Healthier Every Day: Six Stories
Every day, across the country, Qualis Health is helping to make better healthcare a reality for millions of Americans. As one of the nation’s leading quality improvement organizations, we work closely with our public and private partners to achieve six aims set forth by the Institute of Medicine for 21st century healthcare: safety, effective care, patient-centered care, timeliness, efficiency and equity. At a time in America’s healthcare when there are major problems to solve, we have important success stories to tell.
ABOUT QUALIS HEALTH - Since 1974, Qualis Health has played a leading role in improving the quality of healthcare delivery and health outcomes for individuals and populations across the nation. We are an independent, nonprofit quality improvement organization dedicated to ensuring that patients get the right care at the right time in the right setting. Our impartial point of view and patient-centered focus allow us to draw on the best thinking in quality improvement and the latest evidence-based medicine to serve our partners and their patients.

QUALIS HEALTH SERVICES

<table>
<thead>
<tr>
<th>Service</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Utilization Management</td>
<td>We help our clients to be responsible stewards of healthcare resources by avoiding overuse, misuse and underuse of health services. Utilization management assures that patients receive the right care, in the right setting, at the right time.</td>
</tr>
<tr>
<td>Care Coordination</td>
<td>Our case managers guide injured and ill patients as they navigate through a complex healthcare system to obtain high quality, patient-centered, cost-effective care. Care coordination is a systematic approach that includes careful assessment of an ill or injured person's unique healthcare needs, individualized care planning, removal of barriers to the receipt of appropriate medical and social services and continuous monitoring to assure the best possible outcomes.</td>
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<tr>
<td>Clinical Quality Improvement</td>
<td>Our experts assist physicians, nurses, hospitals, nursing homes, home health agencies and other healthcare leaders and providers to achieve high performance in healthcare delivery. We apply our expertise by measuring the safety and quality of care, implementing evidence-based approaches to healthcare, improving reliability of care delivery systems and assuring that the needs and priorities of patients remain front and center at all times.</td>
</tr>
<tr>
<td>Health Information Technology and Operations Improvement Consulting</td>
<td>We provide consulting services to assist providers, healthcare facilities, government agencies and others to leverage health information technology to improve the effectiveness and efficiency of business processes and service delivery. Our consultants emphasize the design of Lean and efficient workflow and processes. We help clients plan and implement technology solutions that align with those processes and enhance our clients’ ability to provide services and comply with regulatory requirements.</td>
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</tbody>
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MISSION
Generate, apply and disseminate knowledge to improve the quality of healthcare delivery and health outcomes.

VISION
Be recognized for leadership, innovation and excellence in improving the health of individuals and populations.

CORE VALUES
Integrity and Professionalism
Collaboration
Stewardship
SAFETY · Together with our partners, Qualis Health puts patient safety first. This means making sure that patients are not harmed by the care that is intended to help them. Today we know that the major improvements in patient safety are not solo acts; they are systemic changes that build safety deeply and widely into the culture of care.

Reducing Pressure Ulcers by Improving Teamwork and Transitions

Every year, an estimated two million Americans suffer from pressure ulcers, commonly known as bedsores. Typically caused by some combination of immobility, poor nutrition, dehydration and incontinence, pressure ulcers are often painful, debilitating and difficult to treat. If they become infected, the complications can be fatal.

In 2003, the Centers for Medicare & Medicaid Services (CMS) chose Qualis Health to lead a collaborative quality improvement project to prevent pressure ulcers in 52 nursing homes across 39 states. In 2007, the Journal of the American Geriatrics Society published the results from this work: by applying a number of quality improvement techniques, this collaborative effort reduced the incidence of the most serious pressure ulcers—Stages III and IV—by 69 percent in one year.

