



Adirondack Health Institute

Lead • Empower • Innovate

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# Practice Transformation Workgroup October 2020

PRESENTED BY:

*Louann Villani, RN, AHI*

*Brenda Stiles, RN, Adirondacks ACO*

Oct. 15, 2020





I. Opening/Welcome – L. Villani

II. Hixny Update and Feedback – R. Craven (40 min.)

III. PCMH Survey Results and Updates – L. Villani (10 min.)

IV. Open Forum – (10 min.)





- Do you have Hixny integrated into your EHR?
- Have you seen the reports in Hixny? Are they helpful?
- Have you seen the patient dashboards?



Hixny®



# The Role of Quality Data in Quality Care

**RUTHANN CRAVEN, MS, PCMH CCE, CTL**

*Manager of Programs and Outreach*

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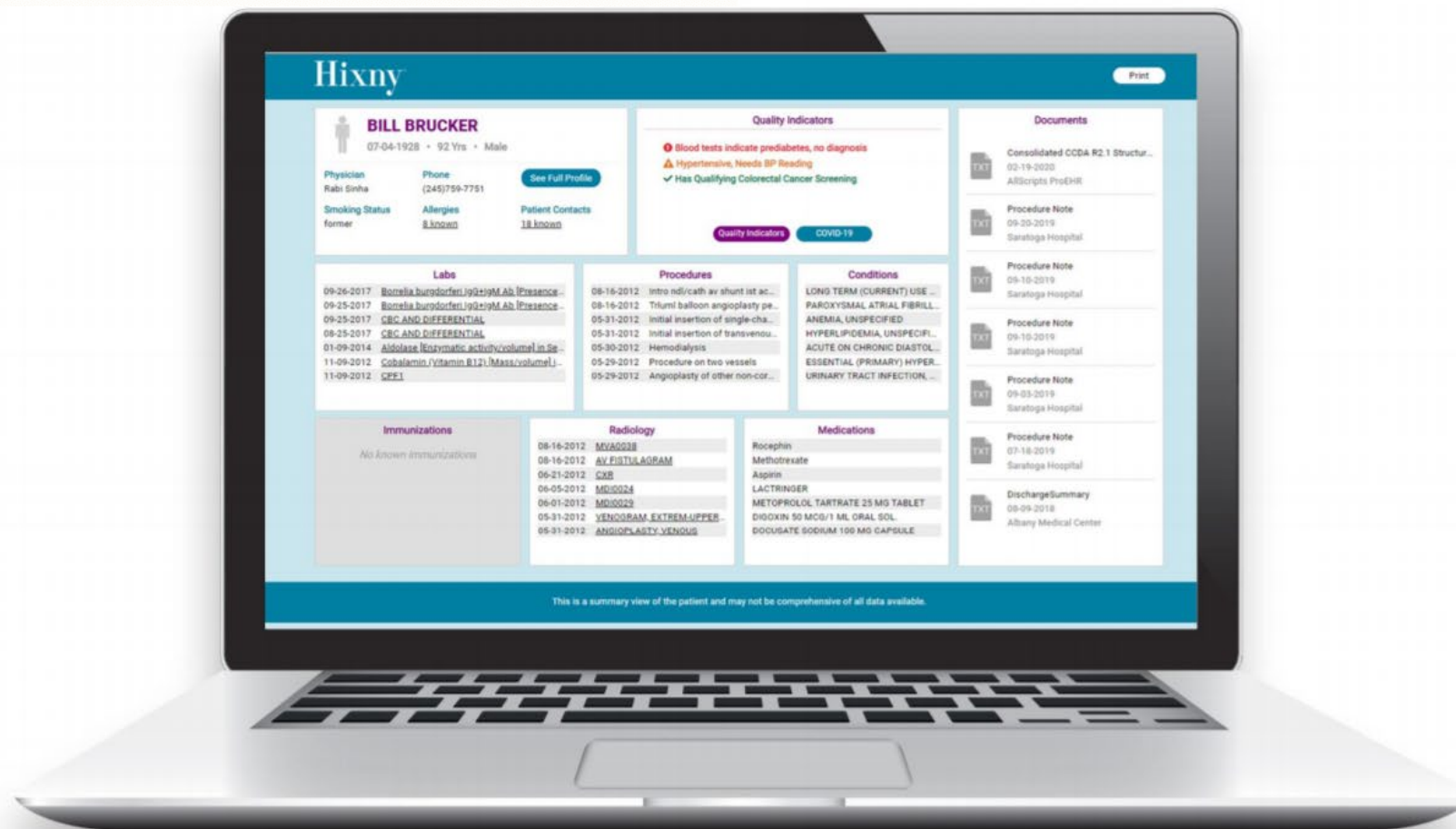
Hixny®



# Patient Record Snapshot



# Introducing . . . .





PATIENT RECORD SNAPSHOT VIEW

HealthShare Management

Administration Portal

Patient Search

View Summary

Send Summary

Download Summary

Messages (408)

Subscriptions

My Account

Reports

eConsent Support

My Account

Switch User/Go To Dashboard

Logout

BRUCKER, BILL

M

07/04/1928

92 Years

FilterClear

Help with Filtering

Patient Record Snapshot

Allergies & Alerts

History

Documents

Lab Results

Pathology Results

Radiology Results

Medications

Vaccinations

Conditions

Procedures

Physical Exams

Encounters

Appointments

Programs

Pharmacy

BILL BRUCKER

07-04-1928 • 92 Yrs • Male

Physician

Rabi Sinha

Phone

(245)759-7751

See Full Profile

Smoking Status

Unknown

Allergies

8 known

Patient Contacts

18 known

Quality Indicators

Needs Colon Cancer Screening

Needs Breast Cancer Screening

Quality Indicators

COVID-19

Documents

TXT

Consolidated CCDA R2.1 Structur...

