POM ACO
TRANSFORMING HEALTH CARE TOGETHER

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An eCQM Leap: POM's Strategic Transition into the Future

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Today's Presenters

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Physician Organization of Michigan ACO

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University of Michigan Health - Sparrow Care Network

Ken McCormick

EVP, Client Services
Medisolv

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In this webinar we will:

Agenda

- CMS APP Requirements Overview
- eCQM Implementation Strategy And Execution
- Lessons Learned
- Next Steps for POM
- Questions

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One vendor for your regulatory reporting, value-based care, and population management solutions and services on an award-winning quality measurement platform that is integrated with provider data systems

Founded:
1999

Headquarters:
Columbia, MD (Suburban DC)

Market Served:
Hospitals & Health Systems
Providers/Clinicians/Provider Organizations
Federal & State Government
Quality Reporting Organizations
Payer Organizations

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Physician Organization of Michigan ACO Overview

POM ACO
TRANSFORMING HEALTH CARE TOGETHER

6	Provider Organizations
77	TINs
1,101	Practices
~6,800	NPIs (Eligible Clinicians)
500	NPIs in more than 1 TIN
40	Unique EHRs
55,000	Beneficiaries

MSSP ACOs

Regulatory Review

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CMS Web Interface Transition

2021

- CMS establishes the APP Reporting Framework and announces the sunset of CWI measures.
- ACOs may submit CWI measures, eCQMs, CQMs

2022

- QRDA III vs. QRDA I file discovery.
- ACOs may submit CWI measures, eCQMs, CQMs.

2023

- CMS Announces the new Collection Type Medicare CQMs.
- ACOs may submit CWI measures, eCQMs, CQMs
- eCQM Incentive available.

2024

- ACOs may submit CWI measures, eCQMs, CQMs, Medicare CQMs.
- Last year for CMS Web Interface Measures.
- eCQM Incentive available.

2025

- **ACOs must submit eCQMs or Medicare CQMs.**
- CMS has proposed the removal of CQMs as a collection type under APP.
- CMS has proposed to keep the eCQM Incentive available.

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APP Measure Set: eCQMs/CQMs/Medicare CQMs

2024

Quality ID	Measure Title	Collection Type
001	Diabetes: Hemoglobin A1c (HbA1c) Poor Control	eCQM/CQM/ Medicare CQM
236	Controlling High Blood Pressure	eCQM/CQM Medicare CQM
134	Preventive Care and Screening: Screening for Depression and Follow-up Plan	eCQM/CQM Medicare CQM

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APP Plus Measure Set: eCQMs/Medicare CQMs

2025 Proposed

Quality ID	Measure Title	Collection Type
001	Diabetes: Hemoglobin A1c (HbA1c) Poor Control	eCQM/ Medicare CQM*
236	Controlling High Blood Pressure	eCQM/ Medicare CQM*
134	Preventive Care and Screening: Screening for Depression and Follow-up Plan	eCQM/ Medicare CQM*
113	Colorectal Cancer Screening	eCQM/ Medicare CQM*
112	Breast Cancer Screening	eCQM/ Medicare CQM*

**Note: CMS has proposed to remove the CQM collection type from the 2025 APP measure set.*

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APP Plus Measure Set: eCQMs/Medicare CQMs

2026 Proposed

Quality ID	Measure Title	Collection Type
001	Diabetes: Hemoglobin A1c (HbA1c) Poor Control	eCQM/ Medicare CQM*
236	Controlling High Blood Pressure	eCQM/ Medicare CQM*
134	Preventive Care and Screening: Screening for Depression and Follow-up Plan	eCQM/ Medicare CQM*
113	Colorectal Cancer Screening	eCQM/ Medicare CQM*
112	Breast Cancer Screening	eCQM/ Medicare CQM*

Quality ID	Measure Title	Collection Type
305	Initiation and Engagement of Substance Use Disorder Treatment	eCQM/ Medicare CQM*

**Note: CMS has proposed to remove the CQM collection type from the 2025 APP measure set.*

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APP Plus Measure Set: eCQMs/Medicare CQMs

2028 Proposed

Quality ID	Measure Title	Collection Type
001	Diabetes: Hemoglobin A1c (HbA1c) Poor Control	eCQM/ Medicare CQM*
236	Controlling High Blood Pressure	eCQM/ Medicare CQM*
134	Preventive Care and Screening: Screening for Depression and Follow-up Plan	eCQM/ Medicare CQM*
113	Colorectal Cancer Screening	eCQM/ Medicare CQM*
112	Breast Cancer Screening	eCQM/ Medicare CQM*

Quality ID	Measure Title	Collection Type
305	Initiation and Engagement of Substance Use Disorder Treatment	eCQM/ Medicare CQM*
487	Screening for Social Drivers of Health	eCQM/ Medicare CQM*
493	Adult Immunization Status	eCQM/ Medicare CQM*

