

Hospital Quality & Patient Safety: Provider & Employer Perspectives



Employers for Healthcare Value Since 1980

www.LVBCH.com

Welcome Remarks & Introduction

Carl Seitz, President



Quality Committee

- **Chair: Bob Johnston**, East Penn Manufacturing
- **Kristin Wenrich**, City of Bethlehem
- **Jennifer Chambers, MD**, Capital BlueCross
- **Robert McDonald**, Lehigh University
- **Matthew McCambridge, MD**, Lehigh Valley Health Network
- **Donna Sabol**, St. Luke's University Health Network
- **Medical Director: Jeff Burtaine, MD**

The Power of the Coalition

- BSI Corporate Benefits
- Capital BlueCross
- Employer Members:
 - B Braun
 - East Penn Manufacturing
 - Martin Guitar
- Geisinger
- Leapfrog
- Lehigh University – Healthcare Systems Engineering Program
- Lehigh Valley Health Network
- Premiere, Inc
- St. Luke’s University Health Network
- Surgeon Check
- USI

Tuesday, October 9



LEHIGH
UNIVERSITY

HEALTHCARE
SYSTEMS
ENGINEERING

AMERICA'S #3 LEADING CAUSE OF DEATH
IS ITS OWN HEALTH CARE SYSTEM

TO ERR IS HUMAN

A PATIENT SAFETY DOCUMENTARY



Hospital Tours

Documentary

Leapfrog Reception



Employers for Healthcare Value Since 1980

www.LVBCH.com

QUESTIONS?

- For the employer panel
- Please use the cards provided on your table. Cards will be collected during the break.
- Microphones will also be available to ask additional questions.

QUESTIONS FOR THE EMPLOYER PANEL?

PLEASE WRITE THEM ON THIS CARD.



WE WILL COLLECT QUESTION CARDS DURING THE BREAK!

Hospital Quality & Patient Safety: What Does It All Mean?



Matthew McCambridge

MD, MS, FACP, FCCP

Sr. VP, Chief of Quality & Patient Safety,
Lehigh Valley Health Network



Donna Sabol

RN, MSN, CPHQ

VP & Chief Quality Officer
St. Luke's University Health Network



Employers for Healthcare Value Since 1980

Understanding Hospital Quality and Patient Safety

Donna Sabol, RN, MSN, CPHQ
VP and Chief Quality Officer
St. Luke's University Health Network

Matt McCambridge, MD, MS, FACP, FCCP
Sr VP, Chief Quality and Patient Safety Officer
Lehigh Valley Health Network

Agenda

- **Introduction and Background**
- **The Different Grading Systems**
 - Leapfrog
 - CMS Star Rating
 - US News and World Report
 - IBM Watson
- **Cost Associated with QPS**
 - Benchmarking (Premier, Vizient)
 - CMS Quality-Based Payment Programs
 - Commercial P4P programs
 - CDI

Objectives

- Explain the primary drivers and evolution of the Healthcare Quality and Patient Safety movement
- Describe various Hospital Grading Systems
- Discuss the impact of Hospital Quality and Patient Safety on cost and clinical outcomes



US Debt Clock.org



Get the iPhone App



Debt Clock Time Machine

State Debt Clocks

World Debt Clocks

US NATIONAL DEBT

\$20,628,019,147,181

DEBT PER CITIZEN

\$63,053

DEBT PER TAXPAYER

\$170,377

US FEDERAL SPENDING **↑138%**

\$4,080,602,121,607

US FEDERAL BUDGET DEFICIT

\$715,506,657,698

US FEDERAL TAX REVENUE **↑82%**

\$3,365,095,463,909

REVENUE PER CITIZEN

\$10,286

REVENUE PER TAXPAYER

\$27,800

INCOME TAX REVENUE

\$1,628,451,591,206

PAYROLL TAX REVENUE

\$1,175,253,328,849

CORPORATE TAX REVENUE

\$315,082,148,513

TOTAL STATE REVENUE

\$1,766,859,343,339

LOCAL REVENUE

\$1,372,809,456,147

REVENUE PER CITIZEN

\$9,598

REVENUE PER TAXPAYER

\$14,596

STATE DEBT

\$1,172,680,771,851

LOCAL DEBT

\$1,865,179,395,189

Largest Budget Items

MEDICARE/MEDICAID

\$1,167,246,445,537

SOCIAL SECURITY

\$956,787,519,793

DEFENSE/WAR

\$644,890,318,241

INCOME SECURITY

\$295,184,946,960

NET INTEREST ON DEBT

\$282,794,403,106

FEDERAL PENSIONS

\$264,184,946,960

US GROSS DOMESTIC PRODUCT **↑115%**

\$19,793,653,642,685

TOTAL FEDERAL/STATE/LOCAL SPENDING

\$7,018,787,762,643

GROSS DEBT TO GDP RATIO

104.21%

REVENUE TO GDP RATIO

32.864%

SPENDING TO GDP RATIO

35.459%

US TOTAL INTEREST PAID

\$2,610,411,429,042

INTEREST PER CITIZEN

\$7,979

US TOTAL DEBT **↑171%**

\$69,392,837,987,721

TOTAL DEBT PER CITIZEN

\$212.100

TOTAL DEBT PER FAMILY

\$830,477

SAVINGS PER FAMILY

\$4,689

TOTAL PERSONAL DEBT **↑141%**

\$18,843,407,580,158

MORTGAGE DEBT

\$14,950,803,694,022

STUDENT LOAN DEBT

\$1,509,721,665,620

CREDIT CARD DEBT

\$1,048,955,323,468

PERSONAL DEBT PER CIT.

\$57,590

Money Creation

MONETARY BASE 2018 **↑532%**

\$3,830,762,388,467

M2 MONEY SUPPLY 2018 **↑199%**

\$14,016,120,999,242

TREASURY SECURITIES 2018 **↑940%**

\$1,182,793,951,878

CURRENCY AND CREDIT DERIVATIVES 2018 **↑537%**

\$567,016,191,865,273

MONETARY BASE 2000

\$606,782,286,502

M2 MONEY SUPPLY 2000

\$4,691,677,884,768

TREASURY SECURITIES 2000

\$113,623,890,383

CURRENCY AND CREDIT DERIVATIVES 2000

\$88,848,538,127,857

Trade Numbers

US DEBT HELD BY FOREIGN COUNTRIES

\$6,419,515,643,674

US TRADE DEFICIT

\$800,664,965,655

US TRADE DEFICIT - CHINA

\$377,098,919,573

US IMPORTED OIL

\$205,024,629,615

IMPORTED OIL - OPEC

\$69,240,162,150

SMALL BUSINESS ASSETS

\$11,552,934,046,697

CORPORATION ASSETS

\$24,170,673,165,141

HOUSEHOLD ASSETS

\$99,475,752,580,378

TOTAL NATIONAL ASSETS

\$135,199,359,792,203

ASSETS PER CITIZEN

\$413,240

US FEDERAL BUDGET DEFICIT (GAAP)

\$5,986,301,060,807

SOCIAL SECURITY LIABILITY

\$16,726,818,777,796

MEDICARE LIABILITY

\$27,860,465,357,832

US UNFUNDED LIABILITIES (GAAP)

