

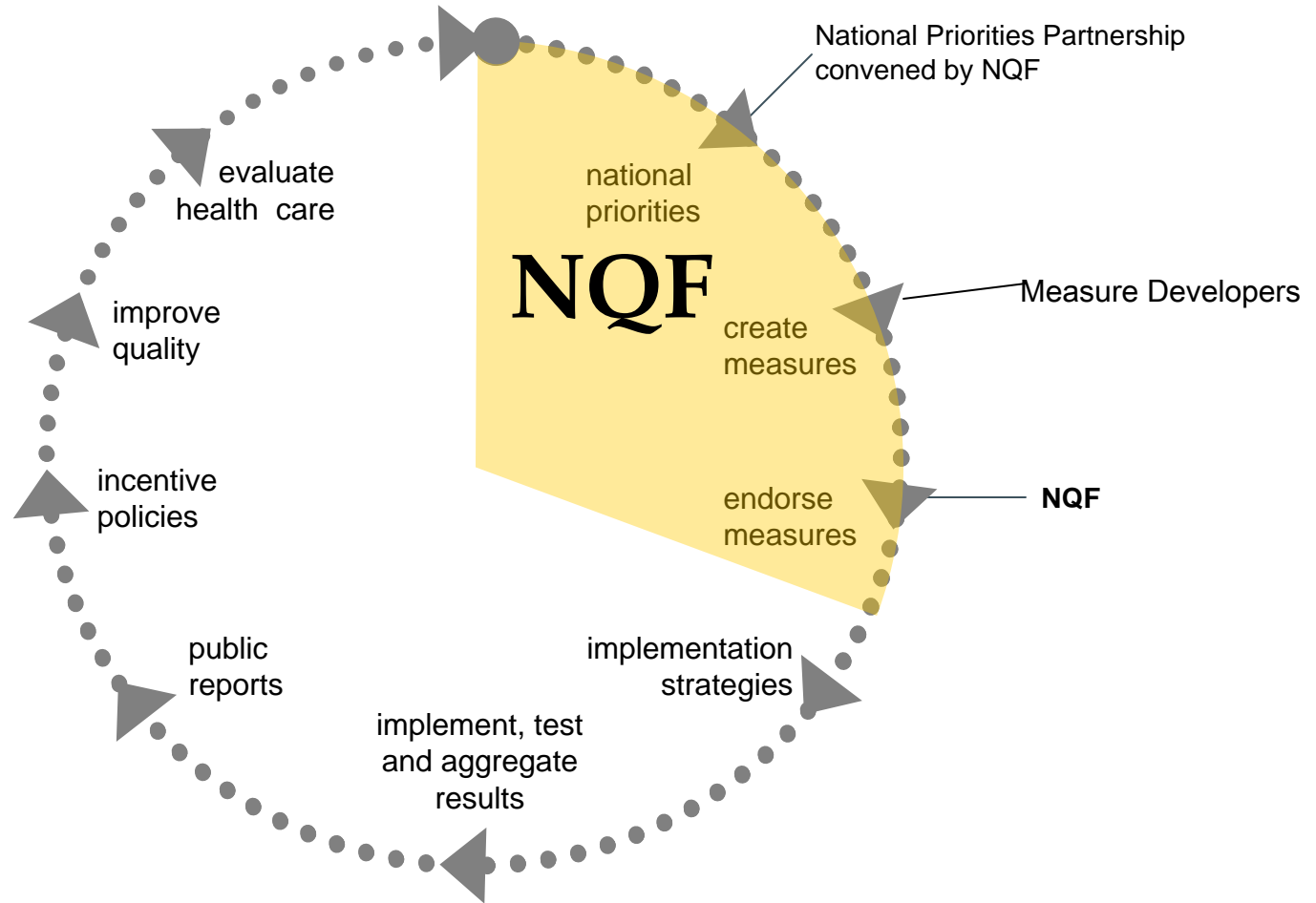
Performance Measurement: A National View

Janet M. Corrigan, PhD
President and CEO
National Quality Forum

- NQF's Role on the Quality Landscape
- National Priorities and Goals for Transforming Healthcare
- Performance Measurement & Reporting Requirements: Where are we headed?