**Note: CMS has proposed to remove the CQM collection type from the 2025 APP measure set.*

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Solution Architecture

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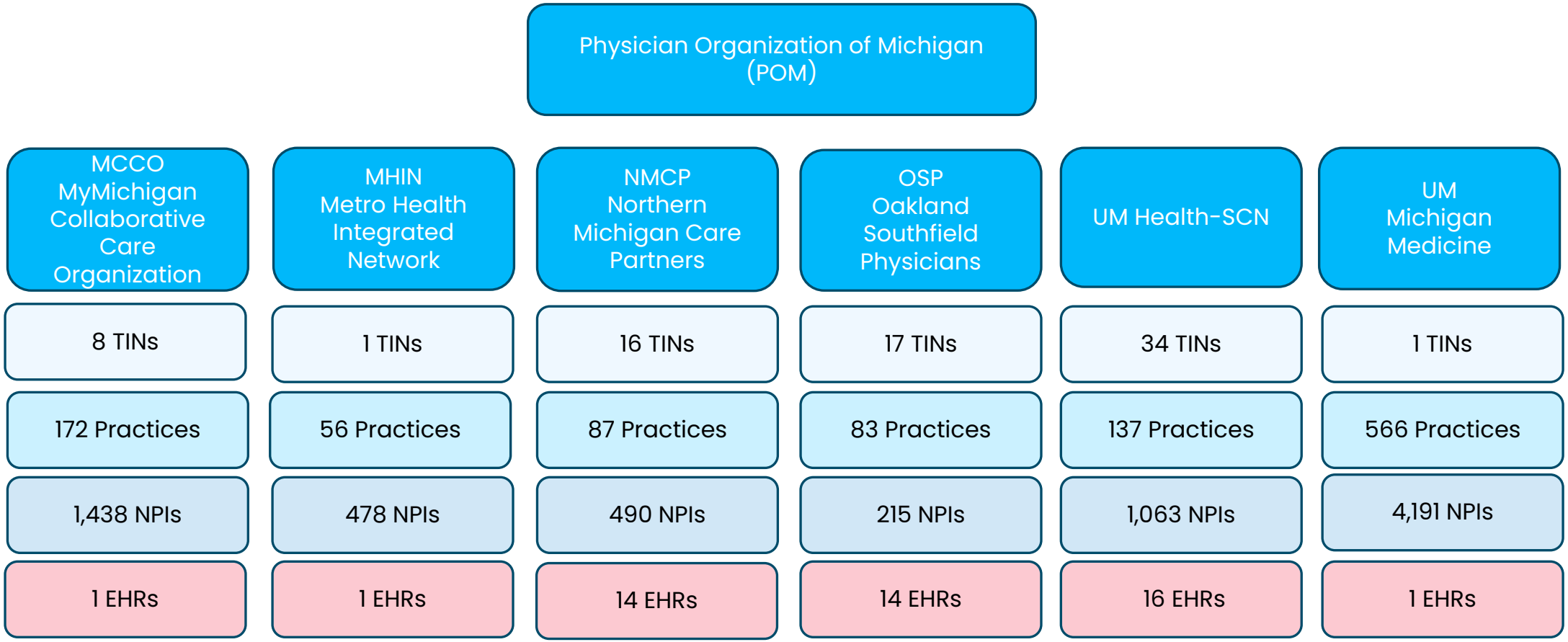

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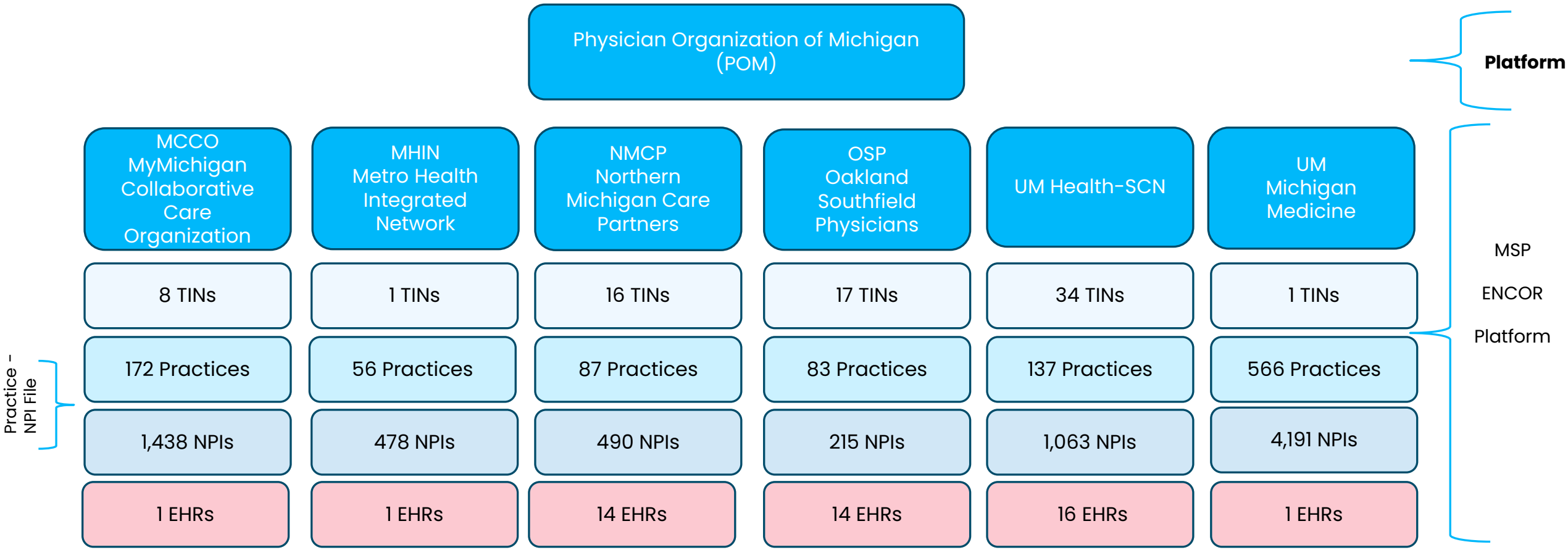

