

Quality Improvement Leadership Council

September 18-19, 2011
Encore at Wynn Las Vegas,
Las Vegas, NV



Weill Cornell Medical College
Physician Organization

Leveraging the EMR to Capture Quality Data

- **2008 – Focus on Reporting Measures**
 - Manual reporting
 - Total number of measures: 37
- **2009 – Focus on Reporting**
 - EMR Automated and Semi-Automated Measures
 - Automated Measures: 21
 - Semi-Automated: 20
 - Manual: 23
- **2010 – Focus on Measure Performance**
- **2011 – Focus on Quality Initiatives Based on Data**

Automated Measures

- PQRS Measure #6: CAD Anti-platelet Therapy
 - System checks medication list and/or orders
- PQRS Measure #39: Osteoporosis Screening
 - System checks orders or test results
- PQRS Measure #130: Medication Review
 - System checks medication list
 - Physician must “click” Review Button
- MU Measure #421: Adult Weight Screening
 - System calculates BMI; Alert if outside parameters
- MU Measure #28a & 28B: Tobacco Inquiry
 - System looks in Social History Section

MU Weight Screening Alert

Vitals			
Taken on 3/4/2011 1504			
BP:	<input type="text"/>	SpO2:	<input type="text"/>
Pulse:	<input type="text"/>	Weight:	<input type="text"/>
Resp:	<input type="text"/>	Height:	<input type="text"/>
		Other Vitals	
		BMI:	24.33 kg/m ²
		BGA:	1.87 m ²

Arial 11 B I U S A 100% Insert SmartText

The patient's BMI was noted to be outside of parameters for his age range. A follow-up plan [MU
NCF MEASURE 421 (BMI PLAN):15351]

was documented
was not documented
was not documented due to terminal illness
was not documented for medical, system, or patient reason

Semi-Automated Measures

- Measure #5: CHF
- Measure #51: COPD – Spirometry Evaluation
- Measure #52: COPD – Bronchodilator Therapy
- Measure #71: Breast CA Hormonal Treatment
- Measure #72: Colon CA Chemotherapy Stg III
- Measure #84: Hepatitis C: Genotype Testing
- MU Objective: Medication Reconciliation

PQRS Measure #5: CHF

BestPractice Alert - Ztest_A

Patient has met the criteria for PQRS Measure # 5 relating to Heart Failure. Please complete the recommended SmartSet:

Open SmartSet ACE Inhibitor or ARB Therapy for Left Ventricular Systolic Dysfunction (LVSD) preview

Accept Cancel (LVSD)

ACE Inhibitor or ARB Therapy for Left Ventricular Systolic Dysfunction (LVSD)

Does patient have left ventricular systolic dysfunction?

Yes (ie, LVEF < 40%)
Qty-1

No (ie, LVEF >= 40%)
Qty-1

LVEF was not performed or documented
8P, Qty-1

If you answered 'yes' above, ACE Inhibitor or ARB Therapy was...

Prescribed
Qty-1

Not prescribed for Medical reasons
1P, Qty-1

Not prescribed for Patient reasons
2P, Qty-1

Not prescribed for System reasons
3P, Qty-1

Not prescribed, reason not otherwise specified
8P, Qty-1

Additional Interventions

- Physician Alerts
- Monthly Reports
 - Trends measure performance
 - Distributed to Physicians, Quality Committee,
 - PO Operating Board
- Faculty Presentations, Grand Rounds
- Resident and Ancillary Staff Education

The screenshot displays the Epic EMR interface for a patient named Adam. The main content area shows a 'BestPractice Advisories' section with the following items:

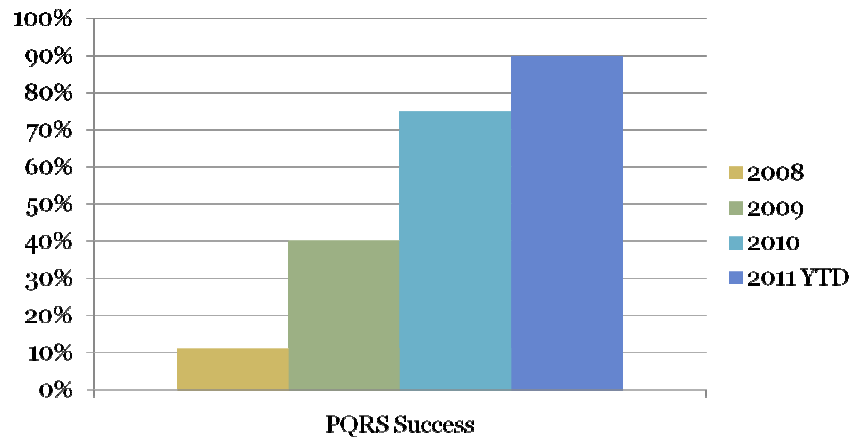
- An Adult Nutrition Screen has not been completed for this patient within the last 365 days. Please complete it in the Quick Questions section.**
- This patient is a diabetic. The following Health Maintenance items should be addressed:**
 - (DIABETES: A1C MEASURE (Q6M) last satisfied: 10/15/2006)
 - (DIABETES: OPHTHO EXAM(ANNUAL) last satisfied: Not on file)
 - (DIABETES: LIPID MEASURE(ANNUAL) last satisfied: Not on file)
 - (DIABETES: FOOT EXAM(ANNUAL) last satisfied: Not on file)
 - (DIABETES: DENTAL EXAM (Q6M) last satisfied: Not on file)
 - (DIABETES: CREATININE(ANNUAL) last satisfied: Not on file)
 - (No related orders found in patient record)