- Improve the quality of American healthcare by **setting national priorities and goals for performance improvement**
- **Endorse national consensus standards for measuring and publicly reporting on performance**
- Promote the attainment of national goals through **education and outreach programs**

NQF's Current Role on The Quality Landscape



27 multi-stakeholder organizations

- Consumers
- Purchasers
- Quality alliances
- Health professionals/providers
- Public sector: CMS, NGA, CDC, AHRQ, NIH
- Accreditation/certification groups
- Health plans

Co-Chairs:

Donald Berwick

Institute for Healthcare Improvement

Margaret O'Kane

National Committee for Quality Assurance

- **FOCUS:** Center on high-leverage areas to achieve high return on investment.
- **ALIGN:** Harmonize efforts of “multiple groups” around common goals for improvement.
- **ACCELERATE:** Emphasize the urgent need to drive fundamental change in health system.



CONSUMERS

- National Partnership for Women and Families
- Consumers Union
- AARP
- AFL-CIO

PURCHASERS

- National Business Group on Health
- The Leapfrog Group
- Pacific Business Group on Health
- Chamber of Commerce

HEALTH PROFESSIONALS/PROVIDERS

- PCPI convened by the AMA
- American Nurses Association
- National Association of Community Health Centers

QUALITY ALLIANCES

- AQA
- Hospital Quality Alliance
- Quality Alliance Steering Committee
- Alliance for Pediatric Quality

PUBLIC SECTOR

- Centers for Disease Control and Prevention
- Centers for Medicare and Medicaid Services
- Agency for Healthcare Research and Quality
- National Institutes of Health
- National Governors Association

ACCREDITATION/CERTIFICATION

- American Board of Medical Specialties
- The Joint Commission
- National Committee for Quality Assurance
- Certification Commission for Healthcare Information Technology

OTHERS

- America's Health Insurance Plans
- Institute for Healthcare Improvement
- Institute of Medicine
- National Quality Forum

- Safety
- Care coordination
- Patient and Family Engagement
- Palliative care
- Overuse
- Population health

SAFETY GOALS

- Reduce preventable hospital-level mortality rates
- Drive toward zero
 - Serious adverse events
 - Healthcare-acquired infections

1.7 million healthcare associated infections annually in U.S. hospitals responsible for 99,000 deaths. (Klebens)

Preventable errors cost \$17 - \$29 billion per year in healthcare expenses, lost productivity, lost income, and disability. (IOM)

CARE COORDINATION GOALS

- Medication reconciliation
- Preventable hospital readmissions
- Preventable emergency department visits

Annually 700,000 patients treated in emergency departments for adverse drug events (Budnitz)

18% of Medicare patients readmitted within 30 days, of which, 75% preventable (MedPAC)

PATIENT/FAMILY ENGAGEMENT GOALS

- Informed decision-making
- Patient experience of care
- Patient self-management

Estimated 30% reduction in Medicare spending on surgery from informed patient choice (Dartmouth)

Only 12% of adults have adequate skills to manage their own healthcare (AHRQ)

PALLIATIVE CARE GOALS

- Relief of physical symptoms
- Help with psychological, social and spiritual needs
- Effective communication regarding treatment options, prognosis
- Access to high-quality palliative care and hospice services

Patients in palliative care programs are more satisfied with their care, and the costs of care are as much as 45% less than those for usual care patients. (Brumley)

Fewer than 50% of hospitals have palliative care programs. (Goldsmith)

OVERUSE GOALS

- Inappropriate medication use
- Unnecessary lab tests
- Unwarranted maternity care interventions
- Unwarranted diagnostic procedures
- Unwarranted procedures
- Unnecessary consultations
- Preventable emergency department visits and hospitalizations
- Inappropriate non-palliative services at end of life
- Potentially harmful preventive services with no benefit

30% of spending unnecessary—an astounding \$600 - 700 billion. (IOM)

