

Hospital Quality Improvement Contractor (HQIC)



Onboarding Session

June 14, 2021



Agenda

- Welcome and introductions
- HQIC overview and goals
- Measurement data
- Communication and education
- Technical assistance resources
- Hospital portal
- Wrap up/Next steps

Featured Speakers



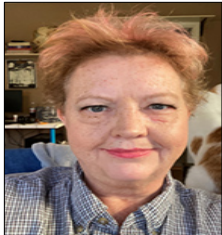
Donna Cohen, RN, BSN, CCM
Director, Quality Projects
Alliant Health Solutions



Karen Holtz, MS, CPHQ
Education and Training Lead
Alliant Health Solutions



Carol Snowden, RN
Quality Director
Alabama Hospital Association



Lynne Hall, BSN, RN
Quality Improvement Specialist
Georgia Hospital Association



Nadyne Hagmeier
Quality Improvement Consultant
KFMC Health Improvement Partners



Aaron Hubbard
QI Consultant
Comagine

Alliant Quality



The Quality Improvement Services Group of
ALLIANT HEALTH SOLUTIONS

- Quality improvement services group of Alliant Health Solutions
 - CMS contractor with a national footprint in 13 states
 - Past sub-contractor to Hospital Improvement Innovation Network (HIIN) and Health Enterprises Network (HEN)
- Clinically-led and data-driven organization
- Demonstrated success across multiple healthcare settings, e.g., nursing homes, long term care, hospitals, clinical provider offices

HQIC Overview

- Four year program active until October 2024
- Supports small, rural and critical access hospitals and facilities that care for vulnerable and underserved patients
- Provide assistance to hospital leaders and clinical teams:
 - Reduce opioid misuse and adverse drug events
 - Prevent hospital-acquired infections
 - Improve care coordination to reduce readmissions
 - Support for pandemic responses and emergency preparedness

HQIC (Task Order 3) Awarded to Nine Organizations

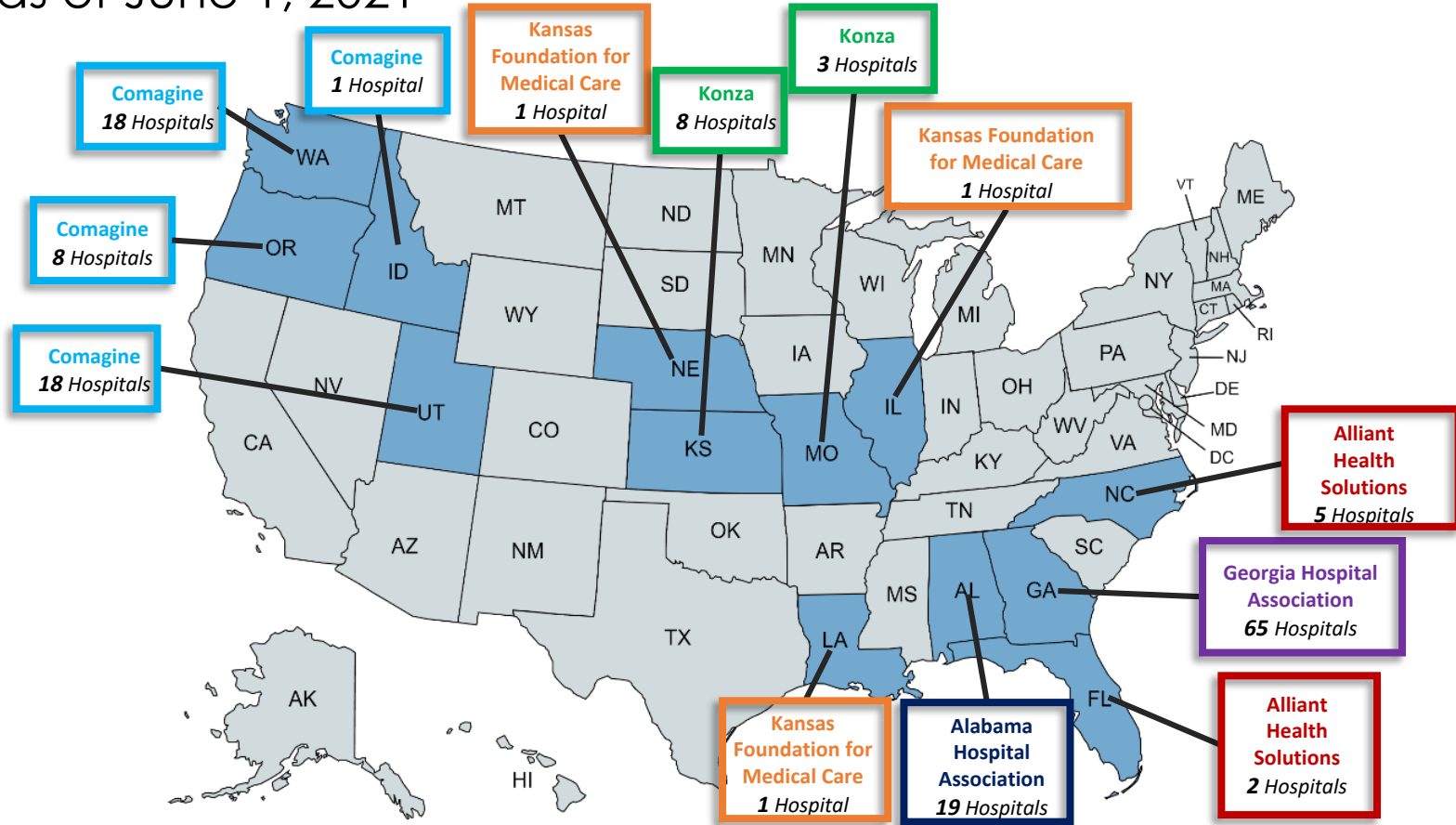
- **Alliant Quality**
- Convergence Health Consulting
- Healthcare Association of New York State (HANYYS)
- Health Quality Innovators (HQI)
- Healthcare Services Advisory Group (HSAG)
- Iowa Healthcare Collaborative (IHC)
- Independent Peer Review Organization (IPRO)
- Telligen
- TMF Quality Institute