\$111,976,232,554,612

LIABILITY PER TAXPAYER

\$924,693

US POPULATION 327,171,744	US WORK FORCE NOW 154,691,190	OFFICIAL UNEMPLOYED 6,659,068	DOLLAR SUPPLY ADDED 2018 \$655,346,405,908
US INCOME TAXPAYERS 121,068,165	US WORK FORCE 2000* 156,601,081	ACTUAL UNEMPLOYED 13,164,532	DOLLAR SUPPLY ADDED 1913 \$653,098,402
PRIVATE SECTOR JOBS 122,215,840	NOT IN LABOR FORCE NOW 95,809,353	FULL-TIME WORKERS 127,281,295	DOLLAR TO CITIZEN RATIO NOW \$2,004 PER CIT.
SELF-EMPLOYED 9,045,036	NOT IN LABOR FORCE 2000* 80,039,807	PART-TIME WORKERS 27,262,187	DOLLAR TO CITIZEN RATIO 1913 \$6.70 PER CIT.
UNION WORKERS 13,801,703	MEDIAN INCOME NOW \$31,619	MEDIAN NEW HOME NOW \$319,814	DOLLAR TO OIL RATIO NOW \$19.59 PER BBL.
GOVERNMENT EMPLOYEES 23,664,795	MEDIAN INCOME 2000* \$31,206	MEDIAN NEW HOME 2000 \$161,888	DOLLAR TO OIL RATIO 1913 \$2.15 PER BBL.
MANUFACTURING JOBS NOW 12,575,638	BANKRUPTCIES 785,476	PRISON INMATES 1,462,340	DOLLAR TO SILVER RATIO NOW \$738 PER OZ.
MANUFACTURING JOBS 2000* 17,264,028	FORECLOSURES 564,270	CONVICTED FELONS 6,861,096	DOLLAR TO SILVER RATIO 1913 \$2.65 PER OZ.
US RETIREES 51,634,834	US VETERANS 20,988,904	PUBLIC SCHOOL STUDENTS 50,736,302	DOLLAR TO GOLD RATIO NOW \$5,774 PER OZ.
US DISABLED 10,410,769	US ARMED FORCES 1,296,556	CHARTER SCHOOL STUDENTS 3,241,888	DOLLAR TO GOLD RATIO 1913 \$28.80 PER OZ.
LIVING IN POVERTY 39,266,854	MEDICARE ENROLLEES 57,107,230	FOOD STAMP RECIPIENTS 46,259,103	PAPER TO SILVER RATIO NOW 179.80 to 1
WITHOUT INSURANCE 27,566,713	MEDICAID RECIPIENTS 74,835,233	TOTAL RECEIVING BENEFITS 165,602,205	PAPER TO GOLD RATIO NOW 75.66 to 1



MORTGAGE/LOAN CALCULATOR



GOLD SUPPLY/DEMAND



HOME SALES



SOURCES



AUTO SALES



ABOUT



ENERGY OUTPUT



GOLD/PRECIOUS METALS

Medical error—the third leading cause of death in the US

Medical error is not included on death certificates or in rankings of cause of death. **Martin Makary** and **Michael Daniel** assess its contribution to mortality and call for better reporting

Martin A Makary *professor*, Michael Daniel *research fellow*

Department of Surgery, Johns Hopkins University School of Medicine, Baltimore, MD 21287, USA

Patient Safety at the Crossroads

VIEWPOINT

Tejal K. Gandhi, MD, MPH
National Patient Safety Foundation, Boston, Massachusetts.

Donald M. Berwick, MD, MPP
Institute for Healthcare Improvement, Department of Health Care Policy, Harvard Medical School, Boston, Massachusetts.

Kaveh G. Shojania, MD
Centre for Quality Improvement and Patient Safety, University of Toronto, Toronto, Canada.

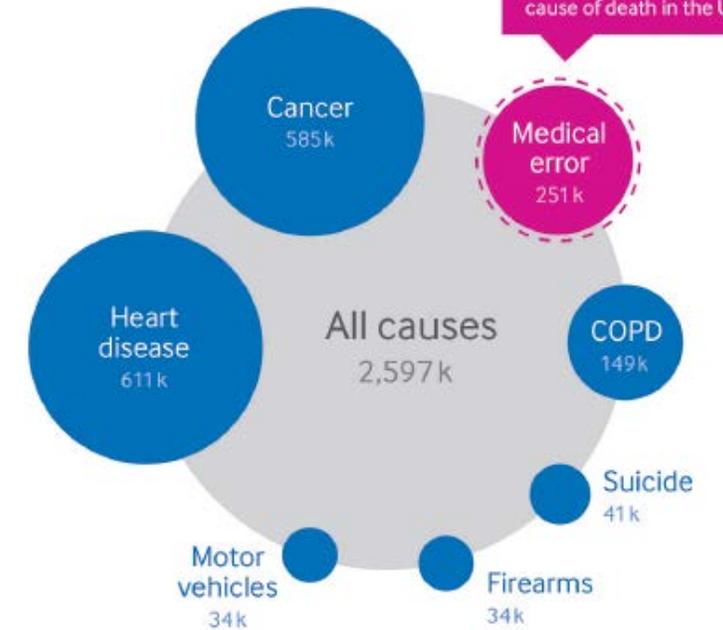
VIEWPOINT

Ashish Jha, MD, MPH
Department of Health Policy and Management, Harvard T. H. Chan School of Public Health, Boston, Massachusetts.

Peter Pronovost, MD, PhD
Armstrong Institute for Patient Safety and Quality, Johns Hopkins Medicine, Baltimore, Maryland.

Toward a Safer Health Care System The Critical Need to Improve Measurement

Causes of death, US, 2013



Based on our estimate, medical error is the 3rd most common cause of death in the US

However, we're not even counting this - medical error is not recorded on US death certificates

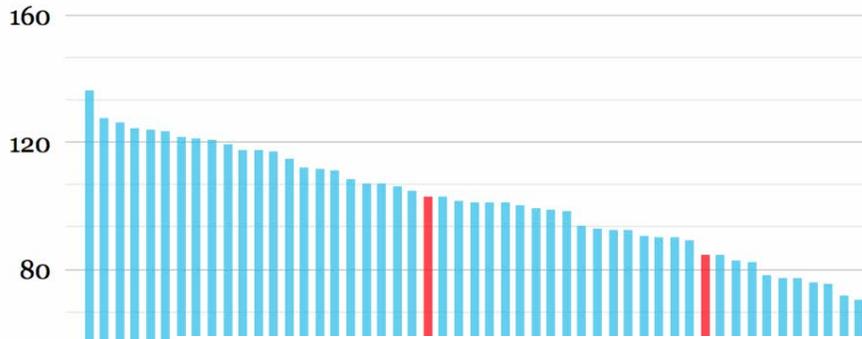
© 2016 BMJ Publishing group Ltd.

Data source: http://www.cdc.gov/nchs/data/nvsr/nvsr64/nvsr64_02.pdf

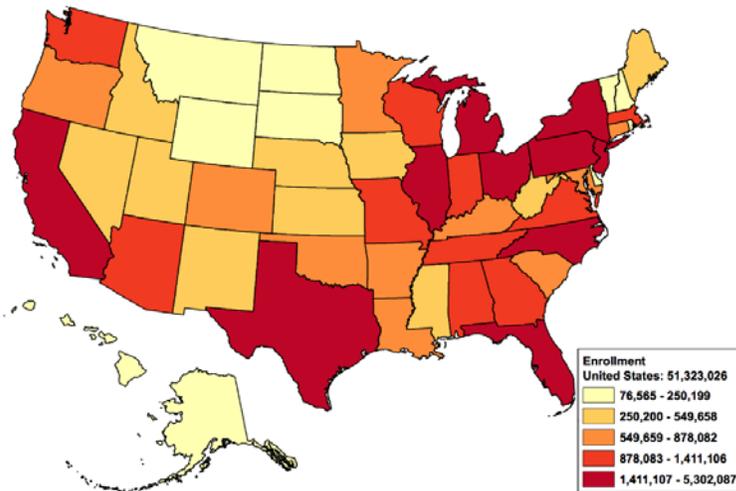
UNITED STATES

103.0

Admissions/1000 people/state



Medicare Enrollment by State of Residence, Calendar Year 2013



Source: AHA Annual Report
Population Data is from

Rank	State	Admissions Per 1000 Population
1	WEST VIRGINIA	136.6
2	MISSOURI	128.1
3	ALABAMA	126.6
4	TENNESSEE	124.5
5	KENTUCKY	124.2
6	FLORIDA	123.6
7	PENNSYLVANIA	122.1
8	OHIO	121.6
9	NORTH DAKOTA	120.9
10	MISSISSIPPI	119.5
11	LOUISIANA	117.8
12	ARKANSAS	117.7
13	MICHIGAN	117.2
14	SOUTH DAKOTA	115.1
15	DELAWARE	112.2
16	MASSACHUSETTS	112.0
17	NEW YORK	111.3
18	RHODE ISLAND	108.7
19	NEW JERSEY	107.1
20	ILLINOIS	107.1
21	SOUTH CAROLINA	106.2
22	CONNECTICUT	104.9
23	IOWA	103.0
24	MAINE	101.8
25	KANSAS	101.5

