Best Practices in Managing Patients with Heart Failure Collaborative

Call for Participation
Best Practices in Managing Patients with Heart Failure Collaborative

The American Medical Group Foundation (AMGF) is pleased to announce a call for participation for American Medical Group Association (AMGA) members to join a learning collaborative on the management of patients with Heart Failure (HF).

WHAT WE ALREADY KNOW

• HF is a chronic disease that affects 5.1 million people in the United States.¹
• It’s the leading cause of hospitalizations among adults 65 and older and costs are estimated at $32 billion a year.²
• Total costs include healthcare services, medications to treat heart failure, and missed days of work.³
• Admission rates following heart failure hospitalization remain high, with ≥50% patients readmitted to hospital within six months of discharge, although there have been improvement in outcomes and medical therapy.⁴

APPLY TO PARTICIPATE

Through the collaborative, organizations that want to be on the leading edge have the opportunity to learn with other high-performing best practice organizations in a national forum. Together, they will improve care, deliver better value to patients, increase efficiency, and improve the health of their patients with HF. Particular attention will be paid to the reduction of heart failure-related readmissions. Apply to participate in the Best Practices in Managing Patients with Heart Failure Collaborative.

The collaborative will begin in November 2015 and end in November 2016.

² Ibid.
³ Ibid.
BENEFITS OF PARTICIPATION

The HF Collaborative is intended to leverage key learnings and facilitate a how-to approach. Participating in the HF Collaborative will give your organization:

• Mission-critical experience in engaging your specialty and primary care departments in performance measurement
• A population health management perspective
• Overall improvement in delivery of care
• A model that can be replicated in the approach to the management of other chronic diseases

Tracking appropriate treatment and readmission rates will help your organization meet key quality measures, with the goal of achieving the Triple Aim: better health, better health care, and lower per capita costs (quality and value).

Additional benefits include:

• $10,000 to support initiatives, travel and hotel expenses (for up to 12 organizations each)
• An additional eight organizations will receive travel stipends for up to two representatives to participate in the collaborative meetings
• Confidential benchmark data and useful reports that you can share within your institution on your progress and data-driven insights on national best practices
• Improve value by lowering readmission rates through better patient care and outcomes (quality and value)
• Learn best practices, operational tips and tools, and resources from other leading medical groups and health systems

• Opportunity to present data as posters or podium presentations at AMGA and other national conferences (for top-performing organizations) and poster presentation opportunities at Preventative Cardiovascular Nurses Association (PCNA) Annual Symposium
• Design of a potential prototype for care redesign to help your journey toward value-based care
• Public recognition of participation (announcements made at AMGA conferences, on AMGA website, press releases, etc.)
• Opportunity to receive support of services focused on the following: strategic issues, administrative needs, assessment of implementation issues, and project oversight (for select participating organizations)
• Access to professional and patient education materials from PCNA
CONSIDERATIONS BEFORE APPLYING

- Your organization must be a current member of AMGA and must sustain their membership throughout the collaborative
  - One Tax I.D. per group (per AMGA membership status)
- Potential members of AMGA are encouraged to contact Bill Baron at bbaron@amga.org for more information
- Medical groups, IPAs, academic practices, and integrated delivery systems that wish to optimize the management of HF in their chronic care models are encouraged to submit an application

HOW DOES THE COLLABORATIVE WORK?

Participating organizations will be able to regularly network with peers and have the opportunity to learn and share best practices through:

- Two in-person meetings
- Monthly webinars
- Online resources — a dedicated website for collaborative participant material sharing and a listserv for idea sharing and collaboration
- Consultation from AMGF in the field
- At the end of the 12-month collaborative, AMGF and a medical writer will work with each participating organization to develop individual Best Practices Case Studies of their program for publication.

CRITERIA FOR PARTICIPATION

Whether your organization is interested in implementation across your whole patient population or just want to launch a site-based pilot program, we welcome your participation.

