



FACT SHEET

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Hospital Engagement Networks: Connecting Hospitals to Improve Care

On December 14, 2011, the Centers for Medicare & Medicaid Services (CMS) awarded \$218 million to 26 State, regional and national hospital system organizations to serve as Hospital Engagement Networks. The contracts were part of the Partnership for Patients, a nationwide public-private collaboration sponsored by the U.S. Department of Health and Human Services (HHS), to keep patients from being harmed while in the hospital and heal without complication once they are discharged.

The Hospital Engagement Networks' will be funded as part of the \$500 million Partnership for Patients initiative from the Centers for Medicare & Medicaid Services Innovation Center. The Center was established by the Affordable Care Act to identify and develop promising new models of care delivery to reduce costs and increase quality.

Partnership for Patients: Working to Reduce Healthcare Acquired Conditions and Hospital Readmissions

The two goals of the Partnership for Patients are:

- *Keep patients from getting injured or sicker.* By the end of 2013, **preventable hospital-acquired conditions would decrease by 40 percent** compared to 2010. Achieving this goal would mean approximately 1.8 million fewer injuries to patients, with more than 60,000 lives saved over the next three years.
- *Help patients heal without complication.* By the end of 2013, preventable complications during a transition from one care setting to another would be decreased so that **hospital readmissions would be reduced by 20 percent** compared to 2010. Achieving this goal would mean more than 1.6 million patients will recover from illness without suffering a preventable complication requiring re-hospitalization within 30 days of discharge.

Currently, about one in every 20 patients acquires an infection in the hospital, and an average of one in seven Medicare beneficiaries is harmed in the course of their hospital care. In addition, nearly one in five Medicare patients discharged from the hospital is readmitted within 30 days, translating into approximately 2.6 million seniors and people with disabilities. CMS estimates that this initiative could save Medicare \$50 billion over the next 10 years.

Launched in April 2011, the Partnership for Patients now consists of more than 6,500 partners, including over 3,167 hospitals, along with 2,345 physician nursing and pharmacy organizations, 892 consumers

and consumer groups, and 256 employers and unions. In addition, health plans, Area Agencies on Aging, and State and federal government officials have pledged to work together to meet the Partnership's goals.

Hospital Engagement Networks

Hospital Engagement Networks will help identify solutions already working to reduce healthcare acquired conditions, and work to spread them to other hospitals and health care providers. These organizations will serve as “mobile classrooms” – bringing the lessons learned by innovative health care leaders to the other hospitals in their region. They will help coach hospitals as they implement new strategies to reduce healthcare acquired infections and help hospitals learn from each other and share their successes and challenges.

Hospital Engagement Networks will work at the regional, State, national or hospital system level to develop learning collaboratives for hospitals so that they can implement the changes and innovations necessary to achieve the Partnership for Patients' safety and care transitions goals. They will engage in a wide array of initiatives and activities to spread established, effective interventions and rapidly improve patient safety in hospitals.

Hospital Engagement Networks will be required to conduct intensive training programs to teach and support hospitals in making care safer; provide technical assistance for hospitals and other providers, and establish and implement a system to track and monitor hospital progress in meeting quality improvement goals consistent with the aims of the Partnership for Patients.

The Hospital Engagement program will evaluate the capacity of large improvement networks to bring about rapid improvements in patient care. The two-year contracts, which the Centers for Medicare and Medicaid Services has discretion to extend for a third year, require Hospital Engagement Networks to develop content, conduct learning activities, and make best practices available to partner hospitals in ten core areas of focus, although they do not have to limit their work to this core set. The National Content Developer, another contract that was awarded under the Partnership for Patients, will work with the Hospital Engagement Networks in developing the training materials.

The core areas of focus are:

- Adverse drug events (ADE)
- Catheter-associated urinary tract infections (CAUTI)
- Central line-associated blood stream infections (CLABSI)
- Injuries from falls and immobility
- Obstetrical adverse events
- Pressure ulcers
- Surgical site infections
- Venous thromboembolism (VTE)
- Ventilator-associated pneumonia (VAP)
- Preventable readmissions

Hospital Engagement Networks will address additional topics relating to organizational structure – such as leadership and culture change – to reduce all-cause harm and preventable readmissions.

Data Tracking and Reporting

Each Hospital Engagement Network, in consultation with the Partnership for Patients, will identify appropriate measures for each core area of focus to track hospital progress on quality improvement. Participating hospitals will be strongly encouraged to use these measures in their improvement work. While hospitals are not required to address all core areas of focus, Hospital Engagement Networks are strongly encouraged to urge hospitals to address them. No specific measures are mandated, although the Hospital Engagement Networks have been given basic guidelines for measure selection, are strongly urged to include both process and outcome measures, and are encouraged to utilize measures that align with existing measurement activity already underway within their community.

The Hospital Engagement Networks will be required to provide reports to CMS which will describe their activities and progress of their quality improvement efforts, including hospital progress on improvement measures for each core area. Additionally, Hospital Engagement Networks are required to submit two types of reports:

- (1) “Operational Reports” which will describe the number of hospitals that have joined the Hospital Engagement Contract network, detail the number of core areas in which each hospital is engaged, and list which hospitals are in compliance with data submission requirements; and
- (2) “Improvement Reports,” which will contain aggregated data on quality improvement measures.

