

Quality Improvement and the Medicare Health Plan

Tri-Regional Plan Compliance
Conference

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Lisa McAdams, MD, MPH



Objectives

- Review Quality Improvement Project Requirements for Plans
- Improve knowledge of general principles of quality improvement
- Understand what makes a good Quality Improvement Project

Why Talk About This?

Focus on Quality

- President Obama
- Congress
- Department of Health and Human Services
- CMS, including nominee for Administrator, Don Berwick

Bottom Line: Quality Improvement is not likely to disappear from health care. It is becoming a critical component of not only how we approach healthcare, but also how we pay for healthcare

Regulatory Landscape

QI Regs—Medicare Advantage

42 CFR

§ 422.152 Quality Improvement Program

(a) General rule. Each MA organization that offers one or more MA Plans must have, for each of those Plans, an **ongoing quality improvement program**. As part of its ongoing quality improvement program, a Plan must—

QI Regs—Medicare Advantage

- (1) Have a chronic care improvement program;
- (2) Conduct quality improvement projects that can be expected to have a favorable effect on health outcomes and enrollee satisfaction; and
- (3) Encourage its providers to participate in CMS and HHS quality improvement initiatives

QI Regs—Medicare Advantage

- (d) Quality improvement projects
 - (1) Focus on specified clinical and nonclinical areas and involve the following:
 - (i) **Measurement** of performance
 - (ii) System **interventions**
 - (iii) **Improving performance**
 - (iv) Systematic and periodic **follow-up** on the effect of the interventions

QI Regs—Medicare Advantage

(d) Quality improvement projects

(2) For each project, assess performance using quality indicators that are—

(i) Objective, clearly and unambiguously defined, and based on current clinical knowledge or health services research; and

(ii) Outcomes-based, or valid proxies of those outcomes

QI Regs—Medicare Advantage

- (d) Quality improvement projects
 - (3) Performance assessment on the indicators is based on systematic, ongoing collection and analysis of valid and reliable data
 - (4) Interventions must achieve demonstrable improvement
 - (5) The organization must report the status and results of each project to CMS

Fundamentals of Quality Improvement

Quality Improvement

Doing what we do better

Critical Concepts

- Embrace Change
- Address Processes and Systems
- Use Teamwork

Change

“Many people hate any change that doesn’ t jingle in
their pockets”
—*Anonymous*

Change

- Why not harness change for the better—for improvement?
- EMBRACE CHANGE!

Processes and Systems

- Process: A set of interrelated work activities that produce a set of specific outputs
- System: A set of interrelated or interacting processes

Processes and Systems

How we perform the work we do

Teamwork

“No one can whistle a symphony. It takes an orchestra to play it”

— *Anonymous*

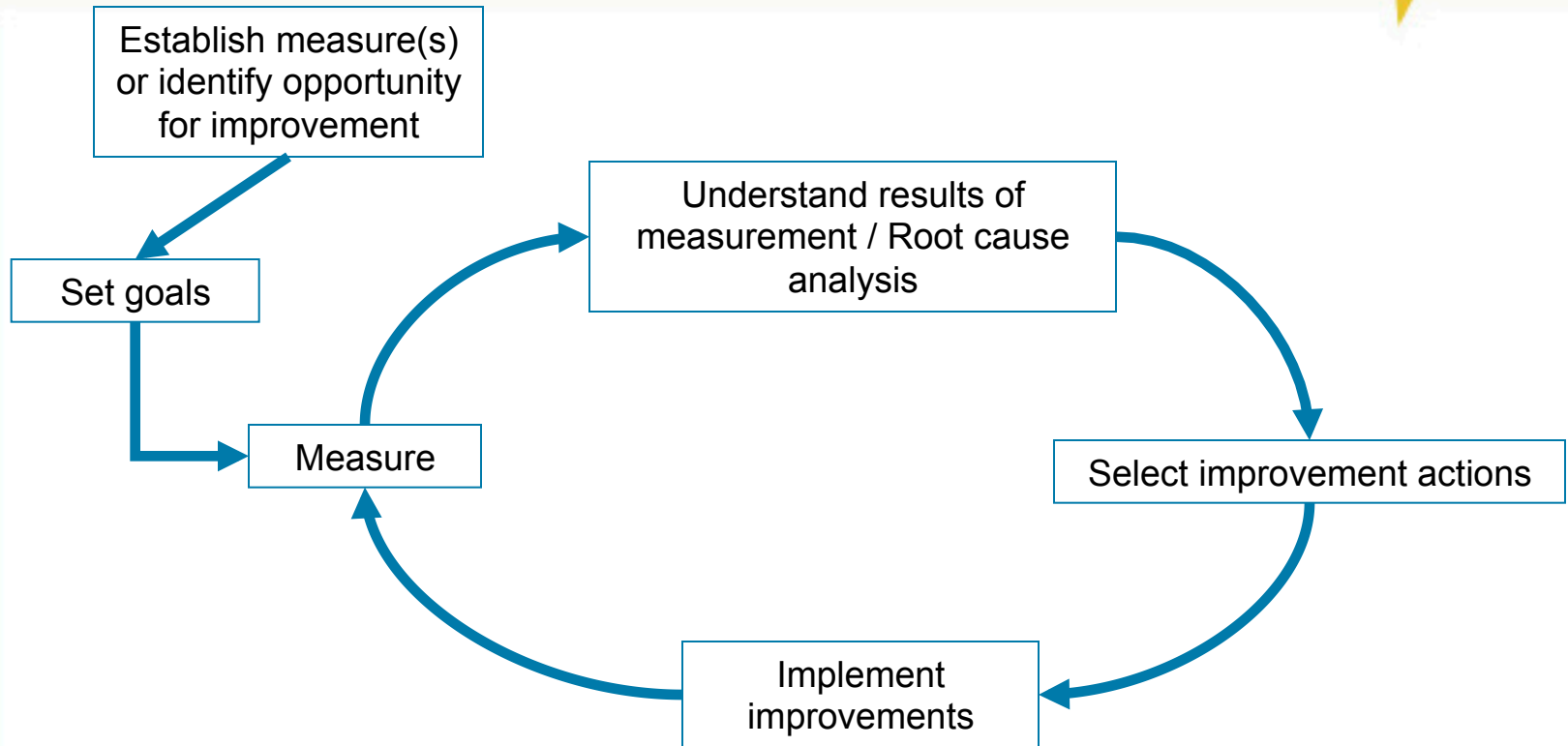
“Few burdens are heavy when everybody lifts”

