

# QEC Status Grid June 2015

QE Name	Are you currently receiving Medicare FFS data?	Current source of Medicare FFS data	Describe Other	Public Reporting Live	Date Public Reporting Live	Current Phase	Most significant barrier	Estimated Public Reporting Date	Public Reporting Website Link	Included Product Lines	Key QE Primary Point of Contact - Name	Point of Contact e-mail address
1 Oregon Health Care Quality Corporation	Yes	Qualified Entity Program		Yes	08/26/14	Phase 4: Reporting	Our most significant barrier are the limitations of the current program; our use of the Medicare FFS has a very narrow scope. We are looking forward to the opportunity to have more flexibility with our use of the data.		<a href="http://www.q-corp.org/compare-your-care">http://www.q-corp.org/compare-your-care</a>	Commercial, Medicaid, Medicare Advantage	Cindi McElhaney	Cindi.McElhaney@q-corp.org
2 Pittsburgh Regional Health Initiative	Yes	Qualified Entity Program		No		Phase 3: Data Integration & Measure Calculation	Physician attribution rules			Highmark Blue Cross/Blue Shield	Keith Kanel	kkanel@prhi.org
3 HealthInsight	Yes	Qualified Entity Program		Yes	05/18/15	Phase 4: Reporting	To get stakeholders buy-into continue public reporting of QE data		<a href="http://nmhealthcarequality.org/medical-group-reports/medical-group-snapshots.html?Payer=1&amp;Group=1">http://nmhealthcarequality.org/medical-group-reports/medical-group-snapshots.html?Payer=1&amp;Group=1</a>	Medicare Advantage, Medicaid, commercial	Galina Prilouts kaya	gprilouts kaya@healthinsight.org
4 Wisconsin Collaborative for Healthcare Quality	Yes	Other	WCHQ receives data on Medicare FFS patients directly from healthcare provider groups. This data does not include any information regarding the cost of care, and is primarily used for quality reporting.							WCHQ reports data on all product lines, including self-pay.	Matt Gigot	mgigot@wchq.org
5 Wisconsin Health Information Organization	No	Both QE & Research DUA	WHIO has applied for Medicare FFS through both programs (QCEP and State Agency)	No		Phase 2: Data Security	The review process is inconsistent. There appear to be policies applied that defy logic. For example, Optum uses security policies of its parent corporation, United Health Group. These are being disallowed.	01/01/16	<a href="http://myhealthwi.org/">http://myhealthwi.org/</a>	Commercial, Medicaid, Medicare Advantage (medical and pharmacy)	Beverly Stowell	beverly.stowell@wisconsinhealthinfo.org
6 The Health Collaborative (Greater Cincinnati)	No	Qualified Entity Program	Due to the change in vendors and change in location, we were asked to send back the Medicare data until new security requirements were met.	No		Phase 2: Data Security	1. New Security Requirements, 2. Limitations of usage of Medicare FFS data, 3. Funding, 4. Overall process is bureaucratic.		n/a	Commercial Payor	Julia Taylor, Director, Measure and Reporting	jtaylor@gchc.org
7 Minnesota Community Measurement	No	Qualified Entity Program		No		Phase 2: Data Security	funding for the data warehouse			Medicare Managed Care, Commercial	Gunnar Nelson	nelson@mncm.org
8 Maine Health management Coalition	Yes	Both QE & Research DUA				Phase 3: Data Integration & Measure Calculation	Navigating the disparate and inconsistent allowable data uses. For example, the QE program versus RIF perspectives. Required completely separate DUA even though it was to re-use the data			Primary Care Practice Reports	Eric Anderson	eanderson@mehmc.org
9 Massachusetts Health Quality Partners	No					Phase 1 - Application	We are currently in the early phases of the application process. A significant barrier at this time is the assessment of overall costs to expect and approach to acquiring all the data (multi-payer), housing the data, analytics, disseminate public reports, and what private reports we might offer to support a funding model.				Linda Shaughnessy	lshaughnessy@mhqp.org
10 California Healthcare Performance Information System	Yes	Qualified Entity Program		No		Phase 4: Reporting	Data intake burden on data suppliers which results in delays; time lag between measurement and reporting years	09/11/15		Insured and self-funded commercial HMO, PPO, POS and Medicare Advantage	Rachel Brodie	rbrodie@pbgh.org
11 Midwest Health Initiative	No		MHI is a Medicare Qualified Entity, but has not yet elected to receive Medicare data	No		Phase 3: Data Integration & Measure Calculation	Not sure that we have one. With passage of MACRA, the MHI Board will revisit its earlier decision to hold off on data acquisition at its July 15, 2015 meeting. Staff anticipates Board support for moving forward with data acquisition.	01/01/16		Commercial medical and claims data. We are interested in adding patient experience data, but have not yet done so.	John G. Carlton	jcarton@stlbhc.org