?

493 Health IT studies from 2007-2013 related to the impact of meaningful use functionality on the quality, efficiency, and safety of care



■ Positive Impact ■ Negative Impact ■ Mixed Impact



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Stephen Covey, The 7 Habits of Highly Effective People



Step 1: Inventory & Assess the data you are currently collecting

- > Where is it?
- How is it gathered?
- > Is it accurate?
- What is missing (and where can you get it)?

Step 2: Assess current tools, vendors & resources

- > EHR/PM System
- Data Warehouse/Reporting Platform
- Patient Satisfaction Research capabilities

Identify deficiencies & make plan to shore up

Step 3: Assess Care Team

- Providers & Midlevels
- > Training?
- > Capacity?
- > Attitude?

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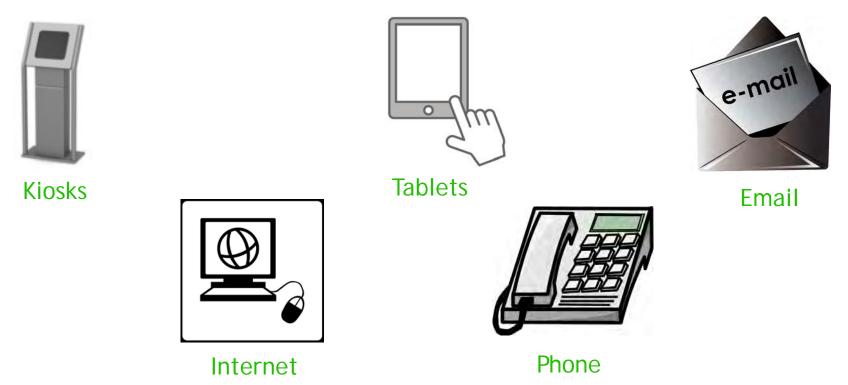
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What Tools are We Using?

Where is the Data that You Want?

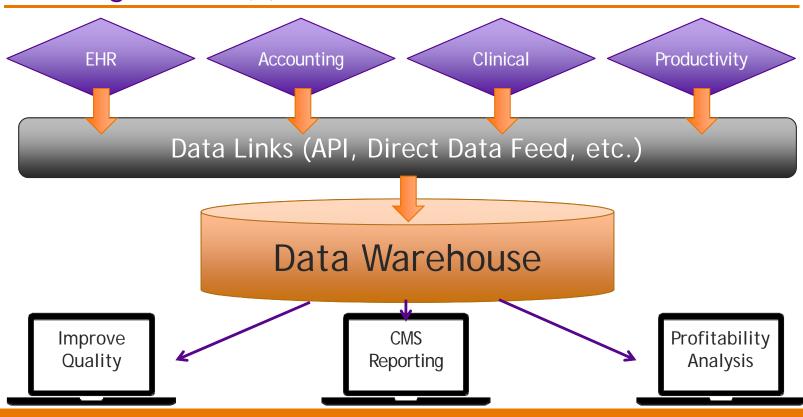
How can you Collect it?



- EHR/PM System (claims data)
- Accounting systems
- Health Information Exchange
- Chronic Care Management systems
 - > RN's, NP's and MA's are expanding the service delivery team beyond the Provider

- Patient Home/Mobile Monitoring Devices
 - Wearable devices (Pedometer, FitBit, etc.)
 - Home Monitors (Weight, Glucose, Diet, Fluids, etc.)
- Hospitals
- Referring/Specialty Providers

- > E-Visits
- Clearinghouse
- **>** Labs
- > Pharmacy
- Satisfaction Research Systems



