Peterson Center on Healthcare Announces Three Major Initiatives

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Launched with $200 Million Commitment, Peterson Center on Healthcare Working to Identify, Validate and Scale Innovations that Improve Health Outcomes and Lower Costs

Releases Early Findings from Groundbreaking Study by Stanford Research Team Finding Features Common to High-Performance Primary Care Providers

New Partnerships Announced with Henry J. Kaiser Family Foundation and National Quality Forum

Washington, DC—Today, the Peterson Center on Healthcare, a new organization established by the Peter G. Peterson Foundation, announced three major initiatives to advance the Center’s mission to transform U.S. healthcare into a high-performance system that delivers high-quality care at a lower cost. The Center’s first initiatives include collaborations with Stanford University’s Clinical Excellence Research Center, the Henry J. Kaiser Family Foundation and the National Quality Forum.

The Foundation has launched the Peterson Center on Healthcare with an initial commitment of $200 million. The Center finds and validates innovative healthcare solutions that improve quality of care and lower costs, and then works to accelerate their adoption on a national scale. The Center collaborates with stakeholders across the healthcare system and engages in grant-making, partnerships, and research. Additional partners, initiatives and grants will be announced in the coming months.

“Improving healthcare performance must be one of the nation’s most important priorities,” said Peterson Foundation President and COO Michael A. Peterson. “Today, Americans are forced to endure a healthcare system that delivers health outcomes that are worse than many other nations, yet it is the most expensive in the world. This leaves our citizens in poorer health, reduces incomes, and threatens our future prosperity. We have established this new Center to help drive the adoption of innovations that will improve the quality of care and also lower costs. The research that we announced today proves that high-performance healthcare is not only possible, it already exists in parts of the U.S.”

“There is an urgent need in healthcare to identify solutions to improve quality and lower costs, validate them, and accelerate their adoption nationally,” said Jeffrey Selberg, Executive Director of the Peterson Center on Healthcare. “There are clinicians who already deliver consistently high-quality healthcare at lower costs. America would have one of the world’s highest-performing healthcare systems if we replicated these innovations on a national scale – that’s the mission of our Center.”

The three initiatives announced by the Center today are in the following areas:

Identifying High-Performing Primary Care Practices

The Peterson Center on Healthcare provided a grant to Stanford University’s Clinical Excellence Research Center (CERC) to find and validate exceptionally high-performing primary care practices in the United States. The study of 15,000 U.S. primary care sites examined 11 exemplary primary care practices and uncovered 10 features of these sites that deliver higher-quality care at a substantially lower total annual healthcare cost. Stanford’s research team estimates that spreading and scaling the 10 features could significantly improve the quality of care and lower health spending in the U.S. by as much as $300 billion annually.

This first-of-its-kind study was conducted using 41 widely used quality measures, along with data on total healthcare spending, to gauge performance at more than 15,000 practices with at least two clinicians providing primary care. Analyses showed that fewer than 5 percent of these practices ranked both in the top quartile for quality of care and in the lowest quartile for total healthcare spending (after adjustments to account for the severity of illness among their patients). Independent physicians selected by the research team then visited a sample of these practices, as well as of comparators, to identify features likely to account for the high performance. The study used physicians with performance management experience to conduct the onsite assessments.

The following 10 features can serve as a blueprint for other practices to achieve higher-quality care at lower cost:
1. The practices are 'always on.'
   Patients have a sense that the practice is "always on call" and they can reach the care team quickly, whether the
   practice is open or closed.

2. Physicians adhere to quality guidelines and choose tests and treatments wisely.
   Care teams have systems to ensure patients receive evidence-based care and physicians are mindful of
   benefits, risks and patient preferences when ordering tests and treatments.

3. They treat patient complaints as gold.
   Practices actively solicit patient feedback, good and bad, to improve the patient experience.

4. They in-source, rather than out-source, some needed tests and procedures.
   Care teams do as many tests and procedures – as can be done safely – in-house, often with guidance from
   specialists.

5. They stay close to their patients, even when referring them to specialists.
   Physicians refer to a select group of specialists they trust to act in their patients’ interests, and stay in close
   communication as care decisions are made.

