

What is CQIC?

**Clinical Quality
Improvement Collaborative**

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What is CQIC ?

- The Clinical Quality Improvement Collaborative (CQIC) is a diverse group of medical and surgical specialty sites who have embraced the concept and principles of ongoing clinical quality improvement.
- CQIC sites share a common goal of facilitating and documenting quality healthcare delivery using the EMR.
- The Clinical Quality Improvement Collaborative (CQIC) is hosted by Clinical Content Consultants (CCC)

What CQIC Is and Is Not

CQIC IS NOT !

- Simply new and improved clinical content and software
- A new application or add on from a third party “vendor”
- A catch phrase born out of the HITECH Act, nor a “guarantee” of “Meaningful Use”

CQIC IS

- A Process = Clinical Quality Improvement (CQI)
- Access to EMR users and developers who are the leaders in the field of clinical quality improvement
- Best Practices and Collaboration with fellow CQIC Sites



Two Types of CQIC Member Sites

1. The site has successfully implemented EMR and now wishes to facilitate and document quality healthcare delivery using the EMR.
2. The site intends to implement the EMR and wants to go beyond the basic EMR implementation and wishes to facilitate the culture of documenting quality healthcare delivery using the EMR from day one.

CQIC Members are Leaders in Promoting Quality

- CQIC Member Sites have representatives on a variety of national workgroups and policy making committees:
 - HIMSS, AMDIS, AMIA
 - HITECH/ARRA, PPAHC, & ONC Workgroups
- CQIC Member Sites have successfully obtained quality recognition through:
 - AHRQ: Diabetes Recognition Program, Patient Centered Medical Home (Level 3)
 - PQRI (Physician Quality Reporting Initiative)
 - Private & Public Quality Improvement Grants issued by private insurers and state and federal government programs

CQIC Members are Leaders in Promoting Quality

- CQIC Member Sites have received a variety of quality recognition awards
 - Bridges to Excellence
 - Delmarva Outpatient Quality
 - HIMSS Davies Award



CQIC is NOT just “Meaningful Use” –Much More !

- Most CQIC Member Sites intend to submit for the Medicare and Medicaid Programs; Electronic Health Record Incentive Program commonly referred to as “Meaningful Use”
- CCC has developed enhanced clinical content and workflows to facilitate the process of becoming a “meaningful user” as just one of its many clinical quality improvement (CQI) projects

CQIC Evolution & Future

- “Friends of CCC” – 1/2006 after GE Acquisition of IP
- CQIC Officially Formed 2009
- 14 of 15 Original Invitees Joined CQIC in 2009
- Currently 25 Sites
 - 25th Site Accepted in 12/2010
 - 5 Sites Currently on “Waiting List”
 - In 2011 – plans to explore offering CQIC Membership Beyond Centricity EHR

Current CQIC Member Sites: 1/2011

- AP&S Clinic - Terre Haute, IN
- Central Maine Healthcare - Lewiston, ME
- Internal Medicine Associate-Fargo Fargo, ND
- Kadlec Clinic - Richland, WA
- Marana Health Center - Marana, AZ
- MedStar Health - Washington, DC
- Moses Cone - Greensboro, NC
- Northwest Specialty Clinics (MASS) Springfield, OR
- Rockwood Clinic - Spokane, WA
- Samaritan Health Services - Corvallis, OR
- Suburban Lung Associates - Elk Grove Village, IL
- Sutter Connect - Sacramento, CA
- Women's Healthcare Associates - Portland, OR
- Healthcare for Women Independence, MO
- Penobscot Community Health Care Bangor, ME
- Mid Coast Hospital - Brunswick, ME
- Neighborhood Health Care Network St. Paul, MN
- Lawndale Christian Health Center Chicago, IL
- Regence Health - Amarillo, Tx
- Memorial Herman Family Medicine Residency - Houston, Tx
- QuadMed - Sussex, WI
- Family Physicians Group of Orlando Orlando, FL
- Continuum Health Alliance - Marlton, NJ
- Michigan State University - East Lansing, MI
- Urologic Associates of New England – Rhode Island
- Inova Health System-Fairfax, VA

What comes with membership in the CQIC ?