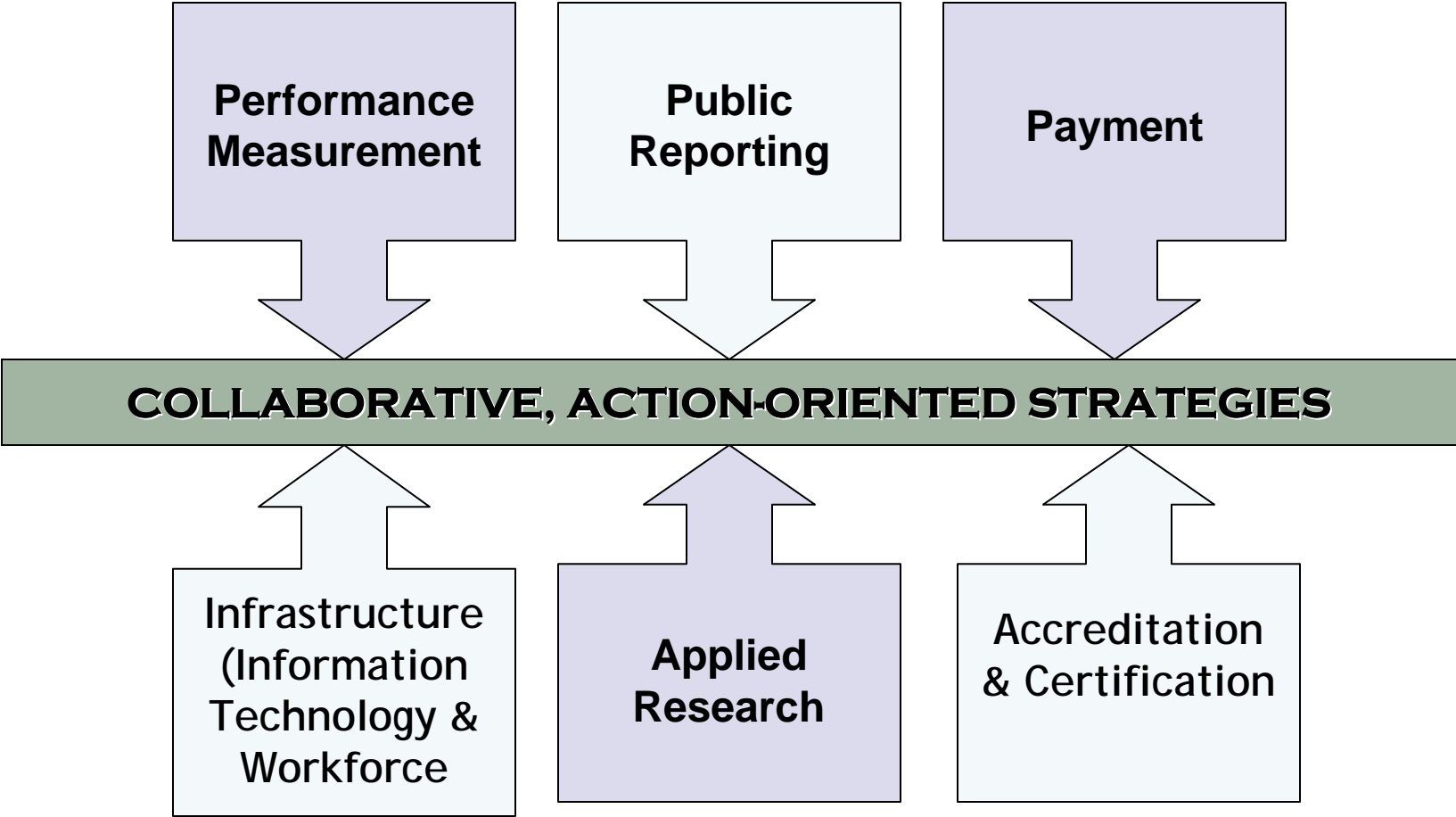
More than enough to cover the one out of seven Americans who are uninsured

POPULATION HEALTH GOALS

- All Americans receive effective preventive services
- All Americans adopt healthy lifestyle behaviors
- Health of American communities be improved according to a national index of health

36,000 people die and 200,000 are hospitalized due to influenza; only 37% of adults over 50 get an annual flu vaccination. (Partnership for Prevention)

72 million Americans are obese, and at risk for serious health problems such as heart disease and diabetes, at a cost of nearly \$120 billion in 2000. (CDC)



National Priorities and Goals:

