

Data Element Library

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Background: Repository collecting long-term & post-acute care data elements & their associated mapping to health information technology standards.

Our role: Database modeling services; clinical, program, & HIT subject-matter expertise.

QIES

Quality Inpatient Evaluation System

20

Background: CMS system tracking quality of care for nursing homes, home health agencies, inpatient rehab facilities, & long-term care hospitals & hospices.

Our role: Data collection, analysis & reporting.

Evaluation of CJR Model

Comprehensive Care for Joint Replacement

21

Background: Tests bundled payment & quality measurement for care episodes related to hip & knee replacements.

Our role: Primary data collection & operational support; data analysis, & reporting.

DSMT Program Accreditation Evaluation

Diabetes Self-Management Training

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Background: Oversight ensuring diabetes-accredited organizations meet national quality standards.

Our role: Evaluate the accreditation process & validation tools used by accredited organizations.

Bundled Payment Care Initiative

23

Background: A Medicare payment reform demonstration designed to improve care quality & coordination & lower costs.

Our role: Offer subject-matter expertise related to collection & analysis of qualitative & quantitative data.

MIPS Customer & Program Support Services

Merit-Based Incentive Payment System

24

Background: Support clinicians & stakeholders as they transition to CMS' new Quality Payment Program.

Our role: Offer MIPS support services including: a dedicated help desk, training & outreach, creating content, & spreading knowledge.

About Us

- Telligen brings the people and the passion to transform U.S. healthcare into a value-based system that awards high-quality, affordable care
- Our Federal Health Solutions help government agencies assess, measure, and improve the quality and value of care delivered to vulnerable and publicly insured populations
- Telligen currently serves as the federally designated:
 - Quality Innovation Network for Iowa, Illinois, and Colorado
 - Transforming Clinical Practice Initiative QIN for Maryland and Virginia
 - Quality Innovation Network National Coordinating Center

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GSA Contract Holder

TELLIGEN'S NATIONAL PROGRAMS

Combining clinical & technical expertise to address the nation's top healthcare priorities.



Project ACHIEVE *Achieving Patient-Centered Care & Optimized Health in Transitions by Evaluating Evidence*

01

Background: Study analyzing transitional care strategies with the goal of developing post-hospital best practices.

Our role: Develop provider/facility survey instrument, conduct site visits & data analysis consulting.

CMS MAT

Measure Authoring Tool

03

Background: Web-based tool that creates electronic Clinical Quality Measures (eCQMs).

Our role: Conduct initial development, testing & deployment, & provide ongoing support of the tool.

VIQRC Validation

Value Incentives Quality Reporting Center

07

Background: Provides quality reporting assistance to hospitals, psychiatric facilities & surgical centers.

Our role: Evaluate the accuracy of data submitted to CMS for hospital quality reporting programs.

Advancing Excellence in Long-Term Care Collaborative

11

Background: Campaign designed to improve the quality of care & life in America's nursing homes.

Our role: Provide online tools that help facilities set goals, upload data, track progress & compare results.

CPC

Comprehensive Primary Care

15

Background: Medicare Initiative bringing together public & private payers to improve care delivery.

Our role: Offer support & subject-matter expertise related to quality, attribution, operations, technical support & participation management.

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TELLIGEN
NATIONAL PROGRAMS

eCQM Development & Maintenance

electronic Clinical Quality Measures

04

Background: eCQMs use electronic data to measure healthcare quality for quality reporting programs.

Our role: Clinical & technical support related to eCQM creation & entry into the Measure Authoring Tool.

Post-Acute Care Quality Reporting Program

08

Background: An program collecting data from acute care facilities following an inpatient hospital stay.

Our role: Analyze data received from long-term care hospitals, inpatient rehab facilities & hospices.

CICDIM *Consolidated Innovation Center Development & IT Management*

12

Background: The CMS Innovation (CMMI) Center supports development of new payment & delivery models.

Our role: Business analysis, quality assurance & development across current & future CMMI initiatives.

CPC+

Comprehensive Primary Care Plus

16

Background: Scaled-up version of the original CPC to include 5K additional practices.

Our role: Support practices & payers through program design & operations subject-matter expertise.

HCQIS Analytics, Reporting & Data Management

Healthcare Quality Information System

05

Background: Collection of automated systems used by CMS, QIOs & providers to monitor & improve care.

Our role: Develop & analyze CMS annual monitoring reports used for healthcare policy decision-making.

Reducing Avoidable Hospitalizations Among Nursing Facility Residents

09

Background: Effort to improve quality of care for nursing facilities by reducing avoidable hospitalizations.

Our role: Support site assessments & data collection; facilitate a results-oriented learning community.

Pioneer ACO

Accountable Care Organization

13

Background: Payment & delivery model designed to improve outcomes & achieve cost-savings for Medicare.

Our role: Assist with design & development of a quality reporting tool that supports the model.

Transforming Clinical Practice PTN

Practice Transformation Network

17

Background: Initiative to achieve large-scale practice transformation across eight states & 8K clinicians.

Our role: Provide clinicians with the program support & IT tools needed to thrive in value-based care.

QIN NCC

National Coordinating Center

02

Background: Network of QIN-QIOs working towards goals for better care, better health & smarter spending.

Our role: Provide technical assistance; facilitate learning & action networks; & ensure collaboration & diffusion between national & local levels.

HIQR/HOQR Measure Development & Maintenance

Hospital In & Outpatient Quality Reporting

06

Background: CMS reporting & incentive programs use measure data to assess healthcare quality in hospitals.

Our role: Ongoing development & maintenance of process & structural e-measures used for data collection.

Five-Star Nursing Home Help Line

10

Background: Dedicated line for answering provider questions related to the nursing home rating system.

Our role: Technical assistance & help line services; online reporting & documentation to *Nursing Home Compare*.

ACO Program Analysis & Operational Support

14

Background: Program using ACOs to facilitate provider coordination, improve quality & reduce costs.

Our role: Assist with measures selection & specifications; provide technical assistance, & audit quality data.

Oncology Care Model

18

Background: Payment & delivery model designed to improve care for beneficiaries receiving chemotherapy.

Our role: Centralized support related to quality measures, feedback reports, site visits & monitor claims data.