

Medicare QIOs and Health Information Technology

Overview

In the 9th Statement of Work (SOW), QIOs will work with providers to encourage using health information technology (HIT) to assist physician offices with quality improvement. The majority of work with HIT will occur under the **Prevention Theme**.

Practices enrolled with a QIO must have already implemented an electronic health record (EHR) program that has been certified by an entity recognized by the Secretary of Health and Human Services. Enrolled practices will work with their QIOs to implement care management processes, using their certified EHRs, that will focus on breast cancer and colorectal cancer screening and influenza and pneumococcal vaccination.

Opportunity for Quality Improvement

QIO interventions that support HIT can improve screening rates by setting up systems that notify providers and patients when cancer screenings should be scheduled. QIOs will also use HIT-focused interventions to help increase vaccination rates.

QIO Activities

QIOs will recruit a number of practices to participate in HIT-focused interventions, securing at least 80% of the targeted number by the end of 2008. QIOs will also identify non-participating practices with EHR capability to use as a comparison group.

The QIO will educate each participating practice on using its EHR capabilities to improve rates of screenings and immunizations, using the tools in Doctor's Office Quality–Information Technology University (DOQ-IT University). Halfway through the contract, at least 80% of the participating practices should report tracking of each preventive service for at least 75% of patients or patient encounters.

Each participating practice will use its certified EHR to report breast cancer and CRC screening and influenza and pneumococcal immunization data directly to CMS. Reporting will begin during Quarter 3 of the contract and will continue quarterly thereafter. Every two weeks, beginning in early 2009, QIOs will report to CMS the number of, and rates for, practices that are reporting data.

QIOs will help practices assess their care processes, which will tell CMS the impact of using EHRs on the practices' care processes related to breast cancer and CRC screening and influenza and pneumococcal immunizations.

Evaluation

QIOs will be evaluated throughout the three-year 9th SOW. QIOs will be accountable for achieving the minimum performance thresholds for the rates of screenings and vaccinations. QIOs will also be responsible for meeting goals related to recruiting and educating practices and the numbers of practices reporting quality data.

Resources

Medicare QIO Program: www.cms.hhs.gov/QualityImprovementOrgs/

CMS: www.cms.hhs.gov/ColorectalCancerScreening/

MedQIC: www.medqic.org

CDC: www.cdc.gov/flu/protect/keyfacts.htm

The Medicare QIO Program

Under the direction of the Centers for Medicare & Medicaid Services (CMS), the Quality Improvement Organization (QIO) Program consists of a national network of 53 QIOs, responsible for each U.S. state, territory, and the District of Columbia. QIOs work with healthcare providers, consumers and stakeholder groups to refine care delivery systems to make sure patients get the right care at the right time, particularly patients from underserved populations. QIOs operate under three-year contracts with CMS, known as Statements of Work (SOWs), the next of which will begin in August 2008 and continue through July 2011.

For more information:

www.cms.hhs.gov/QualityImprovementOrgs/