

THE INDIAN HEALTH SERVICE

Viewing MU performance in iCare v.2.2



Superior Health Information Management
Now and for the Future

5th Annual National Medical
Providers' Best Practices and GPRA
Measures Conference

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iCare

- A population management tool
- Facilitates review of clinical performance measures
- Improve population health and public health

Meaningful Use Tab in v.2.2

- New tab added to iCare's Main View
- Eligible Providers view their MU performance measures and clinical quality measures on patients seen by provider during a 90 day or 12 month reporting period
- Eligible Hospitals/CAHs view their MU performance measures on patients admitted to hospital, CAH's inpatient, or ER during a 90 day or 12 month reporting period

Providers Performance Sub-Tab

- Displays the 15 Stage 1 Core Provider Performance Measures, rates, and attestations
 - Provider needs to meet **ALL**
- Displays the 10 Stage 1 Menu Set Performance Measures
 - Provider needs to meet **5** during reporting period
 - At least **One** must be a Public Health Measure
- Hover help displays each measure's definition

Providers Performance Sub-Tab

RPMS iCare - KELSEY, JOANNA - 2010 DEMO HOSPITAL - CDAB - 161.223.92.251

File Edit View Tools Window Help Quick Patient Search:

Panel List Flag List Community Alerts Nat'l Measures CMET **Meaningful Use**

Providers Performance Hospitals/CAHs Performance Providers CQ

Tips
Insert Providers Performance tips here later...

Time Frame: 90 Days

Meaningful Use data current as of: May 05, 2011 11:18 AM
User types included: Nurse Practitioner, Physician, Physician Assistant

Provider	Type	CPOE Medications		Drug-Drug & Drug-Allergy Checks		Demographics		Problem List		Medication List		e-Prescribing		Medication	
		Current	Previous	Current	Previous	Current	Previous	Current	Previous	Current	Previous	Current	Previous	Current	
NPROVIDER, THOMAS ERSKINE	Physician	Excluded	Excluded	N/A	N/A	0%	0%							Excluded	0%
MPROVIDER, TEST T	Physician	Excluded	Excluded	N/A	N/A	0%	0%							Excluded	0%
SHPROVIDER, DAVID	Physician	Excluded	Excluded	N/A	N/A	0%	0%							Excluded	0%
JCPROVIDER, ALLEN	Physician	Excluded	Excluded	N/A	N/A	0%	0%							Excluded	0%
PBPROVIDER, WALANIA S	Physician	Excluded	Excluded	N/A	N/A	0%	0%	0%	0%	0%	0%	Excluded	Excluded	0%	0%
BVPROVIDER, LEE V	Physician Assistant	Excluded	Excluded	N/A	N/A	0%	0%	0%	0%	0%	0%	Excluded	Excluded	0%	0%
RKPROVIDER, VALERIA A	Physician	Excluded	Excluded	N/A	N/A	0%	0%	0%	0%	0%	0%	Excluded	Excluded	0%	0%
LPPROVIDER, MICHAEL	Nurse Practitioner	Excluded	Excluded	N/A	N/A	0%	0%	0%	0%	0%	0%	Excluded	Excluded	0%	0%
EYPROVIDER, ROSEMARY L	Nurse Practitioner	Excluded	Excluded	N/A	N/A	0%	0%	0%	0%	0%	0%	Excluded	Excluded	0%	0%
NAPROVIDER, W JUDSON	Physician	Excluded	Excluded	N/A	N/A	0%	0%	0%	0%	0%	0%	Excluded	Excluded	0%	0%
DMPROVIDER, JEFFREY PAUL	Physician Assistant	Excluded	Excluded	N/A	N/A	0%	0%	0%	0%	0%	0%	Excluded	Excluded	0%	0%
UAPROVIDER, JAMES H	Physician	Excluded	Excluded	N/A	N/A	0%	0%	0%	0%	0%	0%	Excluded	Excluded	0%	0%
WVPROVIDER, TIM O	Physician	Excluded	Excluded	N/A	N/A	0%	0%	0%	0%	0%	0%	Excluded	Excluded	0%	0%
IFPROVIDER, LORI E	Physician	Excluded	Excluded	N/A	N/A	0%	0%	0%	0%	0%	0%	Excluded	Excluded	0%	0%
KUPROVIDER, A J	Physician	Excluded	Excluded	N/A	N/A	0%	0%	0%	0%	0%	0%	Excluded	Excluded	0%	0%
BWPROVIDER, JOYCE	Physician	Excluded	Excluded	N/A	N/A	0%	0%	0%	0%	0%	0%	Excluded	Excluded	0%	0%
ENPROVIDER, ROBIN E	Physician Assistant	Excluded	Excluded	N/A	N/A	0%	0%	0%	0%	0%	0%	Excluded	Excluded	0%	0%

