



Better healthcare, realized.



IPRO is a non-profit organization that works with government agencies, providers and patients to implement innovative programs that bring policy ideas to life. For more than 40 years we've made creative use of clinical expertise, emerging technology and data solutions to improve the way the healthcare system works.

IPRO holds contracts and consulting agreements with federal, state and local government agencies, as well as private-sector clients, in all 50 states, the District of Columbia, Puerto Rico and the US Virgin Islands.



Our Capabilities

Healthcare Quality Improvement

- Quality Improvement Monitoring and Reporting
- Performance Measure Development, Reporting and Evaluation
- Health Equity Initiatives
- Disease Surveillance
- Adverse Drug Event Surveillance and Prevention
- Clinical Peer Reviews
- Medical Record Coding Analysis and Diagnosis-Related Groups (DRG) Reviews
- Utilization and Quality-Of-Care Reviews
- Program Evaluation
- Project ECHO Replication Partner
- Opioid Harm Reduction

Provider and Patient Engagement

- Provider Outreach, Education and Training
- Medicare and Medicaid Policy Compliance and Review
- Beneficiary Complaint Resolution
- Community Coalition Building and Coordination
- Emergency Planning and Disaster Preparedness
- Infection Control and Reporting
- Disease Self-Management Education
- Independent Dispute Resolution
- Workforce Resiliency Training

Digital Health

- EHR Integration & Automated Reporting
- Health Information Exchange and Interoperability
- Healthcare Data Analytics, Visualization and Dashboards
- Public Reporting Website Design and Buildout
- Health Informatics
- HL7, FHIR, Medicare Blue Button App Developer
- Disease Management and Clinical Decision Support
- Mobile App Development for Professional and Consumer Markets

Fast Facts

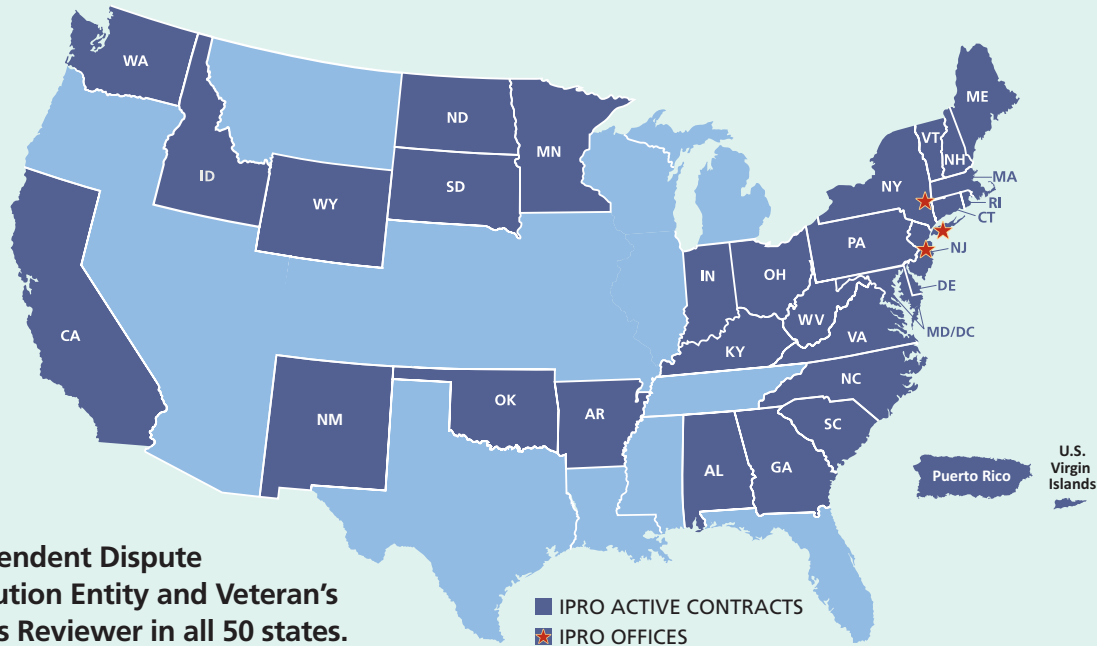
- Centers for Medicare & Medicaid Services (CMS) Quality Improvement Organization (QIO) since 1989. Currently serving as the CMS QIN-QIO for Region 1 (Northeast) and Mid Atlantic (Region 2), impacting the care provided to 24% of the nation’s Medicare beneficiaries.
- CMS End Stage Renal Disease (ESRD) Network contractor since 2006. Currently overseeing three Networks, 12 states, and 19% of Medicare beneficiaries living with ESRD.
- CMS ESRD Kidney Health Analytics and Responsive Emergency Support (KHARES) contractor, providing infrastructure, technical assistance (TA), and coordination support, and leading national emergency management for all 18 ESRD Networks across the United States.
- Medicaid External Quality Review Organization (EQRO) contracts in 11 states.
- 18 Independent Review Organization (IRO) contracts in 16 states and the District of Columbia.
- Independent Dispute Resolution (IDR) Entity since implementation of the federal No Surprises Act in 2022, closing nearly 500,000 cases over the program’s first four years.
- Network of more than 500 board-certified physician consultants.
- Employing 350 healthcare professionals including physicians, registered nurses, epidemiologists, biostatisticians, data analysts, medical record reviewers, health policy experts, programmers, systems analysts, digital health experts and marketing/communications specialists.

Contract Vehicles

NITAAC CIO-SP3 • CMS MIDS IDIQ • CMS NQIC IDIQ • CMS QIC IDIQ • VHA Clinical Peer Review BPA

I PRO’s State and Federal Contracts*

Nationwide Medicare and Medicaid Quality Improvement Leaders



*Independent Dispute Resolution Entity and Veteran’s Affairs Reviewer in all 50 states.



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