— *Anonymous*

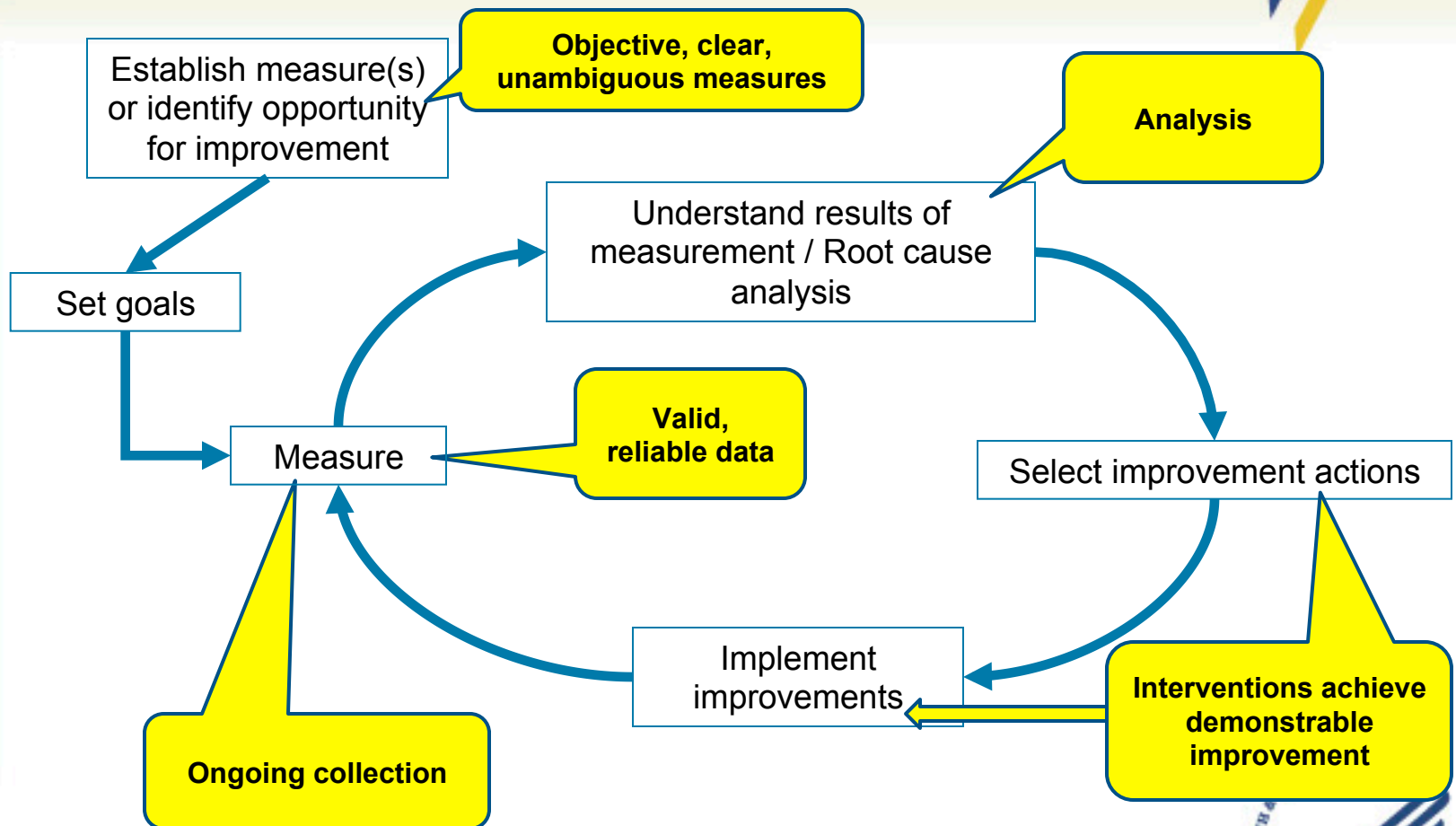
Models and Frameworks

- There are many quality improvement models and frameworks
- Common features of the various quality models
 - Need/desire to improve
 - Measurement
 - Understanding results of measurement
 - Selection of improvement actions
 - Implementation of the selected actions
 - Re-measurement
 - Tools