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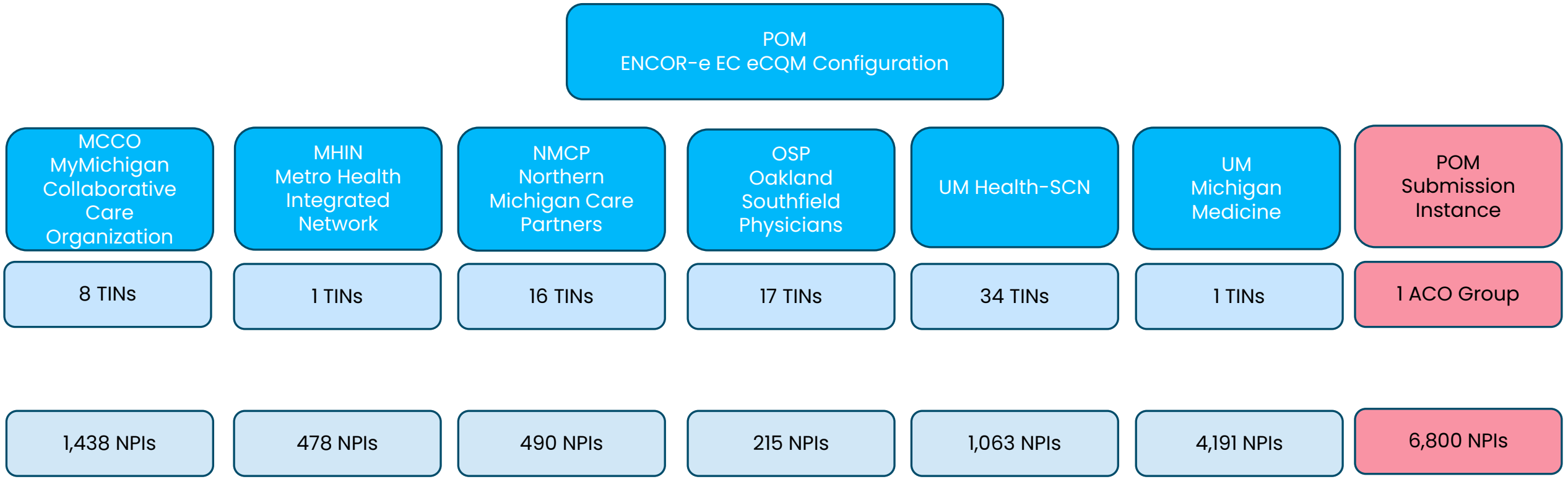

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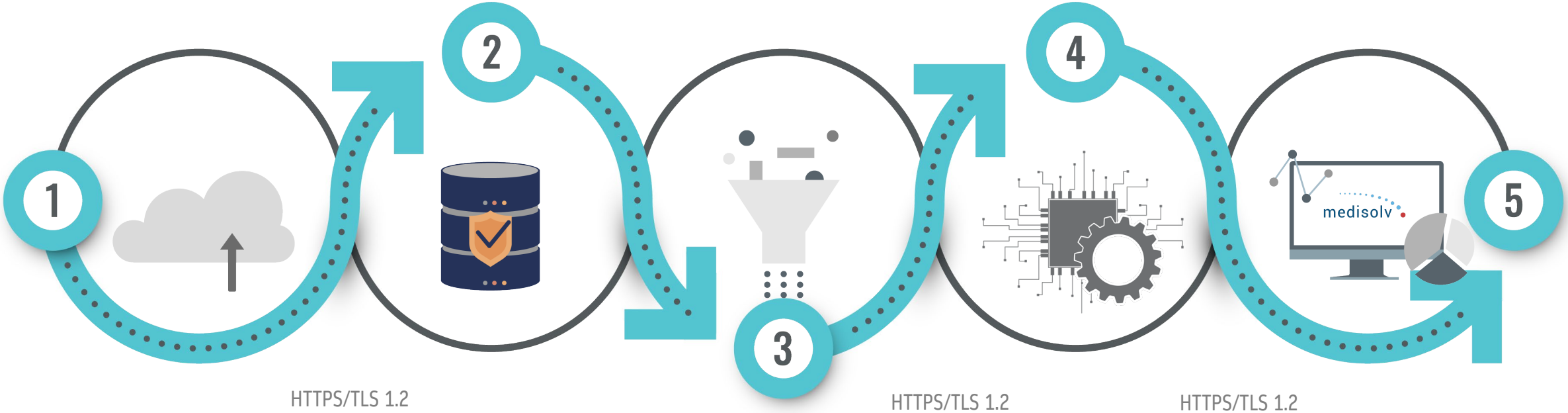
POM Data Flow and Management



HTTPS/TLS 1.2 HTTPS/TLS 1.2 HTTPS/TLS 1.2

EHR Data Acquisition
Medisolv Submission Portal
QRDA I Upload
Upload -> Review -> Publish

QRO

CDM
Data aggregated in Medisolv's single-tenanted Common Data Model (CDM) Database

Standardize
Data normalized and deduplicated to be used for eCQM and measure calculation.

ENCOR
Measures are calculated using Medisolv's ONC Certified Measure Engine

QRO & ACO

Platform
Results are loaded into the Medisolv platform for data visualization & analytics

QRO & ACO

All data at rest is encrypted using industry-standard technologies. Our secure single-tenant cloud platform is powered by Microsoft Azure.

