Whitepaper

Enhancing Quality Management to Boost Performance and Improve Health Outcomes

innovaccer

Table of Contents

Quality management strategies in healthcare can be challenging to implement without standardized metrics. Different patients may have widely different problems, even within specialties. To ensure high-quality care, treatments need to be personalized as they don't necessarily always align with standard, template-based processes, making tracking difficult and creating quality gaps. There are high costs associated with lapses in care quality and administrative waste is estimated to account for $200 billion of annual healthcare costs in the U.S. [1,2]

Despite these challenges, healthcare quality metrics can be used to help policies, programs, and services produce and maintain good outcomes. Managing the financial and quality metrics of health plans ensures sustained high-quality care.

Initially, healthcare quality management was based on standard processes determined by patient conditions. Now, the industry recognizes that interactions between patients and professionals involve multiple procedures and processes and managing them holistically improves health outcomes for patients.

Major Challenges to Quality Management

Healthcare professionals seeking to provide exceptional treatment and patient interactions should have a well-defined quality management system to support them. Across various healthcare settings, there are often barriers to quality management, including:

- Healthcare providers might not have adequate policies in place for reporting errors.

- Reporting processes can often be time-consuming and certain mistakes may be written off or considered not worth sharing.

- Instead of analyzing the root cause of a mistake, organizations might penalize the employees, making them more reluctant in reporting their errors. Additionally, a lack of confidentiality might make staff reluctant to admit mistakes.

- Modern healthcare and medicine involve teamwork, collaboration, and communication. Quality management often overlooks the ways different people or departments interact causing defiance in inter- and intra-department communications.

- Trying to fix challenges can create a large and complicated set of new rules or processes.

- An organization may wait until something goes wrong before looking for a solution. It's necessary to be proactive and take preventative measures to fix weak spots before something goes wrong.

Key Standards for Quality Measurement

The Centers for Medicare & Medicaid Services (CMS) notes that quality measures help quantify healthcare outcomes, processes, patient perceptions, and organizational structures that help systems achieve quality goals and provide exceptional healthcare.

CMS [3] and the Agency for Healthcare Research and Quality (AHRQ) [4] say that quality managers in hospitals or other healthcare organizations are most effective when they focus on six key elements:

1. **Patient safety:** Medical care should cause no harm.

2. **Effectiveness:** Services should have clear benefits for patients, and specific medical services should not be presented to patients who do not need them. Neglecting to provide the required treatments and services for patient conditions will deem care ineffective.

3. **Patient-centered care:** Treatment decisions should be guided by the requirements, values, and preferences of the patient.

4. **Timeliness:** The right medical interventions should be provided in a timely manner without harmful delays.

5. **Efficiency:** Equipment, supplies, energy, and ideas should not be wasted.

6. **Equitable:** The quality of care should be consistent across patients, regardless of class, economic status, gender, ethnicity, or other personal characteristics.

Quantifying and prioritizing these quality management standards can ensure that treatments are effective and safe, helping to yield positive outcomes.

Notes on Health Plan Quality Measures [5]

Quality measures reported to members and providers are typically a combination of the key standards aligned with care experiences. Research suggests that the following health plan quality measures should be reported to consumers:

Patient Safety Measures

- Screening, risk-assessment, and care planning to prevent future falls in older adults.

- Screening for osteoporosis for women 65–85 years of age.

- Avoidance of antibiotic treatment in adults with acute bronchitis.

Effectiveness Measures

- The percentage of health plan members receiving recommended care for specific health conditions—most of today's measures address diabetes, cardiovascular disease, musculoskeletal conditions, respiratory conditions, or behavioral health.

- The percentage of health plan members receiving preventive care such as immunizations, smoking cessation counseling, flu shots, and obesity counseling.

- The percentage of health plan members receiving screenings for cancer, glaucoma, chlamydia, and obesity.

Patient-Centeredness Measures

- Health plan members' reports on the care and service they received from the doctors and nurses associated with the health plan.

- Rates of health plan member complaints or appeals over coverage decisions.

Timeliness Measures

- The percentage of health plan members who had an annual visit with a primary care doctor or dental practitioner.