Commonalities of QI Models



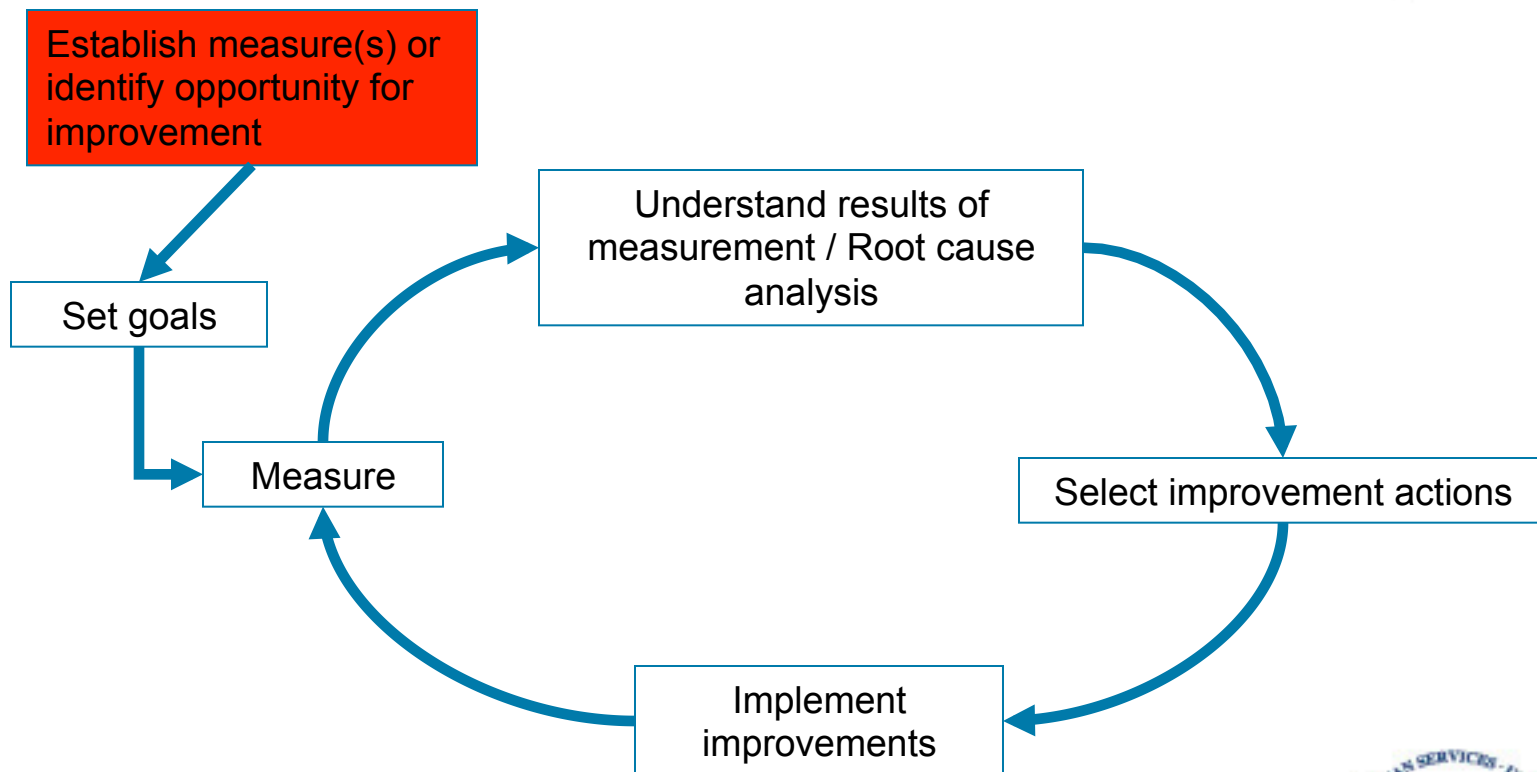
Commonalities of QI Models/QI Project Requirements



Structure

- Group/team responsible for QI
- Processes for communication related to QI within the organization
- IT structures needed

Commonalities of QI Models



What Should You Work On?

Projects should:

- Target your Medicare population
- Be important for your Medicare population
 - High volume
 - Performance gap
 - Risk prone

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- What is the population within your Medicare population that you are targeting?
- How many are there?
- What percent of your Medicare population is the target population?
- What are the unique characteristics, if any, of that population that need to be considered or that could impact your project?

Establish Indicators

- Selection of indicators
 - Outcome vs. process
 - Evidence-based
 - Quantifiable
 - Clear
 - Unambiguous

