CMS and Indian Health Service expand collaboration to improve health care in hospitals

Efforts benefit 2.2 million American Indians and Alaska Natives eligible for IHS services

The Centers for Medicare & Medicaid Services (CMS) now includes Indian Health Service (IHS) Hospitals in the nationwide Hospital Improvement and Innovation Networks (HIINs) contract for public and private sector hospitals to reduce adverse events by 20 percent and hospital readmissions by 12 percent. This commitment to American Indian and Alaska Native (AI/AN) health care is part of ongoing CMS and IHS work to address issues in hospitals before they can affect patients.

CMS recently awarded $347 million to 16 national, regional, or state hospital associations and health system organizations to serve as HIINs. This announcement follows a recent (October 4, 2016) declaration of a Quality Innovation Network-Quality Improvement Organization (QIN-QIO) to support best health care practices and other operational improvements in IHS federal government operated hospitals. Both programs work in coordination and support of the Department of Health and Human Service (HHS) Executive Council on Quality Care. The IHS hospital system includes 25 Medicare certified hospitals that will receive assistance from the Premier HIIN to reduce preventable hospital-acquired conditions and readmissions.

The HIIN contracts awarded build upon collective momentum of the Hospital Engagement Networks (HENs) and QIN-QIOs to reduce adverse events and readmissions. IHS previously participated in the CMS-funded HENs. The HIINs represent the next phase of the Partnership for Patients initiative, one of the first models established by the CMS Innovation Center in 2011 to be tested under the authority of the Social Security Act, and which aims to reduce program expenditures while preserving or enhancing quality of care. Since the PfP launch, and in collaboration with the HENs and other public and private stakeholders, many U.S. hospitals have delivered unprecedented national reductions in patient harm. For example, from 2010–2014, 17
percent of hospital-acquired conditions (HACs) such as adverse drug events, healthcare-associated infections, and pressure ulcers have been prevented in hospital patients. Reducing these HACs has saved an estimated 87,000 lives and nearly $20 billion in health care costs.

“We look forward to continuing the next phase of working collaboratively in each Medicare-certified IHS hospital on harm reduction and system level improvement,” said Patrick Conway, M.D. CMS’ acting principal deputy administrator and chief medical officer. “This offers a great opportunity to create significant positive changes in health outcomes of American Indian and Alaska Native communities serviced by these hospitals.”

“We are so pleased to continue collaborating with CMS to build strong hospitals in which patients are protected from getting injured and receive high quality care so they can heal without complication,” said IHS principal deputy director Mary L. Smith. “IHS participation in the Network will benefit our American Indian and Alaska Native patients because this further strengthens IHS ongoing efforts to provide the highest quality care.”

Through 2019, HIINs will work to achieve a 20 percent decrease in overall patient harm and a 12 percent reduction in 30-day hospital readmissions as a population-based measure (readmissions per 1,000 people) from the 2014 baseline. Health equity for people with Medicare benefits will be central to the HIIN efforts.

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**About the Indian Health Service:** The IHS, an agency in the U.S. Department of Health and Human Services, provides a comprehensive health service delivery system for approximately 2.2 million American Indians and Alaska Natives. For more information, visit http://www.ihs.gov. Follow IHS on Facebook.