02-19-2020

AllScripts ProEHR

TXT

Procedure Note

09-20-2019

Saratoga Hospital

TXT

Procedure Note

09-10-2019

Saratoga Hospital

TXT

Procedure Note

09-10-2019

Saratoga Hospital

TXT

Procedure Note

09-03-2019

Saratoga Hospital

TXT

Procedure Note

07-18-2019

Saratoga Hospital

TXT

DischargeSummary

08-09-2018

Albany Medical Center

Labs

09-26-2017

Borrelia burgdorferi IgG+IgM Ab (Presence...

09-25-2017

Borrelia burgdorferi IgG+IgM Ab (Presence...

09-25-2017

CBC AND DIFFERENTIAL

08-25-2017

CBC AND DIFFERENTIAL

01-09-2014

Aldolase (Enzymatic activity/volume) in Se...

11-09-2012

Cobalamin (Vitamin B12) (Mass/volume) L...

11-09-2012

CPE1

Procedures

08-16-2012

Intro ndl/cath av shunt ist ac...

08-16-2012

Trluml balloon angioplasty pe...

05-31-2012

Initial insertion of single cha...

05-31-2012

Initial insertion of transvenou...

05-30-2012

Hemodialysis

05-29-2012

Procedure on two vessels

05-29-2012

Angioplasty of other non-cor...

Conditions

LONG TERM (CURRENT) USE ...

PAROXYSMAL ATRIAL FIBRILL...

ANEMIA, UNSPECIFIED

HYPERLIPIDEMIA, UNSPECIFI...

ACUTE ON CHRONIC DIASTOL...

ESSENTIAL (PRIMARY) HYPER...

URINARY TRACT INFECTION, ...

Immunizations

01-21-2020

Gardasil 9

05-11-2020

Influenza Vaccine, Quadrivale...

05-11-2020

Gardasil 9

01-21-2020

Gardasil 9

05-11-2020

Gardasil 9

01-21-2020

Influenza Vaccine, Quadrivale...

05-11-2020

Influenza Vaccine, Quadrivale...

Radiology

08-16-2012

MVA0038

08-16-2012

AV FISTULAGRAM

06-21-2012

CXR

06-05-2012

MDI0024

06-01-2012

MDI0029

05-31-2012

VENOGRAM, EXTREM-UPPER...

05-31-2012

ANGIOPLASTY, VENOUS

Medications

Rocephin

Methotrexate

Aspirin

LACTRINGER

METOPROLOL TARTRATE 25 MG TABLET

DIGOXIN 50 MCG/1 ML ORAL SOL.

DOCUSATE SODIUM 100 MG CAPSULE

Print

This is a summary view of the patient and may not be comprehensive of all data available.



[illegible]

M

07/04/1928

## 92 Years

➤

Pharmacy

bill br  
07-04-19

## Print

Date \_\_\_\_\_

09-25-2017

Ordering Clinician

ROBERT BENAK

Facility

Albany Medical Center

### Comments

### Result items

Test Item	Quantity	Units	Reference Range	Result Status	Comments	Message Flag	Specimen Collection Date
Unknown	Unknown	Unknown		Unknown			09-25-2017

Attachment

SPECIMEN SENT TO REFERENCE LAB  
FOR WESTERN BLOT CONFIRMATORY TESTING  
RESULTS PHONED, READ BACK DONE  
SPOKE TO L.LUKENS AT 1345 ON 7/27/2017  
MEM

antibodies. Current testing guidelines recommend that all positive results be supplemented by further testing in a standardized western Blot assay.



PRINT PATIENT RECORD SUMMARY FROM SNAPSHOT

HealthShare Management

Administration Portal

Patient Search

brucker, bill

Patient Record Snapshot

Allergies & Alerts

History

Documents

Lab Results

Pathology Results

Radiology Results

Medications

Vaccinations

Conditions

Procedures

Physical Exams

Encounters

Appointments

Programs

Pharmacy

bill brucker

07-04-1928

Physician

Rabi Sinha

Smoking Status

Unknown

Date

08-16-2012

Status

preliminary

Facility

Albany Medical Center

Details

\*\*\*Final Report\*\*\*  
DATE OF EXAM: Aug 16 2012  
AV FISTULAGRAM :  
ANGIOPLASTY, VENOUS :  
CLINICAL HISTORY: Pain and swelling of the right arm.  
MEDICATIONS: Versed and fentanyl for conscious sedation. 2% lidocaine for local anesthesia.  
RESULT:  
PROCEDURE: After informed consent, the patient was placed supine on the interventional table. The right arm was marked, prepped and draped in the usual sterile manner. 2% lidocaine was used as local anesthetic. Using a micropuncture access kit, a 5-French access was obtained through the arterial limb of the AV graft and a hemodialysis venogram was performed.  
FINDINGS: There is moderate stenosis of the junction of the right brachiocephalic vein with superior vena cava. The venous outflow and the remainder of the central vein are patent.  
INTERVENTION: The 5-French dilator was then exchanged over a Bentson wire for a 7-French vascular sheath and a 12 x 40 mm balloon advanced

8/19/2020

Hixny

Hixny

bill brucker

07-04-1928 • 92 Yrs • Male

Physician

Rabi Sinha

Phone

(245)759-7751

Smoking Status

Unknown

Allergies

8 known

Patient Contacts

18 known

MVA0038

Date

08-16-2012

Status

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Albany Medical Center

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INTERVENTION: The 5-French dilator was then exchanged over a Bentson wire for a 7-French vascular sheath and a 12 x 40 mm balloon advanced

