

Aligning Forces for Quality in Wisconsin A Community Snapshot

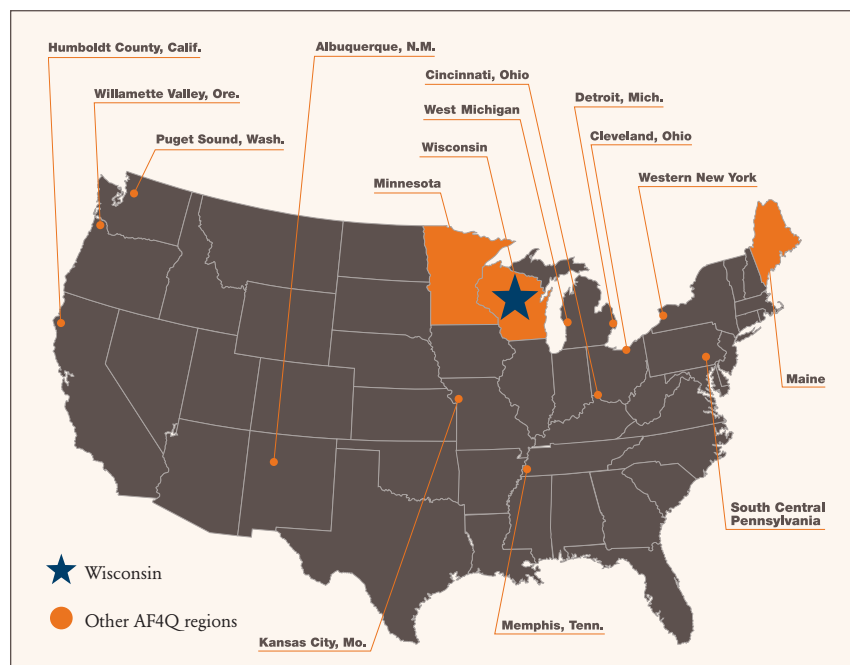
Wisconsin has a reputation as one of the healthier states in the nation. A 2007 report by The Commonwealth Fund, for example, ranked its health system's performance 9th among the 50 states. Likewise, Wisconsin placed 17th in the 2008 edition of United Health Foundation's long-running America's Health Rankings™ report, which tracks personal behaviors, health outcomes, environmental conditions and public policies.

But even reasonably healthy states like Wisconsin face serious health care challenges. According to the Dartmouth Atlas of Health Care, more than three out of 10 women there insured by Medicare do not get mammograms to detect breast cancer, and many Wisconsinites with diabetes do not get crucial blood tests. African-American Medicare enrollees in Wisconsin are far more likely than whites to be hospitalized for diabetes or progressive heart failure.

Wisconsin is hardly alone. These are examples of a broader crisis in the quality of care that the U.S. medical system delivers. The statistics in Wisconsin are repeated in community after community, endangering the health of millions. And it is not just the failure to deliver care that contributes to the quality problem. Delivering care that harms people—or delivering care that people do not need—is adding billions of dollars to the national health care bill and is one reason why so many Americans cannot afford health insurance.

While the health care crisis is national, care is delivered locally. That is why the Robert Wood Johnson Foundation (RWJF) is investing \$300 million in promising efforts to improve local health systems in Wisconsin

and 14 other regions across the nation. Called *Aligning Forces for Quality* (AF4Q), the initiative brings an unprecedented commitment of resources, expertise and training to turn proven health care reforms into real results at the community level. The AF4Q initiative focuses on the full continuum of health care delivery—the care provided in doctors' offices, clinics and hospitals, and the support provided in the community. It also emphasizes reducing racial and ethnic disparities in care and strengthening nursing's role in improving quality. It advances three interrelated reforms that experts believe are essential to improving health care quality:



The Robert Wood Johnson Foundation's Aligning Forces for Quality initiative is a \$300-million commitment of resources, expertise and training to turn proven health care reforms into real results in Wisconsin and 14 other regions across the country.

- **Performance measurement and public reporting:** using common standards to measure the quality of patient care and publicly disclosing that performance information.
- **Consumer engagement:** educating patients about their local health care systems to encourage them to demand higher-quality care and help them take a more active role in their own health.
- **Quality improvement:** implementing techniques and protocols that let doctors and hospitals raise the quality of care they deliver to patients.