26	NEBRASKA	101.5
27	INDIANA	101.1
28	OKLAHOMA	100.2
29	NORTH CAROLINA	99.5
30	MINNESOTA	99.0
31	MARYLAND	98.4
32	GEORGIA	94.1
33	VIRGINIA	93.1
34	WISCONSIN	92.8
35	TEXAS	92.5
36	ARIZONA	90.6
37	NEVADA	90.4
38	NEW HAMPSHIRE	90.2
39	MONTANA	89.4
40	OREGON	85.0
41	NEW MEXICO	84.7
42	CALIFORNIA	82.9
43	WASHINGTON	82.6
44	UTAH	78.5
45	IDAHO	77.4
46	COLORADO	77.4
47	HAWAII	76.1
48	VERMONT	75.7
49	WYOMING	72.0
50	ALASKA	70.8
	UNITED STATES	103.0

The US Health System with High Degree of Variability



Employers for Healthcare Value Since 1980

www.LVBCH.com

Mitt Romney/Jonathan Gruber

Barack Obama/Ezekiel Emanuel, MD

Patrick Conway, MD (CMMI)

-- VBP

-- HRRP

-- HACRP

-- ACO/MSSP

-- BPCI

Tom Price, MD

Seema Verma, MPH

Michael Azar, JD



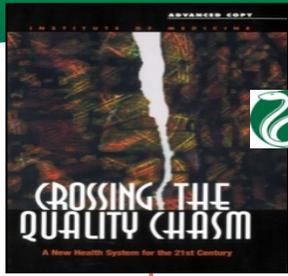
CMS (CMMI) and Quality-Based Payment Reform



"To Err is Human"
IOM Report



1999



Executive Memo
from President



2001

JCAHO
National
Patient Safety Goals



2003

Institute for
Healthcare
Improvement
100K *lives* Campaign



2004



TeamSTEPPS

Patient Safety and
Quality
Improvement
Act of 2005



2005



IHI Triple Aim:
improved health and
quality, control cost



Institute for
Healthcare
Improvement
5M *lives* Campaign

2007

National
Implementation of
CUSP



2008

Patient Protection
and Affordable
Care Act



2010

CMS Partnership
for Patients
Campaign



2011

2017

Patient Safety and Quality



Employers for Healthcare Value Since 1980

www.LVBCH.com

An Old Way to A New Way!

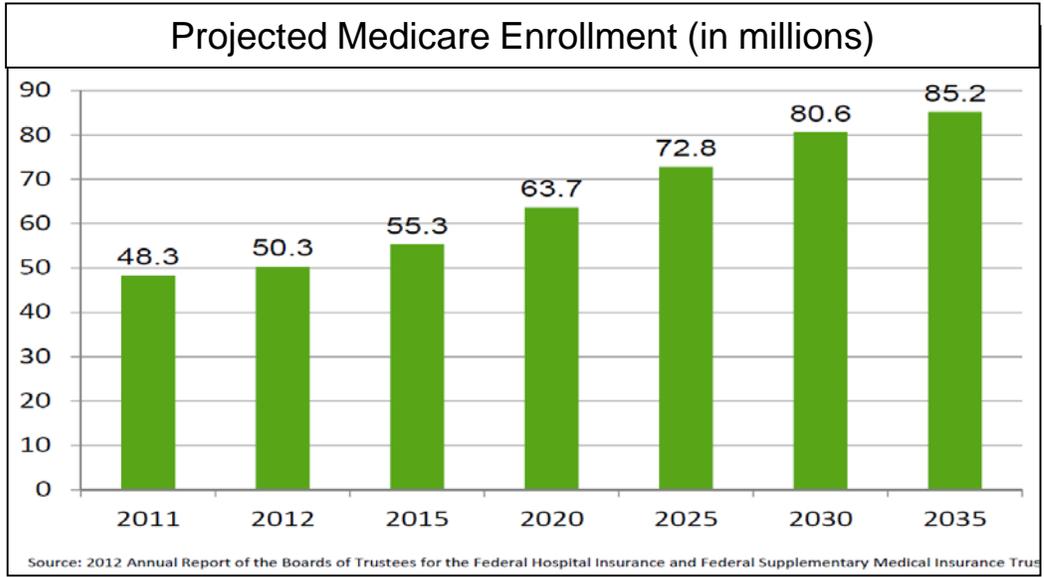
OLD

- Pay for Volume
- Fee for service payment
- Fragmented Care
- Treating illness/disease
- Adversarial payers
- Minimal health information technology
- Secrecy
- Duplication and waste
- Professionals control care
- Decision making based on training and experience
- System reacts to needs
- Individuals over the system

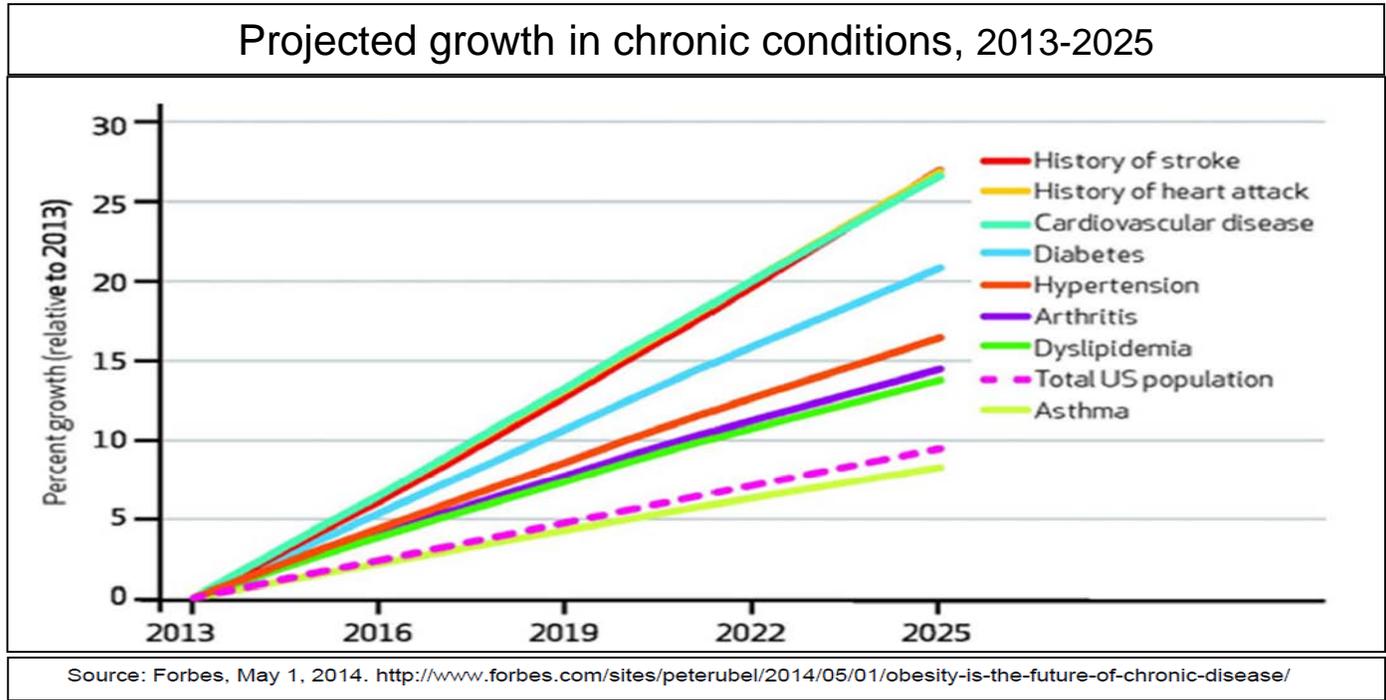
NEW

- Pay for Value
- Global payment/episodic payment
- Care coordination
- Prevention and wellness
- Payer partners
- Fully wired and wireless integrated systems
- Transparency
- Standardization and waste cutting
- Patient controls care
- Decision making is evidence based
- Needs are anticipated
- Cooperation and collaboration among clinicians is a priority

The Rules Changed



- 10k new Medicare beneficiaries a day
- Impacts healthcare spending
- Driving deficit and debt