8/19/2020

Hixny

Print

2 sheets of paper

Destination

Brother MFC-L2710DV

Pages

All

Copies

1

Layout

Landscape

More settings

Print

Cancel

Filter

Clear

Help with Filtering







# Hixny's Quality Reports



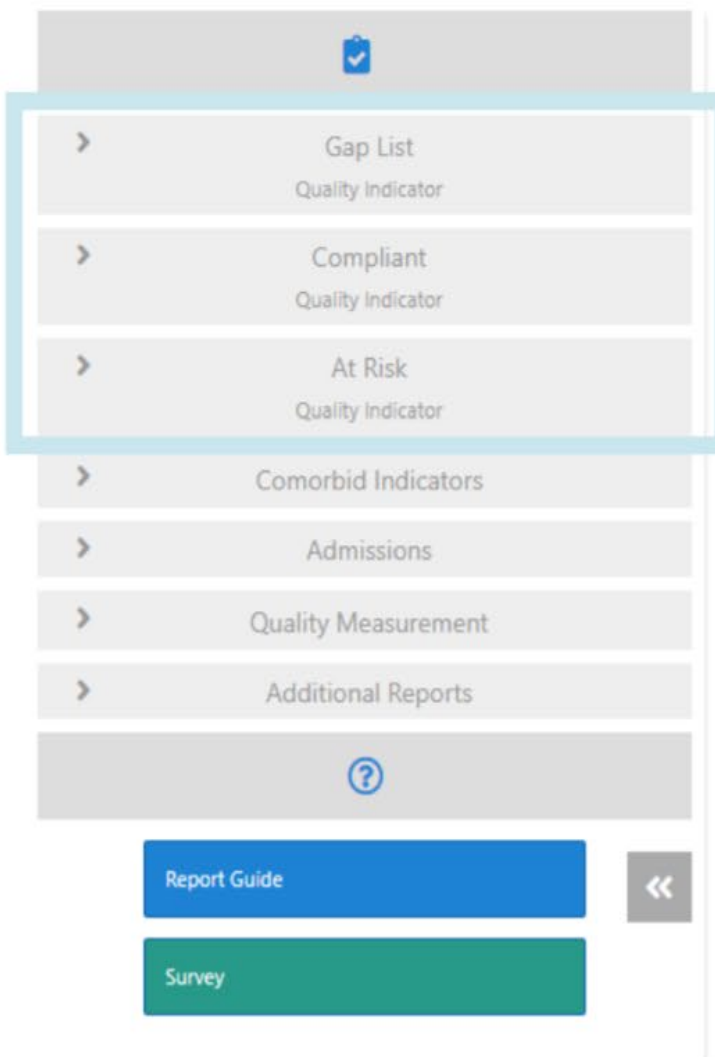
## TWO WAYS TO ACCESS QUALITY REPORTS

### Quality Indicators

- Needs Colon Cancer Screening
- Diabetic, Needs Eye Exam Screening
- ⚠ Diabetic Uncontrolled
- ✓ Hypertensive, BP Controlled
- ✓ Diabetic, HbA1c Tested
- ✓ Has Qualifying Breast Screening
- ✓ Diabetic, Has Nephropathy Screening
- ✓ Has Qualifying Cervical Screening

Quality Indicators

COVID-19







### REPORTS TAB

Click on the tab along the top of the provider portal screen labeled *Reports*.

### FIND REPORTS

Once you are in the reports tab, you will notice a list of seven categories on the left-hand side of the page. Within each of these categories, you will find reports that are populated using the near real-time data available in Hixny.







## QUALITY REPORTS CURRENTLY AVAILABLE

At Risk Quality Indicator	Gap List Quality Indicator	Compliant Quality Indicator
<div>▼ Diabetes</div> <div>Blood Tests Indicate Diabetes, No Diagnosis</div> <div>Diabetic, Poor Control</div> <div>Blood Tests Indicate Prediabetes, No Diagnosis</div> <div>Diabetic, Uncontrolled</div>	<div>Needs Breast Cancer Screening</div> <div>Needs Colorectal Cancer Screening</div> <div>Hypertensive, Needs BP Reading</div> <div>Needs Cervical Cancer Screening</div> <div>Diabetic, Needs Nephropathy Screening</div> <div>Diabetic, Needs Eye Exam Screening</div> <div>Diabetic, Needs Lab Test</div>	<div>Has Qualifying Breast Screening</div> <div>Has Qualifying Colorectal Cancer Screening</div> <div>Has Qualifying Cervical Screening</div> <div>Diabetic, Has Nephropathy Screening</div> <div>Diabetic, Has Eye Exam Screening</div> <div>Hypertensive, BP Controlled</div> <div>Diabetic, HbA1c Tested</div>
<div>▼ Hypertension</div> <div>BP Indicates Hypertension, No Diagnosis</div> <div>Hypertensive, Uncontrolled</div>		

Specific eligibility criteria were designed by Hixny and informed by HEDIS®, CMS and NQF measures.



## PROVIDER PORTAL REPORTS

Hide ↑↓	MRN ↑↓	Name ↑↓	DOB ↑↓	Age ↑↓	Gender ↑↓	Category ↑↓	Result				Last Outpatient Encounter		Insurance	
							Date ↑↓	Value ↑↓	Facility ↑↓	Report (coming soon) ↑↓	Date ↑↓	Facility ↑↓	Plan (coming soon) ↑↓	Member ID (coming soon) ↑↓
	8513620	<a href="#">CONSENTING ELLEN</a>	1966-06-06	54	F	Has Qualifying Breast Screening	2018-05-17 17:00:00	Yes	Albany Medical Center		2019-08-15 10:40:00	Albany Medical Center Faculty Practices		
	8513620	<a href="#">CONSENTING ELLEN</a>	1966-06-06	54	F	Has Qualifying Breast Screening	2018-05-17 17:00:00	Yes	Albany Medical Center		2019-08-15 10:40:00	Albany Medical Center Faculty Practices		
	8513620	<a href="#">CONSENTING ELLEN</a>	1966-06-06	54	F	Has Qualifying Breast Screening	2018-05-17 17:00:00	Yes	Albany Medical Center		2019-08-15 10:40:00	Albany Medical Center Faculty Practices		
	8513620	<a href="#">CONSENTING ELLEN</a>	1966-06-06	54	F	Has Qualifying Breast Screening	2018-05-17 17:00:00	Yes	Albany Medical Center		2019-08-15 10:40:00	Albany Medical Center Faculty Practices		

\*\*\* Only those patients for which you have consent will appear on these reports



# Utilization (IP & ED)

Identify patients that may benefit from care management.

