

MetaStar's Quality Initiatives for 2003-2006

by Jay A. Gold, MD, JD, MPH, and Dennis Spurlin, CPHQ

MetaStar began its latest contract with the Centers for Medicare & Medicaid Services (CMS) in February. In addition to continuing its work with practitioners in the inpatient and outpatient settings, MetaStar also will undertake improvement projects with Wisconsin nursing homes and home health agencies over the next three years. CMS has chosen the topics and settings for the new contract based on their importance to Medicare beneficiaries, the strength of the evidence supporting the recommendations, data showing that the recommendations are not universally followed despite the strong evidence, and the feasibility of measuring and improving quality.

Based on its mission, MetaStar provides quality improvement consultation to health care professionals, hospitals and physician practices. This includes providing widely-accepted quality indicators and data collection instruments, analysis and feedback of national- and state-level data, effective quality improvement strategies and expertise, pre-tested educational materials for providers and patients, a forum for collabora-

tion among physicians, providers, payers, and others to improve care and increase the value of health care expenditures, and custom assistance on local quality improvement activities.

The hospital-based initiatives and quality measures include the following:

Acute Myocardial Infarction (AMI)

- Aspirin within 24 hours of arrival
- Aspirin at discharge
- Ace inhibitors for left ventricular systolic dysfunction
- Smoking cessation counseling
- Beta blocker at discharge
- Beta blocker within 24 hours of arrival

Heart Failure

- Assessment of left ventricular ejection fraction
- Ace inhibitors for left ventricular systolic dysfunction
- Smoking cessation counseling

Pneumonia

- Timely antibiotic administration
- Initial antibiotic therapy consistent with current guidelines
- Blood cultures during the first 24 hours
- Blood cultures prior to the initial antibiotic dose
- Smoking cessation counseling
- Oxygenation assessment
- Influenza and pneumococcal vaccination

Surgical Infection Prevention

- Antibiotics within one hour before surgical incision

- Prophylactic antibiotics consistent with current recommendations
- Discontinuation of prophylactic antibiotics within 24 hours after surgery

The physician office initiatives and quality measures include the following:

Adult Immunization

- Influenza and pneumococcal vaccination

Breast Cancer

- Biennial mammograms for women

Diabetes

- Annual A1c monitoring
- Biennial lipid profile
- Biennial eye exam

Other initiatives include the following:

Reducing Disparities for Underserved Beneficiaries

- Closing the gap in lipid testing for diabetics between African Americans and non-African Americans in Southeastern Wisconsin.

Nursing Homes

- Acute pain control
- Chronic pain control
- Pressure ulcer prevention and treatment

Home Health Agencies

- A number of quality measures, to be announced soon

Future "MetaStar Matters" columns will discuss specific strategies and programs developed by MetaStar and its collaborators to address the quality initiatives.

Authors are with MetaStar. Doctor Gold is Senior Vice President and Principal Clinical Coordinator; Spurlin is a Communications Specialist. This material was prepared by Meta-Star, Inc., the Quality Improvement Organization for Wisconsin, under a contract with the Centers for Medicare & Medicaid Services, (CMS). The contents presented do not necessarily reflect CMS policy.



The mission of the *Wisconsin Medical Journal* is to provide a vehicle for professional communication and continuing education of Wisconsin physicians.

The *WMJ* (ISSN 1098-1861) is the official publication of the Wisconsin Medical Society and is devoted to the interests of the medical profession and health care in Wisconsin. The managing editor is responsible for overseeing the production, business operation and contents of *WMJ*. The editorial board, chaired by the medical editor, solicits and peer reviews all scientific articles; it does not screen public health, socioeconomic or organizational articles. Although letters to the editor are reviewed by the medical editor, all signed expressions of opinion belong to the author(s) for which neither the *WMJ* nor the Society take responsibility. The *WMJ* is indexed in Index Medicus, Hospital Literature Index and Cambridge Scientific Abstracts.

For reprints of this article contact the *WMJ* Managing Editor at 866.442.3800 or e-mail wmj@wismed.org.

© 2003 Wisconsin Medical Society