Healthcare Drivers



The Different Hospital Grading Systems

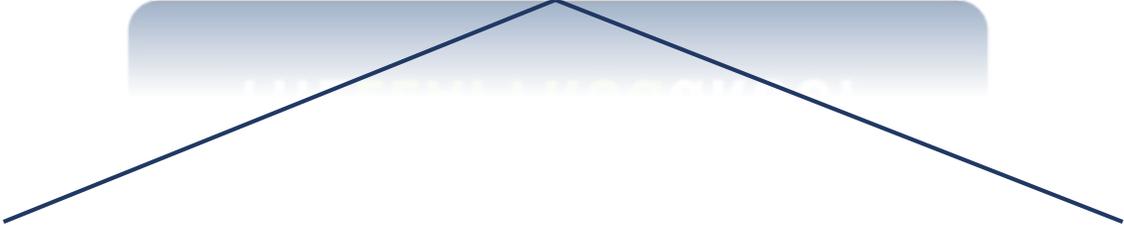


THE LEAPFROG GROUP



Employers for Healthcare Value Since 1980

www.LVBCH.com



LEAPFROG HOSPITAL SAFETY GRADE

HCAHPS

- Communication with Nurse
- Communication with Doctor
- Staff Responsiveness
- Communications about Medicines
- Discharge Information

HAC's

- Foreign Object Retained
- Air Embolism
- Falls and Trauma

PSI's

- Pressure Ulcer
- Iatrogenic Pneumothorax
- Postoperative Respiratory Failure
- Perioperative PE/DVT
- Postoperative Wound Dehiscence
- Accidental Puncture or Laceration
- Death from Serious Treatable Complication after Surgery

Bar Code Medication Administration

LEAPFROG HOSPITAL SURVEY

Surgical Volume & Appropriateness

- Carotid Endarterectomy
- Mitral Valve Repair & Replacement
- Esophageal Resection
- Pancreatic Resection
- Rectal Cancer Surgery
- Open AAA
- Lung Resection
- Bariatric Surgery

Maternity Care

- Early Elective Deliveries
- C Section
- Episiotomy
- Process Measures of Quality
- High-Risk Deliveries

Managing Serious Errors

- Never Events Policy
- Antibiotic Stewardship

Medication Safety

- Bar Code Med Admin
- Med Rec

Pediatrics (HCAHPS and CT Dosing)

CPOE Test

ICU Physician
Staffing

Safe Practices

CLABSI

CAUTI

MRSA

C. Diff

SSI Colon



LEAPFROG
HOSPITAL
SAFETY GR**A**DE

LVH-P

A

A

LVH-M

A

A

LVH-CC

B

A

LVH-S South

C

B

LVH-H

C

C

LVH-S East

C

D

Fall '17

Spring '18

LEAPFROG
HOSPITAL
SAFETY GRADE

SL-Allentown

A

A

SL-Bethlehem

A

A

SL-Miners

B

NA

SL-Anderson

B

A

SL-Quakertown

A

NA

SL-Sacred Heart

B

B

SL-Gnaden Huetten

C

NA

SL-Warren

C

C

Fall '17

Spring '18



U.S. News & WORLD REPORT News



Figure 1. Eligibility and Analysis Process, Data-Driven Specialties

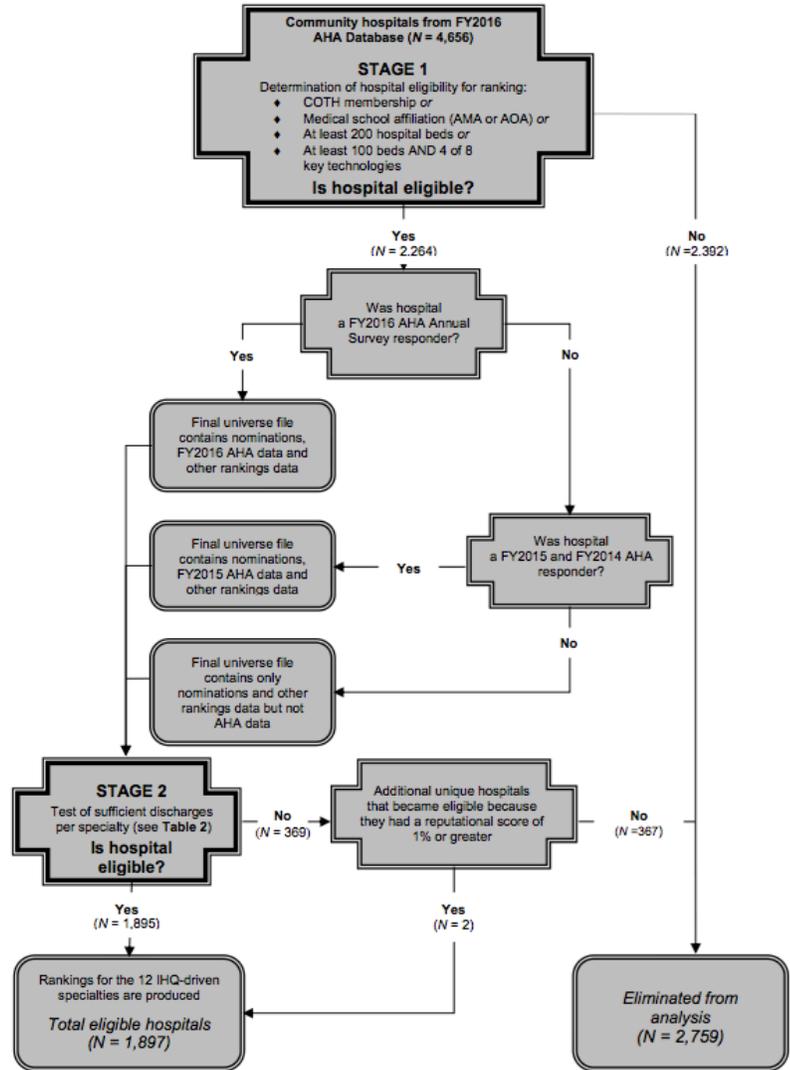


Table 4. Discharge Distribution by Specialty

Specialty	Minimum Volume	75th Percentile Volume	Maximum Volume	Average Volume, 1 st -75 th percentile
Cancer	198	727	7,855	412
Cardiology & Heart Surgery	1,391	4,665	18,420	2,948
Diabetes & Endocrinology	109	285	1,369	184
Ear, Nose & Throat	< 11	183	670	105
Gastroenterology & GI Surgery	430	1,823	11,701	1,035
Geriatrics	2,367	9,449	59,853	5,352
Gynecology	28	185	642	115
Nephrology	192	760	5,689	436
Neurology & Neurosurgery	238	1,728	8,233	875
Orthopedics	305	1,606	14,987	821
Pulmonology	1,075	3,492	18,289	2,120
Urology	42	240	2,404	128



Employers for Healthcare Value Since 1980

www.LVBCH.com



37.5%	OUTCOMES	Mortality 30 days after admission (risk adjusted)
30%	STRUCTURE	Volume (# of discharges) Technology Nurse Staffing Intensivists Nurse Magnet Specialty-Specific Elements (epilepsy center, Alzheimer's center, etc.)
27.5%*	PROCESS	Reputation
5%	PATIENT SAFETY	PSI 4: Death among surgical inpatients with serious treatable complications PSI 6: Iatrogenic pneumothorax PSI 9: Postoperative hemorrhage or hematoma PSI 11: Postoperative respiratory failure PSI 14: Postoperative wound dehiscence PSI 15: Accidental puncture or laceration
3% (Cardiology Only)	PUBLIC TRANSPARENCY	Publically report quality metrics to the Society of Thoracic Surgeons (STS) and the American College of Cardiology (ACC)



Employers for Healthcare Value Since 1980

www.LVBCH.com



doximity

U.S. News & WORLD REPORT
News



Employers for Healthcare Value Since 1980

www.LVBCH.com

CMS.gov

Centers for Medicare & Medicaid Services

CMS Star Ratings



Employers for Healthcare Value Since 1980

www.LVBCH.com

CMS Star Ratings and Hospital Compare

- Overall star rating. Up to 57 quality measures on Hospital Compare in 7 Domains
- Shows how well each hospital performed on average compared to other U.S. hospitals
- Published quarterly: January, April, July, October

CMS Stars: Methodology Issues

- **July release suspended**
- **Issues**
 - Social determinants
 - Teaching Hospitals/Safety Net Hospitals
 - Measure weights
 - Skewed results: all hospitals w/differing populations
 - Council of Teaching Hospitals Analysis

CMS Star Rating Domains

Domain	# of Measures	Weight
Mortality	7	22%
❖ Safety of Care	8	22%
Readmissions	9	22%
Patient Experience	11	22%
Effectiveness of Care	10	4%
Timeliness of Care	7	4%
Efficient Use of Imaging	5	4%

