

# QUALITY MANAGEMENT, PCMH, & EHR

**Bringing It Together**

Kenneth Hogue, 2014

# What is a Quality Management Program?



# There are two types:

- ▶ Practice based
  - ▶ Health Plan based
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# Practice Based Quality Management

- ▶ Used to improve the quality of care within the practice



# Health Plan Based Quality Management



- ▶ Directed by the insurance carrier
- ▶ Usually involves a combination of chronic disease states & wellness

# What Data Is Being Looked At?

*Clinical Markers Regarding  
Chronic Conditions & Wellness*

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# *Examples of Chronic Conditions:*

**Diabetes, CHF, COPD, Depression**

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# Examples of Clinical Markers:

**PFT, A1C, LDL, Retinal Exam,  
Medications.**

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- ▶ **Mammograms**
- ▶ **Colonoscopy**
- ▶ **FOBT**

**These Are Examples of  
Wellness Markers**

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But there is **ANOTHER** player...

**The ACO!**


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# Accountable Care Organization (ACO)

- ▶ Incentivizes PCP's based on the amount of monies saved treating patients
- ▶ Involves monitoring High End Users



# What is a High End User?

- ▶ A patient who uses their health insurance at a high rate
  - ▶ Hospice patients, skilled care patients, complex patients
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How does a practice easily  
monitor all this?

**Electronic Health Records!**



**Electronic Health Records (EHR's)  
make it easy to keep an eye on  
many different issues...**

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- ▶ Chronic disease management
- ▶ Medication management
- ▶ The ability to alert clinicians to quality issues
- ▶ Documentation of closed or open gaps in care
- ▶ Tracking of office visits (High End Users)
- ▶ Testing performed & reported



**... And Much More!**


**All of this makes dealing with  
quality programs of any type  
MUCH easier to handle!**





**The New Kid in Town:**

**Patient Centered Medical  
Home  
(PCMH)**

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# What is a PCMH?

- ▶ An accreditation that shows that a primary care provider/practice meets standards dealing with the management of ALL patients



# It's Not Easy to Attain...

It took my practice a little over one year of data collection!



**What made it easier for us to  
complete this task?**

**The Electronic Health Record!**

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**PCMH has many different  
requirements...**



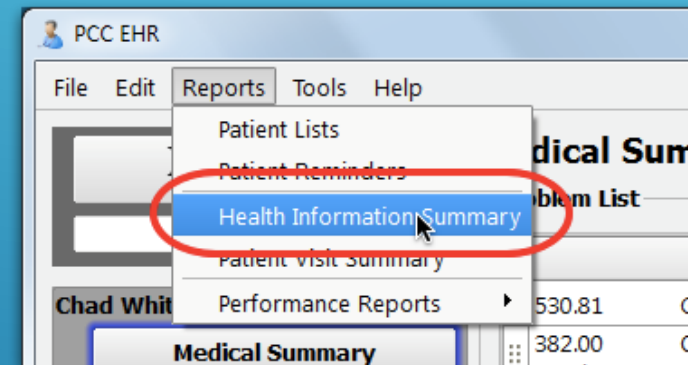
# What are these requirements?

**Referral Tracking, Chronic  
Disease Management, Provider  
Availability, Quality Improvement  
*And Much, Much, More!***

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# Documentation that these requirements are being met is CRUCIAL!

- ▶ Screen shots
- ▶ EHR generated reports
- ▶ Schedules



**All Need to be Shown!**

**The EHR makes this MUCH easier  
to accomplish!**





**Most of the requirements for PCMH  
are things we should be doing  
anyway...**

**The EHR just makes this MUCH  
more efficient!**

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# Still, many physicians have issues with using an EHR, such as:

- ▶ “I’m not tech savvy!”
- ▶ “It slows me down!”
- ▶ “I can’t pay enough attention to the patient!”



How are these issues overcome?

**The SCRIBE!**


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# What is a Medical Scribe?

- ▶ A staff member who inputs data into the EHR for the physician during the patient encounter



# An Efficient Medical Scribe Must...


- ▶ Be VERY well-trained!
  - ▶ Have a thorough understanding of the EHR
  - ▶ Have a thorough understanding of how the physician functions
  - ▶ Have a thorough understanding of the quality initiatives
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**But scribes cost money...**

**How can I justify this cost?**



# 3 Ways to Justify:

- ▶ Scribes increase the physician's productivity
    - ▶ More patient visits = More revenue!
  - ▶ Billing is done in a more timely fashion
    - ▶ The earlier bills are posted, the better the chance of getting paid!
  - ▶ Better compliance with health plan quality initiatives
    - ▶ Compliance = More incentive reimbursement!
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**REMEMBER:**

**Stagnation can be the “Kiss of  
Death”...**

**Embrace New Technology!**

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