

# **CMS NEWS**

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## **CMS launches improved Quality Improvement Program**

The Centers for Medicare and Medicaid Services (CMS) today took the agency's first step in restructuring the Quality Improvement Organization (QIO) Program to improve patient care, health outcomes, and save taxpayer resources.

This first phase of the restructuring will allow two Beneficiary and Family-Centered Care (BFCC) QIO contractors to support the program's case review and monitoring activities separate from the traditional quality improvement activities of the QIOs. The two BFCC QIO contractors are Livanta LLC, located in Annapolis Junction, Maryland, and KePRO, located in Seven Hills Ohio. They will be responsible for ensuring consistency in the review process with consideration of local factors important to beneficiaries.

QIOs historically have provided numerous quality improvement functions, including providing an infrastructure for national quality improvement initiatives across the continuum of care; today's announcement highlights CMS' efforts to restructure the QIO Program to gain efficiencies, to eliminate any perceived conflicts of interest, and to better address the needs of Medicare beneficiaries using BFCC QIOs to focus on providing patients a voice through conducting quality of care reviews, discharge and termination of service appeals, and other areas of required review in various provider settings.

"One of the most critical roles of CMS is to protect the quality and safety of care delivered to beneficiaries. Care needs to be patient-centered and directly engage patients, families, and caregivers," said Dr. Patrick Conway, deputy administrator for innovation and quality and CMS chief medical officer. "The quality of care review is essential to ensure care delivered to all beneficiaries meets professionally recognized standards."

In the program's second phase – expected in July – CMS will award contracts to organizations that will directly work with providers and communities on data-driven quality initiatives to improve patient safety, reduce harm, and improve clinical care and transparency at local, regional, and national levels through Quality Innovation Network and Value, Incentive and Quality Reporting support contractors.

CMS will introduce the program changes with the beginning of its five year, 11<sup>th</sup> Statement of Work – the QIO contracts cycle – on Aug. 1, 2014.

The QIO program is an integral part of the U.S. Department of Health and Human Services' national quality strategy for providing better care, better health at lower costs, and providing "boots on the ground" technical assistance through a national network of independent organizations working to improve care delivery at the community level.

Quality Improvement Organizations have proven successful during the current contracts, covering the 2011 – 2014 period, and have worked to support nursing homes in achieving a 34 percent reduction in pressure ulcers among residents; prevented potential adverse drug events, with more than 44,000 such events avoided; contributed to a 53 percent reduction in hospital infections and saved more than 100,000 people from being admitted or readmitted to a hospital, resulting in improved coordination of care and nearly one billion dollar in savings, although the savings estimated are not solely attributable to QIOs.

The geographic Area 1 and Area 5 were awarded to Livanta, LLC.

The contract awards for Areas 2, 3 and 4 were awarded to KePRO.

**Area 1:** Connecticut, Maine, Massachusetts, New Hampshire, New Jersey, New York, Pennsylvania, Puerto Rico, Rhode Island, Vermont, Virgin Islands

**Area 2:** District of Columbia, Delaware, Florida, Georgia, Maryland, North Carolina, South Carolina, Virginia, West Virginia

**Area 3:** Alabama, Arkansas, Colorado, Kentucky, Louisiana, Mississippi, Montana, North Dakota, New Mexico, Oklahoma, South Dakota, Tennessee, Texas, Utah, Wyoming

**Area 4:** Iowa, Illinois, Indiana, Kansas, Michigan, Minnesota, Missouri, Nebraska, Ohio, Wisconsin

**Area 5:** Alaska, Arizona, California, Hawaii, Idaho, Nevada, Oregon, Washington