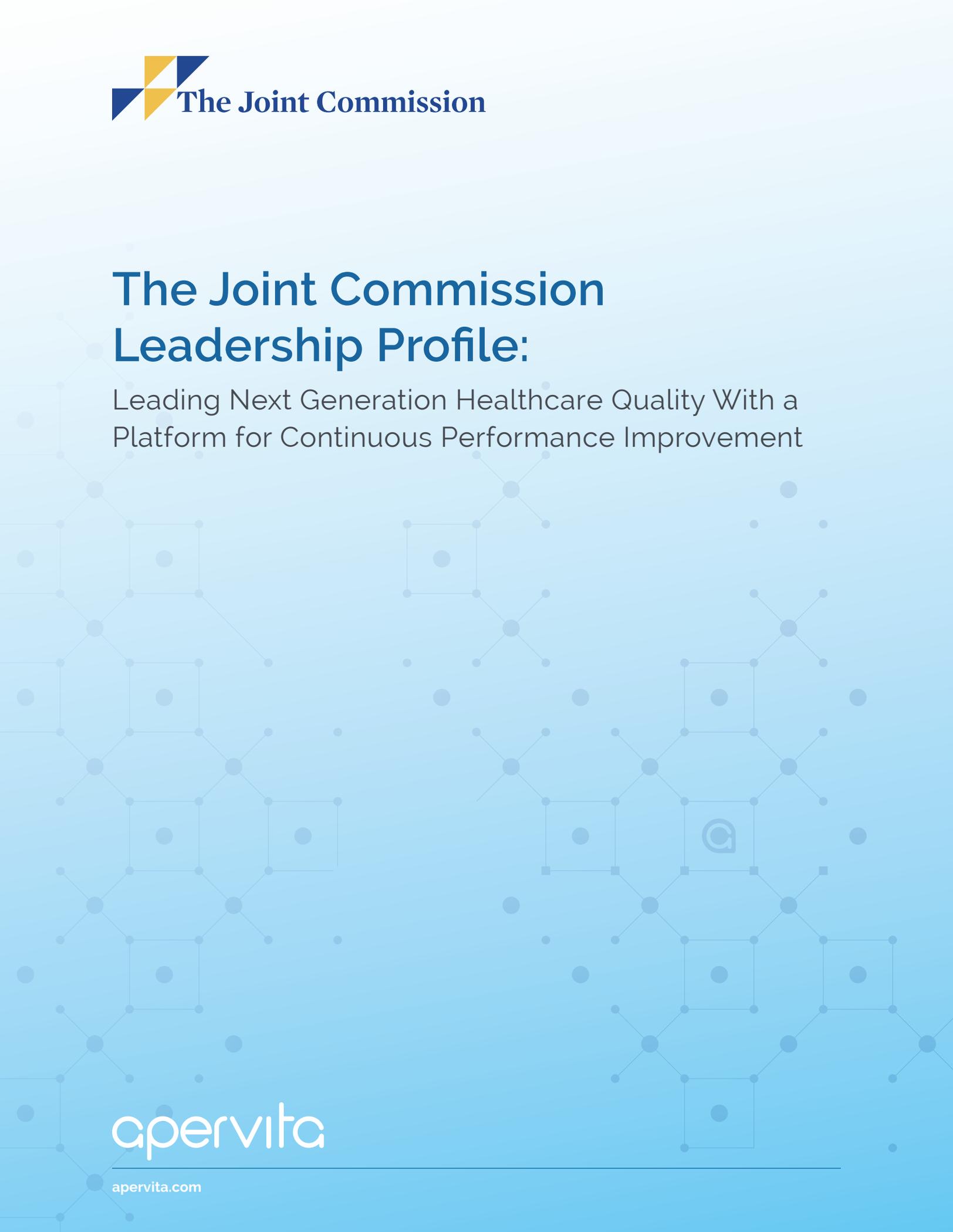# The Joint Commission Leadership Profile:

Leading Next Generation Healthcare Quality With a Platform for Continuous Performance Improvement

Apervita Leadership Profile

The Joint Commission:
Leading Next Generation Healthcare Quality With a Platform
for Continuous Performance Improvement

The Joint Commission

The Joint Commission: Accelerating Quality in Healthcare Since 1951

An independent, not-for-profit organization founded in 1951, The Joint Commission accredits and certifies nearly 21,000 healthcare organizations and programs in the United States. Joint Commission accreditation and certification is recognized nationwide as a symbol of quality that reflects an organization's commitment to meeting certain performance standards.

