

Oregon's Health IT Program: Clinical Quality Metrics Registry

Oregon is transforming health care delivery to provide better health, better care and lower costs to all Oregonians. The ability for health care organizations, as well as the Oregon Health Authority to gather and analyze data is a key component to evaluating system performance, improving patient outcomes and reducing costs for Oregonians.

What is a clinical quality metrics registry?

A statewide clinical quality measures registry will collect, aggregate, and provide standardized clinical data that informs quality improvement efforts, provides reports on outcomes, and educates Oregon's learning health system.

Why is a clinical quality metrics registry needed?

Oregon Health Authority's new incentive-based model pays coordinated care organizations (CCOs) for improved health outcomes and accountability, not for the number of services provided. To show improvement, CCOs must meet certain metrics set by the state and receive incentive payments for doing so.

However, currently there is no standard, automated capacity for the collection, storage, or aggregation of clinical metrics across the state. Clinical metrics typically are reported to multiple programs through manual medical chart reviews, submitting claims and administrative data, or a combination. This information gets stored in many places, meaning:

- ▶ Time, money, and other resources are spent on manual chart reviews that are conducted only to meet reporting requirements.
- ▶ Clinical metrics data collected through manual processes is limited and does not provide the ability to track outcomes across settings and populations
- ▶ Duplicative reporting occurs in order to fulfill requirements for various quality programs
- ▶ Sharing of clinical data is fragmented and cannot be aggregated across systems.

What is being done to address this need?

The Oregon Health Authority is developing a Clinical Quality Metrics Registry. It will collect, aggregate, and provide clinical quality metrics data to support quality reporting programs in the state of Oregon, such as the CCO Incentive Measures Program and the Medicaid EHR Incentive Program. This information will inform benchmarks and enable the determination of incentive payment eligibility.

Benefits

- Improves data transparency and availability
- Decreases administrative burden of data collection and reporting
- Enables a 'report once' strategy to streamline reporting requirements among multiple quality programs
- Supports providers in meeting federal requirements for Meaningful Use incentive payments

The Office of Health Information Technology is working with Oregon's coordinated care organizations and key stakeholders to further define the uses and scope of the metrics registry. Shared goals ensure the development of a value-based tool that supports emerging system needs, accurate reporting and improved health outcomes.

How will the CQMR be used?

The registry will allow health care organizations to review local, regional, and state data to help inform decision-making and measure how they and others are doing to help improve patient care and reduce system costs. It will provide information that can be used to evaluate systems and processes to determine if changes can be made to help meet goals.

- ▶ The Oregon Health Authority and other state programs will use the registry to view both CCOs' and providers' data in a single, streamlined source.
- ▶ CCOs and providers may use it as a secure single place to submit required measure data, streamlining the process of having to submit same data to multiple sources.
- ▶ Researchers and policy makers will be able to use data to develop and implement policy, inform lawmakers and benchmark against regional and national data.
- ▶ Health care organizations will access the registry to review and evaluate local and regional clinical measures. This information can be used to measure performance, inform decision-making and improve quality of patient care.
- ▶ Plans and payers can access performance measures to inform contract decisions and track providers' performance for payment measures.

CONTACT Information:

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More about the Oregon Health Information Technology Program

The Provider Directory is part of the Oregon Health Information Technology Program. It is one of several initiatives, including the Oregon Common Credentialing Program and Provider Directory, currently being developed by the Office of Health IT.

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