Participating organizations must sign an agreement outlining the collaborative expectations below:

- Create an implementation team
  - Must include an employed or clinically integrated affiliated physician and or advanced practice clinician as an identified team lead/champion with dedication to this project and an interest and expertise in heart failure
    - Suggested team members: physicians, nurses, pharmacists, social worker, care manager, quality improvement specialists, data/IT analyst, etc.
    - Four team members are encouraged to participate in all collaborative activities; a minimum of two team members are required to attend the two in-person meetings
    - Patient participation as a team member is strongly encouraged
- Must have allocation of expected resources
  - Obtain high-level organizational leadership buy-in and sign-off on project and anticipated or budgeted resources
• Integrated electronic health record (EHR) for all physicians and sites participating within your project
• Develop process for measurement reporting
• Agree to adopt ACC/AHA guidelines
• Submit periodic updates
• Participate in webinars and meetings
• Submit a write-up for the Best Practices Case Studies for publication
• Report quarterly on selected measures and data. Required measures include:

  A. ACE Inhibitor or ARB Therapy for Left Ventricular Systolic Dysfunction (LVSD)  
PQRS #5, HEDIS, NQF 0081, AHA/ACC Level A
  Percentage of patients aged 18 years and older with a diagnosis of heart failure (HF) with a current or prior left ventricular ejection fraction (LVEF) < 40% who were prescribed ACE inhibitor or ARB therapy either within a 12 month period when seen in the outpatient setting OR at each hospital discharge

  B. Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD)  
PQRS#8, HEIDS, NQF 0083, AHA/ACC Level A, ACO HF-6
  Percentage of patients aged 18 years and older with a diagnosis of heart failure (HF) with a current or prior left ventricular ejection fraction (LVEF) < 40% who were prescribed beta-blocker therapy either within a 12 month period when seen in the outpatient setting OR at each hospital discharge

  C. 30-Day HF Readmissions
  30-day all-cause readmission, as measured from the date of discharge of the index HF admission (AMGF will design specifications so that all groups will be able to report, including independent medical groups)

**EVALUATION CRITERIA**

Applications will be evaluated with respect to:

1. **Committed Resources**
   - Ability to dedicate people and financial resources to the project
   - IT plan and use of population registries
   - Ability to build a multidisciplinary team
   - Level of integration, partnerships, and collaborations

2. **Potential Impact**
   - Number of patients impacted
   - Innovation
   - Feasibility, sustainability, scalability

**PROJECT TIMELINE**

- **June 3, 2015**
  Call for Participation in Managing HF Learning Collaborative

- **July 13, 2015**
  Applications Due to AMGF

- **August 28, 2015**
  Managing HF Applicants Notified

- **September 24, 2015**
  HF Collaborative Orientation Webinar

- **November 11-13, 2015**
  Managing HF Learning Collaborative Kick-Off Meeting (in-person) (Location TBD)
INSTRUCTIONS FOR PREPARING YOUR APPLICATION

Applications are due by close of business (5:30 pm, PDT), July 13, 2015

1. Complete the **HF Collaborative Application Template** provided on www.amga.org/HFcollaborative. Please provide no more than a total of five (5) pages.
   - Include an organizational profile that gives the reader an understanding of the size and scope of your organization without revealing your organization.
   - Provide answers for each of the six (6) sections.

2. Applications will be evaluated in a blinded review process. Remove all patient, provider, and clinic identifiers from the application except for the cover sheet with the contact information.
   - Refer to people by title (not name).
   - Refer to your organization using words like “medical group” or “organization” (recommend using the Word search and replace function to make sure your organization name and acronym do not appear in the document).
   - If you need to reference your city or state, use words like “city,” “area,” “region,” or “state” instead of the actual name.

3. Complete the provided cover sheet template and include:
   - Project title
   - Organization
   - Primary Contact Information (name, title, e-mail, phone, address)
   - Sponsor signature (CEO, medical director, department head) and contact information (name, title, e-mail, phone, address)

4. Provide supporting information:
   - You are welcome to cite and label the supporting documents in an appendix. It is highly preferred that supporting documents are clearly labeled as “Appendix 1,” “Appendix 2,” etc. (Note: Remove all patient, provider, clinic identifiers, and logos). **Maximum 5 pages.**

5. Submit one electronic copy of the application to heartfailure@amga.org **by close of business (5:30 pm, PDT), July 13, 2015.**

Questions or Comments?

If you have questions or need further information, contact Danielle Casanova at dcasanova@amga.org or by phone at (703) 838-0033, ext. 347 or visit our website at www.amgf.org.
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The American Medical Group Foundation (AMGF) is the 501(c)(3) affiliate of the American Medical Group Association (AMGA) and it supports and disseminates research on better ways to deliver health care that is scientifically sound and value-based. AMGF also develops and supports educational programs to enable all stakeholders — providers, payers, policymakers, and patients — to translate the evidence of what works best into everyday practice.

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