

Wisconsin Health Care Making Progress Toward CMS Quality Strategy Goals

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Outpatient Antibiotic Stewardship, Motivational Interviewing, and Reduced Admissions and Readmissions Achievements Demonstrate Remarkable Improvements

MetaStar, which represents Wisconsin in the Lake Superior Quality Innovation Network (Lake Superior QIN), has been working alongside Wisconsin health care professionals in many settings to advance the Centers for Medicare & Medicaid Services (CMS) Quality Strategy goals.¹ MetaStar served as Wisconsin's Quality Improvement Organization for 40 years. Following a change by CMS in 2014 to the program's structure, this work became part of a regional partnership, Lake Superior QIN, which serves Michigan, Minnesota, and Wisconsin.

Lake Superior QIN works with partners and stakeholders, including the Wisconsin Medical Society, to positively impact the 1.05 million Medicare beneficiaries in the state. Current

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initiatives include antibiotic stewardship, behavioral health, cardiac health, coordination of care, diabetes care, medication safety, nursing home quality, the Quality Payment Program, and quality reporting.

To demonstrate how health care in Wisconsin is making progress toward the 6 CMS Quality Strategy goals, we are sharing a recent example or achievement related to each goal. Three examples are featured in this article, and the remaining 3 goals will be discussed in the next issue of *WMJ*.

Goal 1: Make care safer by reducing harm caused in the delivery of care

Each year, more than 2 million Americans develop infections that are not cured by using common antibiotics because the antibiotics are no longer effective against certain germs. Approximately 262.5 million antibiotics are prescribed in outpatient settings each year. Up to 50% of these antibiotics are not necessary and could cause the germs to further develop resistance to other antibiotics.²

Lake Superior QIN has been working on antibiotic stewardship to prevent health care associated infections. In Wisconsin, 90 clinics and pharmacies joined our initiative to better understand and receive assistance to achieve all 4 Core Elements of Outpatient Antibiotic Stewardship.

As of May, 99% of participating Wisconsin clinics and pharmacies have achieved all 4 core elements. This marks a significant step toward reducing unnecessary antibiotic prescriptions and helping to prevent antibiotic resistance.

Goal 2: Strengthen person and family engagement as partners in their care

In order to help health care professionals in all settings of care increase the engagement of patients and family members in health care decisions, Lake Superior QIN has been offering Motivational Interviewing workshops across Wisconsin, along with occasional webinars. Motivational Interviewing is a collaborative, person-centered guiding method designed to bring about and strengthen the motivation for positive change. This evidence-based communication style can increase capacity to effectively engage patients in their own care.

As of April, 298 Wisconsin health care professionals have been trained in this approach at workshops hosted by MetaStar and Lake Superior QIN. More workshops are planned throughout summer and fall.

Goal 3: Promote effective communication and coordination of care

This goal is impacted through all the initiatives Lake Superior QIN supports, but the results can be seen most directly in the reduction of hospital admissions and readmissions. Nationwide, nearly 1 in 5 Medicare beneficiaries discharged from the hospital is readmitted within 30 days.² In 2016, CMS estimated that readmissions within 30 days cost the Medicare program more than \$17 billion annually.¹

CMS Quality Strategy Goals

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.
5. Work with communities to promote best practices of healthy living.
6. Make care affordable.

In Wisconsin, Lake Superior QIN supports 10 community coalitions focused on reducing hospital admissions and readmissions. Each coalition includes health care and social service partners and stakeholders in a defined geographical area, who work together to address significant barriers for their community. The coalition setting facilitates enhanced relationships between providers and allows for the sharing of and referrals into community-based programs that successfully reduce admissions and readmissions, such

as the Patient Adherence and Competency of Therapy pharmacy program in Kenosha.

From August 2014 to December 2017, Wisconsin's relative improvement rates are 5.8% for statewide admissions and 6.2% for statewide readmissions. The goal set by CMS for a relative improvement rate during this time was 2%, so the data suggests Wisconsin is making strong strides toward reducing both admissions and readmissions.

REFERENCES

1. CMS Quality Strategy. Centers for Medicare & Medicaid Services. Web site. <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/QualityInitiativesGenInfo/Downloads/CMS-Quality-Strategy.pdf>. Accessed June 4, 2018.
2. Sanchez, G.V., Fleming-Dutra, K.E., Roberts, R.M., Hicks, L.A. Core Elements of Outpatient Antibiotic Stewardship. *MMWR Recomm Rep* 2016;65(No. RR-6):1-12.
3. Jencks SF, Williams MV, Coleman EA. Rehospitalizations among patients in the Medicare fee-for-service program. *N Engl J Med*. Apr 2 2009;360(14):1418-1428.

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