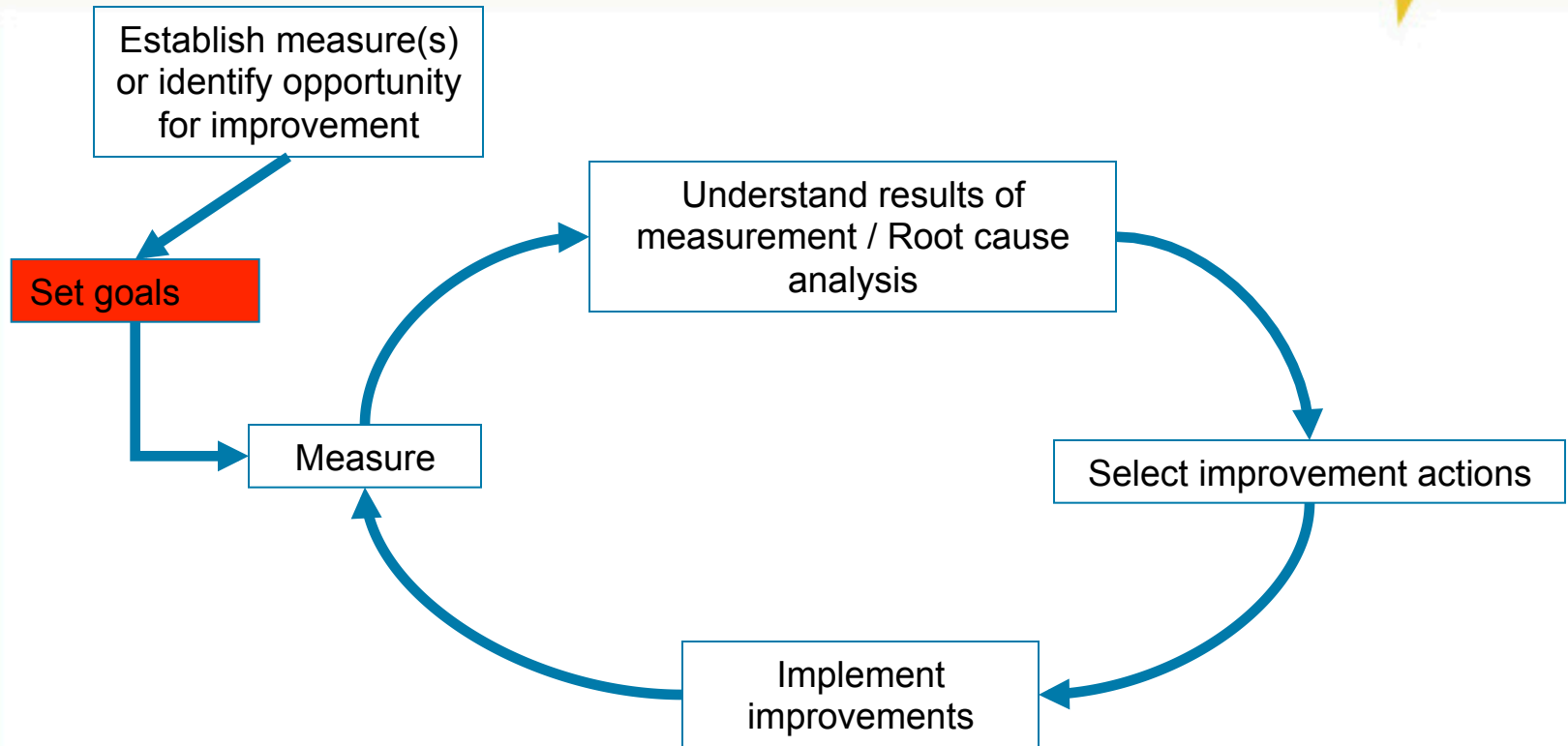
Establish Indicators

- A good indicator will have:
 - Numerator
 - Denominator
 - Inclusion criteria
 - Exclusion criteria
- Nationally-reported measures
- Quality Improvement Organization measures
- National Quality Foundation-endorsed measures

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- What is the numeric equation for the measure?
- What are the inclusion and exclusion criteria?
- What other information is required to accurately and reliably calculate the measure?
- If a measure is from a national source, what is that source?

Commonalities of QI Models



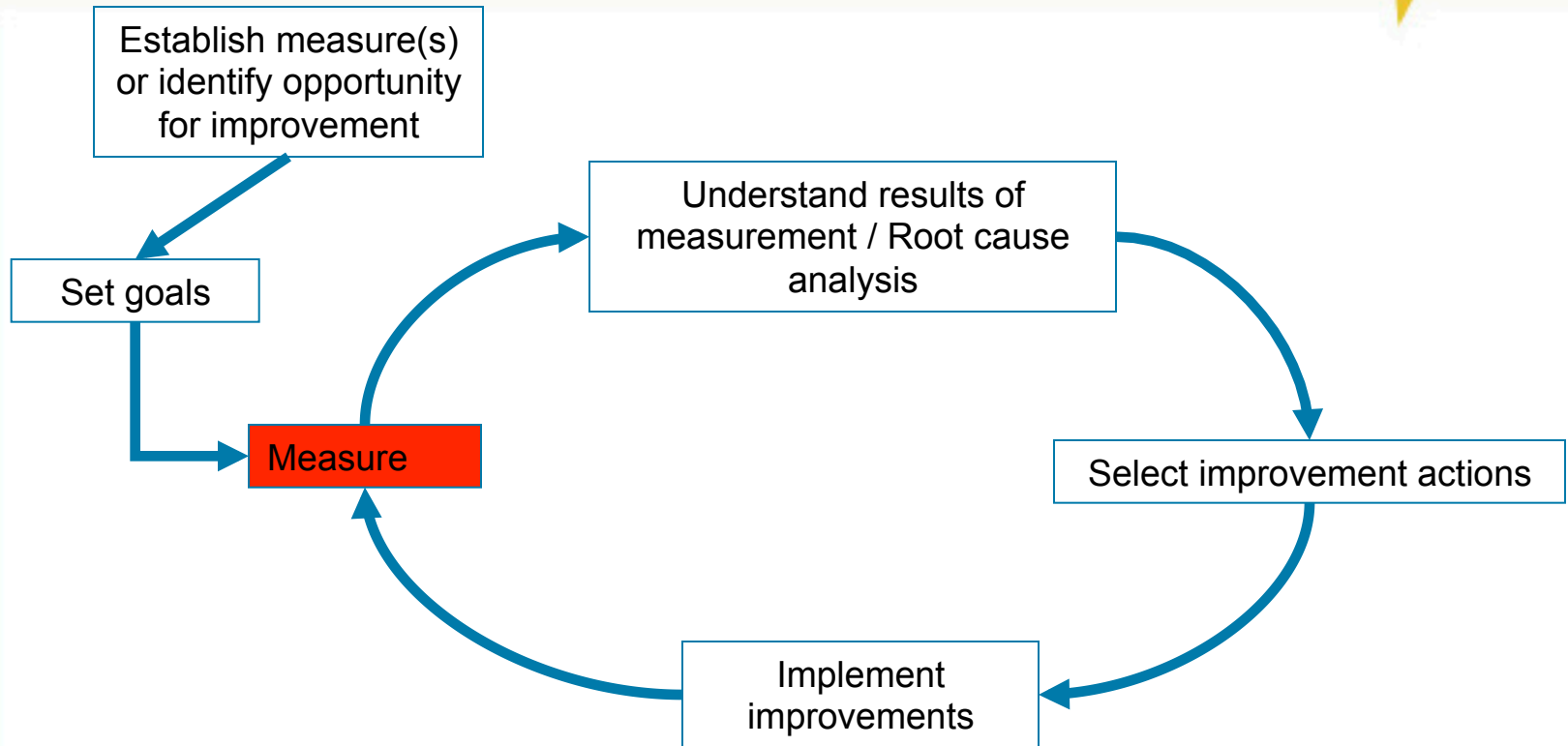
Set Goals

- Achievable
- Meaningful (not too easy)
- Based on evidence
 - What amount of improvement has been achieved using similar interventions elsewhere?
 - What level of performance is being achieved by high performers nationally?
- Milestones/intermediate goals

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- What is the goal that you are striving towards?
- What are the intermediate goals or milestones?
- What evidence is the goal/are the goals based on?

