



## The Drive to be Better

With the end of 2018 approaching, it's worth a quick look at an important network highlight of the year: Azara DRVS has been adopted by twelve of our nineteen centers. Subscriptions to the powerful population health tool will not only advance data integration across the Network but the accurate, up-to-the-minute, population data will benefit health center function and productivity in the following ways:

1. Easier UDS reporting as automated reports are generated in a matter of minutes. Staff efforts can now be directed to more productive patient-centered pursuits. How far we have come since the era of marathon UDS chart reviews.
2. Hospital admission, discharge, and transfer (ADT) summaries from virtually every Arizona hospital will soon be accessible in Azara DRVS. Working with the Health Information Exchange (Health Current), the technical team continues to make progress toward this important goal with a potential for dramatic clinical impact. No longer will post-hospital coordination of care be thwarted by lack of information.
3. Two months ago, ACCCHS inaugurated a FQHC Alternative Payment Method in three categories: 1) colorectal cancer screening, 2) BMI measurement and counseling in children, and 3) diabetes control. Population health software like DRVS brings real-time data to quality efforts so that centers have the tools to capitalize on these quality incentives. Patient registries and care gap reports are easily generated, allowing for nimble, focused QI efforts. Significantly rewards will follow, not the least of which is improved patient health. Payment bonuses (0.5 % for reaching each of the three targets) will help CVN centers continue to pursue missions with funds they need.
4. Friendly intra-network competition: CVN board authorized unmasking center data reports (many of them generated by Azara DRVS) so that all health centers can compare quality measure performance relative to network peers. We all want to succeed and there is nothing more motivating than peer pressure to do so. Removing the shroud of data secrecy will ensure that we keep our eye on data, motivating ever better QI efforts.

Though the above list of benefits noted above is incomplete, it's clear that with the right data tools, we can look forward higher quality population data that translates into better patient and community health.

When the holidays wind down, UDS season will be upon us. This year, may you experience minimal seasonal UDS stress—a consequence of knowing that you helped patients and communities move toward better health and quality of life.



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