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Medisolv Submission Portal

Transfer Files Securely

Quickly and easily transfer your data directly to Medisolv using the Medisolv Submission Portal

Welcome to the Medisolv Submission Portal. Using our portal, you can easily and securely upload your data directly to Medisolv. Medisolv Submission Portal provides a safe mechanism to transfer PHI between your organization and Medisolv using end-to-end encryption. Meaning your data is encrypted both during transit and at rest. We use the industry best practice standards to transfer your data. So, rest assured that your data is safe with Medisolv. Let's get started.

Enter

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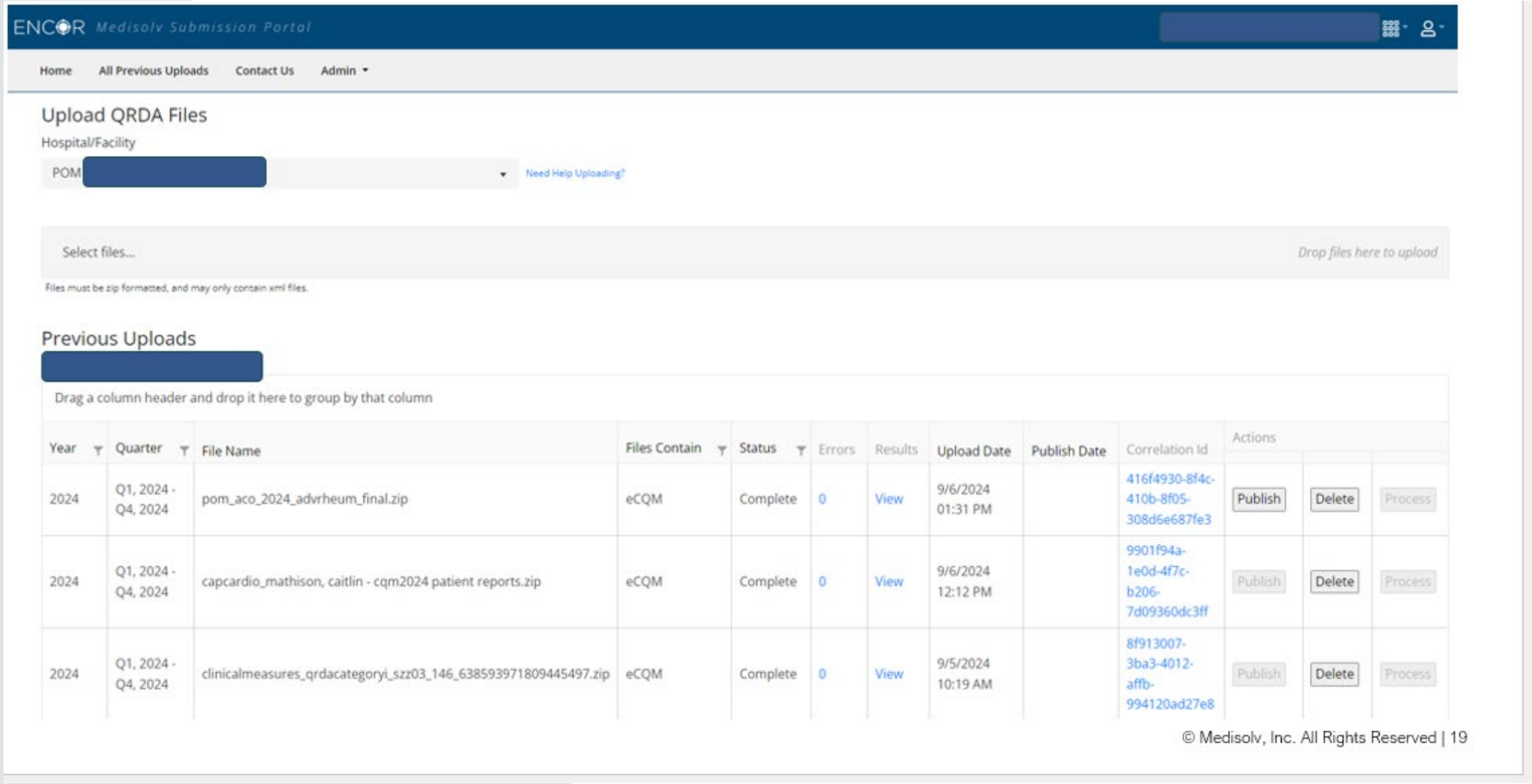
Medisolv Submission Portal - QRDA I Upload