Alliant HQIC Partners in Several States

- Alabama Hospital Association - Alabama
- Comagine - Idaho, Oregon, Utah and Washington
- Georgia Hospital Association - Georgia
- Kansas Foundation for Medical Care (KFMC) - Illinois, Louisiana and Nebraska
- KONZA - Kansas and Missouri

150 Enrolled Hospitals by State and Partner

as of June 1, 2021



Areas of Focus

Patient Safety

- Opioid stewardship
- Adverse drug events (opioids, anti-coag, glycemic)
- CLABSI
- CAUTI
- C. diff
- Sepsis
- Pressure injuries
- Readmissions

Other

- COVID-19 and/or public health emergencies
- Health disparities and health equity
- Patient and family engagement
- Leadership engagement

HQIC Evaluation Metrics and Goals By 2024*

Behavioral Health
Decreased
Opioid Misuse

- Decrease opioid-related ADEs by 7%, including deaths
- Decrease opioid prescribing (<90MME) by 12%

Patient Safety
Reduction of
Harm

- Reduce ADEs by 13%
- Reduce all-cause harm by 9%
- Reduce *Clostridioides difficile* rates

Care Transitions
Focus on High
Utilizers

- Reduce readmissions by 5%

*For the nine Hospital Quality Improvement Contractors (HQICs)

Data Measures (Monthly Monitoring)

- Low data burden on hospitals
- Use Medicare claims, NHSN, HHS Protect and Assessment data
- Standardized set of measures
 - **Core**
 - Secondary
 - Optional

Core Measure List (Required)		
Patient Safety Topic	Standardized Measures	Source
ADE	Anticoagulant Related Adverse Drug Events per 1,000 Acute Inpatient Admissions	Claims
ADE	Hospital Harm- Severe Hypoglycemia	Claims
ADE and Opioid Stewards	Opioid-Related Adverse Drug Event Rate	Claims
CAUTI	NHSN CAUTI SIR - ICU, excluding NICU	NHSN
CAUTI	NHSN CAUTI SIR - ICU + Other Units	NHSN
CAUTI	NHSN CAUTI Utilization Ratio	NHSN
CLABSI	NHSN CLABSI SIR - ICU, including NICU	NHSN
CLABSI	NHSN CLABSI SIR - ICU + Other units	NHSN
CLABSI	NHSN CLABSI Utilization Ratio	NHSN
C_DIFF	Laboratory-identified Hospital Onset Clostridioides difficile Standardized Infection Ratio (SIR) (NQF 1717)	NHSN
MRSA	Laboratory-identified Hospital Onset Methicillin-resistant Staphylococcus (MRSA) bacteremia Ratio (SIR)	NHSN
PrU	Pressure Ulcer Rate Stage 3+ (AHRQ PSI-03)	Claims
PrU	Pressure Ulcer Prevalence Rate (NDNQI) (NQF 0201)	Claims
READMISSIONS	Hospital-wide, All cause, unplanned hospital 30-day readmissions (NQF 1789)	Claims
SEPSIS	Post-operative sepsis and septic shock (PSI-13)	Claims
SEPSIS	Adult Inpatient Risk Adjusted Sepsis Mortality (NQF 3215)	Claims
SEPSIS	30-day Sepsis Mortality rate	Claims
COVID-19_HOSPITAL	COVID-19 vaccination among hospital clinicians- Vaccination complete	HHS Protect

Data Measures (Monthly Monitoring)

- Standardized set of measures
 - Core
 - **Secondary**
 - Data is collected via assessment/ coaching call and HHS Protect
 - **Optional**
 - Claims

Secondary Measure List (Required)		
Measure Domain	Standardized Measures	Source
COVID-19_HQIC	* Ensuring infection preventionist function shared between another care setting in the community	Assessment COVID-19
COVID-19_HQIC	Written Emergency Preparedness Plan that fits the community characteristics and prepares for future surges.	Assessment COVID-19
COVID-19_HQIC	Implementation of the CDC Comprehensive Hospital Preparedness Checklist for the Coronavirus disease- 2019	Assessment COVID-19
COVID-19_HOSPITAL	ED Utilization related to COVID- ventilated patients	HHS Protect
COVID-19_HOSPITAL	ED Utilization related to COVID- non-ventilated patients	HHS Protect
COVID-19_HOSPITAL	Hospital Onset of COVID-19	HHS Protect

