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## Healthcare Quality Watch

January 2018

### IPRO Renews NJ Medicaid Quality Improvement Contract

IPRO has obtained a four-year renewal of a contract that provides independent quality improvement services to support New Jersey's oversight of five managed care plans responsible for delivering healthcare to 1.7 million Medicaid members across the state. Under federal law, states enrolling Medicaid members in managed care plans are required to engage designated External Quality Review Organizations (EQROs) like IPRO to evaluate and improve the quality of services delivered across a variety of settings. New Jersey's EQRO activities include technical support to the Department of Human Services, Division of Medical Assistance and Health Services, in such areas as medical record review, onsite assessment of plan operations, validation of plans' performance measures, evaluation of quality improvement projects and engaging plans in focused quality studies. Medicaid members include families, pregnant women, single adults, and childless couples, people who are aging, blind or who have disabilities, as well as individuals who qualify for long-term care services. Quality improvement efforts address critical topics such as pediatric and maternal health, chronic care, behavioral health issues/addiction services and adolescent obesity. IPRO has a 30-year history of providing EQRO services across the U.S. and is currently the designated EQRO contractor in eight states including New Jersey, New York, Kentucky, Louisiana, Minnesota, Nebraska, Rhode Island and Pennsylvania—as well as in Puerto Rico.



### IPRO Network Addressing Opioid Counseling, Chronic Kidney Disease

The IPRO-led Atlantic Quality Innovation Network (AQIN) Drug Safety Team will implement standardized pharmacist-patient counseling and direct patient- and prescriber-level interventions to decrease the risk of opioid-related adverse events across New York, the District of Columbia and South Carolina. The two-year project will provide pharmacist counseling to patients using a standardized counseling checklist and address misuse and overdose potential. Desired outcomes include an increase in the number of naloxone prescriptions dispensed by participating pharmacies and a decrease in the incidence of opioid-related emergency department visits for Medicare beneficiaries. Chronic Kidney Disease (CKD) is an under-diagnosed, insidious disease with dramatic long-term public health costs and consequences. Since CKD is asymptomatic until its later stages, it is rarely recognized by primary care clinicians until it progresses and becomes a chronic condition. The two-year IPRO project will engage clinicians, the community, patients, caregivers, and grassroots stakeholders in the goals of increasing CKD screenings, delaying disease progression, and improving patient outcomes. IPRO's

multi-faceted approach aims to elevate CKD diagnosis and management to the front lines of preventative health for New Yorkers. AQIN-NY will work with providers and community-based organizations to achieve two bold aims within the two-year period: (1) 10% reduction in the rate of patients that progress from CKD Stage 3 to Stage 4 and (2) increase CKD screenings for at least 40% of project participants.

## Study Doubts Utility of Quality Performance Websites

Websites profiling the comparative performance of healthcare providers often fail to deliver information that consumers actually want and can readily assimilate, according to a new report from the New York City-based United Hospital Fund (UHF). The 15-month study looked at 70 publicly available websites, with 32 sites evaluated for the same ten common procedures and conditions. The report finds that while website developers are often



preoccupied with assessing technical aspects of clinical quality on a hospital-wide basis, measures of patient experience and provider relations receive “far less attention, despite their obvious salience to consumers.” The authors argue that consumers need reliable, timely, composite measures of sufficient sample size that are easy to understand, with an emphasis on evaluating how patients experience care delivery on a personal basis.

They recommend the U.S. Agency for Healthcare Research and Quality's CAHPS Consortium for pioneering work, including a new effort to elicit and publish narratives offered by patients regarding their experiences of care. They also recommend work being done in California, Massachusetts and Minnesota to report quality on select conditions and at the medical group level. “Empowering New Yorkers with Quality Measures that Matter to Them” is available at the UHF website at <https://uhfnyc.org>.

## Save the Date: IPRO Confirms Annual Meeting Speaker

Health Policy Author and Journalist Elisabeth Rosenthal, MD, will be a featured speaker at IPRO's 34th Annual Meeting, to be held June 5, 2018. Currently Editor-in-Chief of *Kaiser Health News*, Dr. Rosenthal was previously a health and science reporter at *The New York Times*. Dr. Rosenthal is the author of *An American Sickness: How Healthcare Became Big Business and How You Can Take It Back* (2017).

IPRO is a non-profit organization that works with government agencies, providers and consumers to implement innovative programs that bring policy ideas to life. For over 30 years we've made creative use of clinical expertise, emerging technology and data solutions to make the healthcare system work better.



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