



# Affordable Care Act: Measures of Quality Care

Quality care involves more than effectively treating or curing disease. It also requires integrated delivery of pain and symptom management, relief from worry, care planning, and other aspects of palliative and psychosocial care that strive to match care to patient goals and improve quality of life for patients.

Integrated care is particularly important to help cancer patients and their caregivers handle the multiple transitions they face from treatment, to long-term survivorship, to the end of life.

## Fast Facts: What is palliative care?

- Palliative care is a form of treatment that strives to match care to patient goals, relieve pain and other symptoms, and improve quality of life for people with chronic or life-threatening illnesses.
- Palliative care is appropriate at any point in an illness. It can be provided at the same time as treatment that is meant to cure patients or halt progression of their disease.
- Palliative care improves clinical care and patient and family satisfaction, while also delivering significant cost savings.

## **Improving quality of life for patients and survivors is a high priority for the American Cancer Society Cancer Action Network (ACS CAN).**

### **Highlights of Quality Care Improvement Initiatives in the Affordable Care Act**

- Directs the Department of Health and Human Services (HHS) to develop a national strategy and action plan by January 2011, to improve delivery of health care services, patient health outcomes, and population health. The plan will be updated annually
- Establishes an Interagency Working Group on Health Care Quality to guide implementation of the action plan and produce annual progress reports and recommendations beginning December 31, 2010
- Directs HHS to lead collaborative efforts to identify quality measures and provide grants for developing, improving, updating or expanding quality measures that will advance the national quality action plan, with emphasis on measures assessing:
  - Health outcomes, functional status of patients, patient experience and satisfaction
  - Management and coordination of care across care settings
  - Experience, quality and use of information provided to and used by patients and caregivers to inform decision-making about treatment
  - Safety, effectiveness, appropriateness, timeliness and patient-centered extent of care
  - Equity of health services and health disparities across populations
- Directs HHS to develop and update at least every three years outcomes measures for hospitals, physicians, and other health care providers and establish a strategic framework for public reporting about performance

### **Implications for the American Cancer Society and ACS CAN**

- The Society and ACS CAN will have opportunities for input in the selection of quality measures and evaluation of their use through participation in a multi-stakeholder group process and by providing public comments.
- HHS will collect and aggregate consistent data on quality and resource-use measures from information systems used to support health care delivery that may present new research opportunities.