We have shared the knowledge gained through this national project in our work as Medicare’s Quality Improvement Organization (QIO) for Idaho and Washington State. In 2007, by applying best practices in prevention, detection and care, nursing home staff reduced the prevalence of all pressure ulcers among high-risk residents—a reduction of 13 percent in Washington and 8 percent in Idaho compared to 2004.¹

Often, patients arrive at nursing homes with existing pressure ulcers or conditions that make them especially vulnerable. In 2007, we began partnering with experts from nursing homes, home health providers and hospitals to create Communities of Practice around pressure ulcer prevention and care. These communities create a multi-disciplinary approach to skin health, conduct case reviews of shared patients with pressure ulcers and identify opportunities to coordinate their efforts, with special attention to patients when they transition from one care setting to another.

Because many factors play a role in causing pressure ulcers, it takes a multi-disciplinary, multi-setting approach to prevent them. We are building a knowledge base on prevention that shares our experience on a national level. And we continue to help Communities of Practice share best practices, bridge transitional gaps in care and ensure that attentive care is consistent wherever a patient goes.

¹ Further detail about this work, including data sources and calculation methods, is provided at www.qualishealth.org/QIOimpact.
CREATING A CULTURE OF PATIENT SAFETY IN IDAHO HOSPITALS

In 2006, Qualis Health engaged 17 of Idaho’s critical access hospitals in a transformative journey to create a culture of patient safety. Through 18 months of intensive learning sessions and implementation, the Idaho Patient Safety/Best Practices Rural Organizational Safety Culture Collaborative worked to create a cultural environment that is free from blame and promotes evidence-based best practices in clinical care. Under Medicare’s Quality Improvement Organization (QIO) contract, Qualis Health initiated the Collaborative and brought national experts to speak to these mostly rural participants, who lack easy access to such resources. According to follow-up surveys of front-line staff, participating hospitals showed improvement in all 12 identified dimensions of patient safety—from the overall perception of safety and the frequency of event reporting to communication openness and teamwork across hospital units.  

Further detail about this work, including data sources and calculation methods, is provided at www.qualishealth.org/QIOimpact.

THE SIX HEALTH CARE IMPROVEMENT AIMS: SAFETY • EFFECTIVE CARE • PATIENT-CENTERED CARE • TIMELINESS • EFFICIENCY • EQUITY
The six health care improvement aims:

- Safety
- Effective Care
- Patient-Centered Care
- Timeliness
- Efficiency
- Equity

Winning collaborations in immunization

Preventive care is effective care. In 2007, Qualis Health was the proud recipient of the Collaborator Award from the Immunization Action Coalition of Washington (IACW). The IACW is a public/private partnership dedicated to ensuring that children and adults have access to immunization and increasing public awareness about its importance in preventing disability, disease and death.

IACW recognized Qualis Health for providing extensive in-kind support to adult immunization projects since 2000, including the 2006 Pneumococcal Campaign and the 2004 and 2005 Helping Promote Influenza Immunization Coalition of Washington (IACW). The IACW is a public/private partnership dedicated to ensuring that children and adults have access to immunization and increasing public awareness about its importance in preventing disability, disease and death.

Among Healthcare Workers Toolkits. Most important, such collaborations in immunization are getting results—helping to increase in-hospital pneumonia vaccinations to eligible patients aged 65 and older in the state of Washington from a rate of 45 percent in 2004 to 75 percent in 2007.

Further detail about this work, including data sources and calculation methods, is provided at www.qualishealth.org/QIOimpact.
EFFECTIVE CARE · Every patient deserves the most effective healthcare, drawing on evidence-based medicine that is clinically proven to deliver the safest, most successful outcomes. Through our utilization management services, we help our partners increase the use of the most effective patient care and—just as important—reduce the use of care that is ineffective, or even harmful.

Helping Washington State Injured Workers Obtain Effective Treatment

When injured workers face a serious surgical procedure, how do they know whether it’s the best clinical course of treatment? They may not—unless they have the benefit of objective, evidence-based medicine. Qualis Health brings this perspective to the utilization management services we provide for the 1.9 million workers covered by the Washington Department of Labor & Industries (L&I) through the state workers’ compensation fund.

