

IFMC – Health Management Solutions for Meaningful Use

February 19, 2010



Background

- ❑ Originated as a QIO 35+ years ago
- ❑ Health management company today that has care management, quality management and information management practices
- ❑ Partners with federal, state and private industry (Medicare QIO for Iowa and Illinois, Medicaid in Iowa and Oklahoma)
- ❑ Mission – Optimize the quality of medical care and health through collaborative relationships, education, and health information management.



Experience

- ❑ Medicare Claims (Part A, Part B and Part D) that drives PQRI (Physician Quality Reporting Initiative)
- ❑ QIO Clinical Data Warehouse that drives APU (Annual Payment Update) and Hospital Compare
- ❑ Long term care databases that drive Nursing Home Compare
- ❑ Chronic Condition Warehouse (longitudinal studies)
- ❑ National Registries for data submission to PQRI
- ❑ Medicaid claims data and registry
- ❑ EMR data for DOQIT and AMA programs



PQRI – Overview

- ❑ Medicare’s value-based purchasing program that collects data on more than 150,000 professionals
- ❑ Includes:
 - ❖ Processing over 1.7 billion claims and provides program management, software engineering, integration, inquiry support, and operations services
 - ❖ Calculation and analysis of value-added data for payment, feedback, and management reporting on 153 measures, up from initial 74



PQRI – Outcomes

- Analysis used to recommend measure and processing changes to policy makers, maximizing benefits to participating professionals
 - ❖ Enhanced processes resolving NPI reporting & claims reconstruction
 - ❖ Improved process for provider participation through education and outreach & recommend measure improvements



Meaningful Use

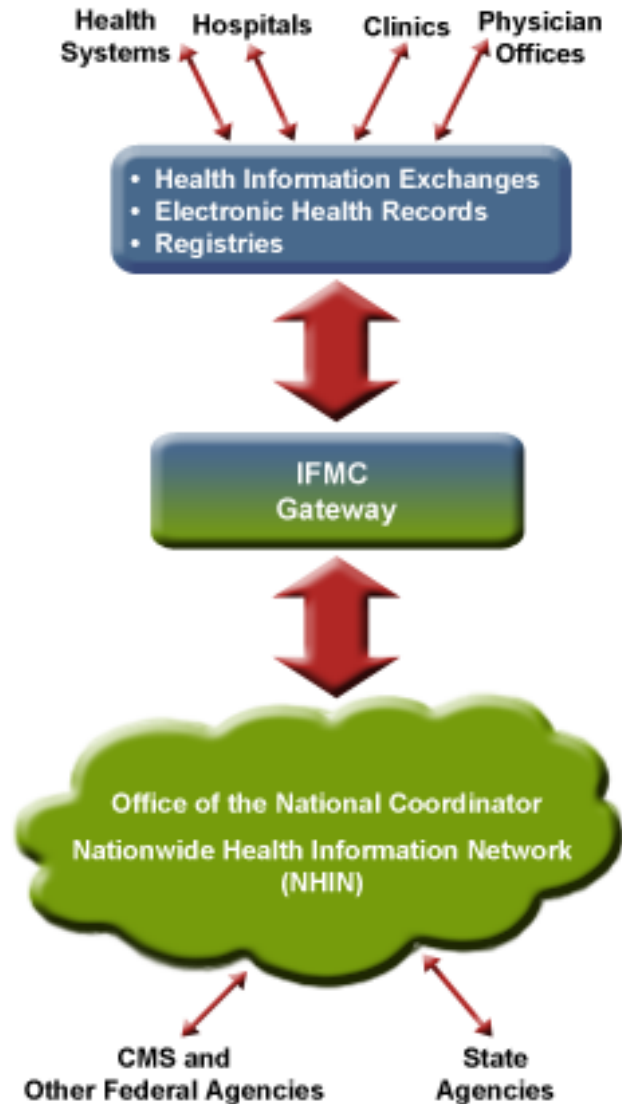
- ❑ Meaningful use focus on quality reporting through health information technology (EHR/EMR)
- ❑ Sharing data through the National Health Information Network (NHIN), Federal Health Architecture (FHA)
- ❑ Incorporates incentive program for eligible professionals (reporting to CMS VBP Programs)
- ❑ IFMC has the capabilities to connect clients to the NHIN to support meaningful use data transactions and quality reporting



From PQRI to Meaningful Use

- ❑ Support meaningful use goals, including reporting from EHR to PQRI with adequate privacy and security protections for PHI/PII (2-factor authentication)
- ❑ R&D NHIN meaningful use file submission with standard file formats (HL-7)
- ❑ Helping providers maximize the potential benefits of meaningful use, including the VBP incentive program, using an EHR

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Meaningful Use Experience

- ❑ R&D with ONC and CMS PQRI reporting across NHIN
- ❑ Participating with ONC in NHIN on-boarding process
- ❑ HITREC for Iowa
- ❑ CareMeasures Registry (QRDA – Gateway – PQRI)
- ❑ Supporting 2010 PQRI participants using 7 qualified EHR tools (2-factor authentication)
- ❑ Vetting 50 EHR vendors for participation in 2011 PQRI
- ❑ Assisting CMS defining/implementing 2011 PQRI EHR measures

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