Hospital Engagement Networks will be required to submit a final report to CMS at the conclusion of the 24 month work period detailing the successes, failures, unintended consequences and areas of improvement in each of the ten core events.

To support hospital submission of measurement data, the Hospital Engagement Networks are required to establish a secure, web-based data collection and management portal. Through this portal, the Hospital Engagement Networks will have access to hospitals’ measurement data, and will use that information to evaluate progress and focus attention on efforts or hospitals that have yet to see improvement. Data collected by the Partnership for Patients will not be used to evaluate hospital performance for existing quality programs such as the hospital value-based purchasing program and the hospital readmissions reduction program.

Hospitals that are affiliated with a selected Hospital Engagement Network organization may participate with that organization, but they are not required to do so. The Hospital Engagement Networks have the capacity to support over 4,800 hospitals. The competitive procurement process enabled coverage across 46 States. The Partnership for Patients will arrange for coverage in Delaware, Hawaii, Maryland, and Maine through excess capacity in the Hospital Engagement Networks run by hospital trade associations, affinity groups and hospital systems operating in these States. All hospitals that want to be part of the Partnership for Patients will be able to receive support through the Hospital Engagement Networks.

Selected Hospital Engagement Network Organizations

The 26 Hospital Engagement Network organizations were selected based on a selective competitive acquisition process and are believed to be best suited to help the Partnership for Patients achieve its goals.

The 26 Hospital Engagement Networks are:

- **American Hospital Association (AHA)**, a national organization that represents and serves all types of hospitals, health care networks, and their patients and communities. The AHA counts among its membership nearly 5,000 hospitals, health care systems, networks, other providers of care and 40,000 individual members.
- **Ascension Health**, a religiously-affiliated non-profit health system providing acute care services, long-term care, community health services, psychiatric, rehabilitation and residential care with more than 113,000 associates serving in 70 acute care facilities in 20 states and the District of Columbia.
- **Carolinas HealthCare System** provides a full spectrum of healthcare and wellness programs throughout North and South Carolina. Its diverse network of more than 600 care locations includes academic medical centers, hospitals, healthcare pavilions, physician practices, destination centers, surgical and rehabilitation centers, home health agencies, nursing homes and hospice & palliative care.
- **Catholic Healthcare West (CHW)**, a non-profit hospital system that includes more than 60,000 caregivers and staff who provide health care services for more than four million annual patient visits. CHW provides care at 38 acute care hospitals, on 40 campuses, across California, Arizona, and Nevada.
- **Dallas-Fort Worth Hospital Council Foundation (DFWHC)** was established in 1968 as a non-profit corporation to promote safe, high quality, cost effective, accessible and equitable healthcare by strengthening the healthcare workforce and improving the community's health. DFWHC consists of 77 hospital members and 60 associate members from 42 Texas counties.
- **Georgia Hospital Association Research and Education Foundation**, a non-profit organization providing educational, charitable and scientific services for approximately 175 Georgia hospitals and health systems, 45 nursing homes, and 25 home health agencies. It sponsors 14 professional societies totaling more than 2,500 members.
- **Healthcare Association of New York State**, a non-profit organization representing nearly 500 hospitals, health systems, nursing homes, and other providers across the continuum of care in New York State.
- **Hospital & Healthsystem Association of Pennsylvania**, a State association of hospitals that provides membership services for nearly 250 Pennsylvania acute and specialty care, primary care, subacute care, long-term care, home health, and hospice providers, as well as the patients and communities they serve.
- **Intermountain Healthcare**, a non-profit health care system based in Salt Lake City, Utah operates 23 hospitals and 199 clinics throughout Utah and Southern Idaho. It will partner with other healthcare systems for their Hospital Engagement Contractor network, including Baylor Health Care System, Dartmouth-Hitchcock Health Care System, Denver Health, Mayo Clinic, Providence Health & Services, and the VA Salt Lake City Health Care System.

