History of Quality Initiatives/Models are all over the Board!

- **Statistical Quality Control (Manufacturing or Business model)**
  - Quality Assurance → Quality Improvement
  - **Managed Care**
    - Total Quality (PDCA/PDSA)
  - **Collaborative Initiatives/Rapid Cycle Improvement (Don Berwick- IHI)**
    - Disease Management
- **Best Practices/Benchmarking**
  - Population Management
  - IPAs
  - Triple Aim
    - Health Care Value Proposition
- MU/PCMH/ACO/Care Management
"I am called eccentric for saying in public that hospitals, if they wish to be sure of improvement, must find out what their results are. Must analyze their results to find their strong and weak points. Must compare their results with those of other hospitals . . . . . . must promote members of the staff on a basis which gives due consideration to what they can and do accomplish for their patient. Such opinions will not be eccentric a few years hence."
"I am called eccentric for saying in public that hospitals, if they wish to be sure of improvement, must find out what their results are. Must analyze their results to find their strong and weak points. Must compare their results with those of other hospitals . . . . . . must promote members of the staff on a basis which gives due consideration to what they can and do accomplish for their patient. Such opinions will not be eccentric a few years hence."

E.A. Codman, M.D. (1917)
History of Quality Models

QUALITY ASSESSMENT

1. ESTABLISH REQUIREMENTS
2. MEASURE PERFORMANCE
3. COMPARE THE TWO
4. MANAGE THE DIFFERENCE
5. IMPROVE CONTINUOUSLY
History of Quality Models

PROCESSES AND MEASUREMENT

IF YOU CAN DEFINE IT - YOU CAN MEASURE IT
IF YOU CAN MEASURE IT - YOU CAN ANALYZE IT
IF YOU CAN ANALYZE IT - YOU CAN CONTROL IT
IF YOU CAN CONTROL IT - YOU CAN IMPROVE IT
IF YOU CAN IMPROVE IT ONCE - YOU CAN CONTINUE TO IMPROVE IT
History of Quality Models

ZONE OF QUALITY MANAGEMENT

A - ZONE OF RISK MANAGEMENT
B - ZONE OF QUALITY ASSURANCE
C - ZONE OF QUALITY IMPROVEMENT

Primary Healthcare for All
By 1995, 97% of U.S. Hospitals will have modified their Patient Care Delivery Process.
History of Quality Models

Managed Care Tools

- Critical Paths
- CareMaps™
Managed Care

New Methods for Implementing and Managing Process

- Enhanced communication, documentation and relationships
- Multi-disciplinary teams
- Employee empowerment
- Case Management

Arizona Alliance
For Community Health Centers
Primary Healthcare for All
Managed Care Benefits

- Cost reduction and financial management
- Physician/patient/staff satisfaction
- Clinical quality
- TQM/CQI support
History of Quality Models

CareMaps™ Benefits

- "Standardized", streamlined process
- Patient outcomes focused
- Service quality for physicians & patients
- Process measurement and continuous improvement
- Identify/manage relationship between outcomes and process

Arizona Alliance
For Community Health Centers
Primary Healthcare for All
History of Quality Models

CIRCLE OF HEALTH

HealthCare

Customer

Satisfaction

Level

Cost

Financial/perceptual

Health Status

Clinical

Functional Status

physical/mental
FUTURE PLANS

NEXT STEP

Health Status Management:

- patient

- alternate delivery setting (clinic/outpatient)

- primary care physician
History of Quality Models

COORDINATED CARE MANAGEMENT

CCM = Coordinated Care Manager
Today we are moving towards Accountable Care Models that involved healthcare outcomes and financial measurements on a global scale for a given populations of patients
The AACHC Experience as an Example:
Moving Towards Implementation of an
Independent Practice Association (IPA) or
Statewide ACO
• Member sites are located in 14 of the 15 counties in Arizona. AACHC members serve patients in 213 statewide locations. Over 161 of those sites are FQHCs and FQHC look-alike.

• Community Health Centers served over 540,000 patients throughout Arizona with over 1.7 million patient visits in 2013.

