Find out what is new at The Joint Commission during the 2020 AHIP Conference.

Centers of Excellence (CoE) programs recognize The Joint Commission

Recently, several major health plans have recognized Joint Commission in their CoE programs. Stop by our booth to learn how your organization can equally benefit.

• Advanced Total Hip and Knee Replacement Certification: This program is for certification of both ambulatory as well as hospital settings.
• Behavioral Health Accreditation: The Joint Commission offers accreditation for a wide-range of behavioral, mental and human services such as substance use disorder, eating disorders, mental health in both out-patient and inpatient settings.

Value-Based Incentive programs use Joint Commission

Accreditation as part of a value-based incentive program is another option for health plans and has been used in several formats such as:

• Accreditation may be a voluntary option with an attached incentive
• Organizations who achieve accreditation receive a bonus incentive as a result of attaining accreditation, above and beyond state licensure

Reduce Health Plan Administrative Burden

Health plans that use accreditation may be able to offset the cost and resources associated with administration of quality programs. Connect with us during the conference to learn more about reducing administrative burdens through use of accreditation.

Did you know...The Joint Commission also can accredit telehealth organizations as well as health care providers who offer telehealth.

To learn more contact Kimberly Clawson or Nikkia Wallace at payor_relations@jointcommission.org
Information for Payors on The Joint Commission’s Accreditation & Certification Programs

Your partner in ensuring health care delivery of the highest quality and safety practices.
Imagine a day of zero. Zero missed opportunities, overuse, harm events of any kind. All gone. Replaced by improved efficiency and care. The kind of care that defines what helping others is all about. At The Joint Commission, we’re leading the way to zero.

It is vital that all stakeholders in our vast health care system work together to improve the care patients receive. The Joint Commission works to establish and cultivate collaborative relationships with third party payors including health plans, pharmacy benefit management companies, liability insurers and State Medicaid authorities. These collaborations:

–  Promote the development of consistent standards and leading practices across entities
–  Facilitate knowledge sharing about critical health care issues
–  Contribute expertise to increase awareness and inspire action to improve quality and safety
The Joint Commission works across the continuum of care to help health care providers achieve higher levels of quality and safety in patient care and sustain that performance over time. Working in more than 100 countries, we are the largest and most experienced health care improvement enterprise.

Global health care performance improvement company working with our customers in getting to zero harm.

Rigorous standards and performance measures can help organizations improve how they deliver health care every day.

Assisting health care organizations on their journey to high reliability.

Serve to accelerate progress on critical industry issues by driving collaboration of influential health care stakeholders.

Solutions to Support Your Health Plan Goals

As health plans look to expand or develop high-quality providers to participate in a value-based or CoE programs, The Joint Commission can offer solutions to support your health plan goals. The Joint Commission has a comprehensive continuum of accreditation and certifications programs for providers. As health plans seek to comply with their own accreditation requirements to validate the quality of patient care and services and perform onsite provider assessments, The Joint Commission can help reduce this administrative burden. The Joint Commission performs onsite performance assessments of health care organizations at select intervals. Onsite survey processes are data-driven, focused on patient safety and quality, and evaluate actual care processes and technology. Health plans that choose Joint Commission accreditation for a validation survey may benefit by freeing up resources. In addition, there is added value of knowing that organizations that have achieved Joint Commission accreditation have complied with the highest patient safety and quality requirements.
The Joint Commission Enterprise

Accreditation and certification
- Nationally recognized standards
- Performance measures
- National Patient Safety Goals®

Practical and effective solutions
- Education programs
- Publications
- Software tools

Evidence-based solutions and coaching
- Targeted Solutions Tool® (TST®)
  - Projects:
    • Preventing Falls
    • Hand Hygiene
    • Hand-off Communications
    • Safe Surgery
- Oro® 2.0 High Reliability
  Organizational Assessment & Resources

International accreditation and certification services
- Leadership and innovative solutions
- Education programs
- Publications
The Business Case for Quality & Safety

The Problem:

Healthcare-Associated Infections (HAIs)

- **1.7 million infections** occur annually from healthcare-associated infections (HAIs).
- Health care workers’ hands are the most common vehicle for the transmission of health care-associated pathogens.
- Studies have shown that a temporal association between improved hand hygiene practices and reduced infection and cross-transmission rates exist.

Our Solution:

Hand Hygiene Targeted Solutions Tool®

The Joint Commission Center for Transforming Healthcare has developed a tool that guides organizations through a step-by-step process to accurately measure performance, identify barriers to excellent performance and provide customized solutions to increase hand hygiene compliance.

