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Abstract

The Physician Quality Reporting System (PQRS) is a reporting program encouraging physicians and group practices to report on a series of selected measures defined by the Center for Medicare and Medicaid Services (CMS). The goal of this program is to improve care across the spectrum of ambulatory services. This program also offers financial incentives in the form of payment adjustments based upon participation and a scoring algorithm. UAB was a participant in the Group Practice Reporting Option (GPRO) under PQRS until the recent transition to the Merit-based Incentive Payment System (MIPS). The UAB Enterprise Data Warehouse Team (EDW) was asked to create a PQRS dashboard that has attributed to positive payment adjustments from CMS including incentive payments and was related to process improvement activities across the ambulatory setting for improved patient outcomes. In addition to the PQRS dashboard the EDW team was also asked to create an Ambulatory Quality Performance Dashboard with additional measures not directly related to PQRS.

Additional information related to PQRS can be found here:

https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/PQRS/index.html

This dashboard was created using Tableau with data loading nightly from a variety of data sources in order for physicians to review and monitor to improve quality of patient care. The Ambulatory Quality Performance Dashboard is loaded monthly with additional measures for physician review and compliance.

Introduction

CMS outlined a series of quality measures that each institution could select from and are reported yearly under GPRO. The PQRS measures selected by UAB Hospital include the following:

- ACE Inhibitor/ARB Therapy
- Fall Screening
- Medication Reconciliation
- A1C Control
- Eye Exam
- Beta Blocker Therapy
- Controlling High Blood Pressure
- Aspirin Use
- Breast Cancer Screening
- Colorectal Cancer Screening
- Influenza Immunization
- Pneumonia Immunization
- BMI Screening and Follow up

- Statin Therapy

The creation of the PQRS Dashboard allowed the clinical care team to identify patients on a daily basis for which the institution was not meeting a specific measure. Not only did this allow for improved patient care, but also it gave us the capability to see where the institution had room for improvement. These areas for improvement were identified daily and physician practice behavior is addressed before habits are formed. Quality risk factors are now identified in real time. Prior to the dashboard development, these trends were not identified until the year end GPRO reporting was completed.

For example, October 2016 to July 2018 BMI Screening and Follow up had improved 29%. This was believed to be related to increased engagement from the clinical team based upon review of the PQRS Dashboard and policies and procedures enacted during the measurement period.

UAB Hospital received the final score for CY2017, 95.29 on a scale of 100. The resulted in a positive payment adjustment of around 2% and a significant incentive check to be received in 2019.

The Ambulatory Quality Performance Dashboard was developed utilizing Tableau and included measures from PQRS in addition to institution based measures for improvement. The data sources include the EHR (Cerner), billing systems, scheduling systems, and separate standalone data feeds.

The measures include the following:

- Hand Hygiene
- Invasive Procedures with Informed Consent
- Patient Education
- BMI Screening and Follow Up
- Patient Identification
- Universal Protocol
- Endorsed Results
- Cumulative Influenza Immunization

After implementation of the dashboard of the 8 measures house-wide UAB is at or above each target. The following improvements were seen:

- Invasive Procedures: 33%
- BMI Screening and Follow Up: 29%
- Endorsed Results: 4%

Both dashboards were deployed in October of 2016 and are utilized both daily and monthly. UAB has also selected several of these measures to align with the physician credentialing process and in-house incentive based physician programs.

During the demo we will walk through the evolution of the dashboard and the dashboard in its current state along with the committees involved and the requirement process.