Case Study: Collaborating to Improve the Quality of Care: Lessons Learned from the Alabama Medicaid Agency

Prepared for:
Agency for Healthcare Research and Quality
U.S. Department of Health and Human Services
540 Gaither Road
Rockville, MD 20850
http://www.ahrq.gov

Report Contract No. HHSA2902007-10079T

Prepared by:
RTI International
3040 Cornwallis Road
Research Triangle Park, NC 27709

March 2010
AHRQ Publication No. 10-0066-EF
Case Study: Collaborating to Improve the Quality of Care: Lessons Learned from the Alabama Medicaid Agency

Agency Overview
The Alabama Medicaid Agency serves nearly 1 million Alabamians, representing approximately 20 percent of the State’s population. Of those not dually eligible, two-thirds of these beneficiaries are enrolled in a primary care case management (PCCM) managed care program. Alabama’s CHIP program, AllKids, is separate from the Medicaid program and enrolls approximately 71,000 children. AllKids is administered by the Department of Public Health.

Project Background
In January 2007, the Alabama Medicaid Agency was awarded a Medicaid Transformation Grant (MTG), entitled Together for Quality. As part of the Together for Quality initiative, the Agency has developed an electronic health record (EHR), the QTool. The QTool includes both e-prescribing and clinical decision support components and was initially piloted in nine counties in Alabama. In fall 2009, the QTool was expanded to other providers throughout the State.

Project Details
As part of the MTG, the Alabama Medicaid Agency has worked with a variety of stakeholders, including Blue Cross and Blue Shield (Blue Cross) of Alabama. Together, Medicaid and Blue Cross cover approximately 90 percent of all Alabama residents. Blue Cross and Alabama Medicaid have a history of collaboration that predates Alabama’s receipt of the MTG. Since 2003, Medicaid has shared claims information with Blue Cross that providers can access via InfoSolutions, a medical information network. This long-standing relationship has allowed the two organizations to collaborate effectively on the Together for Quality initiative. Working together to share data between the two systems will lead to higher quality and more coordinated care for Alabama’s Medicaid beneficiaries. Many times these individuals cross payor lines and in almost all cases the providers serving different payor patients are the same.

In addition to its collaboration with Blue Cross, the project has included a wide range of stakeholders since its inception. A stakeholder council was established to ensure stakeholder representation and buy-in and to support the long-term vision and goals of the project. The stakeholder council also helped to identify what types of information (e.g., what specific types of clinical or administrative data) need to be shared in order to improve patient care.
Medicaid released the QTool in early 2008, and the technology and policy components have been moving smoothly. However, because Health Insurance Portability and Accountability Act (HIPAA) privacy rules impose access restrictions on InfoSolutions, some privacy issues had to be addressed. After the original agreements were revised to move the exchange program forward, it is now possible that the privacy and security requirements may need to be revisited in light of the changes to the definition of business associates under the American Recovery and Reinvestment Act of 2009 (ARRA). Although the policy environment around health information exchange continues to evolve, the project has benefited from a level of trust and familiarity by providers with the InfoSolutions product, which has been available since the mid-1990s. By collaborating with Blue Cross and leveraging providers’ familiarity with the InfoSolutions system, the team has better positioned itself for success.

The rollout of the QTool has been going well, although adoption remains a challenge. Specifically, the Agency’s ability to ensure sustained use among providers continues to be a concern. Some rural areas of the State lack internet connectivity, although the Governor’s office plans to take advantage of the funding provided in ARRA to extend broadband connectivity throughout the State. Thus, increased availability of internet connectivity may help to improve adoption rates.

**Lessons for Other Agencies**

Establishing relationships with external partners is valuable and can make the difference between success and failure of an initiative. These relationships are particularly beneficial in States where there are a limited number of players in the health insurance and health information exchange environment—because a limited number of partnerships can then cover the majority of the State’s population. Ensuring buy-in across stakeholder groups can help support project success and future progress.

For additional information, please contact Medicaid-SCHIP-HIT@ahrq.hhs.gov or call 1-866-253-1627.

---

1 InfoSolutions was created pre-HIPAA, but agreements between Medicaid and Blue Cross were compliant. The issue was related to who could access data. Physicians accessing the QTool still needed an InfoSolutions agreement.