The impartial, evidence-based clinical review we provide injured workers through L&I’s Workers’ Compensation program is especially important for serious surgeries, such as lumbar fusion, that have a high rate of adverse complications and permanent disability. Some experts estimate that as many as 100,000 Americans undergo unnecessary back surgery each year. According to L&I’s data, 68 percent of all workers with occupationally-related low back pain who undergo lumbar surgery remain off work two years after the surgery. It’s a sobering statistic that underscores the need to proceed with caution—and science—on the patients’ side. Accordingly, L&I maintains specific guidelines to help ensure that any approved lumbar fusions are needed, and are likely to lead to positive outcomes.

During 2007, in our review of 558 lumbar fusion requests, we assisted in helping 90 workers avoid lumbar fusions where likely risks exceeded potential benefits. These decisions were made following the opportunity for each treating provider to discuss the patient’s case with a Qualis Health physician reviewer. This direct exchange between physicians allows for an in-depth clinical presentation of the patient’s medical situation to ensure that no pertinent clinical information has been missed during the review process.

In some cases, these peer-physician discussions result in subsequent approval of lumbar fusions. In other cases, because “lumbar fusions are forever,” treating physicians agree to conduct a more definitive diagnostic procedure or try a more conservative treatment approach. In every case, we create a collaborative relationship that focuses on achieving the best patient outcome. As a nonprofit quality improvement organization known for putting patients first, we are entrusted by public agencies across the country to provide the point of view essential to helping them ensure that patients get the most effective care.
PATIENT-CENTERED CARE · When healthcare is oriented around the unique needs of the patient, it can lead to higher patient satisfaction and better clinical outcomes. Qualis Health takes a patient-centered approach that honors each individual’s culture, social context and values—and empowers patients to play an active role in making decisions about their own care.

Managing the Journey from Homeless Pregnancy to Healthy Family

Healthcare problems don’t happen in isolation. They come with relationships, social issues and often financial problems attached. In much of our case management work, it is important to address the full constellation of influences that affect the patient’s outcome. And when the patient is a pregnant mother, we are concerned with two outcomes.

In 2007, as part of our Medicaid work, we provided case management services for a young homeless woman who was in the first trimester of her pregnancy and had already been hospitalized once with contractions. Her pregnancy was just part of a complex situation: she had a 10-month-old baby, a fragile support system complicated by previous drug addiction, and a history of diabetes that was not being treated at the time.

Working closely with a number of health and social agencies, our case manager established Medicaid insurance coverage for the client. She collaborated with physicians to develop a care plan that included prenatal care for a high-risk pregnancy, along with diabetes treatment and education. She provided emotional support and transportation assistance to ensure that her client kept her medical appointments and followed her care plan. She found the emergency housing critical to a young woman with one child and another on the way. Through the Women, Infants and Children (WIC) Program, she also arranged for the necessary nutrition to support a healthy pregnancy.

Finally, our case manager helped this client make a successful move to a stable living situation with a family member in another state. We assisted her transition to the state’s public health plan and a specialty clinic for high-risk obstetrics. She stabilized her blood sugar, was able to get off insulin, and gave birth to a full-term, healthy baby boy. Most important, in a relatively short period of time, she gained the skills, resources and self-reliance to chart a healthier course for herself and her children. When patients receive care and support centered on their unique needs, healthy outcomes are much more likely to happen—and to last.
MOVING CARE TRANSITIONS TO THE FOREFRONT OF QUALITY IMPROVEMENT

Care transitions—the movement of patients from one care setting to another—are the subject of increasing focus for good reason: it is during these changes in care providers and medical settings that things tend to “fall through the cracks.” Qualis Health plays a leading role in improving the quality of care transitions. Our patient-centered focus includes clinical and consumer education, process improvement, and data tracking and assessment.

Our Chief Operating Officer, Marci Weis, RN, MPH, CCM, is a member of the National Transitions of Care Coalition’s Performance & Metrics workgroup, which brings together leaders and providers to focus on improving care coordination and communication for patients being transferred between levels of care. When care is patient-centered, transitions get the attention they need at a critical juncture in healthcare.