Below the advisories, there are buttons for 'Refresh', 'Accept', 'Restore', 'Close', 'Previous', and 'Next'. A 'SmartSets' section is also visible, along with a 'Verify Pharmacy Benefits' section that states: 'No pharmacy benefits eligibility data found for this visit. The patient may not have insurance or their insurance does not send pharmacy benefits.'

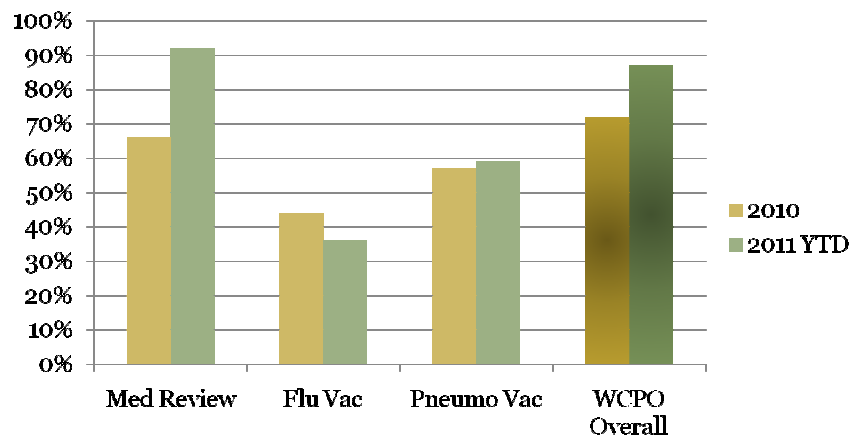
Department	PQRI Eligible Providers Compliant / Total	% Providers Successfully Reporting PQRI	Measure Performance	Medicare 2% Bonus Potential
CARDIOTHORACIC SURGERY	16 / 16	100%	83%	
DEPARTMENT OF NEUROLOGICAL SURGERY	14 / 14	100%	88%	
DEPARTMENT OF PATHOLOGY	10 / 10	100%	100%	
DEPARTMENT OF REHABILITATION MEDICINE	4 / 4	100%	80%	
DERMATOLOGY	11 / 11	100%	80%	
WEILL CORNELL ED PHYSICIANS	40 / 40	100%	99%	
WEILL CORNELL IMAGING AND VASCULAR	3 / 3	100%	93%	
WEILL CORNELL MEDICAL ASSOCIATES	16 / 16	100%	67%	
WEILL CORNELL PULMONARY ASSOCIATES	10 / 10	100%	68%	
WEILL CORNELL INTERNAL MEDICINE ASSOCIATES	38 / 40	95%	76%	
NYH-CUMC RADIOLOGY GROUP	37 / 39	95%	99%	
DIVISION OF CARDIOLOGY	33 / 35	94%	87%	
WEILL CORNELL RADIATION ONCOLOGY ASSOCS.	10 / 11	91%	82%	
WEILL CORNELL IMAGING AT NYP	26 / 29	90%	100%	
DEPARTMENT OF OPHTHALMOLOGY	24 / 28	86%	90%	
HEMATOLOGY-ONCOLOGY	32 / 38	84%	64%	
DEPARTMENT OF OBSTETRICS AND GYNECOLOGY	16 / 20	80%	44%	
DIGESTIVE DISEASES	20 / 25	80%	52%	
WEILL CORNELL ANESTHESIOLOGY ASSOCIATES	83 / 104	80%	93%	
DEPARTMENT OF OTORHINOLARYNGOLOGY	23 / 29	79%	18%	
DEPARTMENT OF SURGERY	31 / 43	72%	66%	
ENDOCRINOLOGY & METABOLISM	7 / 10	70%	69%	
DEPARTMENT OF UROLOGY	12 / 18	67%	63%	
WEILL CORNELL PEDIATRIC CARDIOLOGY	2 / 3	67%	50%	
DEPARTMENT OF PEDIATRICS	11 / 17	65%	53%	
DEPARTMENT OF NEUROLOGY	24 / 43	56%	73%	
DEPARTMENT OF MEDICINE	22 / 50	44%	57%	
DEPARTMENT OF PSYCHIATRY	9 / 46	20%	100%	
DIVISION OF HOSPITAL MEDICINE	0 / 22	0%	65%	
PRENATAL GENETICS	0 / 1	0%	100%	
Weill Cornell Medical College	584 / 775	75%	71%	

