

QIO Program:

Quality Innovation Network – Quality Improvement Organizations

Better Health, Better Care, Lower Cost



QIO Program Transformation

As of August 1, 2014, the Centers for Medicare & Medicaid Services (CMS) has established a new functional structure for the Quality Improvement Organization (QIO) Program that delivers program value to patients and families, maximizes learning and collaboration for improving care, and supports the spread and sustainment of effective new practices and models of care. The most significant transformation of the Program separates review of Medicare beneficiary quality of care concerns and appeals from quality improvement work carried out in provider and community settings. Two Beneficiary and Family Centered-Quality Improvement Organizations (BFCC-QIOs), covering all 50 states and three territories, address quality of care concerns and appeals, while 14 Quality Innovation Network-Quality Improvement Organizations (QIN-QIOs) work with providers, stakeholders, and Medicare beneficiaries to improve the quality of healthcare for targeted health conditions.

QIN-QIOs

QIN-QIOs bring Medicare beneficiaries, providers, and communities together in data-driven initiatives that increase patient safety, make communities healthier, better coordinate post-hospital care, and improve clinical quality. QIN-QIOs are skilled in creating opportunities for providers to learn from each other, applying advanced improvement and analytical methods, engaging patients and families, and structuring processes for sustaining positive change. QIN-QIOs serve regions of two to six states, which means best practices for better care spread more quickly, while still accommodating local conditions and cultural factors.

Foundation Principles

Although the structure of the QIO Program has changed, CMS' commitment remains the same: driving rapid, large-scale change that puts patients first and contributes to better patient care, better population health, and lower costs through improvement. The work of QIN-QIOs is grounded in foundational principles that align with the goals of the CMS Quality Strategy: (a) eliminating disparities; (b) strengthening infrastructure and data systems; (c) enabling local innovation; and (d) fostering learning organizations. For the next five years, QIN-QIOs will build on this platform to accomplish these major goals:

Improve the Health Status of Communities

Goal 1: Promote Effective Prevention and Treatment of Chronic Disease by:

- Working with physicians to provide more effective treatment to patients at risk for heart attack and stroke, especially those in underserved populations
- Reducing disparities in diabetes care by supporting self-management education in disadvantaged communities

Continued



The Quality Improvement Organization (QIO) Program is an integral part of the U.S. Department of Health and Human Services' National Quality Strategy and is one of the largest federal programs dedicated to improving health quality at the community level. This network of experts in quality improvement works in partnership with patients and families, providers, communities, and healthcare stakeholders in every setting in which care is delivered. QIN-QIOs assist patients and families, providers, and communities to: make care safer, support active engagement and self-management of chronic conditions, eliminate health disparities, promote best practices for healthy living, improve access to care, and make care affordable. To learn more, visit www.qioprogram.org.

Quality Improvement Organization Program

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- Helping physician practices use electronic health records to their full potential, and to make sure patients receive preventive services

Promote Safe Care that is Patient and Family-Centered, Reliable and Accessible

Goal 2: Make Care Safer and Reduce Harm Caused in the Delivery of Care by:

- Working with providers across the continuum of care to prevent healthcare-associated infections in hospitals and other care settings; providing assistance in spreading and sustaining evidence-based practices for infection prevention and reduction
- Targeting prevention of healthcare-acquired conditions in nursing homes, and in all patient safety efforts, facilitating collaboration, innovation, and enhanced patient and family engagement

Goal 3: Promote Effective Communication and Coordination of Care by:

- Helping community stakeholders, providers, patients, and families to organize for better coordination of care transitions, improved discharge communication, better access to community services and to share evidence-based approaches to reduce avoidable hospital readmissions, especially in vulnerable populations affected by poor care coordination
- Working with providers and stakeholders across care settings to reduce potential adverse drug reactions, medication errors, overdoses, allergic reactions and other adverse drug events; promoting medication management strategies, especially for high-risk medications like anticoagulants, opioids, and diabetic agents

Provide Better Care at Lower Cost

Goal 4: Make Care More Affordable by:

- Helping providers report on and receive incentive payments for measures that assess clinical quality of care, care coordination, patient safety, and patient and caregiver experience of care; helping hospitals, physician practices and other providers successfully improve care quality and their efficient and effective use of healthcare IT to achieve system-wide efficiency and lower costs
- Innovating through QIN-QIO-proposed projects that advance efforts for better care at lower cost

Learn More and Become Involved

The QIO Program invites all providers, community stakeholders, Medicare beneficiaries, family members and caregivers to become partners in its improvement initiatives. To get involved, contact your QIN-QIO: www.qioprogram.org/contact.