Transforming 21st-Century Quality Measurement

A core tenant of The Joint Commission's (TJC) work is its ORYX® performance measure initiative. Implemented more than 30 years ago, the initiative incorporates performance measure data reporting into The Joint Commission's accreditation and certification processes to support quality improvement at its 4,500 accredited US hospitals.

While electronic health record adoption has more than doubled since 2008[1], much of the promise of digitized information has yet to be realized. Many healthcare enterprises have been slow to embrace digital information. Despite the potential power of, and early support for, electronic clinical quality measures (eCQMs), the industry still relies on outdated data analysis processes. Many of those efforts require the copying and transporting of large disparate data sets that need to be

consolidated and normalized before any quality analysis can be performed. In some cases, paper-based processes are sometimes used. These outdated methods and processes not only fail to empower organizations with timely quality insights, they also cost providers and the entire healthcare system exponentially more time and money than fully electronic and 21st century technology.

As the recognized leader in healthcare quality reporting, The Joint Commission saw an opportunity to once again lead the way. In 2017, The Joint Commission partnered with Apervita to develop a solution that enabled healthcare organizations (HCOs) to directly and quickly submit eCQM data while empowering them with continuous performance insights to proactively manage quality improvement.

[1] Office of the National Coordinator for Health Information Technology. 'Office-based Physician Electronic Health Record Adoption,' Health IT Quick-Stat #50. dashboard.healthit.gov/quickstats/pages/physician-ehr-adoption-trends.php. January 2019.

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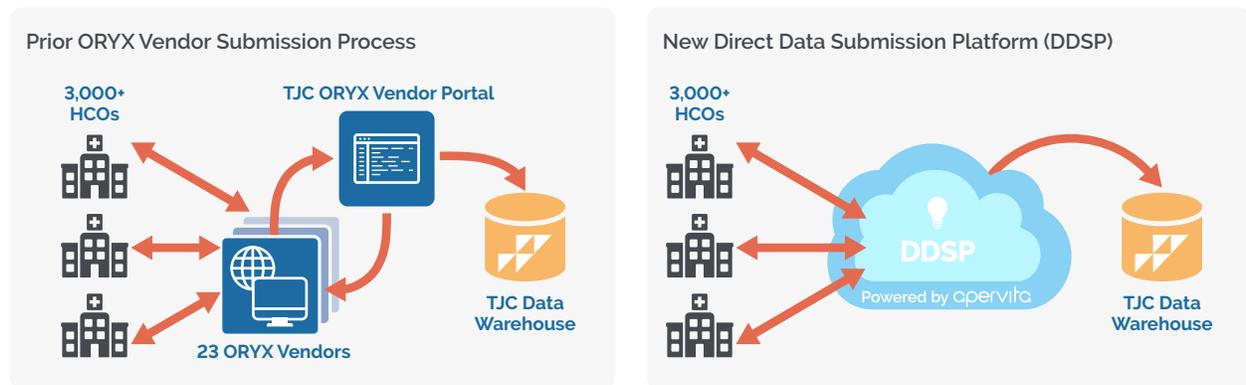for Continuous Performance Improvement

A Platform for Proactive Performance Improvement

Under the leadership of The Joint Commission's Executive Vice President, Division of Health Care Quality Evaluation, Dr. David W. Baker and the Director of Quality Management, Tricia Elliott, The Joint Commission undertook an effort to further empower their accredited hospitals and HCOs by simultaneously offering more valuable and timely insights and reducing the required resources to do so. Leveraging Apervita's development tools, environment and components, The Joint Commission developed the cloud-based Direct Data Submission Platform (DDSP) initial version of this in a matter of months.