Additional Common Measures and Optional Measures		
Measure Domain	Measure Description	Source
OPIOIDS	Opioids: Rate of Narcan Administration	Claims
OPIOIDS	High-Dose Opioid Prescribing Upon Discharge	Claims

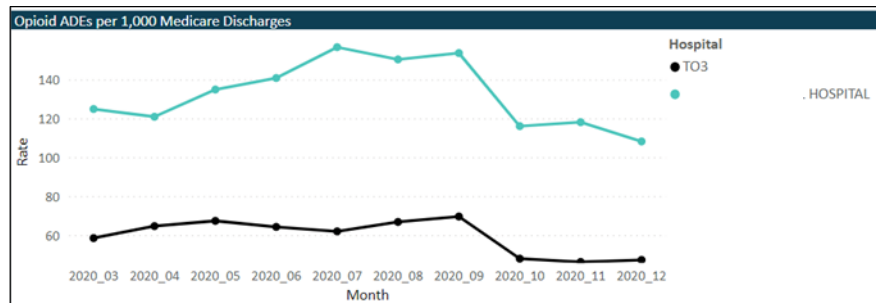
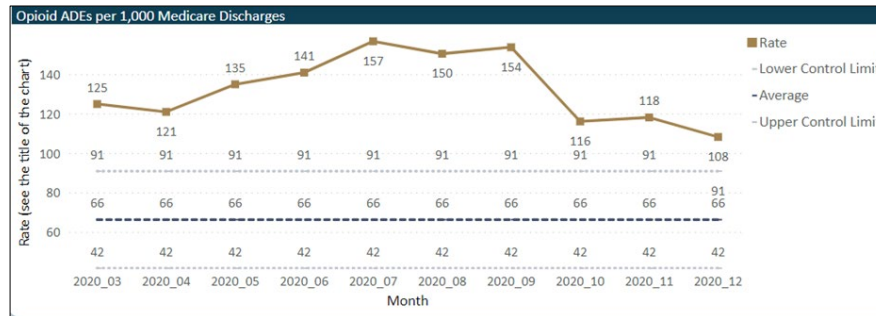
Data Analytics

- Displayed in Power BI software
- Performance improvement coach can share screen shots of hospital data during monthly coaching calls
- Hospitals do not have access, but can see the hospital portal (slide 30)

Hospital Performance

- Trended over time with upper and lower control limits
- Comparison to TO3 (Task Order 3)*
- Data points are three-month rolling average
- Typically a four-month lag time

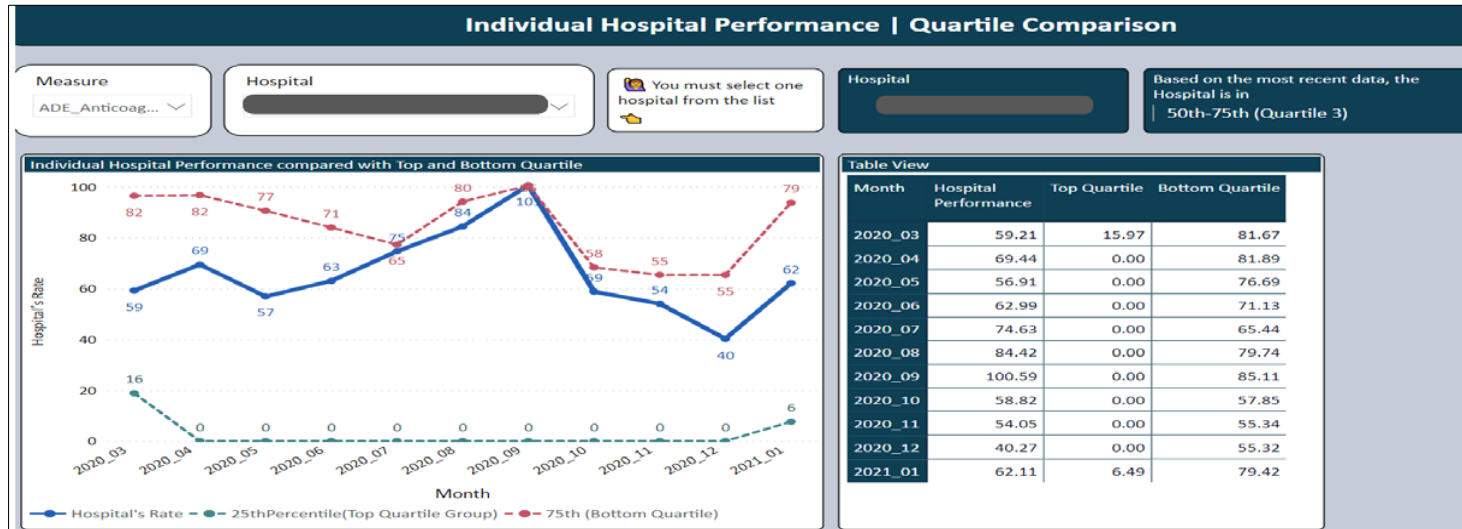
*All enrolled hospitals in Alliant HQIC that are submitting data for that measure



Facility Name	2020_03	2020_04	2020_05	2020_06	2020_07	2020_08	2020_09	2020_10	2020_11	2020_12
TO3	58.46	64.62	67.31	64.21	61.92	66.77	69.56	47.88	46.20	47.23
HOSPITAL	124.85	120.88	134.87	140.79	156.67	150.35	153.64	116.05	118.07	108.17

