Overview of the CMS Quality Strategy

The Centers for Medicare & Medicaid Services (CMS) is working to build a health care delivery system that's better, smarter and healthier – a system that delivers improved care, spends healthcare dollars more wisely, and one that makes our communities healthier. As outlined in our <u>2016 CMS Quality</u> <u>Strategy Update</u>, we are using all our policy levers and program authorities to achieve these goals by guiding the activities of all agency components and working together toward this transformation.

CMS Quality Strategy 2016

The CMS Quality Strategy is built on the foundation of the <u>CMS Strategy</u> and the <u>HHS National Quality</u> <u>Strategy (NQS)</u>. The Quality Strategy pursues and aligns with the three broad aims of the NQS and its six priorities.

	Three Aims		Six Priorities
	 Better Care: Improve the overall quality of care by making healthcare more personcentered, reliable, accessible, and safe. Healthier People, Healthier Communities: Improve the health of Americans by supporting proven interventions to address behavioral, social, and environmental determinants of health, and deliver higher-quality care. 	1.	Make Care Safer by Reducing Harm Caused in the Delivery of Care
		2.	Strengthen Person and Family Engagement as Partners in Their Care
		3.	Promote Effective Communication and Coordination of Care
		4.	Promote Effective Prevention and Treatment of Chronic Disease
3.	Smarter Spending: Reduce the cost of quality healthcare for individuals, families, employers, government, and communities.	5.	Work with Communities to Promote Best Practices of Healthy Living
		6.	Make Care Affordable

Each of these priorities has become a goal in the CMS Quality Strategy. For each of the six goals, CMS outlines strategic results and specific objectives and desired outcomes, how it plans to achieve the objectives, and current initiatives in place that support the goals and objectives.

Four foundational principles also guide CMS' action toward each of these goals. By explicitly incorporating these four foundational principles, CMS believes that it will drive change to improve quality and cost of care for all. These principles include **eliminating racial and ethnic disparities**, **strengthening infrastructure and data systems across all settings of care**, **enabling local innovations**, and **fostering learning organizations**.

CMS Quality Strategy Goals and Objectives

To advance the three aims, the CMS Quality Strategy goals reflect the six priorities from the NQS:

Goal 1: Make Care Safer by Reducing Harm Caused in the Delivery of Care *Strategic Result: Healthcare-related harms are reduced.*

Objectives:

- Improve support for a culture of safety
- Reduce inappropriate and unnecessary care that can lead to harm
- Prevent or minimize harm in all settings

Goal 2: Strengthen Person and Family Engagement as Partners in Their Care Strategic Result: Persons and families are engaged as informed, empowered partners in care.

Objectives:

- Ensure all care delivery incorporates person and family preferences
- Improve experience of care for persons and families
- Promote self-management

Goal 3: Promote Effective Communication and Coordination of Care Strategic Result: Communication, care coordination, and satisfaction with care are improved.

Objectives:

- Reduce admissions and readmissions
- Embed best practices to enable successful transitions between all settings of care
- Enable effective healthcare system navigation

Goal 4: Promote Effective Prevention and Treatment of Chronic Disease *Strategic Result: Leading causes of mortality are reduced and prevented.*

Objectives:

- Increase appropriate use of screening and prevention services
- Strengthen interventions to prevent heart attacks and strokes
- Improve quality of care for people with multiple chronic conditions
- Improve behavioral health access and quality care
- Improve perinatal outcomes

Goal 5: Work with Communities to Promote Best Practices of Healthy Living *Strategic Result: Best practices are promoted, disseminated, and used in communities.*

Objectives:

- Partner with and support federal, state, and local public health improvement efforts
- Improve access within communities to best practices of healthy living
- Promote evidence-based community interventions to prevent and treat chronic disease
- Increase use of community-based social services and HCBS



Goal 6: Make Care Affordable Strategic Result: Quality care is affordable for individuals, families, employers, and governments.

Objectives:

- Develop and implement payment systems that reward value over volume
- Use cost analysis data to inform payment policies

For More Information

To learn more about the CMS Quality Strategy, visit: <u>https://www.cms.gov/Medicare/Quality-Initiatives-</u> Patient-Assessment-Instruments/QualityInitiativesGenInfo/CMS-Quality-Strategy.html

CMS Quality Programs and Initiatives

To support Quality Strategy goals and objectives, CMS:

- Provides financial incentives that reward providers for adopting best practices that decrease harm (e.g., Value-Based Purchasing, Medicare Advantage Quality Bonus payments, and the End Stage Renal Disease Quality Incentive Program).
- Established Quality Improvement Organization initiatives, such as the *Everyone with Diabetes Counts* program, which gives each person with diabetes and their family an active role in care.
- Is a lead partner in the Million Hearts[®] initiative, which seeks to reduce the incidence of heart attacks and strokes by 1 million by 2017.
- Established the Hospital Value-Based Purchasing Program, which adjusts hospital payments made by Medicare for inpatient services based on their performance on measures that fall into a number of domains, including patient safety, clinical outcomes, and patient experience.