Harnessing the power of eCQMs, the ground-breaking DDSP eliminated the need for costly and time-consuming copying, transporting and normalizing of data from thousands of disparate hospitals. The DDSP provides a HIPAA-compliant standards-based clinical data ingestion and connection mechanism for hospitals and HCOs to easily make their information available to The Joint Commission. With the DDSP, hospitals no longer send large copies of their data through intermediary vendors to The Joint Commission. Instead, hospitals upload their specific data in its existing form to the Apervita platform, in a secure, private location controlled by each individual hospital. With Apervita's data provisioning and secure access, the DDSP allows data to be analyzed by both the hospitals and The Joint Commission, without moving or changing the data. The results of the analysis are then available to both The Joint Commission and the submitting hospital in near-real time.

Envisioning a New Approach

Under the prior ORYX quality measure process, each HCO selected one of 23 vendors to assist with its annual repporting process. This approach cost the HCO significant time and money, and often presented results 9–12 months after data was shared with the vendor.

Using the DDSP, HCOs can upload, verify and analyze their data as often as they want, providing year-round actionable quality data. This new approach eliminates delays and the expense of shipping data to intermediary vendors.
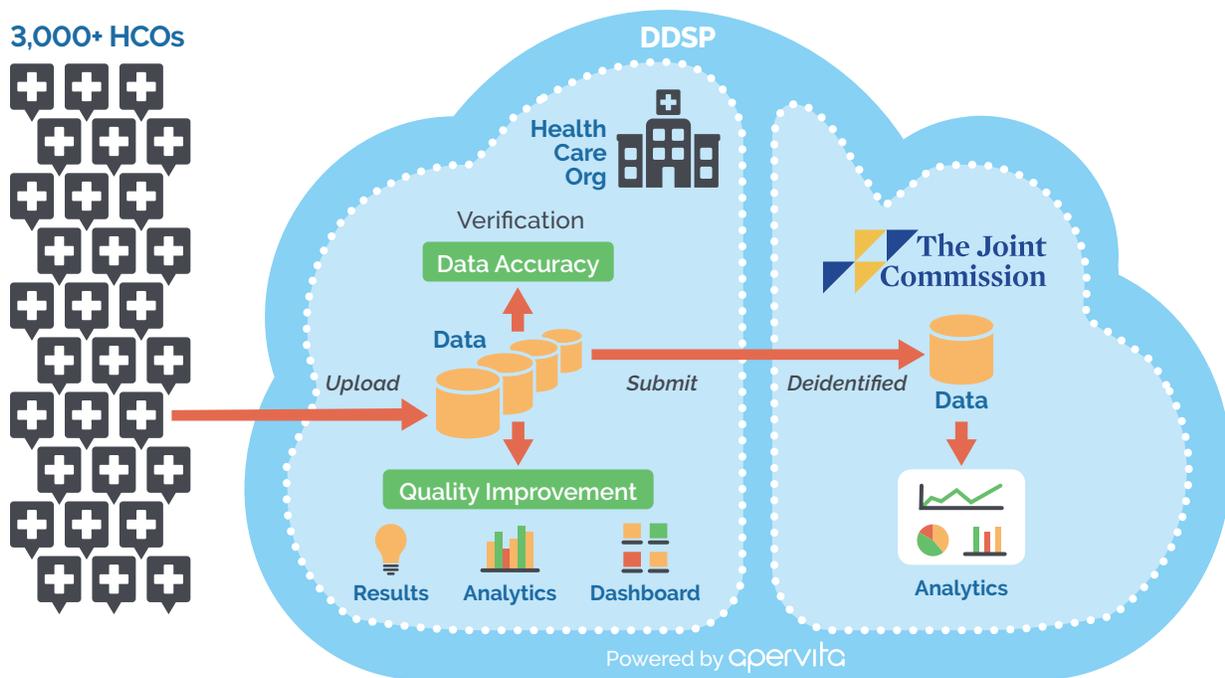
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Building the Future of Clinical Quality:
From Performance Measures to Improved Outcomes

This innovative approach is more technically efficient and provides additional benefits to the accredited hospitals. With enterprise-wide tools including continuous access to quality reports, robust data visualizations, and pre-submission performance analytics, the DDSP application gives hospitals the opportunity to identify clinical areas for improvement and proactively intervene to close care gaps in real-time. eCQM submission is no longer a regulatory box to check. With the DDSP application, hospitals can continuously improve clinical quality while reducing the costs and resources required of manual reporting.