6. They close the loop with patients.
   Practices actively follow up to ensure that patients are seen rapidly after hospitalizations, adhere to medications,
   and see specialists when needed.

7. They maximize the abilities of staff members.
   Support is provided to physicians by a range of staff who are encouraged to perform at the "top of their license."

8. They work in 'hived' workstations.
   Open, 'bullpen-style' environments facilitate physician supervision and communication across clinical teams.

9. They balance compensation.
   Physicians are not paid solely on volume of services or revenue they individually produce.

10. They invest in people.
    Investment in staff is prioritized over space, equipment and technology.

More on the study and its findings can be found here.

"Our findings challenge the belief that excellent primary care can only be provided by large healthcare organizations
that are household names," said Arnold Milstein, MD, Director of Stanford’s Clinical Excellence Research Center. "We
found un-sung physicians who are achieving something extraordinary – much better quality at lower cost. What's most
encouraging is that their distinguishing features are tangible, and transferable on a national scale."

Analyzing the Performance of the U.S. Healthcare System

The Peterson Center on Healthcare also unveiled a partnership with the Henry J. Kaiser Family Foundation
to provide a new digital platform dedicated to analyzing the performance of the U.S. healthcare system. The Peterson-
Kaiser Health System Tracker went live today and provides comprehensive data on how the U.S. healthcare system is
performing on critical quality and cost measures. It provides clear, up-to-date information on trends, drivers and issues
that impact the system. The Tracker will also illustrate how the U.S. is performing relative to other countries, and how
different parts of the system are performing relative to one another.

Improving Data Transparency and Usability

Patients and providers often are not able to make informed decisions about their care because quality and cost
information is not accessible or not reliable. The Peterson Center on Healthcare is collaborating with the National
Quality Forum to convene leaders from both the public and private sectors to identify specific actions that can be
taken to make data and analytics more available to support systems improvement in healthcare. The results from
these sessions will inform strategies to improve data transparency and usability and disseminate best practices on
health data.

Advisory Board

The Peterson Center on Healthcare’s Advisory Board provides key advice and guidance on the Center’s mission,
strategies and initiatives. The Advisory Board members have vast experience in U.S. healthcare, offer a diversity of
perspectives and viewpoints, and represent a range of key healthcare stakeholder groups, including consumers,
providers, payers, academia, government, business and philanthropy:

- Harvey V. Fineberg, MD, PhD, Chairman of the Advisory Board, Peterson Center on Healthcare
- Drew Altman, PhD, President and CEO, Henry J. Kaiser Family Foundation
- Joseph Antos, PhD, Wilson H. Taylor Scholar in Health Care and Retirement Policy, American Enterprise
  Institute
- Stuart Butler, PhD, Senior Fellow, Economic Studies, Brookings Institution
- Philip Bredesen, Jr., Former Governor of Tennessee
- Delos M. Cosgrove, PhD, President and CEO, The Cleveland Clinic
- Dan Crippen, PhD, Executive Director, National Governors Association
- Helen Darling, MA, Strategic Advisor, Former President and CEO, National Business Group on Health
- Ezekiel Emanuel, MD, Vice Provost for Global Initiatives, Chair of Medical Ethics and Health Policy, Diane v. S.
  Levy and Robert M. Levy University Professor, University of Pennsylvania
Bill Gates has served as a member of the Center’s Advisory Board since its inception in 2012. In addition to the time and effort he has committed, Mr. Gates has also made an initial personal contribution of $1 million to the Center, as a symbol of his support for and strategic partnership with the Center and its mission.

A complete media kit for the launch of the Peterson Center on Healthcare is available here. For more information about the Peterson Center on Healthcare visit www.petersonhealthcare.org.

**About the Peterson Center on Healthcare**

The Peterson Center on Healthcare is a non-profit organization dedicated to making higher quality, more affordable healthcare a reality for all Americans. The organization is working to transform U.S. healthcare into a high-performance system by finding innovative solutions that improve quality and lower costs, and accelerating their adoption on a national scale. Established by the Peter G. Peterson Foundation, the Center collaborates with stakeholders across the healthcare system and engages in grant-making, partnerships, and research.