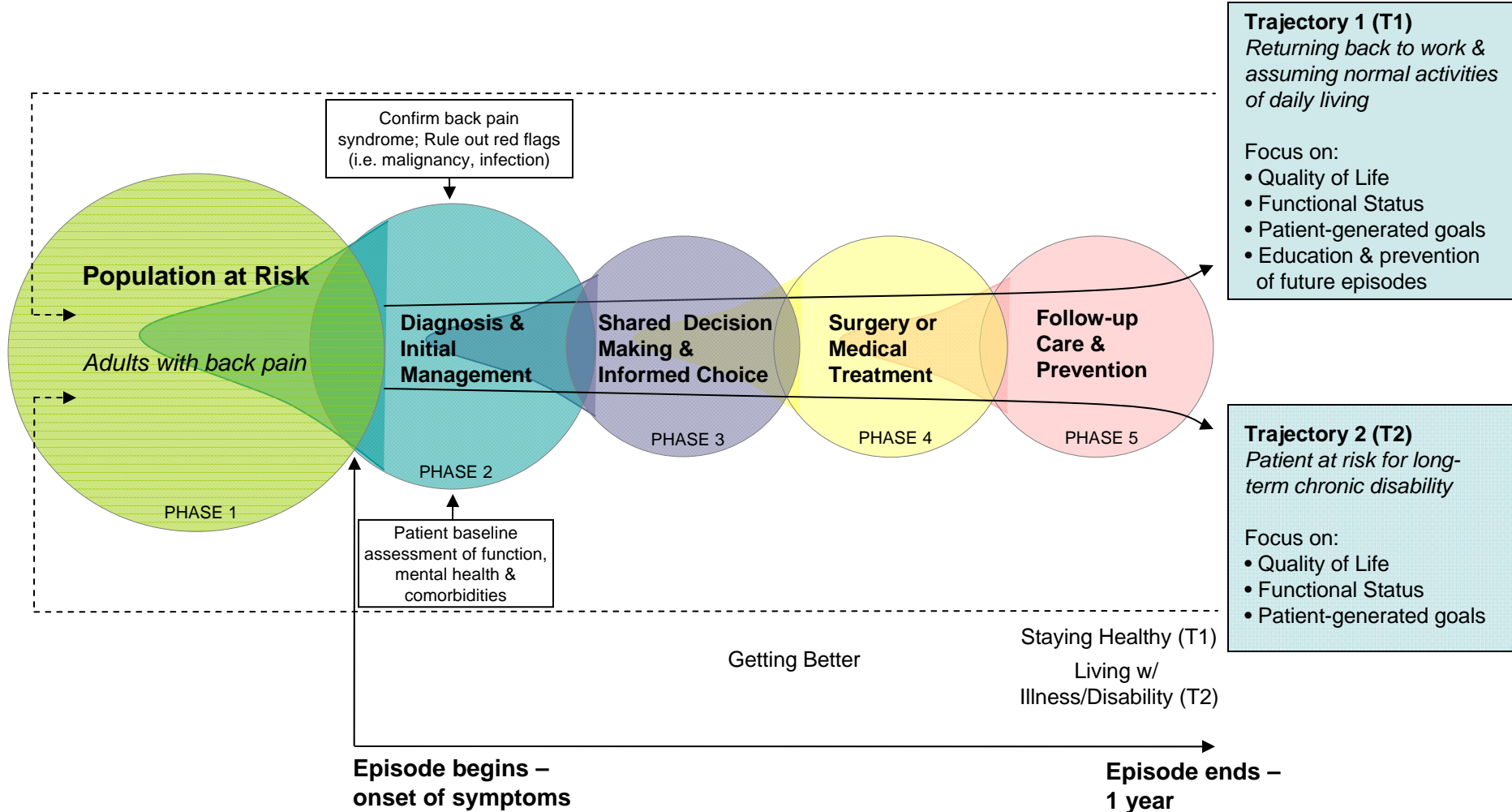
- For each of the priorities, there are some NQF-endorsed measures available, but there are also gaps.
- 2009 Endorsement Projects
 - Care coordination
 - Palliative care
 - System-level indicators for mortality and HAI
 - Medication measures
 - Informed decision-making
 - Functional status instruments
 - Some overuse
- Major emphasis on measures that can be produced from clinically-enriched administrative data

- Create incentives for organizations to work together
- Engage patients and family caregivers
- Support bundled payments
- Focus on outcomes

If everyone received care in organized settings, health care costs would be far less and adherence to guidelines far higher.
(Dartmouth)

Benchmark:

- Mayo Clinic: 30% reduction in costs
- Intermountain: 40% reduction in costs



For More Information:

www.qualityforum.org