



## Healthcare Quality Measurement Reporting and Feedback System


Project Description & What We Tested	
<p><b>Vendor:</b> IMAT Solutions, Inc.</p> <p><b>State Contact(s):</b> Melissa Lauer, EOHHS/SIM</p> 	<p>SIM has contracted with IMAT Solutions to build the Healthcare Quality Measurement Reporting and Feedback System. The IMAT platform will <b>support the collection, validation, normalization, indexing, codifying and sharing of data for participating healthcare entities within the State of Rhode Island to support quality measurement and reporting.</b> It will allow healthcare providers to share their data once into the system - and aggregate it with data from patients, hospitals, and provider groups, Accountable Care Organizations (ACOs), Patient-Centered Medical Homes (PCMH), and insurance payers to support the calculation of more accurate clinical quality measures. Once the data is aggregated, it can be reported to whichever entities need to receive it.</p> <p>Funds Allocated: \$1,750,000</p>
Milestones & Accomplishments	Sustainability & Transition Planning
<ul style="list-style-type: none"> <li>• IMAT has completed the procurement and setup of all required hardware</li> <li>• SIM Technology Reporting Workgroup has met regularly since June 2018 and gone through each measure specification to confirm configuration and display settings. IMAT has completed developing the 53 measures in the system</li> <li>• The system will be able to support Aligned Measure Set, RIDOH CCE, Medicaid AE reporting, and more.</li> <li>• Training and data validation for the pilot practices began in March and continued through the end of SIM.</li> <li>• IMAT is in a readiness state to onboard any additional practices that are ready and willing</li> </ul>	<ul style="list-style-type: none"> <li>• EOHHS has 90/10 approval to support this system post-SIM with Medicaid funds. The state match comes from a budget appropriation. The same HIT team continues supporting the implementation of this system under Medicaid funding post-SIM.</li> <li>• EOHHS continues to work to foster relationships with payers to leverage this system in order to reduce the provider reporting burden</li> </ul>
Key Metrics	Challenges
<ul style="list-style-type: none"> <li>• Provider organizations submitting data to the HQMRFS</li> <li>• Provider organizations receiving aggregated and benchmarked data from the HQMRFS</li> </ul>	<ul style="list-style-type: none"> <li>• The original plan was to connect data from RIQI to feed into this system, but insurmountable legal and technical hurdles forced a switch to sourcing data directly from practices</li> <li>• IT timelines and EHR vendors impact timeline estimates beyond our control</li> <li>• In many cases, organizations would like to see the system working before choosing to participate and invest resources</li> </ul>

Impacts:

 Patients


 PCPs


 Payers

 Specialists

 State Government

 Community Mental Health Center Staff

 Hospital & Long-Term Care Staff

 Community Based Organizations