- Organizations using the Hand Hygiene Target Solutions Tool® (TST®) have improved their compliance rates by **23%**.
- An 11 hospital health system was able to show a temporal association between increased hand hygiene compliance using the TST® resulting in a **49%** decrease in CLABSI and a **45%** decrease in VAP.

The Savings:

The average HAIs cost for inpatient hospital services is estimated at **$20,000 - $26,000**.

- Organizations using the TST® tool can save health plans significant cost by reducing the number of healthcare-associated infections.

The Problem:

Patient Falls

30-35% of patients who fall will sustain an injury which could result in **6.3** additional hospital days (average cost **$14,056**).

Our Solution:

Preventing Falls Targeted Solutions Tool®

A unique online application that guides an organization through a robust falls project by:

- Measuring the current state
- Analyzing and discovering causes
- Implementing targeted solutions
- Sustaining and spreading improvements

Organizations who have used the Preventing Falls Targeted Solutions Tool® (TST®) have reduced the rate of patient falls by **35%** and the rate of patients injured in a fall by **62%**.

The Savings:

If the approach is translated to a typical 200-bed hospital, the number of patients injured in a fall could be reduced from **117 to 45** and avoid approximately **$1 million** in costs.
Achieve, Maintain, and Demonstrate Consistent Excellence

An Overview of The Joint Commission’s Accreditation and Specialty Certification Process

Nationally Recognized Standards
- Enhanced requirements address critical patient safety and overall quality issues including staff competency, medication management, infection control, and patient education
- Process-focused; elements of performance and safety provide a comprehensive foundation for quality
- Certifications raise the bar for excellence and distinguishes advanced competencies

Onsite Evaluation
- Patient and system tracers to proactively identify risks and high-performing areas
- Experienced surveyors share best practices and insights to address challenging areas
- Collaborative learning environment for leadership and staff
- Certification provides enhanced learning opportunities related to patient transitions

Tools & Resources
- Joint Commission Center for Transforming Healthcare provides interactive tools that help accredited organizations pursue high reliability and address challenging areas
- Leading Practice Library
- Targeted Solutions Tool® (TST®) provides interactive online method to address infection control, falls and hand-off communication challenges
- Oro® 2.0 is an assessment which identifies an organization’s high reliability maturity level

Continuous Customer Engagement
- A data-informed connection between health care organizations and The Joint Commission
- Engagement strategies will inform and support accredited organizations’ performance measurement and quality improvement initiatives
Health Care Continuum

The Joint Commission Offers Accreditation and Certification Services to the Full Range of Health Care Services Covered by Your Provider Network.
Ambulatory Care

Since 1975
over 1,850

ambulatory care organizations are Joint Commission-accredited

Settings:
– Medical Group Practices
– Surgery Centers, Including Deemed Status
– Kidney Care Providers
– Urgent Care Centers
– Telehealth/Telemedicine

Certifications:
– Advanced Diagnostic Imaging
– Primary Care Medical Home (PCMH)
– Integrated Care

Behavioral Health Care

Since 1969
nearly 2,800

behavioral health care organizations are Joint Commission-accredited

Settings:
– Mental Health Services
– Community-based Settings
– Addiction/Substance Use Disorder
– Eating Disorders
– Community Services for Those with Intellectual or Developmental Disabilities
– Foster Care and Therapeutic Foster Care
– Telehealth/Telemedicine

Certifications:
– Behavioral Health Home
Home Care

**Since 1988**
**over 5,300**

*home care organizations are Joint Commission-accredited*

**Settings:**
- Home Health
- Hospice
- Personal Care & Support
- Durable Medical Equipment (DMEPOS)
- Pharmacy

**Certifications:**
- Community-Based Palliative Care

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Laboratory

**Since 1979**
**over 1,500**

*laboratories are Joint Commission-accredited*

**Settings:**
- Hospital Laboratories
- Reference and Stand-alone Laboratories
- Physician Office/Clinic Labs
Hospital & Critical Access Hospital

Since 1953
over 4,000
hospitals are Joint Commission-accredited

Since 2001
over 350
critical access hospitals are Joint Commission-accredited

Settings:
– General
– Childrens
– Long Term Acute Care (LTACH)
– Oncology
– Psychiatric
– Rehabilitation
– Specialty (Cardiac, Orthopedic, Surgical)

Certifications:
– Integrated Care
– Primary Care Medical Home
– Patient Blood Management
Nursing Care Center

Since 1966
nearly 800
nursing care centers are
Joint Commission-accredited

Settings:
– Skilled Nursing Facilities
– Nursing Homes
– Group Homes
– Transitional Living Facilities