- Access to:
 - Weekly on-line Education & Training Presentations on a variety of clinical quality improvement topics and process
 - All sessions recorded & available to CQIC members for viewing on the CQIC client portal and for download to CQIC sites administrators
 - See Current & Past Schedule Slides
 - On-line Education & Training Video Modules for CCC Core Forms and Applications (CDSS)

Current CQIC Presentations Schedule

CQIC Meeting Schedule for February 3, 2011 - May 24, 2011

<u>Day</u>	<u>Date</u>	<u>All Times-Eastern</u>	<u>Topic(s)</u>	<u>Who Should Attend</u>
Thursday	2/3/2011	4:00-6:00 PM	Care Plans: Development, Implementation, Reporting Workflows - Part 1	Any provider or team member interested in developing and implementing Care Plans
Friday	2/11/2011	10:00 AM-Noon	PI CME for Diabetes Management	Any provider or team member interested in Performance Improvement CME Roadmap for Diabetes Management CQI
Wednesday	2/16/2011	4:00-6:00 PM	CQIC Q1-2011 CDSS and CQI Project Update	Any provider or team member interested in learning more about the new CDSS protocol prompts and CQI projects for Q1-2011
NO MEETING Week of 2/21/2011 - HIMSS Conference				
Tuesday	3/8/2011	10:00 AM-Noon	OB/GYN CDSS CQI Project Update	Any provider or team member interested in learning more about the new OB/Gyn Specific CDSS protocol prompts and CQI projects for Q1-2011
Thursday	3/10/2011	4:00-6:00 PM	Women's Healthcare: Urinary Incontinence CQI with PI CME Roadmap Update	Any provider or team member interested in the evaluation and management of women with urinary incontinence (Primary Care and Specialty Care).
NO MEETING Week of 3/14/2011 - NOTE: 2 Meetings Week of 3/7/2011				
Wednesday	3/23/2011	4:00-6:00 PM	CPOE A&P Updates: Assess Problems/Duplicate Problems/Charge Capture Workflow Enhancements - Part 1	Any provider or team member interested in learning about the enhancements in the CPOE A&P Form to facilitate assessment of problems (including HCC Assessment Reminders), E&M Charge Capture, and Workflow
Thursday	3/31/2011	4:00-6:00 PM	Medicare Preventive Care Visit Workflow	Any provider or team member interested in learning about the CQI project on Preventive Care Visits for Medicare patients
Wednesday	4/6/2011	10:00 AM-Noon	Hidden Treasures: Untapped CQIC Functionality	Any provider or team member interested in learning how to fully utilize some of the untapped functionality in the CQIC release to facilitate workflows and CQI projects. A review of functions developed during CQI projects that can be utilized using QuickText, list boxes, action buttons, text components, letters, handouts, and voice recognition.
Monday	4/11/2011	4:00-6:00 PM	Care Plans: Development, Implementation, Reporting Workflows - Part 2	Any provider or team member interested in developing and implementing Care Plans
Thursday	4/21/2011	10:00 AM-Noon	CPOE A&P Updates: Assess Problems/Duplicate Problems/Charge Capture Workflow Enhancements - Part 2	Any provider or team member interested in learning about the enhancements in the CPOE A&P Form to facilitate assessment of problems (including HCC Assessment Reminders), E&M Charge Capture (with new E&M Assistor), and improved clinical workflow
NO MEETING Week of 4/25/2011 - CHUG in San Diego (4/27-4/30)				
Monday	5/2/2011	4:00-6:00 PM	Clinical Quality Reporting Update	Any provider or team member interested in enhancements and workflows for data capture, tracking, and reporting for Clinical Quality Measures (CQM's)
Wednesday	5/11/2011	10:00 AM-Noon	CQIC Q2-2011 Update	Any provider or team member interested in learning about the enhancements in the CQIC Q2-2011 Release
Thursday	5/19/2011	4:00-6:00 PM	Women's Healthcare: CQI Project Update	Any provider or team member interested in learning more about the Women's Healthcare CQI projects for Q2-2011
Tuesday	5/24/2011	10:00 AM-Noon	CQIC Q2-2011 CDSS and CQI Project Update	Any provider or team member interested in learning more about the new CDSS protocol prompts and CQI projects for Q2-2011