- The percentage of pregnant women receiving prenatal care during the first trimester or postpartum care.

Descriptive measures can also be used to analyze and expand the scope of quality management processes. Measures to assess the health plan's capacity for providing high-quality care and services include:

- Percentage of board-certified physicians

- Status of health plan accreditation

- Number of health plan members

The availability of quality measures varies depending upon the type of health plan—such as health maintenance organizations (HMOs), point-of-service (POS) plans, or preferred provider organizations (PPOs)—and there is always a need for innovation to bring in more holistic and robust metrics.

Strategies for Facilitating the Quality Improvement Process

Communication, engagement, and participation by all stakeholders should be encouraged in the quality improvement (QI) process. It's also crucial to learn stakeholders' priorities and help them take ownership of changes.

Small-scale modifications are easier to manage than large-scale changes and allow payers to refine the new processes, demonstrate their impact on practices, and build increased support from stakeholders. It's also important to keep in mind that QI is an iterative process. Frequent corrections will be made as you learn from each step and identify actions to add to your strategy.

Technology as a Key Enabler of Quality Management

The role of technology in supervising and upgrading care quality at scale has grown dramatically. Today's healthcare services deploy technology to satisfy internal and external stakeholders and to continuously improve quality parameters. Although various quality management tools are routinely deployed to identify quality issues in healthcare delivery, the lack of an integrated approach makes identification difficult.

Implementing a project management framework can help identify and analyze issues as well as create and evaluate solutions. Solving quality management issues can be broken into three steps: identifying problems, creating and implementing solutions, and formulating a plan to evaluate processes. Advanced analytics and technology support each step to continuously deliver high-quality care.

Technology is an integral part of medicine today, increasing efficiency, improving quality, and reducing costs. Other advantages include:

1. Facilitating timely and effective communication between clinicians

2. Reducing medication errors by providing actionable insights

3. Providing timely and accurate information to stakeholders

4. Increasing patient-centered care by bringing all stakeholders together

As information technology continues to impact the healthcare industry, patient safety and quality should always remain at the center.

About Innovaccer

Innovaccer, Inc. is a leading San Francisco-based healthcare technology company committed to making a powerful and enduring difference in the way care is delivered. The company leverages artificial intelligence and analytics to automate routine workflows and reduce manual overhead to facilitate more person-centered care. Its KLAS-recognized products have been deployed all over the U.S. across more than 1,000 locations, enabling more than 37,000 providers to transform care delivery and work collaboratively with payers. Innovaccer's FHIR-enabled Data Activation Platform has been successfully implemented with healthcare institutions, private health plans, and government organizations. By using the connected care framework, Innovaccer has unified records for more than 24 million members and generated more than $600M in savings.

For more information, please visit innovaccer.com.

References

1. Smith M, Saunders R, Stuckhardt L, et al. Institute of Medicine of the National Academies. *The Best Care at Lower Cost: The Path to Continuously Learning HealthCare in America.* Washington, DC: National Academies Press; 2013. www.ncbi.nlm.nih.gov/books/NBK207218/

2. Blumberg, Y. Here's the real reason health care costs so much more in the US. Retrieved from: https://www.cnbc.com/2018/03/22/the-real-reason-medical-care-costs-so-much-more-in-the-us.html

3. Foisey, C. 4 Ways Technology Is Improving Patient Safety. Retrieved from: https://www.healthitoutcomes.com/doc/ways-technology-improving-patient-safety-0001#:~:text=Some%20of%20the%20many%20advantages,and%20encouraging%20patient%2Dcentered%20care.

4. https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/QualityMeasures#:~:text=Quality%20measures%20are%20tools%20that,quality%20goals%20for%20health%20care.

5. https://www.ahrq.gov/patient-safety/quality-resources/tools/chtoolbx/understand/index.html#:~:text=Quality%20measurements%20typically%20focus%20on,by%20comparison%20to%20a%20criterion.

innovaccer

535 Mission Street Floor 14th,
San Francisco, CA 94105
innovaccer.com

📞 +1 415 504 3851

💬 team@innovaccer.com