Benchmarking - Quartile Graph

- Hospital performance compared to top quartile (25th) and bottom quartile (75th)



Benchmarking - Quartile Scorecard

- Hospital performance in quartile-based scorecard

Individual Hospital Performance | Quartile Scorecard for all Measures

Measure: Hospital:

You must select one hospital from the list

For quicker loading only 3 measures are pre-selected. You can select additional Measures as per your requirement

Hospital Performance Scorecard based on most recent data





Measure	Hospital	Numerator	Denominator	Rate	Quartile Group	# Hospitals in the group	# Hospitals performing better than you	# Hospitals performing worse than you	Rank (among the selected Partner Group)
ADE_Anticoagulants		2.00	79.00	25.32	25th-50th (Quartile 2)	67	30	36	14
ADE_Glycemic		0.00	79.00	0.00	0th-25th (Top Performing Quartile)	67	0	31	1
ADE_Opioid		0.00	79.00	0.00	0th-25th (Top Performing Quartile)	67	0	47	1

HHS Data: COVID-19



Monthly HQIC Newsletter



Please use these links to share this email:     

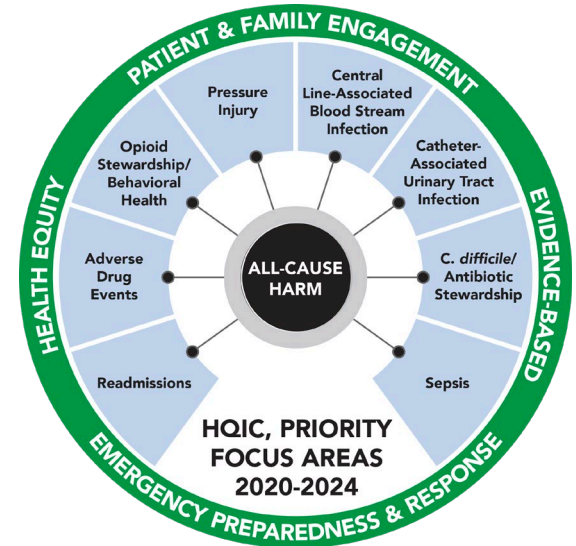
In This Issue:

- Latest News from CMS
- Educational Events
- Expert Insights & Resources
- Public Health Emergency Information & Resources
- Leadership Corner
- Hospital Heroes

- Sent the first Thursday of each month to contacts
- Check junk mail or unblock email from Donna Cohen at Alliant
- Look at educational events for registration links and past recordings
- [April newsletter](#)

Learning and Action Network (LAN) Events

- Focus on areas of all-cause harm
- Scheduled the fourth Tuesday of every month from 2-2:30 p.m. ET/1-1:30 p.m. CT/12-12:30 p.m. MT/11-11:30 a.m. PT
- Featured speakers include external and internal subject matter experts and HQIC hospitals
- Best practice resources shared
- Registration links, past recordings and slides in newsletter and on Alliant website



Learning and Action Network (LAN) Events

Date	Patient Safety Focus Area	Title
Feb 23, 2021	Public Health Emergencies/COVID-19	Developing a Business Case for Infection Prevention (IP) Resources: What We Learned from COVID-19
Mar 23, 2021	Opioid Stewardship/ADE Opioids	Opioid Misuse Disorder: Closing the Loop Between Hospital and Community
Apr 27, 2021	Health Disparities/Equity	Digital Health Equity Breast Cancer Screening
May 25, 2021	Antibiotic Stewardship/PHE/COVID-19	Antibiograms and Infection Prevention Efforts to Combat Antimicrobial Resistance Post COVID-19
Jun 22, 2021	PHE/COVID19 Treatment	Monoclonal Antibody Therapy for High Risk COVID Patients
Jul 27, 2021	Opioid Stewardship/Pain Management	Establishing a Robust Pain Management Initiative Within Your Hospital
Aug 24, 2021	Care Transitions	TBD
Sep 28, 2021	Patient and Family Engagement (PFE)	TBD

Collaboration Across HQICs

*Under
Development*

- Opportunity to collaborate with other HQICs for peer learning and sharing
- All hospitals are welcome to participate
- Registration links will be shared across HQICs
 - LAN webinars
 - Exploring affinity groups for large urban hospitals
- Stay tuned for more info

How Does Technical Assistance Work?

- Meet with hospital quality, clinical team leaders and leadership
 - Allows leadership to understand the HQIC program and be involved in the QI process
- Customized 1:1 calls with performance improvement coach
 - Allows the hospital to ask for resources, improvement techniques and assistance with specific QI projects
- Coaching packages and resources are shared

How Does Technical Assistance Work?