CMS Star Ratings – SLUHN & LVHN

SL-Allentown / Bethlehem	4
SL-Anderson	5
SL-Miners	5
SL-Monroe	NA
SL-Quakertown	4
SL-Warren	5
SL-Sacred Heart	2
SL-Gnaden Huetten	3

LVH-Cedar Crest	3
LVH-Muhlenberg	4
LVH-Pocono	4
LVH-Hazleton	2
LVH-Schuylkill	1

Star Distribution (N = 4,579)

- 1 Star 337 (7.36%)
- 2 Stars 1155 (25.22%)
- 3 Stars 1187 (25.92%)
- 4 Stars 753 (16.44%)
- 5 Stars 260 (5.68%)
- NA 887 (19.37%)
- 15 NJ/PA: 5 Star Hospitals

IBM Watson Health 100 Top Hospitals

Domain	Measure	Current Weights	Trend Weights
Inpatient Outcomes	Risk-Adjusted Mortality	1	1
	Risk-Adjusted Complications	1	1
	HAI SIR Performance	1	NA*
Extended Outcomes	30-Day Mortality Rates (AMI, HF, PN, COPD, STK)	1	1
	30-Day Readmission Rates (AMI, HF, PN, Hip/Knee, COPD, STK)	1	1
	Quality Subtotal	5	4
Process Efficiency	Severity-Adjusted Average Length of Stay	1	1
	Mean Emergency Department Throughput (minutes)	1	1
Cost Efficiency	Inpatient Expense per Discharge, AWI & Casemix Adjusted	½	½
	Medicare Spending Per Beneficiary Index	½	½
Financial Health	Operating Profit Margin	1	1
Patient Experience	HCAHPS Score (Overall rating question)	1	1
	Operations Subtotal	5	5
	TOTAL	10	9

PERFORMANCE DOMAINS & RANK WEIGHTS

Hospital Classes - The Comparison Groups	Winners	Total # Hosps
<p>Major Teaching Hospitals – three ways to qualify:</p> <ul style="list-style-type: none"> 400+ beds plus 0.25 IR/bed ratio and <ul style="list-style-type: none"> - 10 GME sponsored programs OR - 20 GME programs total 30 GME programs total (regardless of beds or IR/bed ratios) 0.60 IR/Bed ratio (regardless of beds or GME count) 	15	210
<p>Teaching Hospitals – 200+ beds and</p> <ul style="list-style-type: none"> - 0.03 IR/bed ratio OR - 3 GME programs total 	25	475
<p>Large Community Hospitals – 250+ beds; NOT teaching</p>	20	309
<p>Medium Community Hospitals – 100 to 249 beds; NOT teaching</p>	20	940
<p>Small Community Hospitals – 25 to 99 beds; NOT teaching</p>	20	851
<p>2018 National In-Study Hospitals</p>	100	2,785

Watson Health © IBM Corporation 2018

100 TOP HOSPITALS[®], 2018 - FACILITY LEVEL CLASSIFICATION

Watson Health 100 Top Hospital Awards

**St. Luke's University Hospital:
Major Teaching Hospitals Winner**

Watson Health™
**100 TOP
HOSPITALS®**
2018

- The 100 Top hospitals achieve the following: Significantly higher survival, fewer complications, lower hospital readmissions, lower hospital length of stay, greater patient satisfaction and lower cost of care.
- St. Luke's University Hospital is a 6-time recipient of this award, and is 1 of 15 major teaching hospitals in the nation to be named a 100 Top hospital.
- St. Luke's Quakertown Hospital was a first-time award winner in 2016.

2018 IBM Watson Health 100 Top Hospitals Results – SLUHN

Results Comparison: Values for each measure for individual hospitals are shown. The benchmark Median (winner) is shown in italics.

Risk-Adjusted Mortality Index	0.93	<i>0.93</i>
Risk-Adjusted Complications Index	0.76	<i>0.93</i>
HAI SIR Performance	0.71	<i>0.94</i>
30 Day Mortality % (AMI, HF, Pneumonia, COPD)	12.4%	<i>11.9%</i>
30 Day Readmission % (AMI, HF, Pneumonia, Hip/Knee, COPD, Stroke)	14.2%	<i>14.9%</i>
Severity-Adjusted ALOS	4.58	<i>4.50</i>
Mean Emergency Department Throughput	222	<i>260</i>
Adjusted Inpatient Expense per Discharge	\$3,827	<i>\$7,606</i>
Medicare Spend Per Beneficiary	0.96	<i>0.97</i>
Adjusted Operating Profit Margin	5.0%	<i>11.1%</i>
HCAHPS - Overall Mean Question	270	<i>264</i>

KEY

= or Better than peer group median (value not shown)

= or Better than benchmark median

Hidden and not so hidden cost associated with measuring and maintaining QPS

US Physician Practices Spend More Than \$15.4 Billion Annually To Report Quality Measures

Lawrence P. Casalino, David Gans, Rachel Weber,
Meagan Cea, Amber Tuchovsky, Tara F. Bishop,
Yesenia Miranda, Brittany A. Frankel, Kristina B.
Ziehler, Meghan M. Wong, and Todd B. Evenson

- funded by the Physicians Foundation
- authors from Weill Cornell Medicine and the Medical Group Management Association

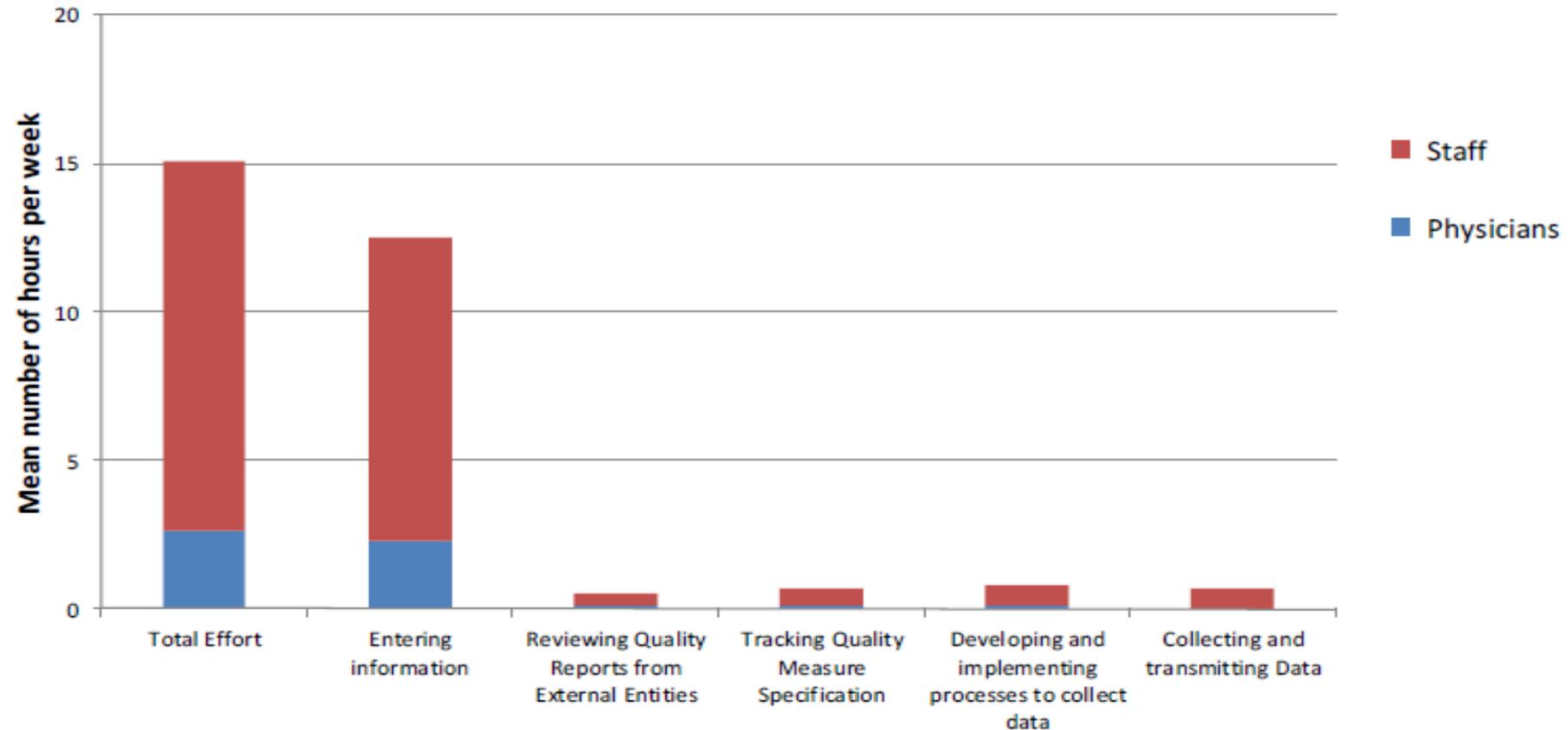
HealthAffairs



Employers for Healthcare Value Since 1980

www.LVBCH.com

Hours Spent Per Physician Per Week Dealing With External Quality Measures



\$40,000 Per Physician Per Year
\$15.4 Billion Per Year For Physicians In 4 Specialties