Reports

HealthShare Management

Administration Portal

Patient Search

Portal

>

Gap List

Quality Indicator

>

Compliant

Quality Indicator

>

At Risk

Quality Indicator

>

Comorbid Indicators

>

Admissions

>

Quality Measurement

>

Additional Reports

Report Guide

Survey

Registry Reports

Patient Search

Reports

ReportsQA

My Account

Switch User/Go To Dashboard

Please select a report type using the drop down:

ED Visits Last 6 Months

IP Visits Last 6 Months



## Quality Measurements

- Allow providers to see at a glance what percentage of their patients are meeting recommended standards of care.



Diabetes, HbA1c Poor Control

## Diabetes, Medical Attention for Nephropathy

Diabetes, Eye Exam Performed

## Controlling High Blood Pressure

## Breast Cancer Screening

## Colorectal Cancer Screening

## Cervical Cancer Screening

### Adult BMI Assessment

COPD

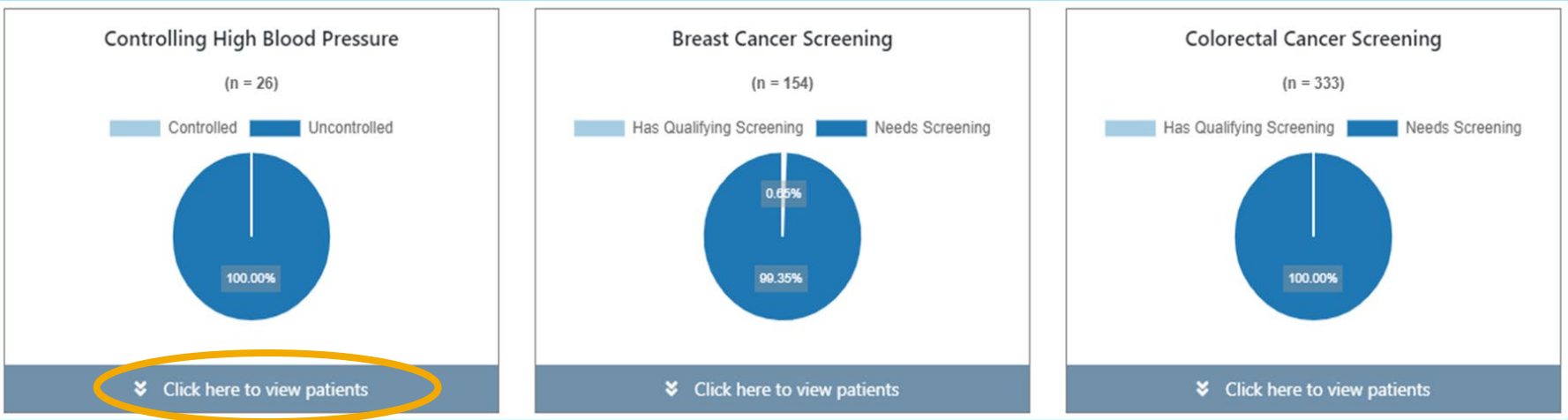
### Childhood Immunization Status

## Statin Therapy for Patients with





Quality Measures



View Hidden Patients (0)

Reporting Period  
End Date: 2020-11-01

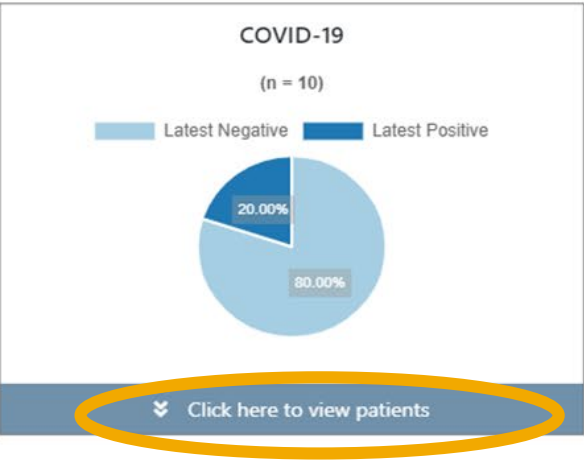
Show 10 entries

Search:

Controlling High Blood Pressure							Last Outpatient Encounter		Blood Pressure Results		
Hide	MRN	Name	DOB	Age	Gender	Needs Screening	Date	Facility	Date	Facility	Results
	2468	Pizza Test	1966-05-14	24	F	Yes			2019-04-17 19:00:00	Nathan Littauer Hospital	141/92 mm[Hg]
	8511716	PICIS TEST	1988-06-07	32	F	No	2019-11-01 08:30:00	Albany Medical Center Faculty Practices	2020-08-12 15:00:00	Albany Medical Center Faculty Practices	110/78 mm[Hg]
	8510276	EDMONE THREEMONE	1951-01-23	69	M	Yes					/



Additional Reports (COVID)

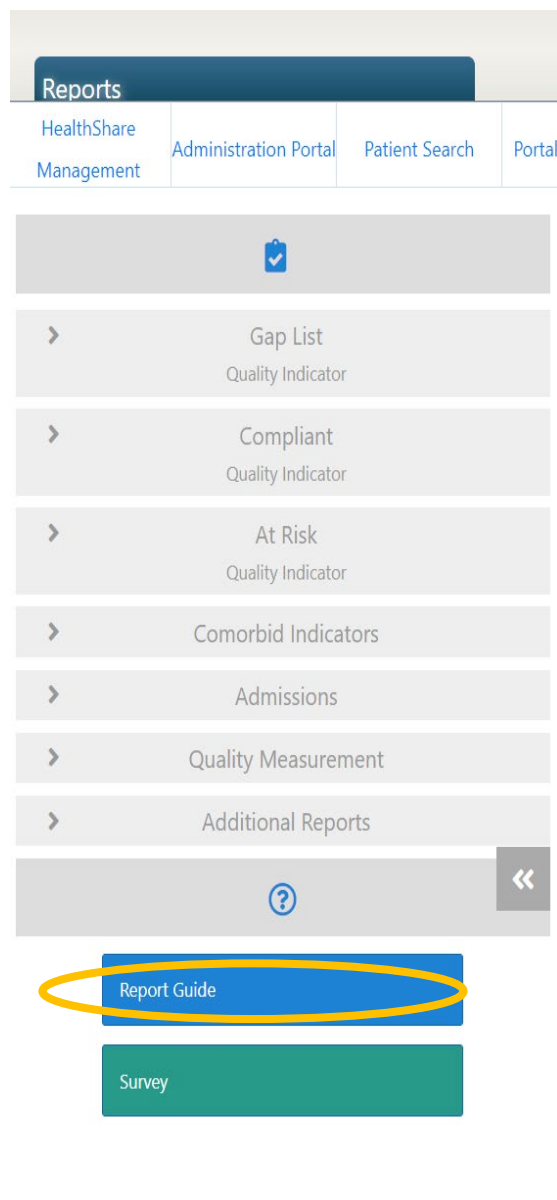


Show 10 entries

Search:

Latest COVID-19 Test									Antibody Testing		
Hide	MRN	Name	DOB	Age	Gender	Date	Facility	Results	Date	Facility	Results
	8514491	<a href="#">TEST66 COVID</a>	1986-06-06	34	M	2020-06-02 12:01:00	Albany Medical Center	Negative			Untested
	8514491	<a href="#">TEST66 COVID</a>	1986-06-06	34	M	2020-06-02 12:01:00	Albany Medical Center	Negative			Untested
	8514491	<a href="#">TEST66 COVID</a>	1986-06-06	34	M	2020-06-02 12:01:00	Albany Medical Center	Negative			Untested





## Eligible Patient Populations

Patients are run through the following criteria to determine inclusion in an eligible population listed below. Specific eligibility criteria were designed by Hixny and informed by HEDIS, CMS and NQF measures.

### Prediabetes and Diabetes<sup>1</sup>:

- Patients cannot have a diagnosis of End Stage Renal Disease (ESRD) or Chronic Kidney Disease (CKD)
- Patients cannot have an active pregnancy diagnosis
- Patients must be in the age range of 18-75 at the time of encounter
- Patients must have at least one eligible encounter within the measurement period (1 year).

### Hypertension:

- Patients cannot have a diagnosis of End Stage Renal Disease (ESRD) or Chronic Kidney Disease (CKD)
- Patients cannot have an active pregnancy diagnosis
- Patients must be in the age range of 18-85 at the time of encounter
- Patients must have at least one eligible encounter within the measurement period (1 year).

### Breast Cancer Screening:

- Patients cannot have had a bilateral mastectomy or a left and right mastectomy
- Patients must be in the age range of 50-74 during the measurement year
- Patients must be female

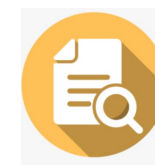
### Colorectal Cancer Screening:

- Patients cannot have had a total colectomy
- Patients cannot have a diagnosis of Colorectal Cancer
- Patients must be in the age range of 50-75 during the measurement year

### Cervical Cancer Screening:

- Patients cannot have had a hysterectomy
- Patients must be in the age range of 21-64 during the measurement year
- Patients must be female

<sup>1</sup> Diabetic, Poor Control, Nephropathy and Eye Exam do not exclude patients with ESRD, CKD or Pregnancy.