Commonalities of QI Models



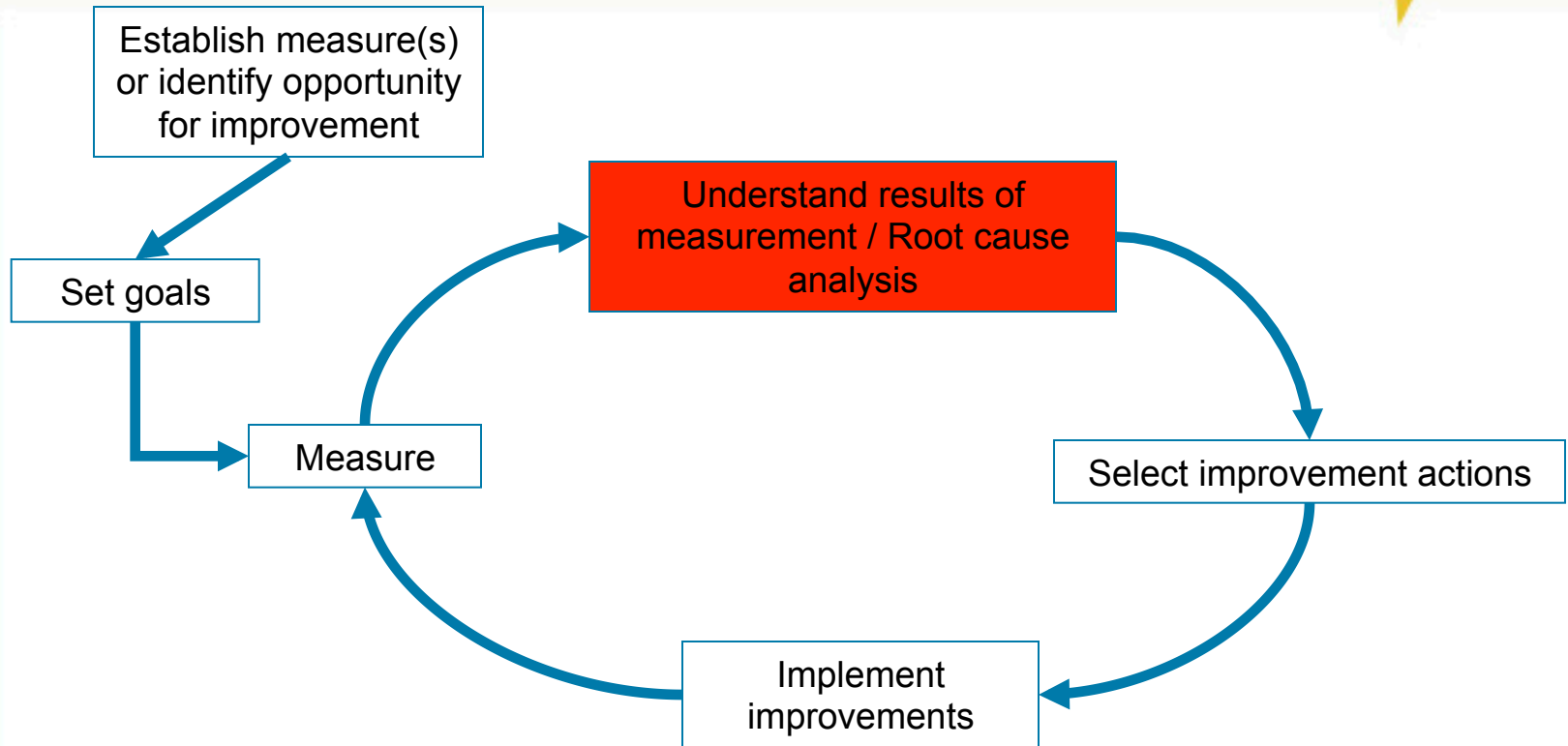
Measure

- Frequency
 - Allows adjustment
- Data collection
 - Reliable
 - Efficient
 - Consistent
 - Valid

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- What is your data source?
- What mechanism is used to collect the data?
- How frequently will you collect the data?
- Who collects the data?
- What are the results?

Commonalities of QI Models



Analysis

- Organize the data
- Look for trends
- Graphical displays often helpful
- Root cause analysis

Root Cause Analysis

What is Root Cause Analysis?

- A method for understanding the true, underlying reason for nonconformance within a process. When the root cause is removed or corrected, the non-conformance will be eliminated
- A structured investigation which aims to identify the true cause of a problem, and the actions necessary to eliminate it

Why Do Root Cause Analysis?

- Increase the likelihood of solving a problem
- Reduce time lost and money spent on solutions which will not work

How Do You Do a Root Cause Analysis?