	Physicians	Other Staff	Total
All Physicians	\$19,494	\$20,575	\$40,069
By specialty			
Primary Care (GIM and FP)	22,049	28,419	50,468
Cardiology	20,826	14,098	34,924
Orthopedics	15,585	15,886	31,471



In the end...



Sophie Sabol

- Happiness lies in the joy of achievement and the thrill of creative effort.

- Franklin D. Roosevelt

Hospital Quality & Patient Safety: What Is the National Impact



Madeleine Biondoillo

MD, MBA

VP Quality & Safety

Premiere, Inc



Employers for Healthcare Value Since 1980

www.LVBCH.com

Journey to High Value Healthcare

Madeleine Biondolillo, MD, MBA
VP, Quality and Safety



Premier's National Footprint

ACUTE



IMPROVING CARE & COST

3,750 or 76% OF U.S. COMMUNITY HOSPITALS
~130,000 OTHER PROVIDERS

~\$48B



INSIGHTS INTO ~40% OF U.S. HEALTH SYSTEM DISCHARGES



MALCOLM BALDRIGE NATIONAL QUALITY AWARD

WINNER



OWNED

BY HEALTHCARE SYSTEMS

SUPPLY CHAIN SPEND AMBULATORY

~100 PROFESSIONAL ORGANIZATIONS SOCIETY & BOARDS



PAY FOR VALUE REPORTING PLATFORM

#1

CLINICAL DATA REGISTRY NETWORK



LEARNING HEALTH SYSTEM PLATFORM



~1.2M HEALTHCARE PROFESSIONALS

~50M



AMBULATORY PATIENTS

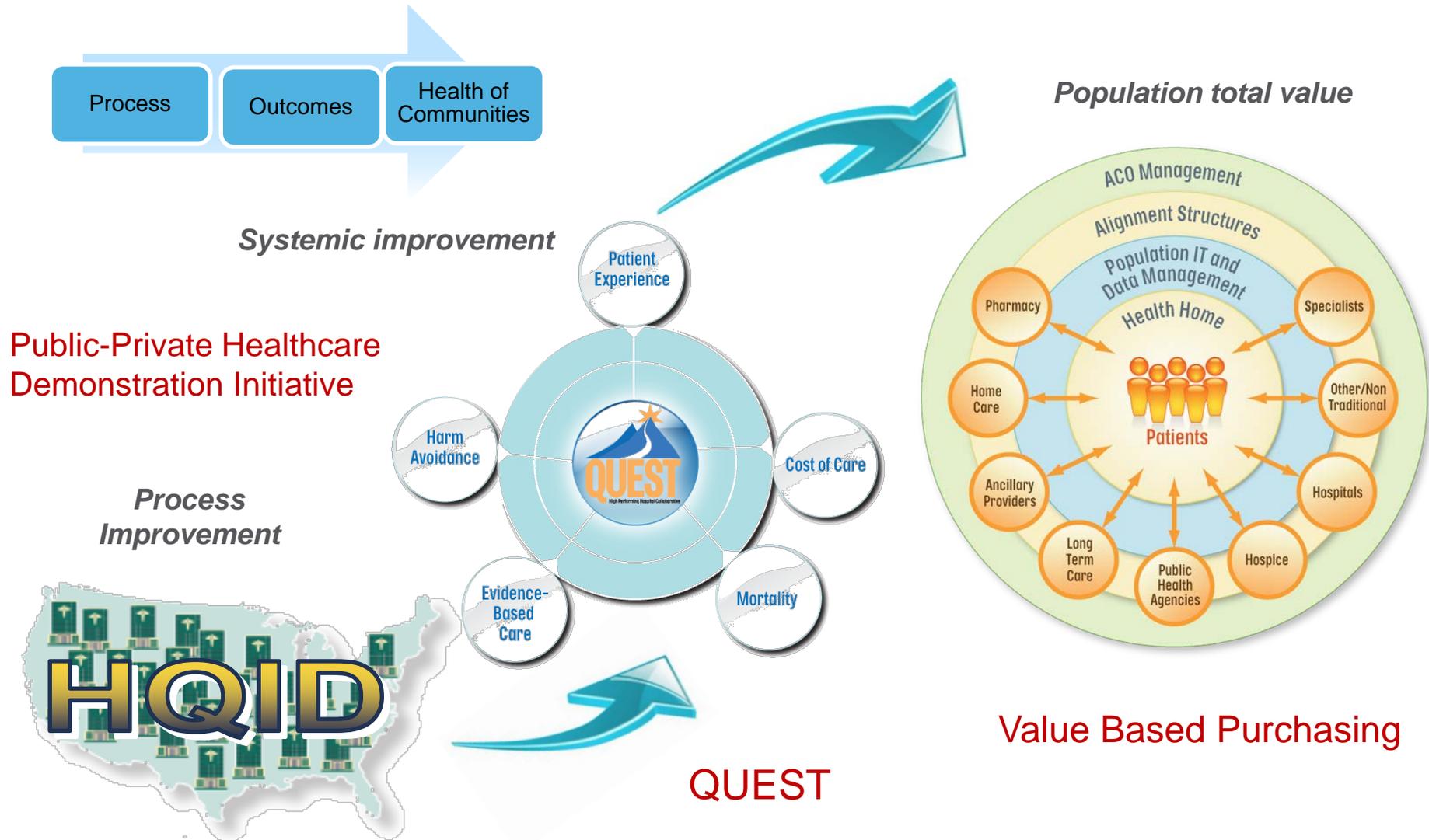
~5,000

AMBULATORY

PRACTICES



Premier's Collaborative Journey 2003-2018





What is the QUEST® Collaborative?



Quality
Efficiency
Safety
Transparency

A national collaborative designed to help hospitals and health systems reliably deliver the highest quality care in a value-based healthcare environment.