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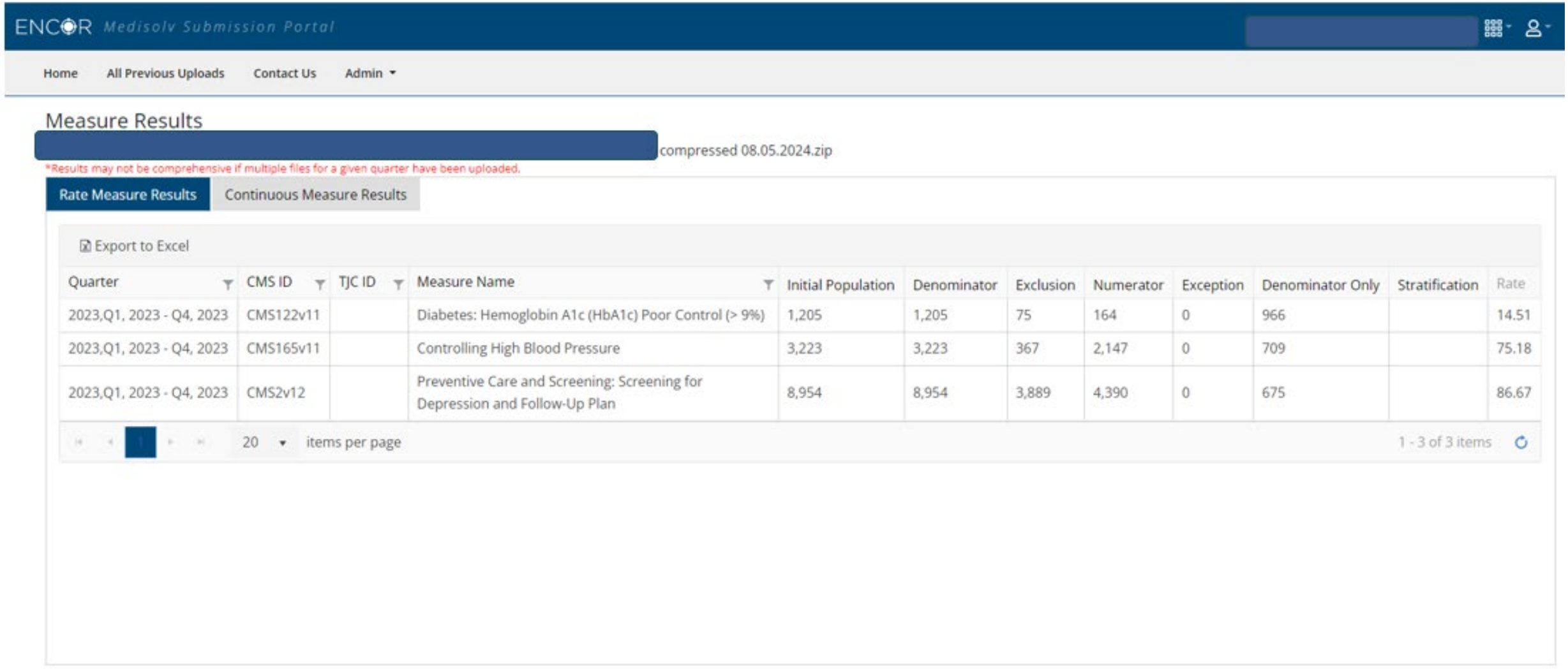
Medisolv Submission Portal - QRDA I Upload



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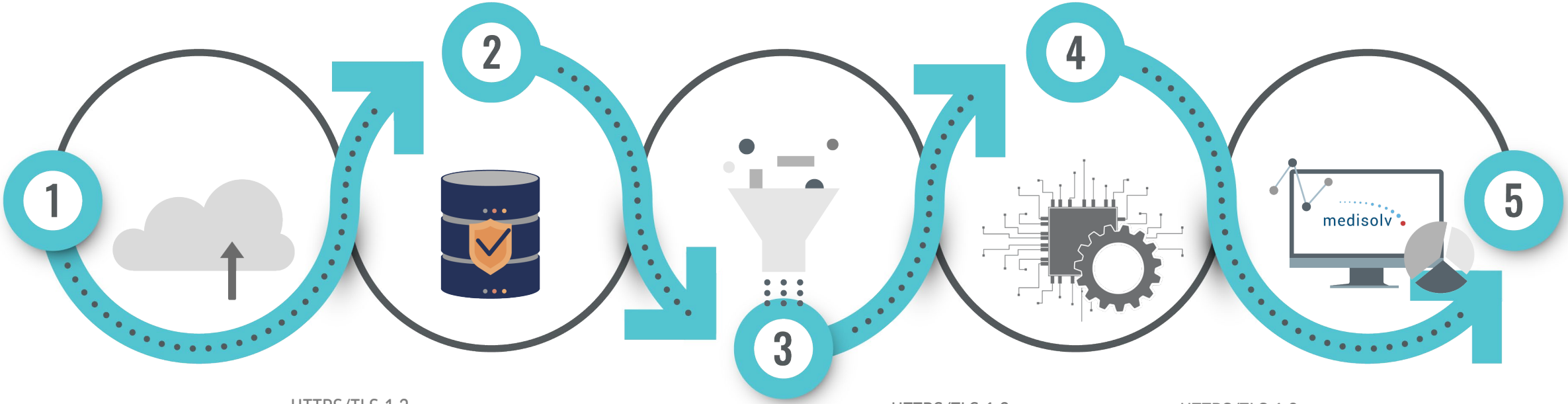
POM Data Flow and Management