Past CQIC Presentations

<u>Day</u>	<u>Date</u>	<u>All Times- Eastern</u>	<u>Topic(s)</u>	<u>Who Should Attend</u>
Thursday	9/2/2010	4:00-6:00 PM	Meaningful Use Stage 1 and Performance Improvement CME	Any provider or team member interested in Meaningful Use Certification with or without obtaining Performance Improvement CME credits
Wednesday	9/8/2010	10:00 AM-Noon	Clinical Decision Support: Implementation & Site-Specific Management - Q3 2010 Update	Provider champions, Ambulatory Quality Care Committee members, IT, and database analysts
Tuesday	9/14/2010	4:00-6:00 PM	CQIC Q3-2010 Update: Documenting a Visit	Any provider or team member interested in learning what is new and improved in the CQIC release for Q3-2010
Thursday	9/23/2010	10:00 AM-Noon	Hierarchical Condition Categories (HCCs): Understanding and Implementing	Any provider or team member interested in learning more about Hierarchical Condition Categories (HCCs) and how to implement using the CQIC release CDSS
Monday	10/4/2010	4:00-6:00 PM	OB/Gyn Update: Meaningful Use Reporting and Beyond	Any provider or team member responsible for Prenatal and Postnatal Care
Thursday	10/14/2010	10:00 AM-Noon	Asthma Management Update: Pediatric and Adult	Any provider or team member responsible for managing patient's with Asthma (adult and/or pediatric)
Wednesday	10/20/2010	10:00 AM-Noon	Cardiovascular Management Update	Any provider or team member responsible for managing patient's with Hypertension, CHF, Atrial Fibrillation
Tuesday	10/26/2010	4:00-6:00 PM	Diabetes Management Update	Any provider or team member responsible for managing patient's with Diabetes
Wed-Fri	11/3/2010-1/5/2010		NO CQIC WEBEX MEETING: Annual CCC EMR Healthcare Summit in Palm Desert, CA	
Thursday	11/11/2010	4:00-6:00 PM	Summary Report of the EMR Healthcare Summit Workgroups and Planning for CQIC 2011	Any provider or team member interested in the learning about the various CQIC and EMR workgroups current and future projects and recommendations.
Wednesday	11/17/2010	10:00 AM-Noon	Children's Healthcare Quality Measures: EPSDT, Bright Futures, and CHIPRA: Update	Any provider or team member interested in the latest workflows and recommendations for achieving quality improvement in Pediatrics
Tuesday	11/30/2010	4:00-6:00 PM	CPOE A&P Updates: E&M Assistance, HCC Assessment Reminders, and Workflow Enhancements	Any provider or team member interested in learning about the enhancements in the CPOE A&P Form to facilitate E&M Assistance, HCC Assessment Reminders, and Workflow
Thursday	12/9/2010	4:00-6:00 PM	Preventive Care Management Update	Any provider or team member interested in better evaluating, managing, documenting, order management, and capturing of charges
Wednesday	12/15/2010	10:00 AM-Noon	Meaningful Use Stage 1 Final Countdown	Any provider or team member interested in making sure they are ready for Stage 1 Meaningful Use Certification with or without obtaining Performance Improvement CME credits
Thursday	12/23/2010	10:00 AM-Noon	CQIC 2011 and Beyond: The year in review and looking forward to 2011 +	Any provider or team member interested in learning what is planned for the CQIC in 2011 and beyond

Past CQIC Presentations

<u>Day</u>	<u>Date</u>	<u>All Times-Eastern</u>	<u>Topic(s)</u>	<u>Who Should Attend</u>
Thursday	5/6/2010	10:00 AM-Noon	Diabetes Management Update	Any provider or team member responsible for managing patient's with Diabetes
Wednesday	5/12/2010	4:00-6:00 PM	Anticoagulation Management Update: Form, Functionality, and Workflows	Any provider or team member responsible for managing Warfarin and/or Bridging Therapy
Tuesday	5/18/2010	10:00 AM-Noon	Clinical Decision Support: Implementation & Site-Specific Management	Provider champions, Ambulatory Quality Care Committee members, IT, and database analysts
Thursday	5/27/2010	10:00 AM-Noon	Patient Centered Medical Home: CQIC Initiatives	Any provider or team member responsible for establishing, implementing, or maintaining the principles of Patient Centered Medical Home
Monday	6/7/2010	4:00-6:00 PM	OB/Gyn Update: Delivery Notes, Postnatal Visits, and High Risk OB	Any provider or team member responsible for Prenatal and Postnatal Care
Thursday	6/17/2010	4:00-6:00 PM	Implementing the NHLBI/NAEP Asthma Guidelines & the Performance Improvement CME Process	Any provider or team member responsible for managing patient's with Asthma (adult and/or pediatric)
Thursday	6/24/2010	10:00 AM-Noon	Cardiovascular Management Update: JNC VIII?	Any provider or team member responsible for managing patient's with Hypertension, CHF, Atrial Fibrillation
Tuesday	6/29/2010	10:00 AM-Noon	Children's Healthcare Quality Measures: EPSDT, Bright Futures, and CHIPRA: Update	Any provider or team member responsible for Pediatric Care of Children
Monday	7/12/2010	4:00-6:00 PM	Women's Healthcare Update: Breast Cancer and Cervical Cancer and OB	Any provider or team member responsible for Women's Health
Tuesday	7/20/2010	10:00 AM-Noon	Meaningful Use Update: Final Rules Checklist	Any provider or team member interested in the latest "final ruling" for Meaningful Use
Wednesday	7/28/2010	4:00-6:00 PM	Family History, Genetic Risk Management, and Genomics Update	Any provider or team member interested in managing "at risk" patient's due to genetics/genomics or pertinent family history
Thursday	8/5/2010	4:00-6:00 PM	Evaluation & Management of the Patient Visit: Updated CPOE A&P, Test Management, and Integrated Workflows	Any provider or team member interested in better evaluating, managing, documenting, order management, and capturing of charges