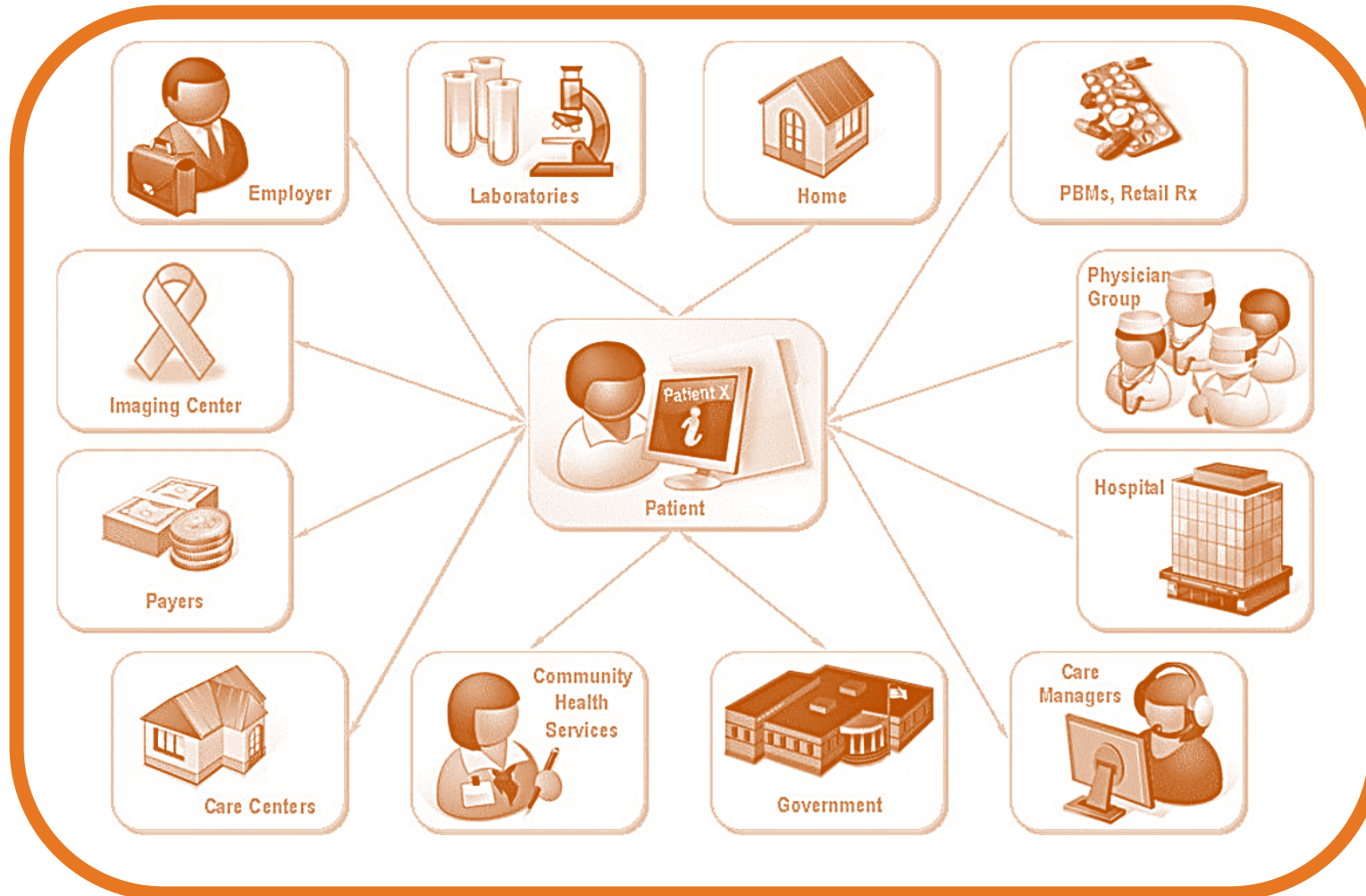




# Importance of Data Quality



## Data Quality & Completeness

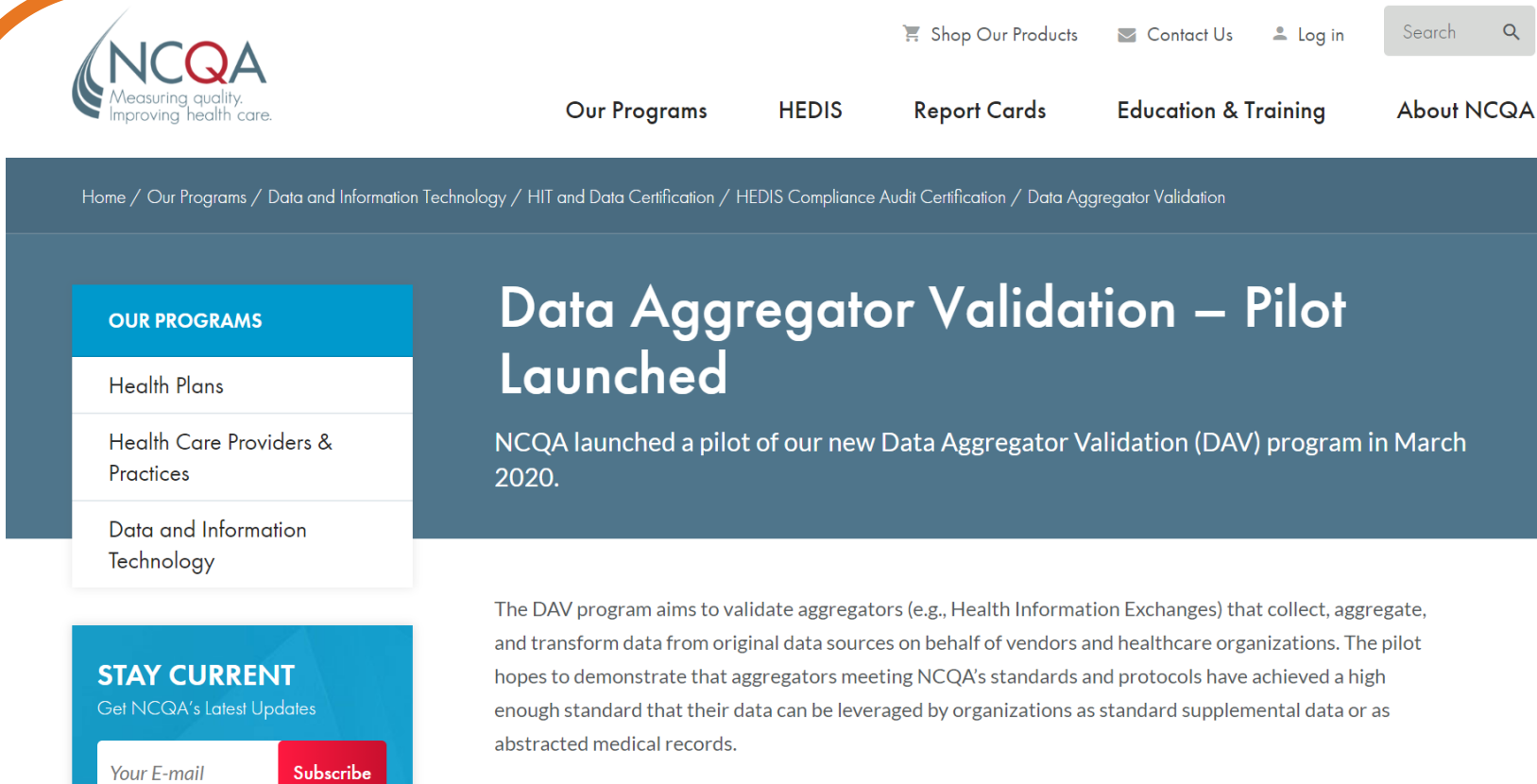


“Poor data quality is amplified by health information exchange if erroneous or incomplete data are allowed to cascade across the healthcare system”

[American Health Information Management Association]



## Using Hixny Data for HEDIS® Reporting



The screenshot shows the NCQA website with the following elements:

- NCQA Logo:** Measuring quality. Improving health care.
- Navigation Links:** Shop Our Products, Contact Us, Log in, Search.
- Menu Items:** Our Programs, HEDIS, Report Cards, Education & Training, About NCQA.
- Breadcrumb:** Home / Our Programs / Data and Information Technology / HIT and Data Certification / HEDIS Compliance Audit Certification / Data Aggregator Validation.
- Section Header:** Data Aggregator Validation – Pilot Launched.
- Text:** NCQA launched a pilot of our new Data Aggregator Validation (DAV) program in March 2020.
- Text:** The DAV program aims to validate aggregators (e.g., Health Information Exchanges) that collect, aggregate, and transform data from original data sources on behalf of vendors and healthcare organizations. The pilot hopes to demonstrate that aggregators meeting NCQA's standards and protocols have achieved a high enough standard that their data can be leveraged by organizations as standard supplemental data or as abstracted medical records.
- OUR PROGRAMS:** Health Plans, Health Care Providers & Practices, Data and Information Technology.
- STAY CURRENT:** Get NCQA's Latest Updates. Includes a field for "Your E-mail" and a "Subscribe" button.