EHR Data Acquisition

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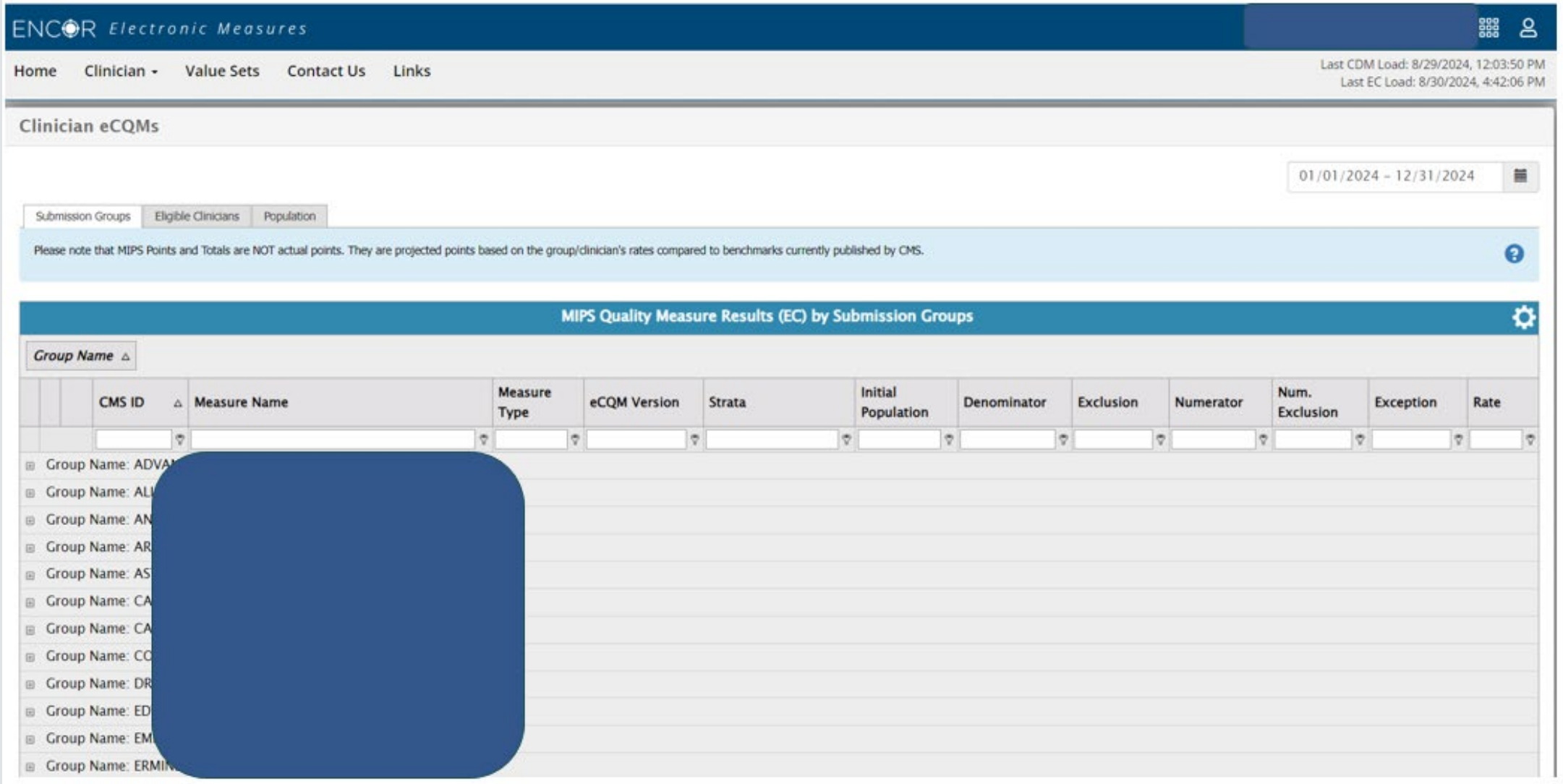
ENCOR eCQM Measure Engine



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ENCOR eCQM Measure Engine

CMS165v12- Controlling High Blood Pressure

Result: In Numerator

Conditions | Encounters | Medications | Procedures | Vital Signs | Lab Tests | Allergies/Adverse Events | Insurance

QRDA Export (Full Record) » | BSON Export (Deidentified Full Record) »

Vital Signs

Drag a column header here to group by that column

Case Identifier	Codes	Description	Result Description	Start Time	End Time	Author Time	EHR Instance	Status	Used
	Loinc:8480-6	Systolic blood pressure	124 mm[Hg]	4/17/2024 8:48:00 AM	4/17/2024 8:48:00 AM	4/17/2024 8:48:00 AM	MCCO – [redacted] – MyMichigan Medical Center Midland – EPIC	performed	
	Loinc:8462-4	Diastolic blood pressure	80 mm[Hg]	4/17/2024 8:48:00 AM	4/17/2024 8:48:00 AM	4/17/2024 8:48:00 AM	MCCO – [redacted] – MyMichigan Medical Center Midland – EPIC	performed	
	Loinc:8462-4	Diastolic blood pressure	72 mm[Hg]	7/7/2023 8:16:00 AM	7/7/2023 8:16:00 AM	7/7/2023 8:16:00 AM	UM – [redacted] – Regents Of The University Of Michigan – EPIC	performed	
	Loinc:8480-6	Systolic blood pressure	105 mm[Hg]	7/7/2023 8:16:00 AM	7/7/2023 8:16:00 AM	7/7/2023 8:16:00 AM	UM – [redacted] – Regents Of The University Of Michigan – EPIC	performed	
	Loinc:8480-6	Systolic blood pressure	122 mm[Hg]	4/13/2023 7:56:00 AM	4/13/2023 7:56:00 AM	4/13/2023 7:56:00 AM	MCCO – [redacted] – MyMichigan Medical Center Midland – EPIC	performed	