- Initial assessments
 - Complete CMS enrollment questions, e.g., number of IP staff
 - Review baseline data and current interventions
 - Identify priority focus areas and goals
- Monthly coaching calls
 - Focus on low performing metrics and priority areas
 - Provide top interventions and evidence-based best practices
 - Develop action plans and provide coaching to meet goals
 - Connect hospitals to top performing peers for learning and sharing (mentoring)

Subject Matter Experts (SMEs)



Libby Bickers, LCSW
Behavioral Health/Opioid Misuse



Jennifer Massey, PharmD
Pharmacy and ADE Technical Adviser



Amy Ward, RN, BS, MS, CIC
Infection Prevention Specialist



Melody Brown, MSM
Care Transitions/Readmissions

Confer NHSN Rights

- Confer rights to Alliant to view infection data, create graphs and provide technical assistance
- Approximately 75% of hospitals conferred rights to date
- CAH – Reporting not mandatory, but highly encouraged

NHSN ID Number & Password

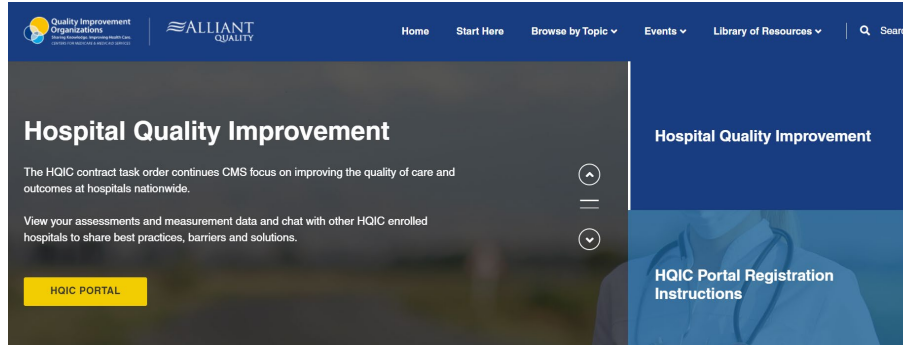
The group's 5-digit NHSN ID number: 83373

The group's joining password: Alliant20!

Resources:

1. [Joining a Group in NHSN and the Conferring Rights Template](#)
2. Contact Amy Ward at amy.ward@allianthealth.org for technical assistance

HQIC Website



About HQIC

The Centers for Medicare & Medicaid Services (CMS) awarded a four-year contract to Alliant Health Solutions (AHS) to serve as a National Quality Improvement and Innovation Contractor (NQIIC) under the recently launched Task Order 3: Hospital Quality Improvement Contractor (HQIC) contract. Under the agreement, Alliant will provide services to 153 hospitals across a multistate area.

<https://www.alliantquality.org/topic/hospital-quality-improvement/>

HQIC Events and Newsletters

Making Health Care Better Together

Join Our Upcoming Webinar Event

Monoclonal Antibody Therapy for High Risk COVID Patients

Tuesday, June 22, 2021
2-2:30pm ET | 1-1:30pm CT | 11-11:30am PT

Event Description:
 Since their initial emergency authorization in November, monoclonal antibodies have been an important weapon in the fight against COVID-19. These products have proven to be effective at preventing hospitalization and death due to COVID-19 in some of the highest risk patients. This presentation will provide an overview of these products, the data behind their emergency authorization, and the clinical considerations around their use.

Who should attend? Quality, Infection Preventionists, Pharmacy, Antimicrobial Stewardship Leaders, Laboratory and Physicians

Hosted by Alliant Quality, the quality improvement group of Alliant Health Solutions (AHS), the Hospital Quality Improvement Contractor (HQIC) under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services.

Learning Objectives:

- Identify and review the currently authorized COVID-19 monoclonal antibody therapies and the requirements associated with their emergency use.
- Demonstrate how the use of monoclonal antibodies can reduce hospitalization and death in those at highest risk for negative outcomes from COVID-19.
- Share tools and resources available to providers and patients interested in monoclonal antibody therapy.

About Hospital Quality Improvement Contractors (HQIC):
 The HQIC is a four-year program dedicated to improving behavioral health outcomes with a focus on decreased opioid misuse, patient safety with emphasis on reduction of harm, and care transitions with a focus on high utilizers. HQIC supports rural, critical access hospitals and hospitals that are low performing and serving vulnerable populations.

Collaborators:
 Alabama Hospital Association
 Alliant Quality
 Conspire Health
 Georgia Hospital Association
 RTMC Health Improvement Partners
 Konza

Register Here:
<https://bit.ly/3tXjdUS>

Featured Speakers:
Tim Davis, PharmD, BCNP, PMP
 Eastern Region Pharmacist
 Division of Public Health,
 Epidemiology Section
 Public Health Preparedness and
 Response Branch
 NC Department of Health and
 Human Services

For more information, visit our website www.alliantquality.com



HQIC Events

Upcoming Events

[Monoclonal Antibody Therapy for High Risk COVID Patients | June 22, 2021 | 2pm](#)

Past Events

- [Antibiograms and Infection Prevention Efforts to Combat Antimicrobial Resistance Post COVID-19 | May 25, 2021 | 2pm ET](#)
- [Digital Health Equity Breast Cancer Screening | April 27, 2021 | 2pm ET](#)
- [Opioid Use Disorder: Closing the Loop Between Hospital and Community | March 23, 2021 | 2pm ET](#)
- [Developing a Business Case for Infection Prevention Resources: What we learned from COVID-19 | February 23, 2021 | 2pm ET](#)

HQIC Newsletters

[Hospital Quality Improvement Newsletter – April 2021](#)

[Hospital Quality Improvement Newsletter – March 2021](#)

[Hospital Quality Improvement Newsletter – February 2021](#)

