

MetaStar Shows Marked Improvements for Medicare Patients, Looks to Future

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For decades under the federal Quality Improvement Organization (QIO) program, QIOs under contract with the Centers for Medicare & Medicaid Services (CMS) have worked with Medicare physicians, providers, beneficiaries, and others to improve the quality of their care. This is a year of transition for the program, which has served as the country's longest-standing nationwide program to improve patient care, improve the health of the population, and reduce or control health care cost. MetaStar has served as the QIO for Wisconsin since the program's inception.

During the most recent QIO contract (August 2011-July 2014), MetaStar can point to a number of noteworthy improvements in Wisconsin:

- Hospital admissions declined by 15% and 30-day hospital readmissions declined by 19%.
- Hospitals participating with MetaStar saw a 22% reduction in catheter-associated urinary tract infections (CAUTI), a 6% reduction in the utilization of catheters, and a more than 31% reduction in incidence of *Clostridium difficile* infections.
- 193 nursing homes participated in the MetaStar-led Wisconsin Quality Coalition, a statewide collaborative effort to improve resident care.



Dr Gold is senior vice president and chief medical officer for MetaStar. This material was prepared by the Lake Superior Quality Innovation Network, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the US Department of Health and Human Services. The materials do not necessarily reflect CMS policy. 11SOW-MI/MN/WI-A1-14-02 082614

- Urinary tract infections (UTI) in nursing homes declined by 14%. This means that approximately 53 UTIs were prevented every month. The average cost to treat a UTI is \$896 in a nursing home. Given the UTIs prevented and the average cost of treating a UTI, the 193 nursing homes in the Wisconsin Quality Coalition are saving approximately \$47,488 every month.

The quality improvements in our state are also reflected in figures across the country. According to data released by CMS, national gains include:

- 95,000 hospitalizations and 27,000 hospital readmissions among Medicare beneficiaries have been prevented.
- 85,149 fewer days were spent with urinary catheters for Medicare beneficiaries.
- 5021 nursing homes participated in a collaborative effort.
- 3374 pressure ulcers were prevented or healed in 787 nursing homes.
- 44,640 potential adverse drug events were prevented.
- 1826 health care professionals were assisted with Physician Quality Reporting System (PQRS) electronic health record (EHR) 2012 reporting—impacting millions of Medicare beneficiaries.

Looking Forward

The new CMS contract cycle for Medicare quality improvement began on August 1, 2014, and will continue for the next 5 years. CMS restructured its contracts so that different organizations now handle some of the tasks once accomplished by a single state-based QIO. KEPRO, an Ohio-based organization, now processes Medicare quality of care case reviews, discharge/discontinuation

of service, and other related review services for Wisconsin beneficiaries. Florida Medical Quality Assurance, Inc. (FMQAI) is providing technical support to hospitals participating in inpatient and outpatient quality reporting.

Under a new Quality Innovation Network structure, MetaStar has teamed with organizations in Minnesota (Stratis Health) and Michigan (MPRO) to attain the new Medicare quality improvement goals. The 3 organizations are working together to facilitate improvement throughout the region.

The priorities for CMS in the next 5 years include:

- **Healthy People, Healthy Communities:** prevention and treatment of chronic disease, including reducing disparities in diabetes care and improving cardiac health.
- **Better Health Care for Communities:** patient safety issues such as improved care coordination and reduction of health care-associated infections in hospitals and health care-acquired conditions in nursing homes.
- **Better Care at Lower Cost:** through value-based programs.
- **Other Technical Assistance and Special Innovation Projects:** broad categories for emerging issues.

MetaStar welcomes participation by all who wish to contribute to better care, better health, and lower costs through improvement. Many of our projects will be recruiting physicians and organizations to join in the next 6 months, and, as always, our assistance and educational resources are provided at no cost for participants. For more information, visit www.metastar.com, or contact MetaStar's Chief Medical Officer, Jay A. Gold, MD, JD, MPH, at 608.274.1940.

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WMJ

WMJ (ISSN 1098-1861) is published through a collaboration between The Medical College of Wisconsin and The University of Wisconsin School of Medicine and Public Health. The mission of *WMJ* is to provide an opportunity to publish original research, case reports, review articles, and essays about current medical and public health issues.

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