<https://www.ncqa.org/programs/data-and-information-technology/hit-and-data-certification/hedis-compliance-audit-certification/data-aggregator-validation/>



\* **43%** of Hixny's data sources passed with omission

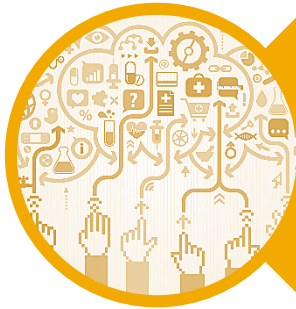


# Improving Data Quality





**EHR at Practice / Hospital**



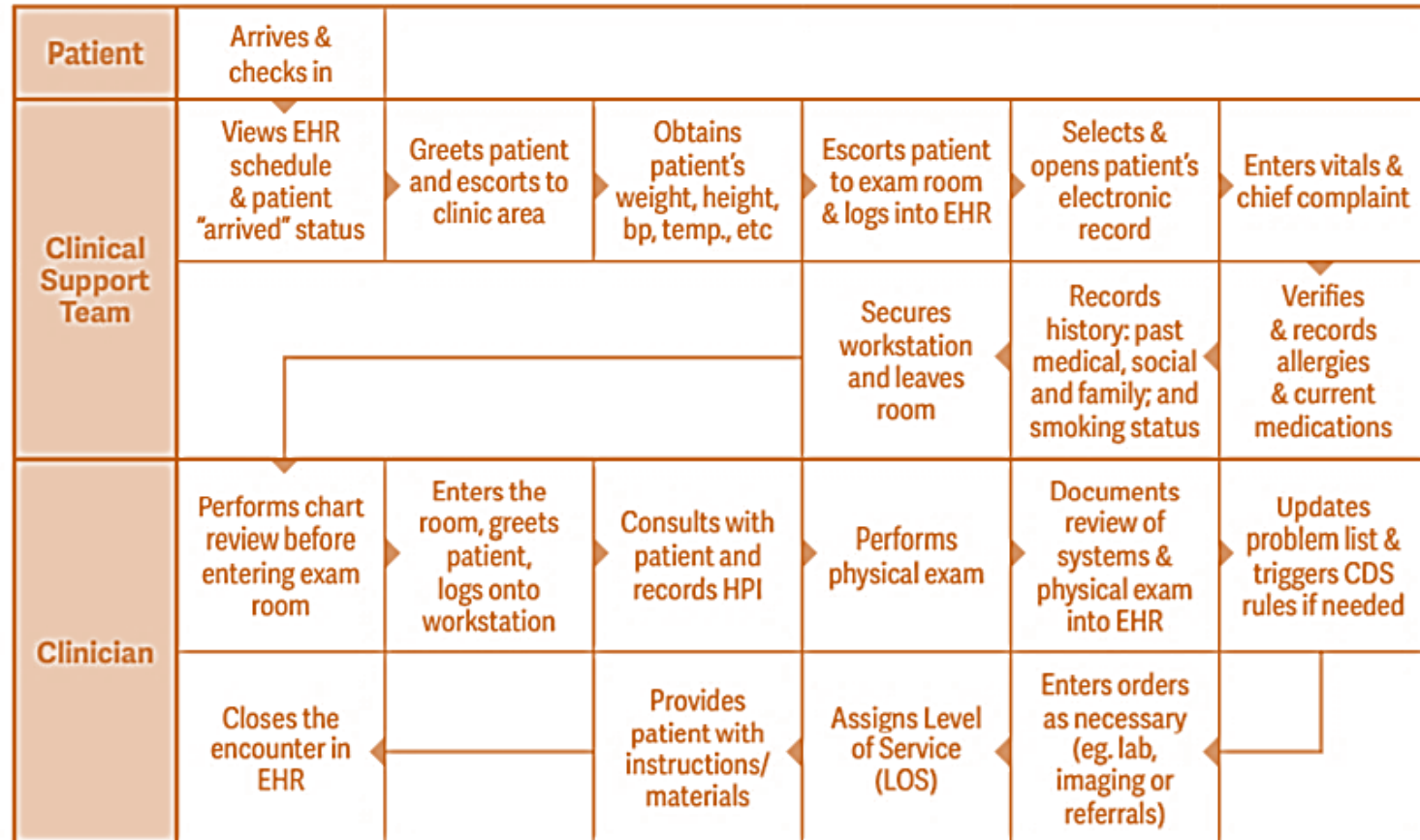
**Inbound Data (CCD or HL7) Sent to Hixny**



**Hixny Portal / Outbound CCD**



## WORKFLOW ASSESSMENT – OFFICE VISIT



Source: HealthIT.gov



# Data Documentation Grid

DATA ELEMENT	HOW/WHERE DOCUMENTED	ASSESSMENT/PLAN FOR IMPROVEMENT
Procedure, Assessment or Encounter Diagnosis (Code/Description)		
Patient Name		
Patient DOB		
Provider Name		
Group/Facility Name		
Date of Service		
Immunization Code/Description		
Lab Test/Result		
Blood Pressure		
Height		
Weight		
BMI		
Smoking Status		
Social History		
Allergies		
Medications		
Other Data Important to Your Practice		