"The Joint Commission can now help hospitals deliver on the ultimate goal of an eCQM: To provide detailed clinical data to assess treatment and outcomes, and to identify opportunities for clinical quality improvement while reducing the burden of manual abstraction and reporting."

—David W. Baker, MD, MPH, FACP, Executive Vice President, Division of Health Care Quality Evaluation, The Joint Commission.

Inside the Direct Data Submission Platform (DDSP)
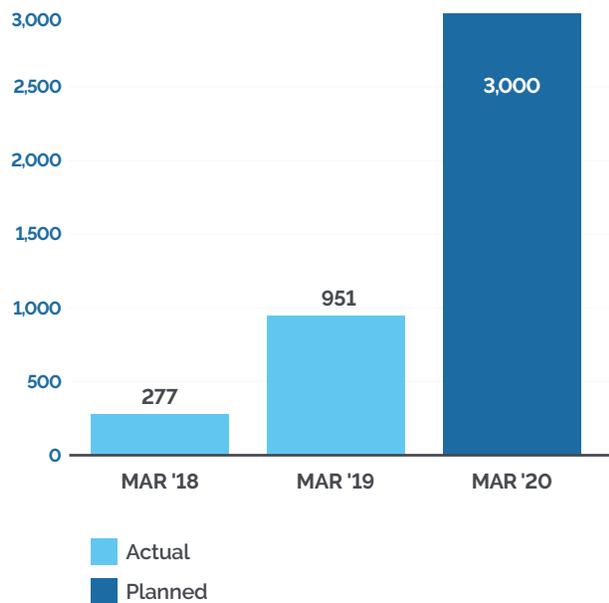

The DDSP offers each HCO a private, secure, access-only-by-permission data space in the Apervita Cloud. Each HCO can verify its data accuracy and run TJC's quality analysis against the data as ofen as they like. Once the HCO decides to formally submit the data, TJC receives the deidentified data from each HCO and runs its Quality analytics and reports results back to the HCO.

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Rapid Adoption

Following just a few months of design and development, the DDSP was introduced to TJC-accredited HCOs in early 2018. Supported by a well-planned education process, in just one year, almost 1,000 HCOs were utilizing the DDSP. Put another way, in just 12 months, The Joint Commission introduced nearly 1-in-5 US hospitals to the power and efficiency of eCQMs, running on a healthcare platform. Moving forward, TJC expects more than 3,000 HCOs to use the DDSP by the end of 2019.

DDSP Adoption

MAR '18	277
MAR '19	951
MAR '20	3,000

■ Actual
■ Planned

DDSP User Reactions

"I just wanted to say thank you for such an easy process compared to going through CMS' portal. Please don't change it next year. I appreciated your auto evaluation of case threshold and zero denominator which made me realize that I wasn't doing it right for CMS when I manually entered them. The webinars were great and the system evaluated the files extremely quick in comparison to CMS! Kudos."
—Large Midwest Private Hospital

"I had thirteen healthcare organizations in Wave 1 and have submitted with no issues. Thank you for providing a great platform."
—Large Regional Midwest Integrated Delivery Network (IDN)

"Very pleased to report that all sixteen of our healthcare organizations have now successfully submitted! Thank you for creating this tool and letting us be involved in the feedback process!"
—Regional Southwest IDN

"This is a very nice tool for viewing measure results."
—Midwest Non-Profit Health System

"We have been VERY impressed with TJC's eCQM submission process."
—Large Texas-Based IDN and Academic Medical Center

"Earlier this week, I successfully submitted the QRDA's for the nine hospitals on the original request! The Direct Data Submission portal is MUCH more user-friendly than QualityNet and the Apervita resources have been extremely helpful and pleasant to work with."
—Top Five National For-Profit Health System

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Apervita, Inc. is the first healthcare Platform-as-a-Service (PaaS) that allows providers, payers and the health enterprises that support them to easily build and share applications that decrease cost, improve patient and clinician experience, and improve outcomes. With Apervita, health enterprises can collaborate freely and securely within and outside of their organizations, streamlining, standardizing and auditing quality measures, operational metrics and care pathways. Apervita is used by approximately 1,000 hospitals nationwide.

For more information on how Apervita can transform your business, visit **apervita.com** or email **info@apervita.com**

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