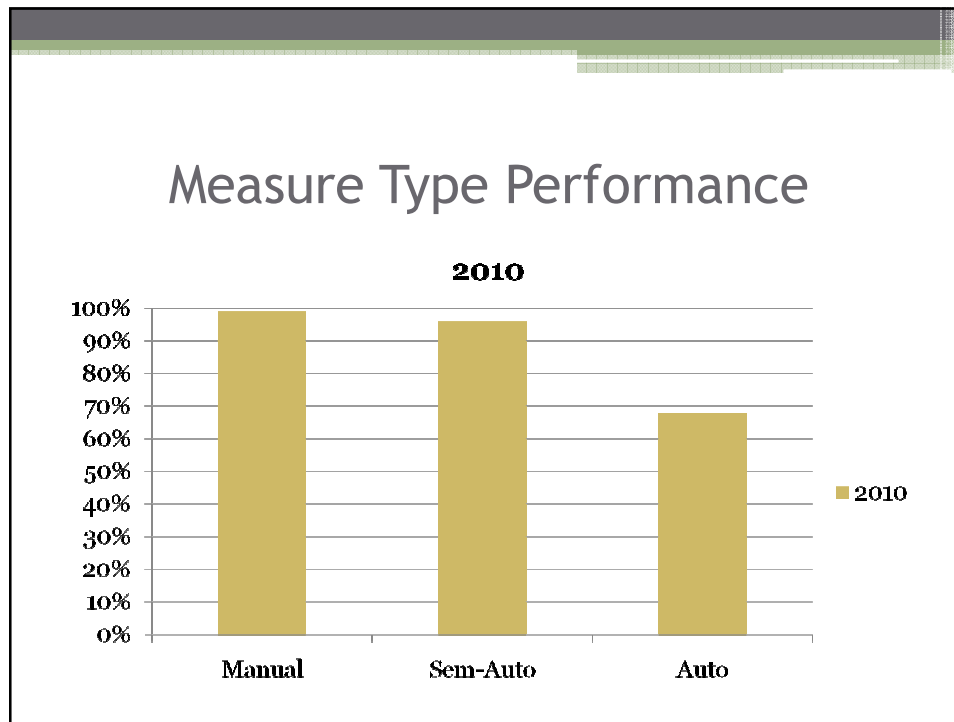
Department	PQRI Measures	Jan 2010	Jan - Feb 2010	Jan - Mar 2010	Jan - Apr 2010	Jan - May 2010
DIVISION OF CARDIOLOGY	6 - CAD: Oral anti platelet therapy Rx	92.20%	92.65%	91.73%	91.57%	91.04%
DIVISION OF CARDIOLOGY	114 - Inquiry tobacco use	92.14%	90.93%	90.88%	91.32%	91.52%
DIVISION OF CARDIOLOGY	124 - Use of EMR	100.00%	100.00%	100.00%	100.00%	100.00%
DIVISION OF CARDIOLOGY	130 - Medication Reconciliation	81.46%	80.95%	80.13%	80.14%	79.62%

Results - PQRS Reporting



Measure Performance Results





Benefits

- Increased Number of Physicians Receiving PQRS Incentive
- Preparation for MU Reporting
- Engagement of Physicians in Quality Activities
- Leverage in Negotiating Managed Care Contracts

Challenges

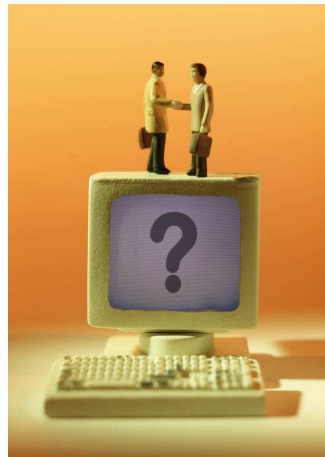
- Limitation of Automated Measures
- Initial Engagement of Physician
- Documentation Work-A-Rounds
- Non-traditional Use of EMR; i.e., Scanning Notes
- Slow Adopters to EMR
- Outside Lab Results
- Voluntary Physicians
- System Glitches

Recommendations

- Allocate a minimum of 1 FTE for physician education and 0.5 FTE for development of reports
- Employ Clinicians for Education
- Allocate Monies for IT development
- Present Data to Physicians Timely
- Engage Operating Board, Board of Trustees, Quality Committee

Evaluate and Re-evaluate - It is a Work in Progress!

Questions?



Contact Information

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