



TCPI Exemplary Practice Performance Summary, March 2019

Pulmonary Consultants

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Exceptional pulmonary disease practice dedicated to management of patients affected by pulmonary lung disease through evidence-based medicine, patient and family engagement and education to promote wellness and self-care.

Pulmonary Consultants (PCOM) achieved success on TCPI Change Package Aims/Goals 2 (build the evidence base on practice transformation so that effective solutions can be scaled) and 3 (improve health outcomes for millions of Medicare, Medicaid and CHIP beneficiaries and other patients) through innovative use of evidence-based protocols to support improvement on clinical measures via changes to workflow and documentation processes. PCOM leveraged training from the Practice Innovation Institute (Pii) Practice Transformation Consultant (PTC) consultant and the electronic health record (EHR) vendor to identify gaps in workflow to facilitate improvement in visit note documentation, medication reconciliation, referral linking, immunization tracking and chronic disease management to improve health outcomes for their patients.

Pulmonary Consultants (PCOM) is a physician owned private practice located inside of Banner Heart Hospital in Mesa, Arizona. Operating in the valley for over twenty years, our physicians at PCOM are board certified pulmonologists trained in the diagnosis and treatment of conditions which include COPD, asthma, tuberculosis, Valley Fever, pneumonia, lung nodules and chest infections. Additionally, we are skilled intensivists who manage critically ill patients on life support with organ system failure. PCOM also provides care in Sleep Medicine, managing conditions including sleep apnea with evidence-based treatments for sleep complaints involving pulmonary function.

Pulmonary Consultants has an active panel of over 49,400 patients. The payer mix is mostly Medicare Parts A, B and C, along with a significant volume of dual eligible and commercial insurance members.

Evidence-based Care in Practice

Pulmonary Consultant targeted Aims and 3 with changes to the patient encounter visit and documentation intended to demonstrate evidence-based practices to improve the health outcomes for PCOM patients. Quality improvement training and education supported care team members to have positive performance improvements as detailed in the table below. Specifically, routine monitoring and improved documentation for clinical quality measures tracked for the Quality Payment Program were reflected in the improved performance percentages for each provider who attested in 2018. In prior years, PCOM struggled with the Physician Quality Reporting System (PQRS) and Meaningful Use and had accumulated several negative adjustments in Medicare reimbursements. This was significant for our practice whose payer mix is predominantly Medicare and Medicare replacement plans.

New workflows and additional staff training resulted in improved documentation that supported capture of the clinical measures outlines in the table below. (QPP 2017 Clinical Quality Measures)

Clinical Quality Measures	GA SULIT	MIRELES	L SULIT	SAWALHA	IBARROLA	STOLA	Practice Average
Use of High-Risk Medications in the Elderly (NQF 0022a)	1%	0%	3%	2%	1%	2%	1.4%
Preventative Care and Screening: Influenza Immunization NQF 41	39%	24%	42%		29%	45%	35.8%
Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention (NQF 0028)	79%	75%	86%	100%	95%	95%	88%
Medication Management for People with Asthma NQF 1799	64%		58%				61.0%
Controlling High Blood Pressure (NQF 0018)		73%	63%		93%	53%	70.5%
Documentation of Current Medications in the Medical Record (NQF 0419)	84%	89%	86%	94%	94%	95%	90%
Preventive Care and Screening Body Mass Index (BMI) Screening and Follow-up NQF 0421	40%	65%	42%	45%	71%	59%	53.7%
Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antiplatelet NQF68	56%	60%	94%	70%	77%	81%	73.0%
Diabetes: Medical Attention for Nephropathy NQF62	56%	66%	50%		55%	67%	58.8%
Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented	51%	43%	54%	36%	45%	24%	42.2%

Following the process improvement of 2017, our clinical team embraced additional modifications to workflows and clinical documentation to further capitalize on the benefits of preventative screenings and disease state monitoring to improve health outcomes for our patients. In 2018, areas for improvement were identified and included tracking and documentation of pneumonia vaccine status, as this is very significant to a pulmonary disease patient population. Further, we incorporated services from Health Current, Arizona's health information exchange (HIE) including implementing a referral process that employs the use of direct secure mail (Continuity of Care Document) to communicate with collaborating clinicians in the medical neighborhood with the intent of expediting referrals and reducing duplicate test ordering. Additionally, we incorporated HIE Alerts of admissions, discharges and transfers to their patient intake and monitoring process to promote swift follow up for patients with hospital encounters. Shown in the table below are the Clinical Quality Measures reported for Pulmonary Consultants for 2018 demonstrating improvement in seven categories, and excellent performance on two additional metrics not reported in 2017.

Clinical Quality Measures	2018 Practice Performance
Preventative Care and Screening: Influenza Immunization NQF 41	40.36%
Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention (NQF 0028)	89.80%
Pneumococcal Vaccination Status for Older Adults NQF111	39.98%
Documentation of Current Medications in the Medical Record (NQF 0419)	95.85%
Preventive Care and Screening Body Mass Index (BMI) Screening and Follow-up NQF 0421	54.49%
Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antiplatelet NQF68	77.78%
Diabetes: Medical Attention for Nephropathy NQF62	58.80%
Diabetes: Hemoglobin A1c (HbA1c) Poor Control (>9%) NQF 001	100.00%



Pulmonary Consultants successfully targeted Aims 2 and 3 with changes to the patient encounter visit and documentation intended to demonstrate evidence-based practices to improve the health outcomes for PCOM patients. The quality improvement training and education supported care team members to have positive performance improvements that resulted in better outcomes for the patients. In addition, routine monitoring and improved documentation for clinical quality measures tracked for the Quality Payment Program resulted in improved performance percentages for each provider who attested in 2018.

Pulmonary Consultants is an active participant of the Practice Innovation Institute (Pii), Arizona's Practice Transformation Network.

As of October 2018, Pulmonary Consultants has completed the 5 Phases of Transformation.



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