HQIC Resources

HQIC Resources

[National COVID-19 Resiliency Network \(NCRN\)](#)

[Shop Talks \(NHSN\)](#)

[COVID-19](#)

[Infection Prevention](#)

[Health Equity](#)

[Patient and Family Engagement](#)

[Behavioral Health](#)

[Medication Safety](#)

[Decrease Opioid Misuse](#)

Infection Prevention (HQIC) Resources

Catheter Associated Urinary Tract Infection (CAUTI)

[Urinary Catheter Quick Observation Tool](#)
[CDC-HICPAC Guideline for Prevention of CAUTI 2009](#)
[AHRQ Toolkit for Reducing CAUTI in Hospitals](#)
[CDC TAP CAUTI Implementation Guide](#)
[SHEA Strategies to Prevent CAUTI in Acute Care Hospitals, 2014](#)

[SHOW MORE](#)

Central Line Associated Blood Stream Infection (CLABSI)

[Central Line Quick Observation Tool](#)
[CDC-HICPAC Guidelines for Prevention of Intravascular Catheter-Related Infections, 2011](#)
[AHRQ Toolkit for Reducing CLABSI](#)
[CDC TAP CLABSI Implementation Guide](#)
[SHEA Strategies to Prevent CLABSI in Acute Care Hospitals](#)

Clostridioides Difficile Infection (C. difficile)

[Transmission Based Precautions Quick Observation Tool](#)
[The Progression of a C. Diff Infection](#)
[CDC Strategies to Prevent C. diff in Acute Care Facilities](#)
[CDC TAP CDI Implementation Guide](#)
[IDSA Clinical Practice Guidelines for C. diff Infection in Adults and Children: 2017](#)

[SHOW MORE](#)

Sepsis

[4 Ways to Get Ahead of Sepsis](#)
[Protect Your Patients From Sepsis](#)
[Hospital Toolkit for Adult Sepsis Surveillance](#)

Antibiotic Stewardship

[Assessment of the Appropriateness of Antimicrobial Use in US Hospitals](#)
[Antibiotic Stewardship Core Elements at Small and Critical](#)

COVID-19/Other

[COVID-19 Self-Management Zone Tool](#)
[Inter-Facility Infection Control Transfer Form - Hospitals](#)

HQIC Success Stories and General Resources

Phoebe Putney Health System in Georgia Marks One Year of COVID-19 Battle

In Albany, Georgia, Phoebe Putney Health System hosted a Day of Remembrance on March 10th to mark the anniversary of the beginning of its COVID-19 fight. Each of Phoebe's hospital campuses held special events Wednesday to recognize the region's healthcare heroes, thank community members for their support, encourage southwest Georgians battling COVID-19 and honor those whose lives were taken by the virus. Events included tribute walks along paths lined with signs highlighting COVID-related milestones over the last year and Day of Remembrance ceremonies featuring remarks from patients, community leaders and healthcare workers who have been on the frontlines of the COVID-19 battle. To ensure proper social distancing, the public was not invited to the walks and ceremonies. Members of the community in Albany, Americus and Sylvester were invited to attend drive-through luminary events at each hospital campus Wednesday night. Luminaries lit up the hospital driveways and areas of each campus were illuminated in red in honor of healthcare heroes. At the main campus, a laser light show flashed messages of thanks, support and unity on the side of one of the medical towers. "We definitely wanted to find a safe way to include our communities in our commemorations, because they have been so supportive of the Phoebe Family and so vital to all we have been able to accomplish over the last year. We thought this was a great way to thank them and to allow them to express their condolences to families who have lost loved ones and to show their support for our staff and current patients," said Joe Austin, Phoebe Putney Memorial Hospital Chief Executive Officer. [Read the Full Story](#)



Success Stories

General Resources

[Our Team](#)

[HQIC Portal Instructions](#)

[Alliant HQIC Fact Sheet](#)

[Joining a Group in NHSN and Accepting the Conferring Rights – Hospitals](#)

Alliant HQIC Portal

- Access to Alliant HQIC portal available to enrolled hospital staff
- Must be listed as a contact with your HQIC coach to gain access
- Portal link and access instructions on the Alliant [website](#)
 - a) Access portal via website [here](#)
 - b) Portal self-registration instructions on website [here](#)

Portal Features

Home/HQIC Discussions

Home-Listing of Discussions
HQIC Discussions- Start a new Discussion

My Assessments

My Assessments- Assessment History

Reports

Reports-Data Measurements



Search...

SEARCH



MY ASSESSMENTS

REPORTS

HQIC DISCUSSIONS

WELCOME!

The Alliant Portal is a web-based application for NQIIC, HQIC AND ESRD networks. The Alliant Portal was created as a convenient way for partners to share data, access quality improvement resources, share resources with industry peers and communicate with Alliant representatives.

Home Page - Followed Discussions

Home MY ASSESSMENTS REPORTS HQIC DISCUSSIONS

WELCOME!

The Alliant Portal is a web-based application for NQIC, HQIC AND ESRD networks. The Alliant Portal was created as a convenient way for partners to share data, access quality improvement resources, share resources with industry peers and communicate with Alliant representatives.

Sort by: Most Recent Activity

Search this feed..

