

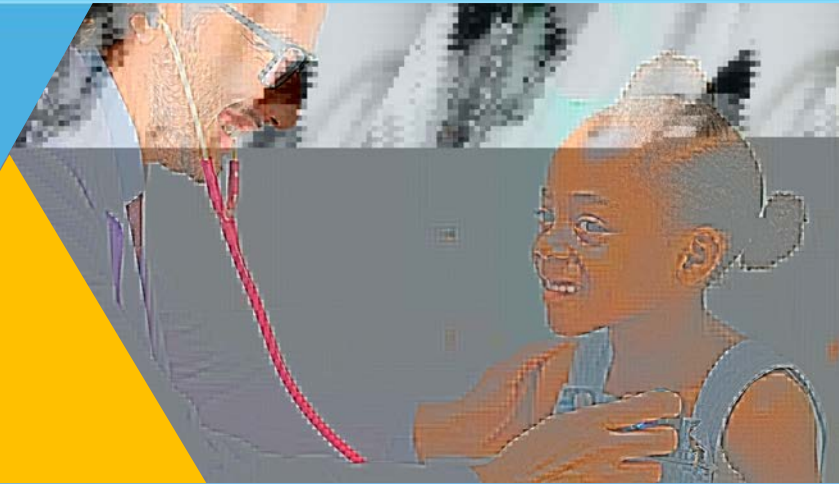


GEORGIA DEPARTMENT  
OF COMMUNITY HEALTH

# GA CQMS Project

The Department of Community  
Health (DCH),

DXC Technology, and HTS





## Mission:

The mission of the Department of Community Health is to provide access to affordable, quality health care to Georgians through effective planning, purchasing, and oversight.



# Purpose:

Shaping the future of A Healthy Georgia by improving access and ensuring quality to strengthen the communities we serve.

# GA CQMS Project Statement of Work

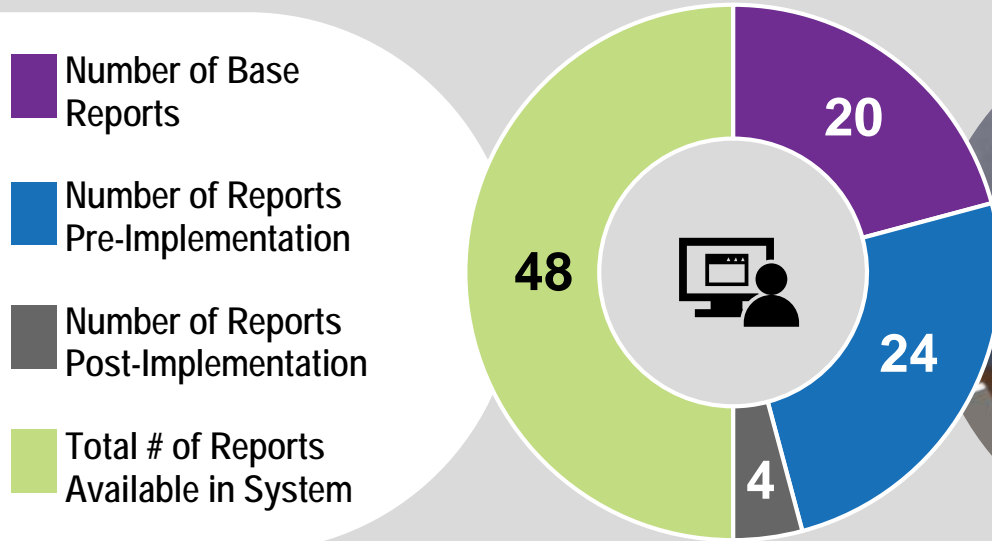
Statement of Work	Results Achieved	Details
Provide 18-month eCQM pilot	Yes	30 month pilot
Install, configure, host, and support an optimized and extended instance of the eCQM application	Yes	
Install popHealth	Yes	
Include 9 eligible professionals (providers) [hospitals will not be included]	Yes	39 providers
Include 13 CQMs to be reported for the pilot project	Yes	
Increase insight into provider's level of quality and efficiency of care through benchmarking	Yes	
Provide innovative approach to healthcare management	Yes	
Staff a Clinical Advisory Board	Yes	
Deliver 20 Baseline reports	Yes	48 reports
Respond to program needs through reporting tools and benchmarking capabilities	Yes	
Conduct provider-level analysis of CQMs and foster better understanding of care provided to members	Yes	
Develop eCQM Communication Plan	Yes	
Update administrative and user manuals with required revisions and enhancements	Yes	
Develop a Long-Term Planning and Sustainability Document	Yes	
Document CAB document roles/responsibilities including adding/removing	Yes	