- Not one method
- Select the appropriate QI tool or tools based on the kind of information that you need
- Identify the appropriate participants
- Use the QI tool or tools to gather the information from the identified participants
- Go deep!
- Analyze the information collected
- Document

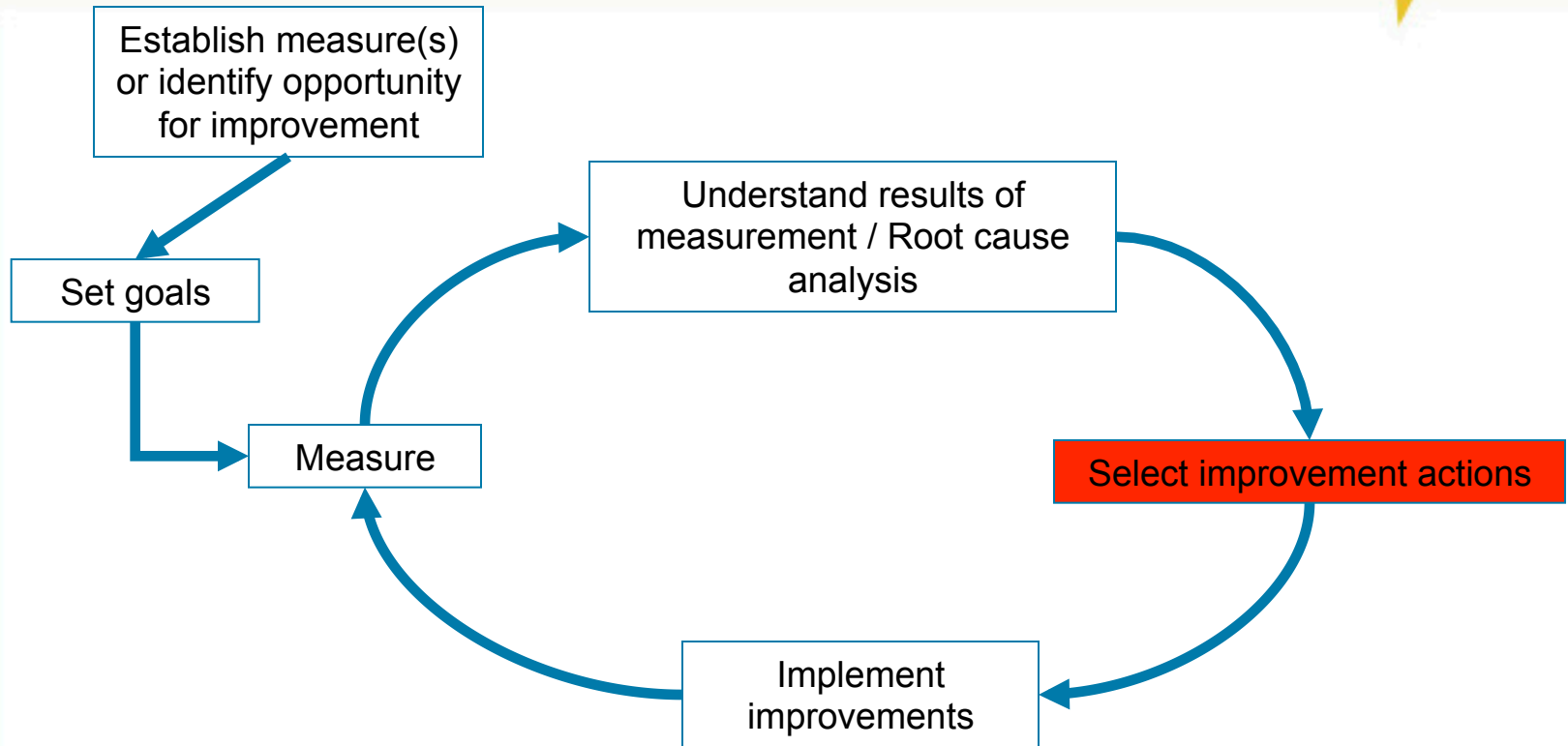
Identifying Participants for RCA

- Factors to consider
 - Time
 - Initial RCA for this problem/issue, or a subsequent RCA due to repeated “failure”
 - Availability
 - Need for “expertise” or specific knowledge
 - Need for buy-in for improvement actions

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- What RCA methodology did you use?
- Who were the participants in RCA?
- What were the results of RCA?

