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Hospitals

Progress Continues in Reducing Hospital-Acquired Conditions

Hospitals are making progress in reducing problems patients develop after admission such, as adverse drug events and infections, but an ambitious goal set by the HHS lies ahead: a 20 percent cut from 2014 by 2019.

A recent report by the Agency for Healthcare Research and Quality, a part of the Department of Health and Human Services, found that hospital-acquired conditions declined by 8 percent from 2014 to 2016. This continues a downward trend in patients getting harmful conditions unrelated to those for which they were hospitalized: A previous AHRQ report found that hospital-acquired conditions dropped 17 percent from 2010 to 2014.

AHRQ's latest report, issued June 5, translated the reduction into savings and lives: the HHS agency found that the 8 percent reduction in HACs saved \$2.9 billion in costs and averted 8,000 patient deaths.

This report "certainly proves the point that value-based incentive programs improve cost and quality in health care," Madeleine Biondolillo, a doctor and vice president of quality and safety at Premier Inc., a health-care alliance that unites hospitals and other health-care providers across the U.S., told Bloomberg Law.

CMS's Role The Centers for Medicare & Medicaid Services "has some payment strategies ... designed to drive improvement in quality of hospital care," Biondolillo said June 8. "The hospitals providing better care receive payments that would have otherwise gone to hospitals not providing as good care." Examples of the payment strategies include the Hospital Value Based Purchasing Program (an initiative that rewards hospitals based on their performance) and the Hospital-Acquired Conditions Reduction Program.

"This is a tremendous accomplishment by America's hospitals in delivering high-quality, affordable health care," said CMS Administrator Seema Verma in a press release June 5. Verma's agency "is committed to moving the health care system to one that improves quality and fosters innovation while reducing administrative burden and lowering costs."

This report's findings are "due to the continued work and dedication of our members across the country in making care safe," Rick Pollack, president and CEO of the American Hospital Association, said in a press release June 5.

"The fact that they're kind of inching their way there is indicative of the fact that infection control is chal-

lenging" and that hospitals have to be "diligent" about it, Maryellen Guinan, a senior policy analyst at America's Essential Hospitals in Washington, told Bloomberg Law June 7.

This year's report included a larger portion of hospital inpatients in the calculations and included patient charts for most conditions treated in acute care hospitals. Previous reports only included patient charts for four conditions; acute myocardial infarction, congestive heart failure, pneumonia, and the Surgical Care Improvement Project (a national effort to cut down on surgical complications).

The new methodology is "expanding to a larger number of patients to see if this is a unique phenomenon or a more pervasive phenomenon," Biondolillo said.

Of the categories of hospital-acquired conditions, only pressure ulcers and catheter-associated urinary tract infections increased in the past two years, and six categories decreased by at least 10 percent.

Premier's collective to alliance of hospitals and other providers shares data and works together to decrease HACs, Biondolillo said. "It's a way of learning from others that have walked in the same trenches."

"Estimates in the new National Scorecard identify important goals for ongoing efforts to protect patients," said AHRQ Director Gopal Khanna. "These data not only help us track how we're doing, but they help us set the target for where we need to go."

Biondolillo said improving best practices and committing the staff and management to reducing HACs is "critical to making any change happen."

Hand Hygiene, Other Actions "To have a robust quality-improvement program at your hospital ... is resource intensive" and requires having the funding to do so, Guinan said. This means that not every hospital has the funds to fully invest in preventing hospital-acquired conditions.

Some of the methods that are used to prevent these conditions appear to be basic, but they can make a difference, Guinan said. "A lot of times it comes down to the basics of hand hygiene."

Arizona-based Maricopa Integrated Health System created an infection prevention and control newsletter that it distributed to its staff, according to materials from America's Essential Hospitals. It also implemented an ultraviolet light system to disinfect rooms and began using sterile-grade water.

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