

2009: A Year of Policy Impact

Dear NEHI Members and Friends:

Last year was memorable for the effort toward national health care reform - and it was a memorable year for NEHI as well. We made significant contributions to the national policy dialogue at this crucial time.

As we start the new year, I'd like to take this opportunity to review the policy implications of NEHI's 2009 programs, made possible by your valuable support.

Best wishes for a happy and healthy new year!
Wendy Everett
President



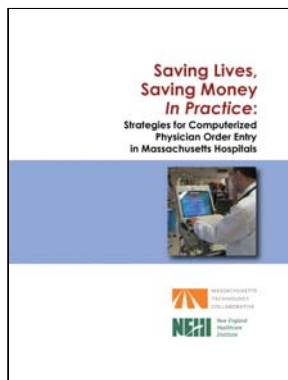
Safeguarding Innovation in Health Care

The NEHI white paper, [Balancing Act: Comparative Effectiveness Research and Innovation in U.S. Health Care](#), served as a backdrop for our April roundtable in Washington, DC with key federal policymakers. Its guiding principles were subsequently reflected in the CER policy directives issued to Congress by the Institute of Medicine (IOM) and the Federal Coordinating Council. NEHI Executive Director Valerie Fleishman also presented the findings of the white paper to the National Comparative Effectiveness Summit in Washington, DC. Next year, we will convene national experts and policymakers to explore how evidence on clinical effectiveness can best be disseminated to improve health and health care. [Click here](#) for photos from the CER roundtable.



Improving Patient Safety

The policy impact of our [groundbreaking initiative](#) with the Massachusetts Technology Collaborative to enhance patient safety through the adoption of Computerized Physician Order Entry (CPOE) extended nationally this year. In February, President Obama signed the American Recovery and Reinvestment Act providing Medicare incentives for hospitals for the "meaningful adoption" of "qualified electronic health records." Those are defined as records that include the ability to provide clinical decision support and to support physician order entry – the key elements of CPOE identified in NEHI's research. These incentives are a critical first step toward expanding the benefits of CPOE nationwide.



Fostering Patient Medication Adherence



In July, NEHI convened a roundtable of national experts on patient medication adherence, a problem that costs up to \$290 billion a year. The issue brief produced for the roundtable, [Thinking Outside the Pillbox: A System-](#)

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UPCOMING EVENTS

Health Reform's New Frontier: Balancing Cost, Value and Innovation
February 23

Annual Member Meeting
April 29

For more info or to RSVP, visit [NEHI Events](#).

EVENT PHOTOS

Innovators in Health Awards Forum and Reception
October 15, 2009



[View all](#)

[Click here](#) to nominate the 2010 Innovators in Health Award honorees.

QUOTE OF NOTE

[wide Approach to Improving Patient Medication Adherence for Chronic Disease](#), was delivered to policymakers and received significant national media attention, including [The Wall Street Journal](#), [The Boston Globe](#), [WBUR](#), [Modern Healthcare](#) and an [Associated Press article](#) that was picked up nationally. [Click here](#) for photos from the medication adherence roundtable.

Redesigning Primary Care

With support from the Josiah Macy, Jr. Foundation, we published [Remaking Primary Care: From Crisis to Opportunity](#) in April. We also received a grant from the Robert Wood Johnson Foundation to convene a first-of-its-kind summit of medical and nursing school deans to examine the role of collaborative education in supporting primary care teams of the future. The session was designed to improve understanding of the benefits of and barriers to collaborative education and to identify tactical approaches for spreading collaborative education to institutions around the country. The session generated a set of consensus principles that make the case for collaborative education as a cornerstone of the redesign of primary care. A report outlining those principles has been distributed to national leaders in the health professions education community. [Click here](#) for photos from the primary care summit.



"The New England Healthcare Institute estimates that overall costs of people not following [medication] directions is as much as \$290 billion per year."

— *Sen. Kay Hagan, debating health reform on the floor of the US Senate.*

Advancing Tele-Medicine



With the prevalence and costs of chronic disease continuing to spiral, NEHI focused its health IT work on identifying the most [promising telemedicine technologies](#) for managing chronic illnesses. Demonstration projects will now be conducted to examine the effectiveness of a technology known as [Home Telehealth](#), which enables patients to take an active role in managing their own chronic diseases.

