



RECENT ACCOMPLISHMENTS

Care Transitions

Through the Quality Improvement Organization (QIO) Program, 14 communities across the country have improved coordination across health care settings and equipped Medicare beneficiaries to take a more active role in managing their health after a hospitalization. These communities' achievement in reducing avoidable hospital readmissions within 30 days of patient discharge demonstrate what every community with the will to improve can accomplish. Their success also has established a foundation for related, future QIO Program initiatives.

Bringing best practices to the beneficiary

QIOs in every state and territory, united in a national network administered by the Centers for Medicare & Medicaid Services, have the ability to focus health care quality improvement resources and expertise at the community level. This was especially critical to the success of the Care Transitions initiative.

With community participants, QIOs implemented three types of interventions to promote seamless transitions between care settings and reduce hospital readmissions: improving processes of care at a system level, identifying specific diseases or conditions that lead to readmissions, and addressing community-specific reasons for readmissions. QIOs also worked with providers and community partners to open a dialogue and support greater coordination among the multiple providers who treat patients with chronic illnesses. Additionally, they coached Medicare beneficiaries and their caregivers about local resources to help them stay healthy and take greater control of their own health care decisions.

In the State of Washington, for example, the QIO empowered Medicare beneficiaries to take an active role in their own care by providing care transitions coaching. One patient had been hospitalized 9 times in 13 months due to a chronic condition, mismanaged medications and a general lack of knowledge about community resources. When a transitions coach was integrated into the care plan and his caregiver joined the team for additional support, the beneficiary was able to stay out of the hospital for seven months.

Contributing to national health quality goals

Avoidable hospital readmissions cost Medicare an estimated \$12 billion annually. From August 2008 through July 2011, more than 1,125,500 Medicare beneficiaries were affected by the QIO Program's community-based initiatives to reduce avoidable hospital readmissions. In total, the 14 participating communities reduced admissions per 1,000 beneficiaries by 5.6%, compared to a 3.4% reduction in 52 peer communities.

Continued



The QIO Program is an integral part of the U.S. Department of Health and Human Services' National Quality Strategy and is the largest federal program dedicated to improving health quality at the community level. As a major force and trustworthy partner for the continual improvement of health and health care for all Americans, QIOs work with patients, providers and practitioners across organizational, cultural and geographic boundaries to spread rapid, large-scale change. The work that QIOs perform spans every setting in which health care is delivered, even the critical transitions between those settings. The Program focuses on three aims: better patient care, better individual and population health, and lower health care costs through improvement.

Quality Improvement Organization Program

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Building on success, aiming even higher

Moving forward, QIOs will bring together hospitals, nursing homes, patient advocacy organizations and other stakeholders in communities with high hospital readmission rates. The goal is to help these communities build capacity for a comprehensive, coordinated approach to care transitions that will qualify them for funding through Section 3026 of the Affordable Care Act.

For more information

The QIO Program invites all health care providers and health quality stakeholders—including patients and their families—to be a part of its new Care Transitions initiative. To express an interest, contact your local QIO. A directory is provided in the Program’s “Advances in Quality” report. More information also is available at www.cms.gov/qualityimprovementorgs.