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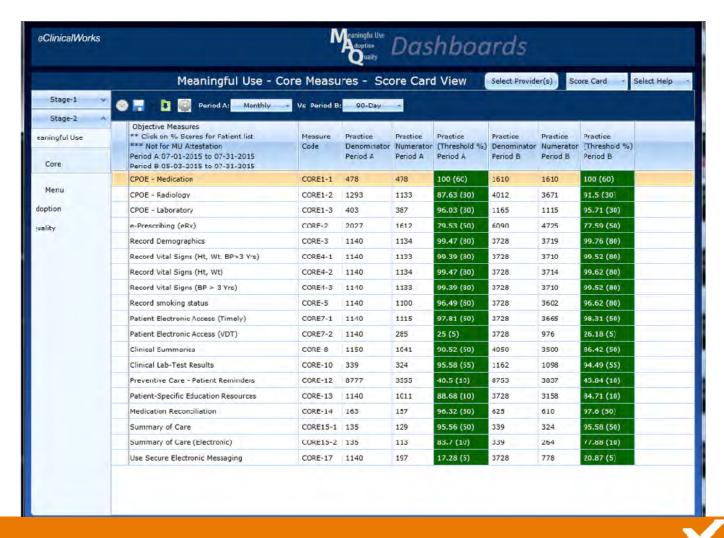
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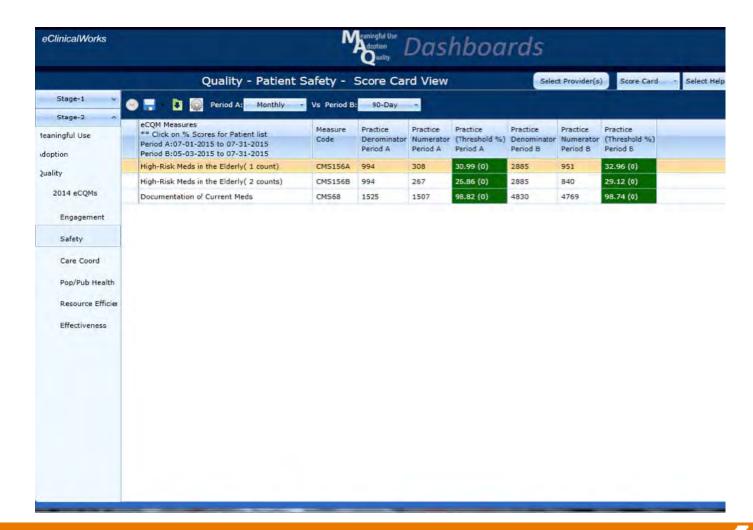
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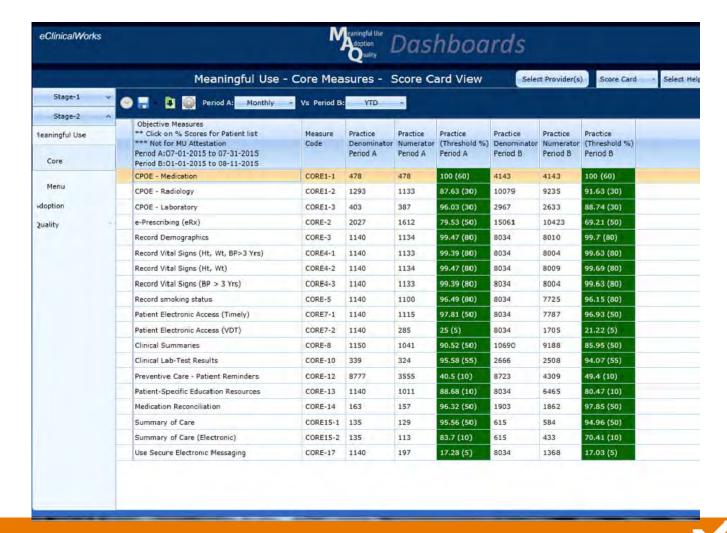
Sample eCW MU report





Sample eCW MU report

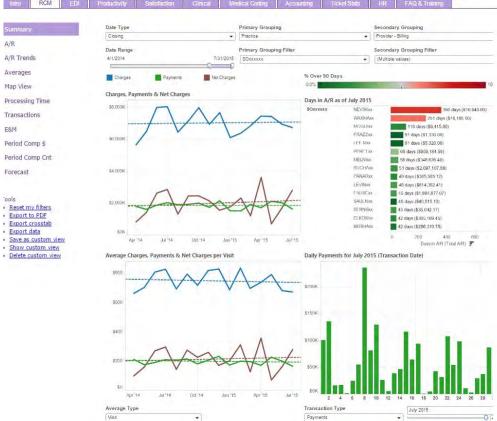
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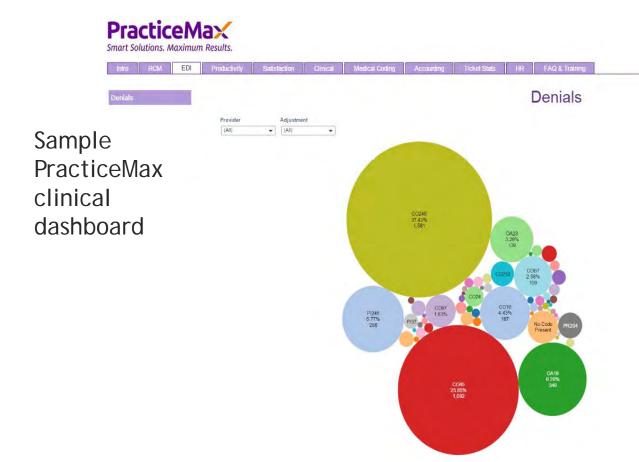