This snapshot describes how the AF4Q initiative is being implemented in Wisconsin and the progress being made on these three main fronts.

How AF4Q is Being Implemented in Wisconsin

In 2007, RWJF selected the Wisconsin Collaborative for Healthcare Quality (WCHQ), a nonprofit consortium of health care systems, hospitals and physician practices, to implement the AF4Q effort in Wisconsin. Established in 2003, it works with other key health care stakeholders in the state to improve the quality and cost-effectiveness of care in Wisconsin.

WCHQ was chosen through a competition to find groups best positioned to make fundamental, cutting-edge changes to their region’s health care system. In addition to expertise, technical assistance and training from national experts, RWJF is providing WCHQ with more than \$1 million over three years and access to additional grants for specific projects.

WCHQ and several state business and health care groups recently launched the Wisconsin Healthcare Value Exchange (WHVE), a joint project to improve care and curb its cost by helping consumers compare quality and price. WHVE quickly drew the federal government’s notice as a promising national model and the U.S. Department of Health and Human Services added it to its national network of 25 Chartered Value Exchanges. WHVE’s membership in the network will give WCHQ access to technical assistance that will enrich its AF4Q work, plus opportunities to learn from other collaboratives pursuing data-driven quality improvement.

Wisconsin Overview

AF4Q service region:

- Statewide (all 72 counties in Wisconsin)

Health system:

- General hospitals:¹ 130
- General hospital beds:¹ 14,983
- Primary care providers (M.D.s):² 3,978
- Primary care physicians (D.O.s):³ 572

Population:⁴ 5,601,640

- White: 89.9%
- African American: 6.0%
- Asian: 2.0%
- Two or more races: 1.1%
- American Indian or Pacific Islander: < 1.0%
- Hispanic: 4.9% (includes all races)
- Under age 18: 23.6%
- Ages 18–64: 63.3%
- Ages 65 and older: 13.1%

Per capita income:⁵ \$25,742

Uninsured (ages 18–64):⁶ 12.1%

WCHQ currently publishes a broad array of physician group practice, hospital and health plan performance data on its Web site (www.wchq.org/reporting), as described below. WCHQ will use its AF4Q funding to expand the scope of its performance reports to help health care professionals use the data to improve the care they provide and to help consumers take a more active role in their care. It has created a team of business, health care and patient advocacy leaders to guide and align its AF4Q goals for performance measurement and public reporting, consumer engagement and quality improvement.

Progress on Performance Measurement and Public Reporting

In most places in the United States, information about health care quality is siloed in a number of sources. The 15 AF4Q teams are forging relationships and breaking down barriers between health care providers, payers and employers to create common systems for collecting and reporting health care performance data.

In addition to collecting and reporting performance data, all AF4Q teams are seeking ways to measure and analyze their community's overall health. These efforts can help them identify public health interventions in tandem with improvements in care in clinical settings.

Since 2003, WCHQ has been tracking its member physician group practices' adherence to evidence-based standards of care and posting the comparative results on its Web site. Types of care measured include breast, cervical and colorectal cancer screening; postpartum care; high blood pressure care; and diabetes and heart disease care. WCHQ recently added measures for adult pneumonia vaccinations, cholesterol management for cardiovascular conditions, screening for use of tobacco, and patients' ability to receive care from their provider of choice at the time they choose. WCHQ has also developed an innovative approach for demonstrating the relationship between quality outcomes and risk-adjusted charges in hospital settings for heart attack, heart failure and pneumonia care.

In addition, WCHQ reports measures of its member hospitals' and health plans' adherence to evidence-based standards, which include both nationally recognized benchmarks and some developed specifically to meet the needs of WCHQ member groups or partners. WCHQ is also partnering with the Wisconsin Hospital Association, which publishes comparative performance reports on 128 Wisconsin hospitals on its Web site.⁷

WCHQ is using research by the Dartmouth Atlas of Health Care and the Center for Studying Health System Change for its AF4Q work on reducing racial, ethnic, and primary-language disparities in care. It is also partnering with the hospital association, which collects patient data on race and ethnicity in hospital quality-improvement activities in all Wisconsin hospitals.