What comes with membership in the CQIC ?

- Access to:
 - Best Practices & Clinical Workflows designed and successfully implemented by CCC and CQIC member sites
 - On-line individual site meetings with your sites clinical quality team to facilitate planning, implementation, education, training, and reporting needs specific to your site

What comes with membership in the CQIC ?

- Access to:
 - The CQIC release of clinical content and CCC Core forms, applications, and clinical decision support system (CDSS)
 - Support (technical, clinical, and implementation) of the CQIC release of clinical content and CCC Core forms, applications, and clinical decision support system (CDSS)

What comes with membership in the CQIC ?

- Access to:
 - The CCC consulting team for supplemental planning, implementation, education, training, and reporting needs specific to your site
 - For a variety of practical reasons, CCC has chosen to only offer access to its consulting services to members of the CQIC

We Know that Quality Improvement is Closely Correlated with Skilled EHR Use

- Score 1 point for each quality measure > 50%ile
- CDSS Use Definitions
 - Heavy Use = 75% +
 - Moderate Use = ~ 50%
 - Sometime Use = ~ 25%
 - Rare Use = < 25%

Correlation Between Use of Protocols and Quality Metrics

Quality Score	4	3	2	1	0
Heavy – Consistent Use of Protocols	71%	29%	0%	0%	0%
Moderate Use of Protocols	57%	14%	29%	0%	0%
Occasional Use of Protocols	14%	14%	29%	43%	0%
Zero – Rare Use of Protocols	6%	9%	15%	15%	55%

Correlation Between Use of CDSS Protocols and Quality Metrics

Quality Score	4	3	2	1	0
Heavy – Consistent Use of Protocols	71%	29%	0%	0%	0%
Moderate Use of Protocols	57%	14%	29%	0%	0%
Occasional Use of Protocols	14%	14%	29%	43%	0%
Zero – Rare Use of Protocols	6%	9%	15%	15%	55%

Not Cause & Effect, BUT, Definite Correlation Between Use of CDSS Prompts & Quality Measures

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CQIC Projects: Past, Present, & Future (partial list)

Anticoagulation Management: based on ACCP 8 Guidelines

Asthma Management: based on NHLBI/NAEP Guidelines

Bariatric Medicine & Surgery with BOLD Reporting Integration

Cancer Staging & Management: based on AJCC/FIGO Guidelines

Cardiovascular Management Risk Reduction and Evidence-Based Guidelines: based on ACC/AHA/USPSTF

Cervical Cancer Screening & Management: based on ACOG/American Society for Colposcopy and Cervical Pathology (ASCCP) Evidence-Based Bethesda Guidelines

CHF Management: based on AHA/ACC Guidelines

CKD Management: based on NKF KODQI Guidelines

COPD Management: based on ACP/ATS/GOLD Guidelines

Diabetes Management: based on ADA Standards of Medical Care in Diabetes

Stage 1 Meaningful Use: Evidence-Based Clinical Quality Measures and Improvement Initiatives

Women's Healthcare: High Risk OB Identification and Management Using Actionable Point of Care Evidence-Based Clinical Decision Support

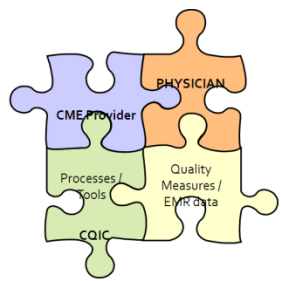
Women's Healthcare: Urinary Incontinence-Risk Factor Reduction, Early Identification, and Management