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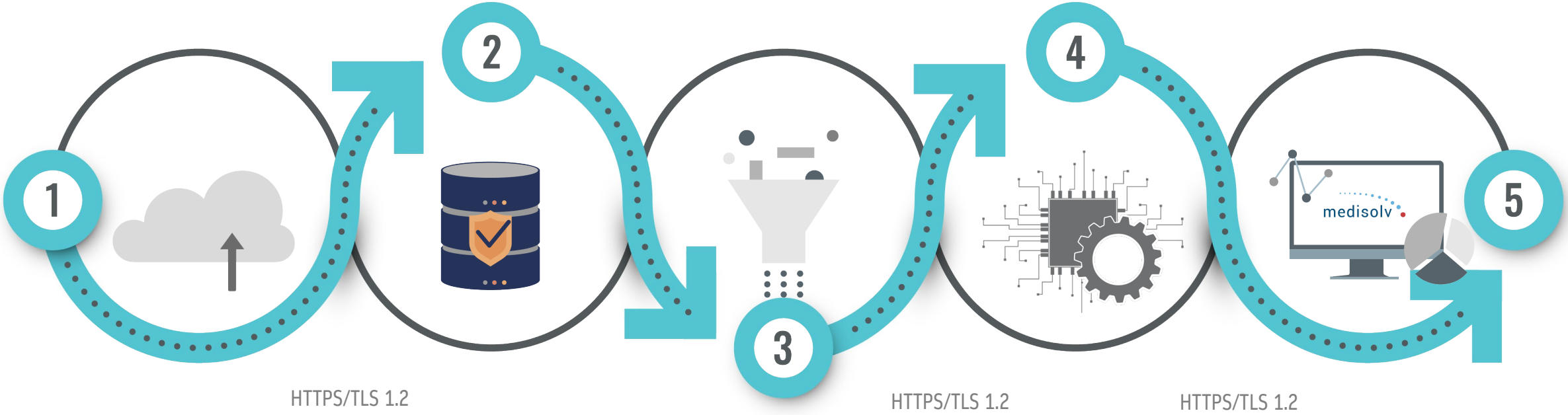

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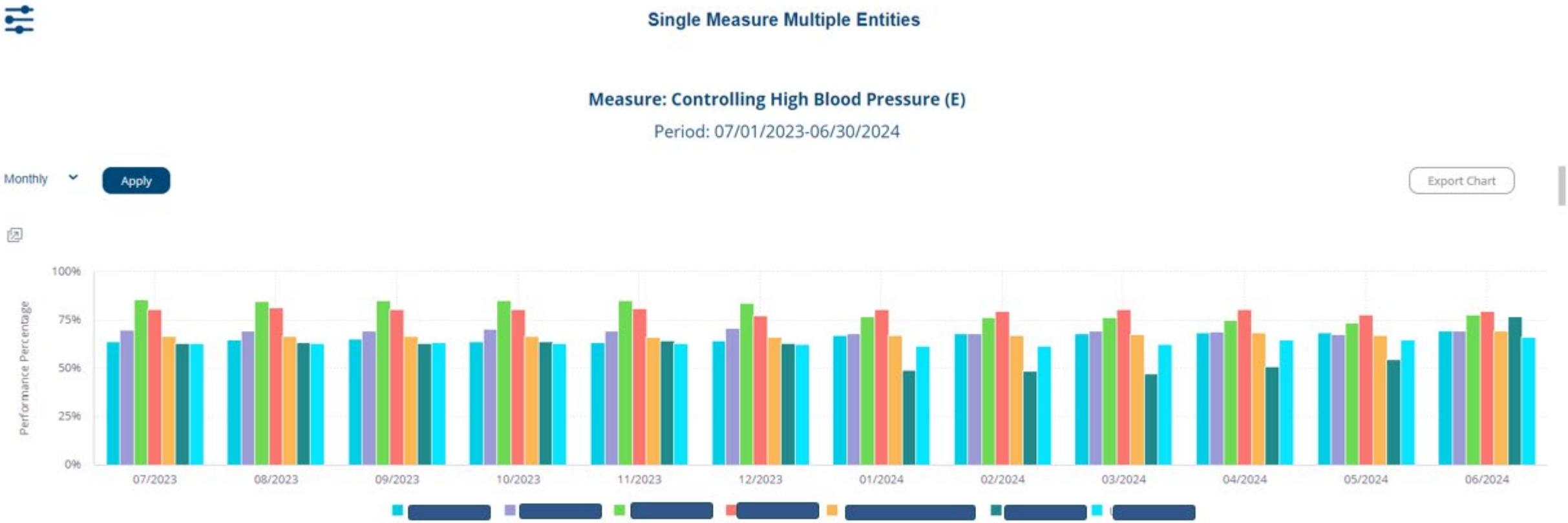
Platform Analytics



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Platform Analytics

Jul 2023 - Sep 2024 | Monthly | Ambulatory Measures | Hide Empty Indicators | Corporate View | Actions | CLEAR ALL

Group Name	Summary
[redacted]	3 Measures

Measure Name	Oct-2023	Nov-2023	Dec-2023	Jan-2024	Feb-2024	Mar-2024	Apr-2024	May-2024	Jun-2024
Controlling High Blood Pressure (E)	64.10	63.48	64.16	66.96	68.19	68.00	68.68	68.43	69.41
Diabetes: Hemoglobin A1c (HbA1c) Poor Control (> 9%) (E)	23.15	22.50	22.76	31.07	28.95	29.88	27.46	26.74	26.93
Preventive Care and Screening: Screening for Depression and Follow-Up Plan (E)	78.66	79.25	77.25	72.59	72.45	72.25	78.20	81.72	82.19