THE SIX HEALTH CARE IMPROVEMENT AIDS: SAFETY · EFFECTIVE CARE · PATIENT-CENTERED CARE · TIMELINESS · EFFICIENCY · EQUITY
PREVENTING SURGICAL INFECTIONS

Studies show that when patients are given antibiotics within an hour before certain types of major surgery, the incidence of post-operative infection decreases dramatically. In our quality improvement work in Idaho and Washington State, we continue to make progress on this important measure. In 2007, antibiotics were provided at precisely the right time for 90 percent of all surgeries performed in Washington hospitals—an 11 percent improvement over 2006. In Idaho, four participating hospitals demonstrated a 37 percent improvement in starting, and an 82 percent improvement in discontinuing, antibiotics at the appropriate time compared to 2005. We continue to help our partners put time on their patients’ side when it comes to the use of antibiotics.

4 Further detail about this work, including data sources and calculation methods, is provided at www.qualishealth.org/QIOimpact.
TIMELINESS • At best, waiting for needed healthcare is stressful and inconvenient. At worst, it can have adverse medical effects. We join our partners in leading practical, results-focused process and system improvements that allow care to be timely—in the best interests of patients and providers.

Raising the Bar on Responsiveness

Patients deserve to know whether a medical treatment or procedure will be covered by their insurer before they have it. Likewise, providers deserve to have confidence that they will be reimbursed for their services. Through our utilization management services, Qualis Health provides our Medicaid and Medicare partners across the country with timely reviews and responses that demonstrate our commitment to customer service.

We are recognized by URAC, formerly known as the Utilization Review Accreditation Commission, for meeting and often exceeding its service standards, including timeliness and processes. Through our advanced care management information system, we can cite the urgency of each review and track it through efficient workflow processes that allow us to exceed the high standards of our URAC accreditation. In Washington, Idaho and Alaska, our iEXCHANGE™ web-based utilization management system enables providers to submit utilization review requests electronically and check the status of a review decision anytime—at their convenience.

In order to ensure that we have the information we need to make a timely review and response, we make provider education a high and ongoing priority. In South Carolina, where our first year of utilization reviews have drawn accolades from stakeholders for quick responses, both clinical and non-clinical staff have played a key role in ensuring that we receive complete information the first time around.

Time is also of the essence in responding to case management referrals from our partners. Often, by the time a provider makes a referral for case management, it comes to us with a sense of urgency. We place high value on responding quickly to these requests in order to meet the needs of our referring providers and their patients.
EFFICIENCY · When a healthcare system is efficient, higher quality can be delivered at lower costs, and more funds can go into the things that directly improve patient outcomes. Our health information technology (HIT) consulting division, Outlook Associates, works with clients to streamline processes, reduce waste and make the most of their valuable time and resources.

Realizing California’s Vision for Mental Healthcare

In 2005, California passed some of the most far-reaching mental health legislation in the country, with funding to improve services and resources. The Mental Health Services Act (MHSA) is a statewide initiative to fund improvements to county mental health services. The MHSA funds services and resources that promote wellness and recovery for adults with severe mental illness and for children and youth with serious emotional disturbances. A portion of the MHSA funds has been set aside for capital facilities and technological needs. Consistent with the aims of MHSA, the state’s Department of Mental Health has a long-term goal to create a statewide health information exchange (HIE) capability—the sharing of electronic healthcare information to support a high-quality, cost-effective continuum of patient care. Qualis Health’s consulting division, Outlook Associates, is helping several California counties plan new information systems to meet MHSA goals.

In Los Angeles County, where the Department of Mental Health serves more than 200,000 people each year, Outlook developed a strategic IT “roadmap” or plan, and is now supporting the implementation of the plan. Working closely with County employees across multiple disciplines, we are addressing the workflow improvements crucial to success.

When fully implemented, Los Angeles County will have a single information system that cost-effectively integrates electronic health records, billing and practice management—facilitating the sharing of information internally and with providers and contractors. In alignment with California’s aims for transforming mental healthcare statewide, the County’s new IT infrastructure will strengthen fiscal accountability and performance management, improve the coordination and continuity of care through improved data collection, retrieval and sharing statewide; and provide new ways to collect and measure patient outcomes.

