QIOs and Flex: Collaborating for Quality Improvement

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for the
National Conference of State Flex Programs

July 10, 2012
QIO Program Overview

- One QIO contract in each state and territory (for a total of 53) funded by CMS out of the Medicare Trust Fund
- Contract typically held by a locally based non-profit organization
- Purpose is to assure and improve quality of care for Medicare beneficiaries
- New three-year performance-based contract (10th Scope of Work) began August 1, 2011, for all QIOs
QIOs: A Brief Look Back

- Phase I: quality assurance – regulatory, hospital, and physician-oriented, focused on identifying outliers in care (1970s and 1980s)
- Phase II: moving to quality improvement model – offered and supported focused QI projects, hospital-oriented (1990s)
- Phase III: quality, safety, and transparency – statewide initiatives and targeted projects, working across the continuum of care (today)
Statutory Mission of the QIO Program

The statute authorizes the QIOs to work to improve care and services to Medicare Beneficiaries with a focus on:

- Effectiveness
- Efficiency
- Economy
- Quality

QIOs support and partner with CMS to achieve:

- Better care
- Better health for people and communities
- Affordable care through lowering costs by improvement
Current QIO Program: August 2011- July 2014

- QIOs are viewed by CMS as national infrastructure – “field force for improvement” – to help implement the new National Quality Strategy and federal health reform efforts
- Today’s QIO program clearly reflects the Don Berwick/IHI influence and the Triple Aim
10th SOW is Aligned with National Priorities

- QIO initiatives and projects support:
  - National Quality Strategy
  - Partnership for Patients Campaign
  - One Million Hearts Campaign
  - HHS Health Care Associated Infection Action Plan
  - HHS National Prevention and Health Promotion Strategy
  - HHS Action Plan to Reduce Health Care Disparities
  - Healthy People 2020
10SOW AIMS and Drivers

**Strategic Aims**

*What will be done*

- Beneficiary-Centered Care
- Improve Individual Patient Care
- Integrate Care for Populations
- Improve Health for Populations and Communities

**Drivers of Change**

*How the work will be done*

- Learning and Action Networks
- Focused Technical Assistance
- Care Reinvention through Innovation Spread
10SOW AIMS

1. Beneficiary and Family Centered Care
   – Case Review

2. Improving Individual Patient Care
   – Reduction of Health Care Acquired Conditions, including Health Care Acquired Infections (HAIs) and Adverse Drug Events
   – Improving Quality through Value Based Purchasing (i.e., quality measure reporting and improvement)*

* Aligns with MBQIP
10SOW AIMS (cont.)

3. Integrating Care for Populations and Communities
   – Improving Care Transitions Leading to the Reduction of Readmissions

4. Improving Health for Populations and Communities
   – Promotion of Immunizations and Screenings
   – Cardiovascular Health Campaign
10SOW Drivers (3)

1. Supporting and Convening Learning and Action Networks

2. Providing Technical Assistance

3. Care Reinvention through Innovation Spread
What is new and different in the 10SOW?

- More emphasis on beneficiary and family engagement
- Expanded focus on community coalition formation and community engagement (Learning and Action Networks)
- Convening of leaders, including boards
- Focus on innovation spread, use of stories, sustainability
Critical access hospitals and the QIO program

10SOW and MBQIP

• CAH support specifically called out in QIO program for assistance in public reporting
  – Inpatient reporting and improvement aligned with MBQIP phase 1
  – Outpatient reporting and improvement aligned with MBQIP phase 2

• QIO evaluation metrics include:
  – % of CAHs reporting inpatient measures
  – % of CAHS reporting outpatient measures
CAHs and the 10SOW: MBQIP

QIO technical assistance may include:

- Promotion and outreach to hospitals not currently reporting data
- Educating hospitals about reporting tools, requirements, and processes
- Providing assistance to hospitals seeking to improve their quality of care on topics addressed by Hospital IQR and/or OQR program measures
What Can A State Flex Program Do?

- Meet regularly with your state QIO to do joint planning and coordination
- Keep your QIO informed regarding MBQIP implementation
  - Progress, challenges, opportunities
- Encourage CAHs to take advantage of QIO technical assistance for quality reporting and improvement
- Explore connections to other QIO initiatives relevant to CAHs (e.g., readmissions, HAI)
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