Portal Tester (Alliant Quality) asked a question.
May 24, 2021 at 9:49 AM

Looking to network with a large hospital using Cerner to identify opportunities with ADE, specifically around safety alerts.

Please let me know if you have best practices you can share.

OTHER

Like Answer Share

4 views

Write an answer

My Assessments

Details gathered on monthly sharing calls:

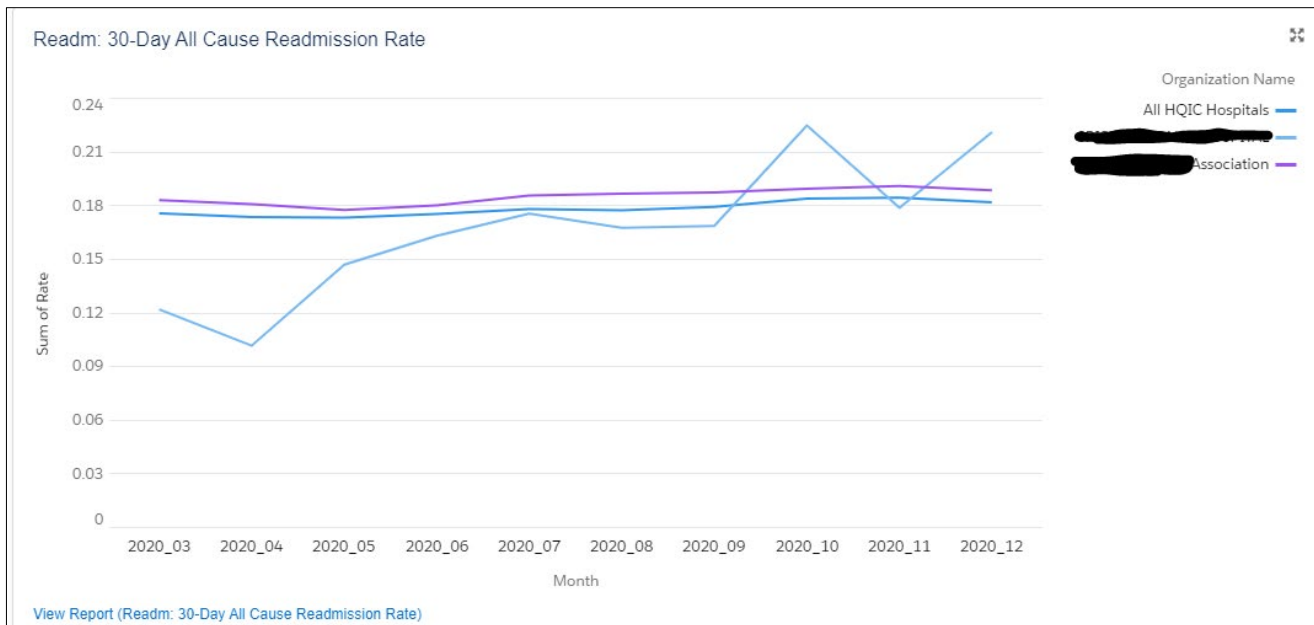
- Goals
- Updates of focused outcome measures
- COVID-19
- PFE
- Health equity
- Leadership contributions

DETAILS	RELATED
Organization [REDACTED]	Hospital Performs Surgery?
Date of Interaction ⓘ [REDACTED]	Key Hospital Contacts Updated in SF? ⓘ No
State Georgia	Attendee ⓘ [REDACTED]
Assessment Type Initial Assessment	Additional Attendee ⓘ [REDACTED]
HQIC Assessment # Assessment - [REDACTED]	Additional Attendee ⓘ
	Additional Attendee ⓘ
▼ Hospital Quality and Patient Safety Goals	
Hospital Goal 1 ⓘ Falls Prevention	Hospital Goal 3 ⓘ Responds to critical lab values
Hospital Goal 2 ⓘ Medication Reconciliation	Hospital Goal 4 ⓘ Suicide National Patient Safety Goals -- Joint Commission
▼ Outcome Measure 1	
Outcome Measure ADE - Opioids & Stewardship	30-Day Action Plan ⓘ
Current Data ⓘ 89.00	Value Provided ⓘ
Strategies for Success ⓘ not an issue for [REDACTED] this time and not currently working on any interventions	Stewardship Program Components ⓘ The state has a database for prescriptions filled for narcotic and using that to check before the ED patients leave with an Rx
Common Challenges and Lessons Learned	Willing to Share Success Story?

Reports

View of measurement data for each patient harm area

- Rolling three-month average
- Comparison to all Alliant-enrolled HQIC hospitals
- Comparison to all hospitals enrolled in your HQIC group



HQIC Discussions

ADE - OPIOIDS & STEWARDSHIP

DISCUSSIONS

Sort by:

Top Questions

This view

Posting to: ADE - Opioids & Stewardship

* Question (Enter up to 255 characters)

What would you like to know?

Details

If you have more to say, add details here...

B **I** **U** **I***

Cancel Ask

5

FOLLOWERS

Click here
to ask a
question

JOIN THE DISCUSSION

FOLLOW

Click here to
follow the
discussion and
have it display
on your home
page

Looking Ahead

- Connect every six months for a Quality Leaders Summit
- One hour virtual call
- Next Call:
 - Jan 11, 2022, at 3 p.m. ET
- Complete post-event survey to submit any agenda items

Questions?