Our experience with Los Angeles County has given us valuable insight into assisting other counties with meeting the challenges and opportunities of MHSA. Currently, we are also working with San Bernardino County’s Department of Behavioral Health and Santa Clara County’s Department of Mental Health to plan a comprehensive, integrated data system that aligns with California’s vision for transforming mental healthcare services through advanced information technology.
REDDUCING ERRORS, INCREASING EFFICIENCY IN MEDICATION MANAGEMENT

Medication errors are a growing problem in the healthcare delivery system, with adverse outcomes for the patients affected. But information technology can, and should, improve medication accuracy and efficiency at the same time. In 2007, Qualis Health received a grant from Washington State’s Life Sciences Discovery Fund (LSDF) to improve medication management through a novel application of technology.

The project, “Applying Health Information Technology to Improve Medication Management,” is led by Jeff Hummel, MD, MPH, Qualis Health’s medical director for healthcare informatics. It combines information technology that places accurate prescription refill data in the hands of healthcare professionals, together with a workflow enhancement process using Lean process methodology. The goal: to reduce medication errors through better access to real-time patient medication information, and to achieve more efficient clinical workflows.
SAYING YES TO HEALTHCARE COVERAGE WITH WASHINGTON STATE

When Washington residents have been denied individual health insurance by other carriers, the Washington State Health Insurance Pool (WSHIP) steps in to help—and so does Qualis Health.

In 2007, WSHIP selected Qualis Health to provide utilization management, case management, disease management and specialty review services to its more than 3,100 enrollees statewide.

Our integrated, patient-centered care management program focuses on improving quality, collaborating with providers, managing costs and improving satisfaction and value to enrollees. The ultimate goal: to help the State make the most of this important resource for the residents who need it.

With a care management suite of services covering 3.3 million people across Washington State for an array of clients—about 45 percent of the population—we look forward to extending superior care management and innovative programs to WSHIP’s enrollees.

THE SIX HEALTH CARE IMPROVEMENT AIMS: SAFETY · EFFECTIVE CARE · PATIENT-CENTERED CARE · TIMELINESS · EFFICIENCY · EQUITY
EQUITY · High-quality healthcare should be accessible to every American—regardless of race, age, gender, ethnicity, income or geographic location. Qualis Health works closely with our partners to close the immense gap in healthcare quality and access that affects millions of people.

Supporting Alaska’s Plan to “Bring the Kids Home”

Alaska’s vast geographic expanse and remote rural communities are part of its unique appeal. But they make it a challenge to provide equitable access to basic healthcare and mental health services. When Alaska’s own healthcare infrastructure is unable to meet people’s needs, patients must travel out of state for care. This lack of local resources is especially difficult for children with behavioral health problems, who must often leave their families and communities to receive residential care in a distant, unfamiliar place.

In 2004, Alaska’s Department of Social and Health Services launched an initiative to “Bring the Kids Home”—and through our Medicaid Mental Health contract with the state, Qualis Health is supporting its success every step of the way. Our shared goal: to help the hundreds of six- to seventeen-year-olds served in out-of-state Residential Psychiatric Treatment Centers make a smooth transition back to in-state residential or community-based care that fully meets their needs, and to ensure that future use of out-of-state facilities is kept to a minimum. Through our utilization management and care coordination services, we help ensure that children receive the right care in the right setting—within their own communities whenever possible. For those who must travel out of state to receive treatment, we serve as an important bridge back home, overseeing effective discharge planning and follow-through. Qualis Health care coordinators live and work in Alaska to provide the geographic presence and cultural competence essential to equitable care.

The benefits of “bringing the kids home” are clear. When patients have access to the care they need in their own communities, tough transitions are minimized. Parents are able to join in the treatment plans vital to successful outcomes. And Alaska is able to invest funds that have been going out of state into building upon its own local infrastructure so that tomorrow’s kids can receive care closer to home.
Dear Friends,

To capture the essence of Qualis Health in only six stories is a challenge—but it’s a rewarding one. The challenge lies in the fact that the number of compelling stories about our successful efforts to improve health and healthcare delivery seems to grow every day, and selecting from among them is difficult to do. The reward, of course, is in the knowledge that our efforts are improving the lives of an ever-growing number of patients, their families and their healthcare providers.