Demographics
Percentage of unique patients seen by the provider during the reporting period who have all the demographic elements recorded. (Preferred Language; Sex; Race; Ethnicity; Date of Birth)

Ready. Selected Rows: 1 Visible Rows: 24 Total Rows: 24

Hospital/CAH Performance Sub-Tab

- Displays the 14 Stage 1 Hospital/CAH Performance Measures
- Displays Stage 1 Goals and Rates for each performance measure during reporting period

Hospital/CAH Performance Sub-Tab

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File Edit View Tools Window Help Quick Patient Search:

Panel List Flag List Community Alerts Nat'l Measures CMET **Meaningful Use**

Providers Performance **Hospitals/CAHs Performance** Providers CQ

Tips
Insert Hospitals/CAHs Performance tips here later.

Time Frame: 1 year

Meaningful Use data current as of: May 12, 2011 10:45 AM
Active Patients: 26613

Objective	Measure Set	Stage 1 Goal	Current			Previous		
			# Patients in Denominator	# Patients in Numerator	% Met	# Patients in Denominator	# Patients in Numerator	% Met
Advance Directives	Menu Set	>50%	4		0%	110	34	31%
CPOE Medications	Core	>30%	1	1	100%	4863	4453	92%
Demographics	Core	>50%	20	1	5%	6666	2	0%
Electronic Copy of Discharge Instructions	Core	>50%			Excluded			Excluded
Electronic Copy of Health Information	Core	>50%			Excluded			Excluded
Lab Results into EHR	Menu Set	>40%	0	0	0%	230416	189281	82%
Medication Allergy List	Core	>80%	20	5	25%	6666	4695	70%
Medication List	Core	>80%	20	7	35%	6666	5351	80%
Medication Reconciliation	Menu Set	>50%	2	0	0%	54	2	4%
Patient-Specific Education	Menu Set	>10%	20	2	10%	6666	1744	26%
Problem List	Core	>80%	20	8	40%	6666	5380	81%
Smoking Status	Core	>50%	16	7	44%	5152	5051	98%
Summary of Care	Menu Set	>50%	1	1	100%	405		0%
Vital Signs	Core	>50%	17	3	18%	6370	5436	85%

Selected Rows: 1 | Visible Rows: 14 | Total Rows: 14

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Providers CQ Tab

- Measures for All patients
- Software requirements
 - BJPC 2 Patch 6 - Provider and Hospital/CAH Performance Measures Sub-Tab
 - CRS 11 Patch 2 - Provider Clinical Quality Measures Tab
- In Stage 1 providers must report on:
 - 3 Core CQ Measures
 - 3 Alternate Core Measures
- Hover help displays each measure's definition
- No performance targets

Providers CQ Tab

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File Edit View Tools Window Help Quick Patient Search:

Panel List Flag List Community Alerts Nat'l Measures ~~CME~~ **Meaningful Use**

Providers Performance Hospitals/CAHs Performance **Providers CQ**

Tips
Insert Providers CQ tips here later...