• Each dot represents a city that has member services available to the public.
Arizona Federally-Qualified Health Centers - 2013
Payer Mix* (average)

- Medicaid: 41%
- Uninsured: 26%
- Commercial/Other: 10%
- Medicare: 23%

*Excludes Neighborhood Outreach Access to Health
Community Health Centers’ Range of Coordinated Services-Medical Home

- **Clinical**
  - Family Medicine
  - Pediatrics
  - OB/GYN
  - Prenatal
  - Pharmacy (340B drug formulary)
  - Dental
  - Dieticians
  - Behavioral Health
  - HIV/AIDS
  - Immunizations
  - Mobile programs
  - Referrals for Specialty Services

- **Ancillary**
  - Counseling
  - Radiology
  - Laboratory
  - Physical Therapy

- **Enabling**
  - Translation
  - Eligibility
  - Transportation
  - Outreach

- **Health Education Programs**
  - Chronic Disease Management
  - Nutrition Counseling

Arizona Alliance
For Community Health Centers
Primary Healthcare for All
Federal Measurement Tools for FQHCs

- Uniform Data Set - HRSA Reporting (Demographics, clinical/quality, financial)
  - % Hypertension patients with BP <140/90 AZ = 70.6 compare to national rate 57.8%
  - % Adults assessed for tobacco is 68.6% or higher AZ =100% compared to national 93.8

- Medical Homes
  - 67% of FQHCs have achieved level 3 PCMH accreditation
  - 100% of FQHCs have adopted EMR
Community Based Measurement tool for Community Health Centers

CHiR - The Center for Health Information and Research- ASU

• CHiR fosters collaboration for public health, public policy, computer science, economics, health information Technology and consumer knowledge

• CHiR uses well-founded research methods in order to provide objective health care services/insurance coverage information for the private and public sectors
Value of CHiR Results

CHiR preliminary results for FQHC 2013 2013 QUALITY based on 128 *HEDIS Measures (Healthcare Effectiveness Data and Information Set)

- 65% of the 128 measures FQHC’s scored significantly better than non-FQHC’s
- 26% of the 128 measures there was no strong statistical variance
- 9% of the 128 measures Non-FQHC’s scored better

70 HEDIS Measures of Prevention/Screening (well woman, prenatal care, immunizations, screens)

- 84% of the 70 measures FQHCs scored better than non-FQHCs
- 6% of the 70 measures there was no statistical variance
- 10% of the 70 measures non-FQHCs scored better than FQHCs

Note: .01 Strong and .05 Moderate

* External Quality Reports Organization (EQRO) HEDIS in not comparable to CHiR due to collection and reporting design
INDEPENDENT PRACTICE ASSOCIATION (IPA) DEVELOPMENT
**Integrated Provider Association (IPA)**

**Messenger Model IPA**: A model of contracting on behalf of multiple, independent practices that could be considered competitors.

- The Messenger acts on behalf of each practice without sharing any competitive information between the CHCs.

- Messenger Model provides economies of scale in the time and effort necessary to prepare for negotiation of CHC contracts.

- Messenger Model supports non-exclusivity of contracting where CHCs each hold individual contracts and may negotiate with payers independently.
Integrated IPA Model: Can negotiate contracts around integrated quality of finances A network of health care providers/organizations which provides or arranges to provide a coordinated continuum of services to a defined population and is willing to be held clinically and fiscally accountable for clinical outcomes and health status of the populations served.

- Creates more healthcare value by adopting evidenced-based guidelines, sharing “best practices”, and setting quality and performance expectations

- Provides the opportunity to “pool” covered lives to improve outcomes for population management and use scale to achieve a better set of terms for all practices.
AACHC and CVN - Collaborative Alignment

**AACHC**
- FQHC-LAs
- Associate Members
- FQHCs
- RHCs
- Sponsors

**CVN**
- FQHC-LAs
- RHCs

**Primary Care Association**
- Represent BPHC Grantees
- Support CHC Services throughout AZ
- Assistance, Education & Training
- Peer Networking

**Integrated Services Network**
- Integrated Data Management
- Quality Improvement Initiatives
- “Best Practice” Performance
- Integrated Provider Association

Arizona Alliance
Primary Healthcare for All
Integrated Health Care
Patients, Services, Culture and Community

Arizona Alliance
Primary Healthcare for All