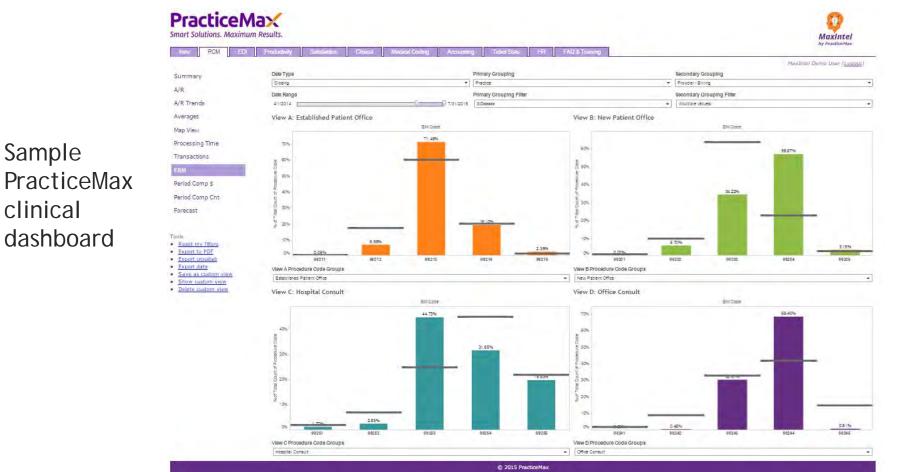
MaxIntel Demo User (Logout)







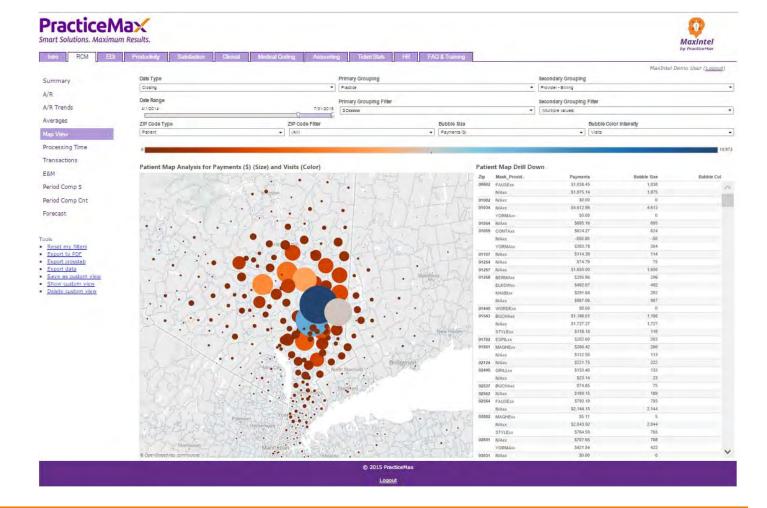
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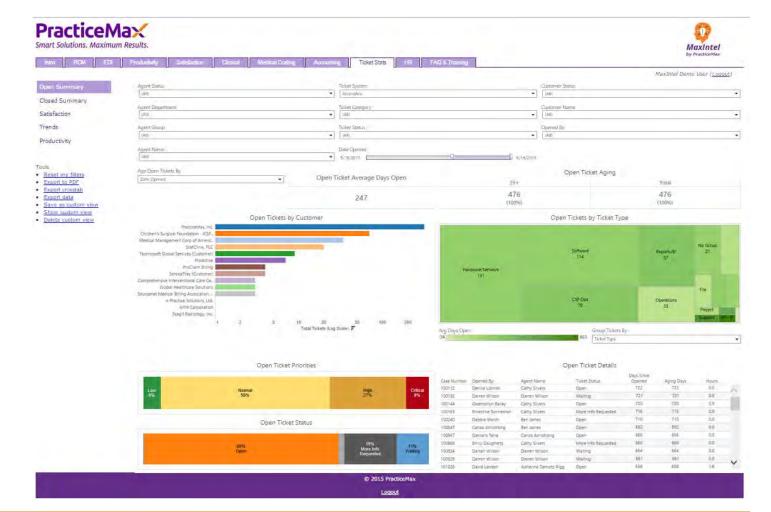
Sample