With the opening of new offices in Nebraska and South Carolina, we have begun to write entirely new chapters as we accept the privilege of supporting care for over one million additional people. And our long-term clients and stakeholders continue to ask us to expand upon the work we have done for them—in some cases, for decades.
As we strive to improve the quality of healthcare delivery and health outcomes, and to advance the six aims for a 21st-century healthcare system, we intend to focus our organizational attention on three goals:

- Promoting efficiency and reliability in care delivery,
- Supporting care coordination and improving care transitions, and
- Leveraging health information technology to improve care.

These goals reflect themes that appear again and again in our work to improve healthcare quality and to assist our clients in being responsible stewards of their healthcare resources.

Our recognition by the Washington State Quality Award program, based on the widely recognized Baldrige framework for performance excellence, reflects the results of our efforts to assure that Qualis Health manages its resources in a thoughtful and effective manner.

We look to the future with great excitement, as a number of significant opportunities are beginning to emerge. For instance, we have just begun our first year of work on an initiative supported by The Commonwealth Fund to assist 50 safety-net clinics in four regions through their transformation into patient-centered medical homes. This groundbreaking initiative, which is expected to extend for five years, encompasses all three of our key organizational goals.

Six stories told. I extend my deepest appreciation to our superb staff for providing the dedication and expertise that makes these stories possible. And thanks to all of our partners and colleagues for helping us make them success stories—and for creating the opportunity to tell more stories of improved healthcare for years to come.

Sincerely,

JONATHAN R. SUGARMAN, MD, MPH
President & CEO
Qualis Health

In May 2007, Qualis Health was the proud recipient of the Washington State Quality Award for performance excellence. The Achievement Level Award was presented by Governor Christine Gregoire, who applauded our leading-edge management practices. The award is based on the national Malcolm Baldrige Criteria for Performance Excellence, which provides a systems perspective for improving organizational performance.
Qualis Health at a Glance

LOCATIONS
Anchorage, Alaska
Tustin, California
Boise, Idaho
Lincoln, Nebraska
Cayce, South Carolina
Seattle, Washington

QUICK FACTS

240
Employees

284
Physician/Practitioner Consultant (P/PC) Network Members

69
Clients Total

44
Government Clients (Federal, State, County, Borough, City)

25
Non-Government Clients

2007-2008 BOARD OF DIRECTORS
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SOME OF QUALIS HEALTH AND OUTLOOK ASSOCIATES’ CLIENTS

Medicare
- Centers for Medicare & Medicaid Services Quality Improvement Organization (QIO) for Washington and Idaho
- National QIO Support Center for Communications
- National QIO Support Center for Performance Improvement

Medicaid
- Alaska Department of Health and Social Services, Division of Healthcare Services
- Idaho Department of Health and Welfare, Division of Medicaid
- Nebraska Department of Health and Human Services, Division of Medicaid and Long Term Care
- South Carolina Department of Health and Human Services, Division of Medicaid
- Washington State Department of Social and Health Services, Health and Recovery Services Administration

Workers’ Compensation
- California Department of Industrial Relations, Division of Workers’ Compensation
- Comprehensive Risk Management
- Washington State Department of Labor and Industries

Other
- Alaska Laborers
- Alaska State Employees Association
- The Commonwealth Fund
- County of Santa Clara, Santa Clara Valley Health and Hospital System
- Idaho Office of Rural Health and Primary Care
- Life Sciences Discovery Fund
- Los Angeles County Department of Mental Health
- San Bernardino County’s Department of Behavioral Health
- San Francisco Health Plan
- Seattle-King County Department of Public Health
- Washington State Health Insurance Pool
- Washington Teamsters Welfare Trust
- Welfare and Pension Administrative Service, Inc.

FINANCIALS

Gross Contract Revenue: Fiscal Year 2007

$24,306,344

- Medicare 39%
- Medicaid 28%
- Other Government 12%
- Non-Government 21%