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October 15, 2010

Nancy Wilson
Agency for Healthcare Research and Quality
540 Gaither Road
Room 3216
Rockville, MD 20850

Dear Ms. Wilson:

On behalf of the more than 200 members of the Care Continuum Alliance, I respectfully offer the following comments for your consideration in response to the request for public input in the development of a National Health Care Quality Strategy and Plan released September 9, 2010, pursuant to Section 3011 of the Affordable Care Act (ACA).

Care Continuum Alliance (CCA) members provide services across the entire continuum of care, from wellness and prevention to complex care management. CCA members include wellness and population health management organizations, health plans, physician groups, hospitals, labor unions, employer organizations, pharmaceutical manufacturers, pharmacy benefit managers, HIT service and device suppliers, academicians and others. These diverse organizations share the vision of aligning all stakeholders toward improving the health of populations. Our members seek to improve health care quality and contain health care costs at a population level by providing targeted interventions and services to individuals who are well, at-risk for or managing one or more chronic conditions. Through advocacy, research and promotion of best practices, the Care Continuum Alliance advances evidence-based strategies to improve care quality and outcomes and reduce preventable costs for individuals with and at risk of chronic disease.

We share the goal of improving the quality of care for all patients and appreciate the opportunity to provide input as you move forward with the development of a strategic plan to improve quality in our health care delivery system and ensure better health for populations.

General Comment:

Over the past several months, various divisions of the Department of Health and Human Services (HHS) have released requests for information and comment on items such as the draft multiple chronic conditions framework and the broader HHS strategic framework. We recommend that the responses to those related inquiries inform the development of the National Quality Strategy and Plan. Additionally, we encourage the

Department to provide a roadmap for and guidance on coordinating, rather than duplicating, all these quality initiatives.

Broad-scale efforts to transform our health care system from one focused on reactionary and episodic care and payment to one focused on preventive care and the promotion of health and wellness as a shared national resource is possible with the enactment of the ACA and should be incorporated into the National Quality Strategy. This will require a “systems-approach” to reform care delivery across all payers, providers and consumers. Ultimately, payments, rewards and incentives must be aligned across all providers and consumers toward the goal of improved health.

Below please find specific comments on several of the questions posed:

Question 1: Are the proposed Principles for the National Strategy appropriate? What is missing or how could the principles be better guides for the Framework, Priorities and Goals?

The National Strategy should include a goal of population health management. We offer for consideration as a part of the principles our population health management model, which describes the elements of a fully-connected health system, leveraging teams of care providers focused on proactive, coordinated, quality care.

The population health management model highlights three components: 1) the central care delivery and leadership roles of the primary care physician; 2) the critical importance of patient activation, involvement and personal responsibility; and 3) the patient focus and capacity expansion of care coordination provided through wellness, and chronic care management programs. The convergence of these roles, resources and capabilities in the population health management model ensures higher levels of quality and satisfaction with care delivery. Further, coordination and integration are important tools to address health care workforce shortages, individual access to coverage and care and affordability of care.

Key components of the population health management model include:

- Population identification strategies and processes;
- Comprehensive needs assessments that assess physical, psychological, economic and environmental needs;
- Proactive health promotion programs that increase awareness of the health risks associated with certain personal behaviors and lifestyles;
- Patient-centric health management goals and education which may include primary prevention, behavior modification programs and support for concordance between the patient and the primary care provider;
- Self-management interventions aimed at influencing the targeted population to make behavioral changes;
- Routine reporting and feedback loops which may include communications with patient, physicians, health plan and ancillary providers;

- Evaluation of clinical, humanistic, and economic outcomes on an ongoing basis with the goal of improving overall population health.

Not only should the proposed principles stress that goals and strategies must address all ages and populations, care settings and improvement efforts, but the goals also should emphasize the need for a whole-population, whole-person approach that strives to meet the needs of a population through a patient-centered focus.

In addition, core principles should stress the integration of health information technology as a critical element to attaining the goals and strategies and as a way to deliver the most effective and efficient care to an entire population.