## How You Can Help

**Completely document and accurately record services provided in the EHR system.**

**Cooperate with Hixny's efforts to confirm the data submitted matches that in the EHR system.**

**Work in good faith to modify workflows and make corrections to data to ensure data integrity.**

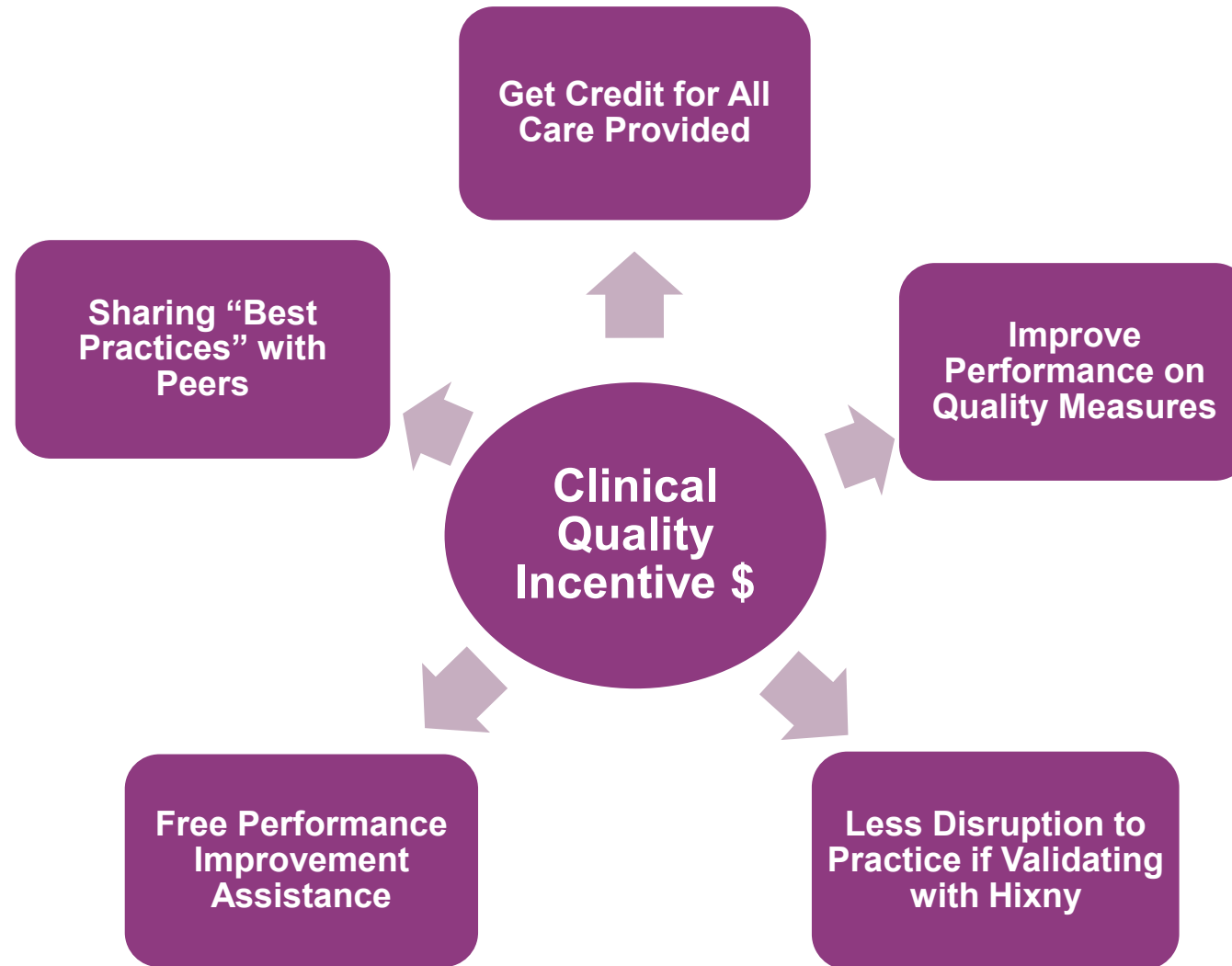
**Keep Hixny informed of EHR upgrades or transitions, and cooperate with impact analysis of these changes.**



# Benefits to Your Practice



## Potential To Earn More Incentive Payments Based on Clinical Quality





# Questions



**Thank You**

Hixny®





- 7 organizations responded;
- 60% have submitted for annual recognition;
- 75% are prepared to submit;
- 37% are in need of assistance;
- If you need assistance, contact us!





- 7 organizations responded;
- 75% are using their EMR to pull quality reports;
- 50% have turned on their MIPS measures.





### Updating 10/18/20

“If others are having issues (unable to provide evidence and seeing previous submission data), please submit a request through [my.ncqa.org](https://my.ncqa.org) with the site name and brief explanation so we can also set it up correctly for your submission. As for the version numbering in Q-PASS, while you are submitting your AR requirements in 2020, the program was developed and built in 2019 (hence the numbering in the system). We’re aware of the confusion this may cause and are in discussion for a resolution.”





This just came from QPASS today, after our meeting 10/15/2020...

- ***Primary contact indicators for the “People and Roles” screen.***
  - Identify the designated primary contacts for your organization and practice sites from one location.
- ***Transforming Pre- and post-check-in snapshot.***
  - Before and after your scheduled review, you can view, print and download a snapshot of the contents of your check in and the outcome of each component post-check-in.  
***Note: Check-in data from virtual reviews on or before July 10, 2020, is not available for this feature.***
- ***The virtual review platform is transitioning to Zoom.***
  - Starting October 19, virtual reviews will be conducted via Zoom.

## Want more information about Q-PASS?

- NCQA staff will host Q-PASS Q&A sessions on [October 22](#) and [November 5](#). [View and register](#) for all NCQA Recognition Education programs.

If you have any questions, contact Customer Support at 888-275-7585 or through “Ask a Question” in your [Q-PASS account](#).





## November Topic: Reporting

- What are the pain points with your EHR? Do you use a report module from your EHR?
- How are you doing with coding?
- How many organization are you using any z-codes for SDoH?
- Are they utilizing CPT 2 codes for HTN, depression screening, and poor A1C control?
- Forever diagnosis?
- Risk coding?





## Additional Resources

- AHI website: <https://ahihealth.org/>
  - \*recordings and slides from meeting are there.
- AHI COVID newsletter – Monday afternoons
- Adirondacks ACO newsletter



# Louann Villani, RN

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# Brenda Stiles, RN

[bstiles@cvph.org](mailto:bstiles@cvph.org)



a·H·I

Adirondack Health Institute