Commonalities of QI Models



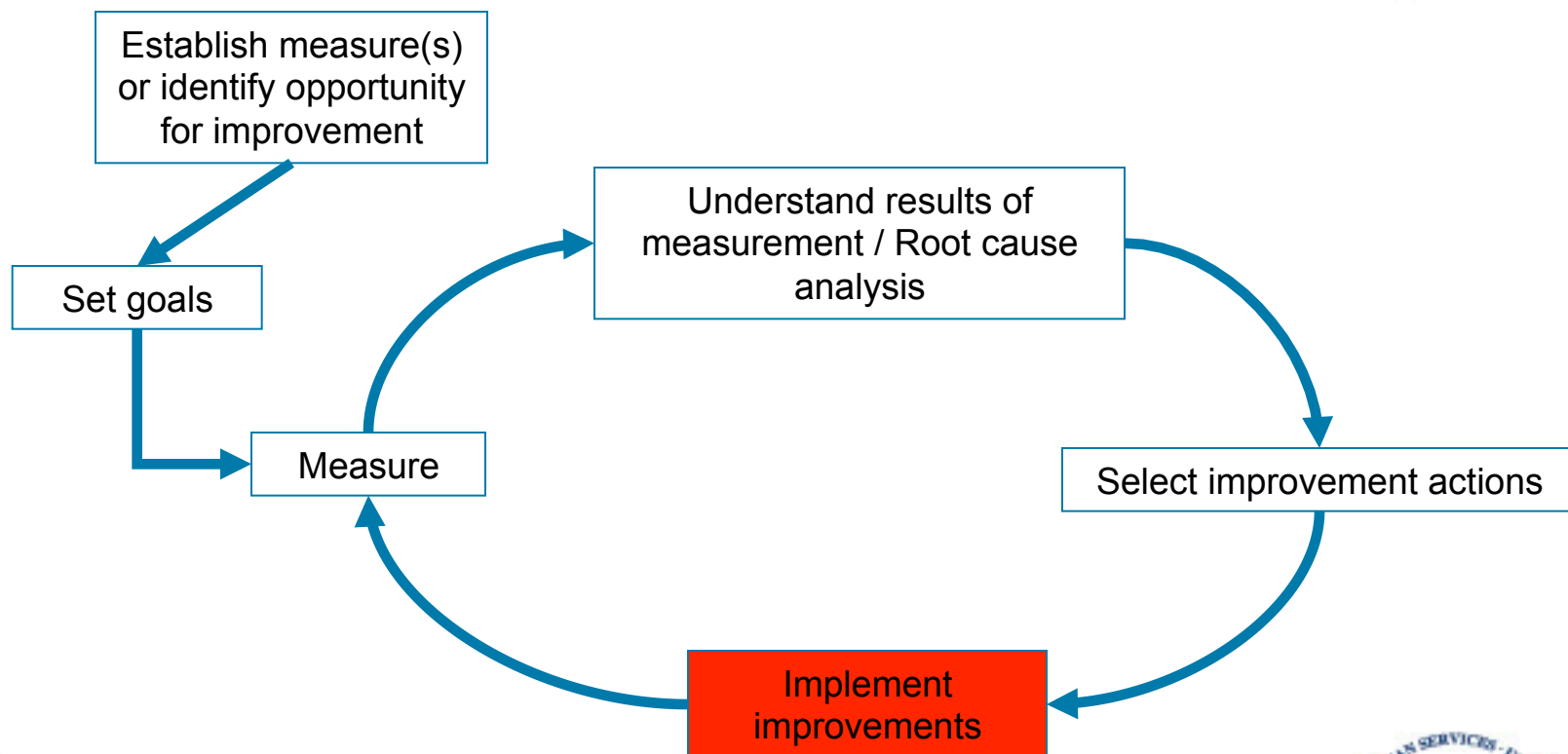
Selecting Improvement Actions

- Improvement Actions should relate to the cause or causes identified by RCA
- If there are multiple causes and improvement actions cannot address all of them, select those which address the cause or causes which represent the largest number of “misses”
- Consider time to impact
- Engage the target audience
- Take into consideration unique aspects of population (culture, education, and so forth)

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- What were the improvement actions suggested?
- How are they related to the root cause(s)?
- Of the suggested improvement actions, which ones will be implemented?
- Why?
- How do the interventions/improvement actions engage the target audience?

Commonalities of QI Models



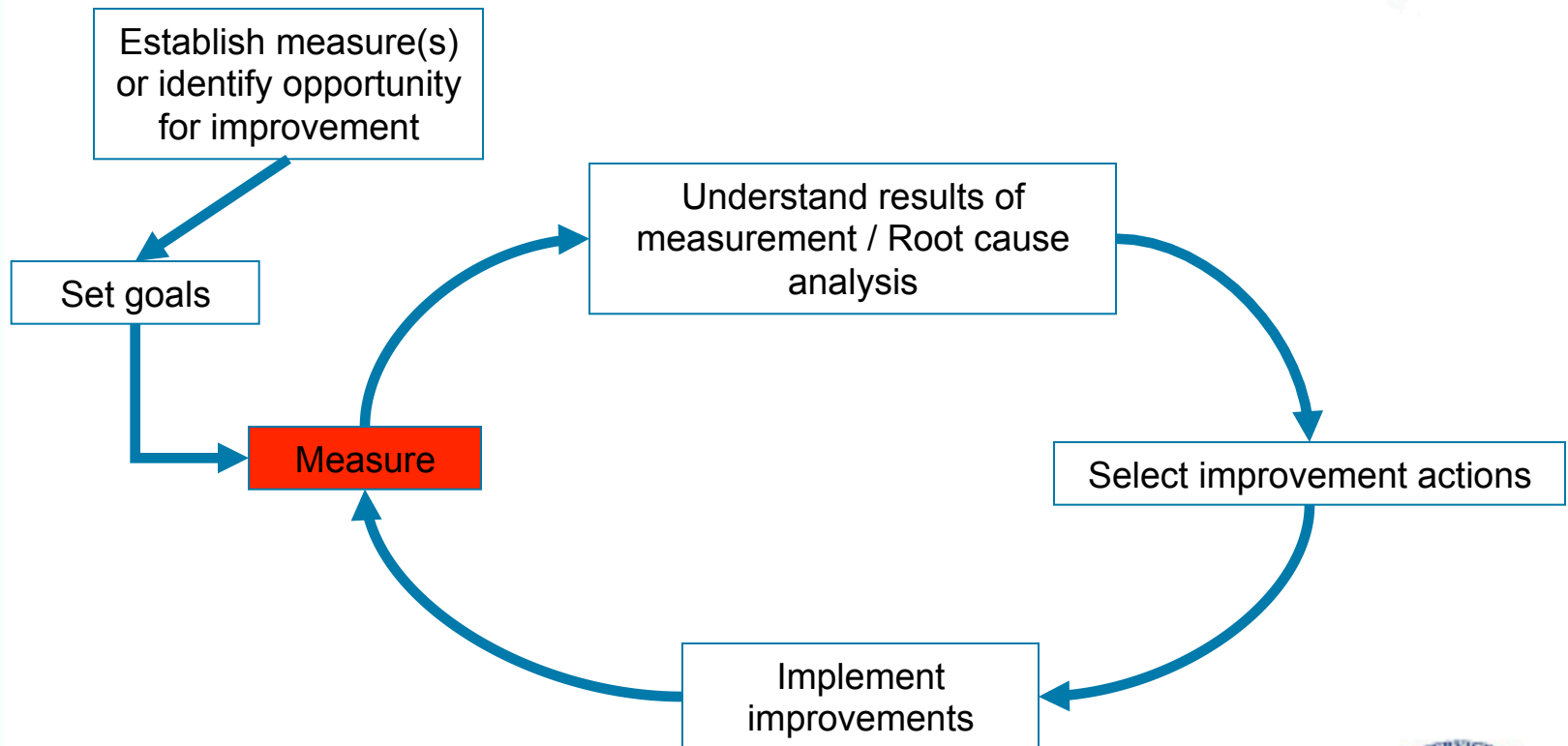
Implement Improvement Actions

- Plan out implementation
 - Activities/interventions
 - Person(s) responsible
 - Timelines
 - Assess effectiveness of interventions
 - Process measures?
 - Additional data collections?