Email us at HospitalQuality@AlliantQuality.org

Appendix

CMS Fact Sheet

Hospital Quality Improvement Contractors (HQICs) | Your Quality Improvement Leaders for Acute Care

The Centers for Medicare & Medicaid Services (CMS) Quality Improvement Organization (QIO) Program is one of the largest federal programs dedicated to improving the quality of health care at the community level. Hospital Quality Improvement Contractors (HQICs) are strategic partners of the QIO Program that support this mission within hospital settings. Their initiatives are designed to improve health care quality, access, value and equity for people with Medicare.

Health care quality is the overarching goal. The QIO Program and HQICs connect and convene the right people to help solve the nation's most pressing health care challenges, one community at a time.

What are HQICs?

Data-driven. It's the data that help hospitals measure progress toward quality improvement (QI) gains. Hundreds of thousands of patients and families benefit from CMS-supported QI projects that make today's hospital stays safer and improve the quality of hospital care.

Dynamic and collaborative. HQICs partner with small, rural and critical access hospitals and facilities that care for vulnerable and underserved patients. Their quality improvement consulting and expertise – offered at no cost to the hospitals – help hospital leaders and clinical teams develop local QI projects designed to:

- Reduce opioid misuse and adverse drug events.
- Increase patient safety with a focus on preventing hospital-acquired infections.
- Refine care coordination processes to reduce unplanned admissions.

HQICs also share their QI resources to assist hospitals with pandemic responses and emergency preparedness.

 Hospitals in 49 States and 5 Territories

 9 Quality Improvement Partners

 4 Years

Local.

- Provide no-cost quality improvement consulting to help leadership teams understand and implement Medicare and other federal health care guidelines.
- Engage with hospital leaders and stakeholders to help tailor national QI priorities to local conditions.
- Support health equity through patient and family engagement.
- Coordinate goal setting, communication, QI resources and crisis response by facilitating partnerships with community, state and local organizations.

Measurable.

- Help gather, analyze and interpret health care data to inform decisions that impact patients, families, partners and communities.
- Visualize data to help hospitals track progress toward local and national quality goals.
- Demonstrate how hospital processes can evolve in response to real-time data.

Sustainable.

- Create and spread learning opportunities for today's evidence-based best practices.
- Develop peer and community networks for learning, collaboration and sharing.
- Teach and coach QI processes and techniques for lasting change.

To Learn More

The four-year HQIC program will remain active through October 2024. Please visit [QIOProgram.org](https://www.cms.gov/medicare/quality-improvement-and-innovation/qio) to learn more about HQIC partners and QI initiatives.



2252W/Issue/018-038-04/21/20

Alliant HQIC Fact Sheet



MAKING HEALTH CARE BETTER

Alliant Quality - A Network of Quality Improvement and Innovation Contractor (NQIC) with Demonstrated Success in Recruiting, Engaging and Improving Provider Performance



As the quality improvement services group of Alliant Health Solutions, Alliant Quality is a successful CMS contractor with a national footprint serving public and private customers in 12 states. Alliant Quality successfully manages work and effectively meets clients' quality improvement needs by:

- Operating as a clinically led and data-driven enterprise
- Being an experienced CMS contractor
- Demonstrating value across multiple clinical settings
- Providing customer service orientations
- Having prior positive work with Hospital Improvement and Innovation Networks (HINs) and hospitals

Alliant Quality Experience

Alliant Quality has demonstrated long-term success providing hospitals with technical assistance for quality reporting and measure improvement. Our partnerships with Hospital Quality Improvement Contractors (HQICs) and hospitals have provided essential value-added experience such as:

- Establishing long-term relationships with providers that impact HQIC measures, such as community partners/long-term care facilities for readmissions
- Proven return on investment relative to time, resources and budget
- Improvement rates relative to the specific aims
- Implemented processes that impact short- and long-term efficiency goals



MEDICATION SAFETY

- Decrease opioid prescribing
- Decrease opioid adverse events



PATIENT SAFETY

- Reduce all cause harm
- Reduce adverse drug events
- Reduce avoidable readmissions
- Reduce incidence of C. Diff



CARE TRANSITIONS

- Reduce hospital admissions
- Reduce hospital readmissions
- Reduce emergency department visits

With decades of experience and access to hundreds of clinical specialists, Alliant Quality's company size allows us to provide personalized customer service and adapt to customer needs—all while putting patients first. We work collaboratively and combine strong data analytics with our clinical specialists to give context to the data while eliminating silos typically found on health care data teams. Alliant Quality helps make health care better by providing services that make health care safer and more effective.

For more information on how Alliant Quality can assist your team, please contact hospitalquality@alliantquality.org.
WWW.ALLIANTQUALITY.ORG

The logo features a stylized graphic of three wavy lines in a gold color to the left of the word "ALLIANT" in a large, black, serif font. Below "ALLIANT" is the word "QUALITY" in a smaller, grey, serif font.

ALLIANT QUALITY



@AlliantQualityOrg



Alliant Quality



@AlliantQuality



Alliant Quality

This material was prepared by Alliant Quality, the quality improvement group of Alliant Health Solutions (AHS), the Hospital Quality Improvement Contractor (HQIC) under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy. Publication No. AHSHQIC-TO3H-20-336