Progress on Consumer Engagement

WCHQ is focusing much of its initial AF4Q consumer engagement work on Medicaid beneficiaries in Milwaukee, which has large African-American and Hispanic populations as well as numerous residents who have limited English proficiency. Future efforts will target senior citizens and people with asthma and diabetes.

WCHQ has joined with several groups in the state to implement the Ask Me 3™ health literacy initiative sponsored by the Partnership for Clear Health Communication at the National Patient Safety Foundation.⁸ Designed to increase consumers' ability to understand and act on health information, the initiative urges patients to ask their doctors three essential questions during every visit:

- What is my main problem?
- What do I need to do?
- Why is it important for me to do this?

WCHQ will help supply its provider members' clinics and their staffs with on-site health literacy training, easy-to-understand Ask Me 3™ outreach materials in English and Spanish, and other forms of support.

To further support health literacy efforts, WCHQ will launch a "Teach Back" communication campaign to help doctors to determine whether their patients heard, understood and agreed with the health information the doctors just provided. Through the Teach Back method, doctors encourage patients to repeat what they just heard in their own words.

WCHQ also plans to help its provider members implement the Stanford Patient Education Research Center's Chronic Disease Self-Management Program, a series of peer-support workshops for people with chronic conditions.⁹

Progress on Quality Improvement

Quality improvement efforts in health care increasingly focus on lifting the performance of entire systems, not just that of individuals. All 15 AF4Q grantees have been asked to consider ways to create a permanent quality improvement resource in their community, for example by identifying or founding an entity or setting up a network to share knowledge and best practices on improving care.

WCHQ's member physician group practices, hospitals and health plans are using the collaborative's performance measures and reports to improve the quality of care they provide. For example, guided by WCHQ data, a large, multi-specialty physician practice in Southeastern Wisconsin has made great gains in helping its patients with diabetes control their cholesterol. In December 2005, WCHQ established the Cardiac Collaborative—a group of cardiologists, quality improvement professionals and cardiac registrars from WCHQ member hospitals—dedicated to decreasing the time from when a heart attack patient enters the hospital and arrives in the catheter lab for intervention. WCHQ also sponsors regularly scheduled forums that allow its members to learn from one another's quality improvement initiatives.

Future WCHQ quality improvement efforts will focus on nursing, small hospitals, collaboration among hospitals and diffusion of best practices.

On the national stage, WCHQ was one of six regional collaboratives chosen to pilot test the federal Medicare program's Better Quality Information (BQI) project, which seeks to merge Medicare claims data with those from commercial health plans and other payers to produce more accurate measures of the quality of care delivered by physician groups and individual doctors. As with its Chartered Value Exchange membership, the BQI project experience will enrich WCHQ's AF4Q efforts.

Aligning Forces for Quality

The premise of AF4Q is that these strategies—public reporting and performance measurement, consumer engagement and quality improvement—must be implemented in a coordinated way in order to lift the overall quality of health care. That is why the overarching goal of both the national AF4Q program and WCHQ in Wisconsin is to bring community stakeholders together to drive change on these three critical fronts to improve health and health care quality.

For more information about AF4Q in Wisconsin, visit www.wchq.org and www.rwjf.org/qualityequality/af4q/communities/wisconsin.jsp

Research for this report was provided by the Aligning Forces for Quality Evaluation Team at Penn State University's Center for Health Care and Policy Research, which is studying the AF4Q initiative to gain insights about community-based reform that can guide health care practice and policy. For more information, visit www.hbdev.psu.edu/CHCPR/activities/project_alignforce.html.

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¹2005 American Hospital Association Annual Survey of Hospitals (taken from the 2007 HRSA Area Resource File).

²2006 American Medical Association Physician Masterfile (taken from the 2007 HRSA Area Resource File).

³2004 American Osteopathic Association (taken from the 2007 HRSA Area Resource File).

⁴2007 Population Estimates—U.S. Census Bureau.

⁵2005–2007 American Community Survey 3-Year Estimates.

⁶2005 Census Small Area Health Insurance Estimates.

⁷For more information, visit www.wicheckpoint.org.

⁸For more information, visit www.npsf.org/askme3.

⁹For more information, visit <http://patienteducation.stanford.edu/programs/cdsmp.html>.