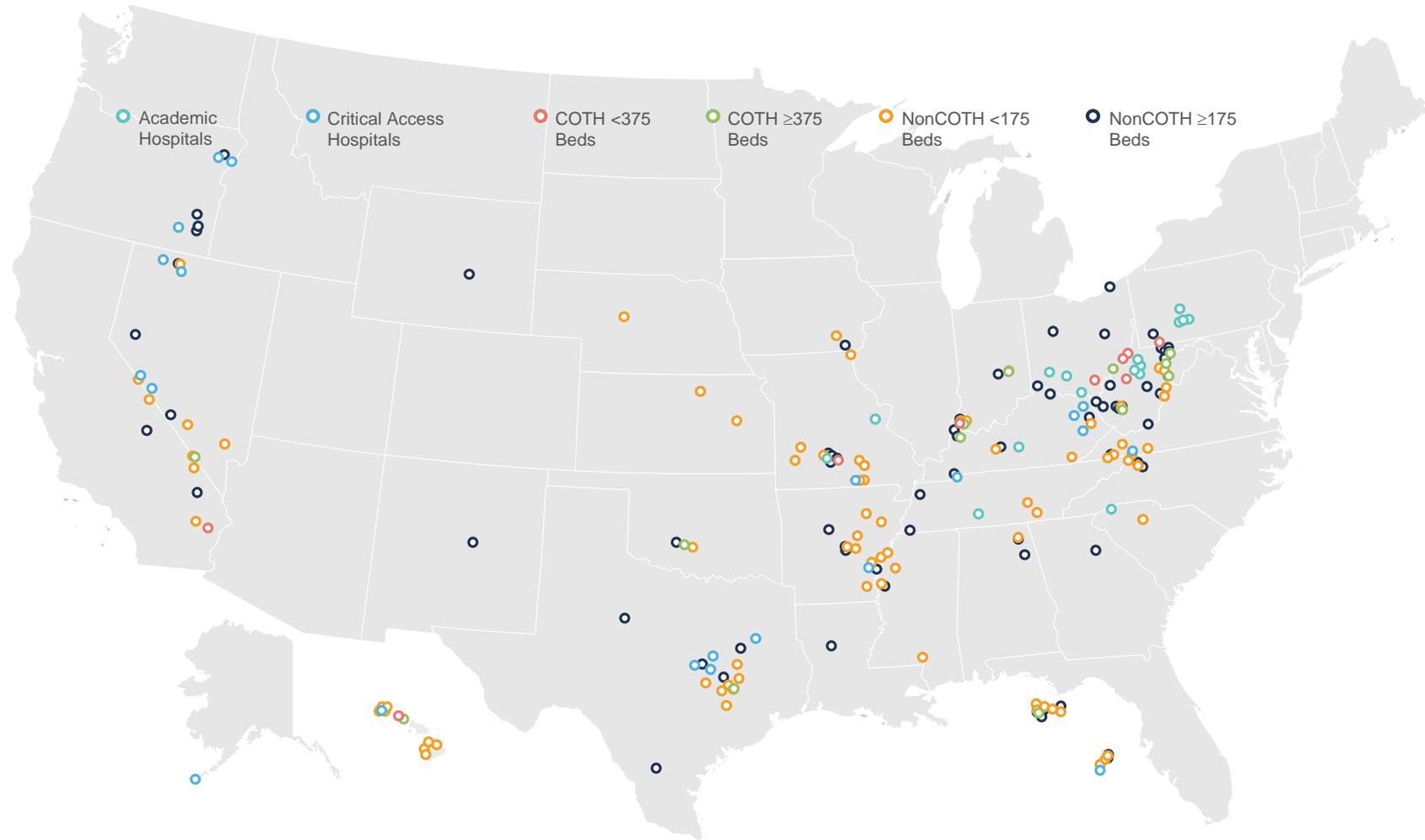
QUEST leverages analytics, education and best practices to accelerate performance improvement, with complete transparency within the membership.



Where can you find QUEST members?

“In half the country, you can find a QUEST Hospital near you!”

- Dr. Peter Shamamian, CQO, Montefiore Health, New York, NY





200K+
DEATHS AVOIDED¹

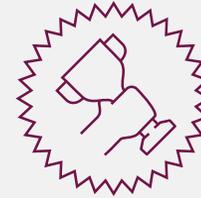


\$18
BILLION SAVED²



SEPSIS MORTALITY RATES
REDUCED BY 18%³

Achievements of QUEST® members from 2008-2016.



WINNING,
QUEST 2020™
MEMBERS
ARE

29%

MORE LIKELY
TO ACHIEVE

VALUE-BASED PURCHASING
INCENTIVE PAYMENTS
FROM MEDICARE⁴

Achievements of QUEST 2020™ members in 2017.



The Premier “Collaborative Success” Process Generates Desired Outcomes

- Identify Improvement Opportunities through Data Analytics
- Educate about the “Burning Platform”
- Ensure Availability of Best Practice Resources
- Develop Team and Safety Culture
- Cultivate Change Management
- Promote Quality Improvement processes
- Generate Transparency and Accountability – through shared data and success stories
- Align Incentives

The Next Hill - Perinatal Health Collaborative

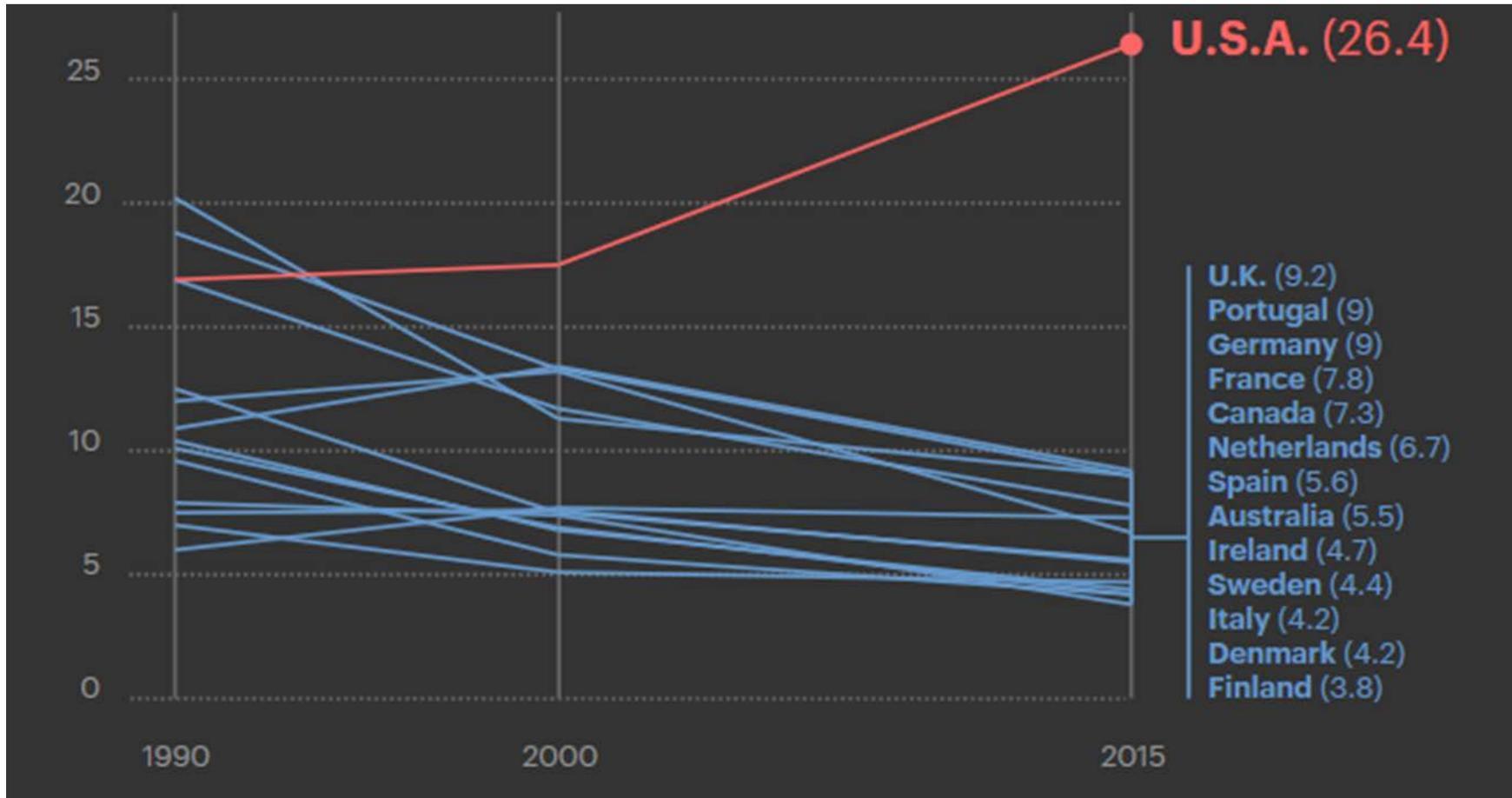
“Improving maternal and infant care together.”



US Maternal Mortality – National Focus Another Next “Burning Platform”

“Hospitals know how to protect mothers. They just aren’t doing it.”