# GA CQMS Participating Provider-Organizations

Provider Groups	Total Providers
GA Clinic	18
Midwife Group	6
White's Pediatrics	11
Epps Medical	1
St Joseph Candler	2
Your Choice Health Care	1
Total Providers	39

# GA CQMS Reporting

## Reports



# GA CQMS Enhancements Implemented

## GA CQMS Enhancements



Contact Us  
Survey

Data Clerk

Deactivation  
Tracking

Geo Mapping

Group Delegate

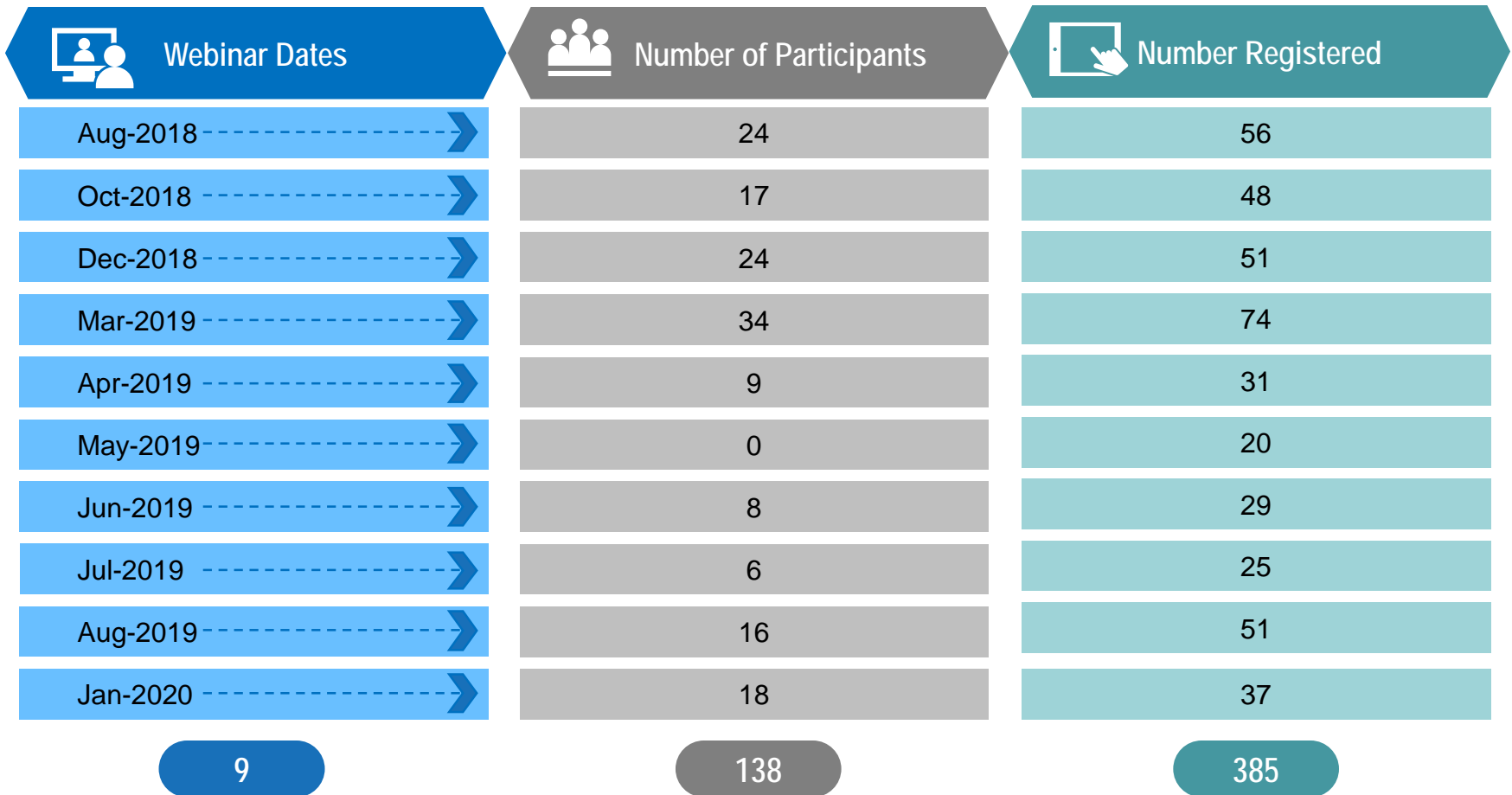
New CQMs

Provider Profile  
(MAPIR/Non-  
MAPIR)

Provider Reports  
Access

Retired CQMs

# GA CQMS Webinar Statistical Results





# GA CQMS at GA Medicaid Fair

Number of Medicaid Fairs	Number of People Registered at Booth
Spring-2017	46
Fall-2017	39
Spring-2018	67
Fall-2018	47
Spring-2019	46
Fall-2019	48
6	293



# Clinical Quality Measures Implemented

Number of Original CQMs	Number of Current CQMs	Number of Retired CQMs
7	13	1
CMS2 - Preventive Care and Screening: screening for Depression	CMS2 - Preventive Care and Screening: screening for Depression	CMS126 - Use of Appropriate Medications for Asthma
CMS69 - Preventive Care and Screening: BMI screening	CMS69 - Preventive Care and Screening: BMI screening	
CMS122 - Diabetes: Hemoglobin A1c poor control	CMS90 Functional Status Assessments for Congestive Heart Failure	
CMS125 - Breast Cancer Screening	CMS122 - Diabetes: Hemoglobin A1c poor control	
CMS126 - Use of Appropriate Medications for Asthma	CMS125 - Breast Cancer Screening	
CMS153 - Chlamydia Screening for Women	CMS153 - Chlamydia Screening for Women	
CMS165 - Controlling High Blood Pressure	CMS165 - Controlling High Blood Pressure	
	CMS136 - Follow Up Care for Children Prescribed ADHD Medication	
	CMS146 - Appropriate Testing for Children with Pharyngitis	
