

PORTNEUF QUALITY ALLIANCE (PQA) seeks to curb uncontrolled costs and wasteful duplication of services resulting from fee-for-service health care practices and to establish a provider network comprised of all types and specialties across the entire continuum of care.

"Present health care costs are not at sustainable levels," says Dani Jones, M.Coun., L.P.C., Executive Director of PQA. "Payers and employers recognize that we can't continue down this path, so we have to find ways of maintaining or improving the quality of care, while reducing costs."

PLAN FOR IMPROVEMENT

Traditionally, health care providers worked in isolation, treating patients without feedback data to support their methodology. This can be a problem when a provider adopts a particular treatment process or model and fails to examine and re-examine its efficacy in the broader patient population.

PQA aims to redirect such practices using data gathered across its ever-growing network of more than 400 providers to establish evidence-based best practice guidelines across the health care continuum.

"It's gratifying for me to have a part to play in transforming health care in an orientation toward value," says William K. Faber, M.D., Interim Medical Director of PQA."Health care has gotten too expensive, too wasteful, less patient friendly, and it is often not evidence based. Clinically integrated networks like PQA attack these problems by establishing quality goals and objectively measuring progress towards those goals using data."

Data-driven approaches allow each provider to compare outcome statistics against similar data collected throughout the network. This allows them to analyze their practice's efficiency and efficacy and make meaningful improvements in the way they deliver care.

TARGETING WASTE AND UNNECESSARY COST

The Affordable Care Act shifts the way in which providers are reimbursed for medical care from traditional fee-for-service models, where providers are paid for ordering services that may or may not effectively treat the condition.

"Fee-for-service health care pays providers for doing more, whether the tests and interventions help or not," Dr. Faber says. "There are a lot of well-intended treatments that, once you look at objective evidence, may not produce benefit for patients. PQA's clinically integrated network gives associated providers the connective tools to really be accountable and only provide the most effective medical care."

By making data compiled by insurance companies available to providers within PQA's network, best practice protocols can be established and adopted, enhancing the quality of care for patients.

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FILLING THE GAPS

But PQA's vision doesn't stop there. Even with protocols for best practices in place, patients may face transportation or accessibility issues that prevent them from receiving critical primary care. Readily accessible admissions data identifies patients who go to emergency rooms for medical conditions that should be handled by primary care providers, so PQA can now reach out and help these patients access more-appropriate, less-costly medical care.

Additionally, the data-driven approach reduces wasteful, duplicated services. A patient with low back problems may see multiple providers for treatment. If providers don't have access to each other's patient records, expensive tests, such as magnetic resonance imaging scans, may be reordered unnecessarily when they have just been performed elsewhere. This runs up medical costs with no benefit to the patient.

"PQA is physician governed, and the citizens of southeast Idaho should take comfort in the fact that their physicians are coming together with Portneuf Medical Center to take on the challenges of out-of-control health care inflation and unnecessary poor quality," Dr. Faber says. "We're defining what quality means in health care setting and physicians in the PQA network are committed to improving the quality of care by holding themselves accountable to provide optimal outcomes."

For more information about PQA, visit www.portneufqualityalliance.org.

Visit our website.

RECRUITING LOCAL TALENT

While changing the face of health care is a daunting challenge, PQA made significant headway towards achieving more cost-effective and high-quality health care provision in the Southeasterr Idaho region by naming Dani Jones, M.Coun., LPC, its Executive Director in July 2014.

Jones' path to PQA began in college, when she decided to change course from pre-medicine to counseling. Throughout her time in college at Idaho State and Boise State universities, Jones worked in physician practices, cultivating relationships and assessing the health care landscape.

Ipon graduating with her degree in Mental Health Counseling, Jones interviewed in various behavioral health care agencies on the recommendation of her graduate school professors but was disillusioned by the non-therapeutic environment in which underserved patients received health services.

"I then turned to the payer side with an nterest in managed care," Jones says. "I began working at Blue Cross of Idaho to broaden my experience and move toward my goals of truly facilitating change in health care and helping the broader population."

Changing Community Care

The wealth of experience Jones gathered throughout her multifaceted experience in health care services made her an ideal candidate for PQA, which was looking for someone with project management skills and an established relationship with Portneuf Medical Center and the local physicians.

Jones jumped at the chance to give back to her community.

"I never thought I would move back to the area, because of my career focus, but I felt strongly that there was an opportunity here in southeast Idaho," Jones recalls. "It feels good to come back to the same community and work toward providing valuable change in health care delivery. It's uncommon in small communities to find something so innovative taking place, and it's really great that the opportunity was back home"



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