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The Kansas City Quality Improvement Consortium (KCQIC) One of 14 Programs Selected for \$300 Million Nationwide Effort to Dramatically Improve Quality of U.S. Health Care

Initiative Puts Kansas City at Forefront of Health Quality Reform Movement

New Report Shows How Kansas City Compares to Nation on Health Measures

Kansas City, Mo. – Against the backdrop of a new national report highlighting dangerous deficiencies in the quality of U.S. health care, the Robert Wood Johnson Foundation (RWJF) today announced a major new investment in The Kansas City Quality Improvement Consortium (KCQIC) and 13 other community-based programs around the country as part of a \$300 million initiative to spearhead health-quality reforms through regional collaboratives.

Known as *Aligning Forces for Quality*, RWJF's initiative is the largest effort of its kind ever undertaken by a U.S. philanthropy. An unprecedented commitment of resources, expertise and training, it brings together patients, health care providers and payers to turn proven practices for improving quality into real results. It will lift the overall quality of health care, reduce racial disparities and provide models for national reform.

“Across America, there are serious gaps between the health care that people should receive and the care they actually receive,” said Risa Lavizzo-Mourey, M.D., M.B.A., president and CEO of the Robert Wood Johnson Foundation. “Despite having the most expensive health care system in the world, patients are subject to too many mistakes, too much miscommunication and too much inequity.”

The Kansas City Quality Improvement Consortium was selected for the initiative in a competitive process to find the states and communities best positioned to make fundamental and cutting-edge changes to rebuild their health care systems. In addition to providing expertise, technical assistance and training from national experts, RWJF will provide KCQIC with more than \$1 million over three years and access to additional grants for specific projects.

“Everyone in the health care system wants to deliver high-quality care, but the fragmented nature of our health care markets and delivery systems often prevents key players from working together toward that common goal,” said Catherine Davis Ph.D., director UAW-Ford Community Health Care Initiative & executive director, KCQIC. “We are excited to be

selected for this initiative, so we can bring all the parties together – those who get care, give care and pay for care – to drive real improvements in the Greater Kansas City area.”

New research commissioned for the *Aligning Forces for Quality* initiative shows that the quality of health care can vary dramatically in the United States, depending on where people live and their race.

The Dartmouth Institute for Health Policy and Clinical Practice’s “Dartmouth Atlas Project,” one of the nation’s leading authorities on how health care is delivered in America, conducted the report. It shows that in many places, people do not receive the treatment they should get to help them stay healthy or effectively manage their chronic diseases. Examples include women getting recommended mammography tests or patients with diabetes getting essential blood tests.

Most strikingly, researchers found significant differences by race and by region in whether patients lost a leg to amputation, a complication of peripheral vascular disease and diabetes.

African Americans lost legs to amputations at a rate nearly five times that of whites – 4.17 per 1,000 African-American Medicare beneficiaries, compared to 0.88 per 1,000 white Medicare beneficiaries. In Louisiana, the state with the highest rate of amputations, 1.66 of every 1,000 beneficiaries lost a leg to amputation in 2003–2005, compared to the national average of 1.14. Utah fared best – 0.50 per 1,000 beneficiaries.

“These variations are demonstrable evidence of the unacceptably uneven nature of health care and health disparities in America,” said Elliott Fisher, M.D., M.P.H., director of the Center for Health Policy Research at Dartmouth and one of the report’s co-authors. “We must close these gaps and lift the quality of care for everyone.”

The report reveals opportunities to improve the quality of care locally. In Kansas City, one in three women insured by Medicare are not getting recommended mammograms, and one in six patients with diabetes are not getting crucial blood tests. The rate of amputations due to complications from peripheral vascular disease and diabetes is well below the national average, but the amputation rate is far higher among African Americans than among whites.

In addition to Kansas City *Aligning Forces for Quality* will concentrate its resources in 13 other states and communities across the country, including: Cincinnati, Ohio; Cleveland, Ohio; Detroit, Mich.; Humboldt County, Calif.; Maine; Memphis, Tenn.; Minnesota; Seattle, Wash.; South Central Pennsylvania; Western Michigan; Western New York; Willamette Valley, Ore.; and Wisconsin.

“We know that given today’s complicated health care system, it is hard to believe that anything can actually change,” said Bruce Siegel, M.D., M.P.H., research professor at the Department of Health Policy at The George Washington University School of Public Health and Health Services and the newly named director of the *Aligning Forces for Quality* national program office. “But we are confident that this effort will work in communities if we have everyone’s help.”

Aligning Forces for Quality was originally launched by RWJF in 2006. In the first phase, the communities began efforts to improve health care for patients with chronic illness in outpatient settings, such as doctors' offices and clinics. With this expansion, *Aligning Forces for Quality* community teams will now strive to improve care for all patients across all settings by:

- Helping physicians improve the quality of care for patients;
- Giving people information that helps them be better partners with their doctors in managing their own health and make informed choices about their health care;
- Improving care inside hospitals, with a special focus on the central role that nursing plays; and
- Reducing inequality in care for patients of different races and ethnicities.

RWJF has for years worked to develop strategies and tools to improve health care quality. These efforts include funding for the development of quality measures, early pay-for-performance experiments, a new model for providing chronic care and programs to improve cardiac care, nursing and eliminate racial disparities or to target specific diseases such as asthma, diabetes and depression. *Aligning Forces for Quality* will bring the proven practices developed in these and other efforts to bear in the 14 communities.

With the expansion of its *Aligning Forces for Quality* initiative, the Foundation will also make available new content on the Quality/Equality section of its main web site, www.rwjf.org. The Quality/Equality Portfolio section of the site features an expansive library of new interventions, tools, resources and related videos to help providers and others improve the quality of care in their communities. These "Promising Practices" have been developed based on the findings and lessons learned from RWJF-supported programs to improve health care in a variety of settings.

See today's report and find more information about *Aligning Forces for Quality* at www.rwjf.org/qualityequality.

The Robert Wood Johnson Foundation focuses on the pressing health and health care issues facing our country. As the nation's largest philanthropy devoted exclusively to improving the health and health care of all Americans, the Foundation works with a diverse group of organizations and individuals to identify solutions and achieve comprehensive, meaningful and timely change. For more than 35 years, the Foundation has brought experience, commitment, and a rigorous, balanced approach to the problems that affect the health and health care of those it serves. By helping Americans lead healthier lives and get the care they need, the Foundation expects to make a difference in our lifetime.

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