	CMS154 - Appropriate Treatment for Children with URI	
	CMS155 - Weight Assessment and Counseling	
	CMS177 - Child and Adolescent Major Depressive Disorder Suicide Risk Assessment	

# Lessons Learned

Lessons Learned	Outcome	Description
CAB	Success/Problem	<p>(S): The CAB members offered very valuable clinical perspectives and suggestions that helped with the enhancement and efficiency of the system.</p> <p>(S): CAB meetings had timely topics including pertinent information as it related to project and future enhancements to the system as well as processes</p> <p>(S): Having doctors on the CAB was valuable and instrumental to the success of the project</p> <p>(P): Have GA practicing physician(s) or provider representative(s) to participate on the CAB team</p>
JAD session	Success/Problem	<p>(S): Used JAD session process during last year of project and it cut down on requirement definition time</p> <p>(P): Did not use JAD process initially and it lengthened time for change order delivery</p>
popHealth	Problem	(P): popHealth system was implemented and not utilized to the fullest extent
Provider Incentive	Problem	(P): Low Provider Participation; incentivizing providers would have encouraged more providers to participate in the pilot
Stakeholder Engagement	Problem	(P): Provide consistent communications and meetings to identified State stakeholders to keep project sponsors and others engaged in upcoming milestones and deliverables.
Webinars	Success/Problem	<p>(S): Opportunity to share project benefits via Zoom with potential practices/providers</p> <p>(S): DCH/DXC/HTS worked collaboratively together to present the materials</p> <p>(P): Low attendance of Webinars</p> <p>(P): Attentiveness of participants were sometimes low</p>