Time Frame: 1 year

Meaningful Use data current as of: May 08, 2011 01:26 PM

Provider	Adult Weight Screening and Follow Up: 65+		Hypertension: Blood Pressure Management		Preventive Care and Screening Measure Pair: Tobacco Use Assessment		Preventive Care and Screening Measure Pair: Tobacco Cessation Intervention		Adult Weight Screening and Follow Up: 18 - 64		Weight Assessment and Counseling for Children and Adolescents: BMI		Weight Assessment and Counseling for Children and Adolescents: Nutrition	
	Current	Previous	Current	Previous	Current	Previous	Current	Previous	Current	Previous	Current	Previous	Current	Previous
PPROVIDER, MARK F	0%	63%	0%	97%	0%	88%	0%	0%						
NPROVIDER, THOMAS ERSKINE	0%	33%	0%	0%	0%	0%	0%	0%						
MPROVIDER, TEST T	0%	34%	0%	100%	0%	100%	0%	0%						
HAPROVIDER, DAVID P	0%	100%	0%	0%	0%	0%	0%	0%						
SHPROVIDER, DAVID	0%	86%	0%	0%	0%	0%	0%	0%						
JCPCROVIDER, ALLEN	0%	43%	0%	97%	0%	87%	0%	0%						
PBPROVIDER, WALANIA S	0%	56%	0%	89%	0%	76%	0%	0%	0%	26%	0%	0%	0%	0%
BVPROVIDER, LEE V	0%	80%	0%	88%	0%	90%	0%	0%	0%	36%	0%	0%	0%	0%
RKPROVIDER, VALERIA A	0%	48%	0%	97%	0%	86%	0%	0%	0%	27%	0%	0%	0%	0%
GJPROVIDER, MATTHEW W	0%	54%	0%	97%	0%	90%	0%	0%	0%	28%	0%	0%	0%	0%
LPPROVIDER, MICHAEL	0%	41%	0%	92%	0%	76%	0%	0%	0%	21%	0%	0%	0%	0%
BUPROVIDER, MICHAEL S	0%	51%	0%	92%	0%	96%	0%	0%	0%	25%	0%	0%	0%	0%
QBPROVIDER, MARINA	0%	58%	0%	99%	0%	91%	0%	0%	0%	28%	0%	0%	0%	0%
UEPROVIDER, LORI LYNN	0%	49%	0%	61%	0%	86%	0%	0%	0%	25%	0%	0%	0%	0%
DVPROVIDER, TIMOTHY G	0%	61%	0%	N/A	0%	100%	0%	0%	0%	34%	0%	0%	0%	0%
EYPROVIDER, ROSEMARY L	0%	53%	0%	97%	0%	95%	0%	0%	0%	38%	0%	0%	0%	0%
RJPROVIDER, BARBARA K	0%	41%	0%	100%	0%	100%	0%	0%	0%	24%	0%	0%	0%	0%
NAPROVIDER, W JUDSON	0%	50%	0%	0%	0%	0%	0%	0%	0%	24%	0%	0%	0%	0%
EOPROVIDER, UNKNOWN VIKING	0%	42%	0%	99%	0%	87%	0%	0%	0%	32%	0%	0%	0%	0%

Preventive Care and Screening Measure Pair: Tobacco Cessation Intervention

Patients ages 50 years and older at the beginning of the reporting period who have been seen at least twice in the outpatient setting or once in a preventive medicine/nursing facility setting during the reporting period who have received an influenza immunization during the flu season (September through February). (See Nat'l Measures Glossary for detailed definitions).

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v.2.3

- CQ measures for Hospitals/CAHs/ER

THE INDIAN HEALTH SERVICE

Viewing MU performance in iCare v.2.1



Superior Health Information Management
Now and for the Future

Menu Set MU Objective

“Generate lists of patients by specific conditions to use for quality improvement, reduction of disparities, research, or outreach.”

- 42 CFR Part 495.6,(e)(3)(i)

Core MU Objective

“Record all of the following demographics:

- Preferred language
- Gender
- Race
- Ethnicity
- Date of birth.”

- 42 CFR Part 495.6,(d)(7)(i)

Core MU Objective

“Maintain an up-to-date problem list of current and active diagnoses.”

- 42 CFR Part 495.6,(d)(3)(i)

Core MU Objective

“Maintain an active medication list.”

- *42 CFR Part 495.6,(d)(5)(i)*

Core MU Objective

“Maintain an active medication allergy list.”
- 42 CFR Part 495.6,(d)(6)(i)

Core MU Objective

“Record and chart changes in the following vital signs: Height, weight, and blood pressure and calculate and display body mass index (BMI) for ages 2 and older, plot and display growth charts for children 2-20 years, including BMI.”

- 42 CFR Part 495.6,(d)(8)(i)

Core MU Objective

“Record smoking status for patients 13 years or older.”

- 42 CFR Part 495.6,(d)(9)(i)

Core MU Objective

“Implement one clinical decision support rule relevant to specialty or high clinical priority along with the ability to track compliance with that rule.”

- 42 CFR Part 495.6,(d)(11)(i)

Menu Set MU Objective

“Use certified EHR technology to identify patient-specific education resources and provide those resources to the patient if appropriate.”

- 42 CFR Part 495.6,(e)(6)(i)

Menu Set MU Objective

“Incorporate clinical lab-test results into certified EHR technology as structured data.”

- 42 CFR Part 495.6,(e)(2)(i)

QUESTIONS