

## **IMPROVING PATIENT MANAGEMENT SYSTEMS FOR HEART DISEASE AND STROKE**

*Insurance incentives and added value of continuing education hours promotes participation*

### **Public Health Problem**

- Heart disease and stroke are largely preventable through control of risk factors such as high blood pressure, high blood cholesterol, obesity and diabetes.
- These heart and blood vessel diseases cost Pennsylvania an estimated \$27 billion a year
- Improving the system of care for people with these diseases and adopting recommended care guidelines can improve health and quality of life and reduce health care costs.

### **Program**

- The Pennsylvania Department of Health, Division of Health Risk Reduction implemented @HEART, a web-based quality health improvement program for physicians, developed by the Pennsylvania Academy of Family Physicians Foundation, that combines similar elements of two national programs - the National Committee for Quality Assurance Heart/Stroke Recognition Program and the American Academy of Family Physicians METRIC Program in Coronary Artery Disease. Both programs promote the most current guidelines for cardiovascular treatment based on sound evidence.
- Physician competencies were assessed and enhanced through chart reviews and a system of physician recognition for the provision of high quality care.
- An aggressive promotional campaign combined mailed brochures, email, newsletters, magazine advertorials and articles with live educational offerings and displays at meetings directing physicians to the @HEART home page – [www.pafp.com/heart](http://www.pafp.com/heart) - to enroll.
- Educational webinars, presented live, were available to family physicians along with an archived presentation available on demand.

### **Impact**

- According to guidelines governing the two components of the @HEART Program, physician care for patients is now better-aligned with up-to-date clinical guidelines to optimize medical care, improve outcomes, reduce recurring events, and save lives.
- Physicians received needed continuing medical education credits for participating in the quality improvement program, helping them fulfill recertification requirements.
- An insurance incentive helped ensure physician participation in quality improvement education by reducing annual insurance premiums for physicians insured through PMSLIC, a major Pennsylvania insurance carrier.
- The program reached over one hundred family physicians who conduct an estimated 57,000 cardiovascular patient-visits annually.

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