- **Iowa Healthcare Collaborative**, a provider-led nonprofit organization working with hospitals and physicians on improvements in health quality, patient safety, and value. IHC sponsors educational collaboratives, convening hospital and physician clinic staff and providing them with the process improvement tools to examine their internal processes and make adjustments that add value and improve care for Iowans.
- **Joint Commission Resources, Inc.**, the non-profit organization of The Joint Commission on Hospital Accreditation. JCR works with health care organizations and governmental bodies around the world to assist in improving the quality and safety of patient care.
- **Lifepoint Hospitals, Inc** is a hospital company headquartered in Brentwood, Tennessee, which focuses on providing quality healthcare in rural settings. Life point has 52 affiliated hospitals in 17 states, including Alabama, Utah, Tennessee, Kentucky, Mississippi, Virginia, Colorado, Texas, Arizona, Wyoming, West Virginia, New Mexico, North Carolina, Louisiana, Nevada, Georgia, Kansas.
- **Michigan Health & Hospital Association (MHA)**, a Statewide association of 140 hospitals that represents the interests of its member hospitals and health services in many arenas on key issues and supports their efforts to provide quality, cost-effective and accessible care.
- **Minnesota Hospital Association (MHA)**, a Statewide association of 145 hospitals, represents Minnesota's hospitals and health systems in many areas and provides services such as educational programming, communications efforts, information resources and issue-area expertise.
- **National Public Health and Hospital Institute (NPHHI)** is a private, non-profit organization founded to conduct research on major issues facing public hospitals, safety net organizations, underserved communities and related health policy issues. NPHHI is the research affiliate of the National Association of Public Hospitals and Health Systems (NAPH).
- **New Jersey Hospital Association (NJHA)** is a non-profit trade organization of 111 hospitals. It provides a wide array of support and services to New Jersey's hospitals and other healthcare providers.
- **Nevada Hospital Association (NHA)** is a non-profit, Statewide professional association of 52 acute care hospitals as well as psychiatric, rehabilitation, and other specialty hospitals. The NHA represents Nevada's hospitals and provides resources and services in promoting public understanding of, and support for, the health care system serving Nevada's communities.
- **North Carolina Hospital Association (NCHA)** is a non-profit Statewide association representing over 130 North Carolina hospitals with the mission of promoting improved delivery of quality healthcare through leadership, advocacy, information, and education. The NCHA is partnering with the Virginia Hospital & Healthcare Association (VHHA), the Carolinas Center for Medical Excellence (CCME), Virginia and Healthcare Team Training (HTT).
- **Ohio Children's Hospital Solutions for Patient Safety**, a non-profit corporation, collects and analyzes patient safety data to improve children's safety and healthcare outcomes, and the quality of pediatric healthcare delivery overall.

- **Ohio Hospital Association**, a Statewide association that represents 165 hospitals throughout Ohio. It works with member hospitals to meet the health care needs of their communities.
- **Premier**, a national membership-based affinity organization established by hospitals to enable them to collaborate. It is a hospital performance improvement alliance of more than 2,500 hospitals across the country by providing a variety of tools to share best practices.
- **Tennessee Hospital Association**, a non-profit, Statewide membership organization of hospitals and health systems. It provides education and information services for its members, and informs the public about hospitals and healthcare issues at the State and national levels.
- **Texas Center for Quality & Patient Safety**, a non-profit research foundation affiliated with the Texas Hospital Association (THA) that supports educational and quality initiatives that enhance THA's mission and bring together Texas hospitals, State and national experts and evidence-based health care practices to improve the quality of care and reduce costs.
- **UHC** – formerly University Health System Consortium, is an alliance of 113 academic medical centers and their affiliated hospitals. UHC's mission is to advance knowledge, foster collaboration and promote change to help their members successfully compete and succeed in their respective markets.
- **VHA**, a nationwide network of community-owned health care systems and their physicians. With more than 1,340 hospitals, its mission is to improve the clinical and economic performance of its members.
- **Washington State Hospital Association (WSHA)** is a membership organization representing community hospitals and health-related organizations. With 97 community hospitals in Washington State, WSHA provides a wide array of services for its members, including issues management and analysis, information, and advocacy.

National Content Developer, Beneficiary and Medical Professional Engagement Contractor, and Evaluation Contractor:

In addition to the Hospital Engagement Contract awards, HHS has awarded \$10 million to three firms to assist Partnership for Patients in achieving its goals. These firms will serve as National Content Developer Contractor, the Beneficiary and Medical Professional Engagement Contractor, and the Evaluation Contractor.

Econometrica has been selected as the National Content Developer. Under this contract, this organization will create a curriculum in patient safety, and provide participating organizations support for culture change and operational implementation. It will also develop an organizational assessment to help every participating hospital identify their opportunities for improvement and set improvement goals, and help hospital boards and leadership support, engage in, and be accountable for progress towards these goals. Econometrica will help create a network of change by connecting the best practices of participating hospitals nationwide with a national faculty of leaders, frontline providers experienced in the work of improvement, and patients and families whose lives have been touched by this work.

WeberShandwick has been selected as the Beneficiary and Medical Engagement Contractor. Under this contract, it will engage Medicare, Medicaid and Children's Health Insurance Program beneficiaries,

their families and caregivers and others in specific activities supporting the aims of the Partnership for Patients. It is charged with raising awareness of the problem of patient safety amongst patients and consumers and mobilizing them to seek improvement, developing and deploying tools to help patients and families achieve smooth care transitions (e.g., discharge plans and medication cards) and good inpatient experiences (e.g., checklists to reduce the chance of infection), and convening a national council of organizations representing patients, consumers, and caregivers to test these approaches and suggest new opportunities for improvement.

Health Services Advisory Group (HSAG) has been selected as the Evaluation Contractor to evaluate the impact and effectiveness of the Partnership for Patients. It will be conducting an analysis of the impact of the overall program and will also provide ongoing assessment of the program. This will include regular interviews with Hospital Engagement Networks and hospital site visits. This ongoing support will enable the effort to sustain momentum and address emerging needs of the organizations involved.

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