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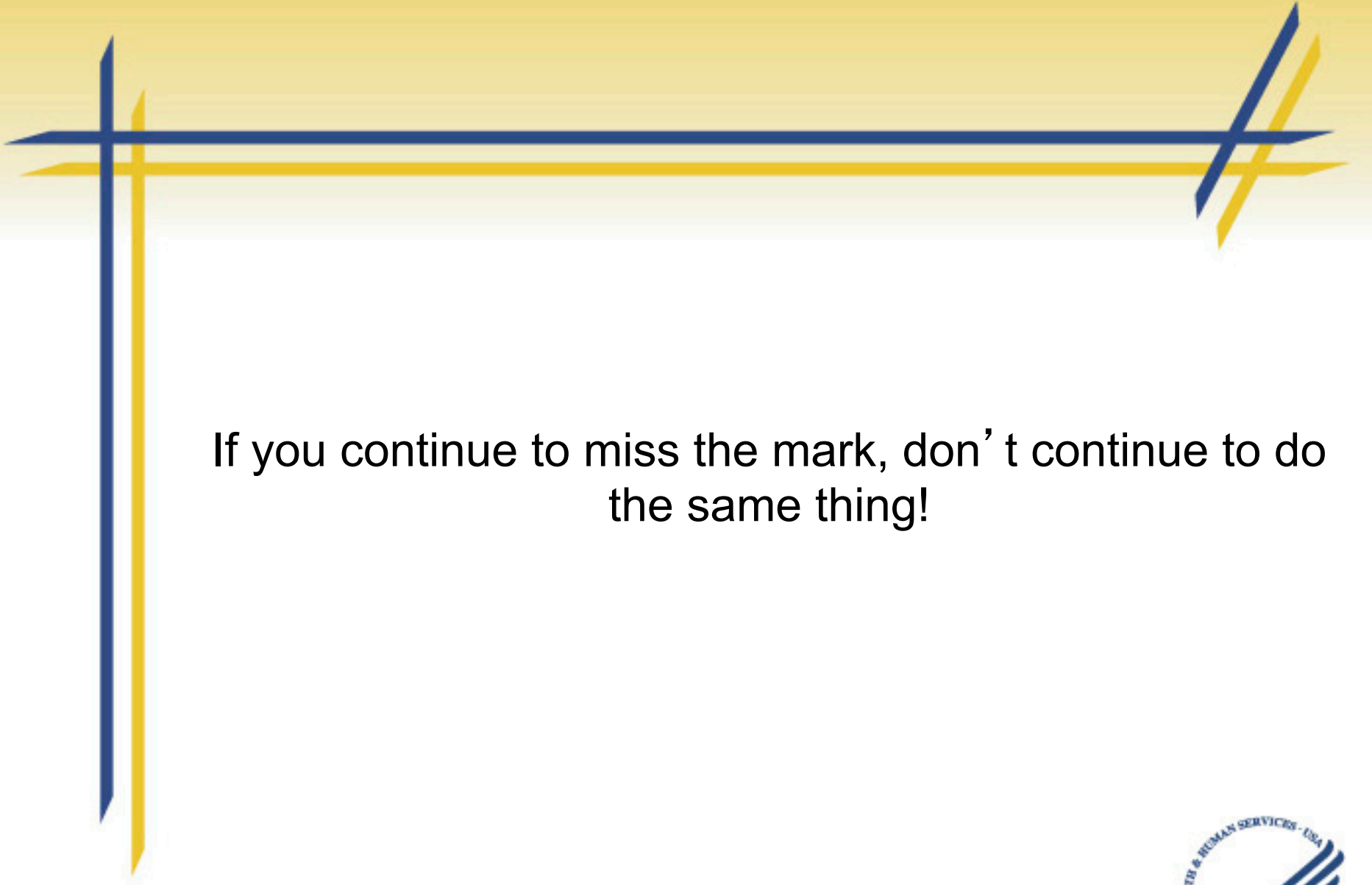
- What are the plans for implementing the selected improvement actions?
- What is the timeline for implementation?
- Who is responsible for implementation?
- What are the plans for additional data collection or additional measures, if necessary?

Commonalities of QI Models



Re-measure

Projects should achieve, through ongoing measurement and intervention, demonstrable improvement defined as “**significant improvement sustained over time**” in aspects of clinical care and non-clinical services, that can be expected to have a beneficial effect on health outcomes and enrollee satisfaction



If you continue to miss the mark, don't continue to do
the same thing!



Enthusiasm moves the world
—*J. Balfour*

Resources

Texts

- The Quality Toolbox, Second Edition, Nancy R. Tague; ASQ Quality Press
- Quality Improvement Tools & Techniques, Peter Mears, PhD; McGraw-Hill, Inc.
- Root Cause Analysis, Simplified Tools and Techniques, Bjorn Andersen, Tom Fagerhaug; ASQ Quality Press

Resources

Organizations / Websites

- American Society for Quality
 - <http://www.asq.org/>
- National Quality Forum
 - <http://www.qualityforum.org/>
- National Committee for Quality Assurance (NCQA)
 - <http://www.ncqa.org/>



Questions?

Contact Me!

Lisa McAdams, MD, MPH
Medical Officer, CQISCO
214-767-6456

Lisa.mcadams@cms.hhs.gov