

NATIONAL PRIORITIES PARTNERSHIP

Convened by the National Quality Forum

FOR IMMEDIATE RELEASE

February 3, 2011

CONTACT: Dorie Hightower, NQF
202 783 1300 or press@qualityforum.org

Erin Reese: NQF
202 783 1300 or press@qualityforum.org

National Priorities Partnership Addresses the Question of Reducing Healthcare Costs while Improving Quality

Compact Action Briefs Identify Opportunities, Solutions, and Drivers for Change

WASHINGTON, DC – (February 3, 2011) – Taking on areas of healthcare that together account for billions of dollars in wasteful spending, the National Priorities Partnership (NPP) released sets of specific actions to reduce healthcare costs by addressing preventable hospital readmissions, reducing emergency department overuse, and preventing medication errors.

NPP has issued a challenge for all stakeholders to take steps necessary to address these issues. “These actions can be put into practice in every state and community across the country,” said Bernard Rosof, chair of the Physician Consortium for Performance Improvement convened by the American Medical Association, and NPP co-chair. “The evidence is clear, the solutions practical, and the suggested actions can make a difference.”

For each topic, NPP worked with NEHI, a nonprofit, health policy institute, to document the cost in terms of dollars and how steps to reduce costs may also have a positive impact on patient safety and better quality care.

The first topic, [addressing preventable hospital readmissions](#), offers an opportunity to address an annual \$25 billion in wasteful healthcare spending. Driven largely by poor discharge procedures and inadequate follow-up care, nearly one in every five Medicare patients discharged from the hospital is readmitted within 30 days. The brief recommends improved procedures for admitting and discharging patients, delivering better follow-up care, and utilizing health information technology. There are a number of tested actions, including strengthening both hospital admission and discharge requirements, creating new readmission-based quality measures, and changing payment systems to fund technologies and innovative models of care.

Another action brief addresses [the overuse of emergency departments \(ED\)](#), suggests ways to reduce an estimated \$38 billion a year in wasteful healthcare spending. Because an increasing number of people are using emergency departments for non-urgent care, it is estimated that more than half of those visits are for conditions that could have been treated in a primary care setting. The average cost of an ED visit is \$580 more than the cost of an office healthcare visit, according to the Agency for Healthcare Research and Quality. Among the solutions highlighted in the brief is the establishment of nurse-operated telephone triage lines and alternative approaches to primary care, such as free-standing, hospital-based urgent care clinics and telehealth (or “virtual office visits”).

[“Preventing Medication Errors”](#) provides a \$21 billion opportunity to save on wasteful healthcare spending as well as prevent unnecessary deaths. In its report *To Err is Human*, the Institute of Medicine estimated 7,000 deaths in the United States each year are due to preventable medication errors. The brief outlines the use of care coordination strategies, interdisciplinary teamwork, and health information technologies to significantly increase safety and prevent medication errors. Action steps describe a multipronged approach, ranging from financial incentives to organizational and healthcare delivery improvements that address the root causes of these errors.

Helen Darling, president of the National Business Group on Health and NPP workgroup co-chair, noted the commitment to action goes two ways. “The Partners of NPP recognize that reducing cost is part of improving the health of individuals, communities, and the economy, so we are committed to supporting actions like these to improve healthcare value.”

###

The National Priorities Partnership, convened by the National Quality Forum, is a multistakeholder group including organizations representing the interests of consumers, purchasers, healthcare providers and professionals, state-based associations, community collaborative and regional alliances, government agencies, health plans, accreditation and certification bodies, and supplier and industry groups.
<http://www.nationalprioritiespartnership.org>