Tele-Intensive Care Units

In partnership with the Massachusetts Technology Collaborative, NEHI is nearing a conclusion to our initiative testing the potential of remote monitoring technology to improve the quality and lower the costs of intensive care in U.S. hospitals. Data from our demonstration project with the UMass Memorial Medical Center and affiliated community hospitals are being finalized, with initial findings indicating that tele-ICUs can substantially improve adherence to care guidelines, lower rates of infections and length of hospital stay, and reduce per-patient costs. With ICU mortality rates averaging from 10-20 percent in U.S. hospitals, the widespread use of tele-ICUs would significantly improve the quality of care for the nation's most fragile and complex patients. NEHI is planning a major launch event for its tele-ICU report early in the new year.

Targeting Waste and Inefficiency

Our work on [health care waste and inefficiency](#) resonated with national policymakers this year, enhancing NEHI's reputation as a trusted source and thought leader. Underscoring NEHI's leadership in this area, the Institute of Medicine (IOM) recruited President Wendy Everett to work with the agency to identify ways to lower costs and improve health outcomes. Subsequently, the IOM asked Everett to help edit its report to Congress and to join a small initiative developing a strategy to reduce national health care expenditures by 10 percent within 10 years.

NEHI also met with key Members of Congress in Washington to brief them on cutting healthcare waste as a means for cutting healthcare costs. We also reached out to influential thought leaders and garnered visibility through the media, opinion pieces and blogs. NEHI's work on waste received national coverage in [Forbes Magazine](#), [The Washington Post](#), [Bloomberg](#) and in an op-ed by Rep. Ron Kind (D-WI) in the [Milwaukee-Wisconsin Journal Sentinel](#). NEHI's waste work was also cited in a white paper by Thomson Reuters, [Where Can \\$700 Billion in Waste Be Cut Annually from the U.S. Healthcare System?](#)

In 2010, NEHI will continue its waste initiative by producing a series of briefing papers on specific areas of clinical waste that will help public and private policymakers translate

evidence into actionable steps for reducing unnecessary spending in health care.

Reducing Emergency Department Overuse

This year, NEHI identified a series of promising strategies for reducing the costly problem of ED overuse and continued to work in partnership with the Institute for Healthcare Improvement (IHI) in the testing of those strategies. To develop a roadmap for reducing ED overuse nationally, NEHI served on a working group for the Aligning Forces for Quality Initiative of Greater Boston, which is focused on avoidable emergency department visits. NEHI's work on ED overuse received national coverage, including a substantive article in [The Washington Post Magazine](#).

Promoting Disease Prevention and Wellness

We continued our efforts to promote wellness and prevention with the June publication of [Healthy People in a Healthy Economy: A Blueprint for Action in Massachusetts](#). The report, produced in partnership with The Boston Foundation, is a roadmap for reversing the rising tide of chronic illness that is threatening not only our health but also our economic competitiveness. The blueprint will be used to galvanize a coalition representing policymakers, communities, schools and workplaces around a policy agenda for wellness across the Commonwealth.



NEHI in the News

[“Good Medicine: When to Say No to Your Doctor”](#)

Forbes, November 30, 2009

[“Health Care's Frequent Fliers: The Treatment of Kenny Farnsworth”](#)

The Washington Post Magazine, November 29, 2009

[“Payment Reform: A System-wide Solution to Medication Adherence”](#)

Disruptive Women in Health Care, November 16, 2009

[“Medical, Nursing Schools Need to Work Together”](#)

Healthcare Finance News, November 11, 2009

[“Better Care at a Better Cost”](#)

Milwaukee-Wisconsin Journal Sentinel, November 9, 2009

[“The Picture of Health”](#)

The Wall Street Journal, October 27, 2009

[“Calpers Bets \\$1 Billion Bush Aide Can Exploit Health Changes”](#)

Bloomberg, October 23, 2009

[“Celebrating Pioneers in Health”](#)

The Boston Globe, October 20, 2009

[“Next: the Pill Bottle Cap with a Cell Phone”](#)

Associated Press, October 8, 2009

New England Healthcare Institute

One Broadway | 12th Floor | Cambridge | MA | 02142

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