clinical



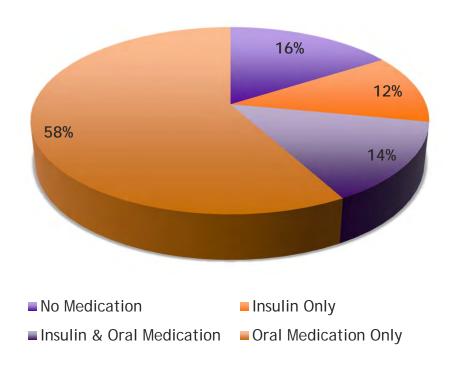




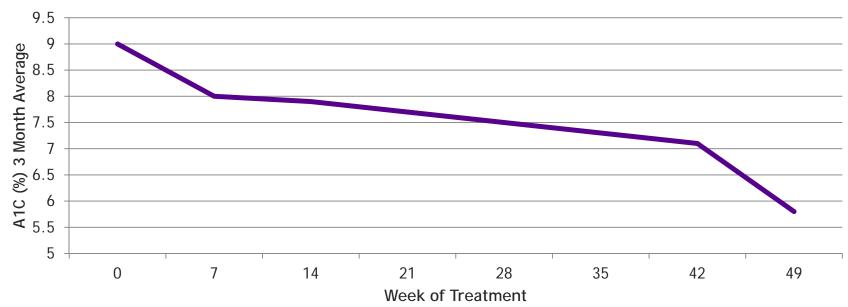


Diabetes Medication Profile

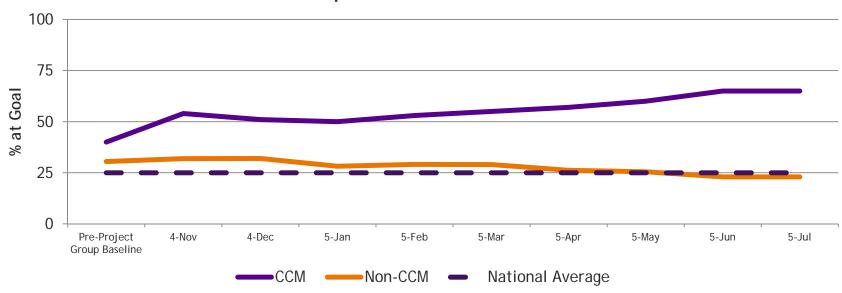
- Treatment with insulin and oral medications for people with diabetes
- This is 2 simple data points, graphically represented



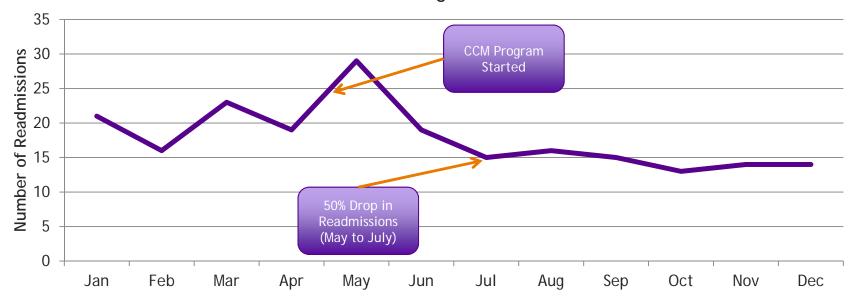
Longitudinal View of Monthly A1C Levels



Hypertension Goal Tracking: CCM Compared to Non-CCM Patients



Overall CHF Readmission Improvement due to CCM Starting June 2013



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- HIPAA privacy rules apply to satisfaction research, data warehouses, data analytics platforms, etc.
- Make sure all analytics/email/survey/texting and/or practices are HIPAA and HITECH compliant
- Update your HIPAA policies & procedures to make sure they meet HHS OCR guidelines
- > Revise patient intake consent and authorization forms to include data mining & data sharing practices
- > Failure to comply with HIPAA Privacy & Security requirements can result in stiff fines and penalties

Thank you for your Participation

For further information, please contact:

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Thank you!

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