

 *Coalition for Care*
IHA's Hospital Engagement Network

 **Indiana Hospital Association**
**INDIANA PATIENT
SAFETY CENTER**

The New QIO Program

September 9, 2014

 **Indiana Hospital Association**

Webinar Agenda

- Welcome & Introductions – Karin Kennedy, Indiana Hospital Association, Patient Safety/Quality Advisor
- Quality Innovation Network - Quality Improvement Organization (QIN-QIO) – Cheryl Riddell, QSource, State Quality Director
- The Beneficiary and Family Centered Care Quality Improvement Organization (BFCC-QIO) – Cheryl Cook, KePRO, Program Director
- Wrap-up/Questions – Karin Kennedy

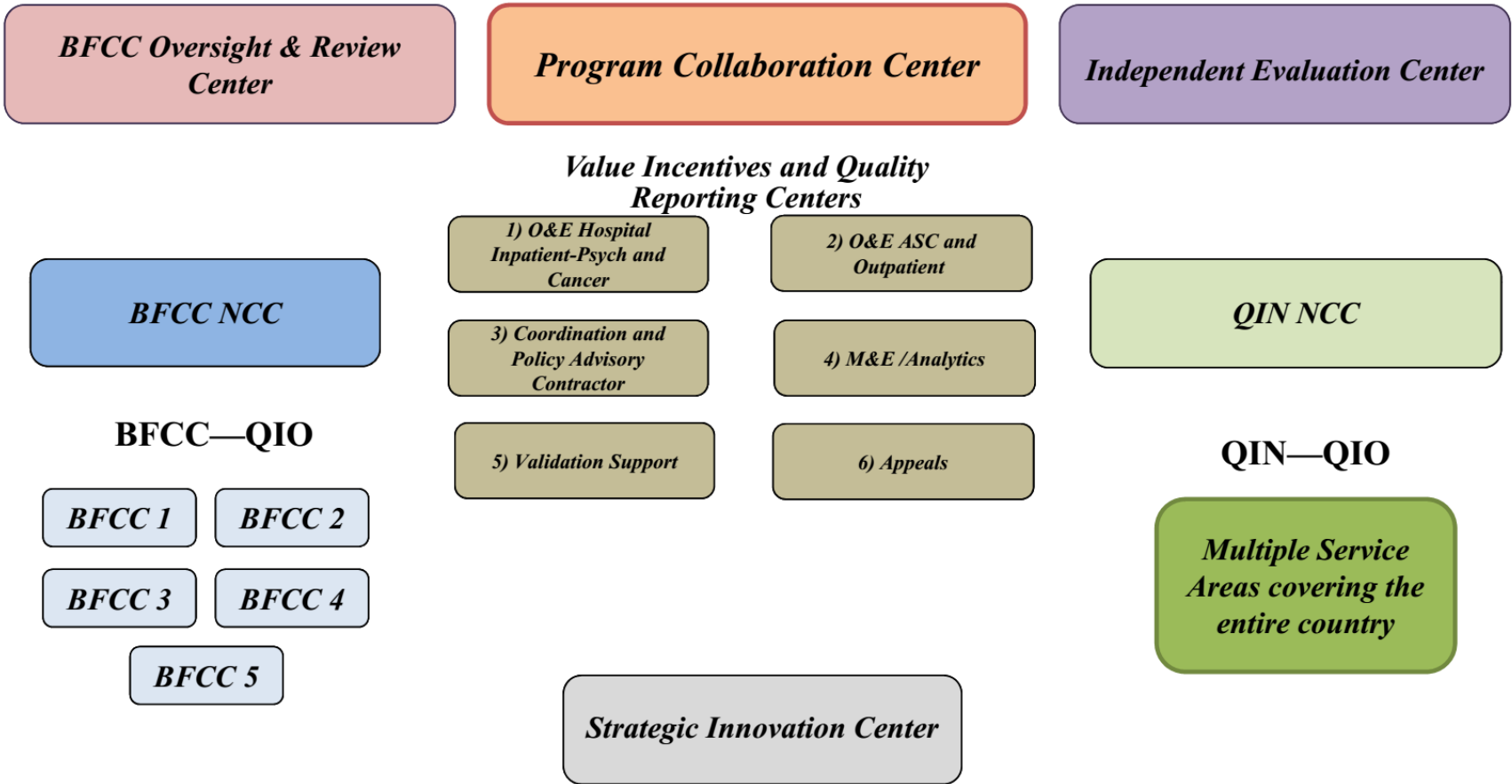
QIO Program Structure

- **CMS separated medical case review from quality improvement work creating two separate contract structures:**
 - Medical case review to be performed by Beneficiary Family Centered Care Quality Improvement Organizations (BFCC-QIOs).
 - Quality improvement and technical assistance QIOs to be performed by Quality Innovation Network Quality Improvement Organizations (QIN-QIOs).

Note: BFCC and QIN contracts cannot be held by the same organization.

- **BFCC-QIOs are organized among 5 geographic areas across the Nation.**
- **The QIO contract cycle has been extended from 3 to 5 years.**

QIO Program Structure



Inpatient Value Incentives Quality Reporting

- CMS awarded Florida Medical Quality Assurance, Inc. (FMQAI) the Inpatient Value Incentives Quality Reporting (IVIQR) Support contract. FMAQI will provide education and direct support to stakeholders of these quality programs:
 - Hospital Inpatient Quality Reporting (HIQR)
 - EHR Incentive Program for Eligible Hospitals and Critical Access Hospitals (CAHs)
 - Hospital Value-Based Purchasing (HVBP)