Certifications:
– Memory Care
– Post-Acute Care

Office-Based Surgery

Since 2001
over 300
office-based surgery practices are Joint Commission-accredited

Settings:
– Physician-owned or physician-operated surgical practices that conduct invasive procedures
Disease-Specific Care

Since 2002

nearly 3,500
disease-specific care programs are
Joint Commission-certified

Advanced Levels of Certification:
- Stroke
  - Acute Stroke Ready Hospital
  - Primary Stroke Center
  - Comprehensive Stroke Center
  - Thrombectomy Capable Stroke Center
- Perinatal Care
- Chronic Kidney Failure
- Chronic Obstructive Pulmonary Disease
- Heart Failure
- Inpatient Diabetes
- Total Hip and Knee Replacement

Certification is offered in additional areas including Health Care Staffing Services (HCSS) and Palliative Care.
Benefits of Payor Reliance on The Joint Commission

Accreditation/Certification = Better Organizational Performance

Home Health Agency Performance
Joint Commission-accredited home health agencies perform better than non-accredited agencies in 14 quality measures reported in the CMS Home Health Compare dataset.

Fewer ER Visits & Readmissions
Joint Commission-accredited providers have fewer patients that need unplanned emergency care* or had to be admitted to the hospital**

* Accredited 10.54 vs. non-accredited 12.31 p<.00001
** Accredited 14.33 vs. non-accredited 15.34 p<.00001

Improvement in Patient Mobility
Patients from accredited agencies reported less pain when moving around* and improved capabilities when walking and moving around**

* Accredited 72.69 vs. non-accredited 64.01 p<.00001
** Accredited 62.25 vs. non-accredited 59.73 p<.00001

Primary Stroke Centers (PSC) Performance
A study conducted from 2004-2009 identified patients treated at a Joint Commission-certified PSC are more likely to receive rt-PA than those treated at noncertified hospitals.*

* In 2004, the proportion of patients receiving rt-PA was 3.1% overall: 2.2% at non-PSCs and 6.7% at Joint Commission PSCs. Between 2004 and 2009 the annual percentage of rt-PA administration increased from 1.4% to 3.3% at non-PSCs and 6.0% to 7.6% at PSCs.

Skilled Nursing Facility Performance
Joint Commission-accredited skilled nursing facilities perform better than non-accredited facilities in 9 CMS Nursing Home Compare quality measures.

Reduced Falls
Long stay residents in Joint Commission-accredited facilities experienced less falls with major injury*

* Accredited 2.7961 vs. non-accredited 3.2299 p<.00001

Reported Pain Levels
Both long stay* and short stay** residents from accredited facilities self-reported experiencing less moderate to severe pain**

* Accredited 5.899 vs. non-accredited 7.6653 p<.00001
** Accredited 17.1439 vs. non-accredited 18.609 p<.00005

Pressure Ulcers
Short stay residents from accredited facilities have fewer instances of new or worsened pressure ulcers*

* Accredited 0.8439 vs. non-accredited 0.9793 p<.00005

Hospital Performance
In a 2008 study, Joint Commission-accredited hospitals outperformed non-accredited hospitals on nationally standardized quality measures of AMI, heart failure, and pneumonia. Accredited hospitals were significantly more likely to have high performance (over 90%) in 13 of 16 standardized clinical performance measures and all summary scores.*

* Composite AMI score: Non-accredited 80.5 vs. Accredited 88.2 p<.0001
Composite heart failure score: Non-accredited 38.2 vs. Accredited 61.5 p<.0001
Composite pneumonia score: Non-accredited 69.3 vs. Accredited 85.3 p<.0001
Overall Composite: Non-accredited 69.0 vs. Accredited 83.8 p<.0001
Joint Commission allows consumers the opportunity to search for accredited and certified organizations on its Quality Check® website, www.qualitycheck.org. It includes the information outlined below about each organization’s performance:

- The date of the most recent, full onsite survey
- The organization’s current accreditation decision
- The date of the most recent onsite evaluation of the organization, if not a full survey
- Accreditation history
- Sites and services included in the accreditation survey
- Disease-specific care certification(s) and the effective date of each certification
- Standards areas with requirements for improvement (RFIs) related to an organization that has an adverse accreditation decision
- The receipt of special quality recognition awards, as recognized by the Board of Commissioners
- Compliance with National Patient Safety Goal® requirements

Note: The Joint Commission will provide verification of accreditation and certification to payors as requested.
For more information about Joint Commission accreditation and certification and how our organizations might collaborate, please contact:

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