

**Pella Regional Health Center  
Raises Quality Performance  
Awareness to Achieve Success  
in Year One of MIPS**

# PELLA REGIONAL HEALTH CENTER HIGHLIGHTS



**Bed size:**  
25



**Physician count:**  
100+



**Location:**  
Pella, Iowa

- In 2017, Pella needed to prepare for the new MIPS program that would evaluate their physicians' performance and impact Medicare reimbursement.
- Amanda Schwerdtfeger, Certified Professional in Health Care Quality (CPHQ) clinical informatics advisor, was actively involved in developing a MIPS reporting plan that included working closely with Medisolv.
- In addition to implementing a wide range of educational tactics to strengthen quality performance awareness, Amanda and team used data from Medisolv's ENCOR software to initiate their own performance driven incentive program.
- Pella achieved an outstanding 2017 MIPS score that qualified them for the Exceptional Performance Bonus money.

## MEET THE TEAM



Amanda Schwerdtfeger  
Clinical Informatics Advisor  
*Pella Regional Health Center*



Susan Moschella  
Senior Manager, MIPS Solution  
*Medisolv, Inc.*



# THE CHALLENGE

## Preparing physicians – who were not actively engaged with electronic reporting – for a pivotal year of electronic quality reporting

The modern physician has demanding challenges they face each day. Over the last decade, they have also been tasked with adopting a new way of documenting their quality measures. Since the inception of the EHR and the subsequent increasing requirements to adopt that EHR technology, physicians have started to feel the strain of their time and resources to adopt this new system.

The physicians at Pella Regional Health Center in Pella, Iowa were no different. Add to this the fact that the Centers for Medicare and Medicaid (CMS) began requiring physicians to report their quality data through a variety of regulatory programs which, if not completed, would penalize physicians with reduced Medicare reimbursement funds.

But in 2017, Pella's physicians faced a greater hurdle with the new CMS Quality Payment Program (QPP)—a program that aims to streamline the various physician reporting programs into one comprehensive program with the goal of improving physicians' quality of care.

MIPS, the Merit-Based Incentive Payment System, is one method of reporting to

QPP and the method that Pella elected to pursue. Through MIPS, physician Medicare reimbursements are either incentivized or penalized based on their performance. So, while penalties for poor performance are a possibility, physicians can receive significant bonus funds if they perform well.

As a Certified Professional in Health Care Quality (CPHQ) clinical informatics advisor for Pella, Amanda Schwerdtfeger focuses on clinical quality and works closely with physicians to help them succeed in quality programs like MIPS.

Amanda had a few goals for the first year of MIPS: finalize a strategy to ensure clinicians were aware of relevant performance data and sufficiently educated on the importance of being actively engaged with quality; maximize MIPS results; transition their quality reporting software from a mere data tool to a performance improvement tool.

"We wanted to first put a strong focus on quality, improving existing systems and processes and communicating well with staff. Then we wanted to work on analyzing the data for the best possible submission results," Amanda said.



# THE SOLUTION

## Strengthening awareness through individualized physician dashboards and quality boards

Throughout 2017, Pella strived to improve quality awareness, engagement and visibility among their physicians. In order to accomplish this goal, Amanda knew they needed to figure out an effective way to get data in front of the Pella physicians, consistently, without overwhelming them.

Pella started to actively raise awareness through individualized physician dashboards and quality boards. The dashboards, which were shared each month with physicians, included a wide range of relevant quality performance scores. Amanda made sure to avoid data overload by focusing on one specific measure for each monthly dashboard.

The quality boards, on the other hand, were hung up in staff only clinic areas and highlighted educational information on physician performance and quality each month.

“Getting data in front of the physicians

regularly over the course of 2017 was a big shift for us. Since it was tied to a quality incentive, there was more awareness and engagement, and a greater tangible



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connection. The physicians gained a better understanding of the importance of good quality performance for the organization,” Amanda shared.



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## Using ENCOR to assess and address systemic issues

For over five years, Pella used Medisolv's ENCOR software, a quality reporting and management solution designed to assist hospitals and clinicians in monitoring and reporting their eQMs to CMS and The Joint Commission. The software was mainly used for submissions in the past, and Pella planned to use ENCOR to submit for all categories of MIPS as well. However, Pella wanted to expand its function in 2017 by using ENCOR to drive performance improvement and move them toward their goal of maximizing MIPS results.

Amanda evaluated eQm data in ENCOR to optimize MIPS results for maximum bonus potential. In addition, she worked hand in hand with Medisolv.