 - PPS-Exempt Cancer Hospital Quality Reporting (PCHQR)
 - Inpatient Psychiatric Facility Quality Reporting (IPFQR)

QualityNet HelpDesk

- Contact QualityNet Help Desk for data reporting questions:
 - 8 a.m. - 8 p.m. ET
Monday - Friday
 - E-mail: qnetsupport@hcqis.org
Phone: (866) 288-8912




Quality Innovation Network - Quality Improvement Organization (QIN-QIO)


Qsource
Indiana Hospital Association
Sept. 9, 2014


atom Alliance



 atom Quality Innovation Network (QIN) is a multi-state alliance composed of three nonprofit, healthcare quality improvement consulting companies serving the states of Alabama, Indiana, Kentucky, Mississippi, and Tennessee.

Web site: www.atomAlliance.org

 We share expertise to advance the goals of the [National Quality Strategy \(NQS\)](#) and support the [Centers for Medicare & Medicaid Services \(CMS\)](#) in efforts to change the course of healthcare in our nation for the better.

 We are focused on three aims: better patient care, better population health, and lower health care costs through improvement.

Qsource

- ❖ Qsource has been the Quality Improvement Organization (QIO) serving the state of Tennessee for more than 40 years.
- ❖ Under the new CMS QIO program structure, Indiana hospitals, healthcare providers, and Medicare beneficiaries will now be served by Qsource staff.

❖ www.Qsource.org




Initiatives


- ❖ Reduce healthcare associated infections (HAIs)
 - ❖ CLABSI, CAUTI, CDI, and VAE
 - ❖ Use evidence-based HAI prevention strategies
 - ❖ Focus on antimicrobial stewardship programs
- ❖ Coordinate care in order to reduce unnecessary hospital admissions and 30-day re-admissions
 - ❖ Support community meetings and promote care coordination activities
 - ❖ Host face-to-face and virtual learning events



