Meaningful Use Case Study

Southeast Texas Medical Associates LLP – 2005 Davies Ambulatory Award and 2011 Stories of Success case study selection

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Stage One Meaningful Use Goal
To improve care coordination, patient and family engagement and quality measures reporting through real-time data access, auditing and reporting.

Meaningful Use Core Objective and Measure: Improve Care Coordination
Objective: Capability to exchange key clinical information (i.e., problem list, medication list, medication allergies, diagnostic test results), among providers of care and patient authorized entities electronically. Measure: Performed at least one test of certified EHR technology's capacity to electronically exchange key clinical information.

Organizational Background
Located in Beaumont, Texas, Southeast Texas Medical Associates (SETMA) is a multi-specialty clinic of 32 providers and 300 employees. SETMA's electronic health record (EHR) securely connects three clinics, two hospitals, emergency departments, 22 nursing homes, provider residences and six non-clinical locations.

Lessons Learned—Successful Strategies
Immediate access to patient data vital
SETMA realized that overcoming treatment inertia, changing provider and patient behavior, and improving healthcare at the population level could only be accomplished if providers had immediate access to relevant patient and performance data. The group had long used an EHR, but did not have the tools or processes in place to allow real-time performance reporting and auditing to spur care-enhancing behavior. SETMA concluded that plans to improve patient-centered care rested squarely on its ability to audit provider performance and patient information in real-time against national quality-of-care standards.

The goal was to move from meeting national standards solely on a patient-by-patient basis to measuring treatment across broad patient populations. Using real-time data and benchmarking tools, the SETMA Model of Care provides a framework for making informed decisions and continuously improving the quality of care. The Model of Care is focused on:

- **Tracking**—One patient at a time, at the point of care, all members of the healthcare team (physicians, nurses, clerks) track their performance on meeting preventive, screening and quality care standards embedded within the workflow of the EHR.
- **Auditing**—Over a given patient population, daily audits examine care patterns by provider, practice or the entire clinic—with an eye toward identifying ways to improve care processes. Audits are performed using IBM COGNOS business intelligence (BI)

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functionalities, which work in tandem with the EHR and practice management systems to allow reporting, analysis, dashboarding and scorecards. COGNOS enables SETMA to identify disparities and gaps in care, potential staff training/education needs and opportunities for care improvement.

- **Analyzing**—SETMA analyzes performance audits to measure improvement by practice, clinic or provider—and to understand the *meaning* behind its processes and outcomes measures. Analysis focuses on any care discriminators—such as ethnic, age, gender, payer or treatment frequency disparities—to identify opportunities for care improvement.
- **Reporting**—SETMA publicly reports hundreds of quality measures on its Web site per provider. The goal is to motivate improved performance by providers and increased confidence among patients, who are provided with documented plans of care to help empower their own healthcare involvement. Reporting functions all are designed to overcome both provider and patient "treatment inertia."
- **Improving**—SETMA uses analysis tools to identify appropriate quality initiatives to pursue. One current initiative, for instance, involves the elimination of all ethnic diversities of care for diabetes, hypertension and dyslipidemia.

Results

SETMA meets national quality and best practice standards

Through its EHR and BI data management tools, SETMA has eliminated any uncertainty about whether it is meeting national quality standards—and its providers no longer need to wait months to receive quality reports from payers. COGNOS software allows every provider to examine performance at the point-of-service on more than 200 quality metrics, including age-appropriate screening and preventive care needs.

The discrete data capture capabilities of SETMA's EHR are used to measure, daily, each individual physician's performance against "best practice" standards. Before a patient is seen, for example, his or her chart is searched to determine if standards have been met. Nurses independently initiate the completion of preventive and screening services according to age requirements.

Dashboards enable interventions in response to seasonal patterns and population trends

Software also allowed SETMA to create dashboards that display seasonal outcomes patterns. For instance, trending showed diabetes patients were less healthy from October to January because of lax diet, exercise and medication interventions during the holiday season. Further analysis revealed lower visit and testing frequency as well. As a result, the practice designed a plan to encourage checkups during the holidays. This issue never could have been noticed, or addressed, by looking at individual patient data.

Dashboards allow the identification of population-wide trends that drive changes in practice policies that improve care. SETMA has been able to analyze patient populations by provider, practice, payer, ethnic group and socio-economic group. Some of the metrics reviewed include visit and test frequencies, number of medications taken, changes in treatments and patient education levels.

Disease management drives better high quality

Incorporating comprehensive disease management tools within EHR workflow also has furthered the ability of SETMA providers to deliver timely, quality care. Tools are available to help facilitate best practices in the diagnosis and treatment of diabetes,

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hypertension, lipid abnormalities, renal disease, cardiometabolic risk and congestive heart failure. The ability to perform quality review while in the room with a patient bolsters the provision of optimal care during every encounter. A few noteworthy outcomes of SETMA's data-analysis capabilities include:

- **Treatment compliance** at 98 percent for SETMA providers on preventive services for chronic conditions like diabetes, congestive heart failure and hypertension.
- **Chronic disease management** tools entrenched in the EHR (for chronic kidney disease, diabetes, hypertension, lipid abnormalities and more) enable the creation of highly personalized treatment plans. Even non-nephrology providers, for example, can quickly and accurately assess potential kidney disease.

- **Activity reports** provided the day before a patient visit detail what each patient needs during the next day's visit—including requirements to meet all quality measures being tracked.
- **Personalized patient education** shows progress toward the accomplishment of quality measures. Printers for every exam room allow providers to print personalized education material from the EHR, within workflow, without needing to leave the exam room.

Next Steps

SETMA plans to focus on improving operational results by analyzing outcomes with financial metrics. As a private practice, it must fund everything strictly on the income it generates. The group increasingly plans to use BI to find ways to decrease costs while maintaining or improving care quality. SETMA hopes this analysis will allow its providers to treat more patients with the same revenue stream.

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