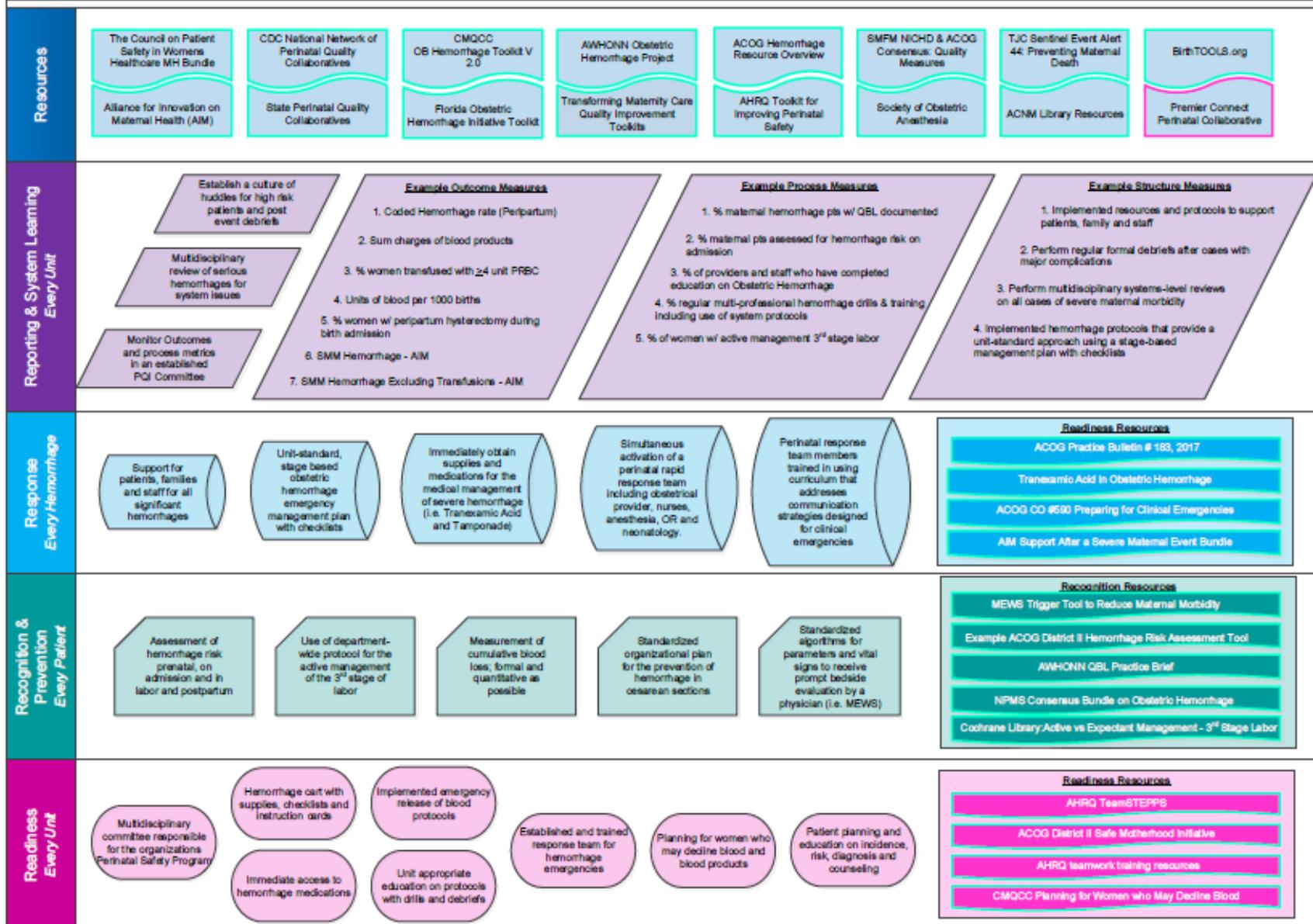
Women giving birth are needlessly dying or suffering life-altering injuries because U.S. hospitals aren't following known safety measures – USA TODAY July 27, 2018





Priority of Focus: Key Drivers

- Safety/Harm/Outcome
 1. Hemorrhage
 2. Unnecessary Cesarean Birth
 3. Dangerous Blood clots
 4. High Blood Pressure Disorders in Pregnancy
 5. Substance Use/Neonatal Abstinence
 6. Severe Infections
 7. Unexpected Mother and/or Newborn Complications





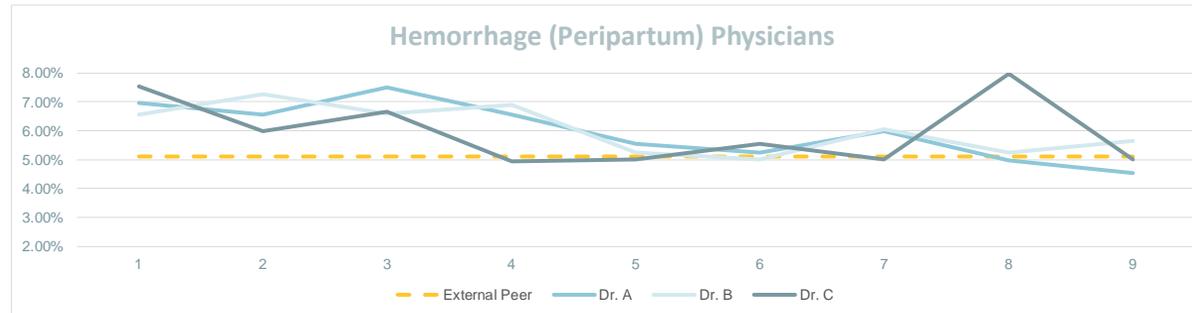
Hemorrhage Physician Drill

Safety > Hemorrhage > Hemorrhage (Peripartum)

System/Facility
PremierHealth

Physicians for Visualization
Multiple Selected

Benchmark for Visualization
External Peer



Benchmarks

Hemorrhage (Peripartum)	Baseline	FY1Q1	FY1Q2	FY1Q3	FY1Q4	FY2Q1	FY2Q2	FY2Q3	FY2Q4	Trend
Facility A	6.90%	6.50%	6.60%	6.50%	5.20%	5.40%	5.50%	5.10%	5.00%	↓ -0.25%
Collaborative	5.50%	5.40%	5.30%	5.10%	4.90%	4.90%	4.80%	4.80%	4.70%	↓ -0.10%
External Peer	5.10%	5.10%	5.10%	5.10%	5.10%	5.10%	5.10%	5.10%	5.10%	

Physicians

Hemorrhage (Peripartum)	Baseline	FY1Q1	FY1Q2	FY1Q3	FY1Q4	FY2Q1	FY2Q2	FY2Q3	FY2Q4	Trend
Dr. A	6.95%	6.55%	7.50%	6.55%	5.55%	5.25%	5.98%	4.98%	4.55%	↓ -0.31%
Dr. B	6.55%	7.28%	6.60%	6.89%	5.25%	5.00%	6.05%	5.25%	5.65%	↓ -0.21%
Dr. C	7.55%	6.00%	6.65%	4.95%	5.00%	5.55%	5.00%	7.98%	5.02%	↓ -0.11%
Dr. D	6.25%	6.25%	5.98%	7.55%	5.25%	5.98%	5.20%	2.50%	4.98%	↓ -0.32%



Premier's Approach to Reducing Medication Costs - examples

End-to-end Supply Chain Focus

Value Analysis Process

Reduce Impact of Drug Shortages



New generic pharmaceutical company to combat drug shortages and price gouging

Problem to Solve:

- Lack of a healthy generic injectable market resulting in drug shortages and price gouging
- Hospitals fed up with a decade or more of dealing with drug shortages that interrupt patient care and drive up costs and contribute to medication errors



Proposed Solution:

- Development of a generic company within Premier that would invest in selected generic manufacturers devoted to manufacturing critical drugs that are on the FDA/ASHP drug shortage list or drugs the FDA has stated needs added competition in the market due to a single supplier



QUESTIONS?

Madeleine Biondolillo, MD, MBA
(781) 789-2180
Madeleine_Biondolillo@Premierinc.com

Thank you!

Hospital Quality & Patient Safety: Employer Reaction Panel



Moderator:
Bob Johnston
LVBCH Chairman
Benefits Manager, East Penn Manufacturing



Panel:

John Bulger, DO, MBA

Chief Medical Officer, Geisinger Health Plan

Jennifer Chambers, MD

Senior Vice President for Clinical Solutions and Chief Medical Officer, Capital BlueCross

Tony DaRe

Chief Executive Office, BSI Corporate Benefits

Denise Moyer, CEBS, SPHR, SHRM-CP

Associate Director of Corporate Benefits, B. Braun Medical Inc.

Jeannine O'Callaghan

Director of Health and Safety/Occupational Health Nurse, C.F. Martin & Co. Inc.



Employers for Healthcare Value Since 1980

www.LVBCH.com

THANK YOU!

October 9th:
Register now @
www.lvbch.com