Performance Improvement CME

- Clinical Content Consultants has partnered with Memorial Hermann's Department of Continuing Medical Education
 - Performance Improvement CME Modules
 - Earn up to 20 Category 1 AMA Credits
 - 20 Prescribed Credits with AAFP

CQIC

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CQIC Performance Improvement CME Modules

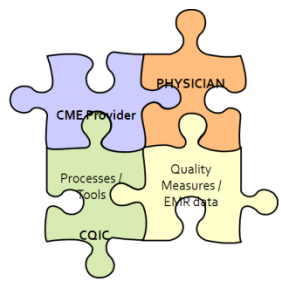
CURRENT

- Asthma PI CME
 - 6/2010
- Meaningful Use PI CME
 - 9/2010
- Cardiovascular Management PI CME
 - 1/2011

- Diabetes Management PI CME
 - 2/2011



- Female Urinary Incontinence PI CME
 - 2/2011



What is the cost and benefit of membership in the CQIC ?

- Currently the cost for CQIC membership is \$2,100/month independent of the size of the group or the organization
*** "Scholarships"
- All CQIC members receive the same benefits and access to clinical content and CCC hours independent of the size of the group or organization
- Sites are invoiced monthly and membership can be cancelled at anytime
- *** ***"Scholarships" for small groups available***
 - *(see upcoming slide)*

What is the cost and benefit of membership in the CQIC ?

- Why \$2,100/month?
 - Actual monthly overhead and expense costs to CCC to enroll and support a CQIC member site
 - For larger organizations, typically falls under the required dollar amount to receive special budget approval
 - For smaller sites, the cost annualizes to a fraction of the amount most insurance companies or state and federal agencies allocate for various quality improvement projects - ROI

What is the cost and benefit of membership in the CQIC ?

- Smaller Groups typically fund their membership in CQIC from a variety of available (potential) resources:
 - Quality Incentive Bonuses from Insurers
 - PQRI
 - Potential HITECH/ARRA Incentives
 - Quality Research Grants (Insurers, State/Federal)
- CCC and CQIC Member Sites act as resources for current and future quality projects

Smaller Groups “Scholarship” Program

- For Smaller Groups who exhibit the qualities and enthusiasm to be a good CQIC member, but due to financial constraints cannot budget for full membership, CCC does offer a “Scholarship” Program
- “Scholarship” = discounted CQIC monthly membership of \$1,050/month (50% reduction)
- Agreement by “Scholarship” Sites to:
 - Participate in current CQI projects & Share/Present CQI Outcomes
 - Submit improved outcomes for Quality Incentives
 - When Quality Incentives become available, become non-Scholarship (or reduced scholarship) members so that additional “Scholarships” can be made available to others

Return on Investment (ROI):

- Most sites ask about specific ROI for CQIC membership.
- Until recently, it was extremely difficult to quantify financial ROI for quality.
- However, with PQRI, HITECH/ARRA, and various Incentive Bonuses and/or Grants already issued or expected to current CQIC members, the cost of CQIC membership is a fraction of current & future quality incentives.

What is the benefit of membership in the CQIC ?

- The CQIC is not simply about certification as a “meaningful user”, PCMH, or PQRI.
- It is a culture of continuing clinical quality improvement processes that goes far beyond the current or future incentive programs that may or may not be available.
- CQIC members define and direct the future of quality healthcare and outcomes not simply try and adhere to various policies and measures.

CQIC is NOT for Everyone !

- Not every site is ready for CQIC !
- If you are simply interested in the latest release of clinical content
- are looking for a quick and easy implementation, OR
- just want clinical content for a particular specialty that isn't generally available
- then the CQIC is NOT for you.

What if our site is interested in becoming a CQIC Member Site?

- Currently membership in CQIC is restricted to users of the Centricity EMR
 - Will be exploring expansion to other EMR users after 1/2011
- Must have a current software license to use:
 - Centricity EMR
 - and the CCCQE™ forms (CCC clinical content)

What if our site is interested in becoming a CQIC Member Site?

- Membership into CQIC is by invitation only and requires referral and sponsorship by at least one current CQIC Member Site.
- The number of CQIC Sites is intentionally limited to allow the CCC team the required hours of personal guidance and leadership required to make your site successful.

What if our site is interested in becoming a CQIC Member Site?

- If you feel your group is ready to embrace the principles of clinical quality improvement (CQI) and your group is truly interested in becoming a member of the Clinical Quality Improvement Collaborative (CQIC), then contact:
 - John Janas MD at:
 - jjanas@clinicalcontent.com