Question 2: Is the proposed Framework for the National Strategy sound and easily understood? Does the Framework set the right initial direction for the National Health Care Quality Strategy and Plan? How can it be improved?

The framework addressed in the National Strategy sets a foundation for attaining the goal of a healthier population and improved quality in the delivery of health care. We elaborate further on each of the components in question 3.

Question 3: Using the legislative criteria for establishing national priorities, what national priorities do you think should be addressed in the initial National Health Care Quality Strategy and Plan in each of the following areas? Better Care: Person-centered care that works for patients and providers. Better care should expressly address the quality, safety, access, and reliability of how care is delivered and how patients rate their experience in receiving such care; Affordable Care: Care that reins in unsustainable costs for families, government, and the private sector to make it more affordable; and Healthy People/Healthy Communities: The promotion of health and wellness at all levels.

Better Care: Person-centered care should include a focus on shared decision-making and health literacy in the experience of patient care, in addition to access and safety. In addition, better care should be measureable and combined with accountability, both on the patient demand and delivery sides. Person-centered care should have the capability of meeting a person’s individual needs in a way that is most appropriate to that person. This means that the whole person must be addressed through the development of tailored interventions and communications that utilize both health information and health technology.

Affordable Care: The population health management model supports efficient patient care by leveraging a team-based approach that improves quality and health outcomes, while producing savings. Please refer to recent studies demonstrating that population health management programs are an effective way to supplement and complement care in the physician office. These types of programs promote integrated, coordinated care and empower patients to participate in treatment decisions with their physicians, while generating savings. (New England Journal of Medicine, “Randomized Trial of a

Telephone Care-Management Strategy, 2010, Vol. 363, NO. 13; and The Center for Health Research, “Savings Potential From Prevention, Risk Reduction for Commercially Insured, May 2010.) Due to their ability to influence demand for services at the population level, health promotion and wellness are essential to achieving affordability goals.

Healthy people and healthy communities: This effort can be supported by including all health care stakeholders, including providers, individuals, community resources and the private sector. It must remain broad and comprehensive to leverage all resources available for improving the health of a community. Also, outreach efforts to engage all stakeholders should be conducted in an open and transparent manner.

Question 4: What aspirational goals should be set for the next 5 years, and to what extent should achievable goals be identified for a shorter timeframe?

Aspirational goals should identify both short- and long-term measurable impacts. For example, to reduce chronic condition prevalence and improve chronic care treatment, the goals should include assessment of short- and long-term metrics to identify consistent and successful tactics for achieving intended results.

Question 5: Are there existing, well-established, and widely used measures that can be used or adapted to assess progress towards these goals? What measures would best guide public and private sector action, as well as support assessing the nation’s progress to meeting the goals in the National Quality Strategy?

There are several organizations that have developed valid and reliable measures that span the health care continuum. All priorities and goals that focus on measures should ensure that the measures chosen address gaps in care, can be impacted by the accountable entity and have been tested for validity and reliability by a series of scientifically sound research studies.

Accountable measurement of progress toward optimized population health management should include:

- Various clinical indicators, including process and outcomes measures;
- Assessment of patient satisfaction with health care;
- Functional status and quality of life;
- Economic and health care utilization indicators; and
- Impact on known population health disparities.

Question 6: The success of the National Health Care Quality Strategy and Plan is, in large part, dependent on the ability of diverse stakeholders across both the public and private sectors to work together. Do you have recommendations on how key entities, sectors, or stakeholders can best be engaged to drive progress based on the National Health Care Quality Strategy and Plan?

We suggest that forums be convened of all key stakeholders to develop a strategy for how they can work together to achieve progress. The forums should identify pros, cons and barriers to developing solutions. Ongoing outreach and dialogue to stakeholders should be part of the strategy to continue engagement.

We appreciate the opportunity to provide comments and would be pleased to discuss with you in greater detail.

Sincerely,

A handwritten signature in black ink, appearing to read "Tracey Moorhead". The signature is written in a cursive, flowing style.

Tracey Moorhead
President and CEO