Indiana Associates


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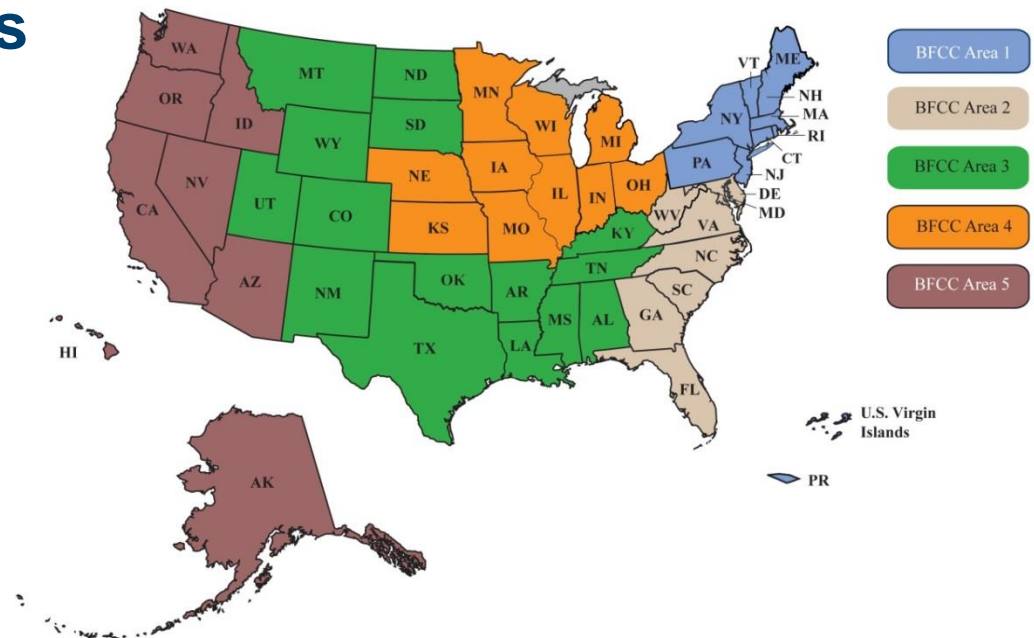
 812-243-3236



The Beneficiary and Family Centered Care Quality Improvement Organization (BFCC-QIO)

Cheryl Cook, RN, Program Director

- On August 1, 2014, KEPRO became the Beneficiary and Family Centered Care Quality Improvement Organization (BFCC-QIO) for the Centers for Medicare & Medicaid Services (CMS) Areas 2, 3, and 4.
- The BFCC-QIO is responsible for beneficiary complaints and the discharge appeal process.



Memorandum of Agreement (MOA)

- **QIOs are required to develop, implement, and revise MOAs, acceptable to CMS, with certain providers of health services (i.e., hospitals, critical access hospitals, skilled nursing facilities, home health agencies, and Medicare Advantage Organizations [MAO]) who wish to participate or continue to participate in the Medicare program, as specified in the contract with the Secretary.**

Hospital Discharge Appeals Process Overview

The provider or the MA plan issues the notice.

The beneficiary or representative calls for an appeal.

KEPRO requests the record.

The record is reviewed by the KEPRO physician.

The beneficiary and facility (and plan if necessary) are notified of the decision.

KEPRO Availability



- **KEPRO appeals staff work (local time):**
 - Weekdays: 9 am - 5 pm
 - Weekends: 11 am - 3 pm
 - Holidays: 11 am - 3 pm
- **Voicemails may be left during all other hours.**

Cheryl Cook, Program Director for Areas 2 and 4

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Questions



All material presented or referenced herein is intended for general informational purposes and is not intended to provide or replace the independent judgment of a qualified healthcare provider treating a particular patient. KEPRO disclaims any representation or warranty with respect to any treatments or course of treatment based upon information provided.

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Evaluation & Follow-up

- Webinar funded by CMS through the *Partnership for Patients*
- CMS reviews results and wants 80% of participants to evaluate educational sessions
- Please complete the simple three question evaluation by Sept. 18, 2014:
https://www.surveymonkey.com/s/2014_09_09_TheNewQIOProgram
- Link to evaluation and webinar recording will be distributed to participants within one week

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