1 | 10 items per page | 1 - 3 of 3 items

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At A Glance

POM has produced 423 QRDA I files

- MyMichigan Collaborative Care Organization 59
- Metro Health Integrated Network 17
- Northern Michigan Care Partners 118
- Oakland Southfield Physicians 58
- UM Health-SCN 86
- POM UM - Michigan Medicine 85

- **Largest QRDA I file contained 371k patients**
- **We have received QRDA I files from 35 distinct EHRs**
- **3m Patients**
- **13m Encounters**
- **67m Procedures**
- **1m Labs**

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eCQM Implementation Across a Multi-EHR Practice Environment

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Implementation Strategy & Timeline

2021-2023
Initial work begins. eCQM work group formed.
Work paused during CMS changes to QRDA requirements

August 2023
Work resumed

Sept-Dec 2023
Requirements reviewed; gap analysis begins; practices assessed for EHR version and QRDA I file readiness

Dec 2023
Evaluation: vendor solutions; contracts signed; practice leaders engaged

Jan-March 2024
Implement file upload tool
Target Practices for 2023 Pilot
Perform QRDA I file pilot submissions and evaluation
Implement aggregation tool

April 2024
2023 Calendar Year QRDA I file submission from practices

Apr 2024 – Feb 2025
Quarterly submission cadence for quarterly QRDA I files (Q1-4 2024)

Jan-Feb 2025
Planned implementation of new eCQMs: Breast and Colorectal Cancer Screening Measures (if finalized)

Feb 2025
Planned submission of eCQM and CWI data to QPP for PY2024

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Getting Started

1 Formed eCQM Workgroup

Mission: Successfully submit aggregated electronic Clinical Quality Measure (eCQM) data to CMS for PY25 during Q1 2026.

Scope of work: Technical development and submission of QRDA I files, development of tips and tricks for EMRs, guidance for clinical workflows, drive performance/goal achievement.

Membership: Chaired by Physician leader, assigned a project manager from ACO, each Provider Organization nominates three representatives comprised of a project leader, IT lead, and quality/abstraction lead.

Decision making: reports to ACO internal structure and BOM. eCQM workgroup is more functional in nature, however when decisions are necessary, PM will attempt to bring forward evidence-based recommendations for majority vote.

2 Identify Key Resources

Resources to complete project tasks

- Leadership support
- PM/Admin Team facilitation and knowledge of work
- Provider organization direct involvement with SMEs and technical support
- Budgeted funding

3 Develop Project Plan

POM eCQM project plan included:

- Environmental Scan
- Inventory of EMRs by TIN
- Expectation Setting
- Decision of Reporting Type
- Vendor Selection
- User Access Management
- Training
- Data Submission and Ongoing Management
- Report Dissemination
- Quality Improvement

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Initial Evaluation: What Will it Take to Use eCQMs?

Requirements

- Review of CMS requirements

EHR Current State Assessment

- What does the EHR landscape look like now?

EHR Capability Evaluation

- What EHRs do we have in our environment?
- What EHRs are missing key functionality for eCQMs?

Reporting Requirements: CMS and Internal Stakeholder Requests

- Frequency of data collection
- Frequency of data presentations to stakeholders

Establishing New Practice Participation Requirements

- Update POM ACO's requirements for participation to reflect eCQM technical requirements

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Collaboration with Medisolv for Digital Solution

Concept of implementing eCQMs was attractive and wanted the opportunity to submit both eCQMs and CWI. POM could learn from a first eCQM submission while still successfully meeting requirements through CWI.

Medisolv was chosen because of their ability to meet practices where they were at instead of demanding practices to invest money into other EMRs or upgrades.

Centralized Dashboard provided easy mechanism to review performance across multiple practices.

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QRDA I Files
Lessons Learned

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EHR Evaluation

Which EHR can?

- Can it generate a QRDA I?
- Is it CEHRT?
- Do you have plans to switch EHRs in the next 12 months?

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Addressing Implementation Challenges

1 Not all EHRs can Generate QRDA I

- Troubleshooting with each practice
- Some EMRs charge for files
- Some EMRs don't meet POM's timelines for reporting to POM's system.
  - Only allow data pulls 1x/year

2 Technical Errors and Mapping

- Needed engagement of technical leads, clinicians, quality leadership

3 Handling Difficult Practice Conversations

- Ensuring a two-way dialogue between practice and ACO
- Accountability needed to ensure all participants meet requirements for reporting.

4 Replacing Unstructured Data

- Understanding where data gaps exist to replace any unstructured data required for the measures.

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Keys To Success

Buy-In

All participants needed to Buy-In: Leadership, SMEs, Practices

Education

Educational Initiatives for Staff

Strategy

Long-Term Strategies for Digital Quality Improvement

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Next Steps

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What Comes Next

1 Compliance/Gaps in EHR Participation

- 2025 CEHRT Requirements demand all practices be on CEHRT by July 1, 2025.

2 Opportunities for Improvement

- Understanding the difference in data collection between CWI vs eCQMs and the difference in performance scores.
- Improving scores with frequent reviews and quality plans for measure performance improvement.

3 2024 eCQM Submission

- Implementing the new required eCQMs (if finalized).
- Updating eCQM specs, validating measure performance, submission of eCQMs and CWI measures in Feb 2025.

4 Growing Culture of Trust

- Fostering the culture of trust and understanding within POM.

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Best Practices

- Commit to climbing the mountain
- Get stakeholders involved
- Map out your milestones
- Complete inventory with every TIN/Practice/EHR
- Update your requirements for current and future TINs
- Begin testing QRDA capabilities now
- Partner with a vendor if possible

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Q&A

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