"We had several meetings with Susan Moschella at Medisolv. She worked closely with us to help identify our strengths and provide ongoing recommendations to ensure we would end up with high results," Amanda said.

Susan is the Senior Manager of MIPS measures at Medisolv. "We began by figuring out which eQMs would benefit Pella's physicians the most when reporting to MIPS," Susan explained.

To receive the most points possible in the Quality category of MIPS, physicians should report six quality measures.

"We considered how difficult each measure would be to improve and what the potential benefit could be for their Medicare reimbursement funds," continued Susan.

As Pella physicians started using ENCOR to drill down to the patient level details and track their performance, Amanda got some helpful feedback about certain measures. For example, they noticed that the measure Diabetes Hemoglobin A1C Greater than Nine Percent wasn't being accurately reported.

"MIPS requires Eligible Clinicians to report one outcome measure. At the beginning of 2017, the only outcome measure that we had available was Diabetes Hemoglobin A1C Greater than Nine Percent. A few clinicians who were really engaging with ENCOR and the MIPS submission process noticed that some of their patients weren't actually diabetic. Based on that feedback, we started looking into how that measure was being mapped and what was going into the data. We found out that it was an issue with our problem list and were able to work on strategies to improve it moving forward. ENCOR gave us the visibility we needed to understand we had a problem in the first place and work toward a process that would result in more accurate patient records moving forward."

# Developing an Executive Quality Team to discuss quality performance and MIPS

At the end of 2016, Pella established a Clinic Quality Executive Team that included representatives from the physician side, administration, executive leadership and representatives from the quality and IT departments. They had their first official meeting at the beginning of 2017—and the team still meets today.

These biweekly meetings during the first year of MIPS allowed the Executive Quality Team to have open and noteworthy discussions about quality measures and data management. They also provided an

opportunity for physicians to gain a deeper understanding of the risks and awards associated with quality performance.

“There was a lot of great dialogue that came out of those meetings. It helped our physicians to understand the importance of succeeding in quality reporting. 2017 was a big learning year for Pella Regional.”

Using the quality team as a firm foundation, Pella further developed and strengthened their strategy to prepare for MIPS reporting in 2017.

# Using performance from ENCOR to incentivize or penalize physicians

Pella took their quality and engagement initiatives very seriously. So seriously in fact that they developed a unique and innovative way to incentivize Pella physicians even further.

At the start of 2017, Pella initiated a program that would either incentivize or penalize their physicians based upon their performance with certain quality measures—similarly to MIPS—and overall engagement with the organization.

The program served as yet another valuable and educational experience for the Pella physicians. If they missed the mark, the physicians were able to work with Amanda and team to understand what opportunities they had and how to improve.

“Every physician was able to earn a quality incentive by the end of 2017. We were thrilled.”



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Implementing an incentive program, in addition to MIPS, helped to achieve Pella’s goal of putting a greater emphasis on quality performance during a significant and transitional year in quality performance. Amanda and her team plan to continue the program in 2018.

# THE RESULTS

## Outstanding efforts in MIPS reporting pays off

All of Pella's efforts for a successful 2017 MIPS submission paid off. Pella was ready to submit by January, achieving an outstanding final score of 97.6—qualifying them for the Exceptional Performance Bonus money, on top of the incentive money that CMS will hand out for 2017 top performers. Pella earned an impressive 58.8 points in the Quality category. They even received bonus points for reporting electronically using Medisolv's ENCOR product.

Amanda credits Pella's excellent score and their improvements to a greater awareness among the Pella physicians. With more visibility on and communication about the data, physicians started to pay closer attention to their documentation, because they knew that the high quality of care that they provide in each visit would never be reflected in the data unless they documented it correctly.

During the process of helping physicians to engage more with quality performance and prepare for MIPS, Amanda learned how crucial it is to have a plan in place for

quality reporting and provide the necessary resources and tools that physicians need to succeed.

"I don't think I can overstate the importance of sharing data and sharing it as often as you can. If you are aware of your performance data, you'll be more aware of what you're doing to impact those numbers. Having a good strategy to share data with our clinicians was one of the most important actions we took in 2017," Amanda said.

Amanda also appreciates the Medisolv team for guiding them through the entire submission process and making sure they were ready for final submission.

"We were a little nervous since CMS changed their technical submission requirements at the last minute, but Susan and her team did a great job. They made sure that everything was ready to go and in the right format for final submission. It was really nice to know that we had someone we could count on. It took the burden off us, because we knew we could trust the Medisolv team to take care of it."



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