



## KFMC Contracts and Competencies Overview

As a non-profit organization, the Kansas Foundation for Medical Care, Inc. (KFMC) mission is to facilitate the improvement of healthcare. A diverse staff of physicians, nurses, quality improvement professionals, data analysts, health information management professionals, communications experts, information technology specialists and administrative staff work directly with healthcare providers across Kansas to ensure that every person receives the right care, every time.

With its rich 38 year history and a diverse and expert staff, KFMC, Inc. offers many unique services to the healthcare and business communities of Kansas.

### Contract Expertise

For 38 years, KFMC staff has successfully performed multiple contracted services for the federal and state government and a variety of private businesses. In our contracted services, KFMC has a long history of meeting and exceeding our customers' expectations.

The following are KFMC's core contracts:

- **State of Kansas Quality Improvement Organization (QIO), 9<sup>th</sup> Statement of Work:** KFMC has held the Kansas QIO contract since 1974. The current contract extends through July 31, 2011. The Centers for Medicare and Medicaid Services (CMS) QIO contract focuses services provided in hospitals, nursing homes, and physician offices across the state. This work includes collaboration with physicians, hospital personnel, and nursing home professionals to examine their practices and improve systems that improve patient safety and overall quality of care.  
Current Medicare Contract Priorities:
  - Beneficiary Protection: Utilization review, quality review, EMTALA review, and beneficiary complaint resolution
  - Patient Safety: Surgical care improvement, pressure ulcer and restraint reduction, Methicillin-resistant Staphylococcus aureus (MRSA) prevention and Medication Safety
  - Prevention: Pneumonia, influenza, colon and breast cancer reduction through EHR care management
- **External Quality Review Organization (EQRO):** KFMC has held the Kansas EQRO contract since 1995, when the State of Kansas implemented Medicaid Managed Care. Our current contract extends through December 31, 2014. EQRO activities focus on quality review and improvement related to access, quality, and timeliness of healthcare. Currently, Social & Rehabilitation Services' (SRS) Disability and Behavioral Health Services, and the Kansas Health Policy Authority (KHPA) contract with KFMC for EQR services. The work for KHPA entails external quality review activities related to the HealthConnect Kansas (Medicaid Primary Care Case Management program) and HealthWave (Medicaid and SCHIP Managed Care program). The SRS contract includes review of Mental Health and Substance Abuse programs.

The EQRO follows the Centers for Medicare & Medicaid Services (CMS) External Quality Review Protocols for the following activities:

- Validation of Performance Improvement Projects
  - Validation of Performance Measures
  - Validation of Encounter Data (including Information Systems Capabilities Assessment)
  - Validation of Surveys (Provider and Consumer)
  - Conducting Focused Studies
  - Calculating Performance Measures
  - Conducting Surveys (Provider and Consumer)
- **Hospital Utilization Review:** KFMC holds both federal Medicare and state Medicaid utilization review contracts for the state of Kansas. KFMC has been responsible for peer review of Medicare and Medicaid admissions since 1977. We have collaborated with the State Department of Social and Rehabilitation Services (SRS), and now the Kansas Health Policy Authority (KHPA) since 1982. The current contract with KHPA extends through June 30, 2012. KFMC has served as the review organization for the Kansas Insurance Department (KID) since 1998, for the Kansas Department of Labor Worker's Compensation since 2000, and for various hospitals through private contracts. Physicians serving KFMC as peer reviewers are in active practice, and therefore, in touch with the practice of medicine. KFMC promotes efficiency without compromising the quality of care. Our primary case review functions include:
    - Monitoring quality and appropriateness of health care
    - Diagnosis and procedure validation
    - Reviewing medical necessity
    - Reviewing discharge appropriateness

Some examples of past contracts/grants (discontinued due to funding reasons, not due to KFMC performance) have included:

- **Kansas Department of Health and Environment Trauma Contract:** KFMC served in coordinating the 6 Regional Trauma Councils which included members from Kansas hospitals (physicians, nurses, and hospital administrators). Major responsibilities of this contract included development and implementation of the Regional Trauma Plans, statewide Executive Committee coordination, and serving as the fiscal agent. The goal of this program was to improve trauma care, access and delivery in Kansas.
- **The United Methodist Health Ministries Fund 100,000 Lives/5 Million Lives Grant:** The purpose of this project was for KFMC to serve as the NODE for Kansas for the Institute for Health Care Improvement (IHI) 100,000 Lives Campaign. In that capacity, KFMC worked with 69 Kansas hospitals and five healthcare partners – Kansas Hospital Association, Kansas Medical Society, Kansas Association of Family Physicians, Kansas Association of Osteopathic Medicine and Kansas State Nurses Association. KFMC sponsored three regional meetings and two statewide conferences that included participants from the entire state. The goal of this project was first to save 100,000 lives in America's hospitals and later to stop 5 million errors in America's hospitals.
- **Kansas Department on Aging Healthcare Quality Community Coalitions Contract:** Kansas legislative leaders sought out KFMC for QI assistance and funding was secured through the Kansas Department on Aging, (KDOA), for a one year project. The purpose of the contract was to develop and facilitate community collaboratives/coalitions focused on healthcare quality improvement through increased continuity and coordination of care. Four

communities were identified; representatives from hospitals, physician offices, nursing homes, home health agencies, Area Agencies on Aging, assisted living, and the ombudsman participated in these collaboratives. Goals included increasing process efficiency and accuracy with patient transfers; increasing quality of care and patient safety; building and enhancing provider relationships in each community, and increasing the sustainability of individuals' appropriate and desired care settings.

- **Kansas Department on Aging Individualized Nursing Home Technical Assistance Contract:** Kansas legislative leaders sought out KFMC for QI assistance and funding was secured through the Kansas Department on Aging, (KDOA), for a one year project. The purpose of the project was to facilitate the improvement of quality of care through an individualized technical assistance program in 9 under- performing Kansas nursing homes. The main objective of this contract was to decrease the total number of deficiencies cited during the survey process.

## Core Competencies

- **Quality Improvement Consultation:** Staff at KFMC have years of experience as a leader and resource to Kansas providers on a variety of quality improvement methods. KFMC quality improvement professionals are knowledgeable and skilled at working in multiple environments with multiple stakeholders. Past work includes experience working at the individual provider, facility, system, community, and state level on quality improvement projects and initiatives. KFMC holds multiple contracts at the provider, state and federal level utilizing these services to enhance the quality of care in Kansas.
- **Health Information Technology:** Kansas is in the midst of a health information technology movement. The use of electronic health records will move Kansas to a safer, more efficient and cost-effective method of delivering healthcare to our citizens. KFMC is involved in this revolutionary movement on many levels. The organization's leadership is an integral part of a statewide group to organize the health information technology movement throughout Kansas. Also, KFMC staff provides expert consultation to individual healthcare providers at all stages of health information technology adoption – from vendor evaluation and selection to adoption and full use.
- **Data Gathering and Analysis:** For many years, KFMC has helped contractors gather and analyze healthcare information. KFMC has an extensive background in gathering data through medical record abstraction, developing and conducting surveys, conducting focus groups, and interfacing with multiple administrative databases. We have vast experience in conducting analyses of robust data sets including Medicare and Medicaid claims data sets, and a variety of collected data. We are knowledgeable in validating performance measure, surveys, and databases. Through our various work experiences KFMC has established processes to assist customers with development, administration analysis and reporting of important healthcare information including: service, outcome, and satisfaction related monitors.
- **Special Activities:** KFMC has provided leadership in areas outside of the aforementioned contracts. Some examples include the Kansas Health Quality Forum, Institute for Healthcare Improvement's national campaigns, Rural outreach programs, development of the Traumatic Brain Injury Statewide Resource Manual, Immunization Provider Outreach Services, a Kansas Board of EMS survey, and Lead Poisoning and Prevention studies.